

## THE PRINCIPLES BEHIND THE PLEDGE

Stopping The Over-Medication of children and young People with a learning disability, autism or both (STOMP)

## and

## Supporting Treatment and Appropriate Medication in Paediatrics (STAMP)

Children and young people with a learning disability, autism or both should only be prescribed psychotropic medication when clinically indicated. Other therapies and support (including family support) should be offered before prescribing and while taking psychotropic medication.

The experience of parents, carers, clinicians and young people would indicate that psychotropic medication prescribed in childhood is often continued long past its original prescribing rationale. This could be because of poor monitoring and reviewing, and an unwillingness to challenge the originating prescriber about the appropriateness and/or efficacy of a particular psychotropic medication. Some medications may not be necessary as the young person grows into adulthood and the medication side effects may be detrimental to their health and wellbeing.

When the needs of children and young people with a learning disability, autism or both are not met, they can sometimes behave in ways that can be described as challenging to others. Too often when this occurs, psychotropic medication is inappropriately prescribed because of a perceived lack of readily available alternatives. Clinicians, families, carers and individuals should work together to find alternatives to psychotropic medication (such as Positive Behaviour Support).

For some children and young people, medication can be useful in enabling them to function and help them to achieve their potential. Regular and timely reviews should be undertaken so that the effectiveness of the medication is evident and balanced against potential side effects. This will mean that children and young people are only getting *the right medication, at the right time, for the right reason.* 





- ✓ Psychotrophic medication should only be considered for the management of behaviour that challenges when:
  - alternatives to psychotropic medication alone (such as Positive Behaviour Support) do not produce positive change within an agreed time, or
  - treatment for any coexisting mental or physical health problem has not led to a reduction in the behaviour, or
  - the risk to the person or others is very severe (for example, because of violence, aggression or self-injury).
- ✓ Only offer psychotropic medications in conjunction with other interventions.
- ✓ Prescribing decisions should be clearly evidenced and documented, along with discussions that have taken place with the young person and their family.
- ✓ Prior to prescribing medication, a full functional analysis of the symptoms and behaviours being treated should be fully understood by families, carers and clinicians.
- ✓ There should always be a clear diagnosis that is arrived at through a defined and recognised assessment process.
- ✓ Consent or best interest decisions should be made in line with the Mental Capacity Act (MCA).
- ✓ Families, carers and young people should be given accessible, comprehensive information about the medications being offered, so that they are able to understand both the benefits, and side effects that these may have over time.
- ✓ With the introduction of any new psychotropic medication, families need time to consider, reflect and ask questions. Any questions they may have should be answered in a clear, balanced and objective way. Reasonable adjustments should also be made to support the child or young person's understanding.
- ✓ The planned duration of treatment with the medication should be clear. Any medication prescribed to avert a crisis should be time limited to ensure regular and timely review.
- ✓ Clear guidance about why and when any additional 'as required' (PRN) psychotropic medication needs to be given should be discussed with parent and carers and reasonable adjustments made to support the child or young person's understanding.

## References

NICE guidelines [CG142] (August 2013) Autism spectrum disorder in under 19s: support and management

NICE guideline [NG11] (May 2015) Challenging behaviour and learning disabilities: prevention and interventions for people with learning disabilities whose behaviour challenges



