



The New Brunswick Appropriate Use of Antipsychotics (NB-AUA) Collaborative

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About Loch Lomond Villa

Enriching Life's Journey

Our Mission: Loch Lomond Villa provides caring living environments for adults in need of support.

Our Vision: Loch Lomond Villa is an inclusive, resident-centered community, that encourages dreams, friendship and living with purpose.

Our Values: Compassion- Respect – Excellence - Safety

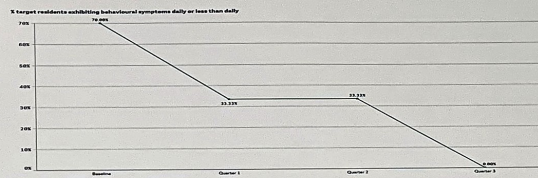
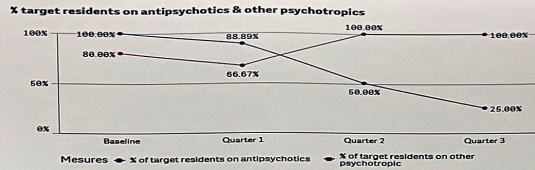
AUA Aims & Spread Goals

- Aim 1:** Improve the quality of life and safety of our residents through discontinuation of the inappropriate use of antipsychotic medications by 30% along with a reduction in dosage of 20% by April, 2018.
- Aim 2:** To become a centre of excellence in appropriate prescribing and spread knowledge to other nursing homes, hospitals, physician groups, nursing groups & seniors advocacy groups.
- Aim 3:** Improve admission process to include antipsychotic medication reduction plans upon admission, if deemed appropriate from medication reconciliation and initial care planning meeting. Candidates for reduction will be identified in part through conversations with the resident and/or substitute decision maker upon admission.

Our Spread Plan: Our approach has been to implement house by house in six of the seven houses beginning in September, 2016 and commencing until approximately January, 2018. The initiative will exclude the 20-bed psychogeriatric house.

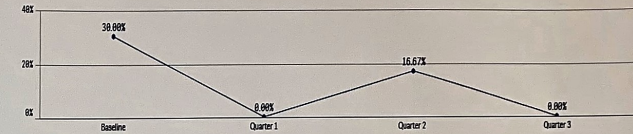


Dementia Care and Appropriate Use of Antipsychotics Outcomes

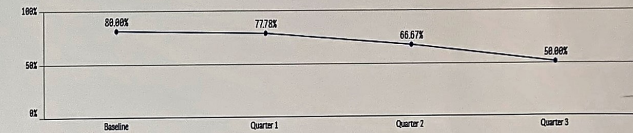


Quarter	Q	# of Target Residents	# Prescribed Antipsychotics	# Prescribed Other Psychotropics	# Exhibiting Behavioural Symptoms
Baseline		10	10	8	7
Quarter 1		9	8	6	3
Quarter 2		6	3	6	2
Quarter 3		4	1	4	0

% Target residents who fell in the past 30 days



% Target residents in physical restraints daily or less than daily



Quarter	Q	# of Target Residents	# Physical Restraints	# Falls
Baseline		10	8	3
Quarter 1		9	7	0
Quarter 2		6	4	1
Quarter 3		4	2	0

"IT TAKES A VILLAGE"



Quality Improvement Approach

Communication and engagement, through staff meetings, town halls, electronic family boards, letters to families & family meetings, web postings, storyboards, stories from front line staff to be shared with the Board.

Education of the staff in person centered approaches (U-First, how to effectively run huddles, Dementia PET modules, other tools) Huddles for care planning and transfer of knowledge Partnership with recreation to develop tools (sensory carts, rummage bags, etc.)

Care Partner Program - We believe Care Partners, those loved ones closest to the resident, are vital and responsible members of the care team. Involvement in the Care Partner Program improves quality care by participation in communication, education, physical, emotional and spiritual support of the resident. Staff consistency: full time staff are devoted to a dedicated shift & resident assignment. Assignments are developed with staff, resident and family input. This process leads to greater resident and family satisfaction, and improved staff engagement. The staff member and the resident make a lasting connection and stronger relationships are built, improving care and outcomes.

Staff Culture and Care Experience

Changes in staff experience and/or culture

- ✓ Identification of family as "Care Partners"
- ✓ Implementation of consistent staffing approach
- ✓ Improved communication through daily huddles
- ✓ Beginning to break the mold! Nurses and care teams ask: What is the resident trying to tell us? What can we do differently? Who can help us solve this?



Earl's Story

Before changes were made to Earl's antipsychotic medications the Maple House team found him to be sleepy and not very vocal or social. Since he has been off these medications, it's like he has woken up! He is awake more often, carrying on conversations with the staff, happier, and is now moving about with his wheelchair about the House. Eliminating Earl's antipsychotic has definitely made a positive change in his quality of life!



Sustaining Gains and Spread

To Sustain Improvements Beyond the Duration of the NB-AUA Collaborative, we have a plan to:

- Adopt a policy statement on our commitment to reduce the use of antipsychotic drugs in favor of person centered approaches to care.
- Implement a tool for the medical team to document antipsychotic med reduction to improve communication to families and the interdisciplinary team so appropriate tools and strategies can be implemented to sustain the reduction.
- Make improvements to our current UFirst Approaches to Care training program

Improvement Advice: Strategies & Tools

- Include as many people as possible and talk about it at every meeting, every opportunity you get - MAC, Family Meetings, Family welcome, Staff meetings, Board meetings
- Tap into the tools you already have!
- Staff and families know this is not a "Project" but a permanent shift in how we provide care.