

Integrating pharmacists in residential aged care facilities to improve quality use of medicine

ACTRN12620000430932

Status	RECRUITING
Sponsor	University of Canberra
Enrollment	1,188 participants

Plain Language Summary

Residents in aged care facilities typically take many medications, which increases the risk of adverse drug reactions, harmful interactions, and unnecessary prescribing. Having a pharmacist embedded within the care team — rather than visiting occasionally — may allow medication-related problems to be identified and resolved much more quickly. This cluster randomised trial tests whether having an on-site pharmacist working 2–2.5 days per week in a residential aged care facility reduces hospitalisations and improves medication safety.

Facilities in the ACT are randomly assigned to either have an on-site pharmacist or continue with usual care (no on-site pharmacist). Researchers track hospitalisation rates, medication-related incidents, and cost-effectiveness over one year. The findings will directly inform policy about pharmacist roles in aged care.

You may be eligible as a resident if you are a permanent resident in a participating ACT aged care facility with more than 20 beds. Respite residents are not eligible for the study.

Key Eligibility Criteria

Inclusion (3)

- An accredited facility
- Located in the ACT
- More than 20 beds

Exclusion (2)

- Respite residential aged care facility residents will be excluded.
- Existing government funded Residential Medication Management Review (RMMR) and Quality Use of Medicines (QUM) services conducted by pharmacists visiting residents in aged care facilities are excluded from intervention (on site pharmacist) activities.

Locations (1 total)

ACT, Australia