



**MANAGEMENT OF PATIENTS/VISITORS IN POSSESSION OF ALCOHOL OR UNPRESCRIBED/UNLAWFUL SUBSTANCES POLICY and PROCEDURE**

<b>Reference No:</b>	UHB 175	<b>Version No:</b>	1	<b>Previous Trust / LHB Ref No:</b>	T/339
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<b>Documents to read alongside this Policy &amp; Procedure</b>	UHB 035 – Management of Violence and Aggression (Personal Safety) Policy UHB 037 – Security Services Policy UHB 174 – Search of Patients Person and Belongings Policy and Procedure UHB 171 – Alcohol, Drug and Substance Misuse Policy (Staff) UHB 138 – Incident, Hazard and Near Miss Reporting Policy & Procedure
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<b>Classification of document:</b>	UHB Wide
<b>Area for Circulation:</b>	UHB Wide
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<b>Group Consulted Via/ Committee:</b>	Divisional Quality and Safety Groups/Quality and Safety Committee Strategy and Policy Task and Finish Group & Health and Safety Sub-Committee
<b>Approved by:</b>	Quality and Safety Committee
<b>Date of Approval:</b>	5 March 2013
<b>Date of Review:</b>	5 March 2016
<b>Date Published:</b>	27 March 2013

**Disclaimer**

**When using this document please ensure that the version you are using is the most up to date either by checking on the UHB database for any new versions. If the review date has passed please contact the author.**

**OUT OF DATE POLICY DOCUMENTS MUST NOT BE RELIED ON**

Version Number	Date of Review/ Approved	Date Published	Summary of Amendments
1	05/03/2013	27/03/2013	Previous Trust policy reviewed and updated to reflect best practice, organisational structures and arrangements

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### **References**

Human Rights Act-article 2 (Right to Life), Article 3 (Right not to be subjected to inhuman or degrading treatment and Article 8 (the Right to a private life)  
Misuse of Drugs Act (1971)

### **Accompanying Documents**

Appendix A            The use of Drug dogs on hospital premises  
Appendix B            Information Leaflet  
Appendix C            [UHB client/visitor information poster](#)

## **1 INTRODUCTION**

It is acknowledged that all Cardiff and Vale University Health Board (UHB) services, without exception, are likely to engage with patients, service users, carers and visitors who use alcohol and/or unlawful substances and solvents. Some of these individuals will misuse these substances. Substance misuse is implicated in a variety of poor outcomes for service users. Providing services for individuals with co-morbid physical health, mental health and substance misuse poses significant challenges (and issues where substance misuse is the primary problem poses specific challenges). There is a need to balance healthcare treatment and therapeutic engagement safely and legally. The Health Board believes that these factors are not mutually exclusive but require careful co-ordination.

This policy does not override the individual's human rights, as set out in the Human Rights Act 1998. Article 2 protects the Right to Life and places an obligation on the UHB to take positive steps to protect lives and Article 8 respect for private and family life.

## **2 POLICY STATEMENT**

The UHB has a responsibility to maintain an alcohol and unlawful substance free environment for service users, visitors and staff. Whilst the UHB acknowledges that we provide care for individuals with substance misuse problems we do not tolerate the use, possession or supply of substances on our premises.

The UHB is committed to providing safe and effective care to those who use our services as well as a safe environment for staff to work within. A set of common standards for treating patients and service users who use unlawful substances and abuse alcohol are required to establish effective care and a strong corporate message regarding the use/misuse of substances as applied to both staff and patients. Individual/s may be liable to prosecution under section 8 of the Misuse of Drugs Act 1971 if they allow unlawful drugs to be consumed or supplied on any UHB premises.

## **3 SCOPE**

This policy applies to all patients, service users and visitors using UHB services (including individuals under 18). There is a separate Alcohol, Drug and Substance Misuse Policy regarding staff under a contract of employment including individuals registered with the Nurse Bank, locum personnel, and staff on honorary contracts.

## **4 AIM**

This policy aims to ensure that staff are aware of their respective responsibilities in regard to:-

- the misuse and supply of alcohol; or
- any form of unprescribed/unlawful substances found, or suspected of being used, or supplied within their services.

The policy is supported by a procedure (see Appendix 1) which should be followed in the event of a breach of this policy.

It also re-enforces to patients and service users that the UHB will not tolerate the misuse and supply of alcohol or any form of unlawful substances within its premises.

## **5 OBJECTIVES**

The objectives of this policy are to:-

- Provide a safe environment for patients, staff and visitors to the UHB.
- Reduce the risks associated with substance and alcohol misuse.
- Reduce and aim to eradicate the availability of unlawful substances on UHB premises.
- Deal safely, effectively and therapeutically with substance misuse as and when it occurs and facilitates the effective treatment of substance misuse in the populations that we serve.
- Provide clear guidance to staff on the management of patients or visitors to UHB premises found to be in possession of unlawful substances or having consumed alcohol ensuring staff respond appropriately across the organisation and with due regard for the requirements of the law.
- Promote good working relationships with the Police in order to manage incidents appropriately.
- Provide information for staff on the agencies available to provide advice regarding substance and alcohol misuse.
- Promote zero tolerance in relation to substance and alcohol misuse.

## **6 RESPONSIBILITIES**

This policy states the intentions of the UHB with regard to the management of patients or their visitors who are in possession of or using unlawful substances or alcohol while on UHB premises. As such, immediate responsibility for its implementation lies with those groups of staff in day to day contact with those persons.

- Executive lead for the policy
- Divisional triumvirate (Divisional Director, Nurse and Manager)
- Clinicians
- Duty on call senior managers

Where staff require support in implementing the policy they should refer upwards to line managers.

Individual members of staff are only responsible for implementation to the extent of their professional competence and training. Training needs of staff need to be assessed to ensure appropriate training (where required) has been considered.

## **BEST PRACTICE**

**7.1** On admission/assessment or other areas should it be deemed appropriate all service users (in mental health services) are to be given a copy of the patient information leaflet. (Appendix B)

**7.2** On assessment/admission all patients and service users should have a basic assessment of substance misuse, which may include the following areas:

Substance Misuse History and brief history of recent use

Main drugs of choice : - alcohol, opiates, benzodiazepines, stimulants

Amounts used and when was the last episode of use.

Route of administration the individual uses (e.g. Intravenous, etc)

Equipment used and where this is obtained.

Whether substances are prescribed, unprescribed/unlawful or other.

Previous and/or current treatment/prescription and what if any services are involved.

Would the patient like a referral to specialist services

How substance use is funded.

Harmful effects of substances.

Motivation to change behaviour.

Usual withdrawal symptoms for that individual including any history of alcohol withdrawal seizures and delirium tremens. Other complications related to substance misuse include e.g. Dependence, blood born viruses, Wernicke's encephalopathy, confusion and toxicity.

In order to help with any Opiate withdrawals staff should refer to **"Guidelines for the management of opioid-dependent individuals admitted to UHW and Llandough hospitals"** (available on the **Clinical Portal**)

Where substance misuse is confirmed or expected it is reasonable to request a urine sample, breathalyser and/or saliva swab. Where the

service user refuses to provide this a discussion should take place with the Multi-Disciplinary Team (MDT) as soon as practicable to clarify the team's response to this. Advice on training and good practice may be sought from Community Addictions Service (where appropriate).

- 7.3** Services should seek advice from specialist alcohol and substance misuse services (Community Addictions Unit) on appropriate treatment interventions especially when substitute prescribing or a detoxification may be indicated. In some cases the service user may present with a substance misuse problem appropriate for referral to a specialist alcohol and substance misuse service.
- 7.4** All areas within the UHB will prominently display the Drug and Alcohol Misuse poster. (Appendix C).

In order to make carers and visitors aware of the policy of the UHB, services should display the UHB poster on Unprescribed/Unlawful Substances (Appendix C) by front entrances and the Safety Leaflet (Appendix B) should be given to visitors at the earliest opportunity (where appropriate).

- 7.5** Services will develop documentation around the rights and responsibilities of service users to highlight the Health Boards expectations of the service users' behaviour.
- 7.6** All services must adhere to the UHB Waste Management policy around disposal of unlawful substances.

This policy (Management of patients and their visitors in possession of unlawful substances) has been developed in collaboration with the Pharmacy department and South Wales Police

## **7 RESOURCES**

- UHB wide posters to be developed by media resources

## **8 TRAINING**

The UHB gives a commitment to maintain an alcohol and unprescribed/unlawful substance free environment for service users, staff and visitors.

- Specific clinical areas may require training in use of alcoholmeters and drug screening tools (refer to Community Addictions Unit.)
- Training in Brief interventions (as per Welsh Government guidelines) should be available to identified groups of staff.
- Personal safety training for identified areas should be available

## **9 IMPLEMENTATION**

- Official launch of policy with partners (Police)
- Roll out of posters to all areas
- Action plan for implementation

## **10 EQUALITY**

Cardiff and Vale UHB is committed to ensuring that, as far as is reasonably practicable, the way we provide services to the public and the way we treat our staff, patients and others reflects their individual needs and does not discriminate, harass or victimise individuals or groups. These principles run throughout our work and are reflected in our core values, our staff employment policies, our service standards and our Strategic Equality Plan & Equality Objectives. The responsibility for implementing the scheme falls to all employees and UHB Board members, volunteers, agents or contractors delivering services or undertaking work on behalf of the UHB.

We will apply common standards based on the law and on good clinical practice across all service areas of the UHB. All service users who have substance misuse problems will be offered appropriate information, assessment, treatment and support.

An Equality Impact Assessment has been undertaken. The purpose of this was to identify any possible or actual impact that this policy may have on any groups in respect of gender, maternity and pregnancy, carer status, marriage or civil partnership issues, race, disability, sexual orientation, Welsh language, religion or belief, transgender, age or other protected characteristics. The assessment found that there was no negative impact to the equality groups mentioned.

## **11 AUDIT**

Implementation of this policy will be monitored by the UHB Health and Safety Sub-committee.

Currently statistics on adverse incidents are collected. Staff should be encouraged to report if patients or visitors have had to be discharged or removed from the premises due to the use of alcohol or unlawful drug use. These should be classed as reportable incidents via the UHB Incident Reporting Form

## **12 REFERENCES/FURTHER INFORMATION**

See above

## **13 DISTRIBUTION**

This policy will be made available on the UHB intranet and internet sites. It will also be circulated to partner agencies.



## **14 REVIEW**

The policy will be reviewed every 3 years or as necessary should any changes in legislation or incidents occur where the policy has not been satisfactory.



## **PROCEDURE TO BE FOLLOWED IN THE EVENT OF A PATIENT OR SERVICE USER BEING FOUND IN THE POSSESSION OF OR UNDER THE INFLUENCE OF ALCOHOL OR UNPRESCRIBED/ILLEGAL SUBSTANCES**

### **1 Alcohol Misuse**

- 1.1 Any patient found to be in possession of or having consumed alcohol whilst an inpatient will be made aware of the UHB position and, where appropriate, reviewed for discharge.
- 1.2 If the service user has alcohol in their possession, it should be removed. Prior to any search of property, patients should be given the opportunity to volunteer any alcohol in their possession either for disposal or given to relatives if felt appropriate.
- 1.3 If a patient refuses to hand over alcohol, a search should be undertaken in accordance with the UHB Search of Patients Person and Belongings Policy. Patients should be informed before a search that any alcohol found will be removed from their possession and, if permission for removal by relatives or carer or disposal by staff is withheld, it will be stored in a secure place specifically identified for that purpose. Any alcohol found under these conditions should be recorded as patient property and the patient should sign and be given the appropriate receipt for this property. The site manager/senior nurse should be informed of the above. The service user should be advised on the rationale for the above.
- 1.4 If a decision is taken not to discharge a patient a review of their management will take place at the earliest opportunity.
- 1.5 Further consideration will be needed if the individual concerned is detained under the Mental Health Act or has impaired capacity and cancellation or withdrawal of treatment is not indicated.
- 1.6 If the service user is being admitted, staff should request that the service user hand over any alcohol in their possession (see 1.3).
- 1.7 Patients attending day units who are not inpatients and those attending outpatient appointments or the Emergency unit, including those accompanying attendees, who present as clearly intoxicated and

threatening / disorderly, must be asked to leave immediately, whether or not they have been seen by a clinician. The appointment should be rebooked as soon as possible and the person informed of the new appointment. No department in the Health Board should tolerate threatening or disorderly behaviour. In Day Units and Outpatient Clinics, it may be advisable for clinicians who have reason to believe someone is intoxicated or under the influence of unprescribed/unlawful drugs, not to see the patient and arrange another appointment.

- 1.8 In circumstances where a service user accesses an outpatient appointment and is suspected of driving a motor vehicle and is suspected of being under the influence of drugs or alcohol, staff should advise the service user that it is would not be safe for them to drive their vehicle home. Staff should inform the service user that they would be under a duty to report the matter to the Police should the service user drive a vehicle under the influence. Staff should advise the Police if they suspect the service user is driving home under the influence of drugs or alcohol.
- 1.9 Parents whose children are patients should be advised that attending the hospital in an intoxicated state or being threatening or disorderly is not acceptable. Guidance may be sought from Specialist Liaison Nurse (via the Safeguarding Children's team) should staff have concerns regarding safeguarding children (it must be noted that being drunk in charge of a child is an offence)
- 1.10 Where patients have been discharged and / or asked to leave UHB premises, it may be appropriate to seek support from the Police to ensure their departure if violence or breach of the peace is likely to occur.
- 1.11 In certain clinical areas, (e.g. rehabilitation, medical rehabilitation etc), social drinking may form part of a social rehabilitation programme. Such programmes should form part of individualised care planning identifying appropriate outcomes and should be evaluated and recorded in line with current guidelines in the service users' clinical record.

## **2 Planned Alcohol Detoxification**

Patients may be admitted to wards in the UHB for a planned and negotiated alcohol detoxification. The duration of this detoxification admission will be determined by the clinical team. It will be dependent on the physical state of the patient as well as the amount of alcohol being consumed.

If patients are found to be in possession of or having consumed alcohol whilst on a detoxification programme, he / she may be discharged from the ward, (there may be dual diagnosis, medical or capacity issues that prevent this

from happening). Normal discharge procedures will be followed. It is expected that there will be consensus by the multidisciplinary team for discharge as non-agreement will lead to inconsistency in care and decision-making.

Discharge may also be considered when patients absent themselves from the clinical area during the detoxification period. Rules relating to such considerations should form part of the clinical contract.

### **3 Use and Possession of illicit Drugs**

- 3.1 Patients suspected of possessing or using unprescribed/unlawful drugs should be made aware of the policy of the UHB and informed that the possession of unlawful drugs constitutes a criminal offence that will make them liable to arrest.
- 3.2 Clinical areas should ensure that signage is used to advise patients and visitors of the Boards zero tolerance regarding point 3.1.
- 3.3 Where a patient is suspected of using unprescribed/unlawful drugs in an inpatient area, they will be asked to surrender any in their possession to a lawful authority. Where a person refuses to co-operate the police should be called to exercise the right to search based on reasonable suspicion. These will be disposed of as stated in the Search of Patients procedure. The Police must be involved.
- 3.4 If staff have good reason to believe that a patient is in possession of illicit drugs and the patient refuses to relinquish them, the staff will search the patient and his / her property in accordance with the Search of Patients, Person and Belongings Policy and Procedure. If unprescribed/unlawful drugs are found, they must be disposed of as stated in Appendix 1 (Search of Patients Procedure). The Police will then be called.
- 3.5 If a visitor is in possession of unprescribed/unlawful drugs and/or suspected of supplying drugs to inpatients, they must be informed that unlawful drugs are not allowed on UHB premises and that their actions may constitute a criminal offence. The Police will be called immediately; they will review the circumstances and take appropriate action. The manager responsible for the area will write to the visitor advising them that visiting on UHB premises may be restricted or stopped dependent on the circumstances as a result of their actions in line with UHB Policies. The decision to prosecute or otherwise will be taken in consultation with the Crown prosecution service
- 3.6 Where patients and / or visitors have been discharged and / or asked to leave UHB premises, it may be appropriate to seek support from the Police to ensure their departure if the person is violent or where a breach of the peace is likely to occur.

#### **4 Detained Patients or Risk of Unsafe Discharge.**

- 4.1 For patients unable to be safely discharged (if possession of unprescribed/unlawful substances or alcohol), or for those patients detained under the Mental Health Act, a review of their management will take place at the earliest opportunity. Possible outcomes may be the identification of a more appropriate environment in which their needs may be met, limits on visitors, or review of unescorted community leave if this presents the opportunity for substances to be obtained and brought onto UHB premises. Other aspects to be considered by the UHB if these circumstances occur are i) Mental capacity and/or ii) deprivation of liberty or iii) false imprisonment
- 4.2 In circumstances where detained patients are suspected of or known to be using unlawful substances the Multi Disciplinary Team (MDT) must be seen to take all practicable steps to minimise the risk of this occurring whilst accounting for the individual needs of service users. The MDT will have a care plan for every service user where substance misuse is a known consideration.
- 4.3 If a patient is suspected of having used substances the senior member of staff on duty should be informed and this should be discussed with the MDT and if appropriate the service user should be challenged regarding suspicions.

They should be asked to provide a urine specimen (mental health setting). A same gender member of staff should observe the urine specimen being given in order to prevent contamination or dilution of sample. The sample should be sent for analysis immediately, or tested on site where facilities exist. If the patient refuses then future management options have to be considered and discharge may be required.

A room and person search should be considered in accordance with the Search of Patients Person and Belongings Policy and Procedure.

- 4.4 If the patient denies using substances, they should be medically assessed and observed for 24 hours to ensure that they are not affected to a level that may have harmful physical consequences. During this time staff should document any changes in behaviour, physical observations and signs of intoxication. If at any point concern arises as to the patient's physical state, advice should be sought from an appropriate medical practitioner or where the individual's

observations are causing serious concern, appropriate medical intervention should be sought.

- 4.5 Where the balance of evidence suggests that substance misuse is occurring the MDT should convene to discuss treatment options and the appropriateness of police involvement.
- 4.6 In situations where unprescribed/unlawful substances or substances suspected of being unlawful are found, via a room, person search, or discovered in the everyday course of events, the MDT should discuss the implications of this. Substances must be disposed of as per Search of Patients Policy with police involvement and handed over to the Police. In some services and under certain circumstances, the introduction of drug sniffer dogs may be requested (see Search of Patients Person and Belongings Policy and Procedure). A Serious Untoward Incident Form should be completed.

## **5 SUSPICION THAT UNPRESCRIBED/UNLAWFUL SUBSTANCES ARE BEING SUPPLIED/USED ON UHB PREMISES**

- 5.1 If there is serious concern or evidence that unlawful substances are being supplied on UHB premises the police must be informed and advice taken from them without exception and a Serious Untoward Incident Form should be completed.
- 5.2 If it is suspected that patients or visitors are using or dealing in unprescribed/unlawful substances on UHB premises, e.g. corridors, etc. the manager of the area should be contacted. The Police must be contacted for assistance as this is a criminal offence.
- 5.3 It is recognised that a high proportion of our service users / patients will be experiencing problems related to substance use and that help for this is an integral part of the care provided. When service users / patients are noted to be using unprescribed/unlawful substances, consideration should be given by the MDT as to whether specialist advice from the Community Addiction Unit would be appropriate. A Substance Misuse Liaison Nurse or Specialist Midwife, as appropriate, may be contacted for advice.

## **6 SUSPECTED UNLAWFUL SUBSTANCE HANDED IN VOLUNTARILY**

- 6.1 Suspected illicit substances that are handed in voluntarily should be treated in the same way as those found in a search. Substances, such as illicit drugs should be disposed of in accordance with 6.3 below. The Police should not be routinely called in these circumstances, however the Pharmacy department should contact the Police for disposal of substances. The provision of a drop safe (see procedure) where staff

can deposit drugs should be provided which can be administered by the Police.

6.2 The patient should give authority for the removal and disposal of the suspected substances. If the patient refuses then the MDT may feel that they have no alternative but to discharge the patient immediately only if (if the patient is not subject to the MHA Act 1983, DoLS, or lacks mental capacity) and/or to call the Police

6.2.1 In hospital premises with a Pharmacy Department:

- The item should be placed in a sealed tamper proof envelope and labelled with a description of the contents on the tamper proof envelope, e.g. a small quantity of white crystalline powder. Staff should not attempt to name the unprescribed/unlawful substance. The tamper proof envelope should be signed by the nurse in charge of the ward, ensuring the date and time is also recorded on the tamper proof envelope.
- Two members of staff should transport the sealed envelope to the Drop Safe. Immediately and record in the Drop safe ledger with the accompanying ledger number on the tamper proof envelope.
- If this procedure takes place out of hours the same procedure applies
- A receipt must be given to the patient in the case of property other than substances for destruction e.g. alcohol and/or drug paraphernalia.
- The site manager / senior nurse and the patient's nominated doctor or deputy must be informed.

6.3.2 In UHB premises without a Pharmacy Department:

If suspected substances are handed in or found at community premises, they should be sealed in a tamper proof envelope and recorded as for hospital settings (taken to drop safe). A senior member of staff should then inform the Police of the presence of the suspected substance on the premises and follow instructions from the Police regarding disposal. UHB staff should not transport suspected substances within the community.

## APPENDIX A

### **THE USE OF DRUG DOGS ON HOSPITAL PREMISES**

#### Plan of Search

Wards to be searched should be selected after considering the following information:

- That there have been recent drug seizures or confirmed drug use
- That ward staff have a suspicion of drug use
- That there may be visitor interaction allowing delivery of drugs
- That received from security sources

Individual patient rooms should never be searched in isolation as this could indicate that the patient has been singled out for special attention, (see Search of Patient Policy).

Dog handlers will advise about the length of search taking into consideration the temperature, size and difficulty of the clinical area.

Prior to the search, all staff and patients must be made aware that drug detection dogs may be used in the future to allow the hospital to ensure a safe working and living environment for patients and staff.

General warnings that drug detection dogs may be used on site at any time need to be displayed on information boards.

No patient or non-resident staff should be made aware of exact dates of search.

Senior management to decide if staff areas are to be searched.

Dog handlers will require secure parking close to the search venues.

Briefing prior to commencement of search will include ward managers.

Prior to immediate search, all patients need to be gathered in one central area, i.e. dayroom and movement on and off the ward should be curtailed during the search.

A manager will escort the dog handler to all sections of the area to be searched.



## APPENDIX B

### Mental Health Division Information Leaflet

<p><b>Alcohol and Unlawful Substances (Drugs) Safety Leaflet</b> Guidance for Patients, Service Users, Carers/Visitor's and Relatives</p> <p>Cardiff and Vale University Health Board Bwrdd Iechyd Prifysgol Caerdydd a'r Fro</p>
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#### Possession or supply

Any person found in possession, using or supplying unlawful drugs on Cardiff and Vale University Health Board premises will be reported to the Police and appropriate action taken. Patients and Service users may find that services and treatment may be withdrawn from them. If patients or service users are found in the possession of alcohol they will be requested to dispose of it or arrange for carer/family to take the alcohol off the premises.

Visitors found in possession of or suspected of supplying unlawful substances whilst on UHB premises will be reported to the Police and may have their visiting rights suspended.

#### Policy statement

Cardiff and Vale UHB has a responsibility to maintain an alcohol and unlawful drug free environment for service users, carers and staff. We take this responsibility seriously, both because it is a legal requirement and because by doing so, we provide safer and more effective care for service users.

The Board is committed to providing care for individuals with substance misuse problems within all areas of service provisions. However we do not tolerate the use, possession or supply of alcohol or unlawful substances on our premises.

#### Principles

The Health Board believes that every individual has the ability to change and adapt their behaviour within a framework of recovery.

We will apply common standards based on the law and on good clinical practice across all service areas of the Board. We aim that our response to episodes where such use has taken place will be uniform.

All service users who have substance misuse problems will be offered appropriate information, assessment, treatment and support.

Alcohol and unlawful/non-prescribed drugs can have an adverse and detrimental affect on individuals who use them in conjunction with prescribed medication. The effect can be more severe if the individual is also suffering from mental health issues. This can seriously hinder a person's recovery process and delay their discharge.

### Clinical Care of Service User

When any service user comes for treatment at any of the services provided by the Health Board, it is important that they are not under the excessive influence of alcohol or unlawful drugs. This is because any assessment will be less accurate and any treatment less effective.

Some service users with severe substance misuse dependence cannot safely attend without the presence of substances in their body, but this is a clinical judgement that staff will make and record in the service users care plan. If service users are unable to attend other than in an intoxicated state, different arrangements may have to be made to ensure that an effective assessment can be made.

If the use of unlawful substances or alcohol is associated with violent or threatening behaviour this may affect care and treatment and could result in legal charges. If a service user is admitted to any inpatient service or ward they will be asked to hand over any substances prescribed or otherwise in their possession. Any unlawful substances will be disposed of as per the policy of Cardiff and Vale Health Board.

Please ask to speak with a member of staff should you have any questions regarding the contents of this information leaflet.