

## Abstract

**Background:** Antipsychotics are not a standard pharmacologic regimen for the management of dementia-related behavioral symptoms. However, its off-label use continues to be practiced in nursing homes according to the Centers for Medicare and Medicaid Services (CMS, 2014). The CMS discourages such practice, labelling it as equivalent to using chemical restraints, and emphasizing that antipsychotics should not be used for the convenience of caregivers. Studies suggest that staff education can reduce this problem. **Aim:** The purpose of this Doctor of Nursing Practice (DNP) project was to develop and implement an in-house educational program to the staff of a dementia care unit, focusing on the nonpharmacologic management of behavioral symptoms to enhance resident outcomes. **Design:** Eighteen staff members attended the program. Fifteen residents were involved in the project. The residents were assessed prior to intervention using the Appropriate Psychotropic Drugs Use in Dementia (APID) index scores. The staff members were encouraged to apply the knowledge gained from the in-house educational program to residents in the dementia care unit. After two months, the residents were re-assessed using the same tool. **Results:** All of the 15 residents (100%) had improved APID Index scores from a summated mean of 4.01 to 1.47, which was a 66.54% improvement, with the corresponding P-value of 0.00. The results suggest that an in-house educational program may be an effective intervention in reducing the inappropriate use of antipsychotics in residents with dementia. A dialogue with the clinical leaders of the setting may be necessary to sustain the changed practice behavior and continue the benefits of the program.

*Keywords:* dementia, antipsychotics, caregiver training, BPSD

