SPORT INTEGRITY AUSTRALIA

National Integrity Framework

Companion Guide: Improper Use of Drugs and Medicine Policy

Contents

Purpose

This Companion Guide supports sporting organisations and personnel to understand and implement the Improper Use of Drugs and Medicine Policy (Policy) within the National Integrity Framework (NIF). It is to be read and used in conjunction with the Policy.

The Policy is the principal document that sets out mandatory rules and requirements. This Companion Guide provides additional context, explanatory material and practical considerations to assist sports in applying the Policy. The guidance is advisory in nature and does not form part of the Policy.

Engaging performance support staff

When engaging performance support staff in sport science and medicine, Relevant Organisations should apply the Australian Performance Support Practitioner Minimum Standards that are available on the Australian Institute of Sport website.

Performance staff working with Relevant Athletes should:

- Be compliant with the Performance Support Practitioner Minimum Standards[1] (AIS Standards) or;
- Be registered with the Australian Health Practitioners Regulation Agency (AHPRA) e.g. as a Chiropractor, Nurse, Osteopath or Paramedic
- not have any current restrictions in place on their practice.

These standards should be applied to all performance support staff, including contractors. It is good practice to include the standards in employment contracts as a requirement. The AIS Standards cover positions across biomechanics, medicine, performance analysis, performance nutrition, physiology, physiotherapy, psychology, soft tissue therapy, strength and conditioning, and skills acquisition and learning design. For roles not included in the AIS Standards, AHPRA registration should be required.

Before engaging staff, sporting organisations should check, verify and record all education qualifications, professional experience and relevant registrations. It's also important to check the expiry date of any registrations and ensure relevant qualifications remain valid.

Responsible use of medication

Sporting organisations can support athletes and others in sport with awareness about safe and responsible use of medications. This supports athlete health as well as anti-doping requirements.

- Sports can refer athletes to free support, such as the Sport Integrity app. The app enables direct access to Global Dro, an online site providing current information on whether specific medications are allowed or banned in sport.
- Sports can also support athletes and others with awareness of Therapeutic Use Exemptions (TUEs). A TUE permits an athlete to use a substance or method that is otherwise prohibited in sport, strictly for legitimate medical treatment. Sports can direct athletes to the Sport Integrity app, which has a TUE Checker, and the Sport Integrity Australia website for advice. It's important that athletes check whether they require a TUE prior to taking medication to avoid an Anti-Doping Rule Violation.

[1] Website link correct as of February 2026

- Relevant Athletes should notify the sport's Chief Medical Officer or the sport's nominated person when prescribed or provided medication by a medical practitioner who is not appointed by the sport.
- Relevant Athletes should be aware of medication regulations in destination countries when travelling overseas and prepare accordingly. Relevant Athletes should ensure they have appropriate approval to possess and use the medication and that they have enough supply. Relevant Athletes should not use expired medication.

Responsible monitoring of injections

Relevant Organisations should maintain a self-injection register for Relevant Athletes and Relevant Support Personnel. This provides a record of people with medical conditions that require self-injection or the carrying of self-injection equipment.

A register enables Relevant Organisations to support athletes who require self-injection and to manage risks of inappropriate injections.

To be listed on the self-injection register, Relevant Athletes and Relevant Support Personnel with a documented medical condition should notify the Chief Medical Officer or nominated person in the sport of their medical reason to inject.

It is good practice to provide and record these medical reasons for self-injection as soon as possible once a medical condition is known. However, in exceptional circumstances (such as insufficient time or opportunity), the sport has discretion to grant retrospective approval for possession of self-injection equipment and self-injection.

It is important sports have a process in place to protect medical privacy. This should include how the self-injection register is stored, as well as who has access to the register or other medical information.

Sports should warn athletes that even permitted forms of injection (e.g. some cosmetic procedures) can still carry risks of containing prohibited substances.

Supplements

Sport Integrity Australia recognises that some athletes choose to use supplements, but our advice is that no supplement has a 100% guarantee that it is free of doping risks.

National Sporting Organisations (NSO) and National Sporting Organisations for People with Disability (NSOD) should establish a best practice approach and documented procedure for supplement use within their sport, with a focus on safety and evidence-based use. To support this, the AIS has online supplements resources including a Sports Food and Supplements Guidelines Policy Template for Sport. This resource is designed to assist sporting organisations to develop and implement their own guideline/policy.

The AIS's online supplements resources also include the AIS Sport Supplements Framework classifying supplements into 4 categories according to their effectiveness, safety and current status on the Prohibited List.

Accredited third-party testing (conducted by an organisation with ISO/IEC 17025 accreditation or equivalent) is a recognised way to reduce the risk of supplements containing prohibited substances.

The 'Supplement Checker' on the Sport Integrity app can be used to assess the risks of a supplement and identify safer third-party tested products. While this can help identify lower risk supplements, sports should advise athletes that there is never a 100% guarantee any supplement is free from prohibited substances.

Relevant Athletes who choose to use supplements should only do so in accordance with:

- The Australian National Anti-Doping Policy (ANADP)
- The Improper Use of Drugs and Medicine Policy of their NSO/NSOD; and
- any additional requirements for the use of supplements beyond the ANADP and Policy, that are documented and implemented by their NSO/NSOD (e.g. a sport may require Relevant Athletes to record their supplement use on the Athlete Management System or require athletes to have all supplement use endorsed by the Team Doctor/Nutritionist).

Illicit drugs

The Improper Use of Drugs and Medicine Policy does not provide extensive detail on management of illicit drugs in sport. However, it is recognised that NSOs may wish to develop further policies, resources or programs to specifically address illicit drugs.

Considerations for NSOs may include:

- What education and other support resources the sport can provide
- What additional testing for illicit drugs, if any, beyond anti-doping provisions will exist
- How to balance athlete wellbeing initiatives with disciplinary processes within the Policy framework
- What access to medical treatment the sport may provide
- Processes for the use or possession of illicit drugs that don't warrant a criminal conviction
- How to manage competing demands for privacy, confidentiality and natural justice, with expectations stakeholders may have on transparency.

Sports should consult with all relevant stakeholders if developing an Illicit Drugs Policy, noting the interest and role that athlete representative bodies have in this space. Any Illicit Drug Policy should recognise the societal context in which sport is played. SIA can provide insights from exploratory work in this area that may benefit sports considering a more nuanced approach or policy in relation to illicit drugs.

Determining which policy applies

In situations where the Australian National Anti-Doping Policy (ANADP) and the Improper Use of Drugs and Medicine Policy may both apply, the ANADP takes precedence. These examples explain how different policies may apply.

Example	An IV injection of Vitamin C is given to an athlete by the team doctor	Use of Testosterone	Supplement provided by team physiotherapist
Firstly, consider the Australian National Anti-Doping Policy (ANADP)	Vitamin C is not a prohibited substance. The volume injected was below 100mL and therefore not a prohibited method. This is not a violation under the ANADP.	Testosterone is a prohibited substance. The athlete does not have a TUE (and would not receive one). This is a violation of the ANADP.	The supplement is batch-tested and does not contain any prohibited ingredients. This is not a violation under the ANADP.
Secondly consider the Improper Use of Drugs and Medicine Policy	The injection was not for a permitted purpose. This is a breach of the Improper Use of Drugs and Medicine Policy by both the doctor and the athlete.	No further action. This could also be a breach of the Improper Use of Drugs and Medicine Policy, but it is already managed through the ANADP.	The supplement is batch-tested and does not contain any prohibited ingredients. This is not a breach of the Improper Use of Drugs and Medicine Policy.
If necessary, consider other relevant sport policies	No further action required, as it is already being managed through the Improper Use of Drugs and Medicine Policy.	No further action required.	This sport has an additional Supplement Policy that states only a team doctor or dietician may provide a supplement. The physiotherapist has breached the sport's Policy.

Clinical Governance

Clinical governance guides the delivery of safe and high-quality clinical care in any healthcare setting, including sport. Adopting evidence-based clinical governance practices is best practice for any organisation providing healthcare. Therefore, Relevant Organisations in sport should adopt clinical governance as part of their corporate governance functions and commitment to a positive sporting culture. Clinical governance practices should incorporate the Improper Use of Drugs and Medicines Policy.

Benefits of a Relevant Organisation having a clinical governance program include:

- **Comprehensive care** that is safe and high-quality to athletes.
- **Risk assurance** for senior management, including the Board.
- **Annual planning** and guidance for clinical leadership and staff.

Relevant Organisations should view clinical governance as more than a compliance activity - it is an opportunity for improved organisational performance.

Developing a clinical governance function aligns with the Principles of Quality Practice for Performance Teams as outlined in the 2032+ Australian High-Performance Strategy:

- Performance teams champion the conditions and culture that align to sustainable high performance.
- Performance team members share a clear purpose and work together to achieve their goals.
- Performance team members meet expected standards of practice.
- Sustainable performance is underpinned by continuous improvement.
- The physical environments support safe, high-quality practice and reflect the athletes' performance needs.
- Organisations establish systems and processes that enable and guide performance teams.

The Australian Sports Commission has a Clinical Governance Framework[2] template. This framework, and associated documents, support Relevant Organisations to develop their own clinical governance framework.

Establishing a Clinical Governance Framework

An organisation's approach to clinical governance is typically defined within a framework[3]. The Framework should identify the:

- Organisation's commitment to creating a culture of safe and high-quality healthcare and expected standards.
- Roles and responsibilities to deliver on this commitment.
- Domains and elements through which this commitment is operationalised.
- Organisational structure elements under which the framework will be enacted, including the formation of a clinical governance peak body, an internal reporting approach, an annual work plan, and other administrative elements e.g. agenda proformas.

The **Australian Sports Commission Clinical Governance Framework** template (the 'Template') provides clear guidance and support for Relevant Organisations setting up their own Clinical Governance Framework. This Template and associated documents can be found on the Clearinghouse for Sport.

Successful implementation requires an all-of-organisation approach. Many Relevant Organisations will already be undertaking elements of a clinical governance function in day-to-day operations. However, if these are not clearly linked to wider organisational structure and function, the relevance may be uncertain for those in leadership positions.

It's recommended that Relevant Organisations form a working group that includes all relevant expertise to develop the framework. This should include, at minimum, the Relevant Organisation's Medical or Healthcare Lead, National Integrity Manager (or delegate), and a leadership team member with

[2] https://www.ausport.gov.au/clearinghouse and use the search function for Clinical Governance. This site is password protected and the appropriate member of the RO will be required to register.
[3] This document might be viewed as a combined policy and procedure that guides Clinical Governance, but framework reflects the commonly utilised terminology within clinical governance subject matter expert groups.

responsibility for athlete welfare or support. It would typically be led by the Medical or Healthcare Lead unless delegated.

Relevant Organisations developing a clinical governance function for the first time are encouraged to seek support from an external practitioner with knowledge and experience in setting up clinical governance functions in sport.

Roles and responsibilities

The Template makes it clear that all levels of an organisation have a role to play in clinical governance and that ensuring clinical safety and quality in healthcare provision is everyone's responsibility.

Each tier of an organisation has unique expectations, outlined in the Template. Relevant Organisations need to ensure that all tiers have their role defined within the Framework and that this is widely socialised internally.

For example, the Template notes the particular importance of Board oversight. In settings where healthcare is provided by the organisation to its athlete body, this Clinical Governance Framework requires the same level of oversight and risk assurance as any other part of the organisation's activity. This cannot be delegated elsewhere.

Leadership: The Clinical Governance Framework should be the responsibility of the Relevant Organisation's Medical (or Healthcare) Lead. The day-to-day activity required may be delegated to other staff depending on availability, expertise, and the framework activity levels.

Peak body: Established Clinical Governance Frameworks are typically monitored by a governance group within the organisation. This group allows for the benefits of both internal and external perspective and the introduction of independent appointments without needing to be voluminous.

These are typically titled Clinical Advisory Group or Clinical Governance Group. This should have a terms of reference that aligns its function to the purpose of the Clinical Governance Framework and the organisational structure.

It would be expected that such a group would be chaired by the Medical or Healthcare lead (or delegate) or an independent member.

Perspectives that should be considered for incorporation include that of the athlete, operations, high-performance, elite healthcare. Many perspectives can be covered by one individual.

Domains

The Template provides guidance on the domains and elements within that provide for a comprehensive Clinical Governance Framework. Relevant Organisations are encouraged to initiate a clinical governance approach using the most important elements first, then build this up.

These domains and the elements within them will form the bulk of the enduring Clinical Governance Framework and the activity the Relevant Organisation will focus on from year to year once established.

The activity undertaken through a Clinical Governance Framework in a Relevant Organisation should be commensurate with the size and resourcing available. This is typically readily apparent as smaller Relevant Organisations will likely have less healthcare activity to govern. While all elements of the Template should be addressed within a Relevant Organisation's approach, the volume of activity within each element is likely to differ and may be very small or even non-existent.

The detail of each of these domains and elements can be found in the Template.

Independence

Integrating some element of independence into the structure and function of a Clinical Governance Framework has 2 major benefits.

An independent member of clinical governance function aligns with good governance principles, providing a perspective that is free of internal bias. This assists in risk management and recognising opportunities for quality improvement.

Independence also provides a mechanism by which the wider organisation can be alerted to concerns of improper performance or deviations from best practice that may otherwise go unreported.

Resourcing

Once established, Clinical Governance Frameworks in Relevant Organisations should not need to be a significant drain on an organisation's resources.

There may be some costs involved in the establishment of the Clinical Governance Framework and moving through to 'go-live'. While this is more likely the case for organisations for whom this activity is new, and they consequently seek external guidance, these costs are not typically significant on an ongoing basis.

Smaller organisations may consider partnering in development and ongoing support for activity to ensure resources are adequate.

Further support

Addressing clinical governance does not need to be daunting. Sport Integrity Australia can direct Relevant Organisations to experts who can assist Relevant Organisation with progressing their clinical governance plans and framework.

For further assistance, your NSO/NSOD National Integrity Manger can reach out to Sport Integrity Australia's Sport Partnership team.