

Schedule 8 psychostimulant prescribing in Tasmania

Change in approach to authorising co-prescribers

Information for Prescribers – March 2022

The Department of Health administers the Tasmanian *Poisons Act 1971* and *Poisons Regulations 2018*. Section 59E (s59E) of the Act details the legal framework for authorising medical practitioners to prescribe narcotic (Schedule 8) medicines including the psychostimulants methylphenidate, dexamfetamine and lisdexamfetamine. As these psychostimulant substances are listed in regulation 24, authorisation is required under s59E prior to prescribing.

The general policy position of the Department until recently has been to:

- Accept applications for individual patients for treatment with Schedule 8 psychostimulants under s59E only from relevant specialist medical practitioners such as those in the fields of psychiatry, paediatrics, respiratory medicine, and sleep medicine.
- Issue authorities under s59E to the relevant specialist medical practitioner making the application. Where the relevant specialist medical practitioner nominates a co-prescriber on the application form, this medical practitioner co-prescriber is included on the s59E authority letter to prescribe in accordance with conditions of the authority. In most instances this co-prescriber is the general practitioner treating the patient.

Why are changes required?

As part of continual quality improvement within the Department, processes regarding the inclusion of co-prescribers on s59E authorities have recently been considered. The Department has formed the opinion that the provisions of s59E of the *Poisons Act 1971* do not allow for the concept of a co-prescriber from another medical practice being listed on an authority issued under s59E.

Consequently, to ensure authorities issued are compliant with poisons legislation in Tasmania, the practice of nominating co-prescribers on s59E psychostimulant authorities will be ceased effective 1 April 2022. The Department remains supportive of the rationale that a relevant specialist medical practitioner has the appropriate expertise to make a diagnosis in their field and recommend and review a Schedule 8 psychostimulant treatment, but in many circumstances the general practitioner may be best placed to provide ongoing prescribing and medical care for the patient once stable.

The Department's position remains that either the relevant specialist medical practitioner or the general practitioner may take on the role of ongoing Schedule 8 psychostimulant prescribing, but both parties should not be prescribing concurrently.

Change from 1 April 2022

Effective 1 April 2022 the Department will no longer issue s59E psychostimulant authorities with a co-prescriber included on the authority.

Applications for new patients:

- If the relevant specialist medical practitioner making the diagnosis, documenting the risk-benefit assessment, and formulating the treatment plan will be undertaking the role of ongoing prescribing, they will make an application using the approved s59E psychostimulant application form.

OR

- If the general practitioner will be undertaking the role of ongoing prescribing, they must make an application under s59E using the approved psychostimulant form and accompany the application with a recent letter from a relevant specialist medical practitioner which provides a diagnosis, documents the risk-benefit assessment, and recommends a Schedule 8 psychostimulant treatment including dosage.

Renewal of existing authorisation on expiry:

- If the relevant specialist medical practitioner reviewing the diagnosis and treatment plan will continue the role of ongoing prescribing, they will make an application using the approved s59e application form on expiry of the current authority.
OR
- If the general practitioner will continue the role of ongoing prescribing, they must make an application under s59E using the approved form and accompany the application with a recent letter from the relevant specialist medical practitioner which confirms they have conducted a clinical review of the patient and that treatment with a Schedule 8 psychostimulant remains indicated, safe, and the regimen is supported.

Current s59E authorities:

The Department acknowledges the significant number of s59e psychostimulant authorities held by relevant specialist medical practitioners which have a general practitioner co-prescriber listed. Most of these authorities will expire within the next 24 months and this change in process will mostly happen gradually on expiry.

There is no intention for regulatory action to be targeted at prescribers who have a current co-prescriber status and prescribe accordingly. Delegates within the Department over time may identify instances where the co-prescriber should seek their own authority under s59E.

It is encouraged during this transition period that co-prescribers may choose to transfer a current s59E authority (issued to a relevant specialist medical practitioner) to themselves by completing the s59E psychostimulant application form. In this scenario a supporting relevant specialist medical practitioner letter is not required as the delegate will issue the s59E authority with the same expiry date as the current authority to assist with alignment of planned review by the relevant specialist medical practitioner.

Exceptional Circumstances:

As is currently the case, where the patient is a subject of a s59E authorisation for Schedule 8 psychostimulants, but a different non-authorised medical practitioner wishes to prescribe the Schedule 8 psychostimulant due to exceptional circumstances (e.g. transfer in treating medical practitioner, unable to secure necessary specialist medical appointment) the medical practitioner may contact the Branch to discuss short-term prescribing arrangements.

Where can I find more information?

The Department is planning during 2022 to release an updated guidance document on the overall process for authorisation of Schedule 8 psychostimulants in Tasmania under s59E. Professional representative organisations will be invited to provide feedback on the document prior to finalisation.

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