Title of Research: Improving Antipsychotic Prescribing Practices in Nursing Facilities

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Introduction/Purpose:
The Nursing Home Reform Act (NHRA) of 1987 initiated a federal response to antipsychotic overuse in nursing homes that included implementation of standards of care and a surveillance system to monitor anti-psychotic prescribing. Inappropriate antipsychotic prescribing initially decreased upon the implementation of standards and surveillance but has returned to pre-NHRA levels in the last five years. The purpose of this study is to estimate the impact two efforts to improve antipsychotic prescribing, the Partnership to Improve Dementia Care initiative (Partnership initiative) and the quality indicator survey (QIS), on three distinct implementation outcomes pertaining to antipsychotic prescribing, while controlling for individual, organizational and contextual variables known to shape implementation.

Experimental Design:
Study data were provided by 320 state surveyors who responded to a 49 question survey conducted by the Center for Medicare Advocacy in March of 2013. Three implementation outcomes for the Partnership initiative were measured as observed improvements in providing care, observed deficiencies in providing clinical care, and observed criminally liable behavior related to prescribing antipsychotics. The key explanatory variable was the use of the QIS in the state. Logistic regression was used to model the impact of QIS on the outcome measures, controlling for known covariates.

Results:
Nursing home surveyors working in states that had implemented QIS were significantly more likely to observe improvements in clinical care (OR (CI): 3.926 (1.482 – 10.482)) and significantly less likely to observe criminally liable behavior (0.343 (0.128 – 0.914). No significant differences were found for the clinical care deficiencies outcome.

Conclusions:
The improved nursing home survey process (QIS) seems to be effective in increasing the responsiveness of nursing homes to initiatives to improve dementia care, such as the Partnership Initiative. Expanding the number of states using the QIS process could improve overall care for residents with dementia.