



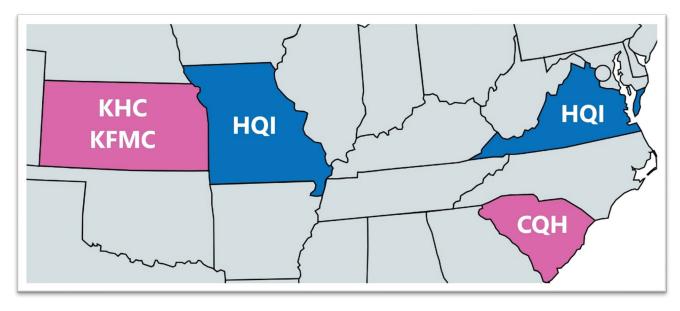


Recognize and Respond Collaborative: INTERACT® Decision Support Tools



* Health Quality Innovation Network















Logistics – Zoom Webinar





To ask a question, click on the **Q&A** icon.

Raise your hand if you want to verbally ask a question.

Resources from today's session will be posted in **Chat**.

You may adjust your audio by clicking **Audio Settings**.

You have been automatically muted with video turned off.



Your Team





Kristine Williamson, MSN, RN, CPHQ Quality Improvement Specialist



Sarah Banyai, MPH Quality Improvement Specialist



April FaulknerCommunications Specialist







- Understand different care paths available
- Recognize the appropriate time for utilization
- Incorporate care paths into day-to-day operations





Polling Question



Are you currently using INTERACT® decision support tools or a similar platform within your EHR?

- A. Yes
- B. No
- C. Unsure





What is INTERACT®?

Quality Improvement
Organizations
Sharing Knowledge. Improving Health Care.
CENTERS FOR MEDICANE & MEDICAND SERVICES

- Interventions to Reduce Acute
 Care Transfers
- An evidence-based intervention to help post-acute care providers identify, evaluate and communicate changes in resident status
- Goal is to reduce unnecessary hospital transfers
- Tools are available on the <u>Pathway-INTERACT website</u>









Quality Improvement is the Glue of INTERACT®

- Conveys the importance of a quality culture
- Emphasizes teamwork and involves all staff
- Is proactive anticipate, prevent and intervene early
- Can be integrated into work you're already doing
- Is a continuous process





INTERACT® Tools



INTERACT® has four areas of focus:

Quality improvement

Community

Decision support

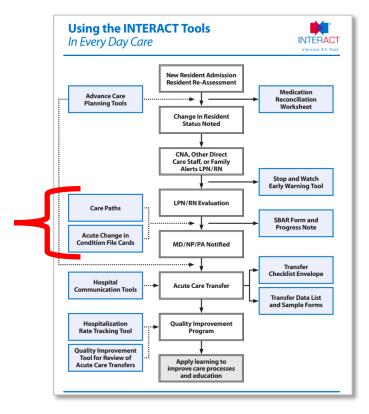
Advance care planning





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- Useful resource after a change in condition has been noticed and reported
- Assist with determining next steps
- Opportunity for standardization in processes









- Acute Change in Condition File Cards
- Care Paths
 - Acute Mental Status Change
 - Change in Behavior
 - Dehydration
 - Fever
 - GI Symptoms

- Shortness of Breath
- Congestive Heart Failure
- Lower Respiratory Illness
- Urinary Tract Infections
- Falls





Change in Condition File Cards



Change in Condition: When to report to the MD/NP/PA



Immediate Notification

Any symptom, sign or apparent discomfort that is:

- Acute or Sudden in onset, and:
- A Marked Change (i.e., more severe) in relation to usual symptoms and signs, or
- Unrelieved by measures already prescribed

Non-Immediate Notification

New or worsening symptoms that do not meet above criteria

<u>Change in Condition</u> File Cards

This guidance is adapted from: AMDA Clinical Practice Guideline – Acute Changes in Condition in the Long-Term Care Setting 2003; and Ouslander, J., Osterweil, D, Morley, J. Medical Care in the Nursing Home. McGraw-Hill, 1996

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Change in Condition File Cards



Signs and Symptoms C's



Symptom or Sign	Immediate	Non-Immediate
Chest pain, pressure or tightness	New or abrupt onset, unrelieved by current medications, OR accompanied by diaphoresis, change in vital signs or new EKG changes	Relieved by antacids or nitroglycerin, without other symptoms, but recurring more often than usual
Common cold (symptoms of)	With marked respiratory distress, severe cough, or T > 100.5 F	Change in color of sputum or phlegm; persistent need for symptom relief
Complaint, medical, by family or patient	Demand to speak to a physician or have a medical assessment without delay	Any persistent or recurrent complaint that might need a physician's attention
Confusion ¹	See Altered Mental Status	See Altered Mental Status
Consciousness, altered ¹	Sudden change in level of consciousness or responsiveness	Gradual change in level of consciousness not associated with other criteria for immediate notification
Constipation	Severe abdominal pain, rigid abdomen, absent bowel sounds	< 1 BM in a week
Contusions	Accompanied by significant pain or bleeding	Associated with a recent fall with no other complication:
Cough ²	Associated with blood in sputum, new sputum production, fever or respiratory distress	New or recent onset of persistent or nocturnal cough, causing discomfort or disturbing sleep

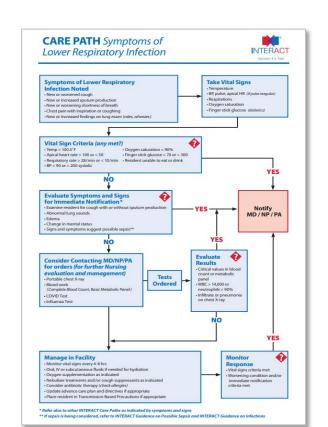
1 See INTERACT Acute Mental Status Change Care Path 2 See INTERACT Symptoms of Lower Respiratory Illness Care Path

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Care Paths

- Recognize, evaluate, manage and report symptoms related to common conditions
- Provide guidance on when to notify the primary care clinician





Care Paths



Polling Question



If you are using decision support tools, are you tracking their use in hospital readmissions?

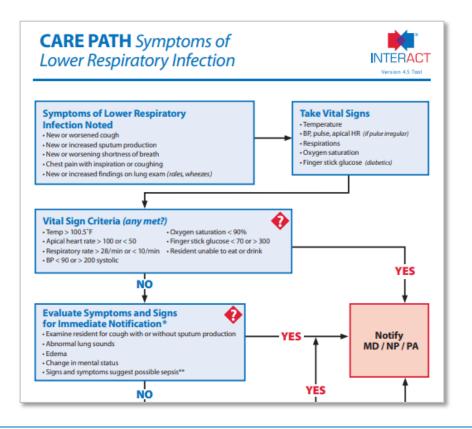
- A. Yes
- B. No
- C. Unsure





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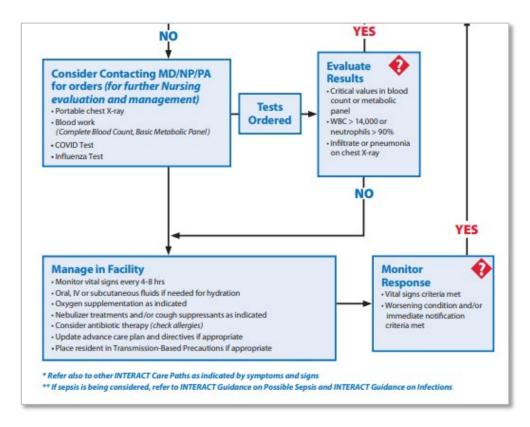
Recognition & Evaluation





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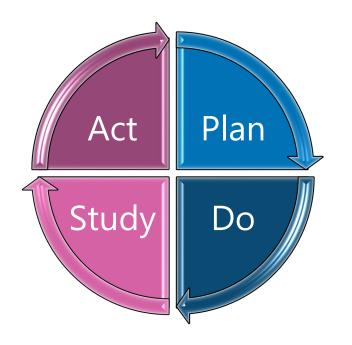
Management & Reporting





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Integration into Daily Practice



- P Involve staff development, ADON and charge nurses in process and start on one shift or one unit
- Provide education, place at station and select care path to review during huddles
- **S** Monitor number of times used and averted transfers
- A Modify, educate and spread



Measurement Strategies



Structural

- Make resources available on unit
- Provide staff training on program



Process

- # of times change in condition cards are referenced
- # of times care paths are used

Outcomes

- # of ED visits
- # of admissions





Join Our Next Session



INTERACT Quality Improvement Tools

Tuesday, October 24, 2023

2:00 p.m. EST | 1:00 p.m. CST





Questions







Center of Excellence for Behavioral Health In Nursing Facilities

The Center of Excellence focuses on increasing the knowledge, competency and confidence of nursing facility staff to care for residents with behavioral health conditions.

- Provides mental health and substance use trainings, customized technical assistance and resources at no cost
- Services are available to all CMS certified nursing facilities throughout United States
- Established by the Substance Abuse and Mental Health Services Administration (SAMHSA) in collaboration with the Centers for Medicare and Medicaid Services



For assistance, submit a request at nursinghomebehavioralhealth.org

Contact us:

National Call Center: 1-844-314-1433

Email: coeinfo@allianthealth.org



Center of Excellence for Behavioral Health In Nursing Facilities

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Scan QR code to sign up for the COE-NF newsletter.



Visit the COE-NF website & Online Resource Hub:

nursinghomebehavioralhealth.org

National Call Center: 1-844-314-1433

For more information or to request assistance.

Subscribe to receive email updates from COE-NF!

Scan the QR code or visit

<u>https://engage.allianthealth.org/coenf-newsletter-subscription</u> to stay up-to-date on COE-NF services and news.

FOR MORE INFORMATION

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