

Step 2: Five Key Interventions for Reducing Antipsychotic Use

Shifting culture away from well-established practices requires new experiences, knowledge and processes. Key interventions for more appropriate use of antipsychotics include:

1. **Staff education** around the [AUA Guideline](#) and [Toolkit resources](#), including:
 - antipsychotic side-effects and adverse effects
 - dementia care strategies
 - responsive behaviours
 - person-centred careThis enables staff to explore and implement alternatives to antipsychotic medications.
2. **Monthly interprofessional medication reviews.** Medication reviews should identify the reason for the antipsychotic, risks versus benefits, side-effects and changes in behaviours. These reviews should involve a variety of members of the care team from all shifts (when possible), and include the perspective of HCAs even if they are not able to attend the review in person. For tools and more information, see the [Medication Review section of the AUA toolkit](#).
3. **Care plan reviews.** Discussions within the whole care team (including nursing staff, allied health, families and HCAs), assist teams to identify potential reasons for agitation and aggression, wandering, resistance to care and other responsive behaviours. Person-centred strategies are then trialed to prevent and manage responsive behaviours without chemical restraint.
4. **Family consent.** Families and alternate decision makers should be included in discussions around alternative approaches, and be made aware of the risks and side-effects of antipsychotic medications (See [AUA Guideline](#)). Some facilities have chosen to require written consent for antipsychotics. Evidence of an informed consent discussion should be well-documented with any initiation, dosage change or continued treatment with antipsychotics. The AUA project resources include documents such as the AUA Family brochure, and documents to guide and track discussions around appropriate use of antipsychotics.
5. **Measurement and Celebration.** Measurement allows staff to track progress, and demonstrates the impact of interventions. It provides incentive, encouragement and accountability.
 - Tools have been developed to track antipsychotic usage at a unit level and can be found in the Project Resources section of the [AUA Toolkit](#).

- Graphs can be produced and displayed on Quality Improvement Boards.
- Resident Assessment Instrument (RAI) data can be compared to other zones and provinces within Canada on the Canadian Institute for Health Information (CIHI) *Your Health System: In Depth* website (see ourhealthsystem.ca)

The Project Resources section also includes templates you can use to tell success stories as residents “Come Alive” in the months following reduced use of antipsychotics.