

## TITLE

**RESIDENTIAL ADDICTION TREATMENT AND DETOXIFICATION PROGRAMS****SCOPE**

Provincial: Residential Addiction Treatment and Detoxification Programs; Protection of Children Abusing Drugs (PChAD) Program

## DOCUMENT #

AMH-08

## APPROVAL AUTHORITY

Vice President, System Innovations and Programs

## INITIAL EFFECTIVE DATE

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## SPONSOR

Executive Director, Provincial Addiction and Mental Health

## REVISION EFFECTIVE DATE

Not applicable

## PARENT DOCUMENT TITLE, TYPE AND NUMBER

Not applicable

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November 1, 2022

**NOTE:** The first appearance of terms in bold in the body of this document (except titles) are defined terms – please refer to the Definitions section.

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**OBJECTIVES**

- To promote patient-centred care and the delivery of recovery-oriented, concurrent-capable services in a safe and welcoming environment for all **patients**, their **family**, visitors and staff in Alberta Health Services (AHS) Residential Addiction Treatment and Detoxification programs (including addiction treatment day programs offered in these shared settings) and the Protection of Children Abusing Drugs (PChAD) program.
- To identify key processes that support patient safety while respecting patient autonomy.

**PRINCIPLES**

AHS is committed to providing services to patients seeking addiction treatment in a safe, welcoming and recovery-oriented environment. Delivering quality care includes the involvement of the patient, their family and **health care providers** and builds on collaborative practice, safety and respect for patient choice.

Recovery orientation is a patient-centred approach that builds on a patient's strengths and focuses on increased quality and control of one's life. A recovery-oriented approach recognizes that recovery is a journey, unique to each person. Patients may return multiple times to residential addiction treatment and detoxification programs throughout their recovery. These programs are part of the continuum of care and present an opportunity to engage, support and collaborate with patients along their recovery journey.

**Social determinants of health** impact the lives, health status and substance use of patients and their families who may experience harm from substance use. AHS shall ensure that every attempt is undertaken to promote optimum health by reducing and/or addressing inequities.

AHS programs and services recognize and address the unique health and social needs of **populations vulnerable to poor health outcomes**, which are socially, culturally and/or economically marginalized groups such as, but not limited to, youth, women, older adults, homeless persons, Indigenous people, the Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, Intersex and Two Spirit (LGBTQI2S+) communities and cultural minority groups.

## APPLICABILITY

Compliance with this document is required by all Alberta Health Services employees, members of the medical and midwifery staffs, Students, Volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary).

## ELEMENTS

### 1. Points of Emphasis

- 1.1 Any person reporting current opioid use or requesting a naloxone kit should be offered/given a naloxone kit in accordance with the *AHS Distribution of Community Based Naloxone Kits* Policy.
  - a) Managers and/or Supervisors shall ensure staff are provided with the appropriate training (refer to the *AHS Community Based Naloxone* training, available in My Learning Link) for distributing the naloxone kits.
- 1.2 Staff shall treat patients with respect and dignity without judgment, **stigma** and/or **discrimination**. Patients who attend addiction treatment and detoxification programs come with their own history, culture, beliefs, experiences of trauma, family and health context, which should be considered during the delivery of services.
- 1.3 Residential addiction treatment and detoxification programs align with a **harm reduction** approach per the *AHS Harm Reduction for Psychoactive Substance Use* Policy, that includes respect for individual autonomy and supports individuals to set their own goals based on their needs, special circumstances, abilities, beliefs and priorities.
- 1.4 Residential addiction treatment and detoxification programs align with evidence-based practices and do not discriminate, stigmatize or deny access to treatment due to a patient's past, current or ongoing use of prescription medication under the direction of an **authorized prescriber**, including opioid agonist therapies.
- 1.5 Staff shall promote patient autonomy by clearly communicating and discussing expectations while respecting and upholding the privacy and dignity of patients, families, visitors and staff.
- 1.6 PChAD program
  - a) The child's **guardian(s)** and other family members, as appropriate, are important members of the child's support team. Families may provide

information to staff that is essential for aiding in the child's recovery and should be consulted as clinically appropriate in accordance with the *Health Information Act* (Alberta).

- b) Information shall be provided to the child and their guardian(s) in accordance with the *Protection of Children Abusing Drugs Act* (Alberta) and applicable privacy legislation (*Health Information Act* [Alberta] and *Freedom of Information and Protection of Privacy Act* [Alberta]).

## 2. Safety

2.1 To promote a safe, supportive, transparent and welcoming environment that protects the safety of all patients, their families, visitors and staff, builds trust and allows patients to focus on their recovery, health care providers shall:

- a) manage suicide risk using comprehensive suicide risk screening and assessment;
- b) communicate the program's rules and/or procedures to all persons entering the facility and monitor visitors entering the facility per the AHS *Visitation with a Family Presence Focus Policy*; and
- c) communicate and discuss with the patient the rationale and process for searching patients and their belongings. Health care providers shall:
  - (i) obtain consent prior to any searches. If a patient does not consent to searches then staff shall review options with the patient, which at some facilities may include discharge. Decisions shall be made on a case-by-case basis;
  - (ii) conduct all searches in a manner that preserves the patient's dignity; and
  - (iii) make reasonable efforts to prevent the presence of prohibited and restricted items in the facility.

## 3. Delivering Quality Care

- 3.1 Health care providers shall provide evidence-based care through patient-centred referral, admission, assessment, treatment and discharge planning processes.
- 3.2 Health care providers shall inform the patient and discuss with them the nature of the program's services in accordance with the *Mental Health Services Protection Act* (Alberta).
- 3.3 Health care providers shall, in collaboration with the patient, their referral source, and/or other supports, develop a comprehensive treatment and discharge plan as per the AHS *Patient Referral, Admission, Assessment, Treatment and*

*Discharge Planning* Procedure (Addiction and Mental Health) or applicable PChAD processes.

- 3.4 As applicable, each facility shall have a clear process regarding patient **passes**/ negotiated absences that respects the needs and wishes of patients while supporting a cohesive and focused therapeutic environment.
- 3.5 To promote reasonable access, facilities shall have clear processes in place for admission, walk-ins, wait-list management, etc., as applicable to the facility. Health care providers shall provide patients with appropriate information on local alternate services, as necessary.
- 3.6 Medication management shall be part of the quality care provided by health care providers.
- 3.7 **Health care professionals** in detoxification centres shall manage withdrawal as per the AHS *Management of Alcohol Withdrawal in Non-hospital Detoxification Centres* Protocol and use standardized tools (e.g., Clinical Opioid Withdrawal Scales) for withdrawal from other substances, as clinically appropriate.
- 3.8 Health care providers shall screen for opioid-related risks and provide appropriate education.

## DEFINITIONS

**Authorized prescriber** means a health care professional who is permitted by federal and provincial legislation, their regulatory college, Alberta Health Services, and practice setting (where applicable) to prescribe medications.

**Discrimination** means any practice, judgment, and action that creates and reinforces oppressive relations or conditions that marginalize, exclude and/or restrain the lives of those encountering it.

**Family** means one or more individuals identified by the patient as an important support, and who the patient wishes to be included in any encounters with the health care system, including, but not limited to, family members, legal guardians, friends and informal caregivers.

**Guardian** means, where applicable:

For a minor: a guardian as defined in the *Family Law Act* (Alberta), a divorced parent with custody of the minor, or a person appointed pursuant to a will, personal directive, court order, agreement or by authorization of legislation (e.g., *Child, Youth and Family Enhancement Act* [Alberta]).

For an adult: an individual appointed by the Court in accordance with the *Adult Guardianship and Trusteeship Act* (Alberta) to make decisions on behalf of the adult patient when the adult patient lacks capacity.

**Harm reduction** means those policies, programs and practices that aim primarily to reduce the adverse health, social or economic consequences of the use of legal and illegal psychoactive

substances without necessarily reducing consumption. A harm reduction approach to substance use accepts that abstinence may or may not be a realistic or desirable goal for an individual patient, and explicitly acknowledges that the cessation of substance use is not a prerequisite for accessing health or social services. Interventions may be targeted at the individual, the family, community or society.

**Health care professional** means an individual who is a member of a regulated health discipline, as defined by the *Health Disciplines Act* (Alberta) or the *Health Professions Act* (Alberta), and who practices within scope or role.

**Health care provider** means any person who provides goods or services to a patient, inclusive of health care professionals, staff, students, volunteers and other persons acting on behalf of or in conjunction with Alberta Health Services.

**Pass(-es)** means that the patient is allowed to leave the premises or facility grounds for a specified period of time, either accompanied or not.

**Patient** means all persons, inclusive of residents and clients, who receive or have requested health care or services from Alberta Health Services and its health care providers. Patient also means, where applicable:

- a) a co-decision-maker with the person; or
- b) an alternate decision-maker on behalf of the person.

**Populations vulnerable to poor health outcomes** means groups of people that have an increased risk of poor health and adverse health outcomes due to the risk conditions associated with being a member of that group.

**Social determinants of health** means the circumstances in which people are born, grow up, live, work and play, including the quality of the health care they receive over their lifetime that influence the health outcomes and quality of life of populations. Some examples include income and income distribution; education; employment; job security, and working conditions; early childhood development; food security; housing; built and natural environments; social inclusion/exclusion; social safety network; health services; Indigenous status; gender; ethnicity; race; and disability.

**Stigma** refers to negative attitudes (prejudice) and negative behaviour (discrimination). These attitudes and judgments can affect how we think about, behave and provide care to clients.

## REFERENCES

- Alberta Health Services Governance Documents:
  - *Distribution of Community Based Naloxone Kits Policy* (#HCS-246)
  - *Harm Reduction for Psychoactive Substance Use Policy* (#HCS-33)
  - *Management of Alcohol Withdrawal in Non-hospital Detoxification Centres Protocol* (#HCS-12-01)
  - *Patient Referral, Admission, Assessment, Treatment and Discharge Planning Procedure* (#AMH-08-01)
  - *Visitation with a Family Presence Focus Policy* (#HCS-199)

- Non-Alberta Health Services Documents:
  - *Age of Majority Act* (Alberta)
  - *Freedom of Information and Protection of Privacy Act* (Alberta)
  - *Health Information Act* (Alberta)
  - *Mental Health Services Protection Act* (Alberta)
  - *Protection of Children Abusing Drugs Act* (Alberta)

**VERSION HISTORY**

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