Structured Administration and Supply Arrangement (SASA)

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| **TITLE:** | **Treatment of Syphilis Infection by Midwives** |

1. **Authority:**

Issued by the Chief Executive Officer of Health under Part 6 of the Medicines and Poisons Regulations 2016.

1. **Scope:**

This authorises Midwives working in a program providing antenatal healthcare to administer antibiotics, for the treatment of syphilis.

1. **Criteria:**

This SASA authorises the actions specified in the table below.

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| Practitioner: | Midwives, with general registration, who have completed approved training in accordance with Appendix 1. |
| Practice setting: | Programs providing antenatal healthcare, which are operated or managed by WA Health or by a health service that is a member of the Aboriginal Health Council of Western Australia.  All regions of WA. |
| Approved activity: | Administration – single dose |

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| Approved medicines: | Benzathine benzylpenicillin  1.8 gram (2,400,000 units) intramuscular injection | |
| Note: | 900 mg benzathine benzylpenicillin = 1,200,000 units =  1016.6 mg benzathine benzylpenicillin tetrahydrate |

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| Medical conditions: | Adults and mature minors (14 years and older), who are being treated by the program providing antenatal healthcare, with syphilis infection that is not known to have been previously treated:   * cases confirmed by laboratory or point of care testing; * empirical treatment of symptomatic cases; and * sexual contacts of confirmed cases, only if they are also a patient of the antenatal program.[[1]](#footnote-1) |

1. **Conditions:**

The administration or supply of approved medicines under this SASA is subject to the conditions that:

* 1. Patient selection, administration, follow-up care and notification is in accordance with the *Guidelines for managing sexually transmitted infections and blood-borne viruses* (“The Silver Book”);
  2. Administration is not repeated for the same instance of the condition, without the direction of a medical practitioner, credentialed for a public health STI program by a Health Service Provider of the WA Health system, or contracted entity;
  3. The medicines are procured by an authorised person or an appropriate Medicines and Poisons Permit holder;
  4. Procurement and storage of the approved medicines is in accordance with Part 9 of the Medicines and Poisons Regulations 2016;
  5. Record keeping of administration is in accordance with Part 12 of the Medicines and Poisons Regulations 2016;
  6. Laboratory confirmed diagnosis of syphilis must be notified to the Director, Communicable Disease Control Directorate, Department of Health, by post, telephone or facsimile, preferably within 24 hours; and
  7. Notification must comply with the approved procedure for notification of communicable diseases and be in an approved format.

1. **References:**
   1. *Guidelines for managing sexually transmitted infections and blood-borne viruses.* Available at*:* <http://ww2.health.wa.gov.au/Silver-book>
   2. Communicable Disease Control Directorate. *Notification of Communicable Diseases.* Availableat: <http://ww2.health.wa.gov.au/Silver-book/STI-or-HIV-notification>
2. **Issued by:**

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| **Name:** | Dr Andrew Robertson |
| **Position:** | Chief Health Officer |
| **Date:** | 19 August 2021 |

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| Enquiries to: | Medicines and Poisons Regulation Branch | Number: | 029/1-2021 |
|  | MPRB@health.wa.gov.au | Date: | 19/08/2021 |

**APPENDIX 1**

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| **Approved Training** |

All Registered Midwives administering a medicine in accordance with this SASA must have successfully completed a course of training approved by the Chief Executive Officer of the Department of Health or an equivalent course provided by a Registered Training Organisation (RTO) or a university and must maintain their competency through updates every two years.

Approved courses must require participants to demonstrate satisfactory knowledge, understanding and minimum competencies in the following areas:

1. Sexual health history taking;
2. Sexual health and STI clinical assessment;
3. Pathology testing, including request and collecting samples;
4. Contraindications and adverse effects of benzathine benzylpenicillin;
5. STI health promotion and education;
6. STI contact tracing;
7. Communicable disease notification and referral; and
8. Reporting of suspected child sexual abuse.

1. All other asymptomatic sexual contacts of confirmed cases should be referred to a Public Health clinic or their General Practitioner. [↑](#footnote-ref-1)