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Reimagining LTC:
Using Person-Centred Approaches for the Appropriate Use of Antipsychotics

Presenter Disclosure

- Presenters: Neil Drimer, Joanna Burke-Bajaj

- Relationships with financial sponsors:
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  - Consulting Fees: None
  - Patents: None
  - Other: None

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- Formed through the amalgamation of the Canadian Patient Safety Institute (CPSI) and Canadian Foundation for Healthcare Improvement (CFHI)
- Independent not-for-profit funded by Health Canada.

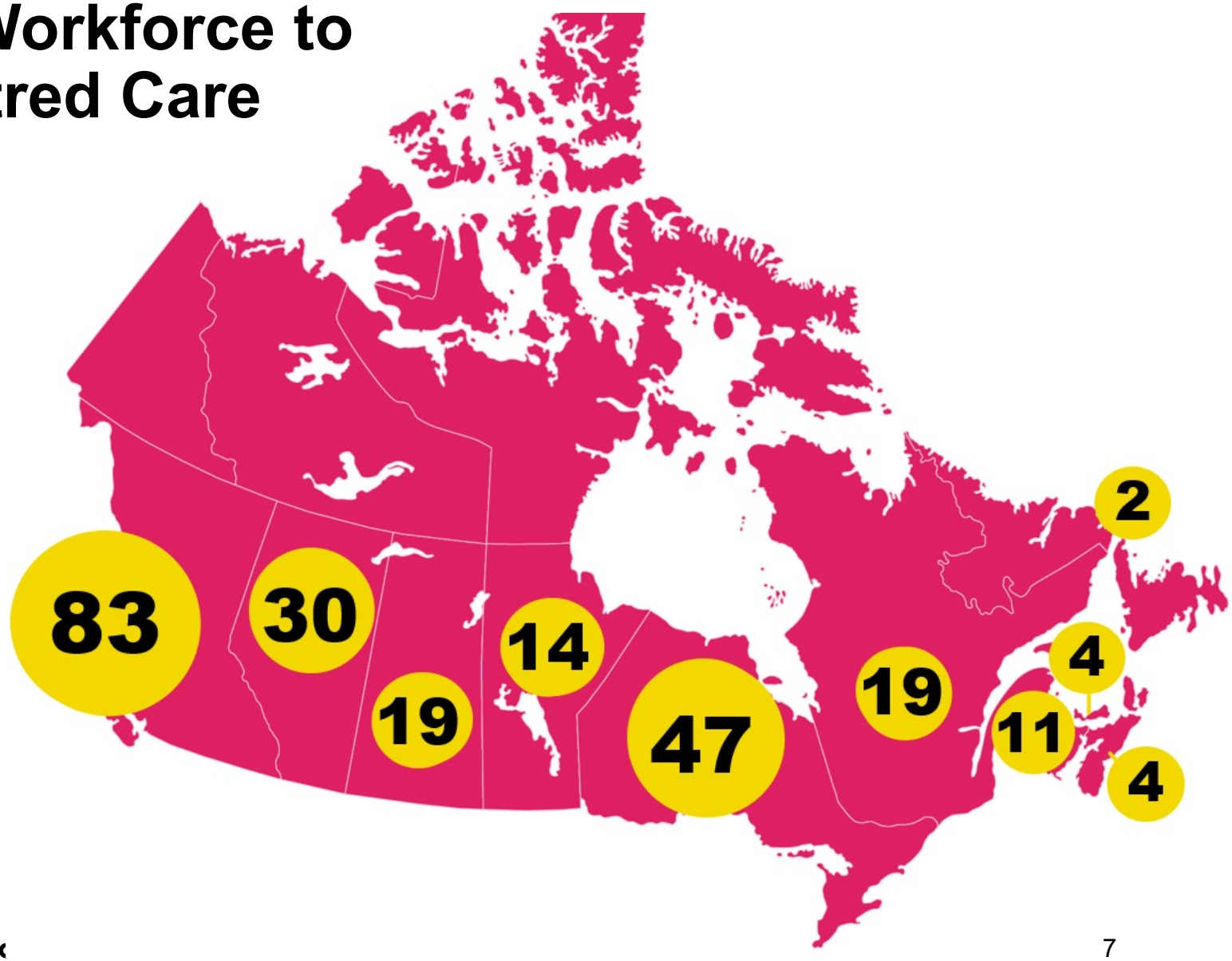
Objectives

1. Learn about the Reimagining LTC program
2. Share results from participating LTC sites with projects focused on AUA
3. Share participant experiences of building quality improvement capacity

Reimagining LTC Program Aims

Reimagining LTC:
Enabling a Healthy Workforce to Provide Person-Centred Care

- More than **230** long-term care homes in all 10 provinces
- HEC partnered with **Health Quality BC** to provide coaching and additional supports to 78 LTC homes in BC focusing on the **appropriate use of antipsychotic medications**



Reimagining LTC Objectives

1. Increase capacity for safety and quality improvement work within long-term care

2. Support long-term care homes to identify, plan and implement changes that will enable a healthy workforce to deliver person-centred care to residents

3. Foster peer-to-peer sharing and learning among long-term care homes across Canada

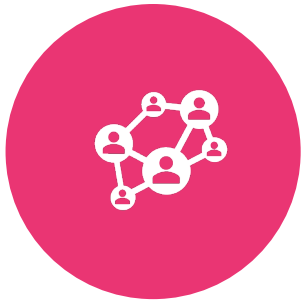
Program Components

Seed funding

Group coaching hubs

QI workshops & Mental health first aid training

Monthly webinars & email bulletins



Peer-to-peer learning

Appropriate Use of Antipsychotics Projects

AUA Project Change Examples

Interventions

- Care Planning
- Timely Medication Reviews
- Care Boards/Door Wraps
- Space Enhancements
- Staff wellness/ appreciation programs
- Care Coach Model
- Sensory Tables

Training & Education

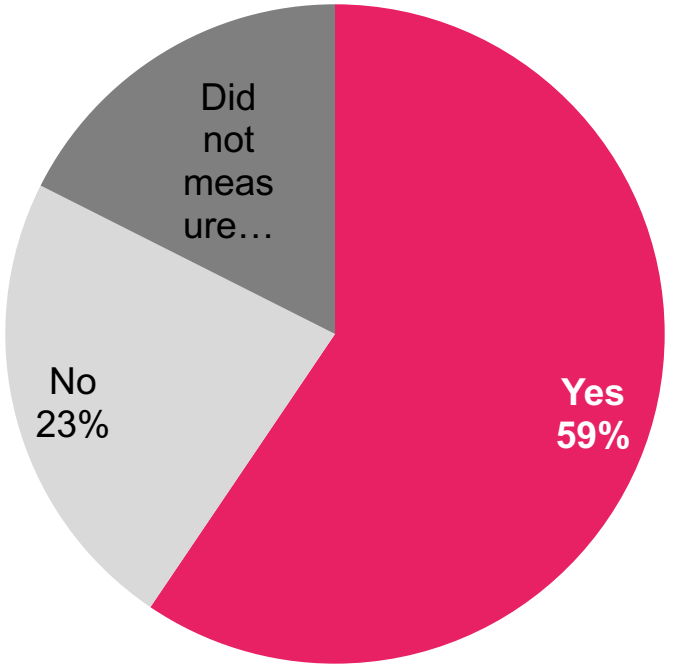
- DementiAbility
- PIECES
- U-FIRST
- Gentle Persuasive Approaches (GPA)
- Eden Philosophy of Care

Overall Program Improvement

AUA Improvement

Over half (59%) of participating homes decreased the percentage of residents taking antipsychotics without a diagnosis, with an average decrease of 7.7% across all homes

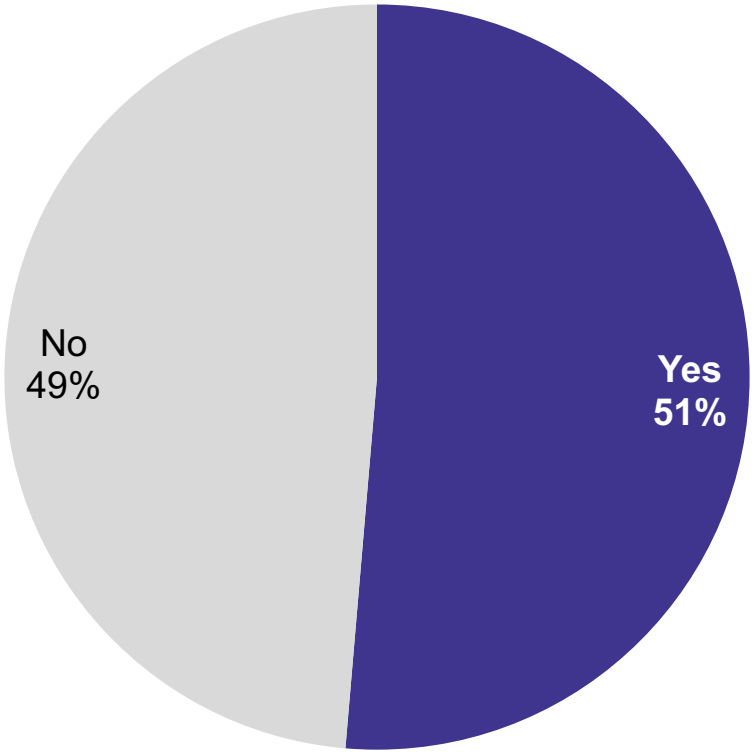
As a result of your project, did you measure a decrease in the percentage of residents on antipsychotics without a diagnosis of psychosis? (n=74)



Program Impacts on Participating Sites

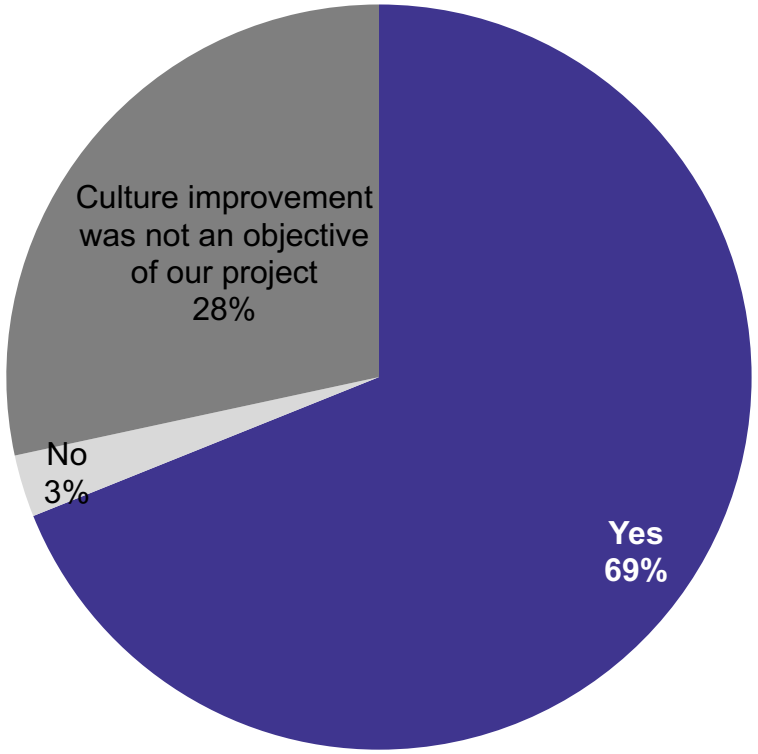
51% developed new relationships through the program

As a result of participating in Reimagining LTC, did your team develop any new relationships with other individuals/organizations (excluding HEC)? (n=74)



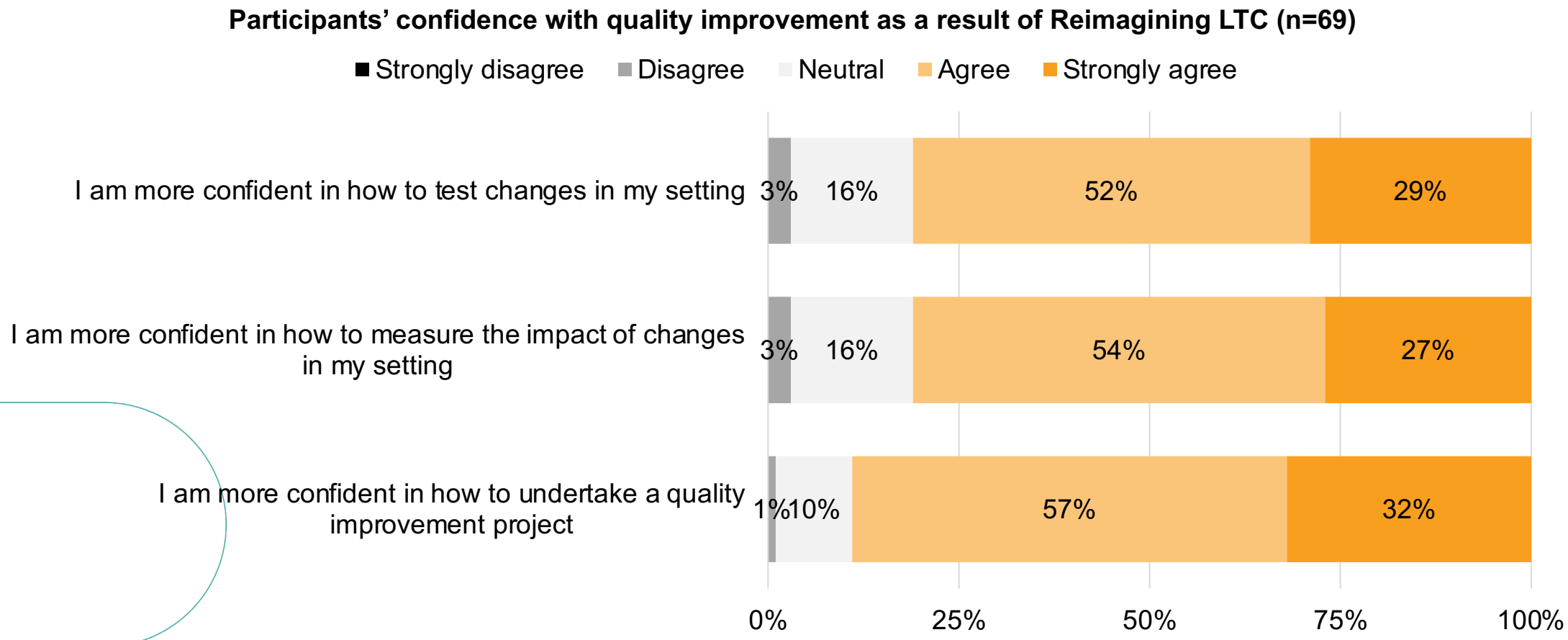
69% of homes have advanced their culture for quality improvement

After participating in Reimagining LTC, is the culture of the setting in which the project took place more conducive to quality improvement? (n=74)

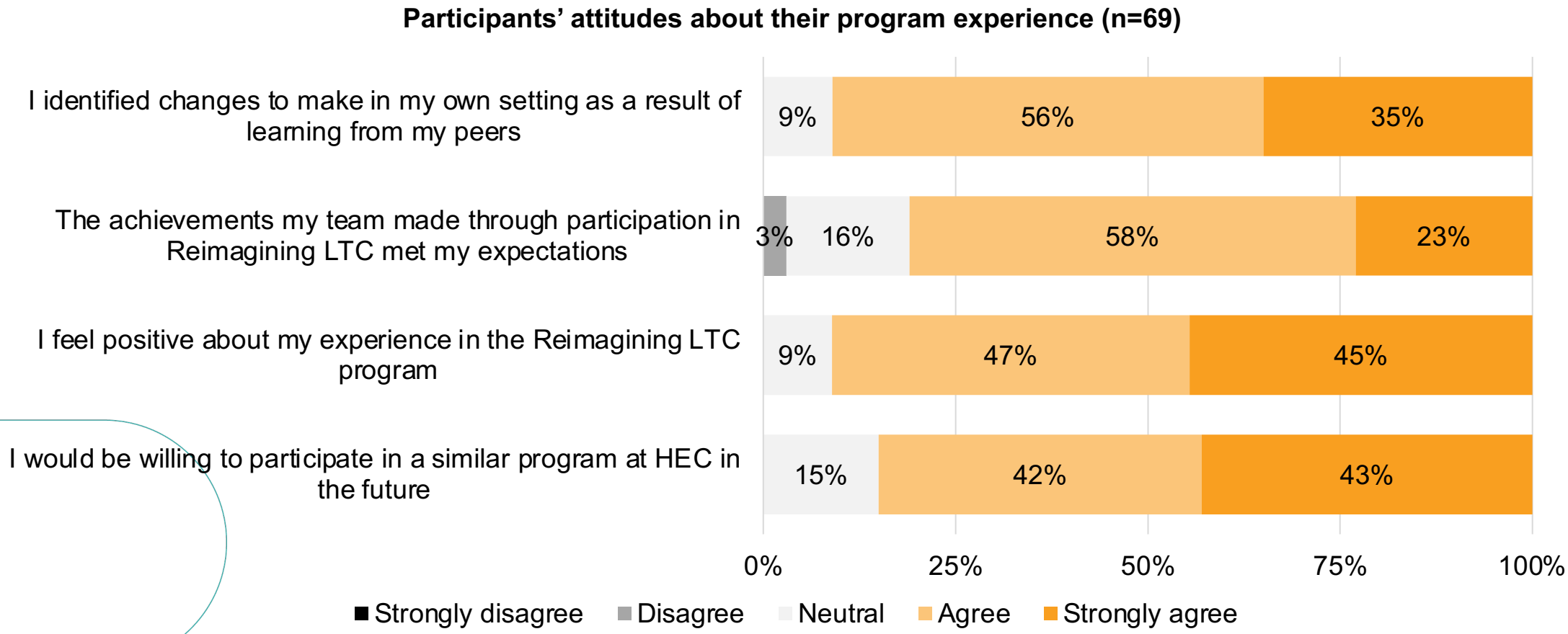


Program Impacts on Participating Individuals

Over 80% of respondents gained confidence in undertaking quality improvement work



Majority of participants had a positive experience related to testing changes and identifying outcomes



Overall Program Impact

AUA-Focused Sites in BC

59% Reported a decrease in % of residents on antipsychotics without a diagnosis of psychosis

37% Largest AUA rate decrease for a single site

8.4% Average decrease in antipsychotic dispensation across all sites (N=31)

7.7% Average decrease of inappropriate use of antipsychotics across all sites (N=43)

Program Challenges and Lessons Learned

Barriers and Facilitators

Barriers

- Lack of staff
- Limited access to additional resources
- Competing priorities
- Tight timelines
- Sustainability

Facilitators

- 1 on 1 engagement
- Dedicated staff
- Family and Essential Care Partner support
- Funding and equipment access
- Staff confidence

Program Feedback

"This project directly impacted our residents by **reducing disruptive behaviors and antipsychotic usage significantly**. This had also indirectly improved our quality indicators"

- Participant from Fraser Health

"I was able to **truly learn about our residents** with this program and work towards strategies and solutions with the clinic team"

- Participant from Island Health

"It made me feel like I finally had the resources to have a **positive impact on the resident's quality of life**"

- Participant from Northern Health

Program Feedback

"Increased collaboration between staff and physician lead, increased **collaboration and understanding between staff and families/ caregivers**, increase in dementia-specific care for residents"

- Participant from Fraser Health

"Being able to **connect with staff from other sites and share project ideas** was of value to me and my colleagues... The **regular check-ins** were also beneficial in that it kept our staff on track"

- Participant from Vancouver Coastal Health

Thank You

For more information:

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