An Australian National Prompt Response Network for Emerging Drugs

PENELOPE L HILL1,2,3, KRISTA J SIEFRIED1,2,4, STEPHANIE TZANETIS5, AMY PEACOCK2,6, SIMON LENTON7, NADINE EZARD1,2,4 on behalf of the Prompt Response Network

1National Centre for Clinical Research on Emerging Drugs (NCCRED), Sydney, Australia, 2National Drug and Alcohol Research Centre (NDARC), University of New South Wales (UNSW), Sydney, Australia, 3Behaviours and Health Risks Program, Burnet Institute, Melbourne, Australia, 4Alcohol and Drug Service, St Vincents Hospital, Sydney, Australia, 5Australian Injecting & Illicit Drug Users League, Canberra, Australia, 6School of Psychological Sciences, University of Tasmania, Hobart, Australia, 7National Drug Research Institute (NDRI), Curtin University, Perth, Australia

Presenter’s email: <penny.hill@unsw.edu.au>

Background: The rapid emergence of new psychoactive substances (NPS) is a key public health challenge in Australia and internationally. Recent clusters of drug toxicity in Australia highlight that the lack of a well-coordinated response leads to sector-wide communication gaps, making the development of a Prompt Response Network (PRN) an urgent priority in Australia.

Description of Intervention: The National Centre for Clinical Research on Emerging Drugs (NCCRED) conducted a collaborative, co-design process with existing jurisdictional networks, clinicians, toxicologists, policy-makers and peer organisations to develop the PRN. The key aims were to understand what information can and should be shared, and how. This process identified the components necessary to ensure a broad health-focused national network; that would support, enable and coordinate the efforts of existing and emerging regional and specialist networks, while respecting and not duplicating established processes and existing efforts.

Implementation: The stakeholder mapping and co-design processes found the implementation of two main components for an effective prompt response network to be necessary. First: convening a broad national community network of stakeholders involved with regional and national networks to share information, insights and opportunities. Second: a custom-built digital platform to provide a national dashboard of real-time incidents utilising minimum de-identified data from contributing jurisdictional agencies.

Conclusion and Next Steps: Through the iterative process employed to establish the Network and associated online platform, an evolving network has been established. The register will provide an opportunity to support a national response in the event of a cluster of incidents across multiple jurisdictions.

Implications for Practice or Policy: The mission of the PRN is to coordinate participants to share information and knowledge for timely public health responses to reduce the harmful effects of emerging drugs. Implementation and expansion of the PRN will lead to coordinated and evidence-based information being shared cross-jurisdictionally and to the public.

Disclosure of Interest Statement:
The authors declare that they have no relevant competing interests. This work was funded by NCCRED, who receives their funding from the Commonwealth Department of Health.