



# COLLABORATION WITH OTHER SECTORS

CHAIR: GILLIAN CLARK, PROJECT OFFICER MENTAL HEALTH ROYAL COMMISSION

1. Co-designing a national Prompt Response Network: Victorian perspectives
2. Yarra and Boroondara Mental Health Alliances create cross sectoral collaboration, optimism and allyship
3. Drug Outreach Lawyer (DOL) – A 21 year collaboration with the AOD sector

## Platinum Sponsors



# Co-designing a national Prompt Response Network: Victorian perspectives

Penny Hill, NCCRED

Tom Lyons, DH

Alexand Anketell, HRVic

Platinum Sponsors







## The Prompt Response Network (PRN)

is a national network bringing together existing and emerging early warning networks across the country

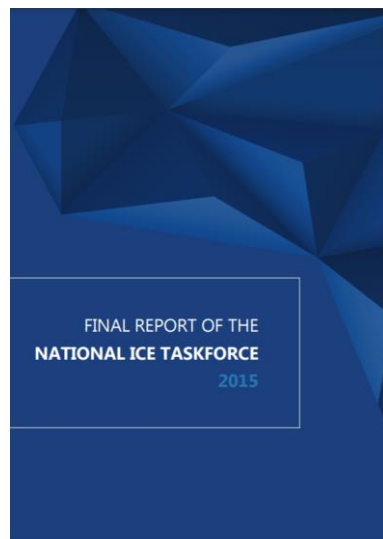
### Mission

The Prompt Response Network will:

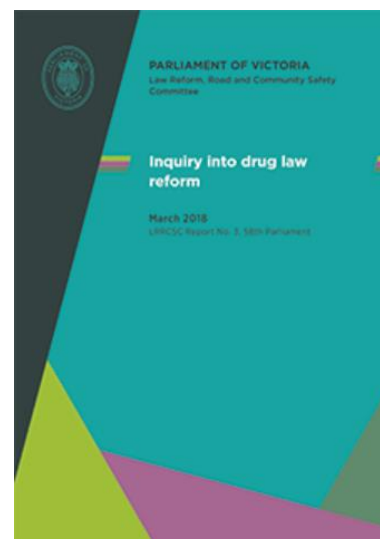
*Coordinate participants to share information and knowledge for timely public health responses that reduce the harmful effects of emerging drugs*

*The Prompt Response Network is a project of NCCRED, funded by the Commonwealth Department of Health and Aged Care*

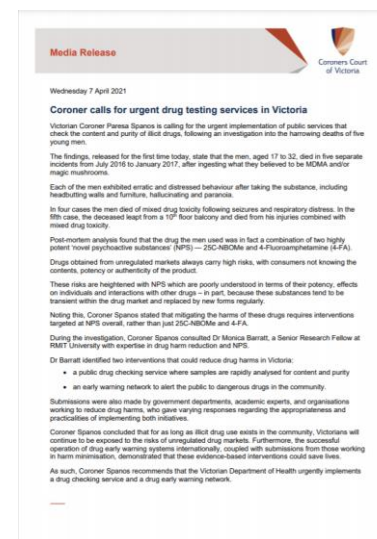
# Background: Victoria



Final Report of the National  
Ice Taskforce (2015)



Victorian Inquiry into Drug  
Law Reform (2018)



Victorian Coroner's  
Court (2021)

## Conducting a collaborative consultation and co-design process - *What we identified:*

- There were **common steps across all their processes** in monitoring and assessing drugs of harm and their impacts on the public
- There were differences and nuances across all the jurisdictions, and opportunities to support their activities
- There were limited resources and mostly people extending themselves to take on this work
- There were distinct opportunities to support, enable and coordinate to coordinate and enable specific activities at a national network through the support of existing and emerging activities of each of the jurisdictions
- There is a keen willingness, necessity and readiness to enable a national network

Starting with an understanding of their intentions we mapped each of their existing activities, noting the steps and processes they have in place, who is involved and when, key decision-making points, what networks and communications were utilised.

We discovered how we could:



**Support** existing activities



**Enable** where there are existing gaps



**Coordinate** at a national level

## Guidance Groups



Jurisdictional Guidance Group: Members from lead agencies of state and territory early warning networks: ACT Health, NSW Health (PRISE), NT (HRAG), Queensland Police, Forensic Science SA (SADEWS), **Vic DH**, WA MHC EWS



Peer Advisory Group: Members from AIVL (National Peer Peak Org), and all state and Territory Peer Orgs (CAHMA, NUAA, NTAHC, QuIHN, HepSA CNP, TUHSL, **HRVic**, PBHRWA)



Implementation Group: Members from NCCRED, NDRI and NDARC



Department of Health – Drug Advice (DA-07)  
Advisory: 3-Hydroxy-PCP sold as ketamine  
November 2022

## Drug advice

White powder containing '3-Hydroxy-PCP' is being sold as ketamine in Victoria.

- 3-HO-PCP is a "dissociative" drug that takes longer to have an effect than ketamine, but is more potent and unpredictable

A **dissociative** increases feelings of 'distance from reality', but also has other effects. Not much is known about 3-HO-PCP, but its **effects appear to include** unconsciousness, raised blood pressure and heart rate, hallucinations, agitation and confusion. It can also affect opioid receptors and may lead to ineffective breathing.

**People who have used 3-HO-PCP** report that it may be **more potent** than ketamine (stronger effects happen at a lower dose). They also report that **3-HO-PCP takes longer than ketamine to take effect and wear off**.

3-HO-PCP is a similar chemical to PCP ('Angel Dust'), while it's not clear how similar their effects are, they may share some unwanted effects such as hallucinations, agitation, and life-threatening elevations in heart rate, blood pressure and body temperature.

- Be cautious about any drug sold recently as ketamine in Victoria

The 3-HO-PCP circulating in Victoria is described as a **white powder that looks like ketamine**. In the past few weeks, there's been an unusually **high number of people seeking emergency medical support** after using what they thought was ketamine. Those who sought help typically experienced unconsciousness or unexpectedly severe dissociative effects requiring medical assistance. Several people have since had **3-HO-PCP confirmed with blood tests**.

**3-HO-PCP can take around 20 to 40 minutes to have a noticeable effect** and lasts about three to four hours. Ketamine usually has an effect in 7.5 to 20 minutes and lasts one to two hours. If you experience delayed or unexpected drug effects, **do not take more**.

Using dissociatives like 3-HO-PCP with depressants such as opioids, benzodiazepines, GHB, or alcohol will increase the risk of overdose and may lead to loss of consciousness and ineffective breathing.

- Reduce the risk of harm

If you experience adverse drug effects, or are present when someone has an unexpected reaction, **seek help immediately by calling Triple Zero (000)**.

All alcohol and other drug use comes with risks, so:

- Be aware that other false or contaminated drug products may circulate in Victoria, even if no specific warning has been issued about them. **Another ketamine substitute** has also been seen recently in the ACT.
- Start low and go slow, and make sure you're in a **safe environment with people you trust**.
- Remember, even 'pure' drugs can produce serious side effects and death, and can interact dangerously with medications/pharmaceutical drugs.

Contact **Harm Reduction Victoria's DanceWize team** for anonymous support and education from peers. Talk to DanceWize volunteers online at [facebook.com/dancewizeaustralia](https://facebook.com/dancewizeaustralia) or by email at [info@dancewize.org.au](mailto:info@dancewize.org.au). If you or someone you know needs help with alcohol or drug use, call **DirectLine** on 1800 888 236 or visit [directline.org.au](https://directline.org.au) for information and support to access treatment.



Department  
of Health

OFFICIAL

## Health warning on poppy seeds



### Health alert

**Status:** Active  
**Alert number:** 221115  
**Date issued:** 15 Nov 2022 – Update to CHO alert 11 November 2022  
**Issued by:** Dr Angie Bone, Deputy Chief Health Officer (Environment)  
**Issued to:** Health professionals and the Victorian community

### Key messages

- Non-food grade poppy seeds have incorrectly entered the food supply chain. These seeds are not intended for human consumption and are not safe to consume.
- Some batches of commercially available poppy seeds, when brewed into a concentrated form such as a tea, have resulted in cases of severe toxicity.
- Anyone who has consumed large quantities of poppy seeds, for example as a drink, and experiences any unusual and severe symptoms should attend their nearest Emergency Department.
- A national food recall is currently underway to remove affected product identified to date. See Food Standards Australia and New Zealand (FSANZ) for the **brands and batch numbers currently affected**. Monitor this website closely for ongoing updates.
- The investigation is continuing, with ongoing identification of specific brands affected. Given the uncertainties, consumers may wish to avoid consumption of poppy seeds purchased since September 2022, until the investigation has concluded.
- The Victorian Poisons Information Centre can be contacted 24/7 on 13 11 26 and can provide more information about poisons and what to do in suspected cases of poppy seed poisoning.

### What is the issue?

Reports of unusual and severe symptoms following consumption of home-brewed poppy seed tea have continued. This is occurring within Victoria and across Australia. As of 15/11/22 there have been eleven reported cases in Victoria.

Department of Health – Drug Advice (DA-06)  
Alert: Yellow crystalline substance containing PMMA and MDMA  
October 2021

OFFICIAL

## Drug alert

PMMA has been detected in MDMA (ecstasy) in Melbourne, presenting as broken up (crushed) yellow crystals.

- PMMA produces some similar effects to MDMA, but is more toxic, less euphoric, and takes longer to have an effect

Para-Methoxymethamphetamine (PMMA) is an 'empathogen' with **stimulant and mild hallucinogenic properties** that has been associated with a substantial number of deaths worldwide. Depending on the amount taken, it seems to have a **significant risk of very serious harm to health**. This includes hyperthermia (dangerously high body temperature), acute respiratory distress (severe shortness of breath needing immediate medical attention), cardiac arrest, convulsions, sudden collapse, multiple organ failure, and death.

Reports from people who have used PMMA intentionally suggest **it's hard to take a dose that provides any desirable effects without experiencing serious unwanted effects**. While **unpredictable**, the effects of PMMA may include moderate stimulation, misty heightened senses, seeing colours and shapes, overheating, dehydration, sweating, increased heartbeat and blood pressure, difficulty breathing, irregular eye movements, muscle spasms, and nausea and vomiting.

- Be very cautious about any substance with a yellow colour/tinge that's sold as MDMA – it may contain PMMA

At low doses PMMA can be mistaken for MDMA, but **PMMA takes longer than MDMA to have an effect**. This has led some people to prematurely take additional doses, leading to overdose. If you have an unexpected or delayed reaction to a drug, **do not take more**.

Consuming PMMA and MDMA together, or with other substances like cocaine or alcohol, will further increase the risk of unwanted and potentially fatal effects. PMMA and the related drug PMA have been associated with a substantial number of hospitalisations and deaths worldwide, often involving both PMMA/PMA and MDMA.

- Reducing the risk of harm

If you experience adverse drug effects, or are present when someone has an unexpected reaction, **seek help immediately by calling Triple Zero (000)**.

All alcohol and other drug use comes with risks, so:

- Be aware that other false or contaminated drug products may circulate in Victoria, even if no specific warning has been issued about them.
- Start low and go slow with how much you consume. If you have any unexpected or delayed reaction to a drug, **do not take more**.
- Make sure you're in a **safe environment with people you trust**.
- Remember, even 'pure' drugs can produce serious side effects and death, and can interact dangerously with medications/pharmaceutical drugs – get the facts at [adl.org.au/drug-facts/](https://adl.org.au/drug-facts/).

Contact **Harm Reduction Victoria's DanceWize team** for anonymous support and education from peers. Talk to DanceWize volunteers online at [facebook.com/dancewizeaustralia](https://facebook.com/dancewizeaustralia) or [@dancewiz\\_vic](https://dancewiz_vic) (Instagram), by email at [info@dancewize.org.au](mailto:info@dancewize.org.au), or at music festivals across Victoria.

If you or someone you know needs help with alcohol or drug use, call **DirectLine** on 1800 888 236 or visit [directline.org.au](https://directline.org.au) for information and support to access treatment.



Department  
of Health

Department of Health – Drug Advice (DA-06)  
Alert: Protonitazene sold as ketamine  
June 2022

OFFICIAL

## Drug alert

Yellow powder containing the potent opioid 'protonitazene' has been mis-sold as ketamine in Melbourne.

- Protonitazene is a novel synthetic opioid

**Opioids** are central nervous system depressants. They typically produce a range of effects including sedation, short-term pain relief, and respiratory depression (breathing difficulty). Respiratory depression often appears more quickly with **novel synthetic opioids** (NSOs), increasing the risk of life-threatening overdose. NSOs are a leading contributor to overdose deaths worldwide.

**Protonitazene** is a potent NSO that is not often seen in Australia. It's around three times more potent than fentanyl and can produce life-threatening toxic effects in very small amounts.

- Be cautious about any powder with a yellow colour or tinge, especially if sold as ketamine – it may contain protonitazene

There have been serious recent hospitalisations associated with this powder. **The product appears to have strong and fast-acting effects**, leading to loss of consciousness and respiratory depression which may cause life-threatening hypoxia (insufficient oxygen for normal functioning).

**People who are expecting to use ketamine** may not know how to recognise and respond to opioid overdose. Someone might appear to be entering a 'K-hole' (a dissociative state brought on by higher doses of ketamine) but could actually be showing signs of opioid overdose. **Signs of opioid overdose to look out for include** tiny pupils, breathing slowly and reduced consciousness (meaning someone is hard to rouse). More information about opioid overdose symptoms can be found [here](https://www.health.gov.au/health-topics/overdose).

Using **protonitazene or other opioids with depressants** such as alcohol, GHB or benzodiazepines ('Xanax', 'Valium', etc) **increases the risk of overdose**.

- Reduce the risk of harm + get naloxone to reverse opioid overdose

If you experience adverse drug effects, or are present when someone has an unexpected reaction, **seek help immediately by calling Triple Zero (000)**.

**Naloxone** is an easy-to-use medication that can **reverse opioid overdose** – it's **safe to use** even if you're not sure whether someone has taken opioids. Contact Harm Reduction Victoria or DirectLine to obtain free naloxone locally and be trained in how to use it. Naloxone is also available from pharmacies without a script.

All alcohol and other drug use comes with risks, so:

- Be aware that other false or contaminated drug products may circulate in Victoria, even if no specific warning has been issued about them.
- Make sure you're in a **safe environment with people you trust**.
- Remember, even 'pure' drugs can produce serious side effects and death, and can interact dangerously with medications/pharmaceutical drugs.

Contact **Harm Reduction Victoria's DanceWize team** for anonymous support and education from peers. Talk to DanceWize volunteers online at [facebook.com/dancewizeaustralia](https://facebook.com/dancewizeaustralia) or by email at [info@dancewize.org.au](mailto:info@dancewize.org.au).

If you or someone you know needs help with alcohol or drug use, call **DirectLine** on 1800 888 236 or visit [directline.org.au](https://directline.org.au) for information and support to access treatment.



Department  
of Health

1

## Developing Victoria's drug 'early warning' capability

### COVID-19:

Started during, and  
largely because of,  
possible pandemic  
impacts

Existing drug  
monitoring was a little  
**slow + imprecise** to  
ID emerging public  
health risks

**Timely  
opportunity  
to...**

**Trial new models**

**Grow collaboration** with  
new + existing partners

**= Great progress  
since then...**

... but we're  
still in a  
**research +  
development**  
phase!

1

Developing  
Victoria's drug  
'early warning'  
capability

**COVID-19:**

Started during, and  
largely because of,  
possible pandemic  
impacts

Existing drug  
monitoring was a little  
**slow + imprecise** to  
ID emerging public  
health risks

**Timely  
opportunity  
to...**

Trial new models

Grow collaboration with  
new + existing partners

**= Great progress  
since then...**

... but we're  
still in a  
**research +  
development  
phase!**

2

In Victoria  
we're  
developing a  
**health-led**  
early warning  
model

Most intel comes  
from public  
hospitals

We've also supported  
research pilots that  
can ID drugs in  
microscopic residues

The **EDNAV  
study**  
produces  
most of our  
**primary  
intelligence**

Run by the **Victorian Poisons  
Information Centre**

... across a network of 20 Victorian  
**emergency departments**

+ analytical services from **Victorian  
Institute of Forensic Medicine**

**Focus:** People  
presenting to  
ED with **illicit  
drug toxicity**

(reported or  
suspected)

✓ Patient aged ≥ 12 years

✓ Severe, unusual or  
unexpected symptoms

✓ Blood being taken as  
part of care

Site can  
retain part  
of blood  
sample

Transport to  
VIFM for  
comprehensive,  
specialised  
analysis

500+ substances

**Weekly  
reporting** to  
Department  
of Health

Weekly joint  
scans for  
**critical public  
health risks**

Possible drug  
adulteration,  
substitution or  
contamination

Unexpected  
severe toxicity

**When we  
find  
something  
of concern  
that**

... isn't in the  
public domain

+ risk may be  
modifiable by  
sharing info

**... we  
share it  
with Harm  
Reduction  
Victoria**  
(peers)

+ who-  
ever  
else

+ undertake a  
**joint  
assessment and  
decision-making**  
process with  
PLLE, clinicians

**Guided by principles...**

Harm reduction

Public health

Empowering people with  
specific + actionable info

We've published **eight  
Drug Alerts** to date

**+ Dissemination** –  
web, social, peer, etc

**Google 'drug  
alerts victoria'**



1

## Developing Victoria's drug 'early warning' capability

### COVID-19:

Started during, and largely because of, possible pandemic impacts

Existing drug monitoring was a little **slow + imprecise** to ID emerging public health risks

**Timely opportunity to...**

Trial new models

**Grow collaboration** with new + existing partners

**= Great progress since then...**

... but we're still in a **research + development** phase!

2

In Victoria we're developing a **health-led** early warning model

Most intel comes from public hospitals

We've also supported research pilots that can ID drugs in microscopic residues

The **EDNAV study** produces most of our **primary intelligence**

Run by the **Victorian Poisons Information Centre**

... across a network of 20 Victorian **emergency departments**

+ analytical services from **Victorian Institute of Forensic Medicine**

**Focus:** People presenting to ED with **illicit drug toxicity**

(reported or suspected)

✓ Patient aged ≥ 12 years

✓ Severe, unusual or unexpected symptoms

✓ Blood being taken as part of care

Site can retain part of blood sample

Transport to VIFM for comprehensive, specialised analysis

500+ substances

**Weekly reporting** to Department of Health

Weekly joint scans for **critical public health risks**

Possible drug adulteration, substitution or contamination

Unexpected severe toxicity

**When we find something of concern that**

... isn't in the public domain

+ risk may be modifiable by sharing info

**... we share it with Harm Reduction Victoria** (peers)

+ whoever else

+ undertake a **joint assessment and decision-making** process with PLLE, clinicians

**Guided by principles...**

Harm reduction

Public health

Empowering people with specific + actionable info

We've published **eight Drug Alerts** to date

+ **Dissemination** – web, social, peer, etc

**Google 'drug alerts victoria'**



3

**It's great to have some protocols to guide us**

They help us to **act** when we're **reasonably confident**

... even though we **rarely see the full picture:**

Illicit drug market = **big, messy, contradictory** place

We're almost certainly **missing high-risk signals**

You can **never have perfect info**

**Often the data begs more questions**

**That's why we're excited about the PRN**

**There's huge potential to...**

**Share info** across the country

**Surface + triangulate** more signals

Improve + harmonise our **practice**

Reach **more people**

1

## Developing Victoria's drug 'early warning' capability

### COVID-19:

Started during, and largely because of, possible pandemic impacts

Existing drug monitoring was a little **slow + imprecise** to ID emerging public health risks

**Timely opportunity to...**

Trial new models

**Grow collaboration** with new + existing partners

**= Great progress since then...**

... but we're still in a **research + development** phase!

2

In Victoria we're developing a **health-led** early warning model

Most intel comes from public hospitals

We've also supported research pilots that can ID drugs in microscopic residues

The **EDNAV study** produces most of our **primary intelligence**

Run by the **Victorian Poisons Information Centre**

... across a network of 20 Victorian **emergency departments**

+ analytical services from **Victorian Institute of Forensic Medicine**

**Focus:** People presenting to ED with **illicit drug toxicity**

(reported or suspected)

✓ Patient aged ≥ 12 years

✓ Severe, unusual or unexpected symptoms

✓ Blood being taken as part of care

Site can retain part of blood sample

Transport to VIFM for comprehensive, specialised analysis

500+ substances

**Weekly reporting** to Department of Health

Weekly joint scans for **critical public health risks**

Possible drug adulteration, substitution or contamination

Unexpected severe toxicity

**When we find something of concern that**

... isn't in the public domain

+ risk may be modifiable by sharing info

**... we share it with Harm Reduction Victoria** (peers)

+ whoever else

+ undertake a **joint assessment and decision-making** process with PLLE, clinicians

**Guided by principles...**

Harm reduction

Public health

Empowering people with specific + actionable info

We've published **eight Drug Alerts** to date

+ **Dissemination** – web, social, peer, etc

**Google 'drug alerts victoria'**



3

**It's great to have some protocols to guide us**

They help us to **act** when we're **reasonably confident**

... even though we **rarely see the full picture:**

Illicit drug market = **big, messy, contradictory** place

We're almost certainly **missing high-risk signals**

You can **never** have perfect info

**Often the data begs more questions**

**That's why we're excited about the PRN**

**There's huge potential to...**

**Share info** across the country

**Surface + triangulate** more signals

Improve + harmonise our **practice**


Reach **more people**

**History** tells us we need to monitor trends carefully

**Respectful Collaborative**

**... we're getting there!**





## DRUG ALERT

### '3-Hydroxy-PCP' being sold as Ketamine

**LOOKS LIKE: white powder**

**DETECTED SUBSTANCE:**  
3-HO-PCP is a "dissociative" drug. A dissociative increases feelings of 'distance from reality', but also has other effects. People who have used 3-HO-PCP report that it has stronger effects than ketamine at a lower dose. They also report that 3-HO-PCP takes longer than ketamine to take effect and to wear off. 3-HO-PCP is a similar chemical to PCP ("Angel Dust").

**EFFECTS:**  
Not much is known about 3-HO-PCP. **REPORTED EFFECTS:**

- unconsciousness
- raised blood pressure
- elevated heart rate
- increased body temperature
- hallucinations
- agitation
- confusion

It can also affect opioid receptors and may lead to ineffective breathing.

**REDUCING RISKS:**  
3-HO-PCP can take around 20 to 40 minutes to have a noticeable effect and lasts about 3-4 hours. Ketamine usually has an effect in 7.5 to 20 minutes and lasts 1-2 hours. If you experience delayed or unexpected drug effects, **WAIT** before you take more. Using dissociatives like 3-HO-PCP with depressants such as opioids, benzodiazepines, GHB, or alcohol may increase the risk of overdose and may lead to loss of consciousness and ineffective breathing. Use with caution.

**CALL 000 IF YOU FEEL YOU HAVE BEEN AFFECTED**  
For more anonymous support and/or education from peers, contact Harm Reduction Victoria (03)9329 1500



## DRUG ALERT

### POPPY SEEDS POISONING

SEVERE NEGATIVE REACTIONS FROM COMMERCIALLY AVAILABLE POPPY SEEDS

**SUSPECTED ADULTERANT:**  
Thebaine

A number of anecdotal reports of *severe negative reactions including hospitalisation* have been communicated from all around Australia from people who make & drink poppy tea or poppy wash from commercially available supermarket poppy seeds.

Please use **EXTREME CAUTION** -even if you are an experienced user.

**EFFECTS:**

Thebaine poisoning can cause but is not limited to the following effects:

- dizziness
- sweating
- nausea
- muscle pain
- muscle spasm and rigidity
- seizures
- cardiac arrest
- death

**CALL 000 IF YOU FEEL YOU HAVE BEEN AFFECTED**  
IF YOU ARE EXPERIENCING OPIOID WITHDRAWAL CONTACT OUR PAMS SERVICE FOR PHARMACOTHERAPY ADVICE ON 1 800 443 844

For more anonymous support and/or education from peers, contact Harm Reduction Victoria (03) 9329 1500



## DRUG ALERT

### 'KETAMINE'

The potent novel opioid 'protonitazene' is being mis-sold as ketamine in Melbourne.

**LOOKS LIKE:**  
**FORM:** powder/crystals  
**COLOUR:** yellowish




**DETECTED SUBSTANCES:**  
Protonitazene is a potent novel synthetic opioid that is rarely seen in Australia. Be cautious of any powder with a yellow colour or tinge, esp. if sold as ketamine - it may contain protonitazene.

There have been serious recent hospitalisations associated with this powder. Someone may appear to be entering a 'K-hole' but could actually be showing signs of opioid overdose. Signs of opioid overdose include: tiny pupils, slowed breathing, blue lips/fingernails & they are hard to rouse. For more info on opioid overdose - visit [www.hrvic.org.au/dope](http://www.hrvic.org.au/dope)

**EFFECTS:**  
Protonitazene is a novel synthetic opioid. Opioids are CNS (central nervous system) depressants. Respiratory depression often appears more quickly with novel synthetic opioids (NSOs), increasing the risk of life-threatening overdose.

**COMMON EFFECTS:**

- sedation
- short-term pain relief
- respiratory depression (breathing difficulty)

**REDUCING RISKS:**

- CARRY NALOXONE: An opioid reversal drug. It is SAFE to use even if you aren't sure if you've taken opioids. To get your free kit, contact HRVIC TODAY.
- Avoid using with alcohol, opioids or other depressants (*it increases the risk of overdose*)
- When using any substance, always try to make sure you are in a safe environment with people you trust
- Start low, go slow
- If you experience adverse effects-i.e. it doesn't 'feel right'- seek help immediately CALL 000

For more anonymous support and/or education from peers, contact Harm Reduction Victoria (03)9329 1500



## DRUG ALERT

### FAKE 'XANAX'

Recently sold across Victoria, as 'Mylan' or 'Xanax'.

**LOOKS LIKE:**  
**FORM:** tablets  
**COLOUR:** white  
**SHAPE:** round  
**MARKS:** unmarked



**DETECTED SUBSTANCES:**  
These tablets DO NOT contain Alprazolam- the active ingredient of Xanax® or Kanax®. They contain a mixture of five relatively new benzos or novel benzodiazepines:  
-Bromazolam - Clonazolam  
-Etizolam - Flualprazolam  
- Flubromazepam  
Novel benzodiazepines (benzoo) produce some similar effects to prescription benzos but are often more potent and unpredictable.

**EFFECTS:**  
Novel benzos produce some similar effects to prescription benzos but are often more potent and unpredictable.  
- Longer duration of effects  
- Stronger effects in smaller doses (than pharmaceutical/medical benzos)

**COMMON EFFECTS:**  
Central Nervous System (CNS) depressant  
anxiety suppression, sedation, amnesia and disinhibition  
Higher doses can lead to drowsiness, reduced consciousness, difficulty breathing and death.

**REDUCING RISKS:**

- Research the real deal and the way of fake pharmaceuticals in circulation
- Avoid using with alcohol, opioids or other depressants (overdose risk)
- When using any substance, always try to make sure you are in a safe environment with people you trust
- Start low, go slow
- If you experience adverse effects-i.e. it doesn't 'feel right'- seek help immediately CALL 000

#VICDRUGALERT #PEERALERT #HARMREDUCTIONVICTORIA #HRVIC



## National Signal Register

A custom-built digital platform to provide a national dashboard of real-time signals utilising minimum de-identified data from contributing jurisdictional agencies



## National Network

A broad community of people who are involved with regional and national networks to share information, insights and opportunities.



## Public Website & Social Media

Links to public health alerts which will also link to relevant organisations and resources



## Anecdotal Information Portal\*

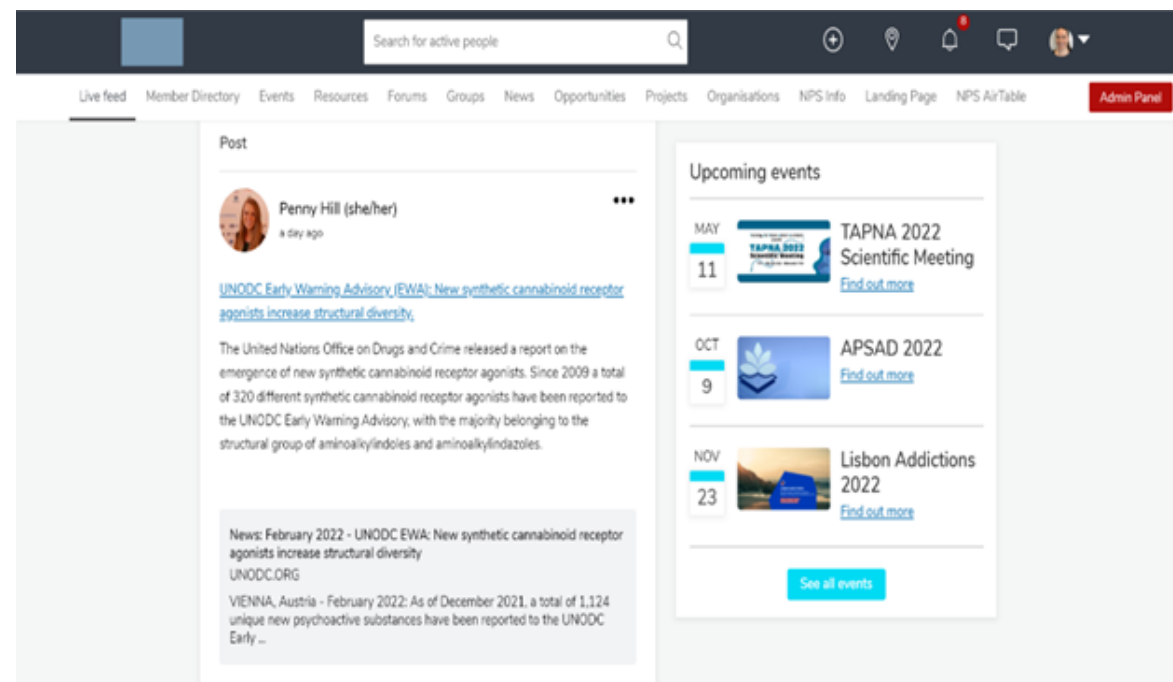
Currently in initial scoping/consultation phase with PRN Peer Advisory Group

## National network:

A broad community of people who are involved with regional and national networks to share information, insights and opportunities.



An **online community platform** for broader stakeholders who opt in from each jurisdiction or organisation/network.

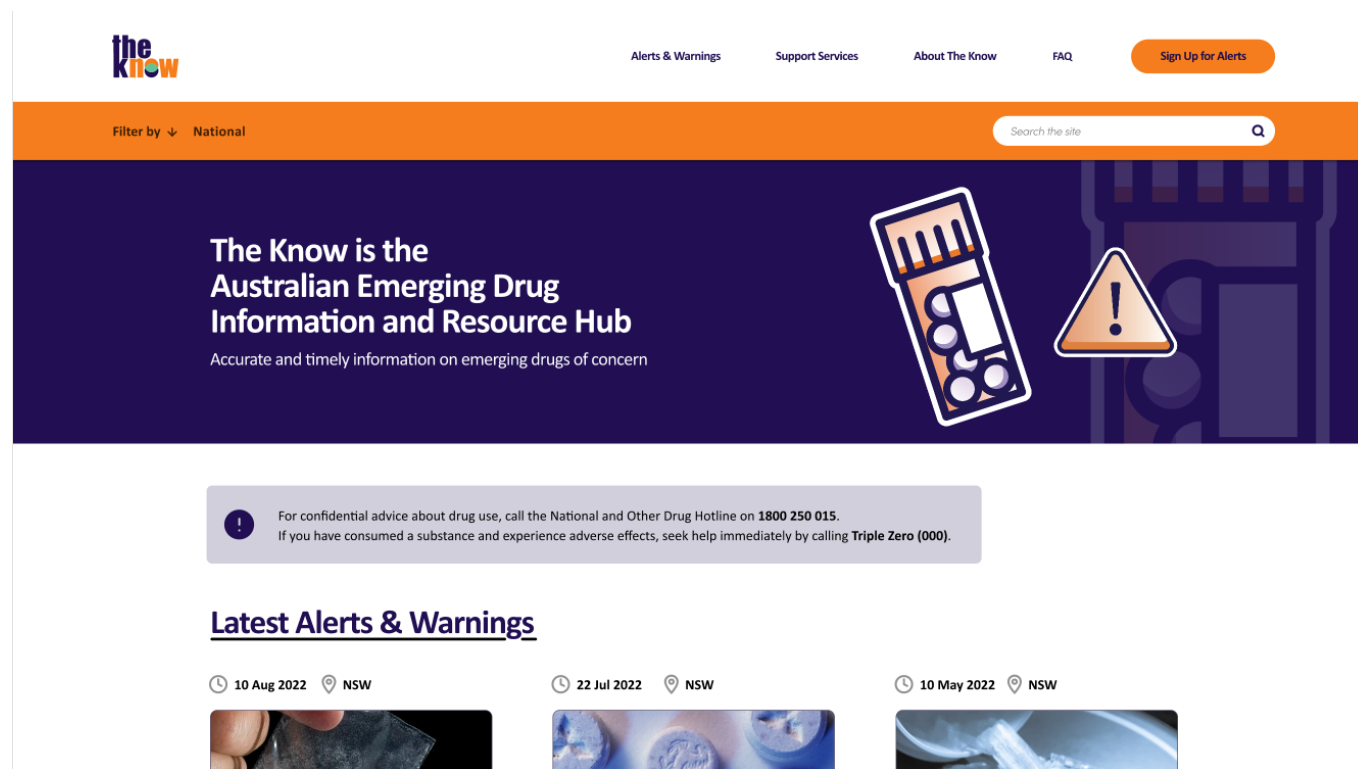






## Public website

Links to public health  
alerts which will also link  
to relevant organisations  
and resources





## Anecdotal Information Portal

Currently in initial  
scoping/consultation phase led  
with PRN Peer Advisory Group

The screenshot shows the 'High Alert NZ' website. The header includes the 'High Alert NZ' logo, the text 'Drug Information and Alerts Aotearoa New Zealand', a 'Subscribe to updates' button, and a search icon. A navigation bar contains links: 'Alerts & notifications' (highlighted), 'Report unusual effects', 'Identify a drug & get help', 'Articles', 'About', and 'Drug checking clinics'. Below the navigation bar is a large blue banner with the text 'Home > Report unusual effects' and a white button labeled 'Report unusual effects'. The main content area contains the following text:

If you or someone you know has experienced unexpected or concerning effects from drugs in New Zealand, please let us know below. This will help keep others safe.

Please provide as much information as you can, it will be kept confidential and won't be shared with anyone else. You also don't need to give us any personal information if you don't want to.

You can find out more about how we use this information by checking our [Privacy Policy](#).

Please do not use this form if you need immediate help - we can't guarantee a quick response. If you need support or immediate advice, please call the [Alcohol Drug Helpline](#) on 0800 787 797 or text 8681, 24 hours a day, 7 days a week. You'll speak with a trained counsellor, and all calls are free and confidential. **If you're experiencing an emergency, please call 111 immediately.**

Date  
25/10/2022

Example: High Alert NZ's Reporting Page: <https://www.highalert.org.nz/report-unusual-effects/>



## Community Network

Join the network when we're ready to onboard local service providers (onboarding in progress)



## Public Website & Social Media

Check out the website and follow our social media channels:  
**theknow.org.au** (Launch early 2023)



## Anecdotal Information Portal

Get in touch and let us know if you'd like to be involved in the consultation process! **prn@nccred.org.au**

- **PRN Team:** Hayley Murphy, Seb Baird
- **Jurisdictional Advisory Group:** Philip Hull, Ella Dilkes-Frayne, Megan Arnold, Eleanor Taylor-Rogers (ACT Health); Jade Redfern, Daniel Andres (ACT-GAL); Jared Brown (NSW Health); Pete Burnheim (AADANT); David Decolongon (NT Public Health Directorate); Margo Watson (Queensland Police); Andrew Camilleri (FSSA); **Tom Lyons, Ginny McKinnon (Vic DOH)**; Claire Hicks, Grace Oh, Kelly Kennington, Christine Yeang (WA MHC); Jess Soderstrom, Jen Smith, Courtney Weber (Royal Perth Hospital/EDNA)
- **Peer Advisory Group:** Sav Gollapolly, Adrian Gorringer, Steph Tzanetis (AIVL); Mitch Lamb, Chris Gough (CAHMA); Gulliver McLean, Rochelle Aylmer, Mary Harrod (NUAA); Pete Sidaway (NTAHC); Brooke Walters, Niki Parry (QuIHN); Carol Holly, Andrea Peterson (HepSA CNP); Mark Jones (TUHSL); **Alexand Anketell, Bridget Hayes, Sione Crawford (HRVic)**; Paul Dessauer, Angela Corry (PBHRWA)
- **Implementation Group:** Nadine Ezard, Krista Siefried, Jemma Hallen (NCCRED); Amy Peacock (NDARC); Simon Lenton (NDRI)
- **Consultants:** Trish Cave, Bec Dahl, Mark Elliott (Collabforge); Josh Forde, Kacey Chong, Alison Cusack (Ackama)

*Thank you!*

Please contact us for more information

[prn@nccred.org.au](mailto:prn@nccred.org.au)

[penny.hill@unsw.edu.au](mailto:penny.hill@unsw.edu.au)