

California Partnership to Improve Dementia Care and Reduce the Use of Antipsychotics

Project Overview

In March 2014, the California Department of Public Health (CDPH) entered into a two-year contract with the California Culture Change Coalition (CCCC). The agreement between the CCCC and the CDPH Licensing and Certification (L&C) Division was for reducing the unnecessary antipsychotic medication drug use in nursing homes. CCCC worked to accomplish this reduction with the aid of multiple entities listed below (referred to as The California Partnership):

- California Culture Change Coalition (CCCC) - Lead
- Alzheimer's Association
- California Advocates for Nursing Home Reform (CANHR)
- California Association of Health Facilities (CAHF)
- California Association of Long-Term Care Medicine
- California Department of Public Health (CDPH)
- California Hospital Association
- California Long-Term Care Ombudsman Association (CALTCM)
- California Medical Association (CMA)
- Centers for Medicare & Medicaid Services (CMS)
- Health Services Advisory Group (HSAG)
- Occupational Therapy Association
- Other interested parties

Background History

In August 2012, the Centers for Medicare & Medicaid Services (CMS) Region IX and CDPH, together with a diverse group of Stakeholders, launched the California Partnership. In December 2012, members discussed how best to continue the reduction of unnecessary antipsychotic medication in nursing homes. Using federal Civil Monetary Penalty funds, CMS and CDPH identified CCCC to carry on the goals already established by the California Partnership.

Under the contract, CCCC facilitated stakeholder engagement to improve dementia care and reduce unnecessary antipsychotic medication used in nursing homes. Through the facilitation, CCCC refined the targets for action in the following areas:

- "Enforcement" and "Informed Consent" areas by convening the appropriate stakeholders, assisting the development of action plans, and documenting results.
- "Improving Dementia Care" and "Consumer Awareness" areas by serving as the lead agency to implement and coordinate the core strategies identified in this area. CCCC will improve Dementia Care and consumer awareness improvements by providing education and training, promoting best practices, and providing technical expertise through a variety of avenues.

Contract Goals:

Goal 1: Improve Dementia Care

Objective 1: Educate and train providers, professional stakeholders, administrators, and other healthcare professionals. (Physicians/ MDs, Registered Nurses/Licensed Vocational Nurses/, Certified Nursing Assistants, Social Service Directors, Pharmacists, Occupational Therapists, etc.) in improving dementia care through promoting environmental modifications, person centered, and least medicating interventions as identified below:

Major Functions, Tasks, and Activities:

- a. Create an online tool kit that includes:
 - Train the trainer materials for implementing the curriculum of evidenced based materials, such as the modules of the CMS, "Hand-in-Hand Dementia Training program."
 - Best Practices Resources Listing that includes non-pharmacological interventions and activities specific to enhancing resident care and quality of life with less medication. These best practices are those practices that are commonly accepted in the professional community as appropriate and with positive outcomes.
 - Quick reference guide for Best Practices Resources Listing
- b. Prepare presentations that can be delivered in person or via a webinar as a series for the following topics:
 - Least Medicating Approaches
 - Best Practices that identify effective strategies in dementia care that result in antipsychotic medication reduction
- c. Identify facilities with antipsychotic medication rate at 30% or above and develop a proposed corrective action plan to promote training in those geographical areas to enhance training opportunities in those areas. This evaluation will be done once in Year 1, and again in Year 2 to allow for targeting the facilities by using the most current antipsychotic medication rate data available.
- d. Identify and promote existing training materials and best practices through key stakeholders, e-mail blasts to providers, residents and their families, Ombudsmen and conferences.
- e. Host a statewide conference in northern and southern California that brings all stakeholders together to improve dementia care and stop misuse of antipsychotics.
- f. Provide an update to summarize completion of Objective 1, and provide all materials/webinars to CDPH, L&C.

Objective 2: Coordinate with other stakeholders who will provide technical expertise and facilitate training opportunities between advocacy groups and facilities on least medication alternatives and person-centered interventions.

Major Functions, Tasks, and Activities:

- a. Evaluate other measurement tools rather than the CMS quality measures. Prepare a report outlining resources needed, steps involved and associated costs to the recommended measurement tools.
- b. Identify partners and their interest in participation for learning and action networks (LANs).
- c. Collaborate and convene workgroups with LANs to identify key strategies.
- d. Provide continued process and outcome improvement through the LANs.

Objective 3: Support the ongoing collaborative efforts through the facilitation and organization of the Partnership Stakeholders Executive Committee.

Major Functions, Tasks, and Activities:

- a. Facilitate workgroup meetings of the collaborative stakeholder group.
- b. In conjunction with key stakeholders, identify and refine key strategies for improving dementia care and reducing antipsychotic medication use in the nursing home.
- c. Ensure that there continues to be a vehicle for interagency communication, coordination, and leadership related to the initiative to improve dementia care and reduce the use of antipsychotic medication used in skilled nursing facilities including issues related to enforcement and informed consent.
- d. Collaborate with key stakeholders to include this topic area in statewide meetings, trainings, and conferences.
- e. Make arrangements for teleconference option as an alternative to in-person meetings.
- f. Prepare and distribute draft meeting notes within one week of the meeting.
- g. Finalize and distribute the meeting notes within two weeks of the meeting to all attendees.
- h. Coordinate the dissemination of all announcements/updates, providing copies to all stakeholders including CDPH, L&C.

Objective 4: Create and facilitate work groups/committees comprised of CCCC/key stakeholders. The work groups/committees will report to the California Partnership any progress, outcomes, issues, or concerns with appropriate actions directed and taken for project completion and success in meeting goals and targets.

Major Functions, Tasks, and Activities:

- a. Coordinate and schedule workgroup meetings via telephone or in person, depending on the preference of the workgroup members.
- b. Arrange for teleconference option for the workgroup members if that is their choice, or for those members that cannot travel to the in-person meeting.
- c. Prepare and distribute draft-meeting notes within one week of the meeting.
- d. Distribute the finalized meeting notes within two weeks of the meetings to all attendees.
- e. Coordinate the dissemination of all announcements/updates, providing copies to all stakeholders including CDPH L&C.

Goal 2: Raise Consumer Awareness Around Dementia Care Best Practices

Objective 1: Identify and train providers and professional stakeholders in improving dementia care through promoting environmental modifications, person-centered, least medicating interventions.

Major Functions, Tasks, Activities:

- a. Collaborate with key stakeholders and potentially a public relations consultant to create a broad-based education campaign plan for families and consumers to increase awareness of positive practices in management of dementia-related behaviors and the consumers' right to informed consent.
- b. Conduct a literature search to find existing appropriate materials (brochures, tool kits, articles, and non-technical resources) to incorporate into the educational campaign. Prepare a report of findings with recommendations for inclusion in the educational campaign.
- c. Work with key stakeholders and potentially a public relations consultant to develop new educational materials as needed. Materials to include brochures, flyers, and articles suitable for posting on websites, as well as to collect a rich compendium of tools/resources that will guide their non-pharmacological dementia care practices, making them readily available to the care teams. The "tools" necessary are to be developed while working in collaboration with the key stakeholders.
- d. Share best practice resources and resource list with nursing homes and key stakeholders that have training capability, with the goal of the stakeholders with training capability to incorporate these best practices in their programs, literature, websites, and conferences.

Objective 2: Develop a website with public information aimed at the layperson that provides non-technical information regarding person-centered-approach behaviors management of dementia-related behaviors.

Major Functions, Tasks, Activities:

a. Expand the existing CCCC website to include pages dedicated to consumer education about person centered care that contains the following information that has been vetted through key stakeholders:

- A Frequently Asked Questions section that addresses the questions family members should ask when their loved ones are having behavioral challenges in a long-term care setting.
- Provides balanced information regarding the pros and cons of pharmaceutical interventions for dementia related behaviors
- Include a simple guide for consumers on their right to informed consent related to the use of psychotropic medications in skilled nursing facilities.

b. Train Ombudsmen to conduct outreach to resident and family councils on improving dementia as follows:

- Develop and present a session at the Ombudsman conference and develop, at a minimum, one webinar on the topic of how Ombudsman can help to raise consumer awareness regarding person-centered care and non-pharmacological techniques for treating people with dementia related behavior.
- Identify and utilize expert Ombudsmen to assist with the development of strategies to raise awareness about the resources and guidance materials available on how Ombudsmen can assist with the dissemination of information about the positive dementia management resources available throughout the CCCC website.

Final Deliverable

The CCCC concluded the contract by preparing a final report of the various activities undertaken during the 2-year contract period: *California Partnership to Improve Dementia Care and Reduce the Use of Antipsychotics*.



13-20555 FINAL
NARRATIVE REPORT