



Public Health Suffolk



Medications in Drug Treatment - Risks to Children: A Short Guide for Professionals

AIMS OF GUIDANCE

To explain;

- what mediations are prescribed to people accessing drug treatment services and why
- the potential risks presented by these medications to parents and children
- the measures taken by drug services to ensure theses medications are prescribed safely
- what professionals need to look out for when visiting the home and what they can do to help minimise the risks

See Pages 9 and 10 for a checklist of things to look out for when visiting a home and questions you can ask.

WHY DO DRUG TREATMENT SERVICES PRESCRIBE MEDICATION?

- To help stabilize service users
- To provide an opportunity to address the reasons why they use
- To help them engage with other services e.g. mental health services
- To help users to reduce their drug use
- To reduce the harms associated with substance misuse e.g. needle sharing, infection, blood borne disease.
- To reduce effects of anti social behaviour and crime on the community

WHAT DO DRUG TREATMENT SERVICES PRESCRIBE?

Methadone (synthetic opiate)

- Painkiller and substitute for heroin
- Similar effects to heroin but longer lasting
- Reduces the physical and psychological pain
- Give a feeling of warmth relaxation and detachment

Buprenorphine

- Similar to methadone but also blocks opioid receptors
- Milder, less euphoric
- Less sedated effect
- Longer acting

WHAT ARE THE RISKS?

- There are risks associated with any medication and we need to be mindful about educating parents about the balance of benefits vs risks.
- Prescribed medication is very dangerous for anyone except the person prescribed it.
- Methadone or buprenorphine, if ingested by children or babies can lead to death.
- This harm can result from an accumulative effect (from ingesting over a period of time).
- Parents must not give their medication to children for any reason.

SO WHY TAKE IT HOME?

- Taking medication home medication helps people move away from treatment services and back into the community
- Managing their own medication promotes responsibility and independence.
- They may spend less time feeling like an 'outsider', 'junkie' or 'druggy'
- It helps a user to get to a point where they are stable, not chaotic, not using street drugs and exploring the reasons behind their use.
- It is also about helping them reintegrate into their community and the wider society.

For example, getting jobs, getting the kids to school, getting up on time and getting to appointments.

This can be really hard if you are having to get to a chemist everyday – especially if you don't drive!

WHAT MEASURES ARE TAKEN TO ENSURE SAFE PRESCRIBING ?

Service users don't take medication home straight away:

- Minimum of three months supervised what does this mean?
- They must have had three consecutive clean drug tests before home medication is prescribed.
- They must be engaged in psychosocial treatment
- The service user is assessed as stable and has a support network

WHAT CAN YOU DO?

Know what to look out for when you visit someone's home

See page 9

Know what questions to ask the service user when you visit their home.

See page 10

WHAT TO LOOK OUT FOR

Methadone or other medicines should not be kept where a child might find them. They should be kept out of the reach of children in a high cupboard or one with child proof locks. Remember children grow and like to climb.

Parents must never give a baby or child even a tiny amount of methadone or other drug to soothe them or help them sleep.

Parents should not take their methadone, medicines or other drugs in front of children.

Methadone or medicines should never be put in a bottle or container that doesn't have a child proof lid.

Parents should not keep methadone in the fridge

All methadone, medication, drugs and drug equipment should be stored in a secure, locked place.

Note: Every client who has children is given a safe storage box by Turning Point

Parents should always wash out spoons, dispensing caps and empty containers thoroughly, ensuring that they are disposed of safely.

Old or unwanted medicines should be taken to the pharmacy to be disposed of.

Parents should never sleep together with their baby whether in a bed, chair or sofa if they have taken any drug that might make them drowsy or consumed alcohol.

QUESTIONS TO ASK

"How are things going?"

"Are your medicines stored safely and out of the reach of children?"

"Do you have a medicines safety plan?"

Note: A contract is signed to say they understand the risks around medication at home and are going to take responsibility for its safe storage.

"When were you last seen by Turning Point?"

TURNING POINT – WHAT DO THEY DO?

- Provide the integrated drug and alcohol service across Suffolk
- Adult, youth and criminal justice service under one 'roof'
- Psychosocial support
- Group work
- Peer support
- Mutual aid
- Substitute prescribing

TURNING POINT -YOUTH SERVICE

- Works with young people up to 25th birthday
- Outreach service works with the client where they need to be seen
- Referrals via DUST form

ADULT SERVICE – HOW TO REFER IN

Call the SPOC number 0300 123 0872

Complete one of our referral forms and post it to us.

Email it to our secure email ECHUB.turningpointsuffolk@nhs.net

Signpost clients to our welcome cafés

Send a request on our website

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If you have any questions about this guidance please contact....

FURTHER READING

Medications in drug treatment: tackling the risks to children. Adfam. 2015

http://www.adfam.org.uk/cms/docs/adfam_ost_fullreport_web.pdf

Medications in drug treatment: tackling the risks to children. One Year On. Adfam. 2015

http://www.adfam.org.uk/cms/docs/ost_oneyearon_full.pdf

Anything else?