Standard operating procedure (SOP) · SUB-SOP-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 38.1

At a glance

- Each person has a substance use assessment before a treatment plan is agreed (SUB-FRM-001).
- The assessment uses a named, validated screening or assessment tool.
- The score is recorded and the assessment is repeated at the set interval.
- No plan is agreed without the assessment on file.
- Stop and get help straight away if: a treatment plan is agreed with no assessment on file.

1. Purpose

To make sure treatment is based on a measured picture of each person’s substance use (38.1).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background

Substance use treatment starts with knowing what the person uses, how much and how often. A validated screening tool gives a common starting point that can be compared over time.

5. Responsibilities

Role	Responsibility	Competence
Clinical lead for addiction services	Owns the tool choice and the assessment standard	Clinical director
Assessing clinician	Carries out the assessment and records it	Clinical lead for addiction services

6. Materials and equipment

Item	Requirement	Condition
Records and forms named in this document	Current version	Checked before use

7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Step 1. Assess.

- Use the named validated tool to assess the person’s substance use.

Key point: Assessed.

Step 2. Record.

- Record the tool, the score and the date (SUB-FRM-001).

Key point: Recorded.

Step 3. Repeat.

- Repeat the assessment at the set interval and record it.

Key point: Repeated.

10. Decision points

- No decision points in this procedure.

11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. Monitoring

Measure	Target	Frequency	Owner	If not met
People with an assessment before their plan	100%	Monthly	Clinical lead for addiction services	Escalate to the clinical director

14. Records

Record	Kept in	Retention
Record named in this document	Patient record or the area file	the period set by the facility’s records policy years

15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. Related documents

ID	Title	Use
SUB-FRM-001	Substance use assessment record	Record

17. Evidence

Reference	Note
E-009	Based on the WHO guidelines for the psychosocially assisted pharmacological treatment of opioid dependence (2009), the WHO Guidelines on HIV and harm reduction for people who inject drugs, and the ASF Ambulatory standard for addiction services.
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

E-learning for this document

- Narcology & Addiction Treatment (AMB-21)

References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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