

Quality Monitoring Program



Improving Dementia Care

*Strategies for pharmacists
in long-term care facilities to
reduce reliance on pharmacological
approaches to dementia care*

A program of Texas Health and Human Services

Appropriate Use of Antipsychotic Medications

Antipsychotic medications are frequently used in nursing homes, but in elderly residents who have dementia, antipsychotics are appropriate only in a small number of instances. Off-label use of antipsychotics as a chemical restraint for residents with dementia shows mixed results and can increase morbidity and mortality. Because of this, the National Partnership to Improve Dementia Care has established a nationwide goal of reducing the use of antipsychotic medications in nursing home residents. The coalition includes the Centers for Medicare & Medicaid Services (CMS), consumers, advocacy organizations, providers and professional associations.

The Texas Department of Aging and Disability Services (DADS) and the National Partnership are committed to enhancing the quality of life for people with dementia, ensuring excellent care and promoting goal-directed, person-centered care for every nursing home resident.

The Role of the Pharmacist

In long-term care facilities, pharmacists should

- Determine the appropriateness of every dose.
- Assist facility staff in identifying inappropriate antipsychotic use.
- Advocate for improving the residents' quality of care.

Pharmacists are a valuable resource for physicians. By adhering to long-term care facility regulations, pharmacists can help nursing facility staff evaluate the use of antipsychotics and identify unnecessary use. In addition, by emphasizing the treatment of dementia with non-pharmacological approaches, they can reduce the use of potentially harmful medications in nursing homes and other care settings.



Pharmacists evaluate and coordinate all aspects of pharmaceutical services provided to residents by all providers (e.g., pharmacy, prescription drug plan, prescribers). In this role, pharmacists also promote safe, effective medication use by alerting facility staff to excessive or prolonged dosages, inadequate monitoring or indications, and adverse conditions or consequences indicating that dosages need to be reduced or discontinued.

How Pharmacists Can Improve Dementia Care

- Partner with medical directors and prescribers to continually evaluate the outcomes of drug therapy.
- Evaluate every dose.
- Promote gradual dosage reduction (GDR) when appropriate.
- Encourage documentation of the specific condition and the targeted behavior for the antipsychotic.
- Encourage and review behavioral and side effect monitoring.
- Challenge the facility to increase implementation of non-drug interventions.
- If there is no evidence for an intervention or approach, speak up!

Non-Drug Therapy Works

Reducing antipsychotics in nursing homes starts with identifying why antipsychotics are used. Residents with dementia often have difficulty communicating what they need. By assessing the resident's needs, nursing homes can develop non-pharmacological alternatives for them. DADS initiatives such as Music and Memory and Reminiscence Activity have already improved the quality of life for many residents. By providing non-drug therapies and focusing on person-centered care, nursing home staff can gradually reduce the use of antipsychotics.

Good dementia care is everyone's business; the time is now!



[***www.bit.ly/qmp-antipsychotic***](http://www.bit.ly/qmp-antipsychotic)

Visit the Appropriate Use of Antipsychotic Medications page for links to the following resources:

DADS Initiatives:

- MUSIC & MEMORYSM
- One a Month Campaign for Reducing Antipsychotic Use
- Texas Reducing Antipsychotics in Nursing Homes (T.R.A.I.N.)

CMS Resources:

- National Partnership to Improve Dementia Care in Nursing Homes
- Hand in Hand: CMS Dementia Care Toolkit
- Survey and Certification letters
- Web-Based Surveyor Training: Improving Dementia Care and Reducing Unnecessary Antipsychotic Medications in Nursing Homes
- Adverse Drug Event Trigger Tool

Know the Nursing Facility Regulations*

- F-329 Unnecessary Medications:** Each resident's drug regimen must be free from unnecessary drugs. Each resident's medication regimen must be managed and monitored to achieve the resident's highest practicable mental, physical and psychosocial well-being, as identified by the resident or representative(s) in collaboration with the attending physician and facility staff.
- F-279 Care Planning:** The facility must develop a comprehensive care plan for each resident that includes measurable objectives and timetables to meet the resident's medical, nursing, and mental and psychosocial needs as identified in the comprehensive assessment.
- F-428 Medication Regimen Review:** Each resident's medication regimen must be reviewed monthly by a licensed pharmacist. The pharmacist must report irregularities to the physician and director of nurses. These reports must be acted upon. The pharmacist evaluates the effects of the medications and considers continuing, reducing, discontinuing or changing.
- F-333 Significant Medication Errors:** The facility must ensure that residents are free of any significant medication errors.
- F-425 Pharmacy Services:** A facility must provide pharmaceutical services (including procedures that assure the accurate acquiring, receiving, dispensing, and administering of all drugs and biologicals) to meet the needs of the residents.
- F-431 Controlled Substances and Labeling/Storage of Drugs and Biologicals:** Drugs and biologicals used in the facility must be labeled in accordance with currently accepted professional principles and include the appropriate accessory and cautionary instructions, and the expiration date when applicable.

* Centers for Medicare & Medicaid Services State Operations Manual
For more information related to Regulations visit:
www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_itcf.pdf

The Quality Monitoring Program (QMP)

Quality monitors help detect conditions in Texas nursing homes that could be detrimental to the health, safety and welfare of residents. Quality monitors do not cite deficient practices and are not a part of the DADS Regulatory Program.

During visits, a pharmacist quality monitor may:

- Recommend changes to policies or procedures.
- Conduct staff in-service training.
- Offer technical assistance.
- Educate staff about evidence-based best practices.

QMP resources for long-term care facility staff include handouts, guidance documents, videos, links, archived webinars, and training modules on:

- Alzheimer's disease and dementia care
- Appropriate use of antipsychotic medications

Questions?

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*Be sure to follow the Texas Nursing Facility
Quality Improvement Coalition on Facebook.*