# 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)** |
| --- | --- | --- | --- | --- |
| 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
 | [ ]  | [ ]  |       |
| 2.62.1Appendix 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, 4.44.22.3, 2.93.82.42.811.311.43.63.95.1, 5.76.5.46.5.36.3, 6.1.15.2 | 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*
 | [ ]  | [ ]  |       |
| 5.13.35.29.25.35.4 | 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
 | [ ]  | [ ]  |       |
| 12.78.1-8.2 | 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
 | [ ]  | [ ]  |       |
| 7.212.7 | 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 | [ ]  | [ ]  |       |