

## Submission to Post-market Review of Opiate Dependence Treatment Program Medicines

The Western Australian Network of Alcohol and other Drug Agencies (WANADA) in collaboration with our member drug user organisation, Peer Based Harm Reduction WA (PBHRWA) welcomes the opportunity to provide a submission to the Pharmaceutical Benefits Scheme post-market review of opiate dependence treatment program (ODTP) medicines.

WANADA's submission focusses on program access considerations for consumers in Western Australia. These issues have been highlighted, advocated for, and insisted on the requirement for more appropriate local responses to the impact of COVID-19 restrictions over the past 20 months as a result of the pandemic.

## Western Australian Perspective and Learnings from the Pandemic

WANADA's (our position) position is that ODTP medicines and the associated program:

- prioritise the safety of program consumers
- is sufficiently flexible to ensure access barriers are minimised, including cost implications for consumers
- acknowledge the vulnerability of program consumers to effectively function in an environment of pandemic and subsequent population health measures

National program guidance reflects the need to adapt rapidly to the changing conditions for consumer and health workers to prevent the spread of COVID-19, recognising the opioid treatment system is 'greatly affected'. In this context, it is essential that program and clinical guidance fully considers the need to minimise risk of COVID-19 transmission and consumer safety.

WANADA (and PBHRWA) has previously communicated the below recommendations regarding the implementation of the ODTP program in Western Australia during the pandemic, following revised national program guidance. These recommendations remain relevant.

Implementation must:

- maintain consideration of consumer choice in relation to initiating opioid dependence treatment, with informed consent. Information on the available program choices need to be codesigned with consumers to ensure that information is provided in a way that is easily understood by consumer of the program
- incorporate routine health assessment processes to inform increased take-away doses for consumer safety during the COVID-19 pandemic and beyond as a key health risk mitigation initiative
- fast track monitoring and dosing decision making, including changes to take-away doses, taking into consideration the need for a second opinion and documentation of decision making based on risk mitigation

- be supported by revised risk-assessment checklists/instruments that may be completed by a multidisciplinary team (including consumer input) or telehealth to reduce prescriber burden
- ensure participant risk mitigation education and supports are made available and clearly communicated
- see the immediate development of self-isolation, quarantine and hospitalisation strategies to enable seamless continuity of consumers ongoing and seamless treatment. These need to include policies and processes for responsible carers and home deliveries, as well as supporting hospital intake procedures that include consultation with an addiction medicine specialist, consumer/peer advocate and that informs treatment and discharge planning
- resource the establishment and promotion of peer advocacy
- resource alcohol and other drug services to offer appropriate psychosocial treatment and consumer/peer support alongside opioid dependence treatment to meet growing complexities resulting from COVID-19
- inform consumers and drug user organisations of alternative/locum prescribers in case of reduced availability of current prescriber
- support pharmacists to develop contingency plans in case of dispensing disruption and inform consumers of alternative dispensing option.

Underlying the implementation is a need for comprehensive information for consumers of ODTP changes resulting from the Wester Australian COVID-19 response, with peer codesign input (if not peer led) processes resourced and supported. The need for peer-developed program communication remains outstanding and urgent. Communication needs to include and include peer wisdom for effective messaging

- options available on ODTP initiation
- changes to monitoring, risk assessment and dosing requirement both during COVID-19 and beyond
- health, wellbeing and safety guidance specific to this cohort, e.g., promoting access to masks and other affordable resources in response to crisis situations
- re-initiation requirements following any 'drop out' both during COVID-19 and beyond
- peer advocacy contacts must be supported

## About WANADA

The Western Australian Network of Alcohol and other Drug Agencies (WANADA) is the peak body for the specialist alcohol and other drug education, prevention, treatment and support sector in Western Australia. WANADA is an independent, membership-driven, not-for-profit association.

WANADA is driven by the passion and hard work of its member organisations, which include community alcohol and other drug counselling; therapeutic communities; residential rehabilitation; intoxication management; harm reduction; peer based; prevention; and community development services.

Peer Based Harm Reduction WA (PBHRWA) provides non-judgmental peer-based support, information and education, advocacy, and harm reduction and health treatment services. Our programs are primarily aimed at our community who use drugs we provide clinical services to reduce the transmission of, and provide accessible testing and treatment for, BBV and STI's associated with drug use. We provide education and programs to support and assist in the prevention of drug overdoses. We are focused on reducing the incidence and severity of other drug-related harm in the community. Our goals focus on reducing stigma and improving the health, wellbeing and social circumstances for people who use drugs in Western Australia.