



Use Medications Appropriately

Consumer Fact Sheet

Advancing Excellence in America's Nursing Homes is a national campaign that began in September 2006. Our goal is to improve the quality of care and life for the 1.5 million people served by nursing homes in the United States. Nursing homes and their staff, along with residents and their families and consumers can join in this effort by working on the campaign goals that are designed to improve quality. We do this by providing tools and resources to help nursing homes achieve their quality improvement goals. To learn more about the campaign, visit www.nhqualitycampaign.org.

At Advancing Excellence, we are here to support families and others who may be more likely to read this fact sheet than the resident, themselves. However, it is the resident's well-being and dignity we are most concerned with. That is the focus of this fact sheet. This fact sheet is about avoiding the unnecessary use of antipsychotics.

What are antipsychotic medicines?

- They are medications that may change thinking and actions.
- They change how the brain works.
- Mostly, they are used for serious mental illnesses, such as schizophrenia or bipolar disorder
- Some examples are: risperidone (Risperidol), quetiapine (Seroquel) and haloperidol (Haldol)

What are some benefits and risks of antipsychotic medications?

- If you have a serious mental illness, these medications may help you:
 - Think more clearly.
 - Be less upset.
 - Be better able to take part in daily life.
- They may cause you to:
 - Be sleepy or more confused.
 - Gain or lose weight.
 - Have higher blood sugar.
 - Be at higher risk of falls.
- Antipsychotic medications are **not** approved to treat people with Alzheimer's disease and other dementias. They may raise the risk of death from heart attack and stroke.

What do you and your family need to know about antipsychotics?

- "The use of chemical restraints is prohibited by federal law and violates a resident's right to receive care and services to attain or maintain his/her highest practicable physical, mental and social well-being."
- This means when misused, such medications may cause more harm than good. Misuse can be using medications to stop a behavior without finding the cause. Using medications to stop behavior is a form of chemical restraint. This is against the law.

When might Antipsychotic medicine use be unnecessary?

- When you don't have a serious mental illness.
- When antipsychotics are only used for behaviors such as:
 - walking about or looking for a way out;
 - trouble sleeping;
 - yelling at other people;
 - saying no to care;
 - calling for help or saying the same thing over and over,
- When used for a long time without a proper review.
- When prescribed only to calm a person who is upset or hostile.

When should you and your family worry about the unnecessary use of antipsychotics?

- When you are given an antipsychotic to stop behaviors without finding a cause.
- When you have side effects or complications after using the medicine.
- When you have not been given a clear reason for using this medicine.
- When the medicine is used for a while without trying to lower the dose or stop it.

What if you or your family member is now getting an antipsychotic medicine?

- Doctors and staff should talk with you when antipsychotics are used or considered. They should tell you and your family about:
 - The benefits and risks of such medications;
 - What might happen if such medications are not prescribed?
 - Other things that might be done along with or instead of medications.
 - How to decide if the medicine is working.
 - How you will be watched for side effects.
 - How they will try to stop or lower the medicine dose from time to time.
- When medications aren't helping your quality of life, doctors and staff should seek other options.

What kinds of good care can help avoid unnecessary use of antipsychotic medications?

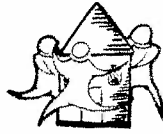
- Good care is making sure that any medicine used meets your needs.
- Good care means having well-trained caregivers who:
 - See and help with health problems that can cause upset, like pain and infection.
 - Know you well so they can help with your basic needs. These are things like fluids, food, and help in the bathroom.
 - Make sure you get plenty of rest, company, activity and help with pain.
 - Help you to do the things you enjoy.
 - Try to cut down on noise, especially at night.

How can you or your family help to avoid unnecessary use of antipsychotic medications?

- Talk with the doctor about why such medications are used.
- Ask about and go to care plan meetings.
- Help staff plan care to keep you strong, busy and moving safely.
- Your family can help with the "personal touch" by things like:
 - Memory books;
 - Phone calls;
 - Visits;
 - Outings;
 - Sharing what makes you happy or upset.
- Ask to have the same caregivers most of the time. This is called Consistent Assignment.

Get more facts and support about antipsychotic use

Nursing Home Compare	Search for information on your nursing home, such as how many residents are given these kinds of medications. If the nursing home's rate is higher than average, ask why. (Select your nursing home; click on Quality Measures to see the rate.)	www.medicare.gov/NursingHomeCompare/
Maine Long-Term Care Ombudsman	Advocates for nursing home residents. Call if you have questions or concerns about the use of antipsychotic drugs, quality of care, quality of life and or residents rights	www.maineombudsman.org , email MLTCOP@MaineOmbudsman.org 1-800-499-0229
Dept of Health and Human Services, Division of Licensing and Regulatory Services	If antipsychotic medications are misused despite your efforts, you may file a complaint with the State Survey Agency.	1-800-383-2441
Advancing Excellence in America's Nursing Homes	Many online resources available. Encourage the home to take part in the Advancing Excellence Campaign and make use of the tools and resources on the website.	www.nhqualitycampaign.org



Maine
Culture Change Coalition
LOCAL AREA NETWORK OF EXCELLENCE (LANE)



Maine Partnership to Improve Dementia Care in Nursing Homes *February 2015 Update*

In July 2012, the Maine Culture Change Coalition/LANE, the Maine Long-Term Care Ombudsman Program and the Maine Health Care Association joined forces to lead the statewide Partnership to Improve Dementia Care in Nursing Homes. The goal of the Partnership is to provide education and support to all 107 nursing homes across the state as they provide care to residents with dementia. 57% of residents in Maine nursing homes have dementia. The Partnership is assisting nursing homes by providing inspiration and supporting them in reducing the use of antipsychotic medications. This has generated savings while promoting best practices.

The Centers for Medicare and Medicaid Services (CMS) set a national goal to reduce the use of antipsychotic medications by 15% for residents living in nursing homes with dementia. Q 3 2014 data shows that **Maine is the third most improved state in the country achieving a 29.9% reduction, well exceeding the CMS initial target of a 15% reduction – a true accomplishment considering the high percentage of Maine nursing home residents with dementia.**

The Partnership has been pleased to support nursing home staff in the following ways:

- Provided a statewide training to kick off the Initiative with Dr. Susan Wehry, Geriatric Psychiatrist as keynote.
- Developed a consumer fact sheet for family members distributed by Ombudsman staff and volunteers, Maine Health Care Association, Maine Culture Change Coalition/LANE and Partnership members.
- Co-sponsored direct care staff training developed by the Northeast Health Care Quality Foundation called “Moving Towards Person Directed Dementia Care”. Trainings were held in Bangor, Bar Harbor, Caribou, Lewiston, Machias, Rumford, Scarborough, and Waterville. Over 200 direct care staff attended these day-long trainings.
- Supported the Northeast Health Care Quality Foundation’s “Train the Trainer” program for “Moving Towards Person Directed Dementia Care”. Five Ombudsman Volunteers completed the “Train the Trainer” so that they can provide training for direct care staff.
- Supported the Maine Health Care Association’s conference featuring nationally recognized expert, Dr. G. Allen Power, board certified internist and geriatrician, clinical associate professor of medicine at the University of Rochester and a Fellow of the American College of Physicians/American Society of Internal Medicine. Approximately 100 individuals attended including nursing home staff and over 20 Division of Licensing & Regulatory Services Surveyors.

- The Ombudsman Program, the Maine Health Care Association and the Culture Change Coalition/LANE sponsored an annual workshop for the Partnership to reflect upon the past year and develop goals for the New Year.

Partnership goals for the year ahead:

- Provide education for physicians regarding the Initiative to improve dementia care and reduce the use of unnecessary antipsychotic medications. Dr. Jabbar Fazeli, fellowship trained and board certified in geriatric medicine will be a presenter.
- Network with hospitals and primary care practices to establish outreach to physicians across the health care continuum.
- Raise awareness of the value of life stories, explore various models and identify effective approaches for direct caregivers to incorporate life stories to promote individualized care.
- Develop a proposal for reinvestment of savings from reduced antipsychotic medication use to benefit nursing homes in continued efforts to improve dementia care.
- Continue training for direct care staff.

Coalition members: Maine Culture Change Coalition/LANE, Maine Health Care Association, Maine Long Term Care Ombudsman Program, Northeast Health Care Quality Foundation, American Medical Directors Association/Maine Medical Directors Association, Maine Alzheimer's Association, DHHS Division of Licensing and Regulatory Services, Office of Aging and Disability Services, Continuum Health Services, First Atlantic Corporation, Genesis HealthCare – Sedgewood Commons, Greenwood Center, Lakewood, Maine General – Glenridge Living Community and Gray Birch, Maine Health, Maine Veterans' Homes, Mount St. Joseph, National Health Care Associates – Winship Green, North Country Associates, Rumford Community Home, Varney Crossing, Woodlands Senior Living – Cape Memory Care.

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