



Palliative Care Australia
Matters of life and death

11 point plan to resolve shortages of palliative care medicines

November 2024

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The following organisations have developed and are fully supportive of this 11 point plan which is designed to significantly improve and help resolve the negative impact that shortages and discontinuations of palliative care medicines are currently having on Australian patients.

- Palliative Care Australia
- Australia New Zealand Society of Palliative Medicine
- Advanced Pharmacy Australia
- Pharmaceutical Society of Australia
- Palliative Care Nurses Australia
- Pain Australia
- Aged and Community Care Providers Association

PBS Palliative Care Schedule

1. Add medicines on the PBS Palliative Care Schedule to the Medicines Watch List as critical medicines.
2. Review and update the PBS Palliative Care Schedule, based on clinical advice, to include all medicines commonly used in palliative care.
3. Waive application fees for sponsors seeking to list medicines on the PBS Palliative Care Schedule and/or opioid analgesics (for pain management in people with palliative care needs or cancer) on the PBS.
4. Ensure that any medicines prescribed under the PBS Palliative Care Schedule that require an authority are available via a streamlined authority.
5. Abolish co-payments for medicines prescribed through the PBS Palliative Care Schedule.

Managing temporary supply disruptions

6. Expand the powers of the TGA to more proactively anticipate shortages and discontinuations of critical medicines and intervene more proactively, including by initiating the creation of stockpiles of identified medicines in need.
7. Establish a fund (with an initial commitment of \$10 million) to enable the Australian Government to create and manage a stockpile of palliative care medicines through the established network of [Community Service Obligation \(CSO\) distributors](#).
8. Extend the timeframe for notifying the TGA of any anticipated shortage, discontinuation or disruption to supplies of medicines on the Palliative Care Schedule from 6 months to at least 12 months and enforce civil penalties against sponsors who do not meet their obligations under the Medicine Shortage Reporting Compliance Framework.

9. Commission an independent evaluation of whether arrangements through Section 19A of the Therapeutic Goods Act 1989 are achieving the intended purpose and how they could be strengthened to mitigate temporary medicines shortages.

Managing long-term supply risks

10. Expand incentives for domestic pharmaceutical manufacturing to essential medicines in common clinical use, including opioid analgesics.
11. Commission an objective assessment of the factors contributing to the longer-term decline in the availability of opioid analgesics in Australia. This should include consideration of the comparative conditions of the Australian versus other markets with respect to factors such as price, costs of registration, compliance with regulations for Schedule 8 medicines (e.g. security, medicines handling, administration, distribution).

What is the PBS Palliative Care Schedule?

The PBS Palliative Care Schedule was established in 2004 as separate but complementary to the General PBS Schedule to improve access to essential and affordable medications for patients receiving palliative care.

Palliative care patients who are accessing medications listed on the PBS Palliative Care Schedule, can also access medications listed on the General PBS and RPBS Schedules, such as morphine.

The same medications may be listed on the PBS Palliative Care Schedule and the General Schedule, however medications on the PBS Palliative Care Schedule may be listed with larger quantities and/or more script repeats, making them more suitable for use in palliative care. This may reduce patient copayment costs and decrease the frequency of doctor consultations for ongoing symptom management.

Given the overlap in medication items listed on the different schedules, and because the PBS Palliative Care Schedule is intended to complement the General Schedule, it is likely that some medicines prescribed for palliative care are prescribed from the General Schedule. Palliative medicine specialists may prescribe medicines for a range of reasons, some of which may be for palliative care, and may prescribe from different schedules.

Source: AIHW 2024. 'Palliative care-related medications' in [Palliative Care Services in Australia](#).

Supporting organisations





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