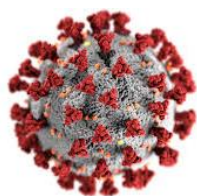
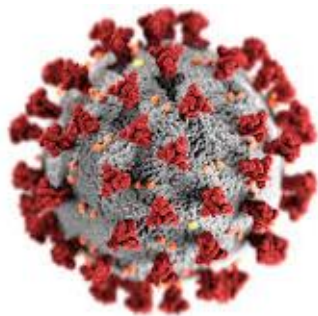


JOIN US FOR OUR NEW SERIES:

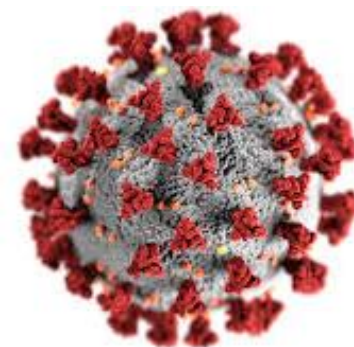
CARE HOMES ECHO



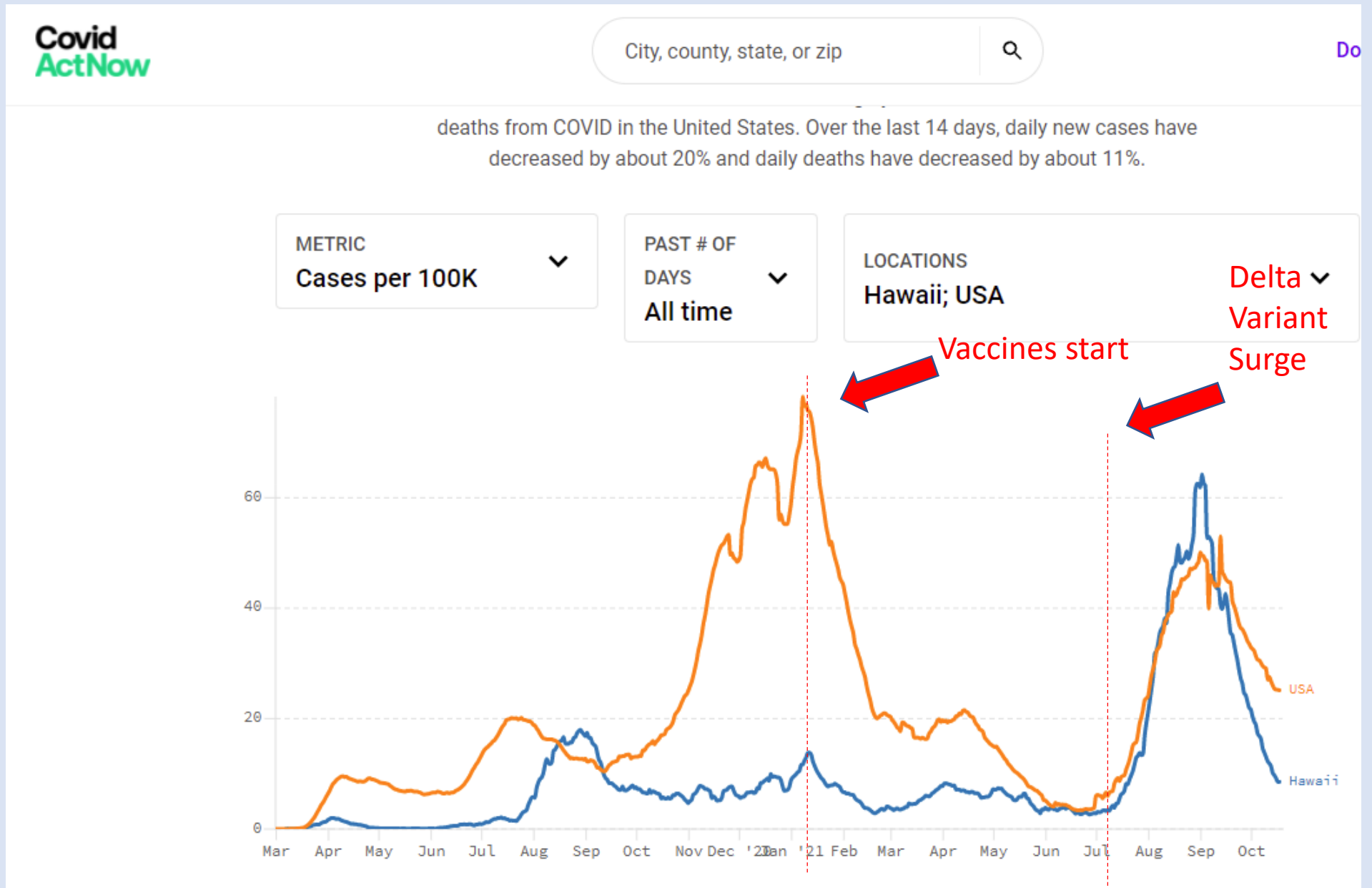
COVID UPDATES

Aida Wen, MD

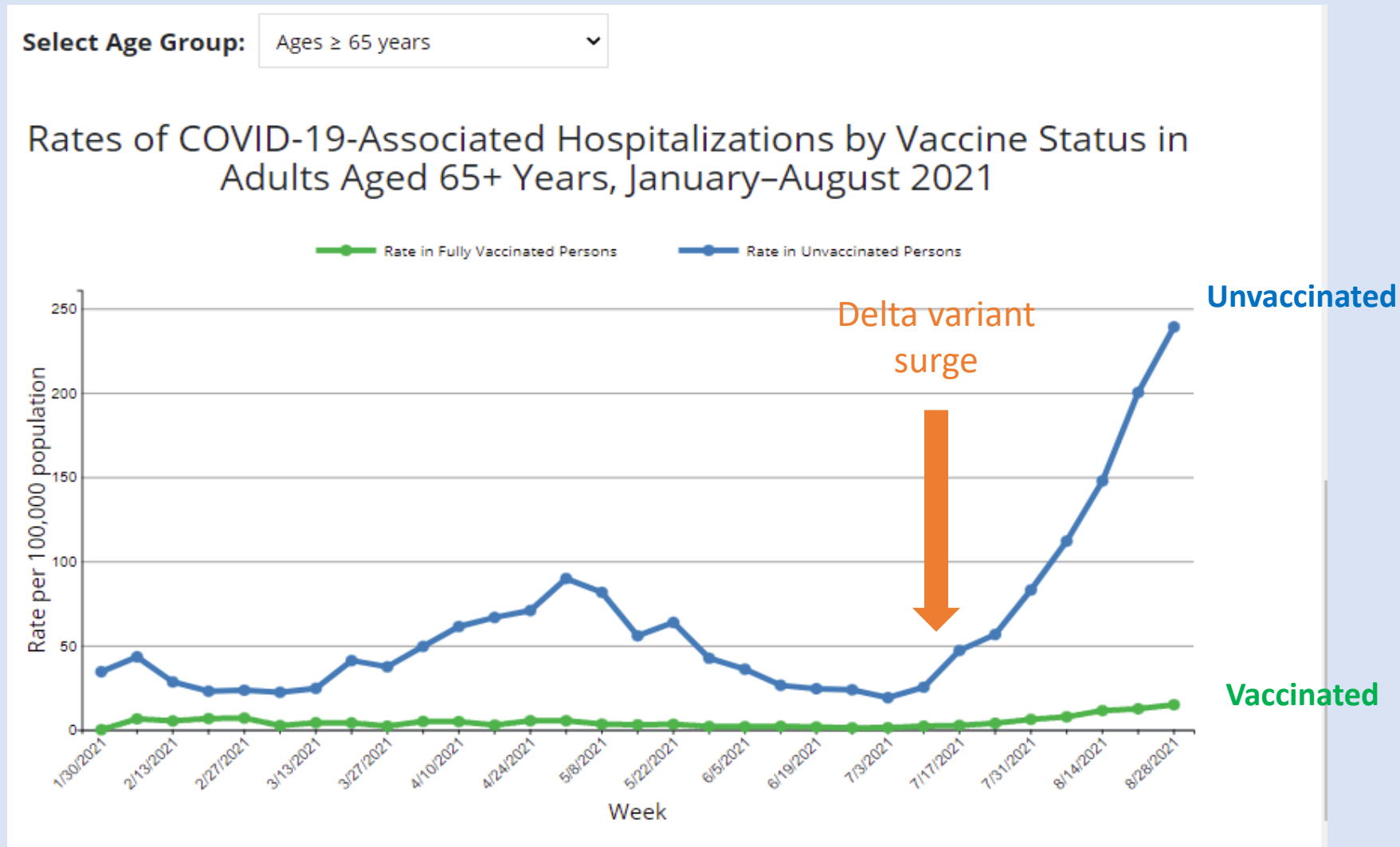
10/19/2021



How are we doing?



Are the COVID Vaccines working?



Immunocompromised People



Organ transplant



Immunodeficiency diseases





Blood cancers

On
Immunosuppressive
Medications



Cancer patients on
Treatment

COVID-19 Vaccine 3rd dose for Immunocompromised Patients

COVID-19 Vaccine Dose Criteria	Vaccine	Age	Interval	Additional Guidelines	Mixing vaccines?
3 rd Dose for Immunocompromised patients	Pfizer	12+	 28 DAYS after 2 nd dose	Try to match dose type to previous mRNA vaccine.	If not feasible, another vaccine is probably acceptable *
3 rd Dose for Immunocompromised patients	Moderna	18+	 28 DAYS after 2 nd dose	If patient is 12-17, do not give Moderna.	Giving another vaccine is probably acceptable*




Over Age

65



Persons at High Risk

COVID-19 Vaccine 3rd Booster Shot for High-Risk Persons

COVID-19 Vaccine Dose Criteria	Vaccine	Age	Interval	Additional Guidelines	Mixing vaccines
Booster Dose for High-Risk persons	Pfizer	16+	At least  after 2 nd dose	Try to match dose type to previous mRNA vaccine.	The FDA has authorized “mix-and-match” boosters in eligible people completing their primary vaccination with a different available COVID-19 vaccine. Mix-and-Match is OK!
	Moderna	18+	At least  after 2 nd dose	3 rd dose is a lower dose	
	J&J	18+	At least  after 2 nd dose		

FLU
IT'S VACCINATION
TIME!



Getting Flu shots

- Flu viruses change every year, so vaccines are updated every year.
- Both the Flu virus and COVID virus will both spread this fall and winter.
- **Get Both!**
 - Safe
 - Same day is ok if possible
 - **Different arm** is recommended
 - According to the CDC, it is safe to get the Flu and the COVID vaccines on the same day! In fact, the CDC is advising that people get a COVID booster (if eligible) at the same time they get their flu shot this year



<https://www.cdc.gov/flu/season/faq-flu-season-2021-2022.htm>

...But you don't
have to wait for the
COVID shot!

Support & Well-being





What is
Loneliness?

Loneliness
is...

Feeling sad
and unhappy
about being
socially
isolated



Loneliness

Loneliness reflects how connected we feel to others.

Let's review some items from the UCLA Loneliness Scale:

Look for people who...

- Have nobody to talk to
- Feel as if nobody really understands me
- Are no longer close to anyone
- Has interests and ideas are not shared by those around them
- Are unable to reach out and communicate with those around them
- Find it hard to make friends
- Feel like no one really knows them well

Russell, D , Peplau, L. A.. & Ferguson, M. L. (1978). Developing a measure of loneliness. *Journal of Personality Assessment*, 42, 290-294.

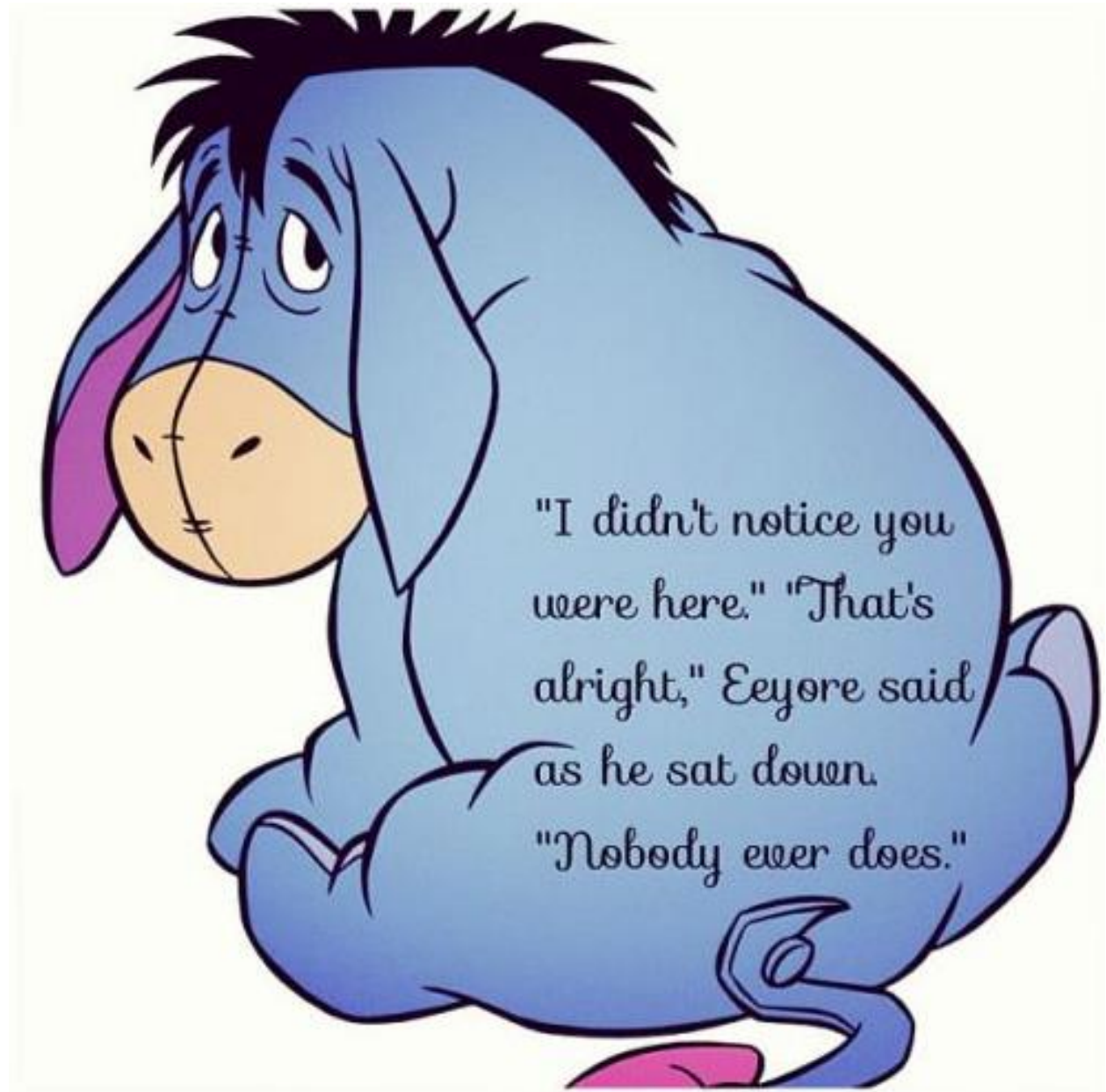
Loneliness in Care Homes

- Loneliness is common in LTC institutions
- Severe loneliness in care homes is at least double compared to those in the community
 - 22-42% in Care Homes compared to 10% in Community Dweller
- Some activities can decrease loneliness.
- Loneliness increases risk for depression, suicidal thoughts, aggressive behaviors, anxiety, increase impulsivity, and cognitive decline.

Simard and Volicer, JAMDA 2020 Jul; 21(7):966-967. Published online 2020 May 8. doi: [10.1016/j.jamda.2020.05.006](https://doi.org/10.1016/j.jamda.2020.05.006); PMID: 3250551

Sometimes we
are so busy, we
don't notice...

Look for
Loneliness...

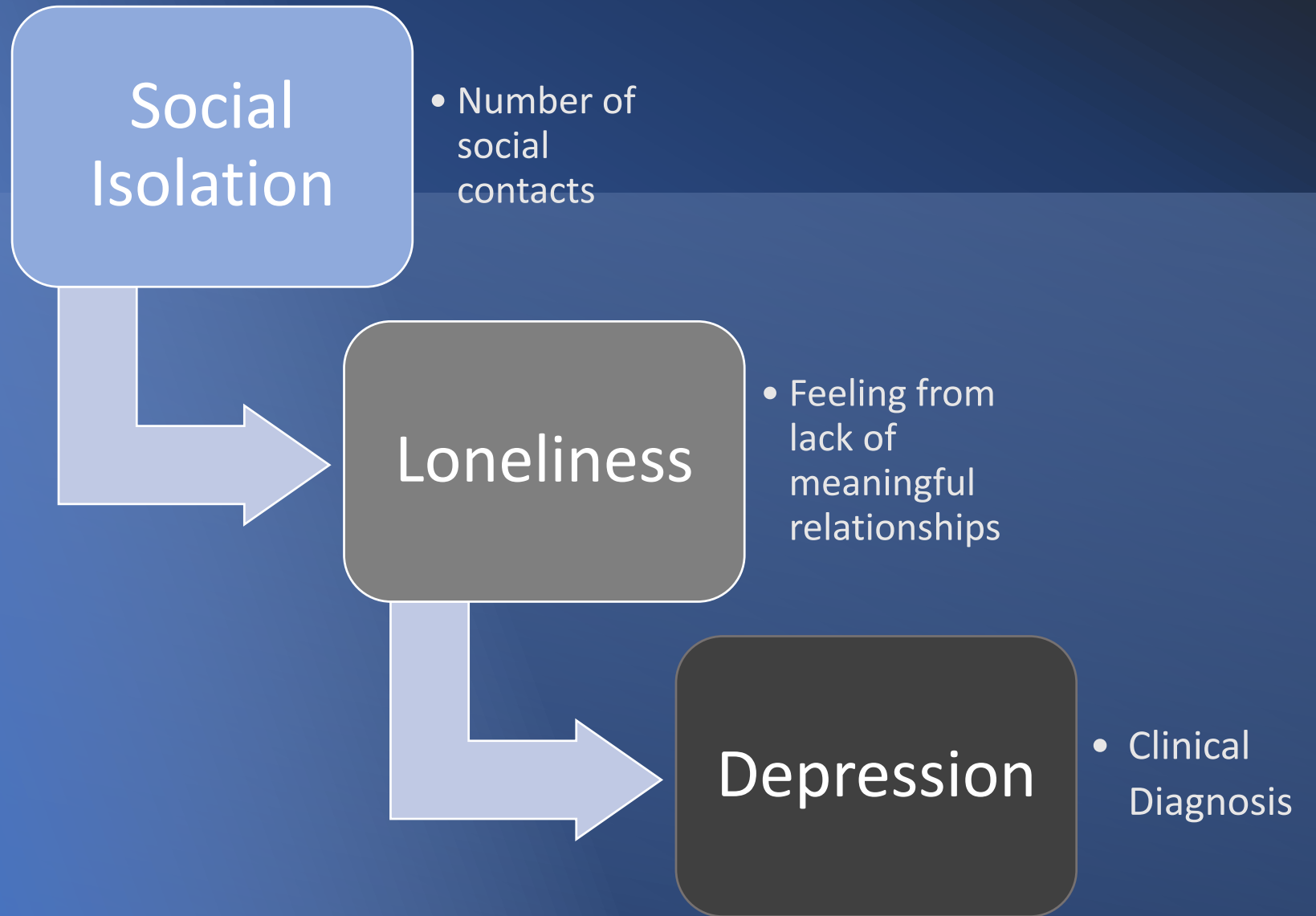


***Thanks
for
noticin'
me***



Take time to make Connections

Impact of the COVID-19 Pandemic





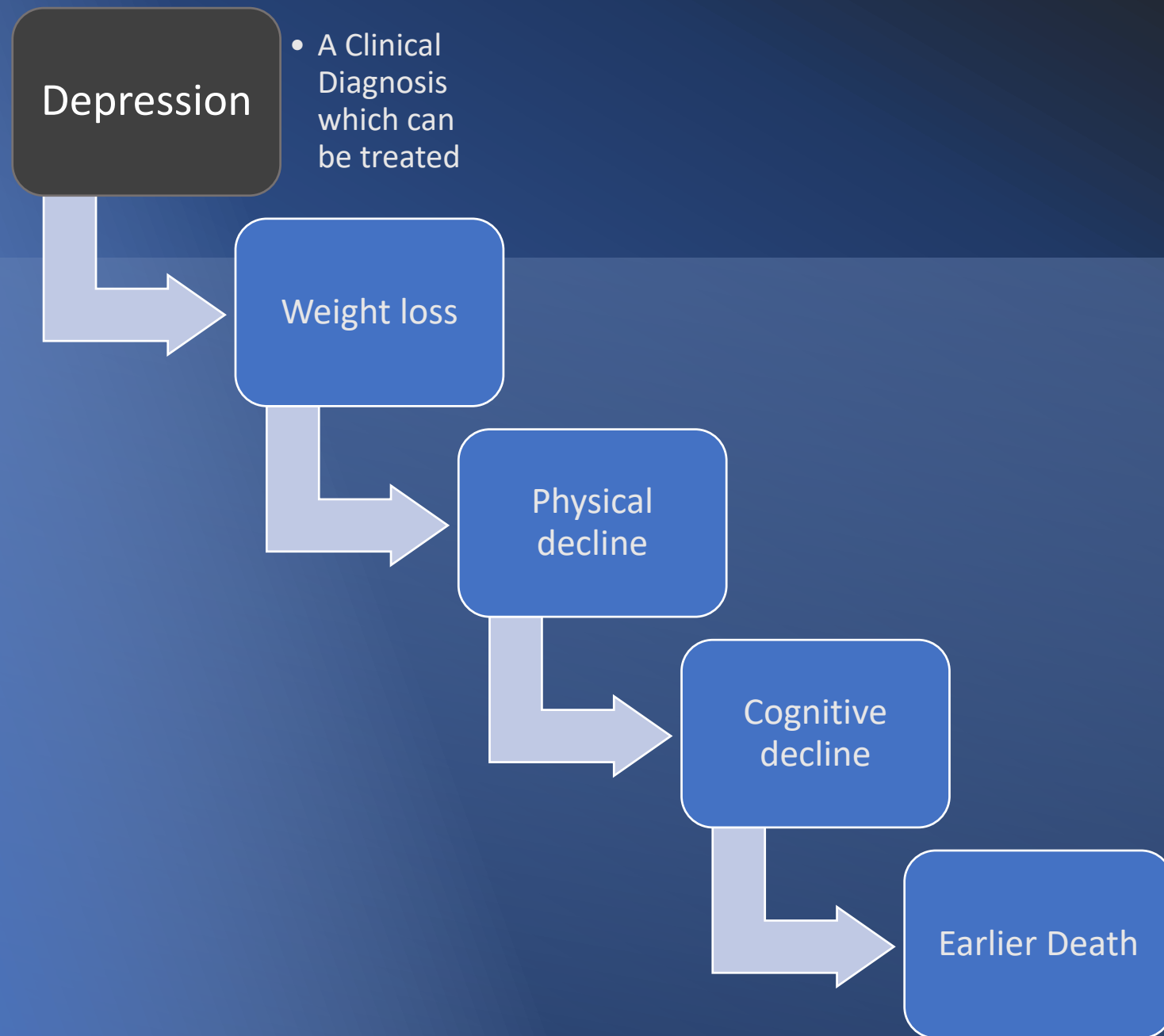
Recognizing Depression

Impact of COVID-19 on Well-being

- A very large study of nursing home residents in Connecticut compared residents between 2019 vs. 2021
 - Prevalence of Depression (15% increase)
 - Substantial weight loss (150% increase)
 - Increase of incontinence
 - Decrease in cognitive functioning

Levere, et al. The Adverse Effects of the COVID-19 Pandemic on Nursing Home Resident Well-Being. 2021 May;22(5);948-954e2. Published online 2021 Mar 20. doi: [10.1016/j.jamda.2021.03.010](https://doi.org/10.1016/j.jamda.2021.03.010)
PMCID: PMC7980137; PMID: [33861980](https://pubmed.ncbi.nlm.nih.gov/33861980/)

Impact of Depression



Why is
Depression in
the Elderly
Sometimes
Hard to See?

Depression can sometimes look like
Dementia

Older persons who are depressed may not
complain of depression

Some symptoms may be seen as “just
getting old”

Older persons may not complain of
“sadness”

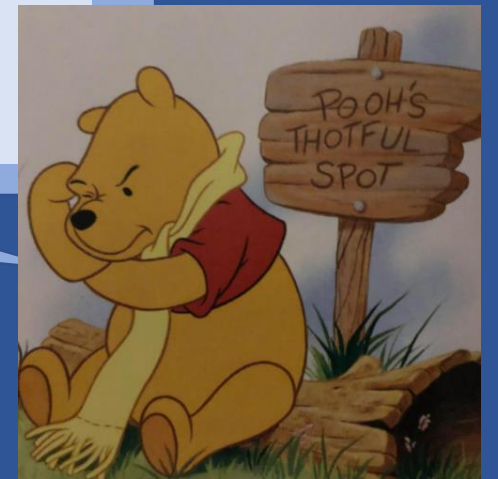
Let's think about your residents:

- Do you know any residents who have stopped eating or are losing weight?
- Does your resident tell you he is too tired?
- Does your resident who used to be “sharp” now have trouble thinking?
- Does your resident cry more often than before?



Let's think about your residents:

- Do residents say: “I’m no good anymore” ?
- Do residents say: “I want to die”?
- Does your resident say “sorry” all the time?
- Is your resident just grumpy?
- Is your resident having more challenging behaviors?



Look out for
these signs
and
symptoms:

It's NOT just
"sadness"

- Sleep changes – sleeping all the time or not enough
- Loss of interest
- Feeling worthless
- Low energy
- Trouble thinking (more than before)
- Loss of appetite
- Moving more slowly than before
- Anxious or agitated
- Talking about death

Also ask
others if they
noticed...

Screening for Depression

...a VERY
important 1st
Step!



If they can
make
themselves
understood,
you SHOULD
TRY to ask the
resident
directly

Sit Down and Talk to the Resident:

Preparation

- Sit at eye-level position, good lighting
- Eliminate all distractions (TV, radio, etc.)
- Having a “cue card” on hand will help the resident more easily quantify the frequency.
- Take his/her hand
- Speak clearly & loudly



If the resident cannot answer,
ask all Staff:

STAFF OBSERVATIONS:

- Interview **staff from all shifts** who know the resident best
- Ask staff in a private location (not in the hall...)
- Record the symptoms and frequency

A Two-Item Screening Tool

Not
Enjoying
Anything

PATIENT HEALTH QUESTIONNAIRE-2 (PHQ-2)

ASK:

*Over the last 2 weeks, have you
been bothered by having
little interest or pleasure in doing
things?*

HOW
OFTEN?

*Not at all
Several days
More than half the days
Nearly every day*

A Two-Item Screening Tool



Feeling
Down

PATIENT HEALTH QUESTIONNAIRE-2 (PHQ-2)

ASK:

*Over the last 2 weeks, have
you been bothered by feeling
down, depressed, or hopeless?*

HOW
OFTEN?

*Not at all
Several days
More than half the days
Nearly every day*

CUE
CARD
example

How much did it bother you in the
last 14 days?

0-1 DAYS Never or 1 day

=0

2-6 DAYS Several Days

+1

7-11 DAYS Half or more of the days

+2

12-14 DAYS Nearly every day

+3

EXAMPLE:



	Not at all	Several Days	More than half the days	Nearly every day
Little Interest or Pleasure	0	+1	+2	+3
Feeling Down	0	+1	+2	+3



TOTAL SCORE= 5

Score of 3 or more= major depression is likely

NOTE: You are NOT making a diagnosis. This is just the screening test. The doctor will evaluate this further.

It is important to let the doctor know.

- The doctor will do a longer test and ask more questions (PHQ-9)
- They will work with everyone to create a treatment plan to help them get out of depression.



PATIENT HEALTH QUESTIONNAIRE-9 (PHQ-9)

D0200. Resident Mood Interview (PHQ-9)

Say to resident: "Over the last 2 weeks, have you been bothered by any of the following problems?"

If symptom is present, enter 1 (yes) in column 1, Symptom Presence.

If yes in column 1, then ask the resident: "About **how often** have you been bothered by this?"

Read and show the resident a card with the symptom frequency choices. Indicate response in column 2, Symptom Frequency.

1. Symptom Presence

- 0. **No** (enter 0 in column 2)
- 1. **Yes** (enter 0-3 in column 2)
- 9. **No response** (leave column 2 blank)

2. Symptom Frequency

- 0. **Never or 1 day**
- 1. **2-6 days** (several days)
- 2. **7-11 days** (half or more of the days)
- 3. **12-14 days** (nearly every day)

	1. Symptom Presence	2. Symptom Frequency
	↓ Enter Scores in Boxes ↓	
A. <i>Little interest or pleasure in doing things</i>	<input type="text"/>	<input type="text"/>
B. <i>Feeling down, depressed, or hopeless</i>	<input type="text"/>	<input type="text"/>
C. <i>Trouble falling or staying asleep, or sleeping too much</i>	<input type="text"/>	<input type="text"/>
D. <i>Feeling tired or having little energy</i>	<input type="text"/>	<input type="text"/>
E. <i>Poor appetite or overeating</i>	<input type="text"/>	<input type="text"/>
F. <i>Feeling bad about yourself - or that you are a failure or have let yourself or your family down</i>	<input type="text"/>	<input type="text"/>
G. <i>Trouble concentrating on things, such as reading the newspaper or watching television</i>	<input type="text"/>	<input type="text"/>
H. <i>Moving or speaking so slowly that other people could have noticed. Or the opposite - being so fidgety or restless that you have been moving around a lot more than usual</i>	<input type="text"/>	<input type="text"/>
I. <i>Thoughts that you would be better off dead, or of hurting yourself in some way</i>	<input type="text"/>	<input type="text"/>

How can you
help?

LONELINESS:

- Look for Loneliness
- Make efforts to connect with them more

DEPRESSION SCREENING:

- Sit down and talk with each of your residents.
- Complete the Depression Screening Tool (PHQ-2)
- Add up the scores and write it under the chart.

SHARE WITH THE DOCTOR:

- If the score is 3 and higher, please share this form with the doctor

Can you do us
a *BIG* favor?

PLEASE SHARE WITH OUR TEAM:

- When you are doing taking your evaluation, you will receive a link to fill out an online survey form to share the PHQ-2 scores for each of your residents.

IMPORTANT: PHQ2 Form Needed for Certificates of Attendance

External

Inbox x



Miquela Ibrao <mibrao@qemailserver.com>

to me ▼

8:55 PM (0 minutes ago)



Aloha,

Thank you for participating in this month's Care Homes ECHO. In order to receive Certificates of Attendance you must complete the following PHQ-2 Form for each of your Care Home Residents or Foster Home Clients. You may enter all names of attendees from you care home to one PHQ2 form.

https://uhgwep.qualtrics.com/jfe/form/SV_cON4Wi0MEd1pTaC

If you need assistance with completing the form, please join Miquela via zoom on:

Friday, October 22 at 11am

Friday, October 22 at 2pm

Monday, October 25 at 9am

Monday, October 25 at 2pm

Tuesday, October 26 at 1pm

Zoom Link: <https://hawaii.zoom.us/j/98110111742>

To get your
certificate of
attendance, please
screen all your
residents before
our next session.

PHQ-2 For Care Homes ECHO

In order to receive Certificates of Attendance, please enter the FULL NAMES of EVERYONE that participated in the monthly Care Homes ECHO from your organization.

Full Name #1

Full Name #2

Full Name #3

Full Name #4

Full Name #5

Full Name #6

Full Name #7

E-Mail Address (for certificates of attendance)

To get your
certificate of
attendance, please
screen all your
residents before
our next session.

Please complete the PHQ-2 for each of the residents/clients that you have in your home.
You may leave patient spaces blank (if you only have 3 residents/clients, leave #4-6 blank).

Using 0-3, please rate your residents/clients feelings:

0 = not at all

1 = several days

2 = more than half the days

3 = nearly every day

	Over the last 2 weeks, how often has the resident been bothered by little interest or pleasure in doing things (0, 1, 2, 3)	Over the last 2 weeks, how often has the resident been bothered by feeling down, depressed or hopeless (0, 1, 2, 3)	Total
Resident 1	<input type="text"/>	<input type="text"/>	<input type="text"/>
Resident 2	<input type="text"/>	<input type="text"/>	<input type="text"/>
Resident 3	<input type="text"/>	<input type="text"/>	<input type="text"/>
Resident 4	<input type="text"/>	<input type="text"/>	<input type="text"/>
Resident 5	<input type="text"/>	<input type="text"/>	<input type="text"/>
Resident 6	<input type="text"/>	<input type="text"/>	<input type="text"/>

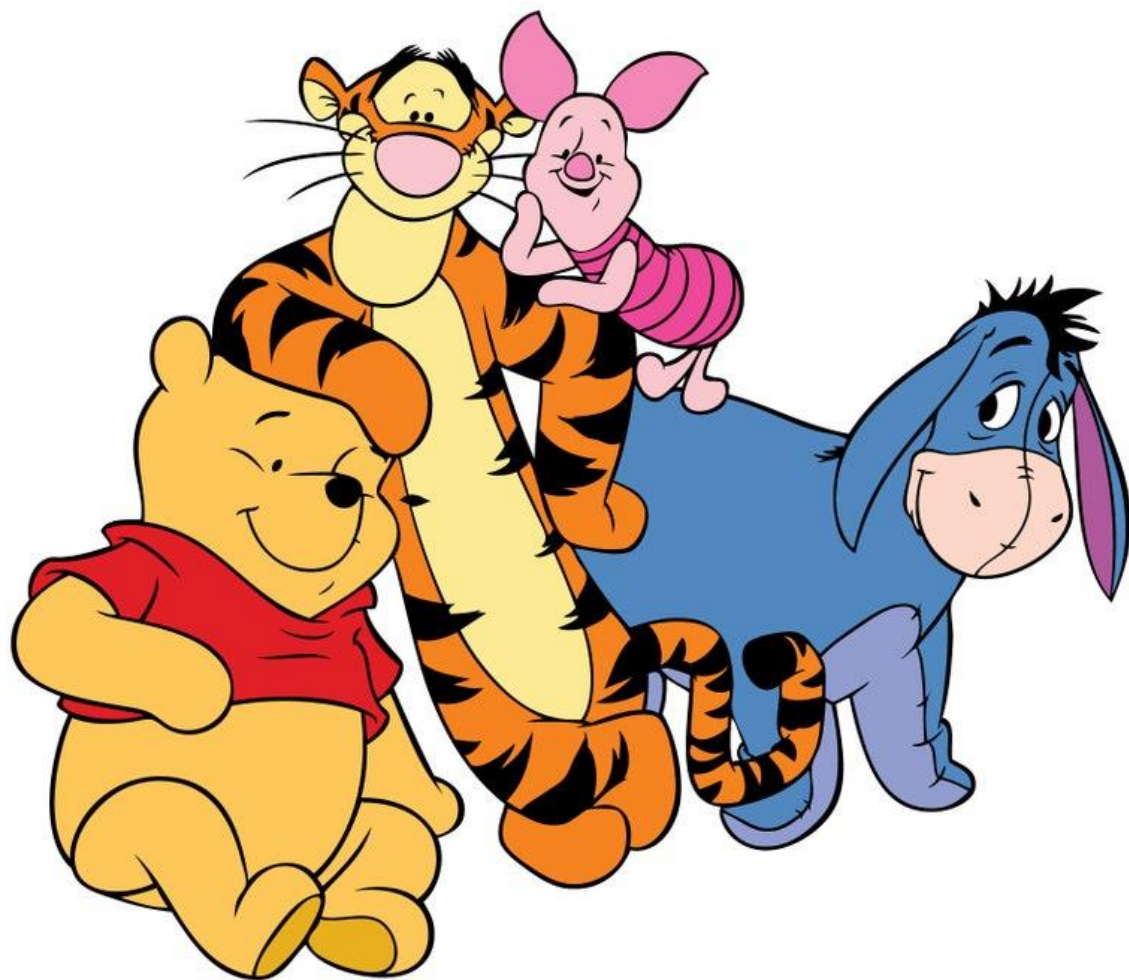
Do you have another Care Home or Foster Home to report on?

No

Yes

Can you do us
a *BIG* favor?

- As we provide ideas to better manage depression in our future sessions, we hope that all these scores will improve.
- We will ask you to do this again at the end of January
- This will demonstrate that you are doing a good job improving resident's quality of life!
- IF YOU NEED HELP:
 - Friday, 10/22 at 11am
 - Friday, 10/22 at 2pm
 - Monday, 10/25 at 9am
 - Monday, 10/25 at 2pm
 - Tuesday, October 26 at 1pm



***THANKS
FOR CARING!***