Across Canada, 1 in 5 long term care (LTC) residents is on antipsychotic medication without a diagnosis of psychosis. Although antipsychotics are commonly prescribed to treat behavioural symptoms of dementia, for many seniors antipsychotic medication is minimally effective at best. At worst, it can cause harmful side effects and contribute to falls and hospitalizations.

IMPROVING THE QUALITY OF LIFE FOR RESIDENTS IN LONG TERM CARE: APPROPRIATE USE OF ANTIPSYCHOTICS (AUA) COLLABORATIVE

Almost immediately after discontinuing the antipsychotic medication, there was a marked improvement. She became less confused and she began to engage in recreational functions, to eat in the dining area along with the other residents and to sleep better at night.

– Western Health
THE SOLUTION

At CFHI, we’re doing our part to improve elder care by incubating, spreading and scaling the AUA approach across Canada.

The AUA approach is a person-centred care strategy that engages all members of interprofessional staff and families to co-design and co-implement personalized approaches to care. Empowered with better information about each resident, care teams can customize services to support residents. The AUA approach has demonstrated success in improving resident quality of life, appropriate use of antipsychotics, and staff collaboration and culture in LTC homes across Canada.

HOW IT WORKS

The AUA collaborative supports staff in LTC through a variety of education, training and support activities. They include: monthly webinars, in-person workshops and education sessions, mentoring through coaching calls and site visits, sharing key resources, and facilitation of peer-to-peer learning opportunities. CFHI’s approach promotes sharing solutions and networking across regions and provinces.

SPREADING THE INNOVATION

The AUA Approach has demonstrated success in LTC homes:

- In Winnipeg Regional Health Authority, which included a 27 percent reduction in one LTC home over six months,
- Across Canada in CFHI’s pan-Canadian collaborative with a 54 percent reduction across 24 of the 56 LTC homes that first implemented the intervention (Eastern, Central, and Western Health in Newfoundland and Labrador participated in this collaborative),
- A 43 per cent reduction in the initial implementation phase across New Brunswick, CFHI’s first provincially funded AUA Collaborative, and
- Across Québec in a province-wide scale initiative, Optimizing Practices, Use, Care and Services—Antipsychotics (OPUS-AP).

When there is ‘free’ time on the day shift, at one time staff may have done more baths to help get the evening staff ahead. Recognizing that this was in their own interest and not that of the residents, staff are more likely to do a beauty spa/nails for some ladies or spend quality time one on one with the residents.

- Kings Way Lifecare Alliance, Quispamsis, New Brunswick

With the reduction of antipsychotics, residents became more socially engaged, were better able to eat independently, and became more wakeful, which made families and staff happier.

CFHI is a not-for-profit organization funded by Health Canada.

The views expressed herein do not necessarily represent the views of Health Canada.

For more information about the AUA collaborative approach visit www.cfhi-fcass.ca or contact us at 613-728-2238 or by email info@cfhi-fcass.ca.