



Application by a Medical Practitioner for a Banned Drinker Order

Liquor Control Act 1988 - section 152YQ

To comply with section 16(11) of the *Liquor Control Act 1988* (Act), this application may be provided to the proposed banned drinker. Contact the Banned Drinkers Register (BDR) team if you have concerns with the release of any information in the application. Where possible, your personal information will be removed from the application before it is provided to the proposed banned drinker.

Applicant Details

Note: Only the following people may make application:

- (i) Medical practitioner (registered under the *Health Practitioner Regulation National Law (Western Australia)* in the medical profession); **or**
- (ii) Social worker (who is a member (or eligible for membership) of the Australian Association of Social Workers Limited ACN 008 576 010)

Name:

Profession:

AHPRA Registration No:

Clinic/Business Address:

Email:

Phone number:

ID attached: YES NO

Proposed banned drinker (PBD) details

Full name:

Date of Birth:

Current address:

Email:

Phone number:

Grounds for application (attach additional documents if required)

For the Director to make a banned drinker order (BDO), they must be satisfied about:

1. the PBD's identity;
2. the PBD is misusing or has misused liquor;
3. that the PBD's misuse of liquor is a serious risk to the health, safety or wellbeing of the person or another person; and
4. it is in the public interest to make the order.

If not, the Director must refuse the application.

Therefore, please provide any information and supporting documents relevant to those matters, including the information requested below, noting that it is not sufficient to state that the PBD is misusing liquor or that their misuse of liquor poses a serious risk of harm without providing information or evidence to support that opinion. Provision of the requested information listed below will assist the Director to assess your application, however, the list is not prescriptive nor exhaustive. You may still submit this application if you are unable to provide all of the requested information. Similarly, you may also provide any other information not listed below if you consider it to be relevant to the application.

We draw your attention to sections 152ZC of the Act, which permits you to give the Director information about the PBD, and 152ZE, which provides protection from liability for disclosure of confidential information in certain circumstances.

Duration of BDO requested:

Reason for requested duration:

Has the PBD been informed of this application?

Yes

No

How frequently and over what timeframe has the PBD attended your health service while intoxicated? For the purposes of this question, intoxicated is taken to mean that the PBD has presented with evidence of impairment of speech, behaviour, coordination and balance or unconsciousness in the context of the smell of alcohol on the breath or clothes, where it is reasonable to believe that their impairment results from the consumption of alcohol and where other medical causes have been adequately excluded.

Is it your medical assessment that the PBD has a current diagnosis of harmful pattern of use of alcohol, by reference to the International Classification of Diseases 11 code diagnostic criteria?

- Yes
- No

Refer to [ICD-11 6C40.1: Harmful pattern of use of alcohol](#)

Description

A pattern of alcohol use that has caused damage to a person's physical or mental health or has resulted in behaviour leading to harm to the health of others. The pattern of alcohol use is evident over a period of at least 12 months if substance use is episodic or at least one month if use is continuous. Harm to health of the individual occurs due to one or more of the following:

- (1) behaviour related to intoxication;
- (2) direct or secondary toxic effects on body organs and systems; or
- (3) a harmful route of administration.

Harm to health of others includes any form of physical harm, including trauma, or mental disorder that is directly attributable to behaviour related to alcohol intoxication on the part of the person to whom the diagnosis of Harmful pattern of use of alcohol applies.

Is it your medical assessment that the PBD has alcohol dependence, by reference to the International Classification of Diseases 11 code diagnostic criteria?

- Yes
- No

Refer to [ICD-11 6C40.2: Alcohol dependence](#)

Description

Alcohol dependence is a disorder of regulation of alcohol use arising from repeated or continuous use of alcohol. The characteristic feature is a strong internal drive to use alcohol, which is manifested by impaired ability to control use, increasing priority given to use over other activities and persistence of use despite harm or negative consequences. These experiences are often accompanied by a subjective sensation of urge or craving to use alcohol. Physiological features of dependence may also be present, including tolerance to the effects of alcohol, withdrawal symptoms following cessation or reduction in use of alcohol, or repeated use of alcohol or pharmacologically similar substances to prevent or alleviate withdrawal symptoms. The features of dependence are usually evident over a period of at least 12 months but the diagnosis may be made if alcohol use is continuous (daily or almost daily) for at least 3 months.

By reference to the International Classification of Diseases 11 code diagnostic criteria for harmful pattern of use of alcohol and alcohol dependence, what damage to the PBD's health has been caused by their pattern of alcohol use or alcohol dependence?

On average, how many standard alcoholic drinks does the PBD consume per day and/or week (if known)?

Is the PBD suffering from any chronic diseases or other health concerns which, in your opinion, are attributable to their consumption of liquor? Please tick any that apply:

- Liver failure with portal hypertension and/or oesophageal varices
- Upper GI bleed secondary to gastritis
- Pancreatitis
- Aspiration Pneumonia
- Wernicke's/Korsakoff's dementia
- Recurrent seizures
- Alcohol withdrawal syndrome requiring hospital admission
- Unconsciousness requiring hospital admission for airway support/monitoring
- Other: _____

Has the PBD presented with any injuries (including self-inflicted) which, in your opinion, are related to their consumption of liquor? Please tick any that apply, and provide additional details if relevant:

- Serious head injuries
- Deep tissue injuries – lacerations of skin/muscle/tendons/nerves/vessels
- Fractures
- Other: _____

Provide any additional details that may be relevant to assessment of the application for a banned drinker order. For example, information that explains why you believe the PBD is misusing liquor and why there is a serious risk to their health, safety or wellbeing, or that of another person.

Declaration:

I understand it is an offence contrary to section 159 of the *Liquor Control Act 1988* to make a false or misleading statement in an application to the Director of Liquor Licensing and that it carries a penalty of up to \$10,000.

Signature Date

Please send the completed request to BDR@dlqsc.wa.gov.au.

If you have any questions, please contact the BDR team during normal business hours by telephone on (08) 6551 4859.