

Rural and Remote Essential Medicines List (RREML) guideline

Queensland Health Guideline

1. Purpose

The Rural and Remote Essential Medicines List (RREML) supports the National Safety and Quality Health Service (NSQHS) Medication Safety Standard, and related departmental guidelines and policy, to assist the management of a medicines inventory for Level 1 and 2 rural and remote facilities under the ***Clinical Services Capability Framework (CSCF) for public and licensed private health facilities v3.2 (2014)***.

The RREML aims to improve the quality and safety of care delivered to rural and remote Queenslanders by providing:

- a list of medications to manage most clinical presentations expected within Level 1 and 2 CSCF facilities in accordance relevant health management protocols and clinical care guidelines
- structure to support rural and remote clinicians and pharmacy staff to manage medicines inventories
- information about medicines availability to the Queensland Health rural and remote workforce and key stakeholders
- consistency of evidence based practice to a mobile workforce promotes standardisation and benefits patient safety and quality outcomes

2. Scope

This guideline provides information for all Queensland Health employees (permanent, temporary and casual) and all organisations and individuals acting as its agents (including Visiting Medical Officers and other partners, contractors, consultants and volunteers) working in rural and remote health care facilities throughout Queensland with emergency services

All medicines in the RREML are a subset of the Queensland Health formulary, the List of Approved Medicines (LAM) that are approved by the Queensland Health Medicines Advisory Committee (QHMAC)

Level 1 or 2 facilities are required to monitor and adjust medicines inventory, in consultation with the local Hospital and Health Services Pharmacy, based on their local circumstances including access to a community pharmacy and community needs (e.g. patients taking medicines that are Highly Specialised Drugs)

3. Relevant resources

- [Rural and Remote Essential Medicines List \(RREML\) guide](#)
- [Rural and Remote Emergency Services Standardisation \(RRESS\) guidelines](#)
- [Primary Clinical Care Manual \(PCCM\)](#)
- [Chronic Conditions Manual \(CCM\)](#)
- [Adult Sepsis Pathways](#)
- [Paediatric Sepsis Pathway](#)
- [Queensland Neonatal and Maternity Guidelines](#)
- [Antidote stocking recommendations Queensland Poisons Information Centre](#)
- [List of Approved Medicines](#)

4. Roles

4.1. Maintenance

- 4.1.1. The Office of Rural and Remote Health develop three key rural and remote resources; the PCCM, the CCM and the RRESS guidelines. Once these resources have been updated and quality reviewed and approved by an independent pharmacist, the final medicines spreadsheet is sent to the SRPAG Chair (or delegate)
- 4.1.2. The RREML is then collated by the SRPAG RREML working group, using the above approved medicines spreadsheets, with consideration to the:
 - a) Antidote stocking recommendations Queensland Poisons Information Centre and
 - b) Queensland Sepsis Pathways critical antimicrobials
- 4.1.3. Process for endorsement and circulation to QDOPSA:
 - a) Revised version of the RREML is circulated for consultation and endorsement to SRPAG
 - b) Revised version escalated to QDOPSA by SRPAG Chair, for consultation and endorsement. Once approved, to publish link on QDOPSA website
 - c) Forward published link of revised version to QHMAC-Secretariat@health.qld.gov.au for updating link as subformulary on LAM website
 - d) Forward finalised version to ORRH to update ORRH website, for external access

4.2. Rural and Remote Facility Directors of Nursing (or delegate with pharmacy responsibility)

- 4.2.1. Ensures the RREML medicines are available in the facility pharmacy
- 4.2.2. Reviews and reorders medicines through local pharmacy procurement arrangements
- 4.2.3. Advises the Hospital and Health Service Pharmacy of local quantity requirements using inventory management systems and reports
- 4.2.4. Monitors stock on hand to ensure medicines are in date and quantities are appropriate

4.3. Hospital and Health Service Pharmacy

- 4.3.1. Assists facilities to maintain and establish stock holdings for RREML medicines, including use of inventory management systems
- 4.3.2. Ensures clinicians working in their jurisdictions are aware of, and have access to, the RREML and local medicines management policies (e.g. the facility/HHS Substance Management Plan)
- 4.3.3. Supports facility clinicians with inventory management and ensures products listed on the RREML are available for supply through local ordering systems (e.g. iPharmacy)
- 4.3.4. Where required, assists with the ordering or procurement of medicines to facilities
- 4.3.5. Provides advice on local quantity stockholdings and minimum/maximum levels
- 4.3.6. Advise chronic conditions medicine according to private pharmacy access
- 4.3.7. Seeks specialised advice on area specific antivenom requirements
- 4.3.8. Advises clinicians of alternative medicines in the event of supply issues e.g. shortages
- 4.3.9. Advises pathways to access medicines that have specialised supply arrangements e.g. vaccines that are ordered through the Queensland Health Immunisation Program

5. Consultation

Review of this document is undertaken by a core group of pharmacists and rural and remote clinicians from:

- Queensland Directors of Pharmacy Senior Assembly (QDOPSA)
- Statewide Rural Pharmacists Advisory Group (SRPAG)

- Rural and Remote Clinical Services Support Group (RRCSSG)
- Royal Flying Doctors Service (RFDS) Queensland Section
- Retrieval Services Queensland (RSQ)
- Telehealth Emergency Management Support Unit (TEMSU)
- Queensland Statewide Antimicrobial Stewardship (QSAMSP)
- Office of Rural and Remote Health (ORRH)
- Rural and Remote Clinical Network
- Clinical Information Systems Support Unit (CISSU)
- Public Health and/or Communicable Diseases Branch

6. Document approval details

6.1. Document custodian

6.1.1. Chair of Statewide Rural Pharmacist Advisory Group

6.2. Approval officer

6.2.1. Sophie Paviour, SRPAG Chair, Director of Pharmacy, CWHHS

6.3. Dates

6.3.1. Approved on 11th Feb 2025

6.3.2. Next review 2028

7. Version control

Version No.	Date	Modified by	Comments	Approved by
RREML_guide_v1.0	16/1/25	Sean Booth and Sophie Paviour	Early draft	NAD
RREML_guide_v1.1	21/1/25	Sean Booth and Sophie Paviour	Early draft	NAD
RREML_guide_v1.2	21/1/25	Sean Booth and Sophie Paviour	Early draft	NAD
RREML_guide_v1.3_final draft	31/1/25	Sean Booth and Sophie Paviour	For wider review	NAD
RREML_guide_v1.4_final draft	5/2/25	Toby Wicks	Amendments	NAD
RREML_guide_v1.6_final draft	10/2/25	Andrew Jagels and Vicki Mackintosh	Amendments	NAD
RREML_guide_v1.7_APPROVED	11/2/25	Sophie Paviour, SRPAG Chair	Amendments	SRPAG
RREML_guide_v1.8_APPROVED	26/2/25	QDOPSA	Amendments	QDOPSA
RREML_guide_v1.9_APPROVED	27/6/25	Sophie Paviour, SRPAG Chair	Amendments	QDOPSA
RREML_guide_v2.0_update	1/9/25	Sophie Paviour, SRPAG Chair	Amendment	QDOPSA