

Queensland Health | Alcohol and Other Drug (AOD) Services

Drug and Alcohol Brief Intervention Team

1. What does a DABIT intend to achieve?

DABITs are specialised alcohol and other drug (AOD) treatment teams that provide services within the hospital setting for patients at-risk or experiencing problematic substance-related harm.

We primarily support the function of Emergency Departments (ED) by:

- providing specialist interventions to enhance the quality and experience of AOD care;
- providing harm reduction strategies and options to reduce risk from ongoing use;
- connecting patients with further AOD treatment options to enable more proactive, integrated and continuous care;
- working with ED staff to help reduce stigma or discrimination associated with AOD treatment; and
- supporting ED to provide holistic, patient-centred care through best-practice emergency medicine and AOD interventions at the point-of-care.

2. Our service is for people of all ages, presenting to Emergency Departments, who:

- may be **at-risk** of substance-related harm;
- present with **mild-moderate problematic substance use**; or
- present with **clinically significant AOD symptoms** including dependence with or without co-occurring disorders such as mental illness or medical conditions.

Our secondary populations include:

- hospital in-patients; and
- families and significant others of patients presenting to EDs or admitted to hospital.

3. All DABITs provide AOD services in hospital settings

a We aim to make referrals as easy as possible

- Referrals can be made by ED staff, hospital teams or through the proactive identification of clients by DABIT clinicians
- Patients can also self-refer
- Referrals can be made through clinical documentation or other data systems, or simply by reaching out to our team in person or by phone

TALK TO US ABOUT:

- our preferred local referral processes
- working together to streamline the patient experience



4. DABITs may also provide AOD Consultation Liaison services

While not part of the core DABIT role, DABITs provide support to our secondary populations (namely, hospital in-patients and families/significant others of patients presenting to EDs or admitted to hospital). We do this by providing appropriate brief interventions and specialist advice to patients and family members and expertise to clinical teams on the diagnosis and management of AOD-related issues. We can also provide education and training to increase the awareness and knowledge of non-AOD specialist professionals, teams and services to respond to people affected by substance use.

5. All DABITs collect and maintain clear, useful data for other clinicians and service planning

DABIT clinicians will enter and review all required information into the ATODS-IS DABIT module (<https://atods.health.qld.gov.au>). This database has been designed to allow timely central reporting and supports consistency of information collection and reporting.

- Date and time (of DABIT intervention)
- Date of birth
- Sex
- Indigenous status
- Postcode
- Drug/s used (from Australian Standard Classification of Drugs of Concern List)
- Primary reason for presentation at ED
- DABIT intervention provided (assessment only, brief intervention, consultation and liaison, counselling, information and education only and intake and screening)

b We use screening tools to identify and tailor interventions

COMMON TOOLS INCLUDE:

- ASSIST (Alcohol Smoking and Substance Involvement Screening Test)
- AUDIT (Alcohol Use Disorders Identification Test)
- SACS (Substances and Choices Scale)
- IRIS (Indigenous Risk Impact Screen)
- METH-CHECK

TALK TO US ABOUT THESE TOOLS AND HOW THEY CAN HELP

c We use structured 'brief assessments' to evaluate AOD severity and treatment needs as quickly as possible

OUR OBJECTIVE is to identify the most appropriate course of action as quickly as possible without compromising quality of patient-centred care.

d We provide one-off 'brief interventions' for both patients and families/carers

ASSESSMENTS ARE:

- usually 5 - 60 minutes in length;
- with the **patient**, and the **family and/or significant other AND**;
- to increase motivation to address AOD issues and awareness of available interventions/treatments.

e Finally, we connect AOD patients to other services for further care and support

We provide advice and if necessary make referrals for further care options (primarily AOD services).

FURTHER CARE CAN ALSO INCLUDE additional specialist services (including ongoing AOD consultation liaison support for inpatients and/or mental health services, community, welfare and support services for outpatients) that will support treatment and recovery.

How we support quality and safety

DABITs work proactively to establish and maintain high standards of care for AOD patients and maximise our support to the ED through a range of measures.

We recruit and train experienced AOD staff with specialised skills

We connect with other DABIT services to promote state-wide consistency

We offer in-situ training and skills development for hospital clinicians and encourage two-way learning

We regularly review and evaluate our own performance within our team and across the state

DABITs function best when...



ED and hospital staff members clearly understand the functions of DABIT and we are embedded in the routine work and practices of the ED

We match our hours of operation to maximise our effectiveness

We are working with patients post-intoxication to enable effective interventions

We have seamless transitions between DABIT, other AOD services and the treating team

The team has a senior level AOD clinical expertise and knowledge across the majority of its staff

The team is agile and responsive

We establish and maintain strong and effective internal and external partnerships with key service stakeholders

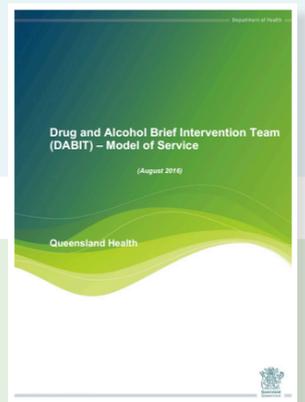
All staff have professional support, clinical supervision and training

The team has clearly defined clinical and operational leadership and governance

We collaborate with the patient, their family/significant others and the treating team about all aspects of the patient's care

Senior team members take an active role in supervising and developing required AOD clinical skills in less experienced staff

For more information:



[Qheps.health.qld.gov.au/mentalhealth/govperf/modelsofservice.htm](https://qheps.health.qld.gov.au/mentalhealth/govperf/modelsofservice.htm)