Health Trends



January 2021

Office of Integrated Health

SEPSIS

Sepsis is a life-threatening complication, which occurs when the body's immune response to infection causes damage to its own issues. Sepsis can progress very guickly from a mild infection into a life-threatening situation, and serious damage to vital organs including the heart, lungs, liver, kidneys and brain can occur. If not treated quickly and aggressively, sepsis can lead to septic shock, multiple organ failure and death (CDC, 2019; Chriscaden, 2020).

Signs & Symptoms

Sepsis often develops while an individual is being treated for a diagnosed infection, but can develop before an infection is diagnosed or recognized. Early recognition of the signs and symptoms of sepsis can lower risk of death. Education for all caregivers and direct support staff is very important.

Take the individual to an Emergency Room (ER) immediately, or call 911 if an individual is experiencing any of the following signs & symptoms, which indicate a medical emergency:

- New mental confusion or extreme drowsiness.
- Shortness of breath, and or breathing very fast (hyperventilating), more than >20 breaths per minute.
- Increased heart rate over >90 beats per minute or more.
- Fever of >100.1 degrees F. or greater.
- A temperature below normal, under <96.8 degrees F. and/or lower.
- Systolic Blood pressure (the top number) less than <90 mmHg (millimeters of mercury).
- Shivering and feeling very cold without relief.
- Extreme pain and discomfort. ٠
- Clammy and or sweaty skin to the touch. ٠
- Decreased urine output, possibly no urine output over 18 hours.
- Non-blanching skin rash, and or bluish discoloration of the skin (cyanosis) (O'Shaughnessy et al., 2017; Mayo Clinic,

SYMPTOMS OF SEPSIS

- Shivering, fever, or very cold
- SEPS Extreme pain or general discomfort ("worst ever")
- Pale or discolored skin
- Sleepy, difficult to rouse, confused
- "I feel like I might die"
- S Short of breath

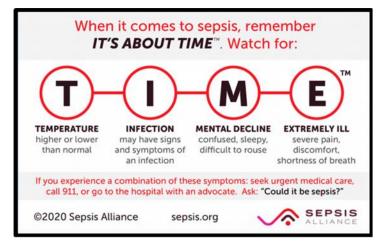


Watch for a combination of these symptoms. If you suspect sepsis, see a doctor urgently, CALL 911 or go to a hospital and say, "I AM CONCERNED ABOUT SEPSIS."

SEPSIS.ORG

Early Recognition is Essential

To avoid a fatality, guick recognition and treatment is vital. Individuals diagnosed guickly, have a greater chance of survival and time is of the essence. If an individual has recently been diagnosed with any type of infection or illness, and their condition worsens after beginning a course of antibiotics, they should be evaluated for sepsis immediately.



App of the Month



The Sepsis Game app is an educational game that uses colorful graphics to highlight the early signs of sepsis, plus advice on what to do if you suspect someone has sepsis. It was developed in partnership with Health Education England and e-Learning for Healthcare to help frontline staff respond more quickly and effectively to sepsis. (App of the Month is not endorsed by DBHDS Office of Integrated Health. User accepts full responsibility for utilization of app).

Center for Disease Control and Prevention (CDC) (2019) What is sensis? https://www. cdc.gov/consis/what_is_so Chriscaden, K. (2020, September). WHO calls for global action on sepsis – causing of 1 in 5 deaths worldwide. The World Health Organization. https://www.who.int/news/item/08-09-2020-who-calls-for-global-action-on-sepsis--cause-of-1-in-5-

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ABA Snippets

Indications for use of indirect Functional Behavioral Assessment (FBA) procedures

Most behaviorists have used "indirect" functional behavior assessment procedures, which include rating scales, checklists, questionnaires, or interviews (Cooper et al., 2007). Indirect assessment can be categorized as either open-ended (e.g. interviews) or close-ended (e.g. rating scales). There are numerous reviews on reliability and validity of close-ended tools, including but not limited to the Functional Analysis Screening Tool (Iwata et al., 2013), the Questions about Behavioral Function (Nicholson et al., 2006) and the Motivation Assessment Scale (Zarcone et al., 1991). Reliability can be problematic for such tools, as outcomes of administrations by two persons with knowledge of the problem behavior often offer differing results, which in turn affects validity (Hanley, 2012). Though open-ended interviews may present with similar reliability concerns, these are suggested to have utility in identifying the variables that might be maintaining challenging behavior, which can in turn be further explored in more comprehensive FBA processes (Hanley et al., 2014). Regardless of open or close-ended indirect assessment, an obvious inherent limitation is that neither involve observation of the individual and their engagement in particular behavior(s). Behaviorists should be aware of the solidarity within professional literature maintaining that FBA should not consist only of indirect assessment, nor should indirect assessment results alone be the driver of behavioral treatment (Hanley, 2012; Iwata et al., 2013; Koritsas & Iacono, 2013; Wallace et al., 2014). References

Cooper, J., Heron, T. and Heward, W., 2007. Applied Behavior Analysis. 2nd ed. Upper Saddle River, NJ: Pearson.

Hanley, G.P. (2012). Functional assessment of problem behavior: dispelling myths, overcoming implementation obstacles, and developing new lore. Behavior Analysis in Practice, 5(1), 54-72. Hanley, G.P., Jin, C.S., Vanselow, N.R., & Hanratty, L.A. (2014). Producing meaningful improvements in problem behavior of children with autism via synthesized analyses and treatments. Journal of Applied Behavior Analysis, 47, 16-36. Iwata, B. A., DeLeon, I. G., & Roscoe, E. M. (2013). Reliability and validity of the Functional Analysis Screening Tool. Journal of Applied Behavior Analysis, 46, 271–284.

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Wallace, M.D., Vega, C.M., & Hernandez, A. (2015). Translating the QABF into Spanish with an eye toward reliability and validity. Behavioral Interventions, 30, 65-72.

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COVID-19 Vaccine Information

DBHDS Provider Questions about COVID-19 Vaccine, please email: rr-eoc providers@dbhds.virginia.gov

Pharmacy Partnership for Long-Term Care Program for COVID-19 Vaccination Frequently Asked Questions List: http://www.leadingageny.org/?LinkServID=C9D6AABC-A70E-C2A0-68C1C2C28F268F9B

CDC COVID-19 Vaccination FAQs: https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fag.html CDC's COVID-19 Vaccination Communication Toolkit: https://www.cdc.gov/vaccines/covid-19/health-systems-communication-toolkit.html

Walgreens Information:

Walgreens Facility Tip Sheet, COVID-19 vaccine:

https://www.geercares.org/wp-content/uploads/2020/12/2020-12-14-Walgreens-Immunization-Tip-Sheet.pdf

Walgreens Vaccine Consent Form: https://www.hopkinsmedicine.org/hse/forms/fluform/Walgreens_Community_VAR_ENG.pdf Walgreens COVID-19 Vaccine What to Expect Guide:

https://www.kdads.ks.gov/docs/default-source/covid-19/ach-data/pharmacy-partnership/walgreens-covid-19-vaccine-what-toexpect-guide.pdf?sfvrsn=47e001ee 2

CVS/Omnicare Questions, please email: <u>CovidVaccineClinicsLTCF@CVSHealth.com</u>

To support the COVID-19 vaccine clinic model, every facility must verify their primary and secondary contact information. Updated contact information will help ensure you receive timely updates, access to clinic resources, and scheduling information. Please note that COVID-19 Vaccine Clinic confirmations will only be sent to the primary and secondary contacts entered. Go to this link to change your contact information: https://info.omnicare.com/Update-Contact-Info.html

CVS/Omnicare COVID-19 Vaccine Clinic Guide: https://www.cvs.com/content/coronavirus

CVA/Omnicare COVID-19 Vaccine Resource: https://www.omnicare.com/covid-19-vaccine-

resource/?mkt_tok=eyJpIjoiT0RZME5UazFOelUwWXpWaClsInQiOiJDQ2s4RktXZ0VGVXJ1RHdCdnpqQlh4Nm90Q1wvSExcL2 ZPNW02anNNeFwvVGxKZ3hTUVJIWmJqaFRwbWpIUW1ucVk0S200d3hPdTZjdUErRmNFWGIaMnc0cEljSzViK1hvY1ZMZzhr SVhLQmZ5ZUtxVE9RdWZWRVIJeWxnSzVjbnAzViJ9

The Office of Integrated Health's Registered Nurse Care Consultants

