Methadone: Complaining in New South Wales

This Complaints Pac gives you an outline of how to complain and what the available services can do to help. You then can decide how to proceed.

The current National Methadone Guidelines, which are due to be renewed, state,

There should be a formal mechanism established at jurisdictional level for resolving grievances between clients and those responsible for their treatment. Clients should have the right of access to these procedures and be informed of them at the commencement of treatment and on request thereafter.

This means that, at the time you are assessed as suitable for a program, you should be told how to use that program’s complaints system.

In the case of ‘involuntary termination’ (being taken off the program without your consent), the guidelines further state, ‘Reduction in dosage should be gradual … In general … withdrawal from methadone should be at a rate not faster that 5mg every three days.’

However, if serious violence, threat of violence against staff or other patients, or property damage has taken place reduction will be more rapid and will not await review. The Guidelines recommend immediate discharge from treatment.

Apart from the patient liaison officer—one is usually found in each public hospital (where the methadone clinic is based) and can deal with complaints, as can the General Manager of the Hospital—there are four formal avenues of complaint in New South Wales at present:

• The methadone service provider’s program manager
• The Intake worker at NUAA (the New South Wales Users and AIDS Association)
• MACS (Methadone Advice and Conciliation Service)
• The Health Care Complaints Commission.

These avenues are not the only way of complaining, but they are direct and specific to methadone or health matters.

You should be able to approach the manager of a methadone program and tell them you are unhappy with the treatment you have received. This isn’t always possible or appropriate, especially if you or the manager, or both of you, are angry or if your problem is with the manager.

NUAA, your local user group, can help you make contact if you don’t feel confident or feel you aren’t listened to by whoever you approach about your problem. NUAA can also help you decide what to do; they have experienced staff members that are aware of how the process works and will assist you to decide on your best option.

Complaints about methadone programs generally

Methadone programs generally maintain that if you are unhappy with a decision about your methadone you should approach the program manager. Unless your problem is with the
program manager, that is the person you should first approach if you are worried about the attitude of the staff or how you are spoken to on a daily basis.

**The Methadone Advice and Conciliation Service**

The MACS telephone line was established to collect information and report to the health department about methadone complaints. The MACS counsellors can help with emergency problems, advising clients and in some cases intervening in complaints, especially if the client is at risk of losing their dose on that day.

**FREECALL™: 1800 642 428**

**The NUAA Intake worker**

If you have no idea how to make a complaint and want some help or want someone to help you, the NUAA Intake worker can help. It doesn’t matter if you are on a public or a private program, in the country or the city. NUAA is funded to help you and will do so as far as possible; if they can’t help they will refer you on to the appropriate place.

**NUAA**
345 Crown Street, SURRY HILLS, NSW 2015
Phone: (02) 8354 7300
Fax: (02) 8354 7350
**FREECALL™: 1800 644 413**
e-mail: nuaa@nuaa.org.au

**Complaints about Private Programs**

If your methadone has been prescribed by a doctor from a private program you should be able to approach the program manager with your complaint. If you don’t feel you can do this, contact either NUAA or MACS. Complaints about pharmacists can also be dealt with in this way.

**Complaints that concern not just you**

If your complaint concerns not just you, you can go to or telephone the Health Care Complaints Commission. Although it will take some time to process your complaint—because it should be in writing and because the office will expect documented evidence of actions or policies, or both—the eventual outcome may be better or more worthwhile because of the influence the Commission has.

One of the valuable things about going to the Commission is that an investigation will show up any deficiencies in the program and those deficiencies will have to be explained. This means that the agency that licenses health care providers asks the people who are complained about to explain their actions. If these actions are unclear, inappropriate or unfair, an agency’s registration or funding might be reviewed. The Health Care Complaints Commission may take on actions in the public interest—to ensure a beneficial outcome for all after a complaint has been lodged.
You will be asked if you have tried to resolve the problem by talking to the service provider. If you haven’t done this, you will be expected to do it before asking someone else, especially the Health Care Complaints Commission, to act on your behalf.

Health Care Complaints Commission
Level 4, 28-36 Foveaux St
Surrey Hills NSW 2010

Locked Mail Bag 18, Strawberry Hills, 2012, NSW

FREECALL™: 1800 043 159

Other avenues

You have the right to complain to almost anyone—this includes anything from a letter to the newspaper to seeing your local member of parliament—about your treatment and any lack of respect shown to you, especially in the health area. Mostly, people at any level are prepared to cooperate as long as they can see that they are not personally your target.

AIVL’s HEPack Health Rights for Drug Users booklet provides sample letters and advice about how to complain. Use it as a guide to running your own complaint; it is available through NUAA and will help you get going.

Complaints Pac is a production of the Australian Injecting and Illicit Drug Users League on behalf of its members. This project has been funded by the Department of Health and Ageing.