## **FACT SHEET**

## **POISONS AMENDMENT BILL 2009**

The purpose of the Poisons Amendment Bill 2009 is to transfer certain provisions of the Alcohol and Drug Dependency Act 1968 (ADDA) to the Poisons Act 1971.

ADDA came into force before the *Poisons Act* and for many years both Acts, along with the *Poisons Regulations*, have been used to regulate the prescribing of drugs of dependence.

The Bill inserts provisions relating to the notification and authorisation of certain restricted substances and narcotic substances into the *Poisons Act*. Placing all prescribing aspects for drugs and poisons into one piece of legislation will assist practitioners in understanding the requirements around the prescribing of these substances.

The Bill also updates the terminology and definitions of "drug-dependent person" and "drug-seeking behaviour".

The provisions mirror the current ADDA requirements so that:

- A medical practitioner or other authorised prescriber must notify the Secretary
  if a patient who is known to abuse drugs, seeks drugs of dependence and is
  prescribed (or has been prescribed in the past) these substances. The
  substances include all narcotics (such as morphine) and amphetamines.
  (However, the ADDA requirement to separately notify the Secretary in relation
  to patients whose dependence is due solely to their treatment is no longer
  required.)
- It is an offence to make available to such persons or to drug-dependent persons, a narcotic or a specified substance without the authority of the Secretary;
- There is a limit on how long any patient may be prescribed narcotic substances or specified substance without the authority of the Secretary.
- The Secretary may authorise the provision of narcotics or specified substances to a person on application from a medical practitioner or other authorised prescriber.

These requirements have been in place for decades and there is no substantial departure from the existing processes. The Bill places no additional requirements on prescribers and no additional restrictions upon patients.

The Bill has a dual purpose, to protect patients and in the interests of both patient and public safety address the risk of illegal diversion, misuse and abuse of the substances. The misuse and abuse of these legally prescribed substances is a significant problem in Tasmania and results in a high level of morbidity and mortality.