Inquest into the death of William House, Jodie Anne Smith, Vanessa Joan White and Daniel Keith Milne

The coroner convened a joint inquest into the deaths of William House, Jodie Anne Smith, Vanessa Joan White and Daniel Keith Milne in order to consider the universal issues associated with the growing misuse of opioid prescription medication in Queensland, and more broadly, Australia.

The coroner considered the issues associated with opioid medication misuse, as well as the sufficiency of the monitoring presently in place in relation to the prescribing and dispensing of Schedule 8 medication and the implementation of the Commonwealth Government’s initiative, the Electronic Recording and Reporting of Controlled Drugs (ERRCD).

Coroner James McDougall delivered his findings of inquest on 21 May 2018.

The Queensland Government responds to recommendations directed to government agencies at inquests by informing the community if a recommendation will be implemented or the reason why a recommendation is not supported.

The departments named in this response will provide implementation updates until the recommendation is delivered. Further information relating the implementation of recommendations can be obtained from the responsible minister named in the response.

**Recommendation 1a**

In order to reduce the deaths and harm associated with opioid misuse, the Queensland Department of Health should urgently consider and determine how a real-time prescription monitoring system can be implemented in Queensland at the earliest opportunity, but certainly within the next two years.

Response and action: implementation of the recommendation is in progress.

Responsible agency: Queensland Health.

On 1 November 2018 the Minister for Health and Minister for Ambulance Services responded:

The Department of Health provided $15 million funding to progress the implementation over the next three years of a comprehensive program of work on monitored substances that will include the implementation of a real-time prescription monitoring (RTPM) system. Queensland Health continues to work with both Victoria and the Commonwealth on progressing a system that will provide Queensland with the best outcome and allow sharing of information with other states and territories.

Queensland Health is monitoring the implementation of the Victorian Government’s RTPM scheduled for implementation late 2018. This RTPM accesses information from the national prescription exchanges services, allowing visibility of all controlled drug prescriptions dispensed in all jurisdictions. The department is currently recruiting a project team and will undertake the appropriate steps to procure a RTPM that meets the requirements for real-time reporting and access to prescription history information for prescribing doctors and dispensing pharmacists.

On 2 June 2019 the Minister for Health and Minister for Ambulance Services responded:

Queensland Health is progressing development work to achieve real-time prescription monitoring by 2020. Work continues to ensure the requirement to support implementation of the RTPM system
are in place such as information communication technology procurement plan, legislative and policy reform, and engagement and education with stakeholders.

The department is progressing work to implement a new Medicines and Poisons Act and Regulation to replace the Health (Drugs and Poisons) Regulation 1996 to enable implementation of RTPM.

The department is also progressing other work in policy development, stakeholder engagement and internal business change to support this implementation. The department is also investigating how real-time reporting could be enabled under current legislative arrangements, should there be delays to the implementation of the new Medicines and Poisons Act.

**Recommendation 1b**

A determination as to whether the Electronic Recording and Reporting of Controlled Drugs (ERRCD) is a suitable system to be utilised should be made without delay. If so, the plan to implement such a system, and the necessary changes to legislation and other regulatory requirements, needs to be actioned urgently.

Response and action: implementation of the recommendation is in progress.

Responsible agency: Queensland Health.

On 1 November 2018 the Minister for Health and Minister for Ambulance Services responded:

The Victorian Government’s real-time prescription monitoring (RTPM) system allows it to access information from the national prescription exchanges services. This allows visibility of all controlled drug prescriptions dispensed in all jurisdictions. The Victorian RTPM also allows prescribers and dispensers to have access to patients’ prescription information.

Unlike the Victorian RTPM, the Commonwealth initiative (electronic recording and reporting of controlled drugs, ERRCD) does not currently allow for access by prescribers and dispensers and only reports information to the state based regulator. There is no time frame yet established for further development of the ERRCD, nor for any development to allow for prescriber or dispenser access. As such the ERRCD is not considered suitable to meet all needs of a responsive RTPM in Queensland.

Queensland Health is engaged in ongoing liaison to monitor the implementation of the Victorian Government’s RTPM system. The department is also engaged in the National Real Time Prescription Monitoring Implementation Working Group. The Commonwealth has committed to developing a national data exchange by end 2018. The national data exchange will allow connection between different jurisdictions’ RPTMs as particular jurisdictions develop their individual systems.

Queensland Health is also proposing to replace the Health Act 1937 and the Health (Drugs and Poisons) Regulation 1996 with a new Medicines and Poisons Act and Regulation. If progressed by the government, the new Act is to include the legislative provisions to establish real-time reporting and mandate its use by relevant health practitioners.

**On 2 June 2019 the Minister for Health and Minister for Ambulance Services responded:**

The director-general approved the commencement of a program of work on monitored substances to implement a real-time reporting information and communication technology solution and supporting policy development, education and engagement work by 2020.

The Medicines, Regulation and Quality Unit recruited a team to progress this work.

The Commonwealth Department of Health developed a National Data Exchange (NDE) as the preferred solution to the previous ERRCD. The NDE can allow for each state and territory to access
real-time dispensed prescription information. Queensland Health is currently engaging with the Commonwealth Department of Health and their developers to ascertain if the NDE will meet business requirements for a real-time reporting solution.

The department is progressing work to implement a new Medicines and Poisons Act and Regulation to replace the Health (Drugs and Poisons) Regulation 1996 and enable implementation of real-time prescription monitoring.

The department is also progressing other work in policy development, stakeholder engagement and internal business change to support the implementation of real-time prescription monitoring by 2020.

**Recommendation 1c**
A business plan to progress the implementation of a real-time prescription monitoring system in Queensland, either the ERRCD or a separate hybrid or new system, needs to be developed, and appropriately funded as a priority.

Response and action: the recommendation is implemented.

Responsible agency: Queensland Health.

On 1 November 2018 the Minister for Health and Minister for Ambulance Services responded:

The Department of Health provided $15 million to implement a program of work on monitored substances which will include an underpinning real-time prescription monitoring (RTPM) system over the next three years. Preliminary analysis supports that a model of a RTPM that accesses information from the national prescription exchange services is the most effective model to progress.

Queensland Health is currently recruiting a project team to undertake this comprehensive program of work, to deliver training and education to health professions, develop and implement policy and regulatory changes, and support the implementation of a RTPM system. Queensland Health will seek to commence an appropriate procurement process for the RTPM by early 2019.

**Recommendation 2**
The Queensland Department of Health should urgently consider what additional steps can be taken to educate general practitioners and pharmacists as to the scope and functions of Medicines Regulation and Quality (MRQ), particularly the availability of advice as to appropriate prescribing practices. Incidences of over-prescribing of opioids, once this education campaign has been completed should be dealt with by professional disciplinary bodies, by regulation.

Response and action: implementation of the recommendation is in progress.

Responsible agency: Queensland Health.

On 1 November 2018 the Minister for Health and Minister for Ambulance Services responded:

The Department of Health provided $15 million to implement a program of work on monitored substances that will include an underpinning real-time prescription monitoring (RTPM) system over the next three years. The department is resourcing a statewide 13S8INFO telephone enquiry service for doctors to allow ready access to prescription history information and regulatory advice and support.
The department is currently recruiting a project team to implement this program of work. The program will also develop training and education to health professions, undertake the relevant policy and regulatory changes, and manage the implementation of a RTPM system. The department will undertake to further promote the 13S8INFO enquiry service across the state to support the implementation of its program of work and the RTPM system.

The government is also proposing to replace the Health Act 1937 and the Health (Drugs and Poisons) Regulation 1996 with a new Medicines and Poisons Act and Regulation. If progressed by the government, the consultation and implementation phase of the new Act will also be the opportunity to promote aspects of compliance requirements for health practitioners with controlled drugs.

It may be possible in the new Act to impose obligations on prescribers to comply with a standard for safe prescribing of opioids as part of the regulatory scheme. It is proposed that this new regulatory scheme will also articulate the parameters to be considered in prescribing Schedule 8 drugs safely or to mitigate harm when dispensing a medicine to a person at risk (already drug dependent or oversupplied).

**On 2 June 2019 the Minister for Health and Minister for Ambulance Services responded:**

Medicines Regulation and Quality (MRQ) provides a statewide 13S8INFO telephone enquiry service for doctors to allow ready access to prescription history information and regulatory advice and support. The service now receives over 2,500 enquiries each month, and over 600 of these are transferred to clinical advisers for more complex clinical and regulatory advice.

MRQ and the Medicines Compliance and Human Tissue Unit (MCHTU) improved surveillance of patients’ and doctors’ prescribing patterns to monitor compliance with the Health (Drugs and Poisons) Regulation, 1996. Internal escalation procedures facilitate action in response to continued non-compliance and appropriate referral to other regulators such as; the Office of the Health Ombudsman and Australian Health Practitioner Regulation Agency for matters of potential professional conduct of a lesser standard than reasonably expected, and to the Queensland Police Service for matters of potential or possible unlawful activity in the obtaining of drugs of dependence.

As part of the program of work on monitored substances to implement real-time reporting and the proposed legislative changes, Queensland Health will develop an education and engagement program for prescribers, dispensers and consumers around issues of monitored substances.

**Recommendation 3**

The Queensland Department of Health to consider the suitability of resourcing currently provided to Medicines Regulation and Quality (MRQ) in order to appropriately perform their regulatory functions in a proactive manner, particularly given the timeframe changes as stipulated in the new S8 Monitoring Strategy.

Response and action: implementation of the recommendation is in progress.

Responsible agency: Queensland Health.

**On 1 November 2018 the Minister for Health and Minister for Ambulance Services responded:**

The Department of Health provided $15 million to implement a program of work on monitored substances that will include an underpinning real-time prescription monitoring (RTPM) system. An internal audit of approvals processes under the Health (Drugs and Poisons) Regulation 1996 has commenced to ensure Queensland Health is appropriately administering this aspect of the Regulation.
The program of work will assess the required business changes needed within Medicines Regulation and Quality (MRQ) to support a RTPM system in the future and seek to establish a business case for any extra resources required to maintain appropriate regulatory functions.

On 2 June 2019 the Minister for Health and Minister for Ambulance Services responded:

The Department of Health recruited a new MRQ manager to undertake the internal change processes to support the implementation of the program of work on monitored substances and implementation of the new Medicines and Poisons Act. The investigation’s team within Medicines Compliance and Human Tissue Unit now includes four full-time investigation staff and one principal policy and planning officer.

The program of work will assess the required business changes needed within MRQ to support a national RTPM system in the future and seek to establish a business case for any extra resources required to maintain appropriate regulatory functions. The implementation of a RTPM program and legislative changes will transform the current regulatory activities of MRQ and work will be undertaken to re-align current positions to meet new business and regulatory requirements.