

# Voluntary Undertakings – Protocol for Management

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## Definition

A Voluntary Undertaking is a voluntary agreement entered into by a patient with their doctor, whereby the patient agrees to the following:

- To attend only one identified doctor or practice to receive their prescriptions for benzodiazepines, opioids or other specified medicines.
- To attend only one identified pharmacy to have their prescriptions for benzodiazepines, opioids or other specified medicines dispensed.

## Objectives

- Encourage continuity of care.
- Promote the safe and controlled prescription and use of benzodiazepines, opioids or other specified medicines.
- Minimise the harm associated with benzodiazepine use and concomitant alcohol and/or other drug use.
- Assist doctors to achieve the best possible health outcomes for patients using alcohol and other drugs.
- Reduce the incidence of 'doctor shopping' by patients.
- Where possible and realistic, enlist the patient onto a gradual, supervised reducing regimen.

## Protocol

### Before negotiating a Voluntary Undertaking

- All patients with known or suspected excessive benzodiazepine, opioid or other specified medicine use should be encouraged to enter into a Voluntary Undertaking with their doctor.
- Patients cannot be forced to participate in a Voluntary Undertaking. However, a doctor may consider not prescribing if the patient refuses to participate. The immediate medical safety of the patient is a primary concern when deciding whether to prescribe.
- When a patient nominates a pharmacy, the doctor should contact the nominated pharmacy to enquire if that pharmacy is prepared to participate in the Voluntary Undertaking.

## Informed Consent

- The patient should be clearly informed about the potential dangers of sudden reductions or cessation of benzodiazepines or opioids.
- Before the agreement is signed the patient should be informed that if they breach their Voluntary Undertaking the doctor may refuse to prescribe benzodiazepines, opioids or other specified medicines.
- A patient should also be informed that s/he may cancel their Voluntary Undertaking at any time through their identified doctor. The document is considered valid for six months or until cancelled by patient or doctor.

***A witness other than the identified doctor needs to sign the Voluntary Undertaking to ratify the signatures of both the doctor and the patient.***

## The Voluntary Undertaking Document

- Having completed the Voluntary Undertaking Document:
  - *a copy should be given to the patient.*
  - *a copy, clearly marked “confidential”, should be forwarded to the Health Protection Service (by Fax 5124 9309 or by mail, Locked Bag 5005, Weston Creek ACT 2611).*
  - *a copy should be kept in the patient’s file.*
- If any alterations are made to the Voluntary Undertaking, the Health Protection Service should be notified.
- All Voluntary Undertakings and associated documents should be marked as “confidential” and filed accordingly. Measures should be taken to ensure that there is no unauthorised access to the files. Within the pharmacy, only pharmacists should be aware of those patients who have agreed to participate in a Voluntary Undertaking.

## Options to be considered

- Where possible and realistic doctors should encourage the patient to participate in a gradual, supervised reducing regimen.
- A doctor should consider referring any patient engaged in a Voluntary Undertaking to an alcohol and drug service for additional support and joint case management.
- Prescriptions provided to patients should be annotated with their nominated pharmacy name.

## Breaches

- When a pharmacist identifies a patient using a doctor or pharmacy other than those identified in the Voluntary Undertaking, the patient should be referred back to the identified doctor or pharmacy and the identified doctor should be notified so they are aware that the undertaking may have been breached.
- When an agreement is breached the doctor should discuss the breach with the patient and:
  - *consider the underlying problems and assist the patient to resolve them.*
  - *consider the patient's safety.*
  - *consider re-negotiating the Voluntary Undertaking to include other conditions i.e. counselling and/or daily collection of medications from doctor or pharmacy and/or a reduced daily dosing regimen.*
  - *consider liaising with alcohol and drug services and/or the Alcohol and Drug Program Medical Officer.*
- If a patient refuses to renegotiate his/her Voluntary Undertaking the patient's immediate medical safety is a primary concern when deciding whether to continue prescribing.
- After repeated breaches a doctor may decide to cancel the Voluntary Undertaking, refuse to prescribe benzodiazepines, opioids or other specified medicines and refer the patient to an alcohol and drug service. It is important that the doctor ensures the patient is aware of the dangers associated with sudden cessation of benzodiazepines.

### Accessibility

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