

## In This Issue

In this month's *Hot Topics Newsletter*, we feature the latest research exploring mental health, substance use and other behavioral health issues in the nursing home setting. Older adults in nursing homes have high rates of mental and behavioral health issues and are particularly vulnerable to elder abuse and neglect. Despite the high prevalence of mental and behavioral issues, nursing home staff are often under-equipped in both resources and training to address these types of concerns. These shortcomings not only result in the failure to serve older nursing home residents' mental health needs, but the lack of mental health training and resources adds unnecessary stress and burden for nursing home staff and can lead to inappropriate and unsafe prescribing of medications for behavior management. Although there have been decades of nursing home reform and legislation to address these issues, there is still much work to be done, particularly for facilities serving older adults in marginalized communities. Part of the E4 Center's mission involves working to close these gaps in training and care to more equitably serve older adults in all communities. For more information, please check the [E4 Events Calendar](#).



## Serious Mental Illness in Nursing Homes

### **Abuse and Neglect in Nursing Homes: The Role of Serious Mental Illness** *The Gerontologist. January, 2022*

Jester and colleagues examined national Certification and Survey Provider Enhanced Reports data for all freestanding certified nursing homes in the continental US from 2014 to 2017. They compared nursing homes in the highest quartile for proportion of patients with serious mental illness (High-SMI) with all other nursing facilities and found that facilities in the High SMI group were more likely to be cited for resident abuse or neglect. Mediating factors such as staffing levels must be further explored.

### **Evaluation of Antipsychotic Reduction Efforts Among Patients with Dementia in Veterans Health Administration Nursing Homes** *American Journal of Psychiatry. August, 2022*

In the wake of initiatives set by the Veterans Health Administration (VHA) and the Centers for Medicare and Medicaid Services (CMS) to reduce off-label use of antipsychotics in dementia patients in nursing homes, Gerlach and colleagues report on trends in prescribing of antipsychotics and other CNS-active medications in VHA nursing homes from 2009-2018. Their sample was all veterans with dementia residing in VHA nursing homes for more than 30 days (N=35,742). Results showed that antipsychotic and anxiolytic prescribing declined, but that

overall prescribing of antiepileptic, antidepressant, and opioid medications increased. The authors conclude that there must be more careful monitoring of CNS-active medications in this population and incentives for evidence based non-pharmacological treatments in dementia care.

### **Community, Social, and Facility Factors and Long-stay Antipsychotic Use** *Clinical Gerontologist. April, 2022*

Winter and colleagues analyzed 2018 CMS data from nursing homes in Virginia to determine the impact of social determinants of health and facility factors on antipsychotic use. The rate of antipsychotic use in the top quintile group of nursing homes was five times higher than the rates of antipsychotic use for the bottom quintile group of nursing homes. Nursing home facilities with the lowest antipsychotic use (bottom quintile facilities) were more likely to be privately-owned and more likely to serve residents who were, white and had superior scores in all 18 social determinants of health characteristics. Initiatives targeting inappropriate use of antipsychotics in nursing homes must address these demographic and social factors in order to target populations at the highest risk and address disparities in inappropriate prescribing.

**Effectiveness of a resilience-targeted intervention based on “I have, I am, I can” strategy on nursing home older adults’ suicidal ideation: A randomized controlled trial** *Journal of Affective Disorders*. April, 2022

Zhang and colleagues report data from their RCT examining the efficacy of a resilience training intervention for nursing home residents with suicidal ideation. Sixty-eight older nursing home residents reporting suicidal ideation were recruited into an “I have, I am, I can” resilience training intervention or a waitlist control group. Participants in the resilience training group reported decreased suicidal ideation and depressive symptoms that were mediated by changes in resilience. Future work should examine the long-term sustainability of this brief, face-to-face intervention.

**Trajectory and Predictors of Mental Health Symptoms and Wellbeing in Newly Admitted Nursing Home Residents** *Clinical Gerontologist*. December, 2021

Davison and colleagues assessed older adults recently admitted to Australian nursing homes on several measures of mental health and wellbeing with repeat assessment at eight months post-admission. While rates of depressive and anxious symptoms were high at baseline and follow-up, higher perceived-control in the placement transition as well as engagement in meaningful activities were associated with better post-admission wellbeing. These results suggest that adjustment to nursing home placement may be improved when efforts are made to enhance feelings of control throughout the process and engage older adults in activities of value.

**Depressive Symptoms and Ageism among Nursing Home Residents: The Role of Social Support** *International Journal of Environmental Research and Public Health*. September, 2022

Xu and colleagues examined relationships among ageism, depressive symptoms, and social support in older adults in nursing homes in China. Older Chinese nursing home residents reported moderate amounts of ageism. They also found that social support may buffer the relationship between depression and ageism in this population, which may reflect cultural values, as Chinese older adults’ self-image may be tied to role in the family and relationships. Further research is required to determine whether these same relationships would be found among older Chinese nursing home residents in the US.

**Association Between Long-Term Care Facility Staffing Levels and Antipsychotic Use in US Long-Term Care Facilities** *The Journal of Post-Acute and Long-Term Care Medicine*. November, 2022

Chappell and colleagues analyzed data from 10,436 long-term care (LTC) facilities from the Nursing Home Compare and LTCFocus datasets to determine relationships among LTC facility staffing characteristics and inappropriate antipsychotic use. Their results showed that inappropriate antipsychotic prescribing decreased with higher staffing ratios. They also found that inappropriate prescribing was particularly reduced with RN and LNP staffing hours increased. These results suggest that policy-based interventions that emphasize increasing LTC staffing and skill may result in decreases in inappropriate antipsychotic prescribing.

## Upcoming Events

You can register for these events or learn more by going to our website at [e4center.org/calendar](https://e4center.org/calendar)

DEC

**Cognitive Behavioral Therapy for Insomnia: Implementation and Effectiveness with Older Adults**

December 2  
@ 11:00 am - 1:00 pm CST

**Holiday Drinking: Helping Older Adults Be Happier and Safer**

December 7  
@ 12:00 pm - 1:30 pm CST



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