



# Appropriate Use of Antipsychotics (AUA) in Long Term Care

## Project Bulletin

The AUA Project supports care teams to reduce inappropriate use of antipsychotics. Since we began a provincial roll-out almost 2 years ago, LTC antipsychotic use has dropped dramatically to **18.3%, the lowest in Canada!** LTC cultures are being transformed: this bulletin includes inspiring stories of improved sleep and brilliant person-centred strategies from Alberta LTCs!

The spring AUA workshops focused on **delirium risk reduction** related to problematic polypharmacy, dehydration, malnutrition, stress and infection. Delirium resources can be found on the AUA Toolkit: [Google AUA Toolkit](#), or go to <http://www.albertahealthservices.ca/scns/auatoolkit.aspx>

### They're waking up!

Extencare Holyrood and the AUA Project were featured in [Global News Edmonton March 15](#) and [Global National March 19!](#)

### Inside this issue

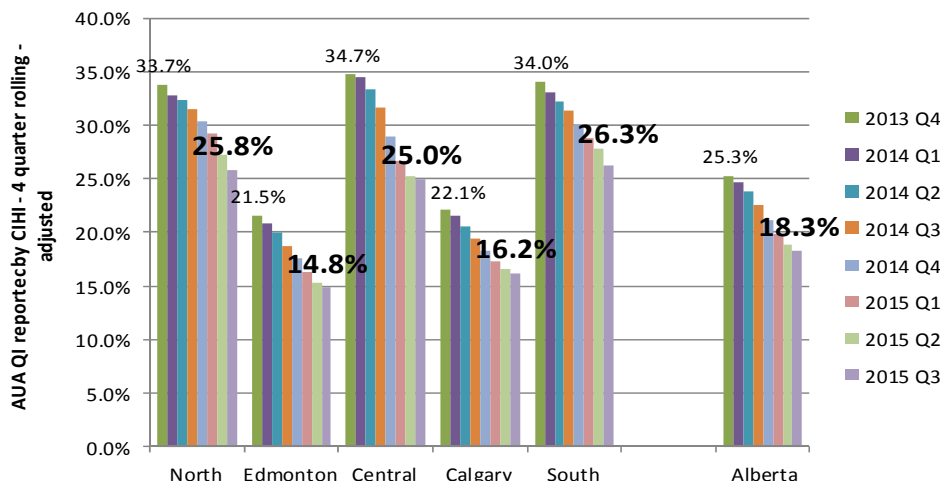
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### AUA Toolkit Facelift

The AUA Toolkit is being streamlined to make it easier for you to find what you're looking for:

- Education Resources—for busy educators and staff: videos, helpful links and tip sheets
- Meaningful Activities
- Dementia Friendly Environments
- Quality Improvement resources
- Resources to support families

**AUA for Alberta average Q3 2014-15**



## Positive Energy is Contagious!

Many sites work with volunteers, students and community organizations to make positive changes.

**A student placement** is implementing the sleep strategy at **Capital Care Lynwood**.

**Sobeys donates unpurchased flowers** to **Rivercrest Care Centre**. Residents help arrange them to brighten up the dining room.

**High River LTC volunteers** assist residents to the dining room and visit with them while they wait for meals.

**Carmelle, a Willow Creek Care Centre volunteer**, set up their **music and memory program**, with personalized playlists on I-pod Shuffles.

## A Good Night's Sleep in Long Term Care



Many LTC teams have successfully improved resident night time sleep—and in the process, reduced falls and made night workload manageable!

**Father Lacombe Care Centre:** Before the changes, staff disturbed sleep of 35 of 56 residents every night for scheduled care. Working together, they've improved resident sleep:

- The wound care nurse reduced the list of those requiring night time repositioning or continence care to just 16 residents.
- The pharmacist listed residents with sedatives to review (just 2!)
- Staff received sleep education using AUA Toolkit resources.
- Staff reorganized duties on all shifts (e.g. restocking, tidying and audits) to keep nights quiet.
- Evening staff planned routines around resident needs.
- Information was posted for families, the Medical Director was notified.
- Housekeeping was involved, as there would potentially be more mattresses to clean.
- The Tena Rep did in-services to ensure the right product was being used for each resident, and evening staff were encouraged to apply the product later in the evening.
- The unit clerk put together a form for day shift HCAs to track odour, mood, product type/colour, whether a full bed change occurred versus only the soaker pad, wet PJ's and change in skin condition. They wanted to ensure there weren't increased wounds or unintended consequences related to improved sleep at night.
- They purchased dual colour red light LED flashlights at Canadian Tire for \$15.



**Outcomes:** Residents sleep better, are more awake in the morning, more cooperative with care and are in a better mood!

**Willow Creek Care Centre** night staff wear pajamas and housecoats on night shift to provide visual cues to residents it's time to sleep!

**Riverview Care Centre** has decreased excess noise from bed alarms by using mats that only alarm when the resident gets out of bed.

## [ 50% Fewer Falls and Better Sleep! ]

**Bethany Airdrie** used to wake 60% of residents for scheduled care. Now only 16% receive scheduled care; the rest are assisted as they wake. On the last evening round, staff wedge a pillow behind residents needing repositioning, and gently remove it on the first night round to offload pressure points. Staff recognized most of the night noise was staff talking—now they whisper. Night staff are now able to provide 1:1 attention to residents who are awake, and assist them back to bed when they're ready. The unit is noticeably calmer, especially at night!

**Bethany Harvest Hills** changed mealtimes to support sleep. A continental breakfast with oatmeal in a crockpot allows residents to sleep in. Lunch is served earlier to allow for afternoon rest period. Residents who have trouble sleeping at night have a shorter rest period, and afternoon activities begin at 1430. Volunteers provide evening activities between 1800—2000. Residents who used to wake up at 0400 are now sleeping longer.

**Beverly Centre Lake Midnapore** identified 20 people who were up at night. They reviewed their medications and diagnoses, adjusted incontinence products, provided afternoon quiet time and quiet evening activities. They opened the dining room for those who don't like to rest in the afternoon.

**St Thomas Supportive Living** and **Taber LTC** use baby monitors to quietly monitor resident safety at night.

**Citadel Care Centre** was strategic with those previously receiving night time continence care—fleece pajamas, later bed times, increased fluids in the day and less in the evening has helped to reduce the need for night time sleep disruption.

*A resident was up all night, wandering into others' rooms. She fell asleep in a recliner one evening and we discovered she's slept in a recliner for the past 35 years. She now sleeps from 2130—0700.*

**Good Samaritan South Ridge Village**

## Curbside Consultation

Has a responsive behaviour stumped your care team? Submit your case study to [aua@ahs.ca](mailto:aua@ahs.ca) and we'll present it to hands-on staff from across Alberta. It's a fascinating and educational experience for all!



Case studies and suggested solutions are then written up for staff education. You will soon be able to find them on the AUA Toolkit.

**When:** Curbside consultations occur the **3rd Wednesday** of every month from 1400 to 1430. Contact [aua@ahs.ca](mailto:aua@ahs.ca) to be added to the mailing list.

## Strategic Clinical Networks (SCNs) & AUA

The Appropriate Use of Antipsychotics (AUA) project is a provincial project led by the Seniors Health SCN in collaboration with Addiction & Mental Health SCN.

The project is guided by hands-on experts passionate about improving care to older adults.

We're supporting care providers to recognize when to use antipsychotic medications, when to stop using them AND to learn, develop and share more effective strategies!

Other key Seniors Health SCN initiatives include:

- [Dementia Advice Line](#)
- AUA, Supportive Living
- Elder-Friendly Care in Hospitals
- Provincial dementia strategy development

For more information see [Seniors Health SCN](#) on the AHS External Website.

Contact us: [aua@ahs.ca](mailto:aua@ahs.ca)

## Brilliant Solutions in Person-Centred Care

- ◆ **Allen Grey Care Centre** places raindrops on the doors of residents to remind staff to encourage fluids for those who haven't had enough water the previous day.
- ◆ **Shepherd's Care Kensington** has activity corners. Wherever residents wander, there are things to do: read the newspaper, fold laundry...
- ◆ **Westview Care** is replacing their nursing station with a "back porch" that will include refreshments.
- ◆ **Capital Care Grandview** has provided a fat wallet of "Grandview money" to a resident. He purchases snacks in the gift shop with money from his trust account.
- ◆ **Extendicare Eaux Claires** has "go for it" rounds to educate household staff dealing with challenging responsive behaviours. They also have activities such as blueprints for a contractor, a baby station, a tool station and activity walls.
- ◆ **Bow Crest LTC** uses intentional rounding to proactively assess needs using the 4 P's: pain, positioning, potty (need for toileting) and possessions.



- ◆ **Mount Royal LTC** had a resident who hit caregivers as they tried to give him a shower. After much collaboration, they discovered singing to him during the shower was the answer! They have resident photos loaded on iPads, using the [Grey Matters program](#). Residents and staff can enjoy reminiscing about life stories in pictures!
- ◆ **Wentworth Manor** strives to begin every task or medication delivery with personal contact: a smile and a greeting or touch.
- ◆ **Black Diamond** HCAs first attend to resident needs, and fit tasks in when they have time—instead of vice versa.
- ◆ **Coaldale Health Centre** had a resident who yelled and grabbed at staff inappropriately until they recognized his body language—he was having chest pain, confirmed by relief with Nitro spray and an EKG. He is now calm on a Nitro patch!



*For more stories, videos, e-modules, links and quality improvement resources, Google "[AUA Toolkit](#)".*