Ahpra Protocol

Limitations on access to medication(s)

This protocol applies to restrictions imposed or accepted from **16 September 2024**

Australian Health Practitioner Regulation Agency
National Boards
GPO Box 9958 Melbourne VIC 3001 Ahpra.gov.au 1300 419 495

Ahpra Protocol: Limitations on access to medication(s)

Overview

This Ahpra Protocol - *Limitations on access to medication(s)* (the Protocol) sets out the requirements that apply to practitioners with a registration restriction for medication access. We monitor compliance with this restriction to protect patient safety.

You will receive a monitoring plan that details contact information, due dates and the information you will need to provide to show that you are complying with your restrictions. The plan will be updated as you complete the requirements. Read your monitoring plan in conjunction with the Protocol /s

The Ahpra website and Register of practitioners is located at https://www.ahpra.gov.au. Monitoring and compliance information is available under the Registration section. The online Protocols and forms are available from the National Restrictions Library 2.0 section of the monitoring and compliance web page.

In this Protocol:

'Restriction' and 'Restrictions' refers to:

- conditions and undertakings on your registration that are related to the requirements of this specific Protocol

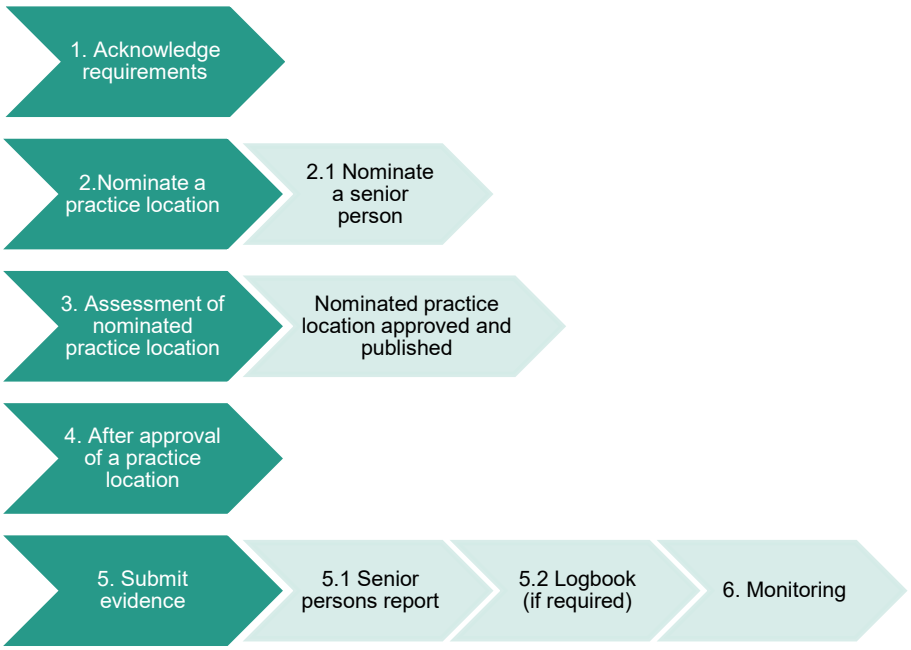
'We' 'us' and 'our' refers to:

- the Australian Health Practitioner Regulation Agency (Ahpra),
- the Board for the health profession you're registered for.

The Protocol includes:

- individually numbered paragraphs and sub-paragraphs to help you navigate the requirements.
- highlighted requirements that you must follow using this symbol:
- clarifying information and advice from us to help you follow the requirements, using this symbol:
- terms that we define in specific ways. The first time we use one of these terms, we've hyperlinked these to their definitions for your reference

There are five main requirements of the Protocol



Requirements

1. Acknowledge the requirements

1.1 Practitioner Acknowledgement

1.1.1 You must acknowledge the requirements of the restriction on your registration and the *Ahpra Protocol: Limitations on access to medication(s)* (the Protocol) within 3 calendar days of the start date of the restriction.

- Complete the **Form** [HPA.2.20]: Limitations on access to medication(s) – Practitioner acknowledgement

2. Nominate a practice location

2.1 Nomination of a practice location

2.1.1 **You must not practise until approved practice locations are published to the online** register of practitioners.

2.1.2 Any practice that occurs before or outside the published practice locations will be considered a breach of the restrictions and may result in further regulatory action

2.1.3 You must nominate practice locations and a senior person at each location.

2.1.4 Nominate practice locations on **Form** [HPN.2.20]: Limitations on access to medication(s) – Nomination of Practice Locations

2.1.5 If requested, you must provide evidence of how your compliance with the restrictions will be supported.

2.1.6 If requested, you must provide evidence of an offer of employment, contract of employment or role description or the equivalent.

2. 2 Nominate a senior person

2.1.7 You must provide the details of the senior person for each nominated practice location (senior person)

2.1.8 Nominate the senior person on **Form** [HPN.2.20]**:** Limitations on access to medication(s) – Nomination of Practice Locations

2.1.9 The nominated senior person must be senior to you by role and/or experience.

2.1.10 The nomination of each senior person must be accompanied by acknowledgement from each nominated person that they are aware we will contact them and exchange information.

2.1.11 The senior person must complete **Form** [SPA.2.20]: Limitations on access to medication(s) – Senior Person Acknowledgement Form

ⓘ The senior person may be the practice principal, or other person senior by position. This person should generally have oversight of the operational management of the practice and is responsible for managing staff rostering, patient or client billing and patient booking management. Where possible your senior person should be another registered health practitioner.

Senior persons will provide information about the characteristics of nominated practice location(s) such as number of employees, number of other registered health practitioners, details of electronic booking and clinical record keeping systems.

Senior persons will also provide information such as rosters, pay slips, appointment diaries, billing information and the like and may, when requested, provide copies of clinical records, audit logs and the equivalent to provide independent evidence of your compliance.

2.1.12 You must provide each nominated senior person a full copy of the restrictions on your registration, and this Protocol

2.1.13 You must also provide each nominated senior person(s) the contact details of your Ahpra case officer or team.

2.1.14 Your nominee must not have any perceived or actual conflict of interest in undertaking this role.

2.1.15 Both you and your nominee must declare any actual, potential, or perceived conflicts of interest. If requested, you must provide information on how you will manage the conflict.

2.1.16 If your senior person changes, you must notify your Ahpra case officer within 14 calendar days.

ⓘ A conflict may arise from being in a collegiate, family, social or financial relationship which could compromise the nominee's judgment, decisions, or actions in performing the role.

We must be confident that the senior person is able to give independent evidence of your compliance and be willing to provide reports to us if they identify concerns with your conduct, or compliance with your restrictions.

We may refuse your nomination of a practice location if there is insufficient evidence that any conflict will be sufficiently managed.

3. Assessment of a nominated practice location

3.1 Each nominated practice location must meet the following requirements:

3.1.1 The practice location is not your place of residence or the residence of patients,

3.1.2 The senior person such as practice manager at the practice location does not have a direct personal relationship with you (for example, a spouse, de facto, sibling or other relative), and,

3.1.3 There is sufficient oversight or ability to provide independent evidence of compliance.

ⓘ You must nominate ALL practice locations regardless of the scope or role and only commence practice at those locations once published on the public register

Practice locations will be assessed for approval based on their suitability to accommodate the requirements of the restrictions and to support effective monitoring of your compliance.

For a practice location to be approved, we must be confident that the senior person(s) is able to give independent information about your compliance and be willing to provide reports to us if they identify concerns.

A conflict of interest may arise from being in a collegiate, family, social or financial relationship with those you nominate which could compromise the nominee's judgment, decisions, or actions in performing their nominated role.

Nominations that don't meet the above requirements may be considered in extenuating circumstances.

Nominations not meeting the above requirements usually require longer timeframes for consideration.

We may refuse your nomination.

4. After publication of a practice location

4.1 Approval and publication of practice locations

4.1.1 **You must only practise at published practice locations that are published on the online register of practitioners.** ⚠

4.1.2 When practice locations are published on the National Register, you can commence practising.

4.1.3 You must only practice at approved and published practice locations.

4.1.4 You must not access the substance(s) listed in your restrictions other than in the circumstances permitted in your restrictions.

4.1.5 If your restrictions reference a schedule of the Standard for the Uniform Scheduling of Medicines and Poisons (the SUSMP), you must familiarise yourself with the substances contained in the schedule.

ⓘ The scheduling of medicines and poisons in the SUSMP can differ from scheduling of medications by State and Territory Drugs and Poisons Authorities.

Differences in scheduling by state or territory-based authorities and the SUSMP will not be accepted as an explanation for non-compliance with the requirements of the restrictions.

4.1.6 If you cease practising at any of your published practice locations, you must notify your Ahpra case officer within 14 calendar days.

5. Treatment

5.1 Health condition

5.1.1 If requested, you must provide evidence of the specific medical condition that caused you to require access to a substance(s) for the treatment of your health condition.

5.1.2 Treatment of a health condition will only be accepted as an exemption from the requirements in the following circumstances:

- you hold, or held, a valid prescription for the medication issued to you by another registered health practitioner as part of treatment for a health condition and the prescription was dispensed to you after the prescription was issued, or
- supporting evidence of the health condition is provided by you from another registered health practitioner.

6. Submit evidence

6.1 Senior persons report

ⓘ Your nominated senior person may be asked to provide reports to us to confirm your compliance with your restrictions. If regular reporting is required, the frequency will be detailed in your Monitoring plan.

Reports may include copies of rosters, pay slips, appointment diaries, billing information and the like and may, on request, include clinical records, audit logs, and the equivalent.

Your senior person will also provide a report if they have a concern or become aware of a concern regarding your conduct or professional performance.

6.2 Logbook

6.2.1 Compliance with the following requirements is only required if your restrictions require you to maintain a logbook. ⚠

6.2.2 You must submit the logbook at least monthly.

6.2.3 The log must be completed in an approved format and at a minimum completed at the end of each day.

6.2.4 The logbook must record at a minimum:

- Date and time of the patient contact
- Location
- Patient full name
- Patient date of birth

6.2.5 You must record any other information as directed.

7. Monitoring

7.1 Monitoring your compliance

7.1.1 You must, if requested, provide authority for Ahpra to obtain information from State and Territory drugs and poisons authorities about prescribing, dispensing or access to medications

7.1.2 If requested you must provide authority for Ahpra to access information from private health insurers, the Department of Veteran's Affairs and the National Disability Insurance Scheme about services rendered and billing of item numbers.

ⓘ We will conduct activities to monitor your compliance with the restrictions.

For the purpose of monitoring the restrictions, we may:

- obtain data from Services Australia relating to prescribing and services rendered to patients to monitor any:
  - practice whilst there are no approved practice locations published on the public register and you are prohibited from practising,
  - prescribing of substances limited by your restrictions; and
  - practice if your registration status alters (for example, when the registration is suspended or transitioned to non-practising registration, or if you fail to renew your registration).
- obtain data from private health insurance companies, state and territory drugs and poisons entities, and other third parties relating to access to medications to monitor any:
  - practice whilst there are no approved practice locations published on the public register and you are prohibited from practising,
  - access to substances limited by your restrictions; and
  - practice if your registration status alters (for example, when the registration is suspended or transitioned to non-practising registration, or if you fail to renew your registration).

8. Extensions of time

8.1 Requesting an extension

ⓘ Extensions of time are generally not permitted.

8.1.1 If you are seeking an extension of time, you must provide a written request.

8.1.2 You must request an extension of time before the applicable due date.

8.1.3 You must provide a proposed timeframe for completion of the requirement when making an extension request.

8.1.4 You must indicate the reason for your request and provide evidence of the basis of the extension.

8.1.5 If you are granted an extension, you must complete the relevant action or requirements within the extended timeframe. ⚠

8.2 Change of circumstance

8.2.1 You must contact your Ahpra case officer or team as soon as possible if you have had a change in your circumstances or are unable to comply with the requirements for any reason. See your monitoring plan for contact information.

9. Exemptions

ⓘ Exemptions may be permitted in very limited circumstances where the restrictions may cause concerns about continuity of care or referral of vulnerable patient groups for ongoing treatment with another registered health practitioner.

Exemptions will only be granted in circumstances where the exemption is limited to the definition of practise and contact to enable transfer of clinical records to another registered health practitioner and/or referral of the patient.

Exemptions will not be granted where you propose to contact a patient directly via correspondence or telecommunication.

We may refuse your request for an exemption.

10. Costs

10.1 Responsibility for costs

10.1.1 You are responsible for all costs associated with complying with this restriction and Protocol.

11. Privacy

11.1 Collection of personal information

ⓘ We are committed to protecting your personal information. The ways in which we may collect, use and disclose your information are set out in our Privacy Policy.

The privacy policy and further information regarding Ahpra's Privacy, Freedom of Information and Information publication scheme is available on Ahpra's website.

Definitions

For the purposes of the restrictions and this Protocol the following terms are defined:

Term	Definition
Access	Prescribing, possessing, supplying, administering, handling, dispensing, accessing and checking of medication(s).

Term	Definition
Drug of dependence	d) Any illicit drug e) Any prescription only and any controlled drug medication contained in Schedule 8 of the Standard for the Uniform Scheduling of Medications and Poisons (the SUSMP) as amended from time to time and as published at https://www.tga.gov.au/publication/poisons-standard-susmp, and f) Any pharmaceutical items with an active ingredient listed below: Bromazepam, Chloral hydrate, Clobazam, Clonazepam, Codeine*, Diazepam, Dihydrocodeine, Ephedrine, Flunitrazepam, Gabapentin, Lisdexamfetamine, Lorazepam, Midazolam, Modafinil, Nitrazepam, Oxazepam, Paraldehyde, Perampanel, Phenobarbitone, Phentermine, Pregabalin, Primidone, Propofol, Pseudoephedrine, Quetiapine, Temazepam, Tramadol, Trihexyphenidyl, Zolpidem, Zopiclone *Including when compounded with other therapeutically active substances (e.g. paracetamol, phenylephrine).
Practice location	Any location where the practitioner practises the profession including any place where the practitioner: a. is self-employed b. shares premises with other registered health practitioners c. is engaged by one or more entities under a contract of employment, contract for services or any other arrangement or agreement d. provides services for or on the behalf of one or more entities, whether in an honorary capacity, as a volunteer or otherwise, whether or not the practitioner receives payment from an entity for the services, or e. provides professional services at the residential premises of a patient.
Practise	Any role, whether remunerated or not, in which the individual uses their skills and knowledge in their registered health profession. It is not restricted to the provision of direct clinical care and includes using the knowledge and skills in a direct non-clinical relationship with a client, working in management, administration, education, research, advisory, regulatory or policy development roles and any other roles that impact on safe, effective delivery of services in their registered health profession.
Telehealth	is any practice using digital communication, including consultation, interview, examination, assessment, prescribing or other form of patient treatment. This includes communication using the telephone, video, email, instant messaging or other form of digital communication.

Appendix A: Drugs of dependence

'**Drug of dependence**' is defined as:

a. any prescription only and any controlled drug medication contained in Schedule 8 of the Standard for the Uniform Scheduling of Medications and Poisons (the SUSMP) as amended from time to time and as published at https://www.tga.gov.au/publication/poisons-standard-susmp, and

b. including any pharmaceutical items with an active ingredient listed in schedule 8 of the SUSMP, and

c. any pharmaceutical items with an active ingredient listed below irrespective of how they are scheduled in the SUSMP or any other state or territory legislation:

Bromazepam	Lisdexamfetamine	Pregabalin
Chloral hydrate	Lorazepam	Primidone
Clobazam	Midazolam	Propofol
Clonazepam	Modafinil	Pseudoephedrine
Codeine*	Nitrazepam	Quetiapine
Diazepam	Oxazepam	Temazepam
Dihydrocodeine	Paraldehyde	Tramadol
Ephedrine	Perampanel	Trihexyphenidyl
Flunitrazepam	Phenobarbitone	Zolpidem
Gabapentin	Phentermine	Zopiclone

*Including when compounded with other therapeutically active substances (e.g. paracetamol, phenylephrine).