

# **Psychotropic medicines: 2a- Proportion of people with cognitive disability or impairment who were prescribed psychotropic medicine for whom informed consent was obtained and documented**

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# Psychotropic medicines: 2a- Proportion of people with cognitive disability or impairment who were prescribed psychotropic medicine for whom informed consent was obtained and documented

## Identifying and definitional attributes

<b>Metadata item type:</b>	Indicator
<b>Indicator type:</b>	Indicator
<b>Short name:</b>	2a-Proportion of people with cognitive disability or impairment who were prescribed psychotropic medicine for whom informed consent was obtained and documented
<b>METEOR identifier:</b>	791012
<b>Registration status:</b>	<a href="#">Australian Commission on Safety and Quality in Health Care, Standard 09/05/2024</a>
<b>Description:</b>	Proportion of people with cognitive disability or impairment who were prescribed psychotropic medicine for whom informed consent was obtained and documented.
<b>Indicator set:</b>	<a href="#">Psychotropic Medicines in Cognitive Disability or Impairment Clinical Care Standard 2024</a> <a href="#">Australian Commission on Safety and Quality in Health Care, Standard 09/05/2024</a>

## Collection and usage attributes

<b>Computation description:</b>	<p>To be included in the numerator, there must be documentation in the person's healthcare record that confirms the clinician who prescribed the psychotropic medicine obtained informed consent from at least one of:</p> <ul style="list-style-type: none"><li>• The person, if the person has capacity to consent</li><li>• Their nominated decision maker, or</li><li>• The person's parent or guardian.</li></ul> <p>The information provided as a part of the informed consent process must include:</p> <ul style="list-style-type: none"><li>• Reason(s) the medicine is being suggested</li><li>• Intended duration of treatment</li><li>• Alternatives to using the medicine, including not using the medicine, and</li><li>• Potential benefits and risks of different treatment options.</li></ul> <p>The documentation of informed consent may include written consent by way of a sign consent form or notes in the healthcare record to indicate that informed consent has been obtained.</p> <p>Exclude people where a psychotropic medicine was used as a restrictive practice in an emergency. If the person continued to receive psychotropic medicine following the emergency, include the person in the denominator.</p>
<b>Computation:</b>	$(\text{Numerator} \div \text{Denominator}) \times 100$
<b>Numerator:</b>	The number of people in the denominator for whom informed consent for the psychotropic medicine was obtained and documented.
<b>Denominator:</b>	The number of people with cognitive disability or impairment who were prescribed psychotropic medicine.

**Comments:**

Informed consent should be obtained from the person if they have the capacity to make an informed decision independently or with appropriate support.

If the person is assessed to not have the capacity to provide informed consent even with support, then informed consent must be obtained from their nominated decision maker in accordance with the relevant state or territory legislation.

If psychotropic medicines are required in an emergency, as soon as practicable after their use begins, inform the person or their nominated decision-maker about use, and document their use in accordance with the provisions for emergency use outlined in applicable legislation.

## Representational attributes

**Representation class:** Percentage

**Data type:** Real

**Unit of measure:** Service event

**Format:** N[NN]

## Accountability attributes

**Reporting requirements:** Not applicable

**Organisation responsible for providing data:** Not applicable

**Accountability:** Safety and quality monitoring and improvement, as part of the clinical care standard

**Other issues caveats:** Applicable settings: Public and private hospitals, residential aged care services, general practice and other specialist clinics where care is provided to people with cognitive disability or impairment.

This indicator can also be used in Aboriginal Community Controlled Health Services and Aboriginal medical services where appropriate.

**Release date:** 09/05/2024

## Source and reference attributes

**Submitting organisation:** Australian Commission on Safety and Quality in Health Care

**Reference documents:** Australian Commission on Safety and Quality in Health Care. Psychotropic Medicine in Cognitive Disability or Impairment Clinical Care Standard. Sydney: ACSQHC; 2024.