

Long-Term Care Survey Alert

Survey & Clinical News

Medicare Web site contains wealth of resources to help with quality measures. Check out the Medicare Quality Improvement Web site for updated clinical tools, flow charts and other helpful information to help your nursing home address the quality measures (www.medqic.org). The QMs address pain, pressure ulcers, delirium, decline in activities of daily living, infection, restraints and improvement in walking. The site also contains tools to improve facilities' flu and pneumonia immunization programs and QI worksheets and information.

Tips: Peruse the site on a regular basis in preparation for your quality assurance meetings. Flag forms and tools for staff in put in terms of what might be useful or adapted to your facility's QI needs.

It might be time to take a closer look at use of antiepileptic (AED) drugs in your nursing facility. More than 10 percent of residents are taking these medications, even though only 5 or 6 percent have epilepsy. That's according to a study reported in the May 5 online edition of the *Annals of Neurology*, which notes that anti-seizure medications are expensive, tricky to prescribe effectively and safely and carry potential side-effects that negatively affect residents' quality of life.

To perform the study, **University of Minnesota** public health researchers studied the records of approximately 10,000 elderly residents in more than 500 nursing homes around the country. They found that 8 percent of nursing home residents had been taking AEDs on admission to the facilities, but were surprised to find that another 3 percent were placed on AEDs within three months of admission. Of the patients already taking AEDs before admission, 60 percent were taking the drugs for seizures. Conversely, only 20 percent of those placed on AEDs after admission received the drugs for that purpose. AEDs can also be used to treat bipolar illness, nerve-generated pain, and some dementia-related behavioral problems.

The study's authors caution that the use of AEDs is complicated and often calls for input from a specialist who can determine which drug to use. "It is also important to note that some AEDs can have side-effects such as poor coordination, confusion, or sedation, and some may interact adversely with other types of medication," according to a statement by the study's lead author, **Judith Garrard, PhD**, a professor at the University of Minnesota School of Public Health.

Tips: Publicized studies such as this often give surveyors a "heads up" on what to target in evaluating nursing homes for unnecessary drugs (F329). Ask the physician to document the rationale for prescribing the drug for a specified condition, including a benefit-risk analysis. Don't forget the risk of falls due to sedation. Implement non-drug alternatives before resorting to AEDs for behavioral symptoms.

Spirituality can help protect your terminally ill residents from despair. A new study re-reported in the May 10 *Lancet* confirms the importance of spirituality for terminally ill patients with a life expectancy of three months or less. Researchers from

Fordham University, and Memorial Sloan Kettering Cancer Center in New York City found spiritual well-being to be the strongest predictor of patients' sense of hopelessness, suicidal ideation and desire for hastened death. They suggest further studies could help determine what types of spiritual interventions can help engender a sense of peace and meaning.