

Case Study: Decreasing Antipsychotic Medications through Engagement Technology



Categories:

- ◆ Reduced Social Isolation, Depression, and Use of Antipsychotics
- ◆ Increased Resident Engagement and Satisfaction, Quality of Life, and Staff Efficiencies

About the Organization

Organization Name:

Rappahannock Westminister-Canterbury

Main Contributors:

Mary Arthur, Dementia Care Coordinator; Mary Ann Hensley, Director of Nursing

Organization Type:

Continuing Care Retirement Community.

Organization Description:

Rappahannock Westminister-Canterbury is a continuing care community providing the highest quality living experience for discerning senior adults. They are a Virginia nonprofit corporation affiliated with the Episcopal and Presbyterian churches. A passionate team provides person-centered care; incorporating the spiritual, psychosocial, physical, and mental needs of our residents. At-home services enlarge our scope of care into the community.

Project Description

Partnering with Westminister-Canterbury Chesapeake Bay and the Birdsong Corporation, RWC initiated an engagement technology tool using a digital tablet. The clinical study found an elevation in mood, an increase in cognitive ability, and a reduction in caregiver stress. After implementation of the tablets as an engagement and redirection tool, staff saw a **76% decrease in antipsychotic medications use among residents**. Concurrently, Centers for Medicare & Medicaid Services (CMS) launched the National Partnership to Improve Dementia Care and Reduce Unnecessary Antipsychotic Drugs. Per the guidance and benefits of the tablets, residents experienced a reduction in social isolation, reduced feelings of loneliness and depression, and a decrease in dementia-related behaviors.

Socialization Modality

The Birdsong Tablet offers over 8,000 engaging experiences and numerous opportunities for social engagement, including video chat, audio chat, photo sharing, event/activity sharing, email, text chat, picture chat, community app, community blog, activity calendar, audiobooks, Lifelong Learning Academy, art, games, exercise, rehabilitation, music, and much more.



System Embodiment

The software is offered on both medical grade and commercial grade tablets of various screen sizes (10-inch, 18-inch, and 21-inch). For this study, the 21-inch tablets were attached to a bed-side table that is rollable and accessible in multiple locations.

Business Model

RWC provided the Birdsong technology to the residents for free.

Implementation Approach

RWC began introducing the Birdsong tablets to staff in 2018. The revealed benefits and laughter were an instant incentive for most to become engaged and interested in using the technology with residents.

Using an intergenerational program, children from the Lancaster County Boys and Girls Club then demonstrated using the tablets to residents in the nursing home setting. We saw an increase in interest when children assisted residents with engagement. As a part of the government's guidance on gradual dose reductions of antipsychotic use among residents with dementia, we began implementing an engagement program leveraging technology. Using person-centered care, staff were able to engage residents with interests and passions using the Birdsong tablets to replace pharmaceutical interventions.

An interdisciplinary team met to identify triggers, times of day, and feelings of residents regarding antipsychotic medications. By regularly consulting with staff and working together, we were able to identify potential triggers, and trigger moments, and hence provide **precautionary engagement** before those trigger moments occurred.

Implementation of the Birdsong tablets with later stage dementia residents included demonstrating benefits to staff and providing support to encourage engagement. Education was provided to nursing staff on calming approaches and therapeutic videos and music.

Outcomes

After implementing the Birdsong tablets as an engagement tool, the results were evident in medication management, residents' behaviors, and overall happiness among residents and staff.

- ◆ Staff saw a reduction in social isolation and loneliness. One gentleman would not come out of his room due to anxiety. Once implementation of the tablets began, staff provided him with a video of his favorite baseball team, which encouraged the resident to sit in a social atmosphere while viewing his favorite team.
- ◆ Staff engagement with residents increased with an improved staff temperament. Staff were dancing to music, laughing with residents, and engaged with what residents enjoyed. The tablets increased our person-centered care knowledge and interactions by connecting staff and residents with similar passions, genres of music, histories and similar past experiences.
- ◆ A 76% reduction in the use of antipsychotics was found in the months following the introduction of the tablets in our community. Seven residents were on antipsychotic medications and we reduced that number to three residents.
- ◆ There were evident signs of an increase in staff efficiencies due to the reduction of disruptive behaviors that needed more immediate staff attention. Consequently, staff were able to broaden their reach daily with residents while they engaged with the tablets.
- ◆ An increase in quality of life was witnessed through engagements with passions, elevated moods, and decreased loneliness.
- ◆ Video chats with families increased quality of life.
- ◆ An increase in social networks was promoted by enjoying virtual church services, virtual calls with family, and other virtual engagement.

Challenges and Pitfalls to Avoid

- ◆ Staff at RWC learned quickly that some residents are more noise sensitive than others. Those with cognitive deficits will become overwhelmed when introducing the tablet in active and noisy environments and group settings.
- ◆ The Birdsong tablets are not there to take the place of staff members. Individuals still need human connection and touch. The tablets are merely engagement technology tools, not designed to take the place of humans or a way for nursing staff to disregard residents' needs.

Lessons Learned/Advice to Share with Others

- ◆ Take your time and introduce the solution slowly. We began introductions of the tablets with staff first. Staff began dancing to old music from their eras and laughing at videos. The laughing baby was contagious for both staff and residents. There were multiple residents that told us they left the workforce when computers were introduced and were not interested. Staff would play trivia games with these residents and after a few rounds, residents began touching options on screens as well.
- ◆ Try not to be discouraged. Due to cognitive changes and mood fluctuations, some residents may refuse or are unable to concentrate in their foggy moments. Try again later or another day.