

Select Committee on the Provisions of the Public Health Amendment (Registered Nurses in Nursing Homes) Bill 2020 Hearing – 29/03/2021

Question on Notice

Ms CATE FAEHRMANN: I have one question. Just on that and going further, Dementia Australia's submission suggests that one of the results of having the aged care staff who are not appropriately equipped to deal with dementia is potentially the ongoing and increased use of chemical restraint. Is that what is happening?

Ms MISKOVSKI: That is what we hear. Not so much people with dementia but their carers certainly tell us that they see restraint being used because there is a lack of staff. We know there is overuse of, particularly, chemical restraint.

Ms CATE FAEHRMANN: Is it a lack of staff as well as the ability—

Ms MISKOVSKI: I think it is a lack of staff and it is a lack of training.

Ms CATE FAEHRMANN: The lack of training as well.

Ms MISKOVSKI: Yes, it is a lack of staff who understand the residents and how to respond to them. We know that people living with dementia are over-medicated. I think it is something—I do not have the figures in front of me, but I am happy to get them. But we know that antipsychotics to chemically restrain people are widely used in residential aged care, and it is shown that there is very little benefit and there are significant side effects.

Answer

In Australia, one in three aged care residents with dementia are on antipsychotic medications and more than half of aged care residents with dementia experience high sedative load.¹ International data suggests that only 20% of people with dementia derive any benefit from antipsychotic medications.²

¹ Royal Commission into Aged Care Quality and Safety (2020) International and National Quality and Safety Indicators for Aged Care, Research Paper 8

² Peisah C. & Skladzien E. (2014) The use of restraints and psychotropic medications in people with dementia, Alzheimer's Australia Paper 38