

Medicines, Poisons and Therapeutic Goods Act

Part 7.3 Scheduled Substances Clinical Advisory Committee

Division 1 Establishment, functions and powers

260 Establishment

The Scheduled Substances Clinical Advisory Committee is established.

261 Functions

- (1) The Committee's function is to give advice and make recommendations on issues relating to dealing with Scheduled substances.
- (2) Without limiting subsection (1), the Committee has the following functions:
 - (a) to advise the CHO about the competency required by doctors to supply Scheduled substances;
 - (b) to recommend to the CHO appropriate training programs for doctors who supply Scheduled substances;
 - (c) to advise the CHO about the treatment of persons (whether generally or a particular person) with Scheduled substances;
 - (d) to advise the CHO about issuing, varying, suspending and cancelling Schedule 4 or 8 authorisations for Scheduled substances;
 - (e) to make recommendations to the CHO about matters to be included in codes of practice;
 - (f) to advise the CHO about whether matters relating to the supply of a Scheduled substance should be referred to a National Health Practitioner Board established under the Health Practitioner Regulation National Law;
 - (g) to advise the CHO about policy issues relating to the issue of prescriptions for the supply of, or the supply or use of, Scheduled substances;
 - (h) to give other advice about Scheduled substances as conferred on it under this or another Act.

- (3) In this section:

Scheduled substance means:

- (a) a restricted Schedule 4 substance; or
- (b) a Schedule 8 substance.

262 Powers

The Committee has the powers necessary to perform its functions.

263 Delegation

- (1) The Committee may delegate any of its powers or functions to the chairperson or an authorised officer.
- (2) The delegation must be signed by a majority of Committee members.

264 Membership

- (1) The Committee consists of the following:
 - (a) at least 6 members appointed by the CHO (***appointed members***);
 - (b) an authorised officer nominated by the CHO.
- (2) An appointed member may be reappointed.

265 Qualifications and nominations for appointment

An appointed member must be qualified or nominated for appointment as prescribed by regulation.

266 Duration of appointment

An appointed member holds office for the period, not exceeding 2 years, stated in the instrument of appointment.

267 Conditions of appointment

An appointed member holds office on the conditions stated in the instrument of appointment.

268 Chairperson and deputy chairperson

- (1) The chairperson of the Committee is:
 - (a) the appointed member appointed by the CHO to be the chairperson;
or
 - (b) if the CHO does not appoint the chairperson – the member appointed by the Committee.
- (2) The Committee must appoint a member, other than the chairperson, as deputy chairperson of the Committee.
- (3) The deputy chairperson must act in the office of chairperson during any period when the chairperson:

- (a) is absent from the Territory; or
- (b) is unable for any reason to perform the duties of office.

269 When member ceases to hold office

- (1) An appointed member ceases to hold office if:
 - (a) the member resigns by giving written notice of resignation to the CHO; or
 - (b) the member's term of office comes to an end and the member is not reappointed; or
 - (c) the member is convicted of an indictable offence or sentenced to imprisonment for an offence; or
 - (d) the member is absent, except on leave granted by the Committee, from 3 consecutive meetings of the Committee; or
 - (e) the member is removed from office under subsection (2).
- (2) The CHO may remove a member from office for:
 - (a) mental or physical incapacity to perform the duties of office satisfactorily; or
 - (b) neglect of duty; or
 - (c) breach of a condition of appointment; or
 - (d) dishonest or dishonourable conduct.

Division 3 Conduct of business

270 Meetings

- (1) The Committee must meet as often as is necessary for the exercise of its powers and the performance of its functions.
- (2) However, the Committee must meet at least twice in each year.

271 Presiding member at meetings

The chairperson must preside at all meetings of the Committee at which he or she is present.

272 Procedure at meetings

- (1) A quorum of the Committee consists of the chairperson and at least one third of the other members in office.

- (2) A question arising for decision at a Committee meeting must be resolved according to the opinion of a majority of the members present at the meeting and, if they are equally divided in opinion, the chairperson has a casting vote.
- (3) The Committee must keep proper minutes of its proceedings and decisions.
- (4) Subject to this Division, the Committee may decide its own procedures.

273 Disclosure of interest

- (1) If a member of the Committee has a direct or indirect interest in a matter being considered or about to be considered by the Committee, the member must disclose the nature of the interest at a Committee meeting as soon as practicable after the relevant facts come to the member's knowledge.
- (2) The disclosure must be recorded in the Committee's minutes.
- (3) The member must not, while having that interest:
 - (a) take part in any deliberation or decision of the Committee relating to that matter; or
 - (b) form part of the quorum of the Committee in any deliberation or decision of the Committee relating to that matter.
- (4) However, subsection (3) does not apply to the member if the Committee resolves the subsection does not so apply.
- (5) Despite the resolution, the member may refuse to take part in any deliberation or decision of the Committee relating to the matter.

Medicines, Poisons and Therapeutic Goods Regulations

90 Appointed Committee members

For section 265 of the Act, the appointed members of the Committee must be as follows:

- (a) at least 2 doctors with expertise in pain management or rehabilitation;
- (b) at least 2 doctors with experience in general practice;
- (c) at least one doctor who is employed in the Agency and working in the community drugs program managed by the Agency;

- (d) at least one person who:
 - (i) is not a doctor; and
 - (ii) is working in the community drugs program managed by the Agency;
- (e) at least one pharmacist with experience in the community pharmacy practice area;
- (f) at least one pharmacist with experience in the hospital or clinical pharmacy practice area.