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Is psychoactive medication usage in care homes related to staffing levels?

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Focal points

- Previous research in US nursing homes has highlighted the use of psychoactive medication as chemical restraints
- In this present study 73 per cent of residents in nursing homes were being prescribed psychoactive medication
- Only one in five of these residents had a suitable diagnosis recorded in their medical charts
- Increased nurse staffing levels seemed to be associated with a decreased use of psychoactive prescriptions

Introduction

Psychoactive medicines (hypnotics, anxiolytics, antipsychotics and antidepressants) are frequently prescribed to care homes residents; 11–74 per cent of the residents in United States nursing homes are reported to be prescribed at least one of these drugs.[1] In 1990, the US implemented legislation because it was thought that psychoactive medicines were being used as chemical restraints, in an effort to reduce the need for staff.[2] Additionally, research in the US has shown that certain facility characteristics such as size of the care home or staffing levels influence the use of psychoactive medication.[3]

This present study aimed to determine the psychoactive medication usage in United Kingdom care homes for the elderly, to assess the indications for psychoactive prescribing and to investigate any correlation between facility characteristics and psychoactive prescriptions.

Method

Nineteen care homes across Northern Ireland agreed to participate. Facility characteristics such as size and staffing details were supplied by the manager of the care home. Consent to access charts within the care homes and the GP's surgery was sought from either the resident personally or their next of kin.

Information regarding medication was gathered from the documentation available within the care homes, whereas information regarding the diagnoses was collected from records within the GP surgery or supplied by the GP.

All data were classified according to the BNF (British National Formulary) or ICD-10 (International Statistical Classification of Diseases and Related Health Problems — Tenth Revision) and entered into a Microsoft Access database.

Results

The participating care homes were registered as having 26–82 beds (average 54). The weekly nursing and care assistant hours provided per bed varied from 4.9 to 9.6 hours and 9.0 to 17.2 hours respectively. A total of 794 residents was invited to participate in the research project, and 462 (58.2 per cent) consented. Thirty-four residents died before the medication review, therefore information regarding current medication was collected for 428 residents (103 male and 325 female; mean age 84 years; mean number of medicines prescribed 8.5).

In total 312 (72.8 per cent) residents were being prescribed psychoactive medication (including *pro re nata* drugs). More than 30 per cent of residents were being prescribed hypnotics, antipsychotics and antidepressants, respectively (including *pro re nata* medication). Of all residents prescribed psychoactive medication, only 21 per cent had a suitable diagnosis (according to the BNF) recorded in their medical notes.

The percentage of psychoactive prescriptions within each care home varied from 7.7 to 21.2 per cent. No significant correlation was found between the size of the care home or the number of care assistant hours provided and the percentage of psychoactive prescriptions used in the care home. However, a significant correlation was found between the number of weekly nursing hours provided per bed and the percentage of psychoactive prescriptions used in the care homes (Spearman rank correlation coefficient rs=0.59; P=0.03). Increased nursing hours were associated with a lower percentage of psychoactive prescriptions.

Discussion

Previous researchers have reported prescribing rates for psychoactive medication of around 60 per cent for nursing home residents;[4] therefore the overall prescribing rate for psychoactive medication of 73 per cent is surprisingly high. However, the prescribing rates of hypnotics, antipsychotics and antidepressants are similar to a recent study carried out in nursing homes in Manchester.[5]

The percentage of psychoactive prescriptions used within each care home showed a large variation which may be due to differing case-mix; however, only one in five residents had a suitable diagnosis recorded in their notes.

In line with the findings from US nursing homes,[3] our results showed increased nurse staffing levels were associated with fewer psychoactive prescriptions. This raises the question whether these drugs are possibly being used to reduce the effort needed to care for these residents and thus as substitutes for staff.

References

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