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**Minister for Senior Australians and Aged Care
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MEDIA RELEASE

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AGED CARE RESTRAINT REGULATION TO PROTECT SENIOR AUSTRALIANS

Chemical and physical restraint in aged care homes will be better regulated, following extensive examination of this important issue over the past 18 months.

Incidents of over use of physical and chemical restraint will not be tolerated and draft changes to regulations are expected to be released within weeks.

This will build on work already undertaken.

Managing and minimising restraint is already a top priority for the Chief Clinical Adviser at the new Aged Care Quality and Safety Commission, established on 1 January 2019, by the Liberal National Government.

Our Government's new Aged Care Quality Standards – the first upgrade of standards in 20 years – also stipulate best-practice clinical care to minimise the use of chemical and physical restraint.

The new Standards will come into full force on 1 July 2019.

The use of antipsychotic medicines must be a clinical decision made by medical practitioners with the care recipient, and their carer or family involved at all times.

The Department of Health has provided all aged care homes with the *Guiding principles for medication management in residential aged care facilities* to assist managers and staff to practice quality use and safe management of medicines.

The Department has also provided the *Decision-Making Tool Kit - Supporting a restraint free environment in Residential Aged Care* to residential aged care homes. The toolkit emphasises that a restraint-free environment is a basic human right for all care recipients and chemical restraint, such as antipsychotics, should not be implemented until all alternatives are explored.

Our Government has invested \$4.1 million in two separate projects through the University of Tasmania (the RedUSe Project) and the University of New South Wales (the HALT Project) to reduce the use of sedative and antipsychotic medications in residential aged care.

The RedUSE project's Quality Use of Medicines (QUM) strategies achieved a significant reduction in sedative prevalence and a decrease in the average sedative dose aged care facilities.

Knowledge and resources from both projects have been utilised in aged care sector training by Dementia Training Australia.

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