

Stage One: Medical consultation before entering program

Factsheet for General Practitioners, July 2023
NSW Alcohol Interlock Program



Resources required for this Stage One consultation:

- **AUDIT questionnaire** to be given to patients (see Page 3 or download here)
- **Drink-less Handycard** to be used in brief intervention by GP (see Page 5-6 or download here)
- **Alcohol Interlock Program Medical Consultation Certificate** to be completed by GP at end of consultation (download here)

Overview of the NSW Alcohol Interlock Program and the Drink-less Program

The [Alcohol Interlock Program](#) is a court-ordered requirement for some drink driving offenders. It is designed to reduce drink driving offending in NSW.

An interlock is an electronic breath testing device linked to a vehicle's ignition system. Program participants must provide a breath sample that the interlock analyses for the presence of alcohol. If a positive sample is detected, the vehicle will not start.

The [Drink-less Program](#) is a practical intervention package designed to assist GPs to screen for alcohol-related problems and offer appropriate advice to patients on drinking. It was initially developed at the University of Sydney and has been endorsed by the World Health Organisation, the Australian Medical Association, the Royal Australian College of General Practitioners, and the Chapter of Addiction Medicine of the Royal Australasian College of Physicians.

Drink-less uses the Alcohol Use Disorders Identification Test (AUDIT) - a simple and effective method of screening for unhealthy alcohol use.

This patient is seeing you today because the law requires them to attend an initial consultation with a GP to seek advice about their alcohol consumption and associated potential health risks before they can obtain an interlock licence and enter the NSW Alcohol Interlock Program.

How do I use the Drink-less Program in this consultation?

Ask your receptionist or practice manager to hand out the AUDIT screening questionnaire. Patients can fill out the questionnaire in the waiting room prior to seeing you. Score the questionnaire to determine the type of advice your patient needs on drinking.

After scoring the AUDIT questionnaire, provide a brief intervention using the Drink-less Handycard. See page 4 for guidance on brief interventions.

Some patients identified as risky drinkers from the screening questionnaire will be 'borderline' cases. For these patients, your clinical judgment will help you determine the level of advice that they need.

Remember to complete the Alcohol Interlock Program Medical Consultation Certificate. The patient will bring this certificate with them to the consultation. It is also available for **download** at NSW Alcohol Interlock Program.



How do I bill for this consultation?

This consultation can be billed under Medicare because it is therapeutic. Most GPs bill this as a level C consultation (item 36). For some patients, a longer or second consultation may be needed.

For more information on helping a patient with their drinking:

- See the *2021 Guidelines for the Treatment of Alcohol Problems* (4th edition) [here](#).
- DASAS is a free 24/7 telephone service that provides general advice to health professionals who require assistance with the clinical diagnosis and management of patients with alcohol and other drug related concerns. Within Sydney Metropolitan Area: (02) 8382-1006 or Regional, Rural & Remote NSW: 1800 023 687.
- For 24/7 information, support, and referrals for those affected by alcohol and other drug use, call the Alcohol and Drug Information Service (ADIS) on 1800 250 015.

AUDIT questionnaire with scoring guide

	0	1	2	3	4	Score
1. How often do you have a drink containing alcohol?	Never	Monthly or less	2+ times a month	2+ times a week	4+ times a week	
2. How many drinks containing alcohol do you have on a typical day when you are drinking?	1 to 2	3 to 4	5 to 6	7 to 9	10 or more	
3. How often do you have six or more standard drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
4. How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
5. How often during the last year have you failed to do what was normally expected of you because of drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
6. How often during the last year have you needed a drink first thing in the morning to get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
7. How often during the last year have you had a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
8. How often during the last year have you been unable to remember what happened the night before because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
9. Have you or someone else been injured because of your drinking?	No		Yes, but not in the last year		Yes, during the last year	
10. Has a relative, friend, doctor or other healthcare worker been concerned about your drinking or suggest you cut down?	No		Yes, but not in the last year		Yes, during the last year	
<p>To score:</p> <p>Questions 1-8 are scored as 0, 1, 2, 3 or 4</p> <p>Questions 9 and 10 are scored as 0, 2 or 4 only</p> <p>Add all scores from each question to calculate total AUDIT score here</p> <p>Scores 1-7 = low risk; scores 8-12 = at-risk; scores 13+ = high-risk.</p>						

Guide to 5As brief intervention based on AUDIT questionnaire results

There is strong evidence that brief interventions are efficacious as secondary prevention strategies, particularly when targeting alcohol consumption. There are several frameworks in place to guide GPs on appropriate screening or assessment.

The [RACGP Smoking, nutrition, alcohol, physical activity \(SNAP\)](#) guide recommends the 5As: Ask, Assess, Advise/Agree, Assist, Arrange. Remember, ask permission to give feedback first and use a friendly and non-judgmental approach.

Use the following as a guide in giving feedback to a patient about their AUDIT score.

The 5As	
Ask	<ul style="list-style-type: none">Identify patients with risk factors based on their AUDIT score
Assess	<ul style="list-style-type: none">Level of risk factor and its relevance to the individual in terms of healthReadiness to changeHealth literacy
Advise/Agree	<ul style="list-style-type: none">Brief advice and motivational interviewingNegotiate goals and targets (including a lifestyle prescription)Discuss AUDIT score<ul style="list-style-type: none">If the score is 13 or over, advise patient to seek medical advice before they make any changes to their alcohol consumption. This is due to the risk of medical complications such as seizure and death from alcohol withdrawal in people who are dependent on alcoholFor the score is under 13, use the Drink-less Handycard to advise benefits of reducing alcohol consumption and discuss importance of separating drinking from driving
Assist	<ul style="list-style-type: none">Develop a risk factor management plan that may include lifestyle education tailored to the individual (e.g. based on severity of risk factors, comorbidities) and pharmacotherapiesSupport for self-monitoring
Arrange	<ul style="list-style-type: none">Referral to allied health services or community programsPhone information/counselling servicesFollow-up, prevention, and management of relapse

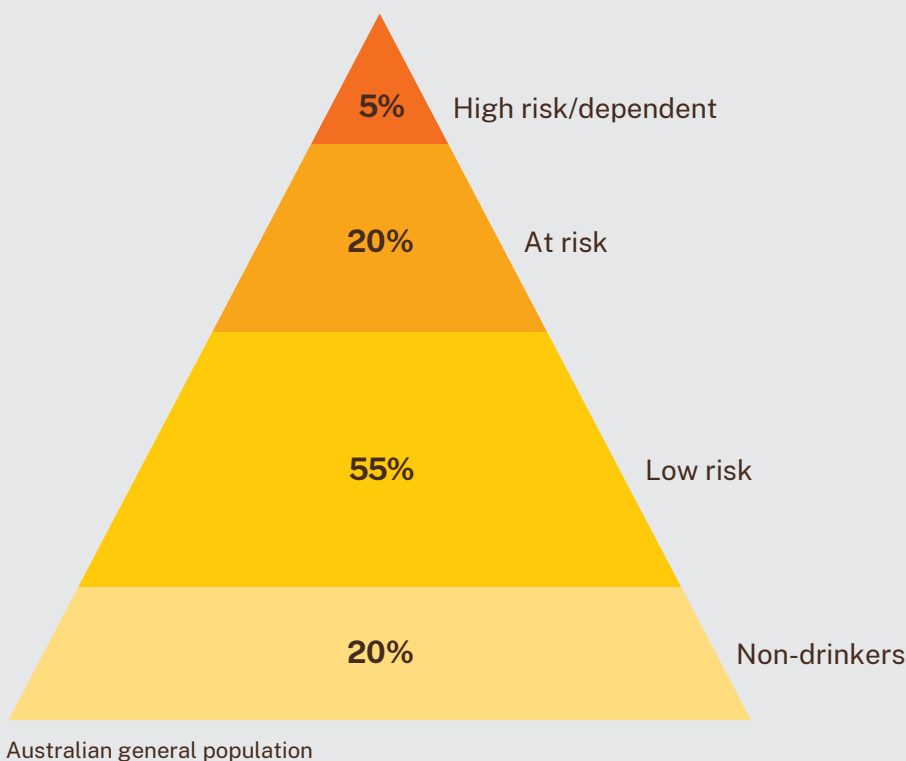
For more information on approaches to preventive care in general practice, see *Smoking, nutrition, alcohol, physical activity (SNAP): A population health guide to behavioural risk factors in general practice*, 2nd edition, RACGP, available at <https://www.racgp.org.au/clinical-resources/clinical-guidelines/key-racgp-guidelines/view-all-racgp-guidelines/snap>

1 Feedback – Are you at risk from drinking alcohol?

Score	Benefits	Problems
0-7 Low-risk	Increased relaxation	<ul style="list-style-type: none"> • Sometimes any drinking can be risky (e.g. driving, pregnancy, some medical conditions) • Even occasional heavy drinking can put you at risk of injury
8-12 At-risk	Health benefits minimal	<ul style="list-style-type: none"> • Less energy • Poor sleep • Poor co-ordination • Less able to think clearly • High blood pressure • Depression/stress • Impotence • Risk of injury • Danger driving & using machinery
13+ High-risk	Health benefits lost	<ul style="list-style-type: none"> • All of the above, plus: • Damage to liver, brain, memory • Physical dependence (addiction)

What is everyone else like?

Most people drink at safe levels



3 What benefits will you get from cutting down?

- sleep better
- more energy
- lose weight
- no hangovers
- better memory
- better physical shape
- improved mood
- more money

Reduced risk of

- high blood pressure
- liver damage
- brain damage
- cancer
- drink driving
- injury (to you and others)

2 Have you thought about changing your drinking?

How to do it

drink less

4 Goals

Who	How many drinks are safe?
Healthy adults	Less than 2 standard drinks per day reduces the lifetime risk of harm Less than 4 standard drinks on any occasion reduces risk of injury
Driving or planning to drive. Pregnant or breastfeeding	Not drinking is safest
Alcohol dependence or physical damage from alcohol	Not safe to drink at all

1 standard drink:



OR

middy of beer
(285mls)



OR

small glass
of wine
(100 mls)



nip of spirits
(30 mls)

5 Strategies

How do I cut down?

- Drink only with food
- Have a glass of water to quench thirst & between drinks
- Switch to smaller drinks
- Switch to low-alcohol beer
- Avoid going to the pub after work
- Limit time spent with 'heavy drinking' friends
- If under pressure to drink, say "I'm getting fit" or "My doctor has asked me to cut down"

Alternatives

- Plan other activities at a time when you usually have a drink
- When stressed, take a walk or exercise instead of drinking
- Explore new interests

Tips for keeping on track

Questions to ask yourself

- What are the most difficult times?
Plan to avoid these situations or plan activities to help you cope
- Am I losing motivation?
Remind yourself of your reasons for cutting down
- Do I need more help?
Don't feel embarrassed to come back for help. Specialist services are also available. For 24/7 information, support and referrals for those affected by alcohol and other drug use, call the Alcohol and Drug Information Service (ADIS) on 1800 250 015.