

# THE ROLE OF PRIVATE TREATMENT IN SUBSTANCE MISUSE

A LOOK AT ATTITUDES TO PRIVATE  
TREATMENT COMPARED WITH  
TREATMENT IN THE NHS &  
VOLUNTARY SECTORS



# PERCEPTIONS OF PRIVATE MEDICINE

- Faster access to services for assessment & treatment
- Appointment to suit the patient
- Friendlier atmosphere
- More involvement in decisions
- It must be better – I am paying for this!!



# PERCEPTIONS OF PRIVATE DRUG TREATMENT

- Doctors motivated by money
- Patients are “customers” motivated by greed
- Patients and doctors complicit in over-prescribing.
- Doctors are ‘legal dealers’ putting drugs & heartache on the streets



# WHY???

- Historical evidence e.g. H.O. tribunals & GMC hearings
- Anecdotal evidence of “peculiar” practices
- Stereotypical portrait of the drug user.



# REALITIES OF ETHICAL PRIVATE PRESCRIBING

- Fills gaps in NHS provision:
- Provide flexible hours for the working user
- No waiting list – help when requested
- Can reduce drain on the NHS budget
- Interim pre- NHS treatment
- Stabilised patients returning to work can be transferred
- Occasional need for confidential care.



# HOWEVER.....

- Need high moral and ethical background.
- Workers must be motivated by altruism
- Pay must be seen to be LESS important.



# PRINCIPLES

- Liaison with GP and other providers essential
- Thorough assessment on first approach and in clinic.
- Patient titration.
- Care plans - updated regularly.
- Spending time to effect change.
- Patient-centred treatment.



# HOW??

- Patient-centred approach.
- Harm reduction.
- Motivational work
- Behavioural interventions.
- Multiple counselling skills amongst staff.
- Patients allocated as per their individual needs.



# HOW TO ACHIEVE BEST PRACTICE

- Patients are individuals
- They have individual needs
- They have individual goals.
- They deserve the best.
- Extended hours, flexible appointment times
- Out of hours emergency contact access



# STAFF NEEDS

- Policy Review Board
- Supervision
- Ongoing education/training
- Up to date knowledge of evidence base
- Continual review of performance including statistical data to compare with NHS/Voluntary Sector results
- Positive reinforcement.



# THE VISION

- A service which runs along side the NHS and can help pre- and post-NHS treatment
- A service providing appropriate assessment and titration
- Short, medium and long term care plans
- Strong therapeutic alliances between worker and patient, not interrupted by a rotation of posts as can occur in the NHS
- Addressing underlying issues to prevent relapse.



# ULTIMATELY

- Recognition for all involved that we are NOT legal drug dealers but genuinely want to help patients to come to terms with problems and move on in life with a positive self-esteem, regardless of how long this takes to achieve, not keep patients in the clinic for financial gain – there isn't that much!!

