

# Changes to drug and alcohol screening

## Information Sheet: Transition to new Drug & Alcohol policies

### What have we done?

We have reviewed our drug and alcohol screening policies to ensure the way we screen is up-to-date, evidence-based and in-line with best practice.

This extensive review was conducted as part of our program of continuous improvement and in response to a national drug and alcohol screening protocol by AHPRA. The review involved:

- convening an expert working party of drug and alcohol specialists, Council decision makers and staff to provide recommendation to the Council on the future direction of screening
- reviewing the drug screening frequency
- engaging a new national pathology provider to provide all services of the new policies
- reviewing the language of our policies and the way you communicate with us
- preparing new screening policies and participant procedures, and supporting material.

### What has changed?

The new drug and alcohol screening policies align with AHPRA's Drug and Alcohol Screening Protocol. The Council's new approach to drug screening combines urine drug screening and hair drug screening. For alcohol screening, breath-testing for alcohol is used as the first-line screening test.

### Overall improvements

The changes to screening will ensure a more practical process to screening that may benefit you. Potential benefits you will experience include:

- improved **access** to an increased number of collection centres within NSW and around Australia
- enhanced **privacy and confidentiality** during collection at centres outside of hospitals
- nationally **consistent costs** for screening with no collection or transport fees
- improved **timeliness** of receiving results
- streamlined **communication** with us including standardised forms
- nationally **consistent approach** to screening
- **ongoing assurance** to the public, colleagues and employers that you can continue safely in practice/training.

## Key changes

Item	Changes
Drug screening	<ul style="list-style-type: none"><li>• hair drug screening will be added to urine drug screening if you have a drug-related impairment</li><li>• urine and hair samples will be screened for the comprehensive schedule of substances screened by AHPRA (see appendix A)</li><li>• screening frequency in line with AHPRA's screening groups (see appendix B)</li><li>• randomized</li></ul>
Alcohol screening	<ul style="list-style-type: none"><li>• changes will be made to method of alcohol screening if you are on EtG, CDT or LFT.</li><li>• in the future, breath-testing for alcohol will be the first-line screening method if you have an alcohol-related impairment (see appendix D)</li></ul>
Pathology provider	<ul style="list-style-type: none"><li>• a nationally consistent pathology provider will provide all collection and screening services (Queensland Medical Laboratory (QML) with NSW collection partner Laverty)*</li><li>• you will pay for screening at the time of collection</li></ul>
Absence from screening	<ul style="list-style-type: none"><li>• nationally consistent absence from screening process, namely that you must continue to screen (urine drug screening and EtG screening) if you travel within Australia</li></ul>
Policy documents	<ul style="list-style-type: none"><li>• two primary <a href="#">policy documents</a> that outline how to comply with drug or alcohol screening</li><li>• individual, user-focused <a href="#">participant procedures</a> for each type of screening that tell you how to screen</li><li>• standardised forms for providing information to us e.g. leave from screening, illness certificates.</li></ul>

[A list of Council-approved collection centres is available on our website](#)

### Do I have to screen under the new policies?

If you have drug and/or alcohol screening conditions placed on your registration prior to 31 July 2018, you will not be required to screen under the new policy until the conditions change.

### When will my condition change?

The changes to your drug and alcohol screening conditions will happen when you attend your next or requested review with an Impaired Registrants Panel.

If we are concerned about your compliance with conditions, a review may occur earlier.

### What are the cost for drug and alcohol screening?

Our review identified that the cost of screening varied significantly depending on your location and which pathology group collected your sample. We were particularly concerned by the amount some of you were paying for collection and transportation of your samples.

We have a memorandum of understanding with QML to ensure nationally consistent costs for drug screening. You will not pay any collection or transport costs if you screen at a Council-approved collection centre. The proposed costs are included in Appendix C.

The proposed cost for breath-testing is included in Appendix D.

### Quality improvement

We are committed to ongoing improvement in drug and alcohol screening. We will evaluate the new screening policies during and after implementation to determine whether the policies are working as intended and whether further improvements can be made.

## Appendix A – Substances we screen for

Substance to be tested	Detection limits
<b>Amphetamine type substances</b> <ul style="list-style-type: none"> <li>• Amphetamine</li> <li>• Benzylpiperazine</li> <li>• Ephedrine</li> <li>• Methylamphetamine</li> <li>• MDA</li> <li>• MDMA</li> <li>• Phentermine</li> <li>• Pseudoephedrine</li> </ul>	As per AS/NZS 4308:2008
<b>Benzodiazepines and their metabolites</b> <ul style="list-style-type: none"> <li>• Alprazolam</li> <li>• Clonazepam</li> <li>• Diazepam</li> <li>• Flunitrazepam</li> <li>• Nitrazepam</li> <li>• Oxazepam</li> <li>• Temazepam</li> </ul>	As per AS/NZS 4308:2008
<b>Cannabis metabolites</b>	As per AS/NZS 4308:2008
<b>Cannabinoids</b>	As per AS/NZS 4308:2008
<b>Cocaine metabolites</b>	As per AS/NZS 4308:2008
<b>Opiates</b> <ul style="list-style-type: none"> <li>• 6-acetylmorphine</li> <li>• Codeine</li> <li>• Morphine</li> </ul>	As per AS/NZS 4308:2008
<b>Anaesthetic agents</b> <ul style="list-style-type: none"> <li>• Ketamine</li> <li>• Norketamine</li> <li>• Propofol</li> </ul>	<ul style="list-style-type: none"> <li>• 10 ng/ml</li> <li>• 5 ng/ml</li> <li>• 50 ng/ml for hydrolysed urine measuring total propofol or 20 ng/ml for propofol itself and one or more of its metabolites</li> </ul>
<b>Anxiolytic agents</b> <ul style="list-style-type: none"> <li>• Zolpidem</li> <li>• Midazolam</li> </ul>	<ul style="list-style-type: none"> <li>• 10 ng/ml</li> <li>• 10 ng/ml</li> </ul>
<b>Synthetic/semi-synthetic opioids</b> <ul style="list-style-type: none"> <li>• Fentanyl</li> <li>• Norfentanyl</li> <li>• Hydromorphone</li> <li>• Methadone</li> <li>• Oxycodone</li> <li>• Pethidine</li> <li>• Norpethidine</li> <li>• Tramadol</li> </ul>	<ul style="list-style-type: none"> <li>• 0.5 ng/ml</li> <li>• 0.5 ng/ml</li> <li>• 10 ng/ml</li> <li>• 10 ng/ml</li> <li>• 10 ng/ml</li> <li>• 20 ng/ml</li> <li>• 20 ng/ml</li> <li>• 20 ng/ml</li> </ul>
<b>Cathinone analogs (designer stimulants)*</b>	Dependent on drug being used
<b>Synthetic cannabinoids*</b>	Dependent on drug being used
<b>Hallucinogens</b> <ul style="list-style-type: none"> <li>• LSD</li> <li>• Nor-LSD</li> <li>• NBOMe derivatives*</li> </ul>	<ul style="list-style-type: none"> <li>• 0.5 ng/ml screen kits and 0.2 ng/ml for confirmation or using MS techniques</li> <li>• 0.2 ng/ml</li> <li>• This will depend on drug, but likely to be &lt; 1 ng/ml</li> </ul>

Adapted from AHPRA – [Drug and Alcohol Screening Protocol – Registrant Information \(October 2017\)](#)

\* Will require further expert advice in each case.

\* QML routinely screen for a range of other substances. The full list of substances screened can be found on their website for [urine](#) and [hair](#).

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## Appendix B - Drug Screening Groups

The table details the random screening requirements for each level of screening.

Screening Group	Urine Screens (on average)	Hair Analysis
Group 1	12 per month	Quarterly
Group 2	4 per month	Quarterly
Group 3	1 per month	Quarterly
Group 4	5 to 10 times per year	Quarterly
Group 5	Nil	Annually*

The necessity for, and period of, continued testing will be informed by an assessment of risk. The assessment will be informed by available reports (Council appointed and treating practitioner), compliance during monitoring and the nature and scope of practice.

## Appendix C – Proposed costs of drug screening

Screening test	Cost*
Urine drug screen (for all substances in appendix A)	\$ 60
Confirmatory test for urine drug screen (if required)	\$ 100 per drug class
Hair drug screen (for all substances in appendix A)	\$ 825

\* inclusive of GST, collection and transport if participant attends a QML-approved collection centre

## Appendix D – Approved breath-testing device

Manufacturer*	Model	Sampling mode	Outright cost
Lion Laboratories Limited	SD 400	Analyse mode	\$1,100.00 ex GST
Draeger Safety Pacific Pty Ltd	5820	Automatic measurement	\$640.00 ex GST
	6820	Automatic measurement	\$912.00 ex GST

\*Both manufacturers offer a rent-to-buy agreement and rental agreements.