

Questions from Ms Dawn Walker MLC
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Nepean Hospital

1. In 2008, Nepean Hospital was reclassified from a major trauma centre to a regional trauma centre. Are there plans to re-classify it as a major trauma centre?

(a) If not, why not?

(b) What is the time-line for assessing whether Nepean Hospital will be returned to a major trauma centre status?

Response

Trauma protocol in NSW is focused on ensuring critically injured patients are brought as quickly as possible to the highest level of care to achieve their greatest chance of early survival and recovery. This can see patients bypassing the closest geographic hospital. Under the former Labor government, the 2009 NSW Trauma Plan was developed to ensure NSW is able to provide the highest standards of care. The implementation of the plan saw Nepean Hospital reclassified as a Regional Trauma Centre. Nepean Hospital's role as a regional trauma centre is an important component of the NSW Trauma Plan and sees Nepean Hospital provide treatment for patients with mild to moderate injuries.

There are no plans to reclassify the Nepean Hospital.

The Trauma Patient Outcome Evaluation (November 2016) and the Critical Care Acute Trauma Emergency data linkage (October 2017) analysis demonstrates that the NSW Trauma System is operating effectively in reducing deaths for major trauma patients. This supports the principle that critically injured patients are best treated and have improved survival outcomes when treated at one of the Major Trauma Centres.

2. Is the Minister aware that this reclassification has had a significant impact on paramedics and ambulance services in the Nepean region?

(a) What is being done to address that fact that Nepean paramedics are often travelling an hour to Westmead Hospital, when Nepean is the closer hospital, because of the current T1 trauma protocol?

Response

The NSW Ambulance T1 Major Trauma Protocol is governed by the NSW Trauma Services Plan. The Trauma Triage Tool in T1 was developed in collaboration with the NSW Institute of Trauma and Injury Management (ITIM), Ministry of Health Statewide Services Development Branch, NSW Health Critical Care Network and Trauma Service representatives.

NSW Ambulance protocol T1 is currently under review as part of the NSW Ambulance three-year evidence informed protocol review cycle. The protocol T1 review is specifically assessing the clinical criteria that will assist paramedics in the identification of major trauma patient cohorts to ensure these patients are transported to the most appropriate trauma service. The revised protocol T1 is scheduled to be implemented on 1 July 2018.

3. How many times in the last year have paramedics had to take patients to Westmead Hospital, instead of Nepean, despite Nepean Hospital being the closer hospital?

Response

All patients who meet the major trauma triage criteria and who are within the designated 60 minute travel time radius would have been transported to Westmead Hospital in accordance with the NSW Trauma Services Plan.

E-cigarettes

4. Since 2015, what further steps have been taken to regulate the sale and use of e-cigarettes?

(a) What steps have been taken to regulate the advertisement of these products?

(b) What steps have been taken to restrict the marketing of these products to children and young people?

Response

The *Public Health (Tobacco) Act 2008* and the *Public Health (Tobacco) Regulation 2016* describe the tobacco and e-cigarette retailing laws in NSW.

The *Public Health (Tobacco) Act 2008* prohibits the sale and supply of e-cigarettes and e-cigarette accessories to and on behalf of minors. Under the *Public Health (Tobacco) Act 2008*, NSW Police have the power to seize e-cigarettes in the possession of a minor. The Act also bans the advertising of e-cigarettes, and the display of e-cigarettes and e-cigarette accessories where they are sold.

The NSW Government has taken the following steps since 2015 to regulate the advertising, display and sale of e-cigarettes:

- Extended advertising bans on tobacco products packaging to e-cigarettes and e-cigarette accessories.
- Amended sales to minors signs to apply to e-cigarettes
- Extended regulations about the display of retail prices (on price boards and price tickets) to e-cigarettes
- Introduced on the spot fines for the display of e-cigarettes and e-cigarette accessories where they are sold
- Introduced on the spot fines for selling e-cigarettes and e-cigarette accessories from more than one location on a retail premise.

NSW Health inspectors monitor compliance with the *Public Health (Tobacco) Act 2008* and *Public Health (Tobacco) Regulation 2016*.

More information on e-cigarette retailing laws is available at the NSW Health website www.health.nsw.gov.au/tobacco/Pages/tobacco-retailing-laws.aspx

5. According to a fact sheet produced by the NSW Department of Health, the limited available evidence shows the safety of electronic cigarettes, liquids and aerosols cannot be guaranteed for users and people exposed to them. As such, why are these products allowed to be used in areas where a normal cigarette could not be smoked?

6. Why are e-cigarettes not treated in the same way as cigarettes when designating 'smoke-free' areas under that NSW Smoke-free Environment Act 2000?

(a) Does this Government consider the emissions from e-cigarettes as the equivalent of the area being smoke-free?

7. Has this Government undertaken any studies or research as to the potentially harmful effects of e-cigarettes?

(a) What is being done to curb this potential harm?

9. In Sydney's Neutral Bay, there is a café called "Misty Vapes" which is dedicated to the sale of vaping and e-cigarette products, including a dedicated lounge where patrons can "vape" together. Does the Government have concerns over the potentially harmful health effects of such an establishment?

(a) Why is café full of e-cigarette fumes considered to be in compliance with the Smoke-free Environment Act?

(b) Is the Government concerned establishments like this will encourage people to take up "vaping"?

Response for questions 5, 6, 7 and 9

NSW Health is committed to monitoring the emerging evidence about health risks associated with the use of e-cigarettes and responding accordingly. NSW Health closely monitors the level of e-cigarette use and uptake, particularly in non-smokers and young people.

The NSW Government is protecting children and young people from the potential risks of e-cigarettes through bans on sales to minors and restrictions on e-cigarette promotion and display. The use of e-cigarettes in cars with children aged under 16 is banned under the *Public Health (Tobacco) Act 2008*.

Currently, the *Smoke-free Environment Act 2000* does not ban the use of e-cigarettes in smoke-free public places. Individual establishments and workplaces can develop their own policies to ban people from using e-cigarettes on their premises.

The NSW Chief Health Officer recently convened an expert panel on the health risks associated with use of e-cigarettes, and is currently considering the recommendations of that panel, particularly about regulating the use of e-cigarettes in public places. NSW Health is actively engaged with research and studies on e-cigarettes. NSW Health undertook a systematic review in 2016 that summarises the potential health risks from passive exposure to electronic cigarette vapour. It is available at www.dx.doi.org/10.17061/phrp2621617

8. The Therapeutic Goods Administration has not assessed electronic cigarettes for quality, safety or performance and says "they should not be considered a safe product". What steps are being taken for these products to be assessed by the TGA?

Response

The Commonwealth's *Therapeutic Goods Act 1989* and associated Regulations establish national regulatory controls that ensure the timely availability of therapeutic goods. The sale of liquid nicotine, including in e-liquids and in e-cigarettes, is illegal without approval from the

NSW Ministry of Health or the Therapeutic Goods Administration. No approvals have been issued for any e-cigarette products containing nicotine.

On 23 March 2017 the Therapeutic Goods Administration (TGA) published its final decision regarding scheduling of nicotine. An application was made to exempt nicotine from Schedule 7 at concentrations of 3.6 per cent or less for self-administration with an electronic nicotine delivery system for the purpose of tobacco harm reduction. In considering factors including the status of evidence, as well as Australia's obligations under the WHO Framework Convention on Tobacco Control for the prevention and reduction in nicotine addiction, the TGA concluded that it was not appropriate to exempt these products.

Golden Staph

Question 10. What is the Government doing to address the over-prescription of antibiotics?

Response

This question is mainly focused on the issue occurring in the community which should be referred to the Commonwealth for response.

All NSW public hospitals have programs to support correct use of antibiotics (called "antimicrobial stewardship" programs) that meet national accreditation standards. These antimicrobial stewardship programs involve developing and promoting prescribing guidelines so that the correct antibiotics, at the right dose and for the right length of time, are used when patients are treated for infections. Hospitals also keep some antibiotics in reserve for special situations where drug resistance is more likely. Other actions include:

- Timely review of antibiotics when test results are available to make sure patients are on the most suitable treatment
- Reviews or checks of prescribed antibiotics by doctors or pharmacists with a specialised knowledge of infections
- Keeping track of antibiotic usage and resistance over time, and looking into any concerning trends
- Giving doctors and departments useful reports on antibiotic prescribing to guide their practice
- Keeping doctors, nurses, pharmacists and patients educated and up-to-date on how to use antibiotics properly and according to evidence.

Question 11. What strategies are these to address the increasing levels of drug resistant golden staph in the community?

(a) What strategies are there in place to stop the levels increasing?

Response

This question is mainly focused on the issue occurring in the community which should be referred to the Commonwealth for response.

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Strategies to reduce and prevent antibiotic resistance are needed in all human health sectors (including the community, aged care facilities and hospitals), as well as animal health and agriculture sectors, to reduce the overall impact of antibiotic resistance. These strategies include responsible use of antibiotics, improved surveillance (or monitoring) of drug resistance, and preventing infections (for example, through vaccination and cleaning your hands).

All NSW hospitals collect and monitor their rates of antibiotic use and resistance; this ensures patients are prescribed the most suitable antibiotic for their infection, taking into account local drug resistance patterns. The Clinical Excellence Commission supports and promotes national initiatives that help NSW hospitals collect and analyse their local data.