



# Learning Disability Service



We support

**STOMP**

Stopping over-medication of people  
with a learning disability, autism or both



# What is STOMP?

- stopping over-medication of people with a learning disability, autism or both.
- Winterbourne – Building the Right Support
- LeDeR
- CiPOLD
- Giles Glover – public health report
- What is STOMP ??



# Mix it video

[www.youtube.com/watch?v=Cqbd2QsJmFw](https://www.youtube.com/watch?v=Cqbd2QsJmFw)



## **STOMP and STAMP**

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

The aim is to make sure that children and families can access other treatment and support when children display behaviours that challenge, for example Positive Behaviours Support or other therapeutic support.

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## The Aim of STOMP:

To improve quality of life for people with a Learning Disability.

Involve people with a Learning Disability and or Autism in decisions about their health and treatment.

Make sure people only receive psychotropic medication for the right reasons and the right amount.

Improve the understanding of psychotropic medication and when it should and should not be given.

Improve the understanding of alternatives to medication.



Psychotropic medication can cause side effects such as:

- X significant weight gain
- X feeling tired or 'drugged up'
- X severe constipation or bowel obstruction
- X serious problems with physical health including organ failure.



The National Institute for Health and Care Excellence (NICE) sets guidelines on how medication should be used for people with a learning disability, autism or both.





- From April 2019
- Open cases only
- Initially one GP practice in each area
- Behaviour Problem Inventory [BPI] & QOL tool
- Rag rating- Red, Amber & Green
- Prioritizing and Clinic
- Place plans



## **Avoiding inappropriate medication is important for a number of reasons:**

- **It doesn't address the underlying cause**
- **Reliance**
- **Detrimental to a persons quality of life**
- **Can be life threatening**
- **Restrictive practice**
- **A quick fix rather than the right fix**



## **What is challenging behaviour?**

- Aggression (e.g. hitting, kicking, spitting)
- Self-injury (e.g. head banging, scratching, skin-picking)
- Destruction (e.g. throwing items, ripping clothing)
- Disruptive or stereotyped behaviours (e.g. rocking, stripping, running off)

This behaviour can be stressful, upsetting and impact on the lives of the whole family. It is challenging for the person, family carers and others who support the person.



## What is Positive Behaviour Support(PBS) ?

- ✓ A Person centred values
- ✓ Evidence based.
- ✓ Promotes positive and proactive strategies
- ✓ Inclusion, choice, participation and equal opportunities.

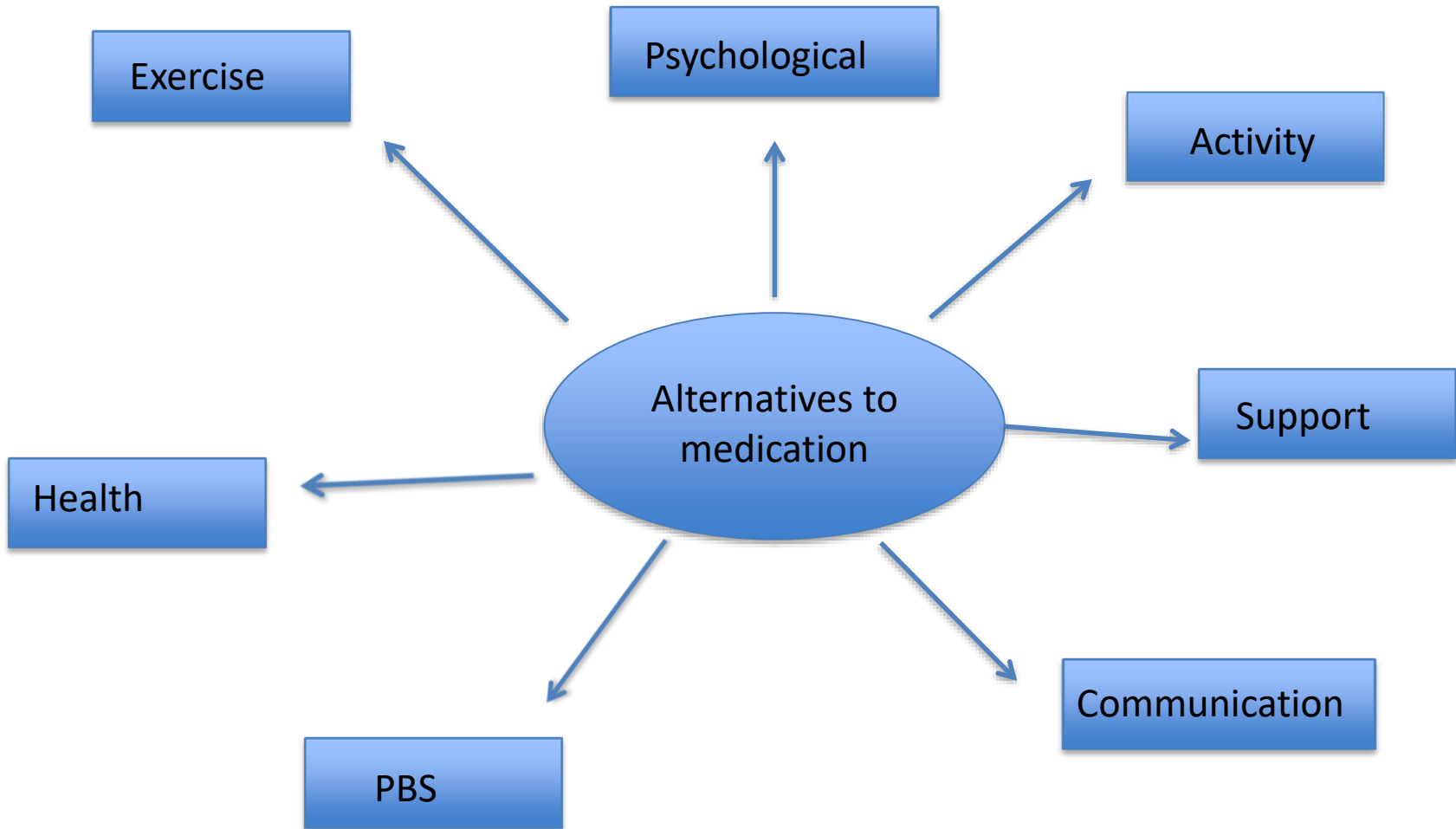
Successful PBS plans are developed in **partnerships** with the person and implemented by those who understand it.



**Medication should not be the only option considered in response to challenging behaviour and should only be used if alternative strategies have not reduced the behaviour.**

**There should be a clear rationale for prescribing the medication.**







## **Advice to family and carers from NHS England**

**Please speak to the person responsible for prescribing these medicines as soon as possible and ask for them to be reviewed.**





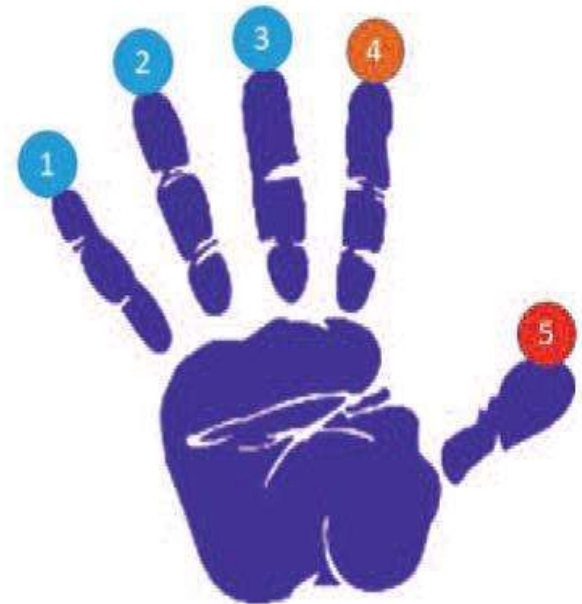
## **Please remember:**

Medicines used to treat mental illness can be very effective in treating some people with learning disabilities when used appropriately.



## Mental Capacity Act 2005 – 5 principles

1. **A presumption of capacity**
  - Start by thinking I **can** make a decision
2. **Individuals supported to make their own decisions**
  - Do all you can to **help** me make a decision
3. **Unwise decisions**
  - You must **not** say I lack capacity just because my decision seems unwise
4. **Best interests**
  - Use a **best interest checklist** for me if I can't make a decision
5. **Less restrictive option**
  - Check the decision made **does not** stop my freedom more than needed



**Before considering if medication can be optimised, has the individual:**

Been spoken to about their medication?

Had a physical health check including recent blood test?

Had a medication review with the professional prescribing the medication?

Had any recordings of concerning behaviour and mood? – including time of day and setting?

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**When a professional suggests medication for your relative, the information they provide should include:**

- Alternative approaches
- What may happen if the medication is not taken
- Any risks or drawbacks to taking the medication, such as side effects or specific health implications



## **Questions to ask if Medication is to be withdrawn**

- How will the medication be withdrawn?
- How long will it take?
- What withdrawal effects could my relative experience?
- What actions should we take to help my relative manage if any of these withdrawal effects occur?
- In what circumstances should the medication be restarted or left at the current dose?



There are a lot of useful resources on the internet. If you have trouble accessing these documents please contact the LD team who will try and support you with accessing the documents.



<http://www.bild.org.uk/capbs/pbsinformation/introduction-to-pbs/>



## Advice and Information

Challenging behaviour foundation (CBF)

[www.challengingbehaviour.org](http://www.challengingbehaviour.org)

Mencap [www.mencap.org.uk](http://www.mencap.org.uk)

National Autistic Society [www.autism.org.uk/helpline](http://www.autism.org.uk/helpline)

[www.england.nhs.uk/stomp](http://www.england.nhs.uk/stomp)

[www.england.nhs.uk/learning-disabilities/stomp](http://www.england.nhs.uk/learning-disabilities/stomp)

[www.bild.org.uk](http://www.bild.org.uk)

[www.easyhealth.org.uk/](http://www.easyhealth.org.uk/)

[www.nice.orh.uk/advice/ktt19](http://www.nice.orh.uk/advice/ktt19)

[www.rcpsych.ac.uk/pdf/FR\\_ID\\_09\\_for\\_wesite.pdf](http://www.rcpsych.ac.uk/pdf/FR_ID_09_for_wesite.pdf)

[www.nice.org.uk/guidance/cg142](http://www.nice.org.uk/guidance/cg142)

