Antipsychotic Drugging

Introduction

- Antipsychotic (AP) medications are highly potent drugs that are indicated to treat specific
 conditions and diagnoses, such as schizophrenia. Unfortunately, inappropriate antipsychotic
 drugging of nursing home residents, particularly those with dementia, is a prevalent problem
 in facilities across the country. Too often, these drugs are used as a form of chemical restraint,
 to sedate residents rather than provide appropriate care.¹⁷
- AP drugs carry a "black-box" warning from the Food and Drug Administration¹⁸ because they greatly increase the risks of stroke, heart attack, diabetes, Parkinsonism, and falls. They can also significantly diminish social and emotional well-being. Importantly, these drugs are *not* clinically indicated for the treatment of the so-called behavioral and psychological symptoms of dementia.
- A September 2021 New York Times report, "Phony Diagnoses Hide High Rates of Drugging at Nursing Homes," found that diagnoses of schizophrenia among nursing

No stop date: A "No Harm" Antipsychotics Deficiency (F758)

At a Florida nursing home, a resident was receiving PRN (as needed) antipsychotic medication for several months without justification for ongoing use and without a stop date on the order. Despite the risks posed by the potentially life-threatening side-effects of psychotropics, the surveyor cited the violation as no harm.

- home residents have increased dramatically in the years since CMS launched its "Partnership" to improve dementia care and reduce antipsychotic drugging. This is likely because a nursing home's publicly reported rate of antipsychotic drugging is risk-adjusted to exclude residents who receive these drugs but have been given a diagnosis of schizophrenia, Huntington's Disease, or Tourette's Syndrome.¹⁹
- This section contains state and regional data on AP drugging rates and AP citations (F758 Free from Unnecessary Psychotropic Meds/PRN Use), including key findings, a map data
 visualization, and tables. Note: F758 comprises citations for any inappropriate psychotropic
 drugging. Thus, it captures inappropriate antipsychotic drugging as well as the inappropriate

¹⁷ For more information and resources on the inappropriate use of antipsychotic drugs in nursing homes, visit our Dementia Care Advocacy Toolkit at https://nursinghome411.org/learn/dementia-care-advocacy-toolkit/.

¹⁸ Public Health Advisory: Deaths with Antipsychotics in Elderly Patients with Behavioral Disturbances, U.S. Food and Drug Administration (April 11, 2005). Available in the FDA's archived web page, https://wayback.archive-it.org/7993/20170113112252/http://www.fda.gov/Drugs/DrugSafety/PostmarketDrugSafetyInformationforPatient sandProviders/ucm053171.htm.

¹⁹ Thomas, Katie, Gebeloff, Robert, and Silver-Greenberg, Jessica, "Phony Diagnoses Hide High Rates of Drugging at Nursing Homes," *The New York Times* (Sep 11, 2021). Available at https://www.nytimes.com/2021/09/11/health/nursing-homes-schizophrenia-antipsychotics.html.

- use of other psychoactive drugs, such as antidepressants. There is no F-tag that solely addresses antipsychotics.
- Methodology: Citation Rates for inappropriate antipsychotic drugging (RAP Citation Rate) were calculated based on AP citations (F758) from 2018-20 and the number of residents receiving antipsychotics (RAP) in the fourth quarter of 2019 (MDS 3.0 Frequency Report (Q4 2019), N0410A: Medications Medications Received Antipsychotic).

Key Findings

- Though the use of chemical restraints has been prohibited for 30 years, and CMS has focused specifically on eliminating the inappropriate use of AP drugs in U.S nursing homes since 2012,
 - close to 20% of facility residents over a quartermillion people – were administered one or more antipsychotic drug.
- Federal data indicate an average of just eight (8.1) AP citations per year for every 1,000 residents reported to be receiving antipsychotics.
- of the 6,157 AP citations recorded over the entire threeyear period, 31 (less than one percent) were categorized as harm (G+). In other words, **even when surveyors substantiate inappropriate resident drugging, 99.5% of the time they find no resident harm**.
- CMS Region 2 (NJ, NY, PR) ranked at the bottom in respect to annual citation rates, recording 8.1 AP citations for every 1,000 RAP. Regions 1 and 2 recorded zero G+ AP citations, meaning that surveyors in those regions **never** identified inappropriate drugging as harmful to residents. Regions 3, 4, and 8 each recorded 1 citation at G+.
- Region 10 (serving the northwest) ranked 1st in Annual RAP citation rate (26.1 per 1k residents) and in % Harm AP citations (1.35%).
- Smaller states/territories including Alaska, Puerto Rico, Wyoming, Utah, Oregon, Delaware, Idaho, and Hawaii recorded higher RAP citation rates, while Washington and Oregon ranked in the top 10.
- The states with the lowest RAP citation rates (Alabama, Louisiana, Mississippi, Kentucky, Georgia) were all located in the southern United States in Regions 4 and 6 (see Figure 6).
- These findings indicate that, despite years of training for both state surveyors and nursing home staff on the dangers of antipsychotic drugs,
 - Widespread antipsychotic drugging persists and
 - State surveyors are disinclined to hold nursing home accountable for it.

What is RAP Citation Rate?

RAP Citation Rate measures the number of antipsychotic drugging citations per 1,000 residents receiving antipsychotics (RAP). • A Journal of the American Geriatrics Society²⁰ study found disproportionate increases in schizophrenia diagnoses among Black nursing home residents with Alzheimer's and related dementia (ADRD). Correlation analysis of our data indicates a weak-moderate (r=-0.35) negative association between a state's share of Black residents and its RAP citation rate. In other words, states with more Black residents were less likely to identify AP drugging violations, adjusting for share of populations receiving antipsychotics.

Data: Maps and Tables

RAP Antipsychotic Citation Rate and Severity by State (2018-20)

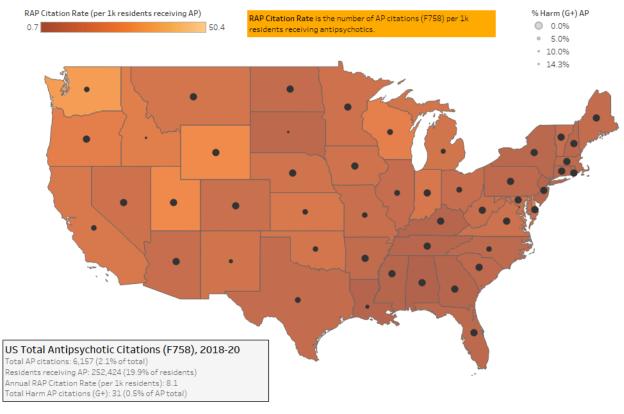


Figure 5: Annual RAP Citation Rate (AP citations (F758) per 1k residents receiving antipsychotics) during the three-year period from 2018-20. Darker shades indicate lower RAP rates; larger circles indicate lower proportion of Harm (G+) citation. See *Figure 6* for info on Alaska, Hawaii, and Puerto Rico.

²⁰ Fashaw-Walters, Shekinah, McCreedy, Ellen, Bynum, Julie, Thomas, Kali, and Shireman, Theresa, "Disproportionate increases in schizophrenia diagnoses among Black nursing home residents with ADRD," *Journal of the American Geriatrics Society* (Sep 30, 2021). Available at https://agsjournals.onlinelibrary.wiley.com/doi/10.1111/jgs.17464.

	AP Citations (F758)	(residents receiving AP)	Annual RAP Citation Rate (per 1k RAP)	Rank: Annual RAP Citation Rate	Harm (G+) AP	% Harm (G+) AP	Rank: % Harm (G+) AP
AK	13	13.1%	50.4	1	0	0.0%	17
AL AR	11 57	24.0% 16.7%	0.7 6.7	52 34	0	0.0%	17 17
AZ	49	18.0%	8.3	28	0	0.0%	17
CA	895	20.1%	15.1	11	9	1.0%	8
CO	86	19.3%	9.4	24	0	0.0%	17
CT	52	23.0%	3.6	45	0	0.0%	17
DC	7	19.2%	5.4	38	1	14.3%	1
DE	39	17.0%	19.1	8	0	0.0%	17
FL	185	18.3%	4.8	41	0	0.0%	17
GA HI	64 16	23.0% 9.4%	2.8 16.3	48 10	0	0.0%	17 17
IA	137	18.3%	11.2	19	0	0.0%	17
ID	44	20.9%	18.2	9	3	6.8%	2
ΪĹ	403	27.1%	7.8	30	1	0.2%	16
IN	297	18.3%	14.5	13	0	0.0%	17
KS	153	21.3%	14.8	12	1	0.7%	11
KY	38	20.2%	2.8	49	0	0.0%	17
LA	34	23.3%	1.9	51	1	2.9%	4
MA MD	146	23.0%	5.9	35	0	0.0%	17
ME	118 25	17.8% 20.1%	9.6 7.5	23 31	0	0.0%	17 17
MI	228	17.0%	12.4	16	3	1.3%	6
MN	131	18.1%	10.6	21	0	0.0%	17
MO	242	25.6%	8.7	26	2	0.8%	9
MS	29	23.2%	2.7	50	0	0.0%	17
MT	26	17.4%	13.2	15	0	0.0%	17
NC	88	16.3%	5.1	39	1	1.1%	7
ND	21	19.1%	7.1	33	0	0.0%	17
NE NH	75 14	20.1% 19.1%	11.7 3.9	18 42	0	0.0%	17 17
NJ	65	18.2%	2.9	47	0	0.0%	17
NM	36	19.0%	11.8	17	1	2.8%	5
NV	35	19.7%	11.0	20	0	0.0%	17
NY	200	17.2%	3.9	43	0	0.0%	17
OH	400	23.2%	8.4	27	2	0.5%	14
OK	162	22.7%	13.7	14	1	0.6%	12
OR	71	18.2%	19.2	7	0	0.0%	17
PA PR	246	20.1% 4.8%	5.6 37.0	36 2	0	0.0%	17 17
RI	16	19.7%	3.7	44	0	0.0%	17
SC	47	17.7%	5.4	37	0	0.0%	17
SD	15	18.5%	5.0	40	1	6.7%	3
TN	51	20.1%	3.3	46	0	0.0%	17
TX	356	17.7%		32	1	0.3%	15
UT	70	17.8%	24.7	5	0	0.0%	17
VA	150	18.4%	10.1	22	0	0.0%	17
VT WA	10	17.6%	8.0	29	0	0.0%	17
WI	243 185	17.5% 15.2%	31.1 19.8	3	2	0.8% 0.5%	10 13
WV	47	19.0%	9.0	25	0	0.5%	17
WY	28	16.6%	25.3	4	0	0.0%	17

Figure 6: RAP citation (F758) rate and AP citation severity by state (2018-20).

Note: Most states recorded zero Harm AP citations during the three-year period.

	AP Citations (F758)	RAP % (residents receiving AP)	Annual RAP Citation Rate (per 1k RAP)	Rank: RAP Citation Rate	Harm (G+) AP	% Harm (G+) AP	Rank: % Harm (G+) AP
Region 1	263	22.0%	5.1	8	0	0.0%	9
Region 2	266	17.4%	3.6	10	0	0.0%	9
Region 3	607	19.2%	7.7	6	1	0.2%	8
Region 4	513	19.8%	3.6	9	1	0.2%	7
Region 5	1,644	21.4%	10.3	5	7	0.4%	5
Region 6	645	19.1%	7.3	7	4	0.6%	3
Region 7	607	22.2%	10.7	4	3	0.5%	4
Region 8	246	18.6%	11.7	3	1	0.4%	6
Region 9	995	19.6%	14.4	2	9	0.9%	2
Region 10	371	18.0%	26.1	1	5	1.3%	1



Sources:

CMS Health Deficiencies (Downloaded March 2021; excludes surveys before 2018 and after 2021). MDS 3.0 Frequency Reports (Q4 2019). See "N0410A: Medications - Medications Received - Antipsychotic")

Notes:

RAP Citation Rate: AP citations (F758) per 1k residents receiving antipsychotics.

Harm: citation rated G or above. Immediate Jeopardy (IJ): citation rated J or above.



Figure 7: RAP citation (F758) rate and AP citation severity by region (2018-20).

Interactive charts and maps are available at https://nursinghome411.org/survey-data-report/.