

23 June 2022

Karen Castle
Pharmacist
Voluntary Assisted Dying Implementation Unit, Prevention Division
Queensland Health
Sent via: vadimplementation@health.qld.gov.au

Dear Ms Castle,

RE: SHPA Consultative Submission on the *Draft Voluntary Assisted Dying Regulation 2022 (Qld)*

The Society of Hospital Pharmacists of Australia (SHPA) is the national professional organisation for more than 6,100 pharmacists, pharmacists in training, pharmacy technicians and associates working across Australia's healthcare system. The vast majority of Hospital Pharmacy Directors and Chief Pharmacists are SHPA members including those within Queensland.

Thank for the opportunity to provide feedback on the *Draft Voluntary Assisted Dying Regulation 2022 (Qld)* consultation paper. Hospital Pharmacists will be integral to the implementation of Voluntary Assisted Dying in Queensland, as has been demonstrated in other jurisdictions such as Victoria. The SHPA Queensland Branch have the following feedback to provide.

In relation to s 69, how would an authorised supplier be deemed to have confirmed the authenticity of the prescription, identity of the practitioner's identity and person the substance is to be prescribed to?

Clarity is especially being sought in relation to the person in which the substance is being prescribed. Given the breadth of settings in which the substance may be prescribed in and the sensitive nature of the person itself, how would a supplier be able to confirm the identity of the person. There is a large dependence by the supplier on the prescriber to confirm the identity of the person to which the substance will be administered to, will this be deemed sufficient, or must there be an independent check?

In relation to s 74, SHPA recommends the inclusion that the locked box containing the substance *and key or code*, so far as it is practicable, be kept in a safe and secure place or under the direct supervision of the holder of the box containing the VAD substance. This is how other medicines of this nature are managed and would be considered pertinent to safe management and storage.

In relation, to ss 75 and 77, SHPA recommends formally recording the discarding of the remaining substance in the medical records, notes or drug register specifying who discarded, what, when and how much was discarded. This is consistent with processes and management of other substances of similar nature.

SHPA recommends in relation to **self-administration decisions and having the contact persons dispose of the substance** with authorised registered health practitioners, **that there also be a record made by the authorised prescriber to confirm disposal of the substance has occurred by the contact person** with an authorised registered health practitioner. This is because there would otherwise be no formal or independent assurance that this step had occurred given the contact person may not necessarily be an authorised health practitioner.

SHPA would also like to note that people living in remote Queensland may only have access to a Primary Health Centre serviced by community nurses and Royal Flying Doctor Service (RFDS) doctors. **SHPA recommends that authorisation of a registered health practitioner for disposal includes community nurses** to accept the substance from a contact person to discard appropriately.

If you would like any further information about this submission, please do not hesitate to contact Jerry Yik, Head of Policy and Advocacy on yyik@shpa.org.au

Yours sincerely,



Edwin Cheung
On behalf of SHPA Queensland Branch Committee

