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May 22nd, 4:30 PM - 6:00 PM

Knowledge of and perceived need for evidence-based educational materials about antipsychotic medication safety by nursing home staff

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Presenter Information
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KNOWLEDGE OF AND PERCEIVED NEED FOR EVIDENCE-BASED EDUCATIONAL MATERIALS ABOUT ANTIPSYCHOTIC MEDICATION SAFETY BY NURSING HOME STAFF

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Background: Given the widespread overuse of antipsychotic medications among US nursing home (NH) residents, we sought to identify knowledge of and perceived need for the AHRQ Comparative Effectiveness Research Summary Guide (CERSG) "Off-Label Use of Atypical Antipsychotic Drugs".

Methods: We conducted a baseline needs assessment with 12 NHs participating in a randomized controlled trail evaluating evidence dissemination strategies. Using a mixed method approach, we conducted in-depth assessments of knowledge, attitudes, and practice behavior using telephone interviews with NH leadership (administrators, directors of nursing [DON], and medical directors), and questionnaires with NH leadership, consultant pharmacists and direct care staff. Interviews were transcribed, verbatim responses were coded independently by 2 project staff. The coding scheme was revised after each round until substantial agreement (85%) was reached.

Results: Interviews revealed that 70% of medical directors and 46% of DON and administrators believed that antipsychotics decreased agitation and controlled harmful behavior; 50% of medical directors and 7% of DONs & administrators reported knowledge of the increased risk of morbidity and mortality due to atypical antipsychotics. Half of administrators and DONs expressed interest in receiving information for NH staff pertaining to understanding dementia and dementia-related behaviors, 42% believed families would benefit from information about antipsychotic use for dementia-related behaviors. Questionnaire results were similar. When leaders were asked to list any risks associated with antipsychotic use for residents with dementia, only 17% reported death as a possible adverse event; licensed nursing staff (RN and LPNs) reported death 5% of the time. Over half of consultant pharmacists identified that their biggest barrier to improving medication use in challenging NHs was physician resistance to accepting recommendations.

Conclusions: The responses of the NH leaders, staff and consultant pharmacists suggest widespread knowledge gaps regarding antipsychotic benefits and risks, and suggest a need for increase evidence dissemination and broad organizational change.