



Policy

Responding to Use of Non-prescription Alcohol and/or Other Drugs (AOD)

1. Policy Statement

The use of non-prescribed alcohol and other drugs (AOD) by consumers, visitors or staff employed within ACT Health facilities may impact on:

- A consumer's ongoing medical treatment
- The provision of health care by ACT Health staff, and
- The safety of ACT Health staff, consumers and visitors.

The use or supply of AOD, which have not been prescribed as clinical treatment, is not permitted by consumers, visitors or staff within ACT Health facilities. The only exception is alcohol that is approved by the Chief Executive for consumption at an ACT Health function.

2. Purpose

Evidence has identified that people with AOD dependence may feel reluctant to access health care services in the first instance and/or disclose their AOD history for fear of discrimination and judgemental treatment. The perception is that this can result in a lower quality of care being provided and there are significant concerns whether pain that a person is experiencing or may experience will be managed effectively.

There are also fears around how the person will cope if access to AOD is abruptly ceased during admission to hospital. These are some reasons why consumers may continue to use AOD whilst in hospital. These challenging issues may also impact greatly on the person's family.

The continued use of alcohol, non-prescription medications and illicit substances as a consumer complicates the management of that consumer.

Clinical staff have a duty of care to all consumers and staff. That is, a duty to act reasonably to protect them from foreseeable harm. In circumstances where consumers continue to use non-prescribed AOD during hospital admission staff may have a duty to remove AOD from consumers and organise their safe disposal.

ACT Health takes a harm minimisation approach to AOD use and fully supports consumers who have a history of AOD dependence, through the course of their hospital admission, by establishing an individualised clinical treatment plan appropriate to their specific needs.

ACT Health's primary role is to provide health care. For people who use AOD the focus of health care is directed towards providing a therapeutic environment.

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Appropriate health care services will continue to be provided to any person suspected or identified as using AOD within ACT Health facilities.

Where violence or aggression occurs in relation to AOD use staff should refer to Preventing and Managing Aggression and Violence in Act Health policy and standard operating procedures.

This policy and standard operating procedures (SOPs) have been developed to:

- 1) Establish a common process for all ACT Health staff to follow to manage AOD use in ACT Health facilities
- 2) Promote respectful engagement and education of the consumer relating to the provision of treatment and care
- 3) Ensure a harm minimisation approach in relation to use of AOD by consumers
- 4) Ensure the safety, dignity and privacy of the person using AOD
- 5) Ensure access to and provision of appropriate support services where necessary
- 6) Ensure discharge planning considers provision of information regarding risks or recommencing drug use and information on management options
- 7) Help staff understand and meet their responsibilities in ensuring persons using non-prescribed AOD are managed in accordance with:
 - a. Relevant policy
 - b. Legislation, and
 - c. Quality and safety standards.

3. Scope

This policy applies to all ACT Health staff and is to be read in conjunction with the supporting standard operating procedure.

This policy does not address alternative/complimentary medication. Home visiting is also outside the scope of this policy.

4. Roles & Responsibilities

Managers are responsible for:

Ensuring that staff are able to access, interpret and apply this document and are provided with education related to this policy. Such education may include but is not limited to:

- Code of Conduct
- Consent to treatment
- Recognition of intoxication and withdrawal symptoms
- Privacy
- Personal and property searches, and
- *Public Sector Management Act*
- CARM training – Managing Aggression and Violence

Medical Staff are responsible for:

- Taking a full medical history on admission, including history of AOD use. Strategies for pain management should be considered.
- Assessment of potential withdrawal from AOD during hospital admission

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- Referral to appropriate services when required e.g Alcohol and Drug Program, Pain Management Unit, Social Worker, Psychologist, and
- Development of a clinical treatment plan if non prescription AOD is used by the consumer during hospital admission.

Nursing and Allied Health Staff are responsible for:

- Taking a full history on admission, including history of AOD use. Strategies for pain management should be considered.
- Carrying out the clinical treatment plan as per medical staff orders, if AOD which are not prescribed are used by the consumer during hospital admission, and
- Reporting incident of non-prescribed AOD use by consumers in hospital on RiskMan.

Pharmacist is responsible for:

- The disposal of prohibited substances.

5. Evaluation

Outcome Measures

- 100% of incidents, reported on RiskMan related to AOD use will adhere to this policy, and
- Review of consumer feedback.

Method

RiskMan incidents will be reviewed to assess policy compliance and stakeholders will be asked to provide feedback on this policy and SOPs.

6. Related Legislation and Policies

Legislation

- *Civil Law (Wrongs) Act 2002*
- *Crimes Act 1900*
- *Drugs of Dependence Act 1989*
- *Guardianship and Management of Property Act 1991*
- *Health Practitioner Regulation National Law (ACT) Act 2010*
- *Health Records (Privacy and Access) Act 1997*
- *Human Rights Act 2004*
- *Human Rights Commission Act 2005*
- *Medical Treatment (Health Directions) Act 2006*
- *Medicines, Poisons and Therapeutic Goods Act 2008*
- *Mental Health (Treatment and Care) Act 1994*
- *Powers of Attorney Act 2006*
- *Privacy Act 1988*
- *Public Sector Management Act 1988*

ACT Health Policies

- Consumer Feedback Standards: Listening and Learning 2003
- Consumer Participation and Carer Participation across Mental Health ACT. A Framework for action 2007
- Consumer and Carer Participation. A framework for the Mental Health sector

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- Health Public Health Records and Information Policy, Procedures and Disposal Authority Manual 2006
- Privacy and Confidentiality Policy
- ACT Health Pharmacy Services – Drugs of Dependence Policy
- ACT Health Preventing and Managing Aggression and Violence in Act Health Policy and Standard Operating Procedures
- ACT Health Alcohol, Tobacco and Other Drug Strategy 2010 – 2014
- ACT Health Opioid Maintenance Treatment Guidelines

7. References

Australian Drug Foundation <http://www.adf.org.au/>

Policy Position 10 – Access to Primary Health Care, Australian Injecting and Illicit Drug Users League (AIVL)

8. Definitions

AOD: Alcohol and/or other drugs

Consumer: In this document the term ‘consumer’ refers to any person using ACT Health Services and is interchangeable with the terms ‘patients’ and ‘clients’

Illicit: Refers to “... a substance obtained and used illegally for its psychoactive or physical effect”. (New South Wales Drug and Alcohol Withdrawal Clinical Practice Guidelines 2007)

Prohibited substance: means a substance to which the medicines and poisons standard, schedule 9 applies. Schedule 9 substances are generally illegal substances that are subject to abuse.

Supply/Trafficking: includes the preparation, manufacture, sale, exchange, agreement to sell, or possession for sale of AOD

Use: ‘using’ refers to introducing the AOD into the body

Possession: knowingly having AOD under one’s custody or control or establishing ownership

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