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Complementary and Alternative Medicines Policy Guideline

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Contents

Complementary and Alternative Medicines Policy Guideline

1. Policy Statement

This policy guideline provides guidance for SA Health hospitals and health services to manage patient requests to use complementary and alternative medicines (CAMs), which are not listed on the SA Medicines Formulary (SAMF) (non-formulary CAMs). This policy guideline is to be read and administered in conjunction with the Patients' Own Medications Policy Directive and Patients' Own Medications Policy Guideline.

2. Roles and Responsibility

- **SA Health Chief Executive** will:
  Ensure SA Health hospitals and health services operate in accordance with this policy guideline.

- **Director, Medicines and Technology Programs and Out of Hospital Pharmacy Services** will:
  - Establish this policy guideline.
  - Ensure this policy guideline is maintained and periodically reviewed to ensure consistency with current evidence and nationally agreed best practice.

- **Local Health Network (LHN) Chief Executive Officers** will:
  - Delegate the day to day responsibility for establishing and monitoring the implementation of this policy to the relevant senior managers.

- **Executive Directors, Directors, Heads of Service/Department and other senior managers** will:
  - Develop, implement and monitor local processes that support the operation of this policy guideline.

- **All SA Health employees, consultants, students and contractors** will:
  - Follow the principals and aims of this policy guideline.

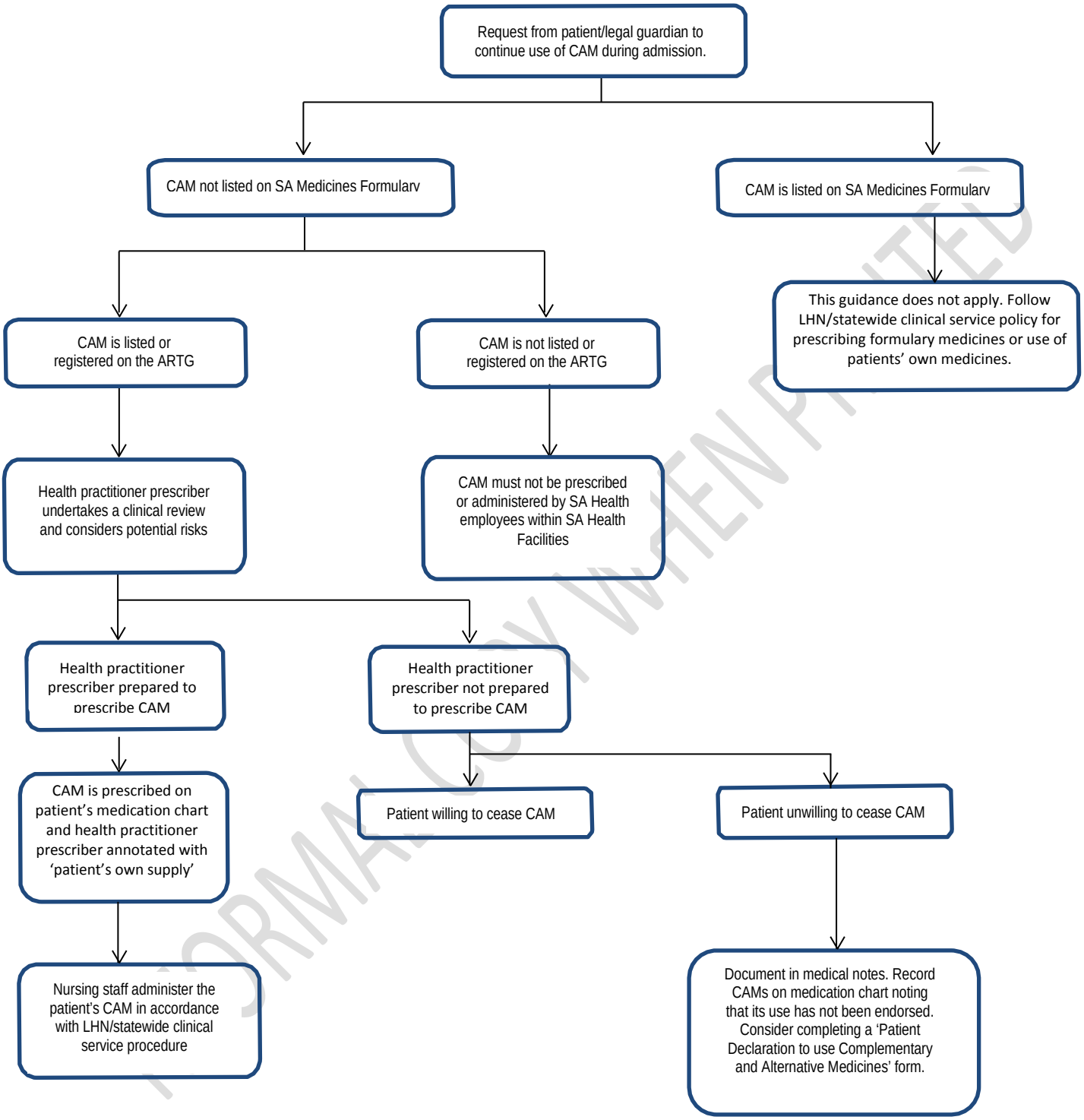
3. Policy Requirements

3.1 Principles

- SA Health does not support the use of non-formulary CAMs in SA Health hospitals and health services.
- Non-formulary CAMs will not usually be commenced in SA Health hospitals and health services.

- Prescribers wishing to initiate CAMs must follow the usual procedures (or equivalent documents) relating to the use of medicines in SA Health hospitals and health services.
- SA Health staff must not be involved in the supply or administration of non- prescribed CAMs.
- SA Health respects the rights of patients in being fully informed in relation to all options about their care and treatment. However there is a need to balance the requests of the patient in line with the best available evidence and ongoing care needs of the patient.
- Patients are encouraged to discuss their use of CAMs with their clinical team to ensure effects associated with continuation of CAMs can be considered as part of their overall therapy.
- When it is known a patient was taking a CAM prior to admission, the details of the CAMs must be documented in the patient's medication history and medical notes in accordance with usual procedures (or equivalent documents) for conventional medicines.
- SA Health clinical staff will endeavour wherever possible to inform patients of relevant clinical issues which may arise from their use of a CAM (including during pregnancy and breastfeeding). This may include the potential impact of CAM continuation, discontinuation or dosage changes on new and existing therapies.
- It may be appropriate to consider providing patients with written information supported by verbal information about their CAMs. In the discussion information relevant to the patient's condition must be emphasised. Provision of this information must be clearly documented in the medical records.
- CAMs may be prescribed for continuity at the discretion of the health practitioner prescriber (HPP).
- All prescribed CAMs must be documented and administered in accordance with procedures (or equivalent documents) for conventional medicines.
- CAMs prescribed or administered within SA Health hospitals and health services must carry an Aust L or Aust R number on the label, which indicates that the product is listed or registered on the Australian Register of Therapeutics Goods (ARTG).
- All information regarding a patient's use of a CAM must be recorded in the patient's medical record and discharge documentation in accordance with procedures (or equivalent documents) for conventional medicines.
- This policy guideline recognises and addresses that in reality SA Health:
  - Cannot legally enforce removal of medicines, including CAMs, brought into hospital by patients, nor effectively prevent medicines being brought into hospital by patients' legal guardians, relatives or friends; and
  - Cannot effectively prevent self-administration by patients if they are determined to do so.

3.2 Overview of the procedure for managing CAMs requests



3.3 Patient Admission and Discharge

Where possible a detailed account of a patient's current medication, including CAMs must be obtained from the patient/legal guardian and documented in the patient's medical records and medication charts in accordance with local procedures (or equivalent documents) for conventional medicines.

If the patient is using CAMs they must be informed about the SA hospital's or health service's procedures (or equivalent documents) relating to CAMs. Patients must be informed of any known potential risks with continuing therapy.

The patient must be offered the choice of returning these products to a relative or friend for safe-keeping or securing them in the hospital or health service storage according to local procedures (or equivalent documents). If stored by the hospital or health service, the CAMs will be returned at discharge in accordance with local procedures (or equivalent documents).

On discharge details of CAMs, including changes in dosage or discontinuation must be documented in the patient's discharge documentation in accordance with local procedures (or equivalent documents).

3.4 Patient/Legal Guardian Requesting Treatment with a CAM

If a patient/legal guardian requests the use of CAMs during admission, the clinical team must be informed and discuss the request with the patient/legal guardian. If the patient/legal guardian still intends to use the CAM:

- The HPP must contact their team's pharmacist (where available) or the relevant Medicines Information Service (Adult Medicines Information Service on 8222 5546 or Obstetric and Paediatric Medicines Information Service on 8161 7222) for safety and efficacy data.

- The pharmacist will attempt to identify any major well-documented contraindications with the patient's disease state and/or interactions with co-prescribed medications. The patient must be advised that there may be unknown or non-documented interactions, adverse effects or contraindications and that the decision to use CAMs is taken at their own risk.

- Where the HPP agrees to prescribe a CAM, they must check for an Aust L or Aust R number. If the product does not have an Aust L or Aust R number it must not be prescribed or administered within SA Health hospitals or health services as the quality and safety cannot be assured.

The absence of an AustL or AustR number must be used as justification to the patient for refusal to prescribe this CAM.

3.5 Identification of Contraindications

Where there is published data on a potential adverse interaction, or the efficacy of co-prescribed medications is compromised, the patient must again be informed of the risks and advised against use of CAMs.

For instances where a patient insists on using a CAM against the HPP's advice, hospitals or health services may consider developing an acknowledgement form for patients to sign. It is recommended where a form is developed that it informs the patient of the potential risks associated with taking the CAM, indicates that the patient's use of the CAM is not endorsed by the treating HPP and that the patient has been requested not to use the CAM during their admission (see Example 1 - Patient declaration to use complementary or alternative medicines (CAMs) form).

The HPP may need to consider amending/ceasing conventional medicines to minimise the risk to the patient.

Where a patient insists on using CAMs against HPP's advice, the HPP must record the CAM on the patient's medication chart, noting that its use is not endorsed.

This process, including information provided to the patient, must be clearly documented in the patient's medical records.

Example 1 - Patient declaration to use complementary or alternative medicines (CAMs) form

Patient declaration to use complementary or alternative medicine(s) (CAMs)

Affix patient identification label in this box

UR No: .....

Surname: .....

Given Name: .....

Second Given Name:.....

Hospital: .... D.O.B: ..... Sex: .....

Declaration of the health practitioner prescriber (to be completed by the health practitioner prescriber obtaining the patient's declaration)

Tick (✓) the boxes or cross out and initial any changes or information not appropriate.

- ☐ I have informed the patient/patient's guardian of the risks involved in their continuing use of the complementary or alternative medicine(s) listed below.
- ☐ I have recommended that the patient cease use of the complementary or alternative medicine(s) listed below.
- ☐ I have given the patient/patient's guardian opportunity to discuss the risk of continuing use of the complementary or alternative medicine(s) listed below.
- ☐ The patient/patient's guardian has indicated that the patient will continue to use the complementary or alternative medicine(s) listed below.

List the complementary or alternative medicines that the patient is using. Where available include the strength of the product, dose and indication. Include the AustL or AustR number where available.

List the specific risks to this patient that have been identified relating to their continuing use of the complementary or alternative medicine(s) listed above.

Details of the health practitioner prescriber obtaining the patient's declaration

Full name *(please print)*	Position/Title
Signature	Date

Details of the health practitioner prescriber with overall responsibility for treatment (if different)

Full name *(please print)*	Position/Title
Signature	Date

Patient declaration to use complementary or alternative medicine(s) (CAMs) Hospital:	Affix patient identification label in this box UR No: ..... Surname: ..... Given Name: ..... Second Given Name: ..... D.O.B: .....Sex: .....

Patient Declaration (to be completed by the patient or their legal guardian)

Please read the information carefully and tick (✓) the following to indicate that you have understood the information that has been provided to you. Any specific concerns should be discussed with your health practitioner prescriber prior to signing the declaration form.

The health practitioner prescriber has explained my/the patient's medical condition and prognosis to me.

The health practitioner prescriber has also explained the risks associated with continuing use of the complementary or alternative (medicine(s) listed over the page, including the risks that are specific to me/the patient and the likely outcomes.

I understand that I have the right to change my mind and not take the complementary or alternative medicine(s) at any time, including after I have signed this form. I understand I must tell my health practitioner prescriber if this occurs.

I declare that I/the patient intend/s to use the complementary or alternative medicine(s) listed over the page against the health practitioner prescriber's advice.

Details of the Person Signing the Declaration

Relationship to the person intending to continue use of the complementary or alternative medicine(s)

☐ Self ☐ Parent ☐ Guardian

Full name *(Please print)*	
Signature	Date

Interpreter's Declaration

Interpreter Service Required? ☐ Yes ☐ No

I confirm that I have accurately interpreted the contents of this form, the risk information and related conversation(s) between the patient/person giving consent and the health practitioner prescriber.

Interpreter's Full name *(Please print)*	Language Translated
Signature	Date

3.6 No Contraindications Identified

If no contraindications are identified, the patient must again be informed of the potential for unknown risks and the possibility that CAMs may have adverse effects on co-prescribed therapy. The HPP may further advise against use of the CAM if they consider this to be in the patient's best interest.

This process, including information provided to the patient, must be clearly documented in the patient's medical records.

4. Implementation and Monitoring

The South Australian Medicines Advisory Committee will monitor uptake of this guideline by SA hospitals and health services and will review this guideline within 5 years.

Any incidents relating to CAMs must be reported according to the SA Hospital or health service's incident reporting procedures (or equivalent documents) including the Safety Learning System (SLS).

5. National Safety and Quality Health Service Standards

National Standard 1 Governance for Safety and Quality in Health Care	National Standard 2 Partnering with Consumers	National Standard 3 Preventing & Controlling Healthcare associated infections	National Standard 4 Medication Safety	National Standard 5 Patient Identification & Procedure Matching	National Standard 6 Clinical Handover	National Standard 7 Blood and Blood Products	National Standard 8 Preventing & Managing Pressure Injuries	National Standard 9 Recognising & Responding to Clinical Deterioration	National Standard 10 Preventing Falls & Harm from Falls
☐	☒	☐	☒	☐	☐	☐	☐	☐	☐

6. Definitions

In the context of this document:

- **Aust L (Listed) products mean**: those products assessed by the Therapeutic Goods Administration (TGA) that only contain pre-approved, low risk ingredients and are reviewed for safety and quality only; proof of efficacy is not required. For Aust L products reviewed by the TGA, the Aust L number will be clearly printed on the manufacturer's label.

- **Aust R (Registered) products** mean: those products assessed by the Therapeutic Goods Administration (TGA) that have demonstrated quality, safety and efficacy. For Aust R products reviewed by the TGA, the Aust R number will be clearly printed on the manufacturer's label.

- **complementary and alternative medicines (CAMs)** mean: medicines that are defined by the Therapeutic Goods Administration (TGA) as therapeutic agents consisting principally of one or more designated ingredients, each of which has a clearly established identity and/or a traditional use. The TGA definition includes vitamins, minerals, nutritional supplements, herbal, certain aromatherapy preparations, homoeopathic products and traditional medicines such as Aboriginal traditional medicines, traditional Chinese medicines and Ayurvedic medicines. Other terms used to describe these medicines include 'natural medicines' or 'herbal medicines'.

- **health practitioner prescriber (HPP)** means: a health practitioner authorised to undertake prescribing within their scope of practice in accordance with SA Health policy.

- **SA Health hospitals and health services** means: all SA Health hospitals and services, including Local Health Networks (LHNs), statewide clinical services and emergency services (SAAS and MedSTAR).

7. Associated Policy Directives / Policy Guidelines & Resources

SA Policy Directive and Policy Guidelines:

- Patients' Own Medications Policy Directive
- Patients' Own Medications Policy Guideline

SA Resources and Related Documents:

- SA Health Aboriginal Health Resources
- SA Health checklist - Assessment of Patients' Own Medicines for in-hospital use
- SA Health patient information sheet - Bringing Your Medicines into Hospital
- Patients' Own Medications Clinical Resources
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- SA Health Traditional Healer Brokerage Program

References and Related Documents:

- Council of Australian Therapeutic Advisory Groups (CATAG) Position statement for the use of complementary and alternative medicines, May 2015
- Therapeutic Goods Administration (TGA) What's on a medicine label?

8. Document Ownership & History

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Does this policy replace another policy with a different title? **N**

Approval Date	Version	Who approved New/Revised Version	Reason for Change
01/08/2017	V1.0	SA Health Policy Committee	Original SA Health Policy Committee approved version.