

CHITS

Clinicians' Health Intervention, Treatment & Support

Chairman

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Our Ref: DGF/jb

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National Alcohol Harm Reduction Strategy

The Consultation Document on Harm Reduction was considered by the CHITS Group at their meeting on the 8 November 2002.

CHITS (Clinicians Health Intervention Treatment and Support) is a confederation committed to the needs of clinical staff affected by alcohol and/or drug use. Our constituency involves the Sick Doctors Trust, the Dentists Health Support Programme, the British Medical Association Doctors in Difficulty initiative, the Pharmacists Health Support Programme and the Veterinary Surgeons Health Support Programme.

The CHITS group is struck by the common association between decrements in clinical performance when clinical staff are affected by alcohol misuse. We feel that special efforts to promote early intervention are likely to be productive both for the individuals affected and for the National Health Service and all other clinical services.

We are keen to contribute to Departmental initiatives to deal with education, training, recruitment, retention and support of clinical staff through raising awareness of this issue and perhaps by extending dedicated services which deal solely with clinical staff.

The CHITS group is forging links with the National Clinical Assessment Authority, the Substance Misuse Faculty of the Royal College of Psychiatrists, the Medical Council on Alcohol, the Royal Medical Benevolent Fund and the National Counselling Service for Sick Doctors.

We have made the Chief Medical Officers, Chief Dental Officers, Chief Pharmaceutical Officers, and Chief Veterinary Surgeons aware of our work. We are able to provide detailed information (anonymised) on 350 clinical staff who have been subject to intervention, treatment and support involving the dedicated healthcare professionals programmes involving the centres at Foxleigh Grove and Birdsgrove.

Various headings and numbered questions in the Strategy Document which have a bearing on our principles.

Cultural and Behavioural Issues around Alcohol Use and Misuse (Question 9)

High risk groups include medical and dental students, doctors and dentists in training and staff with clinical responsibilities. Undergraduate and Postgraduate training for clinical staff on their personal behaviour and attitudes to alcohol could be emphasised as a component of a preventative strategy.

Health, Prevention, Treatment and the Impact on the NHS (Question 16, 19 and 22)

There are important links between alcohol misuse, psychiatric morbidity and markedly increased suicide risk in clinical staff. The importance therefore of dedicated intervention, treatment and support services for clinical staff needs to be underlined. The conclusions of the Misuse of Alcohol and Other Drugs by Doctors and Drugs and Alcohol Addiction in the Dental Profession give clear indications of the problems which concern the CHITS consortium. The fundamental impact on the ability of clinical services to deal with alcohol related morbidity if clinical staff are not effectively supported and treated, is considerable. We feel that clinical services for staff with clinical responsibilities need to be identified.

Implications for Vulnerable Groups (Question 37)

Staff with clinical responsibilities are vulnerable groups with increased morbidity relating to alcohol use and increased risks of death by suicide. Clinical staff are especially vulnerable since they may not access support and personal clinical services and they remain vulnerable because even if services are accessed, staff with clinical training may not make best use of standard treatment approaches.

The CHITS group would like to emphasise that creating dedicated intervention, treatment and support services for staff with clinical responsibilities is likely to be cost effective and is likely to assist manpower and recruiting deficits thereby improving the clinical services response to alcohol related morbidity in the population as a whole.

Yours sincerely

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