

Welcome! We will get started momentarily.

- Using Chat, please enter your name and organization.
- How to use Chat:
 - 1. Click on the Chat icon.
 - 2. Select who you want to send your message to (individual or everyone).
 - 3. Type and send your message.
- Please use Chat to submit questions for our speakers.



Preventing Harm and Risks of Opioid Overdose in Long-Term Care: What's Your Role?

February 29, 2024 | Session 3

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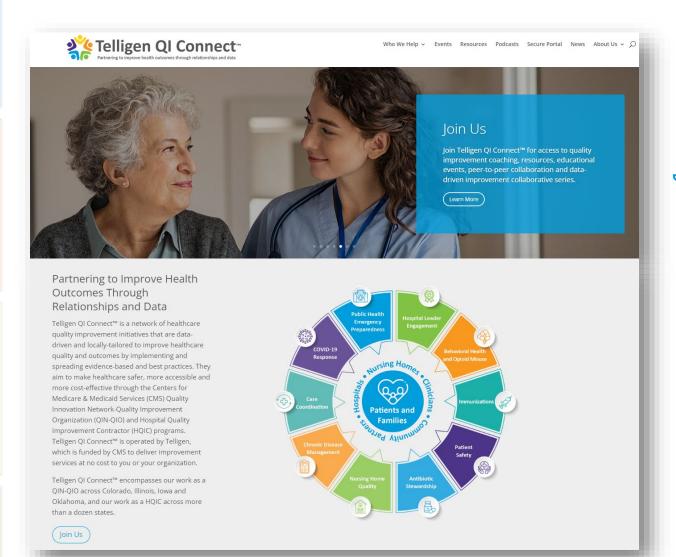




Before We Begin

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What's Your Role in this Pilot?



- Engage, learn and collectively recognize gaps in processes
- Implement action items between sessions
- Work with your Quality Improvement Facilitator
- Identify relevant interventions that will be used in Telligen's QIN-QIO network



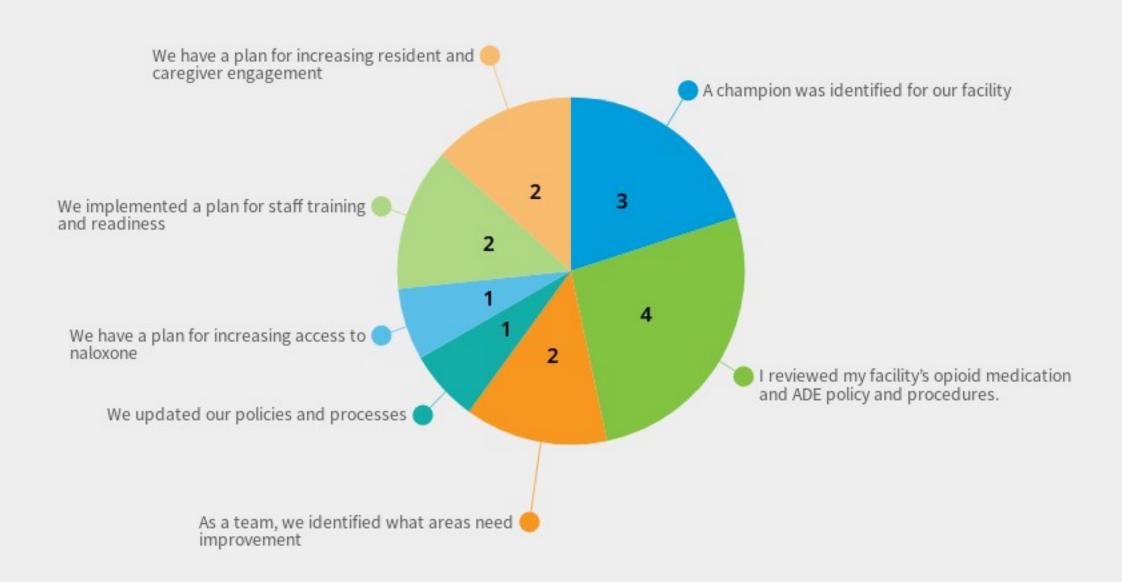
Objectives

- Learn from each other by discussing case studies
- Share your story to identify successes and challenges
- Create a plan based on individualized needs





What items were you able to implement in the last two weeks? Select all that apply.



Case Study One

• Mary is a 65-year-old female that is has lived at a nursing home for long-term care two years. She was experiencing mild groin pain for 24 hours. The physician ordered a topical muscle rub and ice packs that were applied to the area. However, Mary's pain increased to severe 10/10 groin pain. She was given Baclofen and Vicodin three times throughout the day. The CNA reported that during the night shift, Mary attempted to sit up, unable to speak, was vomiting, and unable to follow instructions and unresponsive to her name. She maintained a normal oxygen saturation of 100% on 1 liter of oxygen per minute. Her respiratory rate was 11–12 breaths per minute. Her blood pressure was a little high. She was displaying episodes of apnea.

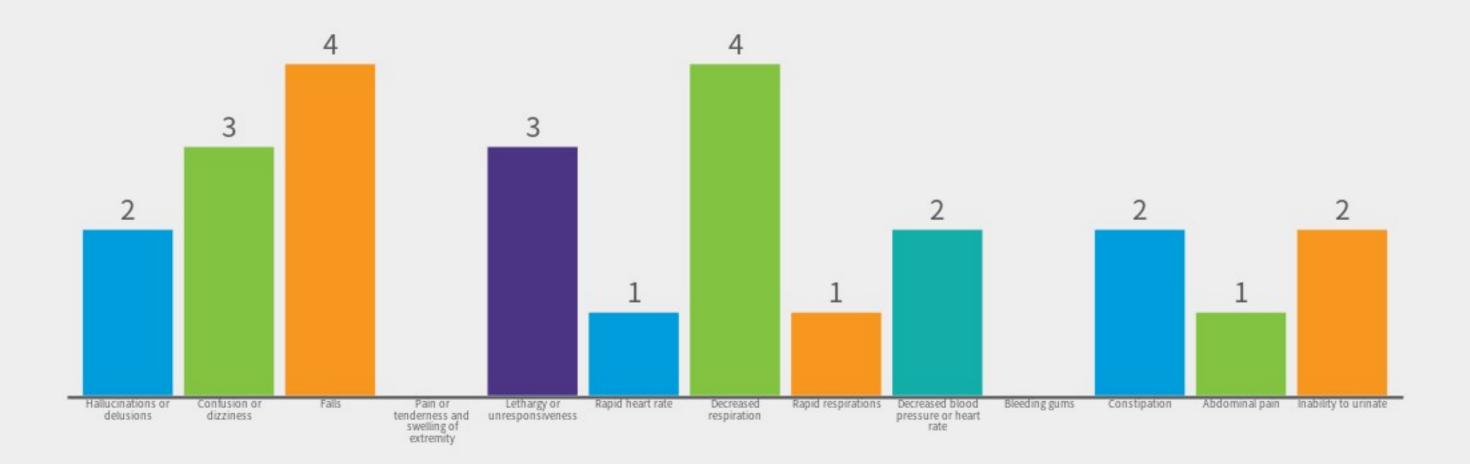


Mentimeter Question (Slide 2 of 3)

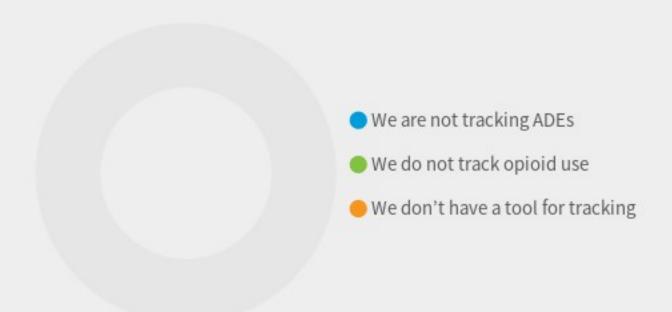
- If your facility is utilizing a tool to track opioid medications and adverse drug events (ADEs), how is that information followed up on to prevent future occurrences? Select all that apply or type in chat.
- We are not tracking ADEs.
- We do not track opioid use.
- We don't have a tool for tracking.



What are the signs and symptoms of an opioid adverse drug event? Select all that apply.



If your facility is utilizing a tool to track opioid medications and ADEs, how is that information followed up on to prevent future occurrences?



In Session 1, we identified several staff members can recognize an adverse drug event (ADE). How are staff trained to recognize an ADE?

Training often includes identifying common symptoms, understanding medication interactions, and reporting procedures to ensure a proactive approach to ADE detection and management.

ADE recognition training for staff typically involves educational sessions, workshops, and practical scenarios to enhance their ability to identify adverse drug events.



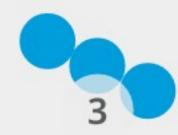
Case Study Two



• John is a 56-year-old male admitted to a nursing home for skilled services. He has Generalized Anxiety Disorder and Adjustment Disorder diagnoses and was admitted on Ativan two times a day and Wellbutrin one time a day. He was in a motor vehicle accident and broke his leg. He was admitted on OxyContin. Upon admission, he requested an increase in the OxyContin dose and the physician declined his request. John has regular visits from family members. Following a visit from his wife, John fell in his room and displayed decreased respiration and slow, shallow breathing. The nurse found John on the floor and a bottle of pills laying on his bed that were not prescribed by his physician. John couldn't answer the nurse's questions, felt cold to touch and was having difficulty staying awake. What are the nurse's next steps?



What is your confidence level in recognizing and responding to opioid adverse drug events?







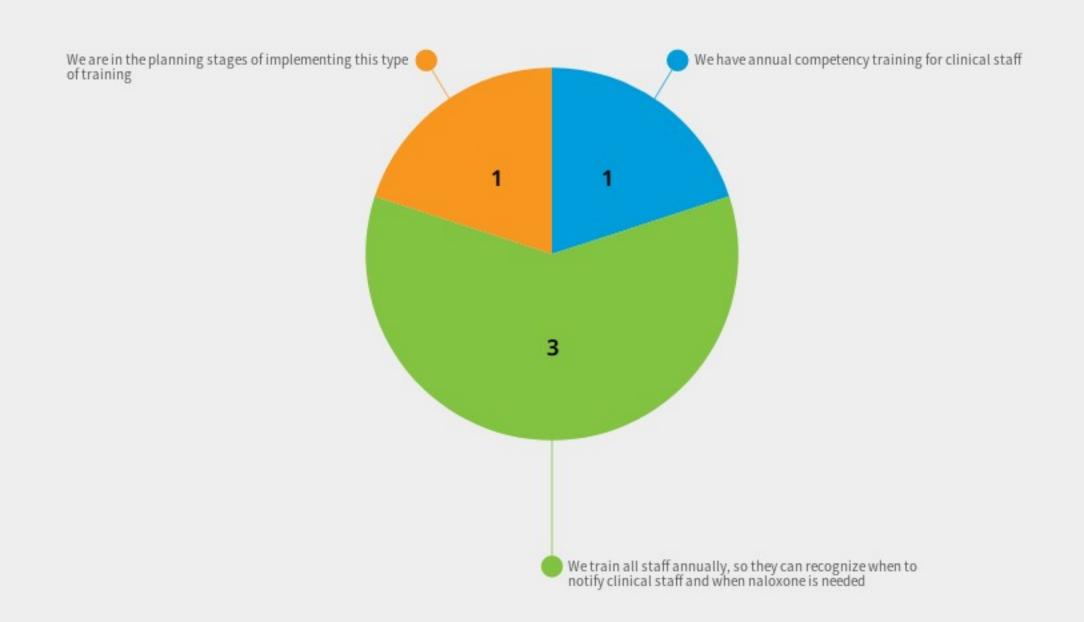
I am confident I can do this and help others do it, as well I am confident I can do this with the assistance of others I am confident I can do this on my own, but may need more practice

0

I have low confidence I can do this without the help of others

I have no confidence I can do this

Tell us about your plan to train staff on how and when to administer naloxone to increase the staffs' confidence level.





>Open
Discussion



Series Highlights

- Familiarize yourself with top diagnosis given to residents who are receiving an opioid upon arrival to hospital
- Ensure in-house data tracking includes opioid medication, symptoms of ADEs and naloxone availability
- Recognize signs and symptoms of opioid adverse events
- Review policies and processes
- Prevent, identify and respond to opioid overdose
- Implement stigma and health equity interventions
- Complete staff training and ensure readiness including resident and caregiver engagement





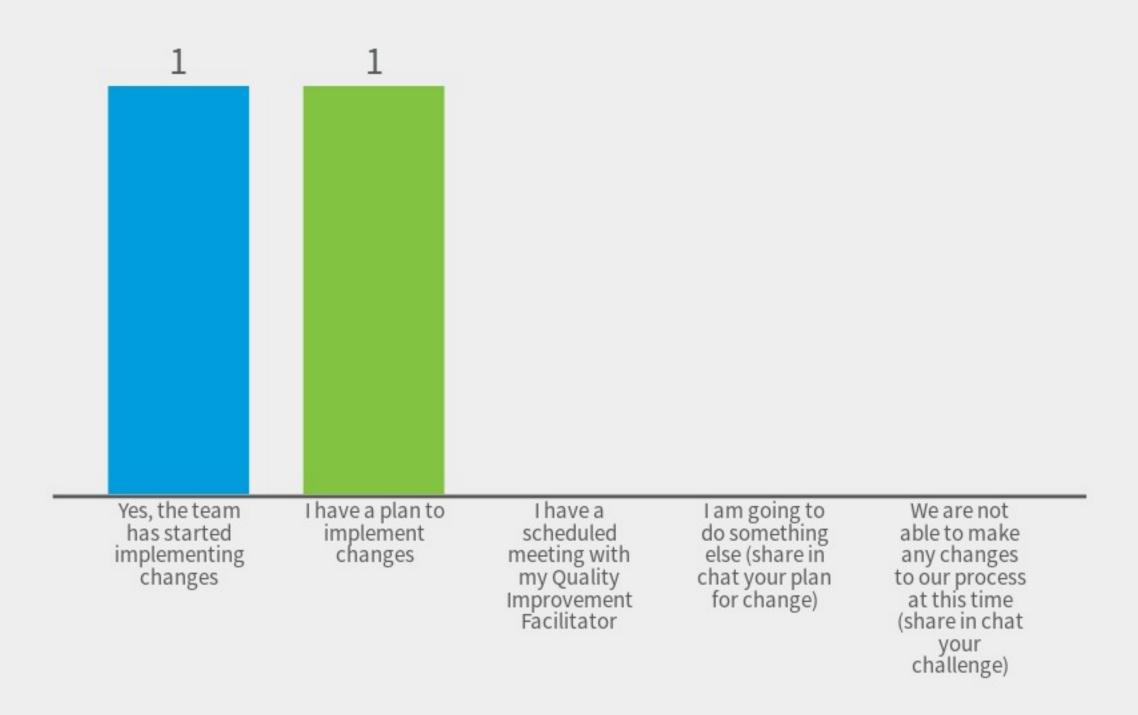
Leave in Action: Where to Start?



- Complete a root cause analysis and examine the problem
- Review and update policies and processes
- Schedule a meeting with your Quality
 Improvement Facilitator to create a plan and/or collaboratively initiate a Performance
 Improvement Project
- Incorporate efforts in your QAPI for process improvement



Do you anticipate making any changes to your process? Select all that apply.



Create a Plan





Take a call from your Telligen
Quality Improvement Facilitator
for 1:1 coaching!



Upcoming Events



Don't miss out on these upcoming events:



Nursing Home Quality Essentials – Cleaning and Disinfection Processes

12 - 12:30 p.m. CT

Registration link



Plan-Do-Study-Act (PDSA) Interactive Training

11 a.m. – 12 p.m. CT

Registration link



Ensuring Medication for Opioid Use Disorder (MOUD) Treatment through the Care Continuum Webinar Series

11 a.m. – 12 p.m. CT

Registration link



How Did We Do? Let Us Know:



Please participate in the post-presentation poll and fill out the assessment here:

https://www.surveymonkey.com/r/2JM6DRL



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DZIĘKUJĘ CI TAPADH LEIBH NGIYABONGA — БАЯРЛАЛАА MISAOTRA ANAO ТЕŞЕККÜR EDERIM — WHAKAWHETALKOF DANKIE TERIMA KASIH KÖSZÖNÖM GRAZIE MATUR NUWUN XBAJABAM MULŢUMESC ТИ БЛАГОДАРАМ ₹ AČIŪ SALAMAT MAHALO IĀ 'OE RAHMAT MERCI T MERCI GRAZZI PAKKA PÉR HATUR NUHUN PAXMAT CAFA

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