

SUBSTANCE ABUSE SERVICES PERSPECTIVE

SMART policies for tackling drink driving

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English & Finnish version

Shortcut to Helsinki City services

- Health stations !
- Hospitals (5, 2 with AE services !)
- Preventive mental & substance abuse work (also in internet !)
- Mental health services
- Day active centers
- Substance abuse outpatient clinics !
- Withdrawal nursing and substance abuse psychiatry
- Mental & substance abuse special services

Worrying trends and some guidelines



A duty to report

- Driving health requirements are not met if the person has substance addiction, which substantially weakens his / her ability to act as a driver of the vehicle or is dangerous to traffic due to the continuing abuse of alcohol / other drugs
- The doctor has a duty to report to the police if the patient is unable to drive permanently or permanently because of their substance abuse.

What we do?

- the history of using intoxicants
- assessment & treatment of withdrawal symptoms
- substance use history
- current state
- the causes that led to the assessment
- psyc oriented condition
- medication
- brief intervention is an important method of early intervention when a dependency is not yet, but the risk to be seen.
- In recent years, special attention has also been paid to finding a customer's own motivation for change in behavior
- the evaluation cycle focuses on research into possible addiction in substance abuse and should be reminded of the actual substance abuse treatment.
- the assessment is done by a drug practitioner who is familiar with a doctor and nurse.
- visits are also related to various laboratory tests, this whole entity provides a reliable picture of the use of substance abuse by the client.

**3 month program
(6 months)****The time from the onset of intoxicant monitoring**

Ask for event information and step in the legal process. List the schedule of the evaluation program, the number of visits, the content of the visits and the conditions for a positive opinion.

Find out how people use alcohol and how to use them. Complete AUDIT and SADD forms, issue laboratory labels

Doctor

Make a Dependency Assessment (ICD-10).
Interpreting laboratory tests and issuing a new referral.

Discuss the absorption and burning of alcohol, the effects on the ability to drive and the alcohol-related traffic risks.

Discuss ways to control the use of intoxicants and avoid drinking drunk driving (this discussion is also on other occasions).

Each visit will ask about the use of intoxicants during the interval. There are also surprise lab tests during the monitoring. Note. visits are minimum, visits can be added individually as needed.

	Inform the treatment system and evaluate the benefits of the treatment cycle.
Doctor	Summarize the evaluation cycle. Interpret the laboratory values. Assess substance abuse and evaluate the ability to control it. Make a follow-up plan. A medical statement is written.
	Each visit will ask about the use of intoxicants during the interval. There are also surprise lab tests during the monitoring. Note. visits are minimum, visits can be added individually as needed. The driving license category?

The driving disability alcolock - part of the programme -

- There is a chance to get along with the driving disability alcolock, which is an effective way to prevent driving while intoxicated.
- To obtain the alcolock requires visit to outpatients department (doctor & nurse) & programme
- The customer receives a certificate of release to the court.
- The costs are borne by the supervised entity.

Challenging cases in practice

1. The client feels that there is no problem
2. A professional driver who has indistinct withdrawal symptoms and is on holidays
3. The client threatens (deterrence) the nursing staff

Thank you

Have a nice time in Helsinki

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What we need for results?



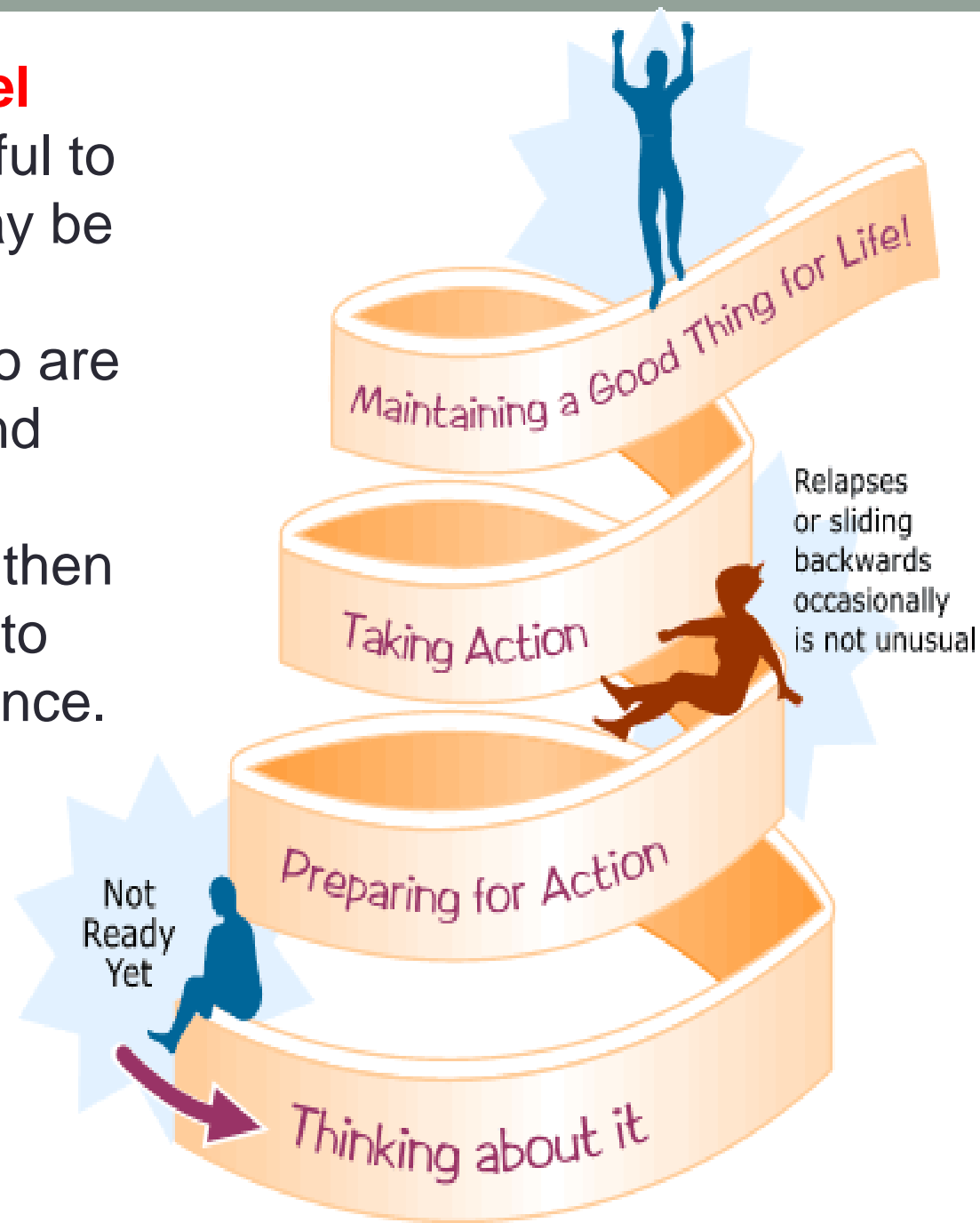
We don't do this



- **Transtheoretical model**

but not part of MI just useful to illustrate where clients may be at.

- MI works for clients who are at pre contemplation and contemplation stage.
- If client at other stages then already made decision to change so no ambivalence.



Worrying trends and some guidelines

- Use of drugs is identified more than in previous years, for example in connection with the assessment of driving rights.
- The assessments have also focused on the growth of women's share and the age profile of drunken drivers has rejuvenated.
- It should also be borne in mind that some of the evaluators have no practical implications for driving rights or not.
- If the client does not feel that he or she does not want to take responsibility for the change in his or her behavior, the evaluation program has little chance of getting the change done.
- Attention should be paid to the client's motivation to change behavior.

The evaluation program I

- The police may request estimate of the substance abuse of a client and of any substance addiction:
 - ✓ drunken driving
 - ✓ baggage bundling due to intoxicants
 - ✓ other events that are brought to the attention of the police in which the intoxicants are essentially related
 - ✓ in the case of drugs, the police often ask for a rating after the first entry.

The evaluation program II

- The client must take due notice of the time limit on the written request of the police during which the medical certificate must be submitted.
- At least 2-3 months must be reserved for substance abuse assessment (even 6 months or more).
- If a medical certificate is not delivered by the deadline, the customer may lose their driving license.
- calculating the driving license category