



Department of Health

Secretary

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Ms Leah Johnson
Coroner's Registrar
Coroners Court of Victoria
Level 11, 222 Exhibition Street
MELBOURNE VIC 3000

Dear Ms Johnson

Court Reference: 5181/09 James

I am writing in response to your letter dated 15 February 2012 in relation to the recommendations made by Coroner John Olle in the above case.

I wish to acknowledge the very serious issues raised by the untimely death of James. While arming clinicians with full and accurate information on patients' medication histories is an essential tool in addressing many of the problems that James' case brought to light, it is only one part of a more complete policy response.

The department is leading on a national response to pharmaceutical drug misuse through the development of the National Pharmaceutical Drug Misuse Strategy. The Strategy, which has recently been endorsed by the Intergovernmental Committee on Drugs, adopts a holistic approach to addressing the complex range of factors that contribute to prescription drug misuse. It focuses on nine priority areas that include, among other things, the development of a national system that provides real time medication histories to prescribers and dispensers, along with strategies to enhance good prescribing practices and to support the roles of pharmacists. The Strategy is relevant to all Australians, particularly health and welfare professionals, education providers, and relevant professional organisations and registration bodies. The department will continue to advocate for the holistic approach that the Strategy puts forward.

In regards to the Coroner's specific recommendations, the department's responses are as follows:

Recommendation:

1. *The Victorian Department of Health implement a real-time prescription monitoring program within 12 months, in order to reduce deaths and harm associated with prescription shopping. The program should include the following functionality:*
 - (a) *a primary focus on public health rather than law enforcement;*
 - (b) *recording of all prescription medications that are prescribed and dispensed throughout Victoria without exception;*

- (c) provision of real-time prescribing information via the Internet to all prescribers and dispensers throughout Victoria without exception;*
- (d) a focus on supporting rather than usurping prescribers' and dispensers' clinical decisions; and*
- (e) facilitating the ability of the Victorian Department of Health to monitor prescribing and dispensing to identify behaviours of concern.*

The department's response:

The department maintains that, for a real-time prescription monitoring system to reach its full potential in reducing deaths and harms from prescription shopping, it must be nationally implemented. To that end, the department continues to engage in good faith with the Commonwealth on its proposal to roll-out an enhanced version of the Tasmanian real time prescription monitoring system nationally.

It is important to note that the Commonwealth has committed to making this system available to states and territories from July 2012. More work will need to be done further to this date, including the fundamentally important step of rolling the system to all prescribers and dispensers throughout Australia. Thus, it is not anticipated that the Commonwealth initiative will be fully operational until some time after it is introduced in July.

While the Coroner has proposed that the system should record all prescription medicines that are prescribed and dispensed throughout Victoria without exception, I do not support this aspect of his recommendation. PBS data reveal that Schedule 8 poisons and benzodiazepines, the drugs which are the primary target for prescription shoppers, accounted for less than six percent of the nearly fifty million PBS medicines that were dispensed in Victoria in 2011. There are no figures available on how many more prescriptions were written but were not dispensed. The recording of all prescription medications without exception would carry significantly higher operational capacity requirements without equivalent public health benefits in terms of reducing the harms associated with prescription shopping in the department's view.

The nature of prescription shopping is such that different drugs may be sought after at different times. The current Tasmanian system tracks all instances of supply of Schedule 8 poisons and alprazolam. More importantly, it can be readily adjusted to capture any other medication that may require monitoring. The department supports the implementation of a national system such as this, which is adaptable to changing trends in what drugs might be targeted by prescription shoppers, rather than one that tracks all prescription medications which may risk overwhelming those accessing the system with information.

Recommendation:

- 2. The Victorian Department of Health convene a steering committee to oversee the implementation of the real-time prescription monitoring program in Victoria. Membership should include representatives from prescribing and dispensing peak bodies, and the pain management and drug and alcohol sectors.*

The department's response:

I am cognisant of the fact that the implementation of a national real-time prescription monitoring system will result in significant changes to clinical practice in Australia. I therefore support the Coroner's recommendation that expert opinion be sought from representatives of key national health professional bodies through the establishment of an expert reference group or steering committee.

However, given that the system will be a national one, membership of this steering committee should be at a national level. To that end, I have written to the Secretary of the Commonwealth Department of Health and Ageing requesting that a steering committee be convened to advise on the Commonwealth's implementation of the enhanced version of the Tasmanian real time prescription monitoring system nationally.

Recommendation:

3. *The Victorian Department of Health develop a contingency plan to implement a Victorian-based real-time prescription monitoring program in the event that the anticipated Australian Government Department of Health and Ageing information technology infrastructure for electronic recording and reporting of controlled drugs is delayed more than six months beyond the declared July 2012 deadline.*

The department's response:

The Commonwealth initiative must be given sufficient time to be fully implemented. As mentioned earlier, the Commonwealth anticipates being able to deliver its enhanced Tasmanian software to states and territories in July. Without going into the detail of what will be necessary to make this system compatible with the current departmental ICT environment, there will be further work required. Beyond this, the logistics of making the system available to all prescribers and dispensers in Victoria and nationally must also be taken into account.

In summary, the Commonwealth Initiative will not be fully operational within six months of being introduced nationally and it is not practicable to implement an entirely separate system that will only operate for a short period until the national system is operational.

Recommendation:

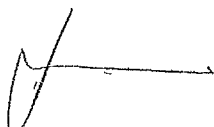
4. *The Victorian Department of Health develop a contingency plan to implement a Victorian-based real-time prescription monitoring program in the event that the anticipated Australian Government Department of Health and Ageing information technology infrastructure does not support the following functionality:*
- (a) a primary focus on public health rather than law enforcement;*
 - (b) recording of all prescription medications that are prescribed and dispensed throughout Victoria without exception;*
 - (c) provision of real-time prescribing information via the internet to all prescribers and dispensers throughout Victoria without exception;*
 - (d) a focus on supporting rather than usurping prescribers' and dispensers' clinical decisions; and*
 - (e) facilitating the ability of the Victorian Department of Health to monitor prescribing and dispensing to identify behaviours of concern.*

The department's response:

All jurisdictions are working cooperatively with the Commonwealth to ensure that the enhancements to the current Tasmanian real time prescription monitoring system are fit for purpose before the modified system is rolled out nationally. Evaluation of the Commonwealth initiative will only be useful once the modified system has been fully rolled out and is operational across all jurisdictions. A contingency plan for a Victorian-only system before ascertaining the success or otherwise of the Commonwealth initiative is not feasible.

If you require further information please contact Mr Matthew McCrone, Chief Officer, Drugs and Poisons Regulation on 9096 5066 or email matthew.mccrone@health.vic.gov.au.

Yours sincerely



Lance Wallace
Acting Secretary