



Queensland

Health (Drugs and Poisons) Amendment Regulation (No. 1) 2011

Explanatory Notes for SL 2011 No. 4

made under the

Health Act 1937

General Outline

Short title

Health (Drugs and Poisons) Amendment Regulation (No. 1) 2011.

Authorising law

Section 132(u) of the Health Act 1937.

Policy objectives and the reasons for them

The Health (Drugs and Poisons) Regulation 1996 (the Regulation) contains a wide range of controls over possession, supply, prescribing, administration, dispensing and other activities involving controlled drugs (Schedule 8), restricted drugs (Schedule 4) and poisons (Schedules 2, 3, 5, 6, 7 and 9) listed in the various Schedules of the Standard for the Uniform Scheduling of Medicines and Poisons.

These controls mainly involve restrictions as to who can perform those activities and in what circumstances. They aim at protecting the public from the health risks associated with inappropriate use of drugs and

poisons and minimising the risk of those substances being diverted for unlawful purposes.

Queensland Health and various stakeholders have identified deficiencies in the Regulation, primarily in relation to the effectiveness of its operation and the extent to which it is consistent with current practices regarding the activities it regulates involving drugs and poisons.

The policy objective of the Amendment Regulation is to ensure that the Regulation operates effectively to protect the public and allows the delivery of health services and other activities relating to drugs and poisons to be undertaken effectively and efficiently.

Achievement of policy objectives

The Amendment Regulation achieves its policy objectives by making miscellaneous amendments to the Regulation to address the deficiencies referred to above.

Consistency with policy objectives of authorising law

The Amendment Regulation is consistent with its authorising Act.

Inconsistency with policy objectives of other legislation

The Amendment Regulation is consistent with the policy objectives of other Queensland legislation relating to drugs and poisons, for example, the Drugs Misuse Act 1986.

Benefits and costs of implementation

Benefits

The Amendment Regulation ensures the Regulation operates effectively to protect the public and allows the delivery of health services and other activities relating to drugs and poisons to be undertaken more effectively and efficiently by, for example:

- extending the authorisations for various health professions (eg. doctors, pharmacists, optometrists, midwives, orthoptists, dental therapists and dental hygienists) to have access to specified drugs in the practice of their professions, or for teaching or research purposes;

- clarifying that supervision of specified activities involving drugs and poisons may be undertaken by using appropriate forms of technology;
- requiring reporting of the actual or suspected theft, loss or misappropriation of controlled drugs, anabolic steroids or pseudoephedrine;
- prohibiting the sale of drugs and poisons after their expiry date;
- allowing persons over 16 years to perform duties as a pharmacy assistant;
- allowing asthma medications to be sold to children over 14 years; and
- removing unnecessary or unduly onerous requirements in the Regulation regarding matters such as the use of drugs for clinical trials, the treatment of drug dependent persons when inpatients in a hospital, the storage of controlled drugs, the labelling of dispensed medicines, the giving of samples of restricted drugs or poisons to pharmacists by drugs wholesalers and the checking of stock/records of controlled drugs.

Costs

The Amendment Regulation imposes a number of new or extended obligations/restrictions on persons engaged in activities involving drugs and poisons. These principally include:

- requiring reporting to Queensland Health's Chief Executive of the actual or suspected theft, loss or misappropriation of controlled drugs, anabolic steroids or pseudoephedrine, or the purchase of excessive quantities of anabolic steroids;
- prohibiting a controlled drug being dispensed more than 6 months (rather than 1 year) after the prescription for the drug has been issued;
- requiring that only certain specified categories of persons are authorised to check and inspect the stock and records of controlled drugs in hospitals and other institutions;
- prohibiting the sale of drugs and poisons after their expiry date; and
- imposing obligations on midwives regarding record-keeping for controlled drugs which are equivalent to the existing obligations on nurses.

None of the abovementioned obligations/restrictions are expected to impose significant financial or other costs on the persons to which they apply.

Consistency with fundamental legislative principles

The Amendment Regulation does not raise any fundamental legislative principles issues.

Consultation

Key stakeholder bodies including the Pharmacy Guild of Australia, Pharmaceutical Society of Australia, Society of Hospital Pharmacists of Australia, Orthoptists Association of Australia, Royal Australian and New Zealand College of Ophthalmologists, Australian College of Midwives, the Australian Private Midwives Association and the Queensland Nurses Union have been consulted about the amendments in the Amendment Regulation that are relevant to those bodies.

All parties consulted support the Amendment Regulation.

ENDNOTES

- 1 Laid before the Legislative Assembly on . . .
- 2 The administering agency is the Department of Health.

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