# 4 Documentation Review Tool

### Guidance notes

This is an optional tool provided to assist auditors to review documentation. Where appropriate, guidance on what the auditor should be looking for in a document is listed in bullet points. Overall, the audit seeks to confirm that all documentation reflects the current legal requirements, standards and best-practice guidelines.

In this form, *OST Guidelines* refers to the *New Zealand Practice Guidelines for Opioid Substitution Therapy 2014* (Ministry of Health 2014).

| ***OST Guidelines* section reference** | **Documentation** | **Yes** | **No** | **Comment (if necessary)** |
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| 12.6 | Approval to offer OST   * Sight documentation, check current |  |  |  |
|  | Organisational chart |  |  |  |
| Intro | Treaty of Waitangi policy   * Consistent with standards and *OST Guidelines* |  |  |  |
|  | Treatment outcomes monitoring policy and/or most recent report   * Outcomes regularly monitored * Suitable outcomes monitoring tool(s) used * Reflect national objectives |  |  |  |
| 11.7 | OST service plans   * Quality plan * Civil defence and/or emergency plans * Strategic plan |  |  |  |
| 1.1–1.3 | Service philosophy, principles, objectives and role   * Reflect underpinning principles in *OST Guidelines* * Reflect a recovery-orientated and harm-reduction treatment focus |  |  |  |
|  | Consumer involvement in the service (design, delivery, planning, evaluation)   * Consistent with health and disability sector standards * All aspects are included in the service’s policies |  |  |  |
| 2.6  2.1  Appendix 18 | * Access to service * Admission criteria and exclusion criteria * Assessment * Waiting-list management * Interim prescribing   All comply with law, standards and *OST Guidelines*; facilitate client engagement |  |  |  |
| 2.2 | OST treatment pathway   * Clear and comprehensive |  |  |  |
| 6.2, 4.1, 4.3, 4.4  4.2  2.3, 2.9  3.8  2.4  2.8  11.3  11.4  3.6  3.9  5.1, 5.7  6.5.4  6.5.3  6.3, 6.1.1  5.2 | Client information booklet/information sheets on:   * OST, including potential side effects, drug interactions and overdose and cardiac effects (with methadone) * information on the effects of changes of opioid dose and combining opioid medications with recreational or prescribed drugs and service requirements on driving ability * range of treatment options available * use of psychosocial interventions * service inclusion/exclusion criteria * expected responsibilities/obligations of the client, including active participation in all aspects of their treatment * the client’s rights and advocacy * the service’s complaints procedure (particularly in relation to individuals seeking a review of their situation) * relevant advocacy contacts * treatment review * planned and involuntary withdrawal processes * travel * dental health * blood-borne viruses * suspected intoxication or ‘diverting’ their OST medication * requesting changes to prescriptions |  |  |  |
| 2.8 | Informed consent   * Consistent with health and disability sector standards and *OST Guidelines* |  |  |  |
| 2.1 | Comprehensive assessment template   * Consistent with *OST Guidelines* |  |  |  |
| 2.2 | Treatment plan template   * Consistent with *OST Guidelines* |  |  |  |
| 11.3 | Client rights policy   * Consistent with health and disability sector standards * Limits of confidentiality under the Health Information Privacy Code 1994 |  |  |  |
| 11.4 | Complaints policy   * Consistent with health and disability sector standards |  |  |  |
| 2.9 | Benefits and limitations of OST   * Information on available OST medications |  |  |  |
| 10.1 | Consumer advocacy and peer-support services |  |  |  |
| 3.6 | Treatment review policy   * Consistent with *OST Guidelines* * Pathways for clients seeking review of their treatment |  |  |  |
| 3.7 | Drug screening policy   * Consistent with *OST Guidelines*: facilitates client engagement and recovery and ensures safety |  |  |  |
| 3.1–3.3, 3.6 | Case management and care coordination policy   * Consistent with *OST Guidelines* |  |  |  |
| 5.1  3.3  5.2  9.2  5.3  5.4 | Prescribing and dispensing OST medications policy/protocols, including:   * takeaway medication * change of medication dose procedure * change of dispensing procedure * safety/dispensing arrangements * medication dose replacement * missed medication doses   All comply with law, standards and *OST Guidelines*: facilitates recovery and ensures safety |  |  |  |
| 3.8 | Access to psychosocial interventions policy   * Consistent with *OST Guidelines* * Pathway for accessing if not provided by service |  |  |  |
| 3.8 | Access to psychosocial supports policy   * Consistent with *OST Guidelines* |  |  |  |
| 6.5 | Treatment of coexisting mental health and medical health problems   * Screening, assessment and management provided |  |  |  |
| 6.5.3 | Blood-borne viruses   * Consistent with OST objectives * Reflects current best practice |  |  |  |
| 6.5.5 | Older clients   * Plans in place for care of older clients (ie, clients aged 45 years or older) |  |  |  |
| 4.1–4.4 | Safety and risk management policy   * Overdose management * Driving and OST * Cardiac safety and methadone * Drug interactions * Safety of staff and clients |  |  |  |
| 6.1, 6.3 | Managing intoxication and/or suspected diversion policy   * Consistent with *OST Guidelines* |  |  |  |
| 6.6 | Pain-management policy   * Acute and ongoing pain management * Emergency admissions * Planned admissions to hospital * Reflects links with pain management services |  |  |  |
| 6.7 | Pregnancy and breastfeeding   * Reflects priority admission * Information on buprenorphine |  |  |  |
| 3.9 | Ending OST   * Consistent with *OST Guidelines*; reflects relapse prevention, after-care and OST re‑entry provisions |  |  |  |
| Appendix 18 | Interim prescribing policy   * Includes buprenorphine |  |  |  |
| 9 | Community pharmacy interface policy/protocol   * Informing and consulting pharmacists * Training and support for community pharmacists * Management of dispensing errors |  |  |  |
| 12.7  8.1-8.2 | Primary health care interface policy/protocol   * Authorisation of GPs to prescribe OST medications * Transfer of clients to and from primary health care * Review of treatment * Support for authorised GP prescribers |  |  |  |
| 7.2  12.7 | Prison interface   * Managing clients who are in prison * Review of client care * Liaison * Support for authorised prison medical officers |  |  |  |
| 7.1 | Interface with other OST services   * Transfer of care * Transfer consistent with *OST Guidelines* |  |  |  |
| 4.1.1 | Safety of children policy/protocol   * Reflects service responsibility in this area |  |  |  |
|  | Client records policy   * Consistent with law, standards and *OST Guidelines* |  |  |  |
| 10.2 | Staff training/education policy |  |  |  |
| 10.2 | Clinical supervision policy |  |  |  |
|  | Performance management policy |  |  |  |
|  | Position description for each designation |  |  |  |
|  | Two most recent six-monthly reports to the Ministry of Health |  |  |  |
|  | Other |  |  |  |