

Joint Statement on the Inappropriate Use of Psychotropic Medicines to Manage the Behaviours of People with Disability and Older People

The Royal Commission into Aged Care Quality and Safety and the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability identified that psychotropic medicines are being misused and overused, particularly with older people and people with disability. Inappropriate use of psychotropic medicines has been recognised as a safety and quality issue in health care.

The use of psychotropic medicines can be appropriate for treating, or enabling the treatment of, a diagnosed mental disorder or a physical illness or physical condition. However, using psychotropic medicines, such as antipsychotics and benzodiazepines, to calm, soothe, sedate or influence or control the behaviour of people who exhibit behaviours of concern is a restrictive practice and is subject to regulatory oversight.

Health, aged care and disability support providers are all required by law to ensure that restrictive practices are only used as a last resort, and in the least restrictive form. Healthcare practitioners and aged care providers also require informed consent for the prescription and use of psychotropic medicines, including when used as a restrictive practice. Regulation in the aged care and disability sectors recognises that it is behaviour support planning and the implementation of behaviour support strategies that will reduce the use of restrictive practices.

Joint work on psychotropic medicines

The Aged Care Quality and Safety Commission (ACQSC), the NDIS Quality and Safeguards Commission (NDIS Commission) and the Australian Commission on Safety and Quality in Health Care (ACSQHC) recognise that there is:

- Evidence that psychotropic medicines are being overprescribed and overused, in particular with older people and people with disability
- Little evidence that psychotropic medicines are effective for managing behaviours of concern
- Evidence that psychotropic medicines contribute to risks of harm to older people and people with disability, including by contributing to risk of falls, weight gain, hypertension and diabetes, by adversely affecting the person's ability to swallow, and by increasing the risk for aspiration pneumonia and other respiratory complications
- Evidence that psychotropic medicines can diminish the wellbeing and quality of life of older people and people with disability.

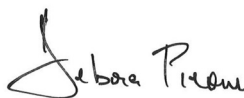
The ACQSC, the NDIS Commission and the ACSQHC have agreed to work together to reduce the inappropriate use of psychotropic medicines through:

- Raising awareness of the risks associated with inappropriate use of psychotropic medicines amongst healthcare, aged care and disability workforces
- Supporting improvements to the availability and quality of behaviour support planning, and preventative and de-escalation strategies
- Strengthening understanding and capacity for appropriate informed consent, prescribing, dispensing, administration and cessation of psychotropic medicines.

By working together with other key individuals and organisations within the health, aged care and disability sectors, to reduce inappropriate use of psychotropic medicines, the ACQSC, the NDIS Commission and the ACSQHC aim to improve the quality and safety of health, aged care and disability supports for all Australians.

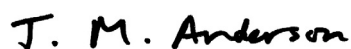
Who we are

- The ACQSC is responsible for regulating the use of restrictive practices, including chemical restraints, in aged care. The ACQSC regulates aged care providers' compliance with their obligations under the Aged Care Act 1997 and the Quality of Care Principles 2014 relating to the use of restrictive practices, including chemical restraints, in residential aged care and short-term restorative care in a residential aged care setting.
- The NDIS Commission is responsible for regulating the use of restrictive practices, including chemical restraints, in the National Disability Insurance Scheme (NDIS). The NDIS Commission is responsible for the providing leadership in the reduction and elimination of the use of restrictive practices, including chemical restraints, by NDIS providers. The NDIS Commission regulates NDIS providers' compliance with their obligations under the National Disability Insurance Scheme Act 2013 and the Rules made under that Act relating to the use of restrictive practices, including chemical restraints, on NDIS participants in the provision of NDIS supports or services.
- The ACSQHC leads and coordinates national improvements in healthcare safety and quality. The ACSQHC sets the National Safety and Quality Health Service Standards, develops clinical care standards, and provides guidance for the healthcare system on improving the quality of care and reducing the risk of harm to consumers receiving health care. The ACSQHC leads and co-ordinates work in specific areas to improve outcomes for patients such as quality use of medicines; variation in practice; and risks associated with prescription, dispensing and administration of psychotropic medicines. The ACSQHC reports on the inappropriate use of antipsychotics through the Australian Atlas of Healthcare Variation series, and provides national clinical guidance on the subject.



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Australian Commission on Safety
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Ms Janet Anderson PSM
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Aged Care Quality and Safety
Commission



Ms Tracy Mackey
Commissioner

NDIS Quality and Safeguards
Commission