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**Dear Victor** 

# Re: Storage of S8 (Controlled) Medicines in Residential Care Facilities

Thank you for meeting with us recently regarding the consultation paper on the options for amendments to the ACT controlled medicine storage requirements. As requested, our feedback relates specifically to *Issue 6: Possession of Controlled Medicines for Emergency Administration in Residential Care Facilities.* HCCA has raised these issues with our Health Policy and Research Advisory Committee and others from our membership with an interest in medicines.

The two main issues we would like to highlight in this submission are:

- 1. Consumers in residential care facilities need timely access to pain relief.
- Hydromorphone is a high-risk medicine. The significant patient safety implications of storing and using this medicine, along with other controlled medicines, in residential care facilities, will need to be considered and addressed.

Our more detailed comments follow below.

#### Controlled medicines in residential care facilities

We know that it is important for consumers in residential care facilities to have access to controlled medicines for emergency administration. Controlled medicines are frequently used in residential care facilities to treat moderate to severe, acute or chronic pain. We also recognise the use of these medicines specifically in palliative care situations. We support the general principle that the current provisions, limiting the possession of controlled medicines, could be expanded to improve consumer access.

## Risks associated with the use of hydromorphone

We are aware that hydromorphone, which is specifically mentioned in the consultation paper, is a potent opioid. It is 5 to 7 times more potent than morphine, and medication errors can result in serious adverse events for consumers. Incidents involving confusion between morphine and hydromorphone have occurred, including fatal incidents involving inadvertent administration of hydromorphone instead of morphine<sup>1</sup>.

While it may be 'commonly prescribed in some residential care facilities'<sup>2</sup>, we know that this is a high-risk medicine. Hydromorphone has been involved in a range of serious patient safety incidents, some resulting in death. The Australian Commission on Safety and Quality in Health Care, has identified hydromorphone in their medication safety alerts<sup>3</sup> as a medicine of particular risk for a range of administration errors. Dose calculation errors with hydromorphone can easily result in an overdose, and risk factors such as asthma, obstructive sleep apnoea or patients taking some other medications can increase the effects of hydromorphone<sup>4</sup>.

The patient safety issues associated with hydromorphone are serious and significant, and clear guidance must be in place for appropriate prescribing, and to prevent prescription and administration errors. While this is recognised as a considerable issue in hospital settings, such as both Canberra and Calvary Hospitals here in the ACT, it is even more so an issue for the safety and quality of care in residential care facilities.

The Royal Commission into Aged Care Quality and Safety identified medication management as an area of significant concern in residential aged care facilities, with more than twenty recommendations relating to medicines.

### Palliative care in residential aged care facilities

Consumers are concerned about the quality of palliative care in residential aged care facilities. Often it is better for consumers and their families for residents to remain in place at end-of-life, for their care and comfort, rather than be transferred to hospital or the hospice. But there can be some hesitancy from facilities to care for residents at end of life, and having skilled staff is important, especially when dealing with controlled medicines such as hydromorphone.

There are poor staffing ratios in many facilities and a registered nurse may not be available 24/7. This has implications for the skill levels of staff involved in the storage, checking and administration of hydromorphone, as well as the monitoring of patients after administration. Residential care facilities that are not well-staffed may be less able to monitor changes in a patients' condition after administration of hydromorphone, which can include an unexpected decrease in their level of consciousness or other adverse effects<sup>5</sup>.

### Controlled medicine storage and security

There can also be medication security issues in relation to controlled medicines. These include the potential for diversion of controlled medicines from storage if appropriate management systems for controlling access are not in place. Staff need to be fully trained in all aspects of controlled medication management.

## Concluding remarks

In summary, while we generally support expansion of the current provisions to improve consumer access to controlled medicines, serious consideration must be given to the patient safety issues around the use of hydromorphone, and how this high-risk medication can be appropriately managed in the residential care setting.

Given this context, we would support Option 3 provided for Issue 6 (p8), with the caveats that other controlled medicines to be used need to be defined, and that hydromorphone has particular risks for safety. In addition, we strongly support that any system put in place must have a proper system for evaluation in place to make patient safety and efficacy.

We hope that our comments are useful in helping ensure that the Health Protection Service supports our health system in delivering high quality, safe and consumercentred care. HCCA would be happy to discuss any of our comments further if needed, please feel free to get in touch.

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<sup>&</sup>lt;sup>1</sup> NSW Health - *High Risk Medicines Management Policy Directive* (2020) https://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2020\_045.pdf

 $<sup>^{\</sup>rm 2}$  Refer to Consultation Paper, Issue 6 - Options for amendments to the ACT controlled medicine storage requirements

<sup>&</sup>lt;sup>3</sup> Australian Commission on Safety and Quality in Health Care (2011), *Medication Safety Update Issue 5* <u>https://www.safetyandquality.gov.au/sites/default/files/migrated/Medication-Safety-Update-5-Feb-2011.pdf</u>

<sup>&</sup>lt;sup>4</sup> NSW Health - *High Risk Medicines Management Policy Directive* (2020) https://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2020 045.pdf

<sup>&</sup>lt;sup>5</sup> NSW Health - *High Risk Medicines Management Policy Directive* (2020) https://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2020 045.pdf