

Interprofessional Medication Review as a Facilitator of the Appropriate Use of Antipsychotics Policy in Alberta

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Background

- The Canadian Foundation for Healthcare Improvement (CFHI) estimates that one in three long-term care (LTC) residents are taking antipsychotic medication without proper clinical indications (CFHI, 2014)

- One study reported adverse effects associated with long-term use of antipsychotic medication, such as increased risk for stroke, mortality, falls and pneumonia (Mittal et al, 2011)
- Another study in Ontario found that new prescriptions of antipsychotics was associated with a 52% increase risk of serious falls, and a 50% increased risk of fractures (Fraser et al, 2015)

Background contd...

- In Alberta, there was a high prevalence (26.8%) of antipsychotics use in the absence of psychotic and related conditions in 2011/2012
- In 2013, the Seniors Health Strategic Clinical Network (SH SCN), in collaboration with the Addiction & Mental Health Strategic Clinical Network (AMH SCN), developed provincial guidelines and accompanying resources for the Appropriate Use of Antipsychotics (AUA) for LTC facilities in Alberta (SH SCN, 2014)



Background contd...

- The SH SCN, Alberta Health Services (AHS), developed guidelines and resources to reduce the inappropriate use of antipsychotics in long-term care in Alberta
- The AUA initiative was successfully implemented in approximately 170 long-term care facilities in Alberta resulting in the lowest antipsychotics use in 2015 as compared to other Canadian provinces (18.8%)



Background contd...

- Interprofessional medication reviews are an integral part of the AUA initiative
- A medication review is a collaborative service provided by healthcare professionals to detect and prevent medication-related problems *(Nishtala et al, 2008)*
- Studies have demonstrated a reduction in prescriptions of antipsychotic medication as a result of medication reviews *(Roberts et al, 2001)*

Objectives

- This evaluation is a component of the AUA initiative
- The goal of this evaluation was to understand how long-term care facilities in Alberta have implemented the AUA medication review process
- We evaluated the medication review process at four facilities, identified how interprofessional collaboration was enacted and determined the challenges for the sustainability of the process

Methods

- We used convenient sampling and identified and recruited long-term care facilities by the SH SCN Manager
- We conducted semi-structured interviews with the staff at these facilities using an interview guide
- We also conducted structured observations of one review at each facility using a checklist based on the existing guidelines for medication reviews

Methods contd...

- We looked for the way the meetings were structured and collaborative interactions between the team members
- We also asked for feedback on the checklist and the best way to use it from the interviewees
- The revised antipsychotic medication checklist is intended to be used as a standard tool to monitor and audit antipsychotic medication reviews

Results

Results



- We observed one antipsychotic medication review at four LTC facilities
- Common practice at all facilities was for the facility managers to recruit professionally diverse staff, including nurses, Health Care Aides (HCAs), pharmacists and senior leads (best practice lead, manager) to attend the meetings
- Staff used the list of residents taking antipsychotics provided by the pharmacist to guide their discussion

Results contd...

- We found variations in the way LTC facilities have carried out antipsychotic medication reviews
- We observed that the pharmacist was the lead at two facilities, while the Registered Nurse (RN) led at another facility and the fourth facility had a Nurse Practitioner (NP) as their lead
- The process of scheduling and organizing the review also varied from facility to facility

Results contd...

- The process at some facilities was highly interprofessional demonstrating each of the six interprofessional competencies as identified in the Canadian Interprofessional Health Collaborative (CIHC) framework
- Other facilities conducted the review in a less interprofessional manner due to some challenges of physician involvement and staff workload
- Facilities that had an NP on site were more efficient with the process of implementing recommendations resulting from the medication reviews

| Facility Name | Providers in Attendance | Review Lead | Duration of Review | Number of Residents Discussed | Staff Shifts Involved (Day/Night/Evening) |
|-------------------|---|--------------|--------------------|-------------------------------|---|
| Facility A | <ul style="list-style-type: none"> ▪ RN team lead ▪ Pharmacist ▪ Care manager ▪ LPN ▪ HCA | RN team lead | 1 hour | 20 | Day: RN team lead, pharmacist, care manager, LPN, HCA Evening: None Night: None |
| Facility B | <ul style="list-style-type: none"> ▪ NP ▪ LPN ▪ RN ▪ HCA ▪ Pharmacist ▪ Social worker ▪ Recreational therapist ▪ Care manager ▪ Director of care | NP | 1.5 hours | 12 | Day: NP, RN, pharmacist, care manager, LPN, HCA, social worker, recreational therapist and director of care Evening: None Night: None |
| Facility C | <ul style="list-style-type: none"> ▪ Pharmacist ▪ Care manager ▪ Best practice lead ▪ LPN | Pharmacist | 1 hour | 6 | Day: LPN, pharmacist, care manager, and best practice lead Evening: None Night: None |
| Facility D | <ul style="list-style-type: none"> ▪ Pharmacist ▪ RN ▪ HCA | Pharmacist | 1 hour | 9* | Day: Pharmacist Evening: RN Night: HCA** |

Results contd...

- We also interviewed 18 participants from the four selected LTC facilities: five HCAs, three RNs, three LPNs, four pharmacists, one best practice lead, one care manager and one facility director
- Most of them believe that the interprofessional medication review process is helpful

The medication review is interdisciplinary, we have people from various disciplines. Each discipline will see the patient in a different way than another. [LPN]

Results contd...

- The participants reported good team function and collaborative practice within their team

We are very good at understanding each other's point of view and respecting that, if we disagree we just review more rather than telling someone they are wrong. [Pharmacist]



Results contd...

- Most participants found HCA involvement to be very useful

The Health Care Aides are able to provide great feedback because we are right on the front-line working with the residents. We see behaviours that others might miss. [HCA]



Results contd...

Some of the key challenges that staff identified included:

- Physician involvement
- Difficulty with covering front-line tasks if staff participated in the review
- Scheduling Antipsychotic Medication Reviews to include staff from different shifts

The challenge of including everyone is that most staff work part-time. So it's difficult to find a time that works for everybody. [Manager]

Conclusion



- The medication reviews at all facilities included participation from nursing (RN/LPN) and pharmacy, some had other staff (HCAs) involved
- Those facilities that included an NP were more efficient in their medication review process due to their scope of practice, including prescribing
- Facilities could benefit from exploring the use of alternative providers such as expanded scope of practice for pharmacists

Recommendations

- Identify a core antipsychotic medication review team with providers from diverse professional backgrounds
- Engage HCAs in medication reviews since they observe behaviour changes in the residents and would feel valued in giving input
- Include a prescriber on the core review team to change medication orders
- Engage residents' families in decision-making about changes to antipsychotic medications

Thank you!
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