

## **Medication Assisted Treatment in Long Term Care Technical Support**

**Draft Core Competencies** 

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## Long-Term Care Facility Staff (LTCFs) Core Competencies

\*\*\*The tenets within the Core Competencies shall apply to all residents – including those with different cultural, racial, ethnic backgrounds and those with disabilities. \*\*\*

- I. Understanding OUD: LTCF clinicians must develop and maintain knowledge, skills, and attitudes about opioid use disorder (OUD) to effectively care for individuals with this chronic, re-occurring medical condition:
  - Culturally responsive clinical skills when caring for residents with OUD from diverse backgrounds<sup>1</sup>
  - Distinction between use, dependence and use disorder<sup>2,3,4</sup>
  - Recognize and manage intoxication, withdrawal or overdose<sup>5,6,7,8</sup>
  - Trauma informed care<sup>9</sup>
    - Universal suicide/self-harm risk screening<sup>10</sup>
  - Stigma dispelling misconceptions 11,12,13
  - Ethical and legal guidelines when caring for residents with OUD<sup>14,15,16</sup>
    - Current 42CFR overview<sup>17</sup>
- II. Safety Considerations for LTCF Residents with OUD: 18 Although the LTCF population may primarily include an older and more medically frail population than individuals who reside in the community, it may also include younger adults

https://store.samhsa.gov/system/files/sma14-4849.pdf

<sup>2.</sup> https://www.drugabuse.gov/sites/default/files/files/OpioidRiskTool.pdf

<sup>3</sup> https://www.hopkinsmedicine.org/opioids/signs-of-opioid-abuse.html

https://www.nejm.org/doi/10.1056/NEJMra1604339

<sup>5</sup> https://www.ncbi.nlm.nih.gov/books/NBK64114/

<sup>6</sup> https://www.asahq.org/whensecondscount/pain-management/opioid-treatment/opioid-abuse/

https://www.integration.samhsa.gov/Opioid Toolkit Prescribers.pdf

<sup>8</sup> https://emergencymedicinecases.com/opioid-misuse-overdose-withdrawal/

http://socialwork.buffalo.edu/social-research/institutes-centers/institute-on-trauma-and-trauma-informed-care/what-is-trauma-informed-care.html

<sup>10</sup> http://cssrs.columbia.edu/

https://www.acponline.org/system/files/documents/about\_acp/chapters/ma/ge-rize-shatterproof-white-paper\_final.pdf

Olsen, Y., Sharfstein, J.M., 2014. Confronting the Stigma of Opioid Use Disorder—and Its Treatment. JAMA 311, 1393. https://doi.org/10.1001/jama.2014.2147

<sup>13</sup> https://cf8b2643ab1d3c05e8f6-

d3dc0d8f838e182b6b722cea42bb6a35.ssl.cf2.rackcdn.com/aaap eb20f80a7ec0c1713978ba2b069091f7.pdf

<sup>14</sup> https://www.ama-assn.org/delivering-care/opioids/10-ways-new-opioids-law-could-help-address-epidemic

https://www.ama-assn.org/delivering-care/ethics/untangling-medical-ethics-prescribing-opioids

https://www.bmcobat.org/resources/?category=1

<sup>17 &</sup>lt;u>https://www.samhsa.gov/about-us/who-we-are/laws-regulations/confidentiality-regulations-faqs</u>

https://cf8b2643ab1d3c05e8f6d3dc0d8f838e182b6b722cea42bb6a35.ssl.cf2.rackcdn.com/aaap 986d7d138b9fc49bcf0f61d6ba0392c9.pdf

who are admitted for short-term rehabilitation or are medically compromised and need the level of care provided in a LTCF. The following safety considerations when managing medication for OUD (MOUD) apply to all types of residents in the LTCF:

- Medical co-morbidities
- Mental Health/Psychiatric co-morbidities
- Managing acute and chronic pain and OUD<sup>19</sup>
- Appropriate dosing
- Polypharmacy and drug interactions
- **Activities**
- LTCF Residential Milieu (a resident's social environment):<sup>20,21</sup> The best practices and III. guidance of LTCF with residents who have OUD. LTCFs have best practices and guidance which apply to all residents, including those with OUD:
  - Resident-centered care<sup>22</sup>
  - Setting boundaries for residents, staff, and visitors
  - Assessing and treating high-risk residents with OUD<sup>23</sup>
  - Culturally and linguistically appropriate resources and strategies to optimize resident and staff safety<sup>24</sup>
- Caring for Residents treated with MOUD in LTCF:25,26 Residents with OUD can IV. receive MOUD treatment while residing in LTCFs even though these facilities are not designated as OTP or OBOT programs:
  - Pain management: residents with OUD require consistent and regular assessment of pain and functional levels<sup>27</sup>
  - Goals of MOUD 28

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http://pcssnow.org/wp-content/uploads/2015/12/Alford-Acute-Chronic-Pain-MAT-FINAL2-12-22-15.pdf

<sup>20</sup> https://academic.oup.com/gerontologist/article/41/5/612/596559

https://books.google.com/books?id=KcnsAwAAQBAJ&pg=PA35&lpg=PA35&dq=maintaining+a+pleasant+n ursing+home+milieu?&source=bl&ots=53iHWyl-

ZO&sig=ACfU3U2hgtZqa NQ4KTcTzNgdVoX0PKcWA&hl=en&sa=X&ved=2ahUKEwi23fGp5I kAhVum uAKHVTyC3M4ChDoATABegQIBxAB#v=onepage&q=maintaining%20a%20pleasant%20nursing%20home %20milieu%3F&f=false

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3056855/

https://www.oregonpainguidance.org/guideline/tapering/

https://www.mass.gov/lists/making-clas-happen-six-areas-for-action

https://www.mass.gov/circular-letter/circular-letter-dhcq-16-11-662-admission-of-residents-on-medication-

https://www.americannursetoday.com/np-medication-treatment-opioid-disorder/

<sup>27</sup> https://doi.org/10.3928/00989134-20190813-02

https://www.ncbi.nlm.nih.gov/books/NBK535274/

- Treatment modalities including methadone, buprenorphine, naltrexone, counseling/recovery support/peer support-coaching
- Effective assessments and care plans based on the unique needs of each resident<sup>29</sup>
- Meaningful communication with treatment programs<sup>30</sup>
- Protocols for medication changes and needs
- Arranging transportation
- Discharge planning including continuity of care and resources
- Competency administering naloxone (Narcan) to reverse opioid overdose to include overdose/harm reduction strategies
- Storing, dispensing, and transporting MOUD
- Record-keeping
- Reporting requirements for overdose events
- Activities in LTCF
   Engaging residents' family members and friends (with residents' consent) by sharing their treatment goals and agreements

## V. Caring for the caregivers: 31,32,33,34

- Setting personal and professional boundaries
- Recovering from traumatic events (e.g., overdose event or unexpected resident death)
- Debriefing after a crisis
- Recognizing and preventing burn out
- Community resources (e.g., Nar-Anon, Al-Anon, Al-Ateen, family counseling)

<sup>&</sup>lt;sup>29</sup> https://www.mass.gov/lists/making-clas-happen-six-areas-for-action

https://www.mass.gov/lists/making-clas-happen-six-areas-for-action

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6446475/

https://fuquacenter.org/wp-content/uploads/2017/12/IssueBrief12-Caregivers.pdf

https://www.caringfortheages.com/article/S1526-4114(19)30003-4/fulltext?rss=yes

<sup>34</sup> https://journals.sagepub.com/doi/abs/10.1177/0733464814542465