The Victorian Government is taking action to reduce the growing harms, including deaths, from high-risk prescription medicines by implementing SafeScript, Victoria’s real-time prescription monitoring system.

SafeScript is computer software that allows prescription records for high-risk medicines to be transmitted in real-time to a centralised database which can then be accessed by doctors and pharmacists during a consultation. The focus of SafeScript is in primary care where patients are supplied high-risk medicines to be taken unsupervised in their homes.

SafeScript will provide prescribers and pharmacists with a clinical tool to make safer decisions about whether to prescribe or dispense a high-risk medicine, and facilitate the early identification, treatment and support for patients who are developing signs of dependence.

Q: Why is SafeScript necessary?
A: The harms and increasing number of deaths from prescription medicines are a major public health concern.

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In 2017 there were 414 Victorian drug overdose deaths involving pharmaceutical medicines, higher than the number of overdose deaths involving illicit drugs (271), and higher than the road toll (258).

In 2016-17, there were almost as many ambulance callouts relating to pharmaceutical medicines (10,517) than for illicit drugs (11,097).

Q: When will SafeScript be implemented?
A: SafeScript implementation is scheduled to commence in October 2018 with a focus on the Western Victoria Primary Health Network catchment before roll out to the rest of Victoria in early 2019.

Q: What medicines will be monitored in SafeScript?
A: Medicines that will be monitored include:

- all Schedule 8 medicines
- benzodiazepines such as diazepam
- ‘Z-drugs’ (zolpidem, zopiclone)
- quetiapine
- codeine containing products (brand names include Nurofen Plus, Mersyndol and Panadeine Forte)

SafeScript will monitor all prescriptions for these medicines regardless of whether they receive a PBS subsidy or are private, non-PBS prescriptions.

Q: How were the medicines selected for monitoring in SafeScript?
A: Medicines are classified into Schedules based on their level of risk of abuse and toxicity. All Schedule 8 medicines have been included for monitoring, as they carry the highest level of risk and have additional controls on their supply.

The Victorian Government commissioned Austin Health to develop an evidence base into which other medicines should be monitored in SafeScript based on their potential for harm. Austin Health conducted a literature review which included extensive quantitative and qualitative analysis including data from Ambulance Victoria, Victorian Coroners Prevention Unit, National Coronial Information System, Victorian Poisons Information Centre, and Victoria Police Forensic Services Department.

The findings were considered by representatives from key medical and pharmacy organisations on the SafeScript External Advisory Group who made recommendations that were accepted by the Victorian Government.

An ongoing process to review medicines that pose a risk to patients, for consideration of inclusion in the list
of monitored medicines will be developed within the department.


Q: How do I view records from my medical practice?
A: SafeScript will be quick and easy-to-use with minimal interruption to clinical workflow so that patient care remains the key focus.

All prescribers can access the SafeScript portal <www.safescript.vic.gov.au> on their computer or via a tablet device.

If you prescribe monitored medicines often, take advantage of a more integrated workflow by connecting to a Prescription Exchange Service and downloading the SafeScript notification app.

Clinicians who use software connected to a Prescription Exchange Service will receive pop-up notifications from their desktops within seconds when a prescription has been issued which will prompt clinicians if a review of the records in SafeScript is necessary. The notification will also provide a direct link to the patient's record.


Q: I prefer keeping paper patient files and I handwriting prescriptions. How can I access SafeScript?
A: While SafeScript has been designed to integrate with clinical workflows for clinicians using prescribing software, prescribers will not be required to use medical practice software in order to access SafeScript.

Access will still be available at all times via a secure web portal <https://www.safescript.vic.gov.au/> for prescribers who write paper prescriptions. The portal will also be available on tablet devices.

Q: Will the use of SafeScript be mandatory?
A: After an 18 month introductory period to allow health practitioners to familiarise themselves with the system, from April 2020 it will be mandatory to check SafeScript prior to writing or dispensing a prescription for a high-risk medicine.

This follows worldwide best practice, as mandatory systems adopted in other countries have shown to provide greater reduction in harms from high-risk prescription medicines.

There will be exceptions in some circumstances, including when treating hospital inpatients, patients in prisons, police gaols, aged care and palliative care.

Q: Will there be penalties for clinicians if they fail to check SafeScript from April 2020?
A: The Drugs, Poisons and Controlled Substances Act 1981 specifies penalties that can be imposed on clinicians if they do not take all reasonable steps to check SafeScript when prescribing a high-risk medicine.

The penalties of 100 penalty units are identical to the existing penalties in drugs and poisons legislation for failing to apply for a treatment permit when prescribing Schedule 8 medicines to patients. These penalties have been in place under drugs and poisons legislation in Victoria since the early 1960s.

While the Act has provisions to prosecute for failure to comply with these requirements, non-compliance will be assessed within a risk-based framework that focusses on conduct that poses the most significant risks of harm to patients and practitioners who have repeatedly failed to comply with SafeScript requirements.

The department will utilise a range of compliance tools, including education and counselling, to assist practitioners to meet their regulatory obligations, and will take individual circumstances into account before any consideration is made on a decision to initiate prosecution.

Q: What does taking “all reasonable steps” to check SafeScript mean?
A: From 1 April 2020, the Drugs, Poisons and Controlled Substances Act 1981 will require prescribers and pharmacists to take all reasonable steps to check SafeScript when prescribing or supplying a high-risk medicine.

There may be circumstances where clinicians may not be able to check SafeScript but they consider it necessary to prescribe or supply a high-risk medicine. The phrase “all reasonable steps” takes into consideration what measures were taken by a clinician to attempt to satisfy this requirement.

Examples would include:

- Contacting the department to enquire about a patient history in SafeScript
- Contacting the pharmacy to enquire about the patient history in SafeScript

Updated: 2 October 2018
• If access to SafeScript is temporarily unavailable, prescribing or supplying limited quantities and checking SafeScript at the next available opportunity.

Clinicians who do not check SafeScript simply because they have not registered or have not arranged access to a computer, and do not consider other measures to establish the patient’s history in SafeScript, are unlikely to satisfy this requirement.

Q: I only prescribe to regular patients I trust and I always prescribe within clinical guidelines. Why do I have to use SafeScript?

A: The medicines that will be monitored through SafeScript are medicines which are causing the greatest harm (including deaths) in the community. It is therefore important that clinicians adopt a “universal precautions” approach by checking SafeScript.

SafeScript should not only be reserved for circumstances where there is suspicion that a patient is obtaining medicines beyond therapeutic need. Rather, it should be considered as part of routine everyday practice to establish a full history for all patients taking high-risk medicines.

This also provides clinicians with confidence and assurance that what is being prescribed or supplied to all patients on every occasion is safe noting these medicines are prone to dependence.

Q: Why do both the prescriber and pharmacist need to check SafeScript? Shouldn’t the focus only be when the medicine is supplied?

A: Prescribers and pharmacists both have legal obligations and a professional duty of care to ensure that any treatment they provide to patients is safe and appropriate.

The use of SafeScript will assist prescribers and pharmacists in fulfilling these professional and legal responsibilities.

While it is important for pharmacists to check SafeScript, checking SafeScript at the point of prescribing is also critical to pick up early signs of dependency and initiate discussions on safer treatment options.

Q: What consultation has occurred with medical practitioners and pharmacists?

A: Implementation of SafeScript has received broad support and interest from all medical and healthcare professional organisations. Ongoing consultation through the SafeScript External Advisory Group has guided the Victorian Government’s planning, development and implementation of this initiative.

Among the organisation represented on the SafeScript External Advisory Group, medical representation includes:

• Australian Medical Association
• Chapter of Addiction Medicine, Royal Australasian College of Physicians
• Faculty of Pain Medicine, Australian and New Zealand College of Anaesthetists
• Royal Australian and New Zealand College of Psychiatrists
• Royal Australian College of General Practitioners
• Rural Doctors Association of Victoria
• Victorian Aboriginal Community Controlled Health Organisation
• Victorian Primary Health Networks

Q: Where can I get further information?


The SafeScript General Enquiries team <safescript@dhhs.vic.gov.au> can be contacted on 9096 5633 or via email.