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.



Public Health







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 Mental Health and Addiction Services, Connecticut Department of Public Health, and the Connecticut Women's Consortium for their contributions in the development and review of this toolkit and the adjunctive training and implementation of this initiative.

The toolkit outlines six domains to help LTCFs care for residents with Opioid Use Disorder (OUD). Administrators, directors of nursing (DON), medical directors, social workers, nurses, and certified nursing assistants (CNA) can all use these resources. Each domain can be used on its own when implementing. Below is Domain 1: Workplace Practice.

Throughout the domains there are links to educational resources, including links to brief learning management modules to aid in understanding of key topic areas. In the appendices you will find sample template forms and tools to help guide development of LTCFs policies and procedures.

Toolkit Domains:



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Domain 2: Environment

Goal:

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.

Objectives:

- 1. Define and implement a therapeutic environment, including the eight dimensions of wellness, in the LTCF.
- 2. Develop action steps to offer culturally and linguistically appropriate services (CLAS) for all residents with opioid use disorder (OUD).
- 3. Implement evidence-based programing and meaningful daily activities that are inclusive of the resident's diverse needs, abilities, and interests.

Description:

The environment domain describes the commitment to confronting environmental challenges whether physical, social, or cultural that limit a resident's ability to thrive. This domain helps organizations work to establish a place of respect, safety, peace, and trust delivering on its ability to be therapeutic. Content includes the eight dimensions of wellness, how to develop CLAS for residents and how to offer a stimulating environment with choices that meet resident's interest and are age appropriate.

Developing a Therapeutic Environment

A therapeutic environment supports stabilization of chaotic environmental influences and aims to minimize environmental stressors; however, a therapeutic environment is far more than a physical setting. A therapeutic environment takes on a holistic approach addressing physical, social, and/or cultural factors.

Wellness Orientation



By nature, a therapeutic environment is one that fosters well-being. 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." Quality of care-seeks the highest practicable physical, mental, and psychosocial well-being" for each resident. Focusing on wellness can improve quality of life and decrease risk factors leading to premature death among individuals with behavioral health conditions. Substance Abuse Mental Health Services Administration's (SAMHSA) Wellness Initiative focuses on the Eight Dimensions of Wellness to achieve an improved quality of life. The Eight Dimensions of Wellness include emotional, financial, social, spiritual, occupational, physical, intellectual,

and environmental.¹ These dimensions are interconnected, one dimension building upon another. Also, wellness has different meanings within different cultures, and one's cultural and spiritual beliefs or values may influence one's perspectives on health. Providers and staff can meet residents where they are to ensure that their well-being continues to be a priority and their cultural and linguistic needs are met. This means delivering physical care and meeting the mental and spiritual needs of all residents, regardless of their beliefs, backgrounds, or values. Approaching each resident with curiosity about their culture, language and social needs can assist staff with learning more about diverse perspectives and how to best meet residents' needs.

Review the <u>CLAS flyer and action plan</u>² for information on CLAS to aid in implementation.



Physical Wellness (Includes Medical Wellness)

The physical wellness dimension includes promoting a healthy body, making personal choices, and taking steps to help strengthen and care for the body.

- A healthy lifestyle goes hand-in-hand with a healthy diet. Work with residents and a dietitian to identify personal food choices and goals that can support a healthy diet. For some residents with OUD, eating habits may be challenging. Eating habits that have been documented among persons with OUD include eating less than two meals a day, fasting to boost or prolong an opioid high, skipping meals, and consuming few fruits and vegetables.³
- Hold a skills class about healthy eating.
- Investigate whether the LTCF fosters a positive sleep environment or "Wake at Will" program. More than 75 percent of people with OUD have sleep problems, such as irregular sleep schedules, not sleeping enough, and/or having a sleep disorder (e.g., insomnia, sleep apnea). Examine the facility lighting. Are the lights off during the night, hallway included? Is the facility alarm-free? Providing a positive sleeping environment is linked to improved health outcomes such as reduced falls, improved immune system, and better wound healing.
- Does programming incorporate physical activity into the residents' day? Are there choices based on age and ability? Is it fun? Does programming and the calendar of

¹ Swarbrick, M. (2006). A wellness approach. Psychiatric Rehabilitation Journal, 29(4), 311–314. https://doi.org/10.2975/29.2006.311.314

² IPRO Quality Innovation Organization- Quality Improvement Organization (2023). Culturally and Linguistically Appropriate Standards (CLAS) Resources. Retrieved from: https://qi-library.ipro.org/2023/02/15/culturally-and-linguistically-appropriate-standards-clas-resources/

³Rigg, K., Chavez, M. (2020). 4 Connections Between Opioid Addiction and Nutrition. Psychology Today. ⁴ Eckert, D., Yaggi, H.K. (2022). Opioid Use Disorder, Sleep Deficiency, and Ventilatory Control: Bidirectional Mechanisms and Therapeutic Targets. Am J Respir Crit Care Med, 206(8), 937-949. doi: 10.1164/rccm.202108-2014CI

⁵ SAMHSA (2016). Creating a Healthier Life- A Step-by-Step Guide to Wellness. Retrieved from: https://store.samhsa.gov/sites/default/files/sma16-4958.pdf

- events denote activities for the spirit, mind, and body? Are there opportunities for private, quiet space where a resident can experience privacy and peace?
- Are residents educated about their medications, intended purpose and possible adverse effects? <u>ABCD's of your medicine</u> is a helpful tool to give to residents to help ask questions about their medications.
- Are residents educated about preventative care as it relates to acute and/or chronic conditions, including OUD?

Intellectual Wellness

- The intellectual wellness dimension includes activities that enrich the brain. Offer evidence-based programming and meaningful daily activities based on personal interest.
- Consider skill building, education attainment, and passing on lived experiences to others.
- Assess if the resident enjoys:
 - o Reading (if books, what genre is preferred; local newspaper; or magazine(s))
 - o Playing games (crossword puzzles, mind teasers, cards)
 - Conversation
 - o Television, Podcasts

Financial Wellness

The financial wellness dimension includes income, debt, savings, financial processes, and resources. Residents may require assistance and financial literacy awareness. A 2023 study from the Journal of the American Pharmacists Association (JAPHA) examined the link between OUD and social factors. Overall, residents with OUD are twice as likely to encounter financial hardship or food insecurity, which makes them susceptible to continued dangerous opioid use.⁶

- Does the resident express a concern about finances?
- Is the resident aware of available programs and resources (e.g. Money Follows the Person, money management volunteer programs, social security supplemental income or other related options)?
- Are the residents educated about Medicare, Medicaid plans?
- Are there concerns about health-related social needs that must be addressed prior to discharge?

Environmental Wellness

The environmental wellness dimension revolves around residents' sense of emotional and physical safety within their surroundings. For individuals with OUD, avoiding potential triggers. Fostering a therapeutic environment may necessitate avoiding certain people, places, situations, or other environmental factors that could be triggering.

⁶ Arsene C, Na L, Patel P, Vaidya V, Williamson AA, Singh S, The Importance of Social Risk Factors for Patients Diagnosed with Opioid Use Disorder, Journal of the American Pharmacists Association (2023), doi: https://doi.org/10.1016/j.japh.2023.02.016

Here are some strategies to help reduce or eliminate environmental stressors and create a positive environment:

- Foster inclusion by arranging spaces so each resident can see and interact with others (e.g., non-fixed seating, round tables, etc.). Such areas facilitate positive social behaviors and the development of interactive social groups.
- Work with residents to identify environmental stressors specific to them. Once identified, work to change the situation by assisting the resident with avoiding the stressor, alter the stressor, adapt to the stressor, or accept the stressor (unnecessary noise, alarms, clutter, etc.).
- Incorporate positive distractions such as views of nature or nature pictures in resident rooms, the lobby, waiting areas, and other high stress areas. If possible, provide access to nature, healing gardens, trails, etc.
- Work to minimize odors. Odors that are objectionable or perceived as medical can create stress.
- Maintain plenty of living plants inside and out. They add color and liveliness.
- Cluttered rooms can cause stress. Work with residents to reduce belongings that take up space and may contribute to clutter.
- Soften noise and reduce the appearance of disorder.
- Music (e.g. recorded music in the resident's room that is programmed specifically to create a healing environment or provide personal playlists with headphones-see Music & Memory⁷).
- Physical exercise (corridors, public spaces, and gardens that invite walking when appropriate).
- Chapel, meditation room, and meditation gardens, or a labyrinth.
- Pets and other activities or elements that allow for a sense of stimulation that help nurture a resident's sense of positive well-being.
- Privacy and control (e.g., control over radio, TV, reading light, night light).
- Make efforts to de-institutionalize the environment.

Spiritual Wellness

Spirituality refers to the broad concept of belief in something beyond the self. It strives to answer questions about the meaning of life, how people are connected to each other, truths about the universe, and other mysteries of human existence. It involves values and practices that help give balance and direction to one's life. Higher spiritual well-being is also shown to reduce relapse and might provide better recovery outcomes and improved mental health status.⁸

• Are there religious or spiritual practices and beliefs that are a source of comfort during life's ups and downs?

⁷ Music and Memory. (2024). Retrieved from: https://musicandmemory.org/

⁸ Canadian Association of Schools of Nursing & Association for Social Work Education. (2021). Module 6 : Opioid Use Education-Topic A. Identify the spiritual, emotional, mental, and phyiscal effects of opioids. Retrieved from : https://ououd.casn.ca/modules/module-6/topic-6a.html#SpiritualEffectsOpioids

- What is the resident holding on to during a difficult time? Where is their source of comfort?
- Provide time for meditation, relaxation and/or prayer.
- Offer time and/or an area where residents can appreciate the beauty of nature.
- Consider offering yoga classes for different ages and abilities.
- Mutual Help Support groups are becoming a growing trend in LTCF and providing access to these groups is essential.

Social Wellness

The social wellness dimension involves having healthy relationships with friends, family, and/or the community. For those with OUD, a strong social support system serves as a protective factor. Individuals living with OUD may withdraw from social activities to hide their substance use or because of side effects from the opioid use. Self-isolating is a common symptom of depression, and people with OUD may lose interest in activities they once enjoyed. LTCF staff must be aware of these complexities to better support their residents.

- Offer light jobs and responsibilities such as mail delivery, teaching a class, attending a peer support meeting, working in the garden, helping prepare the dining room, raking leaves, or preparing the outdoor fire pit under supervision.
- Hold pop-up events, or spontaneous events that are designed to get people outside.
- Video games and other software might be needed for recreation, especially for younger residents who have grown up with these products.
- Outdoor activities may include cornhole or Velcro darts.
- Invite peer advocates/counselors from the community who are willing to share their lived experience with substance use, harm reduction and/or recovery, so residents can hear from a peer and learn about community resources to support their goals. Utilize residents' talents and skills if they are willing and interested. Invite them to share their gifts with the community.
- Provide all residents, particularly those with OUD, information to empower them to be partners in their care. Communication techniques include asking open-ended questions, not interrupting the resident, and engaging in active listening.
- Involve residents in mutual support groups (e.g. Alcoholics Anonymous (AA), Narcotics Anonymous (NA).
- Connect residents with social activities.
- In some cases, families, families of choice, and/or caregivers play a vital role in supporting individuals with OUD. Where appropriate, organize family focus groups and a resident and family advisory council so residents and their supporters have a voice and opportunity to be heard. Utilizing a resident council will enable an understanding of specific needs of residents and the overall community. Residents who do not have a traditional support system may need assistance from the care team to connect with the right social support (e.g. faith-based community, lesbian, gay, bisexual, transgender (LGBT) support group, or a local cultural center). Draft plans to

⁹ Spalding, T.; Meschike, L. (2019). Social Support and OUD Fact Sheets. Retrieved from: https://tnopioid.utk.edu/wp-content/uploads/2019/06/Social-Support-and-OUD-Factsheet.pdf

- ensure that families and caregivers are involved in enhancing continuous quality improvement efforts, educational material development, and processes.
- LTCF's should include and collaborate with the Long-Term Care (LTC) Ombudsman program to aid in setting up resident councils.

The transition to LTCF can be traumatic, especially for those who will remain in long-term care. Work with residents and resident councils on identifying person-centered activities and engage the resident in personal interests.

Developing an environment that promotes the well-being for residents with OUD include involvement of family (chosen, adopted, and biological), friends, and other caregivers, reduction of environmental stressors, development of a wellness orientation, reduction of stigma, and dispelling myths associated with OUD, and addiction treatment.¹⁰

The following resources include helpful information for developing a Resident Council and/or PFAC.



- o CT Long Term Care Ombudsman Program- Resident and Family Councils (ct.gov)¹¹
- Moving Forward Coalition Strengthening Resident Councils¹²
- o American Medical Association Forming a Patient and Family Advisory Council 13
- o Institute for Patient and Family-Centered Care Creating Patient/Family Councils 14
- o Agency for Healthcare Research and Quality <u>PFAC Implementation Guide</u>¹⁵

Keep caregivers informed and families involved:

- Share contact information of community opioid treatment programs (OTP) and community-based recovery support groups with families, if there is a signed release of information from the resident specific to their OUD care. Families and caregivers may benefit from a warm handoff to or participation in a local support group.
- Share a list of prohibited items (e.g., drugs, drug contraband) with residents, families, caregivers, and staff to ensure everyone's safety. Notify them of steps the LTCF takes if prohibited items are found, such as confiscation, referral for drug testing, and, if necessary, contacting law enforcement. Consider incorporating mutual, no harm agreements into the admission process. (See Domain 4: Leadership, for more information about policy development).

¹⁰ CT Long Term Care Ombudsman Program (2021). Resident and Family Councils. Retrieved from: https://portal.ct.gov/ltcop/resident-and-family-councils.

¹¹ CT Long Term Care Ombudsman Program (2021). Resident and Family Councils. Retrieved from: https://portal.ct.gov/ltcop/resident-and-family-councils.

¹² Moving Forward Coalition. (2024). Strengthening Residents Councils. Retrieved from: https://movingforwardcoalition.org/wp-content/uploads/2023/10/Strengthening-Resident-Councils Updated 101023.pdf

¹³ American Medical Association (2019). Forming a Patient and Family Advisory Council. Retrieved from: https://edhub.ama-assn.org/steps-forward/module/2702594

¹⁴ Institute for Patient and Family-Centered Care (2022). Creating Patient/Family Councils. Retrieved from: https://www.ipfcc.org/resources/Advisory Councils.pdf

¹⁵ Agency for Healthcare Research and Quality (2008). PFAC Implementation Guide. Retrieved from: https://www.ahrq.gov/sites/default/files/wysiwyg/professionals/systems/hospital/engagingfamilies/strategy1/Strat1
1 Implement Hndbook 508 v2.pdf

Emotional Wellness

The emotional wellness dimension involves the ability to express feelings, adjust to emotional challenges, cope with life's stressors, and enjoy life. However, research shows that nearly one-third of people with opioid use disorder have a co-occurring mental health disorder, and 48% of people who are dependent on opioids are also diagnosed with depression.¹⁶

- LTCFs may consider providing formal mental health care including the role of a behavioral health counselor who can support the emotional health of residents and provide education for the staff.
- Develop therapeutic relationships with residents that are secure, consistent, and genuine to help build rapport. A therapeutic relationship that is person-centered and trauma-informed is non-judgmental and provides a safe space for residents to express their feelings and concerns.
- If residents can write and are interested in journaling, provide notebooks so they can write down their thoughts.
- Assist residents with identifying triggers that cause emotional disruption.

Occupational Wellness

The occupational wellness dimension involves participation in activities that provide meaning and purpose, including employment.

The average age of LTC residents has become younger, and many may have potential to be in the workforce or have a desire to re-enter the workforce. Recent research indicates that sustained recovery is significantly tied to meaningful and purposeful work-life balance. Employment is an important element for sustaining recovery and maintaining financial independence.¹⁷

In the LTCFs setting, consider involving residents in small, meaningful jobs such as mail delivery, assisting with recreational activities, and/or other daily tasks to promote a sense of community and belonging.

- Does the resident have small jobs or activities they look forward to and provide a sense of accomplishment?
- Consider encouraging participation in volunteer opportunities.
- Include more life skills training as part of regular activities. Some examples are as follows:
 - Parenting
 - Literacy
 - Job readiness
 - Soft Skills Training (e.g. interpersonal communication)

¹⁶ Solas Health (2024). Understanding Depression and Opioid Use Disorder. Retrieved from: https://solas.health/blog/oud-and-depression/

¹⁷ Substance Abuse and Mental Health Services Administration (2021). Substance Use Disorders Recovery with a Focus on Employment and Education. HHS Publication No. PEP21-PL-Guide-6 Rockville, MD: National Mental Health and Substance Use Policy Laboratory. Substance Abuse and Mental Health Services Administration. Retrieved from: https://store.samhsa.gov/sites/default/files/SAMHSA_Digital_Download/pep21-pl-guide-6.pdf

- Finance/budgeting
- How to access community resources, including organizations that assist with finding employment.

Person-centered care is especially relevant to residents with OUD, as the concepts embedded in that care are also key drivers of recovery.¹⁸

The strategies outlined above are examples of how facilities can create a welcoming environment using a person-centered approach. Consider reaching out to the CT Department of Labor for assistance (https://portal.ct.gov/dol?language=en_US).

¹⁸ Substance Abuse and Mental Health Services Administration. (2012). SAMHSA's Working Definition of Recovery: 10 Guiding Principles of Recovery. Retrieved from https://store.samhsa.gov/system/files/pep12-recdef.pdf