

## Co-designing an Alcohol and Other Drugs Care Charter

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**Background:** While some health services are safe and welcoming for people who use/have used alcohol and other drugs (AOD), stigma and discrimination continues to be pervasive in healthcare settings. This creates barriers for people seeking care and can have a detrimental impact on their social, psychological and emotional wellbeing [1]. Conversely, effective communication between health providers and people who use/have used AOD can lead to improved relationships, diagnosis and treatment, people's safety and health outcomes.

**Description of Model of Care/Intervention:** The Charter will guide all staff to provide safe, accessible and professional care to improve experiences and health outcomes for people who use/have used AOD. The Charter calls on all staff to reflect on their work practice and provides a framework for services to assess their culture, policies, processes and physical and social environments. The Charter aims to ensure:

- effective communication and engagement
- delivery of the right care, in the right place, at the right time
- patient safety, privacy and confidentiality
- providing access to care and supportive environments

A co-design methodology was used to develop the Charter which involved ten people who use/have used AOD and five clinicians who have diverse expertise across alcohol and other drugs, maternity, Emergency Departments and mental health.

**Effectiveness/Acceptability/Implementation:** The Charter was informed by three commissioned reports by the NSW Ministry of Health [2, 3, 4], consultations with key partners and other Australian and international resources [5, 6, 7]. The Charter will apply to all NSW Health services and funded non-government organisations (NGOs). Private services, primary care and non-NSW Health funded NGOs will also be encouraged to adopt the Charter.

**Conclusion and Next Steps:** This is the first *Centre for Alcohol and Other Drugs* resource to explicitly address the roles and responsibilities of the workforce to address stigma and discrimination experienced by people who use/have used AOD who access health settings.

**Implications for Practice or Policy:** The Charter will form the foundation for future work at the statewide and local level, including review of policies, processes and frameworks, education and training, media and communication, leadership and mentoring.

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