

Ref: FOI/GS/ID 9365

**Please reply to:**  
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17 September 2024

## **Freedom of Information Act 2000**

I am writing in response to your request for information made under the Freedom of Information Act 2000 in relation to A&E procedures for spiking admissions.

*You asked: All questions are shown as received by the Trust.*

*Procedures for Toxicological Screening:*

- 1. What are the standard procedures for conducting screenings for individuals who believe they might have been administered a substance without their consent upon presenting to A&E?*
- 2. Are there specific protocols for these situations, and if so, what are they?*
- 3. If there is a document, flow chart or any other materials, pertaining to these procedures, please can these be attached to your reply.*

*Information Provided to Patients:*

- 4. What information is given to patients regarding the utility and limitations of testing conducted in your A&E setting, including the context of potential law enforcement or justice processes, if any?*
- 5. Does this information make clear whether or not tests conducted in A&E are admissible in court? If so, what does it state?*
- 6. What advice or support is provided to individuals during and after the screening process?*
- 7. Are there any follow-up procedures or referrals to other support services offered to these individuals?*
- 8. If there is a document, flow chart or any other materials, provided to patients, please can these be attached to your reply.*

*Scope of Toxicological Testing:*

- 9. What is the scope of screening conducted in your A&E? If available, what type of testing is used.*

*10. Are any specific drugs or substances prioritised or given special attention during these screenings?*

*Training:*

*11. Have A&E staff had specific and dedicated training about spiking? If so, please provide details of this training.*

Trust response:

1. We would not routinely test for substances that someone believes they may have been administered unless it helped in the immediate care of the patient. Most of the treatments are supportive so it is rarely necessary to test. If we did test then it would be a urine toxicology screen which looks for the more common recreational drugs (opiates, benzodiazepines, MDMA, Cocaine, Ketamine, Amphetamines, Cannabis). We would usually only do this in a patient who had reduced consciousness and was deteriorating.

2. Please see response to Q1.

3. Not applicable

4. There is no information at the Trust other than that they are stable and safe to be discharged from the Emergency Department. We would advise them to inform the police.

5. Not applicable.

6. Not applicable.

7. Not applicable.

8. Not applicable.

9. Rarely if ever used, please see above.

10. Please see above.

11. The training is around toxins and toxicology, the Trust uses Toxbase which is a national database on treatment of ingested or inhaled substances.