Quality Measure Tip Sheet:
Antipsychotic Medication – Long Stay

Quality Measure Overview
Numerator:
• This measure reports the percentage of long-stay residents who are receiving antipsychotic drugs in a seven-day look-back period.

Denominator:
• All long-stay residents with a selected target assessment, except those with exclusions

Exclusions:
• Residents with a diagnosis of schizophrenia, Tourette’s syndrome or Huntington’s disease.


MDS Coding Requirements
In the Minimum Data Set (MDS):
• Indicate the number of days the resident received antipsychotic medications during the last seven days (or since admission/entry/re-entry if less than seven days).

Ask These Questions...
• Is the MDS coding accurate?
• Are orders received from outside vendors (e.g., hospice) monitored? (These vendors may use antipsychotic medications to control conditions such as nausea and vomiting that could be controlled by a less restrictive medication or antiemetic.)
• Have the least restrictive interventions been attempted first?
• Are staff members and family educated on behavior management and nonpharmacological interventions?
• Are psychotropic medications only being used when appropriate to enhance the resident’s quality of life while maximizing his/her functional potential and wellbeing?
• Are gradual dose reductions completed per regulation?
• Have staff members analyzed the resident holistically to rule out any underlying conditions (e.g., medical causes) that are affecting behavior?
• Are staff behaviors assessed as triggers for resident behaviors?
• Are basic needs being met?
• Is the resident hungry or thirsty and instructed when to eat or drink?
• Is the resident dressed appropriately for weather and his/her age?
• Are activities individualized and specific to the resident to alleviate boredom?
• Is the resident’s incontinence being managed?
• Is the resident’s pain being managed?
• Is the nursing home environment calming? Are there areas for private space? Is clutter managed? Is the resident’s belongings organized to decrease confusion?
• Have staff members sat quietly and paid attention to the sounds and noises around a resident and taken action to reduce noise, including eliminating alarms?
• Does the resident have a sense of trust with caregivers?
• Are there consistent staff member assignments?
• Are there consistent routines?
• Does the facility involve direct-care staff members, physicians and pharmacists in pharmacy and therapeutic meetings at least quarterly?
• Is a behavior-tracking process in place to monitor for changes?
• Are adverse side effects of drugs monitored and treated accordingly?
• Does the resident obtain psychological services for treatment, if indicated?

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