Appropriate dementia care includes more than managing individuals with dementia-related behavior. It also requires minimizing and managing the various factors that maintain overall health and physical stability and optimize function in residents who are often complex and may suffer from multiple chronic conditions. How do caregivers collaborate with practitioners to properly assess behavior carefully and systematically, to help rule out critical underlying causes, including (but not limited to) environmental, functional, and other possibly correctable causes or serious medical conditions such as delirium? Does the facility have detailed process guidance for staff regarding the assessment, documentation, and reporting of all symptoms and changes in condition, including behavior? Are they reviewing and addressing staff performance in these areas, based on individual cases?

**Direct Caregivers**

1. How does staff address behavioral responses by persons with dementia in your facility, such as anxiousness or aggressiveness?

2. Do you know if your facility has policies and procedures in place that you are supposed to follow when a resident with dementia exhibits certain behaviors, or those behaviors worsen?

3. What training have you received about how to care for persons with dementia?
   a. Who provides the training?
   b. Do you know what materials are used?
   c. Does the training give you a chance to practice how you would respond?

4. When a resident with dementia demonstrates certain behaviors such as anxiety or aggression, is he or she given a medication to treat them?
   a. Do you know whether the team at your facility is trying to reduce the use of these drugs?

5. Are residents and families given information about care options for persons with dementia, including those that do or do not use medications?
Leadership- (Nursing Home Administrator, Director of Nursing, Medical Director)

1. How will your facility measure success in improving dementia care and reducing or optimizing antipsychotic drug use?

2. What do you see as the major barriers to accomplishing this?

3. Are you currently reviewing data related to antipsychotic drug use for all residents, including residents that are returning or were recently discharged from an acute care setting?

4. Are there tools/resources/support that would assist you in analyzing and interpreting data?
   For example, telephone or in-person support from:
   a. A member of your state nursing home association;
   b. A consultant;
   c. A quality improvement organization;
   d. Other state-based nursing home specialist?

5. If your facility is part of a corporation, does the corporation provide educational materials, clinical support or data analysis related to dementia care and/or antipsychotic drug use?

6. Is staff in all departments educated on person-centered care for individuals with dementia?

7. How is the Consultant Pharmacist involved in the overall care of residents?
   For example, does the Consultant Pharmacist routinely engage in:
   a. Data analysis;
   b. Staff education;
   c. Routine interaction with residents and/or families?

8. How is the Medical Director involved in the overall care of residents with dementia?