



## SHPA Queensland Branch Committee response to Mandatory checking of QScript, February 2023

The Society of Hospital Pharmacists of Australia (SHPA) is the national, professional organisation for the 6,100+ Hospital Pharmacists, and their Hospital Pharmacist Intern and Hospital Pharmacy Technician colleagues working across Australia's health system, advocating for their pivotal role improving the safety and quality of medicines use. Embedded in multidisciplinary medical teams and equipped with exceptional medicines management expertise, SHPA members are progressive advocates for clinical excellence, committed to evidence-based practice and passionate about patient care.

SHPA has been a strong advocate for real-time prescription monitoring (RTPM) for many years, nothing that it is a crucial investment to equip doctors and pharmacists with the necessary tools to detect, monitor and treat medicines misuse and abuse. SHPA's Queensland Branch Committee welcomes the opportunity to provide feedback on the mandatory checking of QScript and provides answers to the consultation questions below.

### 1. Do you consider the current mandatory QScript look-up requirements to be fit-for-purpose (i.e. promoting safe practices for the therapeutic use of monitored medicines and reducing community harm caused by monitored medicines)?

Queensland has some of the highest rates of prescription medicine-related harms in Australia, with a rate of deaths due to pharmaceutical opioids more than doubling between 2006-2010 and 2016-2020. Deaths in Queensland involving stimulants have increased five-fold and deaths due to other pharmaceuticals have increased by a factor of four.<sup>1</sup>

SHPA therefore believes that the mandatory use of RTPM system such as QScript is necessary in reducing community harm caused by monitored medicines in Queensland. Voluntary use of RTPM does not fully encourage or facilitate the detection of inappropriate prescribing and supply of medicines under the RTPM and therefore cannot assist in decreasing the unintentional deaths linked to monitored medicines.

Some exemptions to look-up requirements may be necessary in instances such as small quantities of monitored medicines supplied to patients from hospital emergency departments and while admitted as an inpatient in a health service. See below, question four for further suggestions on exemptions.

### 2. Do you believe the current mandatory QScript look-up requirements have resulted in unintended consequences?

In regard to suspected overdose presentation in an Emergency Department setting, QScript has allowed clinicians to access better information about patient's use of medication prior to admission, that ultimately improves detection of medicine-related presentations, determines appropriate treatment options as well as confidently supplying small quantities of monitored medicines at discharge.

### 3. In your view, do the current mandatory QScript look-up requirements require amendment?

Yes.

### 4. What amendment(s) would you propose and why? Please be as specific as possible.

Exemptions to mandatory QScript look-up should be specified in line with other jurisdictions such as South Australia and Victoria. Exemptions should apply if the person being prescribed or supplied with a monitored medicine is:

- A prisoner or in police custody
- A resident being treated in an aged care service



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- As part of palliative care treatment
- An inpatient in a hospital
- A patient being discharged with a small quantity of monitored medicine from an Emergency Department

This would eliminate ambiguity around look-up requirements for healthcare professionals, as well as supporting the overall aim of promoting safe therapeutic use of certain prescription medicines and reducing community harm associated with these medicines.

#### **5. Do you have any other feedback in relation to mandatory QScript look-up requirements?**

SHPA understands that QScript automatically collects real-time monitored medicine prescription information from prescribing and dispensing software systems. SHPA believes that it is imperative that QScript also integrates seamlessly with hospital clinical software and medicines supply systems.

The Integrated Electronic Medical Record (ieMR) and iPharmacy systems do not currently link with the QScript system. Community providers are unable to clearly see what medications patients have been prescribed or dispensed within Queensland Health settings. This issue needs to be addressed urgently to ensure smooth workflows that do not unintentionally create administrative burden, which could contribute to the risk of medication errors in a stressful environment.

If you have any queries or would like to discuss our submission further, please do not hesitate to contact Jerry Yik, Head of Policy and Advocacy on [yyik@shpa.org.au](mailto:yyik@shpa.org.au).

#### **References**

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<sup>1</sup> Penington Institute (2022). *Australia's Annual Overdose Report 2022*. Melbourne: Penington Institute. ISSN: 2652-7790

