

# *Strategies for Supporting Residents with Opioid Use Disorder in Long Term Care Toolkit*

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Residential Care Home Training  
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# Acknowledgement

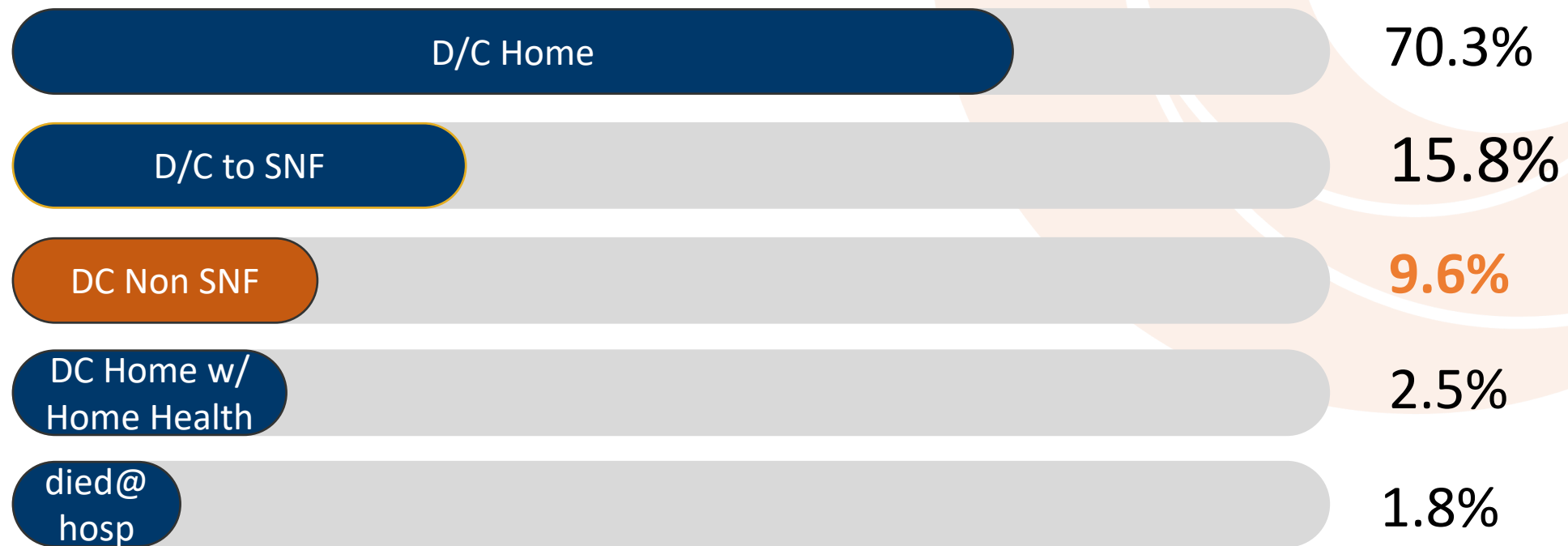
This toolkit was made possible by funding from the Connecticut Department of Mental Health and Addiction Services. We would also like to thank representatives from Connecticut Department of Public Health for their contributions in the development and review of this toolkit and the adjunctive training and implementation of this initiative.



# Objectives

1. Understand the impact of the opioid crisis on the current population and the importance of comprehensive, compassionate care for residents with OUD in LTC.
2. Explore the domains of the toolkit and learn how to utilize its resources to improve care delivery for residents with an OUD.
3. Identify key areas for educational advancement in long-term care to enhance the management and support of residents with an OUD.

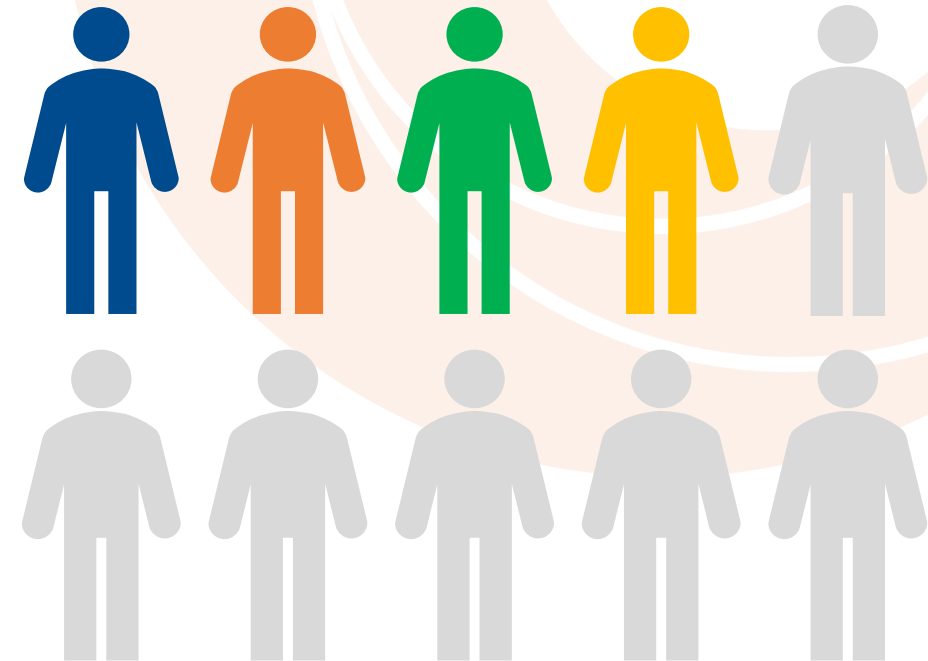
459,763 hospitalized patients with OUD. Of these, patients aged < 65 years and those dually enrolled in Medicaid comprised the majority (59.1%).



# Who are we talking about?

Recognition of subtle differences:

- People for whom recovery has been long, successful, and sustained with Medication for Opioid Use Disorder (MOUD) or other non-pharmacological treatment.
- People who are struggling with OUD and are interested in exploring treatment options.
- People who are actively using Opioids and are not interested in recovery now.



# Audience question:



Has your facility admitted residents with an OUD?

How prepared do you feel your staff were to care for your resident(s) with OUD?

# *What is HATCh?*

Foundation for the toolkit format



# HATCh Holistic Approach to Transformational Change



## 1/ Workplace Practices

The high engagement & performance of all those who labor and whose efforts impact residents (competencies, personal relationships & teamwork).



## 2/ Environment

The deep commitment to confronting environmental challenges whether the physical, social or cultural. Being a place of safety, peace, and trust delivering on its ability to be therapeutic.



## 3/ Care Practices

The ways in which people are cared for spiritually, mentally physically and emotionally. It engages each individual in the architecture of their daily life.



## 4/ Leadership

Leadership becomes a shared, empowered authority inspiring accountability through honest, trusting relationships while gently calling out the best in each individual.



## 5/ Family & Community

Inspiring family engagement, collaboration & support in the care of residents.



## 6/ Stakeholders

Demonstrating an abundance of competency, efficiency and professionalism in responding to the compliance, ethics, regulatory, business systems and service delivery within the organization.



# Toolkit

## Strategies for Supporting Residents with Opioid Use Disorder in Long Term Care



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# Domain 1: Workplace Practice



# Addressing Stigma and Bias

Avoid Stigmatizing Language	
Non-Stigmatizing Language	Rationale
Person with an opioid use disorder Person with a substance use disorder	Neutral, non-judgmental language. Several studies compare “abuser/ abuse” to “person with substance use disorder” and confirm that person-first language is less stigmatizing.
Substance use disorder or addiction Use, misuse Risky, unhealthy, or heavy use	Neutral, non-judgmental language
Person in recovery or person in long-term recovery Abstinent Not drinking or taking drugs	Neutral, non-judgmental language. Several studies compare “abuser/ abuse” to “person with substance use disorder” and confirm that person-first language is less stigmatizing.
Treatment or medication for addiction Medication for Opioid Use Disorder/Medication for Alcohol Use Disorder Positive, negative (toxicology screen results)	Treatments for other diseases are not labelled “medication assisted treatment,” so substance use disorder should not be treated differently. “Replacement” suggests that patients are trading one substance use disorder for another.
Adherent Non-adherent	Neutral, non-judgmental language.
Adapted from: Boston Medical Center <a href="#">Grayken Center for Addiction, Reducing Stigma</a> and Shatter Proof <a href="#">Addiction Language Guide</a>	

# Domain 2: Environmental



Wellness Orientation  
Training

Eight Dimensions of  
Wellness



Person Centered  
Orientation

Food Choices  
Wake at Will



Culturally and  
linguistic Appropriate  
Services

# Eight Dimensions of Wellness



The World Health Organization (WHO) defines wellness as “a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity.”

# Domain 3: Care Practices



- Understanding Opioid Use Disorder
- Trauma-Informed Approach
- Harm Reduction
- Medications for the treatment of OUD
- Care Planning

# Trauma Informed Care



Trust building



Person-  
centered care



Cultural  
humility



Safety



Transparency



Peer Support



# Domain 4: Leadership



# Set up a Qualified Service Organization Agreement

- QSOA is a two-way agreement between a SUD program (OTP or prescriber) and an entity that provides services to the resident (LTCF). It authorizes communication between the parties and restricts the information they may disclose or re-disclose. The QSOA is used only by SUD programs that are subject to Federal Regulation 42 CFR Part 2.12
- QSOAs should be completed before admission to the LTCF.
- QSOAs should include types of services QSOs provide, such as medical services, counseling services, on-site call coverage, treatment plan, etc.
- Discussions between the LTCF and the OTP/prescriber administrators should occur before admitting residents on MOUD.

# Domain 5: Family and Community



- Family inclusion
  - Partnerships with community groups
  - OTPs
- Support Groups
- Discharge partners
- Resident Councils

# Recovery and Support Organizations

- Advocacy Unlimited <https://advocacyunlimited.org/>
- Connecticut Community for Addiction Recovery <https://ccar.us/>
- National Alliance on Mental Illness-CT <https://namict.org/>
- Recovery Innovations for Pursuing Peer Leadership and Empowerment <https://rockingrecovery.org/>



## **DHMAS's real-time SUD and Mental Health bed websites:**

- CT Mental Health Services DMHAS - <https://www.ctmentalhealthservices.com/>
- CT Addiction Services DMHAS <https://www.ctaddictionservices.com/>

## **Virtual Support Meetings**

Virtual support meetings allow residents to stay connected to the recovery community no matter where they are. The Connecticut Community for Addiction Recovery (CCAR) has a calendar of virtual meetings that residents can participate in without having to leave the facility and they can continue to participate after discharge.

CCAR Virtual Support Meeting Calendar: <https://ccar.us/programs/virtual-support-meetings/>

# Domain 6: Stakeholder and Regulatory



## Resident Rights

# Partner with your State Agencies

What Connecticut is doing to address these barriers:

1. Interagency partnerships have had a positive impact by the development of tools and resources available to LTCFs and three in-person conferences with over 200 attendees.
2. SUD in LTC Workgroup consists of providers across the continuum working to develop solutions to challenges experienced by LTCFs and partners in caring for residents with an OUD.
3. CT State agencies have staff and resources (websites, toolkit, webinars, etc.) to support initiatives and implementation of MOUD in LTCFs.
4. OTP satellite locations established in several LTCFs across the state.
5. CCAR Pilot- Connecting LTCF residents with a Recovery Coach



# Toolkit Checklist

## Domain 1: Workplace Practice (Page 8)

### Person-Centered Approach (Page 9)

- ☐ Include in onboarding education
- ☐ Include in continuing education and training
- ☐ Identify Champions

### Staff Recruitment (Page 10)

- ☐ Develop screening questions to identify candidates for this population of residents.
- ☐ Recruit a workforce that is reflective of the community.
- ☐ Embed organizational culture into the interview process to include descriptions of an empathetic organization free from bias and stigma.
- ☐ Ask interview questions that help the candidate share their values.



### Enhance Staff Roles \* (Page 23)

- ☐ Aftercare Specialist
- ☐ Recreational Therapy
- ☐ Resident Ambassador Program

\*Refer to descriptions of job roles in the Toolkit



### Staff Training (Pages 11-22)

A staff training plan should incorporate an interdisciplinary, person-centered approach and enhance the following topics:

- ☐ OUD as a chronic disease
- ☐ Overdose prevention and Naloxone use
- ☐ Recognizing signs of withdrawal, utilizing the Clinical Opiate Withdrawal Scale (COWs)
- Stigma and bias training and use of person first language





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# Co-Occurring Disorders

Welcome!

To begin the course, click the **"Start"** button.

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## Trauma Informed Care

Personal and Organizational Resilience

Welcome!

To begin the course, click the **"Start"** button.



Start

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## Addressing Stigma & Bias

Welcome!

To begin the course, click the **"Start"** button.



Start

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# Opioid Epidemic

Welcome!


To begin the course, click the **"Start"** button.

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## De-Escalation

Welcome!

To begin the course, click the **"Start"** button.



Start

# Companion Education Modules on the LMS

## Website

Here is a snapshot of the domains found in the toolkit:

### Domain 1: Workplace Practice

Enhance the understanding, skills, and inclusive mindset of all staff to provide thoughtful and expert care to individuals with an opioid use disorder (OUD), using a person-centered approach.

### Domain 2: Environment

Identify several interventions long term care facilities (LTCF) can implement to foster a therapeutic environment that meets diverse needs of the residents to promote wellness.

### Domain 3: Care Practices

Assist long term care facilities (LTCF) in implementing person-centered care practices that address the complex needs of residents with opioid use disorder (OUD) to meet their individual health goals.

### Domain 4: Leadership

Model and operationalize an organizational culture that professionally and empathetically responds to the needs of those with an opioid use disorder (OUD) by ensuring safety, and accountability, and advancing the needed skills and attitudes.

### Domain 5: Family & Community

Establish meaningful connections involving the resident, their family or family of choice and friends, and the community stakeholders to better support residents with opioid use disorder (OUD).

### Domain 6: Stakeholders & Regulatory

Provide practical strategies to help Long Term Care Facilities (LTCFs) navigate state and federal regulations that may present challenges when caring for residents Opioid Use Disorder (OUD).

<https://healthcentricadvisors.org/learning-resources/ct-ltc-oud/>

# Questions?

# Contact Us



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(401)528-3218



<https://healthcentricadvisors.org/learning-resources/ct-ltc-oud/>



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