AMDA- THE SOCIETY FOR POST-ACUTE AND LONG-TERM CARE MEDICINE

RESOLUTION C24

SUBJECT: EDUCATION AND TRAINING ON THE EVIDENCE-BASED DIAGNOSIS AND CLINICAL CARE OF OPIOD USE DISORDER IN SKILLED **NURSING FACILITIES**

INTRODUCED BY: TENNESSEE ASSOCIATION OF LONG-TERM CARE PHYSICIANS & ILLINOIS SOCIETY FOR POST-ACUTE AND LONG-TERM CARE MEDICINE

INTRODUCED ON: MARCH 2024

WHEREAS, Opioid use disorder (OUD) in older adults is one of the fastest growing 2 health problems that continues to go underrecognized and undertreated. There is an 3 increasing number of older adults with a history of OUD or on medications for OUD 4 (MOUD; i.e., methadone, buprenorphine, and naltrexone) who are hospitalized and 5 require discharge to skilled nursing facilities (SNFs), but face disproportionate harms 6 when they are not able to access SNF care;

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AND WHEREAS, The stigmatization and marginalization of people with OUD and of those taking medications to treat OUD have resulted in little to no training in the management of this chronic disease. There is well-established evidence that education is an effective method of reducing stigma. Through destigmatizing education and training, front-line SNF providers can become more knowledgeable and effective in the management of OUD.

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AND WHEREAS, SNFs are facing historic staffing storages and limited resources to care for the most vulnerable patients, including the increasing number of older adults with an addiction like opioid use disorder. Front-line SNF staff report being underprepared to care for older adults with OUD and lacking the resources to do so. More resources are needed to ensure that older adults with OUD have access to skilled nursing care and quality, evidence-based OUD treatment.

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THEREFORE BE IT RESOLVED, that AMDA-The Society for Post-Acute and Long-Term Care Medicine, together with likeminded professional organizations, develop destignatizing education and training for clinicians, administrators, and frontline staff on the evidence-based principles of diagnosing and treating opioid use disorder (OUD);

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AND BE IT FURTHER RESOLVED, that AMDA-The Society for Post-Acute and Long-Term Care Medicine develops such outputs as point-of-care clinical information products on the evidence-based clinical care of opioid use disorder (OUD), up to date regulatory guidelines, and the legal policies protecting OUD care in skilled nursing facilities:

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33	AND BE IT FURTHER RESOLVED, that AMDA-The Society for Post-Acute and
34	Long-Term Care Medicine encourage and facilitate skilled nursing facility attending
35	physicians, advanced practice providers, and medical directors to play an active role in
36	educating clinical practitioners, frontline staff, and leadership regarding opioid use
37	disorder (OUD).
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41	FISCAL NOTE:
42	If passed by the House of Delegates and adopted as Society policy by the Board of
43	Directors, the fiscal impact of this would be low to moderate. Some cost may be expected
44	associated with the development of an educational program; other efforts would be
45	incorporated into AMDA's existing and ongoing professional development and advocacy
46	work.
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	Madavata Civiliant
48	None Low Moderate Significant High
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RESOLUTION RESULTS: <FOR AMDA OFFICE ONLY>