

**Reducing the Use of Antipsychotics  
in NWO Skilled Nursing Facilities  
First Quarter 2019 Progress Report to the Ohio  
Department of Medicaid \**

Timeframe: January 1, 2019 through March 31, 2019

The first quarter of 2019 of the KTL (Keys to Living) project continued stable. This quarter contained the third and final face to face educational session in March. The "bell-curve" of facility activity and adoption of the project goals is becoming more and more clear. The facilities that are succeeding are very impressive while those few that are struggling with commitment have decided to do very little. We continue to communicate with all and will be continuing to report all activities. Considering that this project has now been in place for 25 months, the number of facilities that are making a difference is impressive. The hope is that with that amount of time invested and positive results realized the project will continue beyond the end of the funded grant project for a majority of the facilities. During the time period from January 1st through March 31st the following activities occurred:

1. During each visit the consultants review the components available to the facility with a review of the components that are being utilized, those that could be more effective and those that have not been utilized as of yet to assure they are aware of all components and know how to increase implementation. Each facility voices awareness of all components and do explain their rationale for their selections. Of course it is our goal that they give all components a "go" but we also understand if the component is to continue after the grant is completed, it has to be a component they value. The consultants stand ready to assist them as they wish to try yet one more of the more than 18 components.

2. Barbara Brock continues to provide one-on-one technical assistance to participants as they learn more and more about administering, scoring and utilizing the RCCT assessment data directly as an integral part of resident care planning. After participants have been administering the RCCT for over one (2) years, they are increasing their comfort with the assessment and the inclusion of the finding in their care planning. Barbara's focus on how the RCCT results can be utilized by a wide variety of facility staff is yielding positive results according to the verbal expression by participants they have chosen to utilize her approach.
3. The Final Education Conference was held in March. Seventy-nine percent of the eligible participants were in attendance. Unfortunately 20% of those participants that agreed to attend did not attend. Facility activity such as survey in the building and sickness made it impossible for all to attend. Materials were delivered to and reviewed with those participants by the MCC consultants during second quarter visits.
4. The facilities that reactivated in October are moving quickly. It is interesting to note their lack of antipsychotic medication reductions as related to reductions realized by those facilities that have been active over the entire project. These numbers will be carefully evaluated during the final project report in June.
5. The grid on page 4 continues to reflect progress. There is a consistent increase in all number components such as the numbers of residents in the project, the number of RCCT assessments completed, photo book and chatter bag utilization as non-pharmacological interventions. The increases are not large at this point since many facilities continue to focus on residents admitted to their memory care units. In many cases that population is stable.

6. The monitoring of the number of residents admitted with antipsychotic medications continues. The number of residents admitted without an antipsychotic medication continued to increase over those admitted with an antipsychotic. It is obvious that focus is on this issue and with focus comes action. This aspect will continue to be closely monitored.
  
7. The weakest aspect of the medication monitoring component continues to be a small number of residents that have an antipsychotic medication order prior to admission that is evaluated and dropped prior to admission. Although the consultants continue to ask the admission staff at each facility to simply ask the questions provided in the 4th Quarter Report, the staff are in some cases reluctant to ask, in some cases they ask but don't utilize the data and most concerning is the continued number of social workers and nurses who don't see this step as a part of their responsibility. The facilities that have adopted those assessment components have seen drastic results. Discussion with the admission staff in those facilities reveals confidence in their knowledge coupled with a partnership approach between the admitting institution staff and the facility staff. The lack of this critical thinking step is the primary reason for the lack of success.
  
8. It is interesting to see facility management's concern about the drive by CMS to effect a reduction in the use of antipsychotic medications yet the continued lack of initiative to be a partner in making that happen. This is true whether it is the pre-admission assessment, the utilization of non-pharmacological interventions or working with the facility medical director to work with individual physicians that continue to order these meds. This occurs even when prescribing physicians tell the facility staff that they don't know non-pharmacological interventions and will default to the ordering of antipsychotic medications when asked to manage a behavior.

9. At the risk of being redundant, the resident and family stories that have been shared demonstrate the value of knowing the resident as a person coupled with knowing their CFA (Cognitive Functional Age). To see the “AHA” moment in the eyes of the facility staff members, both participants as well as other staff that are a part of the team, is truly gratifying and supports the value of this project.

MASTER AGGREGATE DATA FILE 1ST QTR 2019

COMPONENTS-ALL FACILITIES INVOLVEMENT	33 FAC
FACILITY MED DIRECTOR INFORMED AND SUPPORTIVE - OF ALL FACILITIES	85%
PROJECT ANNOUNCEMENT COMPLETED & SHARED - OF ALL FACILITIES	55%
POLICY CREATED - OF ALL FACILITIES	18%
STAFF EDUCATION - OF ALL FACILITIES	76%
FAMILY EDUCATION - OF ALL FACILITIES	61%
CHATTER BAGS - OF ALL FACILITIES	79%
QUESTION OF THE WEEK - OF ALL FACILITIES	55%
RESIDENTS IN PROJECT 4/1/17 TO PRESENT Text	1167
RCCT ASSESSMENT COMPLETED AND SHARED 4/1/17 TO PRESENT	876
“I WAS THINKING” BOOK COMPLETED 4/1/17 TO PRESENT	463
ADMISSIONS WITHOUT ANTIPSYCHOTIC 4/1/17 TO PRESENT	2280
ADMISSIONS WITH ANTIPSYCHOTIC ORDER BUT DROPPED 4/1/17 TO PRESENT	71
ADMISSIONS WITH ANTIPSYCHOTIC MED ORDER IN PLACE 4/1/17 TO PRESENT	846
NUMBER OF RESIDENTS WITH A GDR IN PLACE 4/1/17 TO PRESENT	904
PHOTO BOOK OR PAGES COMPLETED 4/1/17 TO PRESENT	276