



DRUG TESTING POLICY

POLICY STATEMENT

When it is clear that drug misuse may be impacting on a parent's capacity to keep the child safe, a range of responses are required. Drug testing is a tool to provide evidence of whether a parent is using drugs including the type, level and pattern of usage. The results of drug testing should be considered as part of the range of information gathered to determine the parent's capacity to keep the child safe. Drug testing must be targeted and short term; must always be provided with support services; and is not an intervention in its own right.

PURPOSE OF THE POLICY

The purpose of this policy is to clarify and provide consistent practice guidance to child protection workers when considering the use of drug testing as part of the information gathered to determine the parent's capacity to keep the child safe.

BACKGROUND

The Department for Child Protection and Family Support (the Department) does not advocate either a harm minimisation approach or abstinence over each other. Not all parents who use drugs need to be tested. Child protection workers must first assess to establish if a parent's drug use creates a risk to child safety or have gained reliable information demonstrating risk to a child (e.g. a reported incident of parent leaving a child unattended to engage in drug use and the child then suffers burns while left unsupervised in the home).

Drug testing is an optional and additional source of information and must never be used in isolation from other information sources. Drug testing can assess the following:

- Presence of drugs – detects whether a drug has been used.
- Type of drug(s) consumed– indicates presence.
- Level of drug use – indicates amount of use.
- Pattern of drug use (through repeated testing) – indicates whether use is increasing or decreasing and chronicity.

Drug tests are not 100 per cent reliable; do not detect all drugs; are susceptible to parent manipulation; and alone cannot determine parent capacity. There is no scientific 'cut off level' to determine whether drug misuse affects a parent's ability to protect their children, which is why drug tests cannot provide information about the true nature of parenting but instead must be used as part of a holistic assessment of parent capacity.

Drug tests are not an intervention and cannot reliably reduce drug use. Drug testing can imply a zero-tolerance approach, which can have the unintended effect of entrenching the hidden nature of drug use. Testing a parent can place them in a defensive position

and reduce their willingness to recognise the risks of their drug use and to change their drug-taking behaviour. However, drug tests may provide an opportunity to promote an open discussion about drug misuse with parents, its impact on their capacity to parent and to encourage them to access treatment. When a decision is made to use drug testing, the preferred method of the Department is urinalysis testing.

LEGISLATIVE MANDATE

The *Children and Community Services Act 2004* is the legislative basis of the Department's role to safeguard the wellbeing of children, individuals, families and communities, and to protect and care for children when their parents are unable to.

CIRCUMSTANCES WHEN DRUG TESTING SHOULD NOT BE USED

There are circumstances when drug testing *may not* be appropriate, such as when:

- Parents, or alternative sources of information, confirm the misuse of drugs. Drug tests are not required if they do not provide *new* information.
- Parents have low level drug use and there is no information that drug use is impacting on the child.
- The purpose of drug testing has not been established.
- Other issues, such as family and domestic violence or mental health issues, are more likely impacting on the parent's capacity to keep the child safe.
- The type of drug that is suspected of being misused is unable to be detected by urinalysis testing. For example, alcohol stays in the body a short time and has a limited drug testing window.
- Parents have a history of non-compliance and/or manipulation with drug testing.
- Parents do not have adequate transport to attend a drug testing collection centre.
- Drug testing will adversely impact on family functioning (i.e. disrupt work attendance).
- Parents are already conducting drug tests in a drug treatment facility and drug treatment providers share test results.

SUPPORTING PARENTS

Parents must be assisted to access Community Alcohol and Drug Services (CADS) in conjunction with the range of mechanisms to monitor drug use including drug testing. Drug treatment is usually regarded as a long-term process commonly involving relapses. It is important that treatment options are provided quickly to parents and that families are given the opportunity to resolve their drug issues in a timely manner and within the timeframes set by permanency planning.

Minimal flexibility should be given when negotiating a parent's attendance for drug testing. This is to reduce the possibility of results being manipulated by the parent. Where there is no legitimate reason for a parent's non-attendance, child protection workers should record the result as a positive due to non-compliance.

PROVIDING EVIDENCE TO COURT ABOUT DRUG MISUSE

There are a range of strategies to provide evidence to the court about drug misuse including observations of parent presentation during child contact visits, alcohol and drug services attendance, and drug test results.

Nationally, Courts only accept results of tests undertaken in accordance with the Australian/New Zealand Standard Procedure for the Collection, Detection and Quantification of Drugs in Urine (AS/NZS 4308:2008 standard). To comply with standard requirements, urinalysis testing involves a two-step process:

- the urinalysis screening test – establishes whether a drug is present; and
- the confirmation test – a second test on the same sample, where the screening test indicates a positive result (screening test can be at risk of a false positive).

There are circumstances where only the screening test is required; for example where the results will never be required for Court.

RELATED POLICIES AND DOCUMENTS

Permanency Planning Policy (2014)

Drug Testing - Agreement for Urinalysis Testing

Drug Testing - Donor Card

Drug Testing Guide

Drug Testing – Urinalysis Pathology Provider Locations and Fees

Memorandum of Understanding (MOU) with the local Community Alcohol and Drug Service (CAS)

AOD Agencies and Services.

GUIDELINES

The Casework Practice Manual provides the guidelines for Department staff based on this policy.

EFFECTIVE DATE: 2015.

REVIEW DATE: 2018.

OWNER: Executive Director, Policy and Learning.