



4 October 2006

Ministry of Social Affairs and Health
POB 33
00023 GOVERNMENT

Re: STM/2726/2005

OPINION ON THE INSTRUCTIONS DRAWN UP BY THE MINISTRY OF SOCIAL AFFAIRS AND HEALTH FOR THE ACUTE CARE OF INTOXICATED PERSONS

The Ministry of Social Affairs and Health has asked the Advisory Board on Health Care Ethics to give its opinion on the instructions the Ministry has drawn up for the acute care of intoxicated persons. Originally the Ministry asked the opinion by 22 June 2006, but as the Advisory Board did not have any meetings during summer, its General Secretary asked the Ministry to postpone the due date.

The Advisory Board discussed the draft instructions for acute care at its meeting on 20 September 2006.

In the discussion the Advisory Board found the subject important from the point of view of intoxicated persons' rights and good care. The preparation of the instructions was started after Deputy Chancellor of Justice Jaakko Jonkka had expressed his opinion on a case in which a patient had been referred to the police to be taken into custody prior to an assessment of the person's need for care.

The Advisory Board saw it important that alcohol use is not an obstacle to care. It is also important that an intoxicated patient is treated as an individual and that his or her individual needs are taken into account in care.

The Advisory Board considered that the draft text for the instructions is too long and detailed. On the other hand, the document lacks instructions as to who should in the end have the overall responsibility for a patient. Emphasising the circumstance that the police can be called for a possible taking into custody only in particular situations may even endanger the patient's safety. Health centre emergency units do not necessarily have such facilities in which an intoxicated person can sober up under supervision to the extent that his or her state of health can be assessed anew. Only the biggest cities have detoxification units. In Finnish climatic conditions, if an intoxicated person is allowed to leave the emergency unit by him/herself that may be even a greater threat to his or her health than sobering up in closed and monitored police facilities.

Detailed instructions may lead to a situation that patient care becomes a matter of routine resulting in bad care from the patient's point of view.

The Advisory Board considers that a better alternative would be to prepare a handbook type of a publication emphasising the patient's right to good care and treatment as laid down in the Act of the Status and Rights of Patients. The postgraduate education and continuing professional education of health care professionals related to this subject area can prepare students for the use of common sense and individual solutions.

It is a difficult task to assess the level of consciousness of an intoxicated person. It is mentioned in the Annex to the instructions that the police must try to assess the level of consciousness in order to exclude a possible state of illness. This assessment is a challenging task even for health care professionals.

The Advisory Board also has certain reservations regarding the age limits for the care of minors given in the instructions. Defined age limits often lead to a more general application of the limits concerned, and then it is easily forgotten that the maturity of a minor person must be considered individually in each case. The Advisory Board also states that, as a rule, it is the responsibility of parents to take care of their children, and they can be very worried about their children in particular if they cannot get in contact with them. Information about the child's condition and that the child is in safety at a hospital or emergency department is then in the interests of both the child and the entire family. Instructions for the use of a notification of the need for child welfare measures as the primary means of informing about the care of a minor person may distort the idea how the care takes place in the interests of the child. Linking child welfare interventions with continued care for the young person should naturally be considered in cases in which there is an obvious risk of neglect or bad treatment of the child.

The instructions include a mention of the form MT1. The form used at present is a referral for monitoring M1. Substance abuse treatment against the person's will is hardly ever used in Finland. On the other hand, there is reason to state that shutting up a person in a psychiatric hospital in an acute situation may hamper the patient's continued rehabilitation.

The Advisory Board discussed the real impact of a lot of red tape in society. A great number of legal provisions are prepared and issued in Finland that hamper activities in everyday life rather than harmonise them or facilitate the work of health care professionals. Legislation and instructions alone are no solution to problematic situations. Good education and professional skills are more important, so that professionals can apply their knowledge and skills according to individual situations. Red tape and a fear of errors and punishments may lead to a weaker quality of care.

To summarise, the Advisory Board proposes paying attention to the acute care of intoxicated patients for instance in the form of training and a handbook. The instructions now put forward are too detailed and the result could be less use of 'common sense'. The Advisory Board proposes drawing up a handbook that will underline the ethical principles of good care and treatment as well as stress the importance of good professional skills and use of common sense and own discretion when planning and providing acute care for intoxicated patients. A series of seminars or training events for those involved in substance abuse treatment could contribute to drawing up the handbook so that it can be used in practice in acute situations. The Advisory Board wants to emphasise that all people have the right to good care in Finnish health care.

On behalf of the Advisory Board on Health Care Ethics

Paula Kokkonen
Chairperson

Ritva Halila
General Secretary