

PARLIAMENTARY INQUIRY QUESTION ON NOTICE

Department of Health and Aged Care

Senate Community Affairs References Committee

Inquiry into the Assessment and support services for people with ADHD

29 June 2023

PDR Number: IQ23-000053

Real-time monitoring system for regulating prescribing and dispensing of schedule 8 medicines in Australia

Spoken

Hansard page number: 47

Senator: Marielle Smith

Question:

ACTING CHAIR: Excellent. I understand that stimulant medication for management of ADHD is classified as a schedule 8 controlled medicine that generally needs to be prescribed by a paediatrician or a psychiatrist. Can you tell the committee who regulates and who can supply schedule 8 medicines?

Ms Rishniw: Schedule 8 medicines are generally regulated through the Therapeutic Goods Administration. They're usually drugs that are listed as having a high addiction possibility. That's the broad, lay description. Basically, they're regulated as a schedule 8 drug because they have evidence to suggest a high rate of addiction and so need to be prescribed carefully. The actual prescription arrangements of schedule 8 listed drugs are regulated at the state and territory level.

ACTING CHAIR: So it's the addictive nature of them which is the reason behind the regulatory framework underpinning them.

Ms Rishniw: That's right.

ACTING CHAIR: Are any of the concerns around those issues reduced by the use of prescription monitoring programs?

Ms Rishniw: I think we might have to take the prescription monitoring on notice. It's generally done at the state and territory level.

Ms Field: I do know there is work with states and territories occurring through the TGA around introducing a real-time monitoring system for prescription use and prescribing in Australia. That's under implementation. I don't have the details of exactly where that's up to but am certainly happy to take that on notice and come back to the committee. Dr Vine might have some additional information.

Dr Vine: In a number of states and territories there are now things like SafeScript, which practitioners really should consult when they're starting medications and certainly if they've got any concerns that prescriptions are being sought too frequently and that sort of thing. I don't believe it's in every state and territory yet, but it's increasingly being introduced. That is of use with schedule 8 drugs, and it's very commonly used, of course, with benzodiazepines and other drugs where there's potential for overuse—analgesics and so forth. That helps regulate whether there is overprescribing and whether the person is getting scripts from more than one practitioner. It doesn't take away the regulation that varies from state to state and territory to territory in terms of the permits required, how many prescribers can prescribe for the person, the duration of prescribing and the amount prescribed.

ACTING CHAIR: I would appreciate if you could take that on notice along with, as you just touched on, how these programs are currently working in practice across the jurisdictions. Any information you can get to us on that would be of assistance...]

Answer:

Does the use of prescription monitoring programs, such as Real Time Prescription Monitoring (RTPM), reduce concerns around prescribing and dispensing schedule 8 medicines?

- RTPM provides information to prescribers and dispensers about a patient's access to monitored medicines. It is designed to identify potential prescription 'shopping' behaviours, to minimise harm caused by patients accessing monitored medicines from multiple providers.
- The monitoring of medicines and direct management of the real time prescription monitoring (RTPM) systems is the responsibility of states and territories. The Australian Government has been assisting with coordination of the development of RTPM systems and is developing an integrated national data sharing capability.
- The RTPM systems include:
 - Australian Capital Territory – Canberra Script
 - New South Wales – SafeScript
 - Northern Territory – NTScript
 - Queensland – Qscript
 - South Australia – Script Check SA
 - Victoria – SafeScript
 - Western Australia – Script Check WA

- While Tasmania is not currently integrated into the national RTPM system, the state has its own medicine monitoring system known as the Drugs and Poisons Information System Online Remote Access (DORA). Once integrated into the national RTPM system, DORA will be replaced with TasScript.
- The national RTPM system helps facilitate timely health interventions, reducing the unsafe use of monitored medicines. This is done by providing alerts to prescribers and dispensers to identify patients who are at risk of harm due to dependency or unsafe use, which assists in their decision-making processes.
- Alerts are created when a patient is receiving multiple supplies of monitored medicines. Upon receiving alerts, prescribers and dispensers can access the National Data Exchange (NDE) where they can view the patient's medicine history for the past 12 months.
- The NDE component of the RTPM captures information from state and territory regulatory systems, prescribing and dispensing software and a range of external data sources to produce real time detection and alerting for health professionals.
- Currently, states and territories can use the national RTPM system to check a patient's medicine history in their own jurisdiction. Once the RTPM project is complete, prescribers and pharmacists will be able to check a patient's medicine history made in a different state or territory as well.
- The medicines that are monitored by the RTPM systems are determined by each state or territory and include pain medicines such as oxycodone, morphine and fentanyl and other high-risk medicines, including all benzodiazepines such as diazepam.