

Queensland Health Quality Use of Medicines  
Conference Proceedings  
July 1999



**Queensland Government**  
Queensland Health

Queensland Health

Quality Use of Medicines Conference

“Directions for the New Millennium”

13-14 July 1999

Brisbane

Conference Proceedings

The conference was convened by Pharmaceutical Advisory Services, Public Health Services, Queensland Health in support of the Quality Use of Medicines Outcome Area

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## Foreword

It is with great pleasure that the Conference Organising Committee presents to you the Proceedings of the Queensland Health Quality Use of Medicines Conference.

The conference, held in July 1999 was the first of its type - a national meeting to determine future directions for Quality Use of Medicines (QUM) for Queensland. The meeting brought together over 200 participants representing all States of Australia and several international locations. Participants' constituencies were wide-ranging including health professionals, consumers, policymakers and researchers.

The conference included keynote presentations, invited papers and two workshop sessions aimed at developing recommendations for the direction of QUM in Queensland.

The Conference Proceedings have been published as a way of disseminating the presentations and discussion that occurred during the event to interested parties. We hope that you will find the material included here useful and interesting and relevant to your own QUM endeavours.

We are grateful for support from Queensland Health for providing seeding funds for the development of the meeting and the enthusiasm of Queensland Health staff in supporting the meeting. We thank speakers and delegates for making their time available and their active participation at the meeting. Special mention should be made of our overseas keynote speaker, Professor Lars Nilsson, for his infectious enthusiasm. Finally I would thank the organising committee for their commitment and support in developing and presenting the conference and Teresa Lynne and Linda Carpenter for perusing the papers and presentations and drawing them together into this record of the meeting.

If the majority of participants took away an increased understanding of QUM or a motivation to implement some QUM initiative it will have been worth the effort of development. The output from the workshops and the feedback we received suggest it was well worth the effort.

Andrew Petrie

Chair

QUM Conference Organising Committee

## Executive Summary

The inaugural Queensland Health Quality Use of Medicines Conference was held in Brisbane in July 1999. Over 200 delegates participated, reflecting a diversity of backgrounds, disciplines and locations. Most of the peak bodies involved with the Quality Use of Medicines (QUM) movement in Australia were represented at the conference, many of them through formal presentations.

The conference format accommodated both keynote and invited speakers who admirably filled their main role, which was to inform and inspire. The real work of the conference got underway in the workshops and informal networking. Workshops were conducted towards the end of each day with the intent that participants would draw on the issues and initiatives presented earlier in the day. A range of recommendations was developed and these will give direction to the coordination and development of QUM in Queensland.

Several themes emerged during the course of the conference that were considered to be of paramount importance. They were mentioned not just in one or two presentations, but continually appeared in all components of the conference. These are briefly described below.

Many speakers emphasised the importance of **implementing** or further developing the many QUM initiatives that exist. There was praise for the progress made in Australia through having a national policy on QUM and a number of high profile organisations focussed on QUM (eg the Australian Pharmaceutical Advisory Council and the National Prescribing Service). However, there was some frustration that proven, or evidence based, strategies are still not being widely implemented in practice.

A recurrent theme was the need to develop **partnerships** among the QUM stakeholders. Of note, was the need to involve the health industry, particularly the pharmaceutical industry. Industry representatives who spoke at the conference considered that this had been limited and suggested that greater involvement in QUM initiatives would be welcomed by the industry. Another stakeholder group identified as requiring greater involvement in QUM partnerships was the consumer group. There was a view that consumers tend to be perceived mainly in the context of being recipients of QUM, and are not invited to collaborate sufficiently in other parts of the process.

A frequently mentioned strategy to improve QUM was the need for **integrated education** among the stakeholders. Several speakers, and some of the workshops, specifically referred to the benefits of an integrated approach to undergraduate education (about QUM) of health professionals. It was considered that this promotes better understanding of the roles and responsibilities of the various health professionals in QUM, and facilitates better (multidisciplinary) working relationships after graduation.

A further recommendation was for the establishment of a **Queensland QUM Centre**. The purpose of the centre would be to organise and develop QUM in Queensland. It would provide for coordination across different sectors, disciplines and organisations and address the challenges of identifying and unifying goals for the QUM movement.

## Recommendations

The recommendations were developed mainly through review of discussion undertaken in the eight workshops conducted during the conference. Speakers also raised many of the issues considered in the workshops. In fact it was the intent of conference organisers to have speakers stimulate discussion in the workshops by presenting past, present and/or proposed QUM experiences. It was for this reason that the workshop sessions were held towards the end of each day. The program for the first day included speakers that were thought best able to contribute towards the first set of four workshops which were charged with: “Developing priorities for QUM”. It was considered that speakers on the second day would advance ideas to assist those in the second group of four workshops decide on ways of: “Making it (QUM) happen”.

### ***Recommendation: Implementation of proven strategies***

Many QUM initiatives have been trialed, piloted and evaluated and demonstrated to be highly effective strategies for achieving QUM. Some have proven useful tools for highlighting deficiencies in current approaches to improving QUM. Many of these have been successful in gaining stakeholder endorsement and commitment. However despite this strong support, wider implementation has not occurred. Implementation of these proven strategies is vital if the QUM movement is to progress.

### ***Recommendation: Development of partnerships among QUM stakeholders***

Collaboration and development of best practice models in conjunction with all QUM stakeholders is the cornerstone to successful QUM. The majority of QUM strategies have been multidisciplinary in their development but may not have equally engaged or represented the interests of all stakeholders. For example, it was noted that while consumers were usually included, their contribution as partners, rather than as recipients, was often limited. It was felt that there was scope for further development of *partnerships*. In particular, partnerships involving non-government organisations such as consumers, pharmaceutical industry and the media were thought to have been underdeveloped. In addition to contributing to the success of initiatives, QUM partnerships assist in the avoidance of duplication of effort.

***Subrecommendation:*** *Avenues should be created for interested consumer groups to participate as partners in coordinating the implementation of QUM initiatives.*

***Subrecommendation:*** *A forum should be provided for debates on the appropriate balance projected by the media between informing the public, advertising, and compromising public safety through sensational reporting.*

***Subrecommendation:*** *Pharmaceutical industry as a group should be encouraged to pool resources to establish an independent research foundation (This is also relevant to the recommendation to establish a centre for QUM – see later).*

***Recommendation: QUM education for all stakeholders***

It was recognised that education of all stakeholders will be required to address overuse, underuse and inappropriate use of drugs. There was concern that many health professionals with an important stakeholder role in QUM receive very little education about QUM during their training or in their professional life. The type of pharmaceutical-related information they can access is often focussed at individual professions and so does not encourage a collaborative approach. In the post graduate setting it is almost always sponsored by pharmaceutical industry in connection with marketing initiatives and can be highly subject to bias. The establishment of the National Prescribing Service is a positive development to improve this situation but other strategies will assist.

***Subrecommendation: QUM principles must be incorporated into curricula for all health professionals early in their training***

***Subrecommendation: Education of health professionals about QUM must be provided through integrated programs***

Consumers may have limited access to education about QUM. Like many health professionals, they are readily able to obtain pharmaceutical-related information, but this may thwart, rather than support efforts to improve QUM.

***Subrecommendation: The role and responsibility of the media in providing quality information about medicines must be strengthened.***

***Recommendation: Establishment of Queensland Centre for QUM***

One of the greatest challenges facing the QUM movement is dissemination of information about what has and is being done in the area. The QUM map has greatly improved this circumstance. However there is a need for ongoing coordination of activity to minimise duplication and to build on what has already been learnt. It was felt that establishment of a QUM centre would provide needed organisation and support for QUM activities. It was considered that such a centre need not be a physical entity but could be a “virtual” network.

***Recommendation: Identify and support QUM champions***

It was felt that one of the most powerful ways of perpetuating the QUM movement would be through the use of individuals who amplify and perpetuate the QUM message. These QUM champions could speak at professional conferences and community gatherings and liaise with the media.

***Recommendation: Development of guidelines with QUM focus***

Progression of QUM is dependent upon achieving a broader focus than just drugs. QUM principles should be incorporated throughout the continuum of care into whatever best practice models are in operation, eg clinical pathways, guidelines etc. Inclusion of QUM in these systems will foster collaboration, facilitate local ownership and generally enhance communication of the QUM message.

***Recommendation: The system problems that compromise achievement of QUM must be addressed***

It was recognised that certain aspects of the current health care system impede QUM. For example, the different funding bases that exist within the system compromise achievement of continuum of care and also QUM.

***Subrecommendation: Health funding should be coordinated at all government levels***

Currently the system mainly deals with aspects of pharmaceutical care as it does with other types of health care - in a compartmentalised fashion i.e. in terms of drugs (usually number and cost of use). Often structures and processes intended to be incentives to enhance health care act as disincentives to improved QUM. A wider approach encompassing outcomes and quality improvement will assist progression of QUM.

***Subrecommendation: Pharmaceutical aspects of the health care system should be broadened to focus on more than just drugs***

***Recommendation: There should be greater recognition and promotion of the role of information technology in QUM***

Information technology is an opportunity to inform, educate and link health professionals at all levels.

# Conference Program

## DAY 1 - 13 JULY 1999

<b>8.00am</b>	<b>REGISTRATION</b>	
<b>9.00am</b>	<b>WELCOME / OPENING OF CONFERENCE</b>	- Dr R Stable
<b>9.10am</b>	<b>SETTING THE SCENE</b> “What is QUM”	(Chair: Mr A Petrie) - Prof T Smith
<b>9.45am</b>	<b>CURRENT INITIATIVES - Local*</b> A series of invited papers will outline local initiatives developed to facilitate QUM. <b>Presentations will include -</b> Queensland’s Coordinated Care Trial Academic Detailing GP Prescribing Educational Intervention - Ms T McGuire Scope of Nursing Practice Issues Medication Liaison Quality Medication Care	(Chair: Mr A Petrie) - Dr B Wenck - Dr M Cox - Ms T McGuire - Ms R Fox - Ms D Stowasser - Ms J Stokes
<b>10.55am</b>	<b>MORNING TEA</b>	
<b>11.25am</b>	<b>CURRENT INITIATIVES – International &amp; National Approaches*</b> “Disease Management Campaigns in Swedish Pharmacies” “QUM – A Commonwealth Government Perspective” “Disease Management and QUM”	(Chair: Prof S Tett) - Prof J Lars G Nilsson - Dr Rosemary Knight - Dr Peter MacIsaac
<b>12.40pm</b>	<b>LUNCH</b>	
<b>1.25pm</b>	<b>CURRENT INITIATIVES – Local &amp; National*</b> A series of invited papers will present QUM initiatives covering a range of areas. <b>Presentations will include -</b> Education / University Department of Veterans Affairs Health Insurance Commission QUM Mapping Project Third Party Payers Outreach Pharmacy Services QUM Indicators	(Chair: Dr P Pillans) - Prof S Tett - Mr R Peck - Ms L Coper - Dr L Roughead - Ms R Lauchlan - Mrs R Underwood - Mrs T Lynne
<b>2.50pm</b>	<b>AFTERNOON TEA</b>	
<b>3.20pm</b>	<b>INTRODUCTION TO WORKSHOP</b> “Setting Priorities for QUM”	(Chair: Dr C Denaro) - Prof Richard Day
<b>3.45pm</b>	<b>WORKSHOP ONE - “Developing Priorities for QUM”</b> This workshop will explore a variety of approaches to developing priorities for QUM.	
<b>5.25pm</b>	<b>FEEDBACK FROM WORKSHOP GROUPS</b>	(Chair: Dr C Denaro)
<b>5.45pm</b>	<b>CLOSE</b>	
<b>7.00pm</b>	<b>CONFERENCE DINNER</b>	

# Conference Program

## DAY 2 - 14 JULY 1999

<b>8.00am</b>	<b>REGISTRATION</b>	
<b>8.30am</b>	<b>“STRUCTURES” TO FACILITATE QUM*</b>	(Chair: Prof T Smith)
	<b>A series of invited papers will provide details of structures in place, both locally and nationally to facilitate QUM. Areas covered will include -</b>	
	Australian Pharmaceutical Advisory Council,	
	National Medicines Policy	- Prof L Sansom
	National Prescribing Service	- Ms L Weekes
	NSW Therapeutic Assessment Group	- Ms K Kaye
	Queensland Hospitals Drug Advisory Committee - Dr P Roeser	
	Integrated Planning Models	- Dr J Scott
	Initiatives of State Health Departments	- Mr A Petrie
<b>9.50am</b>	<b>AN INTERNATIONAL PERSPECTIVE*</b>	
	“Pharmacoepidemiology and Drug Use Management in Sweden”	
		- Prof J Lars Nilsson
<b>10.40am</b>	<b>MORNING TEA</b>	
<b>11.10am</b>	<b>DEVELOPING A VISION FOR QUM*</b>	(Chair: Dr P Roeser)
	<b>The development of a vision for QUM will be facilitated by a panel of speakers who will present their own vision – where are we now, where we want to be, what are we prepared to contribute and how our aims might best be achieved.</b>	
	Speakers	- Mr Tony Wade - Prof Peter Brooks - Prof Mike Roberts
<b>12.25pm</b>	<b>LUNCH</b>	
<b>1.10pm</b>	<b>WORKSHOP TWO - “Making It Happen”</b>	(Chair: Dr A Roche)
	<b>This workshop will explore avenues for coordinating the various approaches to QUM to ensure the process is efficient and the outcomes are maximised.</b>	
<b>2.40pm</b>	<b>FEEDBACK FROM WORKSHOP GROUPS</b>	(Chair: Dr A Roche)
<b>3.00pm</b>	<b>AFTERNOON TEA</b>	
<b>3.30pm</b>	<b>CLOSING SESSION - “Future Directions”</b>	(Chair: Mr A Petrie)
	<b>A panel of speakers will provide an overview of the conference and discuss future directions – what has been achieved through the conference and how the initiatives should be progressed.</b>	
	Panel	- Prof Lars Nilsson - Prof Tony Smith - Dr John Scott
<b>4.30pm</b>	<b>CONFERENCE CLOSE</b>	

## Biodata for Speakers, Facilitators & Chairs

### **Dr Robert Stable**

Director-General, Queensland Health.

### **Mr Andrew Petrie**

Andrew Petrie graduated from the University of Queensland in 1966. He holds a Fellowship of the Society of Hospital Pharmacists (by examination) and a Fellowship of the Pharmaceutical Society of Australia. Andrew has been active in professional organizations through his career, having held office in Pharmaceutical Society of Australia at both State and National level and at various times contributing to a range of Society of Hospital Pharmacists Committees.

He worked in community pharmacy in Australia and the United Kingdom early in his career. Between 1973 and 1988 he was the Director of Pharmacy and the State Poisons Information Centre at Royal Children's Hospital in Brisbane.

Since 1988 he has been employed in the Queensland Department of Health, initially as Adviser in Pharmacy, and most recently as Manager Pharmaceutical Advisory Services. He is a Clinical Senior Lecturer with the University of Queensland School of Pharmacy.

Pharmaceutical Advisory Services is situated in Public Health Services and has a significant role in providing advice on pharmaceutical matters to and for Queensland Health, a coordinating role in relation to hospital pharmacy services in the State and a firm commitment to Quality Use of Medicines.

### **Professor Tony Smith**

Professor Tony Smith was the foundation Professor of Clinical Pharmacology in the University of Newcastle, New South Wales. He retired from this position in 1997, and has been extensively involved in work with the Commonwealth Government relating to Quality Use of Medicines, with the National Prescribing Service, and most recently the Complementary Medicines Evaluation Committee.

Many of the principles emerging from QUM work in Australia are capable of translation to other countries. Much of his recent work has also involved travelling in the South East Asia and Western Pacific region for WHO (Drug Action Program) and AusAID.

### **Dr Beres Wenck**

Beres Wenck has been a general practitioner for the past 25 years. She has been partner and co-owner of a General Practice since 1978 and has particular interest and skills in paediatrics, counselling and palliative care. A visiting General Practitioner to the Royal Children's Hospital since 1974, Dr Wenck has gained extensive insight into liaison between hospital and community general practice, as well as experience teaching medical students and resident medical officers. She is a GP representative on the Aged Care Advisory panel and the Paediatric Advisory Group for Queensland Health, a member of the Specialist Staff Association at the Royal Children's Hospital and the Medical Advisor to the Australian Multiple Birth Association.

She has been President of Brisbane North Division of General Practice, one of the largest Divisions in Australia, since 1996 and provides leadership and governance to an Executive Committee of general practitioners. Throughout the years as President, Dr Wenck has developed skills in management, leadership, negotiation, corporate governance and facilitation. She has been a leader in the Division's move into

Outcomes Based Funding arrangements with the Commonwealth and has based her success on developing strong relationships and networks with fellow partitioners and key stakeholders in the local community.

Dr Wenck has been Chair of the Board of Directors for TEAMCare Health Pty Ltd (Brisbane North Coordinated Care Trial) since its inception in 1997. This role requires knowledge of health care reform issues and experience in the complexity and sensitivity of negotiations with State and Federal Governments. Dr Wenck has major responsibilities for generating GP support and participation in the Trial, and providing leadership for the Executive and Division through the change process. She is also a member of the RACGP working party for National Coordinated Care Trials.

She has been a member of the AMAQ Council since 1992. As Secretary of the AMAQ from 1995 to 1998, Dr Wenck had the responsibility for complaint resolution and facilitation of the ethics committee. She took on the responsibility of President on June 4<sup>th</sup> 1999.

Throughout her many years as a general practitioner, and involvement with AMAQ, Brisbane North Division of General Practice and TEAMCare Health Coordinated Care Trial, Dr Wenck has developed an impressive portfolio of professional experiences.

#### **Dr Marie Cox**

Marie Cox graduated from the University of Queensland with degrees in Medicine and Surgery. She is a general practitioner and a Fellow of the Royal Australian College of General Practitioners. She is Brisbane North SCAN Medical Officer and a Board member of the Brisbane North Division of General Practice.

NB Deborah Askew, Marie's co-author is the Education Project Officer with TEAMCare Health.

#### **Ms Treasure McGuire**

Treasure McGuire graduated with a Bachelor of Pharmacy from the University of Queensland in 1975. She obtained a Bachelor of Science in 1983 and completed a Postgraduate Diploma in Clinical and Hospital Pharmacy in 1993. Her interest in toxicology and drug information led to her working overseas for eighteen months in the Toxicologisch Centrum, Utrecht, the Netherlands and various U.S. drug and poisons information centres. In 1981, she established the Qld Drug Information Centre at Royal Brisbane Hospital and in 1992, Queensland's first DUE program at Greenslopes Repatriation Hospital. Treasure became Director of Pharmacy at the Royal Women's Hospital, Brisbane in 1994. She is currently Assistant Director of Pharmacy (Education & Information), Mater Hospitals, Brisbane and Conjoint Lecturer, School of Pharmacy, University of Queensland.

#### **Ms Robyn Fox**

Robyn Fox is a Nurse Educator, Royal Brisbane Hospital and Enrolled Nurse Project Consultant for the Health Advisory Unit of Queensland Health. Her co-author, Kate Pearson, is Senior Project Officer – Nursing, Health Advisory Unit, Queensland Health. Both Robyn and Kate have extensive involvement in initiating and directing these programmes.

### **Ms Danielle Stowasser**

Danielle Stowasser, a Melbourne pharmacy graduate, completed her Postgraduate Diploma in Clinical and Hospital Pharmacy in 1994 and is currently a Doctor of Philosophy candidate at the University of Queensland. Danielle's research is centred on evaluating functional health status gains achieved by improving communication between primary health care providers and hospitals, this research being part of the PHARM funded Medication Liaison Project, on which she was the Senior Research Officer from 1995-7. Utilising the findings of the project, Danielle was instrumental in establishment of the first Medication Liaison Service, including a pharmacist position in the Pre-Admission Clinic. Danielle currently holds this position (Senior Pharmacist – Patient Services) at the Princess Alexandra Hospital.

### **Ms Julie Stokes**

Julie Stokes is a clinical pharmacist working in the Department of Medicine at the University of Queensland. She started her career as a hospital pharmacist becoming a drug information specialist as Assistant Director of Pharmacy at the Queensland Drug Information Centre. Julie is currently undertaking a PhD concerning the optimisation of medication care in long term care facilities, and the needs, process and types of intervention. She is also manager of the Quality of Medication Care group where she has been working since 1993. This multidisciplinary research group has conducted a range of intervention studies aimed at improving the quality use of medicines by the elderly. Julie has worked in both the evaluation side of the studies and at the coal face, providing clinical pharmacy and education services to long term care facilities, as part of the interdisciplinary care team.

### **Professor Sue Tett**

Professor Susan Tett is Head of the School of Pharmacy at the University of Queensland. Sue is a member of PHARM and chairs the PHARM Pharmacy Subcommittee. Sue has published extensively in research areas relating to quality use of medicine. As well as undergraduate education (to be discussed), Sue also has educational interests in the post-graduate and continuing education arenas. Sue is active in many professional associations and was recently awarded the 1999 Australian Pharmacist of the Year award.

### **Professor J Lars Nilsson**

Professor Lars Nilsson is chairman of the board of NEPI, which is the Network for Pharmacoepidemiology, Stockholm, Sweden. He is a pharmacist and obtained his PhD in Medicinal Chemistry from the University of Uppsala, Sweden in 1969.

Prof Nilsson has extensive experience in the leadership and management of large pharmaceutical organisations. These include university research, pharmaceutical company research, pharmacy management in hospital and community environments, pharmaceutical production management and corporate management. He also has considerable academic experience having been involved in research and postgraduate teaching and supervision of numerous PhD students. His academic work has resulted in more than 200 scientific publications.

Professor Nilsson is married to Dr Inger Nilsson, also a pharmacist, and they have two children.

### **Dr Rosemary Knight**

Dr Rosemary Knight is the Director of Co-ordination and Education in the Pharmaceutical Benefits Branch of the Commonwealth Department of Health and Aged Care. She is responsible for two main areas in the management of the Branch:

- The Quality Use of Medicines Program which develops and implements policies and initiatives including responsibility for the Pharmaceutical Education Program and the PHARM Committee;
- The coordination area which includes ministerial advice and briefings on all policy and programs relating to pharmaceutical issues.

Dr Knight was previously responsible for the General Practice Evaluation and Research Program. She initially trained and taught in several universities as an academic in the area of health behavioural sciences. Dr Knight has over 10 years experience in health policy and research over a broad range of areas including general practice, hospital and community work, public health and cancer screening programs and policies across both State and Commonwealth jurisdictions.

### **Dr Peter MacIsaac**

Dr MacIsaac is a senior medical advisor with the Pharmaceutical Benefits Branch of the Commonwealth Department of Health and Aged Care. Prior to joining the public service worked as a rural General Practitioner, and has held academic appointments in General Practice, Rural Health and Epidemiology.

### **Dr Peter Pillans**

Peter Pillans is Director of Clinical Pharmacology at the Princess Alexandra Hospital.

### **Mr Robert Peck**

After completing Pharmacy in Melbourne, Bob Peck spent 28 years in the Australian Army and Royal Australian Air Force in a wide range of medical, logistic, command and staff appointments. He ended his Defence career being responsible for clinical pharmacy for the Australian Defence Force and as Director of Health Information Policy and Planning. He has chaired the Standards Australia Committee which has developed the Australian Standard for Electronic Prescriptions, he has represented Australia and co-chaired UN/EDIFACT meetings in Health Messaging in Brazil and Singapore and he is a member of the Pharmacy Electronic Commerce and Communication Council. He is currently the Director of Medication Management in the Department of Veterans' Affairs and is responsible for the Repatriation Pharmaceutical Benefits Scheme (RPBS).

### **Ms Leone Coper**

Leone Coper holds a Bachelor of Pharmacy (University of Sydney) and a Bachelor of Science (University of NSW) with majors in psychology and in History and Philosophy of Science. She is currently completing a Master of Business Administration (University of New England).

Her professional memberships include:

- Fellow of the Pharmaceutical Society of Australia (Fellows are judged to have made an "outstanding contribution to the advancement of the pharmacy profession or to the art and science of pharmacy")
- Australian College of Pharmacy Practice
- International Union for Health Education
- Australian Society of Behavioural Health and Medicine

- Association for Pharmacoeconomics and Outcomes Research

Her current appointments include:

- National Prescribing Service Prescribing Initiatives and Feedback Working Group
- HIC observer PHARM Committee
- HIC observer APAC
  - Chair Quality Use of Benzodiazepines Working Party
  - Member Communications Subcommittee
  - Member Industry Committee
- Standards Implementation and Evaluation Working Party

Her current position is with the HIC as Manager Policy and Business Development Branch and Senior Pharmaceutical Adviser. (The HIC is the Commonwealth Government agency that administers Australia's health programs including Medicare, the pharmaceutical Benefits Scheme, the Practice Incentives Program and the Australian Childhood Immunisation Register).

Leone has established effective relationship management with health service providers and government departments, building credibility for the HIC role in health information management. She designed the strategic approach for the HIC's role in encouraging and supporting evidence based best practice, including an educationally effective 3 stage feedback program and Australia's first National training program for Educational Visitors.

Leone is acknowledged as a prime catalyst for the change in pharmacy practice, from product focus to advice and outcome focus, which has occurred in Australia in recent years. She designed and implemented a strategy and the products which were needed to equip and encourage community pharmacists for their role in public health and primary pharmacy care and also assisted a number of overseas pharmacy organisations to implement this model of pharmacy practice.

### **Dr Libby Roughead**

Libby Roughead is a Research Fellow at the School of Pharmacy and Medical Science University of South Australia. She worked as both a hospital and community pharmacist after completing her pharmacy degree. She has postgraduate qualifications in health promotion and health sciences. Her research interests include national medicinal drug policy, methods for improving use of medicines, pharmacoepidemiology and pharmaceutical promotion.

### **Ms Roberta Lauchlan**

Roberta Lauchlan is General Manager of Provider Relations at MBF Australia Ltd. She joined MBF in 1996. In her role as General Manager Provider Relations she is responsible for coordinating MBF's relationships with health care providers nationally.

Roberta is a pharmacy graduate of the University of Sydney. She has spent most of her career working in hospital pharmacy and was Director of Pharmacy of St Vincent's Hospital, Sydney for over 15 years. At St Vincent's she was involved in a number of strategic planning exercises on behalf of St Vincent's Hospital and the Sisters of Charity.

Roberta has contributed to a number of national research and development projects, including quality use of medicines initiatives and casemix costing and classification. She is a member of the PHARM Committee.

### **Mrs Robyn Underwood**

Robyn graduated from the University of Queensland with a Bachelor of Pharmacy in 1974, and gained a Postgraduate Diploma in Pharmacology in 1979. Robyn has over 20 years experience in hospital and community pharmacy in Australia, New Zealand and the United Kingdom, and is currently Director of Pharmacy, Mt Isa Base Hospital. Since returning to Australia in 1986, Robyn has worked mainly in hospital pharmacy in Queensland. In 1994, the transfer of Greenslopes Repatriation Hospital to private enterprise saw Robyn assess the direction of her professional life, and the relocation of her family to Mt Isa. Some would say a radical change, maybe it was. Funding to enable the setting up of Outreach Pharmacy Services in the Northwest area of Queensland was gained in 1997, thus adding this very challenging direction to her professional life.

Her interests outside of work are travelling and meeting people.

### **Mrs Teresa Lynne**

Since graduating from the University of Queensland, Teresa Lynne has had a diverse career holding positions in Community and Hospital Pharmacy and working as a pharmacist in Queensland, Western Australia, England and Canada. On return to Brisbane, she completed a post graduate diploma in clinical pharmacy and is currently writing up her PhD thesis on the topic of Multidisciplinary Pharmaceutical Care in Nursing Homes. Currently Teresa holds the position of Clinical Support Pharmacist at Queensland Health and coordinates a range of Quality Use of Medicine activities including the provision of clinical support to the Queensland Hospitals Drug Advisory Committee. Teresa has involvement with postgraduate teaching at the School of Pharmacy, University of Queensland and with a range of research activities.

### **A/Prof Charles Denaro**

Associate Professor, Department of Medicine, University of Queensland and Director of Internal Medicine, Royal Brisbane Hospital.

### **Professor Ric Day**

Richard Day is a Professor of Clinical Pharmacology at UNSW and St Vincent's Hospital Sydney and Director of Clinical Pharmacology and Toxicology at St Vincent's Hospital. He has a clinical practice in Clinical Pharmacology and Rheumatology and also a pathology (Clinical Pharmacology and Toxicology) practice at St Vincent's Hospital. He was Chairman of the Research Ethics Committee at St Vincent's Hospital (1990-96) and a member of the UNSW Ethics Committee. He sits on the Training Awards Committee and sat on the Research Ethics Subcommittee of the NH&MRC (1995-97). He was chairman of the Review of the Clinical Trials Notification Scheme for the Federal Department of Health's Therapeutics Goods Association (1993) and has recently (1996/7) chaired a review of the Pharmaceutical Services Branch of the NSW Department of Health. He recently joined the Board of the MBF.

He has a particular interest in promoting the quality use of medicines in the community which finds expression in membership of the Federal Government's PHARM Committee ((PHARM: 1991-93); the PHARM Industry and PHARM Consumer task forces; co-investigator for the TREND project to enhance prescribing standards in General Practice; Chairmanship of the St Vincent's Hospital Drug Committee; co-director of the NSW Medicines Information Centre (MIC); membership of the Australian Drug Evaluation Committee (ADEC: 1991-96);

independent member of the Australian Pharmaceutical Manufacturer's Association (APMA) Code of Conduct Subcommittee and Chairmanship of the NSW Therapeutic Assessment Group (NSWTAG).

His research interests lie in the mechanism and pharmacological treatments of the rheumatic diseases which have ranged across studies in inflammation, musculoskeletal pain, NSAIDs, antirheumatic drugs, and hypouricaemic therapies. These interests are reflective of his clinical practice in rheumatology and clinical pharmacology.

Professor Day has developed a number of innovative approaches to teaching therapeutics to undergraduate medical students and extends his teaching activities to involve hospital doctors and general practitioners.

### **Professor Lloyd Sansom**

Lloyd Sansom is Head of the School of Pharmacy and Medical Sciences at the University of South Australia. Lloyd serves on many professional associations concerning Pharmacy and related health areas. He is Chairman of the Australian Pharmaceutical Advisory Council; a member of the Therapeutic Goods Standards Committee; a member of the Pharmaceutical subcommittee of the Australian Drug Evaluation Committee; and co-Chairman of the Consumer Product information Committee of the Department of Health. As a co-leader of the Drug Disposition and Metabolism Research Group, Lloyd has published over 90 articles for refereed journals and is a regular contributor at conferences and workshops. In addition Lloyd is the current editor of the Australian Pharmaceutical Formulary and Handbook.

### **Ms Lynn Weekes**

Lynn Weekes is the Chief Executive Officer of the National Prescribing Service. She has a background in clinical and research pharmacy and was previously Executive Officer of the NSW Therapeutic Assessment Group. Lynn has a long-standing interest in promotion of quality prescribing and use of medicines. She has broad experience of the education, behaviour change and quality assurance processes which can lead to more appropriate use of medicines.

### **Ms Karen Kaye**

Karen Kaye holds a Bachelor of Pharmacy and a Diploma in Hospital Pharmacy from the University of Sydney. She has worked as a clinical pharmacist in a number of major teaching hospitals in Australia and the UK, specialising in oncology pharmacy. Her hospital experience includes senior positions in manufacturing and clinical research. In addition, she has held positions in community pharmacy, the pharmaceutical industry, the professional organisations of pharmacy and as a hospital based practitioner-teacher. She was Director of Pharmacy at Royal Prince Alfred Hospital for nine years before becoming Executive Officer for the NSW Therapeutic Assessment Group in September 1998. Karen's major interests include clinical education, use of information technology in health and quality use of medicines.

### **A/Prof H Peter Roeser**

Chair, Queensland Hospitals Drug Advisory Committee.

### **Dr John Scott**

Dr John Scott is the State Manager of Queensland Health's Public Health Services.

Dr Scott has a Bachelor of Medicine and a Bachelor of Surgery from the University of Queensland, a Diploma of Obstetrics from the Royal Australian College of Obstetricians and Gynaecologists, a Bachelor of Economics from the University of New England, and a Masters of Applied Epidemiology from the Australian National University. He also holds Fellowships of the Royal Australian College of General Practitioners, Faculty of Public Health Medicine of the Royal Australian College of Physicians, and the Australian College of Tropical Medicine.

Dr Scott has experience in the hospital setting, having worked as a Resident Medical Officer at the Royal Brisbane Hospital and a Registrar at Toowoomba General Hospital. He has worked for 11 years as a rural general practitioner in North Queensland and has done a brief stint with the Royal Flying Doctor Service out of Cairns.

In 1992, Dr Scott was appointed as coordinator of the newly developing Population Health Unit Network in Queensland. In August 1995 he was appointed as Assistant Regional Director, Health Services for the Brisbane North Regional Health Authority, and from October 1996 was appointed as State Manager of Public Health Services in Queensland Health.

Dr Scott has retained an interest in general practice and is currently the Queensland Faculty censor for the Royal Australian College of General Practitioners.

### **Mr Tony Wade**

Tony Wade is a Brisbane management consultant, health researcher and consumer advocate.

Trained as a registered nurse, he has worked over the last twenty years in the public, private and community sector in Australia and New Zealand, in roles from line worker to chief executive office. He holds a BA from Flinders University and a Masters degree in Administration at Griffith University.

Tony is currently a member of the Pharmaceutical Health and Rational Use of Medicines (PHARM) Committee and a number of other health sector working groups. He has been a board member of several national consumer organisations including Consumer's Health Forum (CHF), and the Australian Council of Social Service (ACOSS).

### **Professor Peter M Brooks**

Peter Brooks was appointed Executive Dean, Faculty of Health Sciences, The University of Queensland in 1998.

He has had continuous NH&MRC funding since 1980 and has over 300 publications in the areas of rheumatic diseases, drug therapy and psychological aspects of chronic disease.

His current research projects revolve around epidemiology of rheumatic diseases, development of new therapeutic strategies for treatment of rheumatic diseases and psychological aspects of musculoskeletal pain.

His qualifications include:

- MBBS (Monash), 1967
- MD (Monash), 1977
- FRACP (Fellow of the Royal Australian College of Physicians), 1975
- FAFRM (Fellow of the Australasian Faculty of Rehabilitation Medicine), 1992
- FAFPHM (Fellow of the Australasian Faculty of Public Health Medicine), 1992
- MD Hons Causa (Lund), 1997

His postgraduate experience includes:

- Clinical Chief, Metabolic, Orthopaedic and Gerontology/Neurosciences Institute, St Vincent's Hospital 1995–97
  - Professor of Medicine, Head of the Medical Professorial Unit, University of New South Wales at St Vincent's Hospital 1991–98
  - Florance and Cope Foundation Professor of Rheumatology, The University of Sydney and Head of the Rheumatology Department, Royal North Shore Hospital 1983–91
  - Senior Lecturer in Medicine/Associate Professor, School of Medicine, Flinders University of South Australia 1978-82
  - Lecturer/Senior Lecturer in Medicine, University of Tasmania 1975–78
  - Research Registrar, Centre for Rheumatic Diseases, Glasgow, Scotland 1974–75
- His current and past National and International positions include:
- Member of St Vincent's Campus Regional Board of Directors 1996-98
  - Member of the Board of St Vincent's Hospital 1995-96
  - Chairman of the Scientific Advisory Committee, NH&MRC Clinical Trials Centre 1990-97
  - Member of the Board of Directors, Queensland Institute for Medical Research 1994-97
  - Member of the Career Awards Committee, NH&MRC 1994-
  - Member, Executive Committee of the International League Against Rheumatism 1993-
  - Chairman of the Standing Committee on Clinical Trials and Clinical Studies – International League Against Rheumatism 1993-
  - Member of the Pharmaceutical Benefits Advisory Committee 1992-95
  - Councillor and Honorary Secretary, Royal Australasian College of Physicians 1985-95

### **Professor Michael Roberts**

Michael Roberts graduated in pharmacy from the University of Adelaide and participated in the inaugural Diploma in Hospital Pharmacy at the University of Sydney in 1971. He was awarded his Master of Science and Doctor of Philosophy in pharmacy for the University of Sydney and became a Lecturer and then Senior Lecturer in Pharmacy at the University of Tasmania. In 1985, aged 35, he accepted the position of Professor and Chairman of Pharmacy at the University of Otago in New Zealand. In late 1989, at the encouragement of Susan Pond in Medicine at Princess Alexandra Hospital (PAH), he returned to Australia to take up a research professorship in the Department of Medicine at PAH. He is currently an NHMRC Senior Principal Research Fellow (that is a personal chair in the NHMRC system). He has published more than 200 papers in therapeutics and is an active researcher in both experimental therapeutics and in quality use of medicines.

### **Dr Anne Roche**

Director, Queensland Alcohol and Drug Research and Education Centre.

### **Ms Mary Murray**

Consulting Pharmacist

### **Mr John O'Brien**

Principal Project Officer, Health Outcomes Unit, Queensland Health.