# Stopping over-medication of people with a learning disability, autism or both (STOMP) – A community audit



Dr John Carroll (ST4 Psychiatrist) & Jill Davies (Learning Disability Nurse) Bromley Community Learning Disability Team, Oxleas NHS Foundation Trust

# Background

- The stopping over-medication of people with a learning disability, autism or both (STOMP) campaign was launched in England in 2016.
- It aims to reduce the inappropriate prescribing of psychotropic medication to manage challenging behaviour in the absence of a licenced indication.

### **Aims**

- To demonstrate adherence to national standards within the community learning disability teams (CLDTs) of Oxleas NHS Foundation Trust.
- To complete the audit cycle, comparing adherence in the current audit to that of the previous audit in 2019.

# Methods

- Audit standards were derived from national guidance by the Royal College of Psychiatrists<sup>1</sup> and the National Institute for Health and Care Excellence<sup>2</sup>.
- The population was defined as all patients open to a prescriber (medical or non-medical) from April 2020 March 2021.
- A random sample of 20% of patients from each of the three CLDTs (Bexley, Bromley & Greenwich) was generated.
- A multidisciplinary working group agreed inclusion and exclusion criteria before designing an electronic audit questionnaire.
- Data was collected between October November 2021.

# Results

- Of 111 patient records reviewed, 86 met inclusion criteria.
- 76% (n=65) were prescribed psychotropic medication, of which:
  - 100% (n=65) had response to treatment documented.
  - 86% (n=56) had screening for side effects documented.
  - 85% (n=55) had a medication review within the past 6 months.
  - 78% (n=50) had their capacity to consent to psychotropics documented.
  - 81% (n=42) of those who lacked capacity to consent to psychotropics had a best interests decision documented.
  - 80% (n=52) had been offered non-pharmacological interventions for challenging behaviour.
- All but two standards demonstrated an improvement compared to the 2019 audit (see table 1).

### Table 1 - Adherence to audit standards in 2019 vs 2021.

Audit standard	2019	2021	↑ <b>or</b> ↓
All patients should be assessed for their response to psychotropic medication	91%	100%	<b>↑</b>
All patients should be screened for side effects as part of the psychotropic review	98%	86%	<b>\</b>
All patients on psychotropics should be reviewed at least every 6 months	86%	85%	
All patients should have documented capacity to consent medication	71%	78%	<b>↑</b>
If lacking capacity to consent to, a best interests decision should be documented	41%	81%	<b>↑</b>
Non-pharmacological interventions should be offered for challenging behaviour	79%	80%	<b>↑</b>

### Discussion

- This re-audit demonstrated improved adherence to all but two standards since the previous audit in 2019.
- The worsened adherence to 6-monthly psychotropic reviews and assessment of side effects may be explained by the coinciding covid-19 pandemic, which resulted in:
  - Remote working.
  - Limited staff numbers in consultations.
  - Increased 'did not attend' and cancellation rates.

# Conclusion

- Adherence to most standards improved but only one standard met the 100% target and two standards worsened.
- Dissemination of the findings and an updated action plan are indicated before re-audit in 2023.

### References

- Royal College of Psychiatrists (2016) Psychotropic drug prescribing for people with intellectual disabilities, mental health problems and/or behaviours that challenge: practice guidelines. Faculty of Psychiatry of Intellectual Disability Report [FR/ID/09]. Access: <u>id-fr-id-095701b41885e84150b11ccc989330357c.pdf</u> (<u>rcpsych.ac.uk</u>).
- National Institute for Health and Care Excellence (2015) Challenging behaviour and intellectual disability: prevention and interventions for people with intellectual disability whose behaviour challenges [NG11]. Access: <a href="https://www.nice.org.uk/guidance/ng11">https://www.nice.org.uk/guidance/ng11</a>.

**Acknowledgements** – We would like to thank all staff who contributed to this audit. **Corresponding author** – <u>johncarroll@nhs.net</u>.