

Consumer Guide

Antipsychotics and Residents Your Right to be Informed and Give Consent



Antipsychotic Medication

Antipsychotic medications are powerful drugs that are clinically indicated to treat patients that suffer from severe mental disorders including delusions, hallucinations and schizophrenia. These drugs may cause very serious side effects, including increasing the risk of death when used to treat dementia symptoms among the elderly. The US Food and Drug Administration (FDA) requires a warning on the label of all antipsychotic drugs. Such "black box" warnings are only required for drugs with serious risks.

if antipsychotic medications are suggested, **ask** questions

Ask why the antipsychotic is suggested and for what medical symptom.

Ask the doctor to discuss with you the black box warning, and review all of the risks, benefits, and alternatives before you consent for antipsychotics.

Ask the doctor if they have personally examined the resident to make sure they are not calling in a prescription because staff requested that "something be done".

Ask to attend the resident's care plan conference with resident consent.

Ask what else could be tried.

Ask for a second opinion.

Ask for a monthly review to determine the effectiveness of the antipsychotic.

Ask if the medication can be gradually reduced.

Ask about the grievance procedure at your facility and how to get answers and accountability.

Ask if there is a family council at the facility, or start one.

Don't be afraid to just say "no" if all other options haven't been tried.

RESIDENT **RIGHTS**

The State of California requires informed consent

- » Residents and/or their representative must be fully informed about the risks and benefits of any medication.
- » Medication cannot be dispensed without the authorization of the patient or representative.
- » Resident records must contain documentation that informed consent has been obtained for the administration of antipsychotic medication.
- » Residents have the right to accept or refuse medication.
- » To ask what non-pharmacological alternatives are available, and whether the facility has tried those alternatives before the physician recommends that medication.



Everyone can help reduce the misuse of antipsychotic

BE RESIDENT CENTERED.

Advocate for the resident's expressed wishes. Meet the resident on their level and rely on their forms of communication, including behavioral and non-verbal cues.

KNOW THE RESIDENT.

What were the resident's past social histories, occupations, habits and routines? The resident living with dementia is still a person inside.

COMMUNICATE AS A TEAM. Communicate with staff, families and friends of the resident. Work together to identify and resolve behaviors and obstacles.

KEEP TRACK OF PATTERNS.

Eliminate triggers and anticipate resident needs. By keeping track of ongoing behaviors and patterns, you may, for example, identify if the resident has an infection or is in pain. Find out what has already been tried. Discuss with the care team and experts what alternatives to medications, including nonpharmacological methods, are available.

Always use non-drug treatments first. Non-drug treatments include changes in lifestyle, environment, and caregiver approach.

RESOURCES

Alzheimer's Association alz.org

CA Culture Change Coalition calculturechange.org

California Partnership to Improve Dementia Care dementiacareresourceCA.org

California Advocates for Nursing Home Reform canhr.org

The Consumer Voice for Quality Long-Term Care theconsumervoice.org

Access the Informed Consent Form at dementiacareresourceCA.org



did you?

Most California physicians who provide care for residents of skilled nursing facilities are already well aware that under California law, physicians are responsible for obtaining informed consent for the use of antipsychotic (and other psychotropic) medications in nursing homes. California Health and Safety Code section 1418.9 addresses this issue.*

Before administering an antipsychotic medication to a resident, nursing home staff must verify that the prescriber has indeed provided to the resident, or the residents' legal representative, information about the recommended medication and its effects, so that the resident or legal representative can truly provide informed consent.



The Food and Drug Administration (FDA) does not approve of the use of antipsychotic medications for the treatment of behavioral symptoms in elders with dementia. The FDA requires drug manufacturers to place a "black box" warning on antipsychotic drugs, indicating that dementia patients treated with antipsychotic medication are at an increased risk of death.



*1418.9. (a) If the attending physician and surgeon of a resident in a skilled nursing facility prescribes, orders, or increases an order for an antipsychotic medication for the resident, the physician and surgeon shall do both of the following:

(1) Obtain the informed consent of the resident for purposes of prescribing, ordering, or increasing an order for the medication.
(2) Seek the consent of the resident to notify the resident's interested family member, as designated in the medical record. If the resident consents to the notice, the physician and surgeon shall make reasonable attempts, either personally or through a designee, to notify the interested family member, as designated in the medical record, within 48 hours of the prescription, order, or increase of an order.

The effective management of medication is one of the most important aspects of nursing home care. Residents in skilled nursing facilities are often prescribed multiple medications and family members are encouraged to keep track of the types of drugs and dosage amounts to help ensure their safe and effective use – and to understand the rights which are guaranteed to every resident.





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