



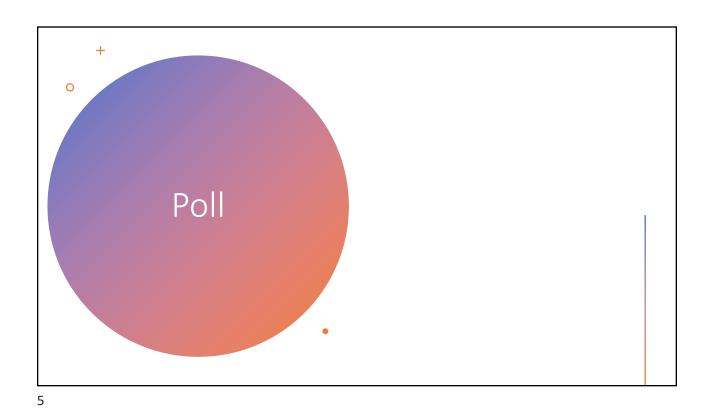
GOALS

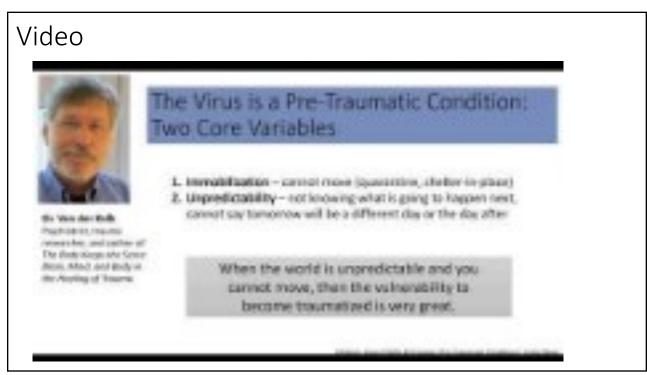
- Define social isolation and loneliness
- Report the impact of social isolation on residents and staff
- Discuss how the pandemic creates psychological trauma similar to disasters
- Apply screening tools for identifying social isolation & PTSD
- Recommend QAPI solutions for fighting social isolation among residents and staff.

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Agenda

- Introduction
- IHI video presentation by Paige Hector, LMSW
- Resident Engagement
- Case Presentation for Q/I
- Discussion
- Summary





Engaging Residents

• Ideas from





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Keeping Residents Engaged

Virtual trip to the museum

- Museum of Modern Art (quick view)
- Chicago Institute of Art (register)





Keeping Residents Engaged

• Night at the Opera



Keeping Residents Engaged

- Homemade radio hour: read a short story or transmit a blog over the intercom
- Community philosophy



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Keeping Residents Engaged

- · Ask the community to submit
 - story books, cards, photos, letters
- Intercom BINGO
- Residents write or report what they are thankful for (and share with others)
- Families send photos and mementoes to create scrap book

Keeping Residents Engaged

- Create a theme for the day, such as a country or state and serve thematic food or treats.
- Solo dancing aligned to music associated with the theme



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In CHAT BOX

• List ideas for resident engagement at your facility

Remote model car races



QI CASE STUDY



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Your Psychological PPE

Institute for Healthcare Improvement

to Promote Mental Health and Well-Being

published literature and the experience of health systems. For more information visit ihi.org.

Individual



Take a day off and create space between work and home life



Avoid publicity and media coverage about COVID-19



Receive mental health support during and after the crisis



Facilitate opportunities to show gratitude



 Reframe negative experiences as positive and reclaim agency

Team Leader



Limit staff time on site/shift



Design clear roles and leadership



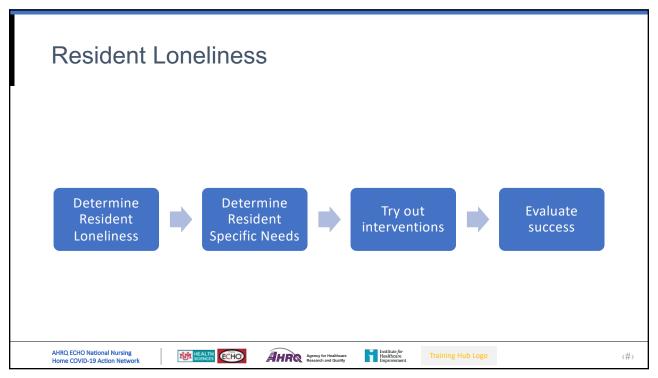
Train managers to be aware of key risk factors and monitor for any signs of distress



Make peer support services available to staff



Pair workers together to serve as peer support in a "buddy system"





Rationale on QOL PIP - Ioneliness

- Newspaper and medical reports as well as residents and family members express concerns about social isolation in nursing homes during the pandemic's "shelter in place".
- Our facility does not yet know what percent of our residents who experience some form of loneliness

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Determine if Resident Loneliness Exists

- •Start with the first box and determine if a process needs to be designed or can an already functioning process be utilized.
- ■Usually start with the "Ask 5"
- ■The most commonly used in new design is **How** and **What**

Using loneliness, **how** will we determine resident loneliness and **what** tool can we design to help make that determination.

AHRQ ECHO National Nursing Home COVID-19 Action Network







Training Hub Log

(#)

How do we determine loneliness?

- Decide whether to use an established assessment tool or create a checklist that can be tested for detecting resident loneliness.
- Limit the survey to a resident population that does not suffer from dementia and are able to communicate with you.
- If using an established tool, teach staff on how to use it. If utilizing a homegrown list, get the staff to assist in creating the checklist

AHRQ ECHO National Nursing Home COVID-19 Action Network







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UCLA Loneliness Scale

Scale:

 $\textbf{INSTRUCTIONS:} \ \textbf{Indicate how often each of the statements below is descriptive of you.}$

C indicates "I often feel this way" S indicates "I sometimes feel this way" R indicates "I rarely feel this way" N indicates "I never feel this way"

1. I am unhappy doing so many things alone	OSRN
2. I have nobody to talk to	OSRN
3. I cannot tolerate being so alone	OSRN
4. I lack companionship	OSRN
5. I feel as if nobody really understands me	OSRN
6. I find myself waiting for people to call or write	OSRN
7. There is no one I can turn to	OSRN
8. I am no longer close to anyone	OSRN
9. My interests and ideas are not shared by those around me	OSRN
10. I feel left out	OSRN
11. I feel completely alone	OSRN
12. I am unable to reach out and communicate with those around me	OSRN
13. My social relationships are superficial	OSRN
14. I feel starved for company	OSRN
15. No one really knows me well	OSRN

SUMMARY

- Use PDSA cycles of change to test different tools of assessment for your facility
 - UCLA Loneliness Scale
 - PTSD scale (PC-PTSD-5)
- Identify ways to incorporate resident voices into improvement of social engagement
 - Survey, focus group, reports from family members
- Use PDSA cycles of change to create patient centered social engagement activities

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