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Dear Emily

**Review of Canberra Health Services Procedure: Intramuscular
Medication Administration**

This letter has been prepared by the ACT Mental Health Consumer Network (the Network) in response to the invitation from Canberra Health Services (CHS). It incorporates both written and verbal feedback received from consumers in relation to the CHS Procedure: Intramuscular Medication Administration (the Procedure). The Network welcomes the invitation to provide feedback on the Procedure.

Consumers noted that throughout the document a consumer's carer, family and/or support person are referred to as "family/carers", "family/carers" or "family/carers/support person" (pp. 3-4, 8-9, 11, 13, 15). Carers are not always a member of a consumer's family, and carers also have particular rights and responsibilities that are outlined in the *Carers Recognition Act 2021 (ACT)*. Due to this, it is important to maintain clear distinctions throughout the Procedure between carers, family members and other supports. A forward-slash should not be used to collapse together different people who may be supporting a consumer. Where needed, consumers recommended using the phrasing "a consumer's Carer, family

member and/or support person” and appropriate variations thereof throughout the Procedure.

In Section 2 on page 4, consumers expressed strong concerns about the guidance provided regarding the use of intramuscular injections (IMI) in conjunction with the physical restraint of a consumer in the prone position. The guidance under the heading “IMIs used in rapid tranquilisation” clearly explains the risk-to-life that the use of the prone position involves. This paragraph also states that the prone position should only be used as a last resort. However, this section provides no instruction as to what alternative positions staff first consider and attempt before resorting to the prone position to administer an IMI for rapid tranquilisation. If the Procedure does not specify what the first or alternative positions are, then the last resort is being presented as the only resort. Consumers therefore recommended that this section should include explicit instructions about the positions that staff should first resort to when physically restraining a consumer to administer an IMI.

In Section 3, staff are appropriately advised to “[p]rovide information and education to the consumer ... about what to look out for after the injection” (pp. 9, 11, 13, 15). Consumers noted that this instruction could be improved by also advising staff to consider providing relevant post-injection care information both verbally and in writing. Some consumers may have difficulties with recalling verbal guidance and as such written information can help with ensuring that any complications or side effects are appropriately detected and reported.

If you have any questions or concerns regarding this feedback, please do not hesitate to contact us on (02) 6230 5796 or executive@actmhc.org.au.

Thank you once again for the opportunity to provide feedback on the Procedure. We look forward to receiving further consultation requests in future.

Yours sincerely



Dalane Drexler
Chief Executive Officer