

Statement of Consideration (SOC)

PPTL 25-06 SOP 4.19 and SOP G1.16. The following comments were received in response to SOP drafts sent for field review. Thanks to those who reviewed and commented. Comments about typographical and grammatical errors are excluded; these errors have been corrected as appropriate.

SOP 4.19 Visitation Agreement

1. Comment: I think requiring only clients to wash hands before a visit is demeaning to SUD clients. This addition perpetuates stigma faced by those with an SUD. If the goal is to prevent the spread of disease along with reduce the risk of accidental exposure shouldn't we also have workers and foster parents wash their hands before handling the child? Regarding accidental exposure, what about items the families bring to the visits? We had a client's child exposed in home due to their use of fentanyl on their child's book. How do we account for these items? What about clients in treatment not in active use and those that have never had a SUD, are we to monitoring their hand hygiene as well? What about their clothing?

Response: The policy states that "all participants" will be required to wash their hands, so there is no concern with singling out anyone who will be involved in the visits.

2. Comment: Rather than blanket a policy towards all clients, particularly clients with an SUD, why not provide this guidance targeted to reducing risks in visitation with parents actively using? Having those parents not bring in outside items to visits and wash their hands prior to visits. Routinely screen the child for exposure through a medical provider

Response: While the greatest risk here is accidental exposure, this policy addresses the need to encourage good hygiene to help prevent the spread of illness as well. Restricting what visitors can bring will reduce the ability for workers to assess the family's ability to provide for the needs of the child.

SOP G1.16 Working with Families Affected by Substance Misuse

No comments