

CATAG MEMBERS NEWSLETTER

May, 2012

ACTIVITIES:

Reporting requirements: You should have received a copy of the provisional work plan for July 2012-2013. An activity report of CATAG's achievements from Jan-June 2012 and a work plan for July 2012 – June 2013 is due on the 15th of July.

Rituxamab data collection: The collection tool has been open for a few weeks and I have received multiple queries regarding ethics approval. If you require the documentation with regard to the ethics approval please email jdonnelly@stvincents.com.au. The study is considered a Quality Assurance project, if you require a HREC number please quote HREC2012/4/5.5 (3504). We need to submit an interim report to NPS at the end of August, it is important we promote the use of tool as much as possible.

National Medicines Symposium: I will be attending the National Medicines Symposium in Sydney on May 24-25th. I have submitted a poster on behalf of CATAG which outlines our objectives as an organisation, how we are achieving these and examples of our current activities. The poster submission is to increase the awareness of CATAG. If you would like a copy of the poster please email: jdonnelly@stvincents.com.au

RESONSES REQUIRED BY MEMBERS

There are a significant number of requests which require the jurisdictions attention, please be mindful of the deadlines, there are a few requests we have received with short timelines.

The Health Professionals Prescribing Pathway (HPPP) project aims to develop a nationally consistent approach to prescribing by health professionals, other than medical practitioners, that supports safe practice, quality use of medicines and effectiveness of healthcare services.

Health Workforce Australia has just released a Consultation Paper on a Health Professionals Prescribing Pathway (HPPP) in Australia. The purpose of the paper is to consult with stakeholders on matters that may impact on a nationally consistent health professionals prescribing pathway.

The consultation paper is available on the HWA website via this link

https://www.hwa.gov.au/sites/uploads/20120417_Final_Phase_1_Consultation_Paper_HPP_P_v12.doc

Submit comments/feedback to jdonnelly@stvincents.com.au by **Friday 18th May**. Your responses will be collated and the draft submission then circulated for further comment. To date I have only received two responses.

Consultation for paediatric dosing resource project (AMH)

request also emailed 14th May

Australian Government Department of Health and Ageing, in its capacity as a member of the Australian Health Ministers' Advisory Council, has engaged the Australian Medicines Handbook to conduct the Paediatric Pharmaceuticals Prescribing Resource project.

The project involves the development of a paediatric dosing resource containing the most commonly used medicines in Australia for children up to 18 years of age. The resource will be for use by all Australian health practitioners prescribing, dispensing and administering medicines to children in community and hospital settings. It is expected to be available by the middle of 2013.

The project will be overseen by the Paediatric Medicines Advisory Group.

AMH is approaching you to seek the involvement of the CATAG in the consultation phase of this project. We wish to invite input from the CATAG into the QUM issues for medicines use in children, with particular reference to paediatric dosing, prescribing and/or therapeutics; we are also interested in your members' views on paediatric medicines use in the hospital sector.

1. What are the main quality use of medicines issues for children that you have identified through your activities (eg. therapeutic programs, National Medicines Symposium streams)?
2. How would a national paediatric dosing resource improve these QUM issues?
3. Has any of the individual state TAGs identified QUM issues for children that are particular to their region?
4. Within the current paediatric medicines delivery environment (ie. prescribing, dispensing and administration), can you describe the key protagonists in both the community and acute care settings who would be likely to use a paediatric dosing resource? [eg. paediatric nurse practitioners?]
5. What would you consider is the appropriate guidance that needs to be provided to clinicians regarding off label use of medicines in the paediatric population?
6. Can you advise on which paediatric dosing, prescribing and/or therapeutic resources are currently being used in Australian community and acute care settings?
7. Are there specific guidelines/position statements that you/your members have produced that AMH should consider?
8. Are you aware of specific Australian Government/State/Territory medicines policies, standards, legislation and/or regulation that refer to paediatric dosing, prescribing and/or therapeutics which should inform the content we provide?
9. Is there anything else with respect to medicines use in children that you want to highlight?

Comments required by **Thursday 24th May** email: jdonna@stvincents.com.au

PBAC review of the Doctor's Bag

request also emailed 14th May

The PBAC intends to review the Emergency Drug Supplies section (Doctors Bag) of the PBS at its July 2012 meeting. The Australian Prescriber reviewed the current PBS Emergency list of medicines in the February 2012 issue and the review concluded there are some medicines on the Emergency list which are no longer regarded as best clinical practice because they do not require to be administered prior to attending hospital, and some are inappropriate to administer outside of the hospital environment as the patient cannot be monitored.

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Please see the letter attached for the proposed changes. For a copy of the Australian Prescriber article visit: <http://www.australianprescriber.com/upload/pdf/articles/1247.pdf>
Comments required by **Tuesday 5th June** email: jdonnelly@stvincents.com.au

Funding of Home Total Parenteral Nutrition (TPN)

A survey has been developed asking for information about the way in which home TPN is funded. The survey has been piloted by VicTAG prior to sending it out. The survey attached to the newsletter email. Please send the survey to your jurisdictional members and collate the information provided by individual hospitals. The collated information is required to be sent to CATAG by **Friday 29th June** email: jdonnelly@stvincents.com.au

Medical Gas Mix-ups

Over recent months the Therapeutic Goods Administration (TGA) has received a few reports from one of the State Health Departments about mix-ups, near mix-ups and potential mix-ups of medical gases because of confusion over their identities allegedly resulting from recent changes in the colour-coding of medical gas cylinders in accordance with the Australian Standard AS 4484-2004 "Gas cylinders for industrial, scientific, medical and refrigerant use -- Labelling and colour coding".

Forward your responses to jdonnelly@stvincents.com.au