

## **Discharge from hospital due to inpatient substance use: A qualitative study of affected people and their healthcare workers.**

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**Introduction:** Understanding the experiences of patients discharged from hospitals due to unsanctioned substance use remains limited. Hospitals often lack the infrastructure and resources to address these complex situations. This study explores the perspectives of patients discharged for inpatient substance use and the healthcare professionals involved in their care.

**Methods:** Ten patients and ten healthcare staff (five medical, five nursing) from a large outer-metropolitan tertiary hospital in Sydney participated in semi-structured interviews between April 2024 and May 2025. All participants provided informed consent and received \$30 AUD. Interviews were audio-recorded, transcribed, and analysed using the framework method in NVivo 15. An analytic framework was developed through code mapping and refined with input from the research team.

**Results:** Five key themes emerged: (1) challenging therapeutic environments, (2) barriers to recovery, (3) premature treatment termination, (4) communication gaps, and (5) lack of policy guidance. Patients reported inadequate management of withdrawal, pain, and insomnia. Substance use often went undetected due to prioritisation of acutely ill patients. Non-verbal cues revealed discomfort and fear of stigma, contributing to early discharge. Staff cited unclear responsibilities and limited access to policies, especially after hours, as barriers to consistent care.

**Discussions and Conclusions:** Substance use in hospital settings is poorly understood. Patient and staff experiences underscore the need for improved policies and interventions. Prioritising harm reduction, patient-centred care, and shared decision-making is essential for delivering compassionate and effective care.

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