

**Overcoming the
Impact of COVID-19
on Psychotropic
Medication Reduction**





OVERVIEW

During the past decade, senior living communities and long-term care (LTC) pharmacies have made great strides reducing psychotropic medication use among residents. But, with the onset of COVID-19, many communities were forced to turn their full attention to fighting this disease, and rightfully so. Five percent of all cases and 37 percent of all COVID-19 deaths in the U.S. originated from LTC facilities¹. Unfortunately, the guidelines and regulations established to mitigate the spread of COVID-19, have impacted the mental wellbeing of many residents who cite conditions such as increased anxiety, depression and inability to sleep among their experiences. While, statistically, few studies point to increased use of psychoactives to treat these issues, anecdotally, this appears to be the case.

At a time when attention to psychotropic use and reduction is potentially more critical than ever, it has proven difficult for many communities to remain focused on these issues and adjust to the pandemic's roadblocks.

Discover how COVID-19 has impacted psychotropic medication reduction and steps you can take to continue these efforts while reducing additional stress on residents.

UNINTENDED CONSEQUENCES OF COVID-19

The restrictions implemented to protect residents against the pandemic have altered their daily lives, causing multiple stressors, and resulting in mental health symptoms that make it more difficult for physicians treating these residents to determine the appropriate diagnosis and medication dosage when adding or reducing psychoactive drugs. These include:

- **Anxiety and depression:** In July 2020, 46% of adults age 65 and older believed worry and stress linked to COVID-19 had a negative effect on their mental health, up from 31% in May. Overall, one in four older adults reported anxiety or depression since the pandemic began last March. For comparison, in 2018, only one in 10 older adults disclosed similar symptoms².
- **Social isolation:** Many residents have been sequestered in their rooms, cut off from communal dining, regular exercise and social activities, making them more vulnerable to loneliness and cognitive decline.
- **Limited interactions with loved ones:** Most seniors have not had in-person visits with family and friends, being forced to communicate strictly via phone or video. For many, they must rely on the availability of staff to facilitate virtual chats because they may not be accustomed using this technology.
- **Unfamiliarity:** Residents may have trouble hearing and recognizing staff wearing masks and other personal protective equipment (PPE). This has made communication and engagement even more challenging.
- **Trauma:** Illness and death caused by the disease may upset residents, causing confusion, difficulty coping with what is happening around them, and sometimes triggering post-traumatic stress symptoms or other mental health conditions.

The virus and its surrounding circumstances have stretched staff to their limits, further complicating their ability to provide patient-centered care. This type of patient-specific care is even more important in difficult times.





HOW YOUR COMMUNITY CAN REDUCE PSYCHOTROPIC MEDICATION USE

Reducing a resident's psychoactive medication use is key to enhancing their safety and quality of life, but that task can be quite challenging as more residents experience increased isolation, depression and anxiety. Discontinuing efforts to decrease psychotropic medication use is a short-term fix with potentially devastating long-term consequences. Your LTC clinical or consultant pharmacist can help adjust your process and adapt to the restraints of COVID-19 in order to stay on track. Here is what you should expect from your preferred pharmacy:

- **Collaboration with the interdisciplinary team:** Maintaining a strong working relationship with the resident's interdisciplinary team, even if virtually, is the best way to manage psychotropic medication use, mitigate risks, ensure patient safety and maintain regulatory compliance. This team includes the certified medication aide (CMA), resident care director, clinical or consultant pharmacist, and nurse practitioner or physician.
- **Consistent onsite or virtual reviews:** Your pharmacy can conduct regular reviews of each resident's medication regimen, evaluating all drugs with a keen focus on those psychoactive medications. Depending on your community's COVID-19 policies, these reviews can be done onsite or virtually, as long as the pharmacist has the necessary access to the resident's records.
- **Confirmation of appropriate indication:** Verifying a resident's psychotropic medication use and diagnosis during a review is important. Particularly in the ALF setting, where consultant pharmacists are more reliant on staff notes, especially during COVID-19, to understand why residents are on specific medications. If the notes do not provide clarity, expect your pharmacist to call your community directly.
- **Evaluation of proper dosing & monitoring for side effects:** Your pharmacists will review and ensure dosages are within range of the recommended psychotropic medication guidelines. Most states require CMAs to monitor for side effects, and your partner pharmacy can help them recognize warning signs, from falls and lack of engagement to weight gain and uncontrollable movements. Side effects may also be listed on MARs for easy reference and documentation. Consistent communication with the aide is critical to understanding when reductions are needed since the pharmacist does not have as frequent interactions with the residents as the facility staff does.



- **Community and resident analytics reports:** Your LTC pharmacy should regularly provide reporting as it is important that you have a full picture of what’s happening in your community. The best reports show current rates of psychotropic medication use, detailed resident-level reporting, historical trending and how your community compares to state and national averages. Reviewing the right analytics can help you avoid citations, remain compliant with local regulations and increase the safety and well-being of your community.

PROMOTE RESIDENT WELLNESS: BUILDING A FUN, ENGAGING ENVIRONMENT

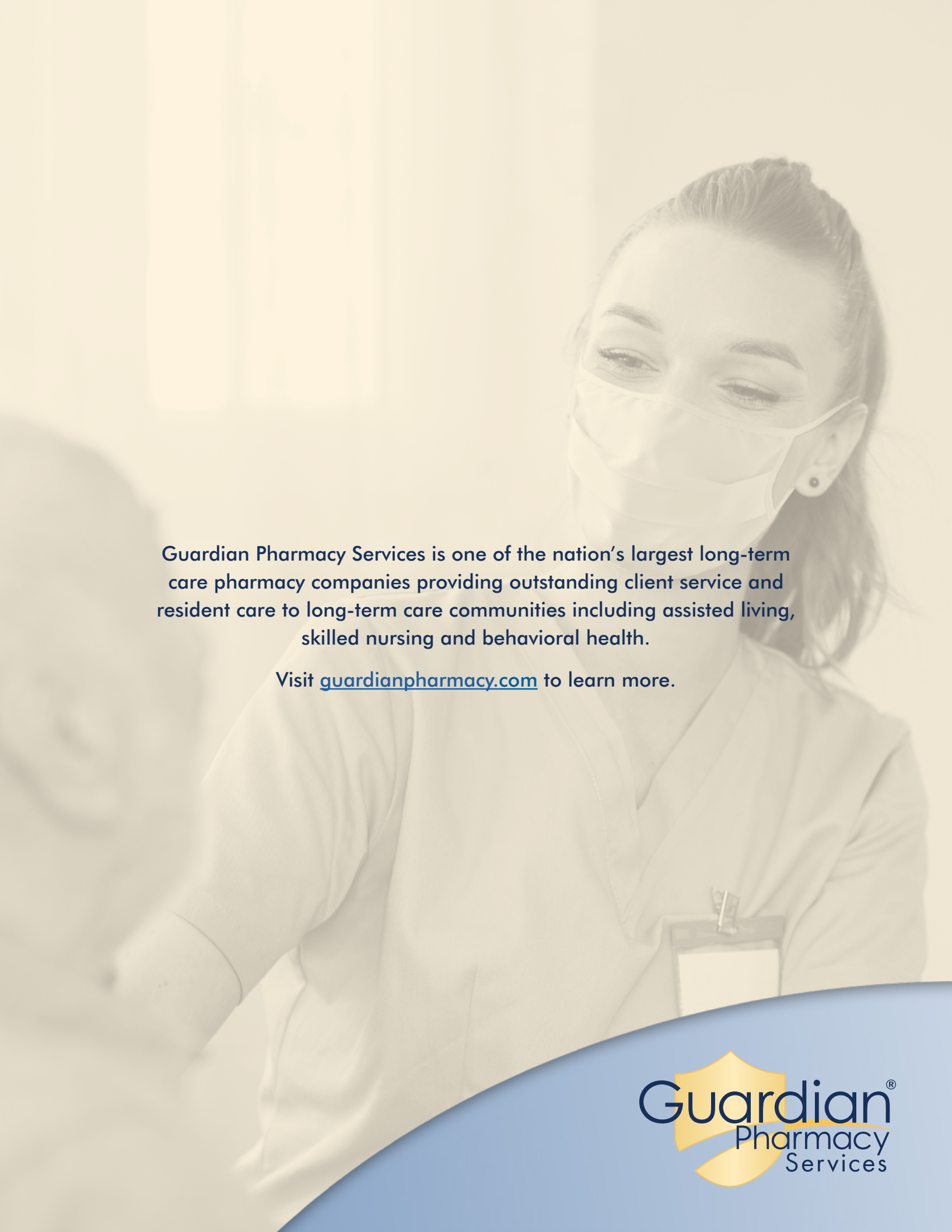
A successful psychotropic medication reduction program extends beyond the medications themselves. Residents also need an environment where they can overcome anxiety, depression and other COVID-19-related stressors. Here are a few successful tactics worth considering:

- **Bring back a sense of normalcy:** Allow congregate dining to resume – socially distanced, wearing masks while not eating or drinking. Have the closed-circuit tv system air activities for those residents restricted to their rooms or use outdoor space for seniors to enjoy live music and bingo. Visit each resident’s room, letting them choose snacks, books or puzzles from a cart.
- **Establish a connection with family and friends:** Allow in-person interactions among community residents wearing masks and sitting in their doorways. Organize outdoor and drive-thru family visits and create a program devoted to helping residents schedule and facilitate regular video chats with loved ones.
- **Expect assistance:** All of us are in this together, and your partner pharmacy wants to support you through this journey. Minding safety protocols, our pharmacies have opened up outdoor lemonade stands to renew in-person relationships with community staff, participated in drive-by parades and launched pen pal programs as an escape for residents seeking a diversion while in social isolation.

Despite many challenges, it is critical to remain diligent in psychotropic medication reduction efforts, if possible, during the pandemic. Staying engaged with your partner pharmacy and everyone on your interdisciplinary team will help drive this process. Your ongoing investment to continually manage these medications today will set the tone for the current environment within your community and pay dividends in the future.

¹ “State COVID-19 Data and Policy Actions – Sources.” Kaiser Family Foundation, 10 Feb. 2021, www.kff.org/report-section/state-covid-19-data-and-policy-actions-sources/

² “One in Four Older Adults Report Anxiety or Depression Amid the COVID-19 Pandemic.” Kaiser Family Foundation, 9 Oct. 2020, www.kff.org/medicare/issue-brief/one-in-four-older-adults-report-anxiety-or-depression-amid-the-covid-19-pandemic/



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