

# Opioid Overdose Education and Naloxone Distribution (OEND) Train the Trainer Model

Date



# Being a Champion

- You have been identified as the champion for the Opioid Overdose Education and Naloxone Distribution (OEND) program at your clinic
- A champion acts as the resident expert in OEND and plays a critical role in ensuring content is successfully shared with fellow clinicians
- Supporting resources:
  - Trainer's handbook with embedded tools
  - Online resources (health.mil webpage)

# Being a Champion

## Champion criteria

- Expresses enthusiasm and confidence about the success of the innovation
- Persists under adversity
- Dynamic facilitator
- Capable of getting the right people involved
- Has access to resources and social capital
- Is flexible and committed
- Shares vision

## Champion responsibilities

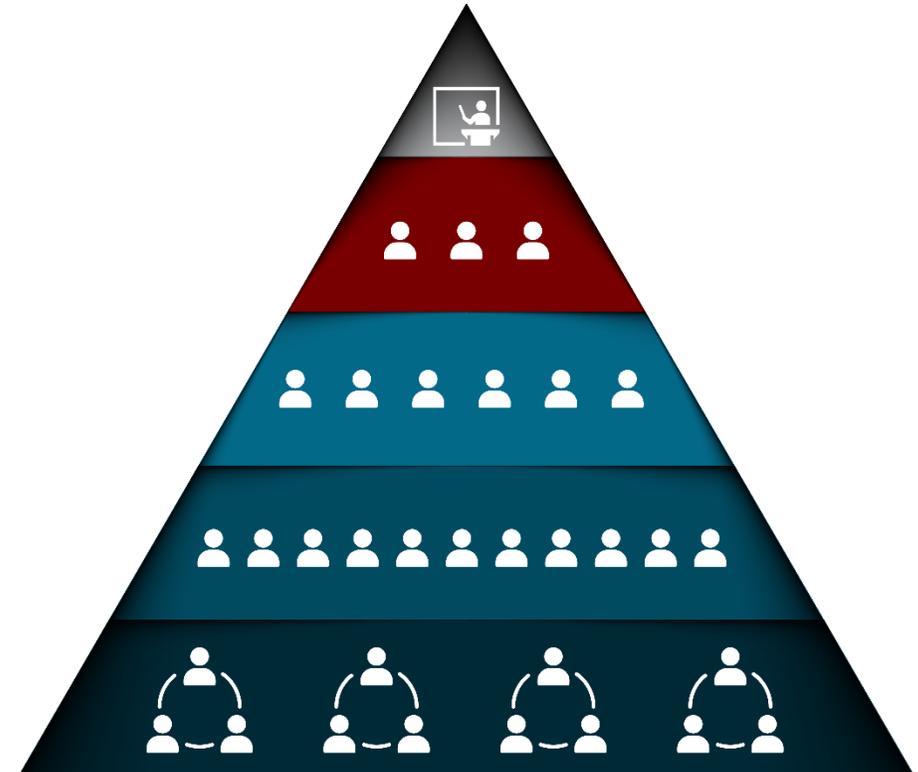
- Engage local opinion leaders
- Organize learning group
- Disseminate information
- Provide ongoing monitoring and evaluation
- Functions as a point person and resource
- Continues to mentor and coach trained trainers



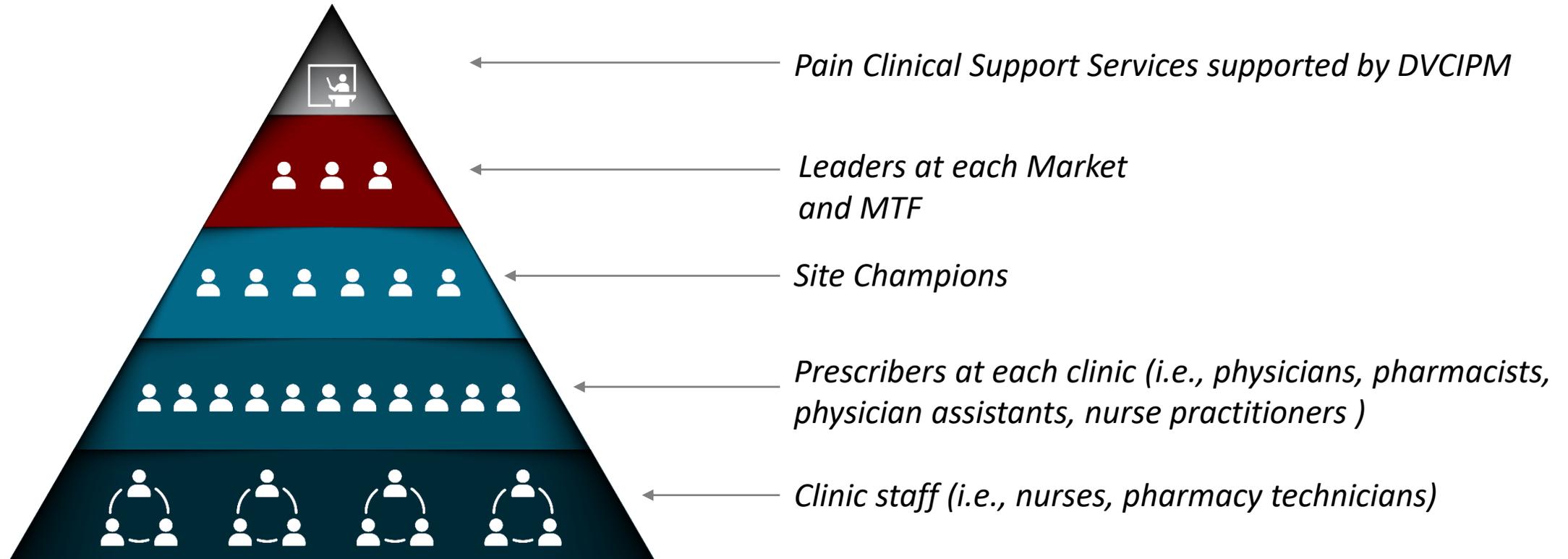
# Train the Trainer Model

## ■ The model involves the following steps:

- The new instructor trainee becomes familiar with the content by training directly with the experienced instructor
- The trainee then observes the experienced instructor teach the same content
- The trainee then completes the exercises themselves in order to practice the teaching sections
- The trainee then delivers the training to live participants



# Train the Trainer Model



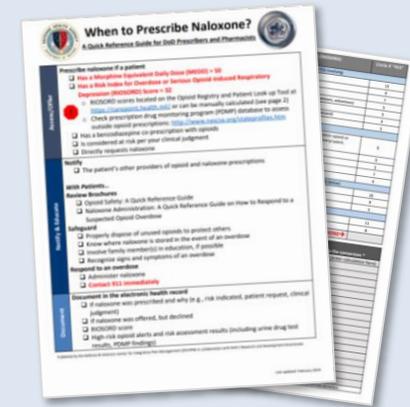
***“Medically Ready Force...Ready Medical Force”***

# Toolkit Contents

■ In addition to a handbook with supporting appendices, your trainer toolkit includes:

- ❑ Quick Reference Guide
- ❑ CarePoint Instructions
- ❑ Myths & Facts and Frequently Asked Questions (FAQs)
- ❑ Naloxone and Opioid Safety Brochures
- ❑ Customizable Training Deck Skeleton (digital)
- ❑ Videos (e.g., how to use Carepoint)
- ❑ Role Play Scripts
- ❑ Webpage Resources (<https://health.mil/OEND>)
- ❑ SharePoint
- ❑ Social Media Campaign Plan

Examples:



Naloxone Quick Reference Guide



CarePoint Instructions

# Quick Start G.U.I.D.E.



**G**et leadership involved



**U**nderstand your audience and identify clinics



**I**nitiate participant communication and plan training



**D**isseminate and implement your training



**E**valuate the success of your training and maintain feedback loop

# Planning the Training (ADDIE Framework)



## Analyze

- Identify need (gap in existing knowledge or skills relating to opioid overdose education and naloxone distribution)
- Confirm feasibility of a training with leadership, target audiences, and logistics coordinators

## Design

- Select your learning activities from the trainer's manual, incorporate the principles of Adult Learning Theory
- Define metrics you'll monitor and use to evaluate your training's success, modify survey tools accordingly
- Create your training plan with an operational timeline

# Planning the Training (ADDIE Framework)



## Develop and Implement

- Select the appropriate training materials for your training plan
- Adjust the learning materials (slide deck, handouts, etc.) for your specific audience
- Select a time and place for the training, make sure you have what you need to present and complete learning activities
- Request approval as needed for staff time, invite participants, and have them complete their pre-training form to gauge what they already know
- Implement your training, focusing on areas where there is a large gap in knowledge or skills

# Planning the Training (ADDIE Framework)



## Evaluate

- **Examine the reactions, learning, behavior, and impact during and after your training**
- **Record any lessons learned or improvement opportunities**
- **Continue to monitor training impact, be a resource for your colleagues as needed**
- **Collect (survey) data, share as appropriate to contribute to systematic improvement of the OEND program**

# Presentation Tips

- ✓ Use simple graphics and rely your oral presentation to communicate key information
- ✓ Allow time for questions, feedback, and active participation
- ✓ Define or explain any technical jargon early on
- ✓ Allow for brief breaks if your audience is getting restless

# Data Collection

Here are some data collection options. Example surveys are included in your manual, which can be modified and distributed to support your evaluation efforts.

## When to collect data

## Data collection methods

### Pre-Training

- Use CSPP or the Look-Up Tool Dashboard on CarePoint to get opioid and naloxone statistics for your site and providers.
- Administer a pre-training survey
- Conduct a brief focus group with colleagues to determine current practice gaps

### During Training

- Ask participants during training about their standard practice

### Immediately Post-Training

- Survey participants on knowledge gained and intention to change behavior
- Set goals and plan follow up

### Three Months Post-Training

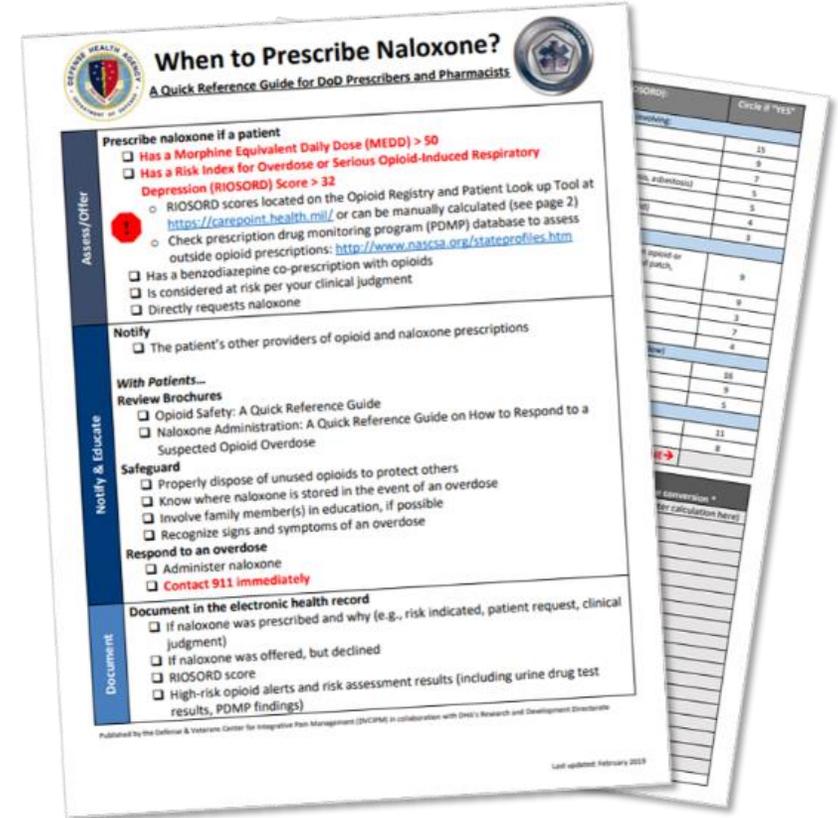
- Email or call participants to check in
- Re-assess Carepoint-based statistics
- Send a follow-up survey to determine practice change and challenges to change

### Six Months Post-Training

- See 3-month options above
- Consider an additional training or even leading your own Train the Trainer program

# Learning Activities: Case Studies

- Have a few case studies ready. Request that participants calculate a mock patient's RIOSORD score. Discuss as a group if the patient is at increased risk and if they would recommend naloxone.
- This exercise also allows opportunities for participants to share case examples they have encountered of when to prescribe due to clinical judgment.



*When to Prescribe Naloxone: A Quick Reference Guide*

# Learning Activities: CarePoint Tutorial

- We recommend a live tutorial in real time to walk through the steps in CarePoint to access the various tools.
- At the end of the exercise, participants will have an example of a patient report, like the one pictured, and be able to locate the RIOSORD score, current prescriptions (naloxone), and the MEDD.

Annotations on the screenshot:

- RIOSORD =12**: Points to the RIOSORD Index Score field.
- Last naloxone Rx Nov 2018**: Points to the Last Naloxone date field.
- Concurrent benzo**: Points to a benzodiazepine prescription in the Benzo Dispensing History.
- ORRCA Report**: Points to the ORRCA report generation button.
- MEDD > 50**: Points to a peak in the MEDD OVER TIME graph.

## ■ To Tell the Truth Trivia

- Pull a few myths and facts into a slideshow, read them from note cards, or have them pre-written on a flip board or whiteboard. Divide your participants into two teams, or if you have a smaller group, everyone can compete for themselves. Quiz your participants on which statements about opioids and naloxone are either true or false.

## ■ Myth Busters

- Divide your participants into two teams, or if you have a smaller group, everyone can compete for themselves. Give them a notecard with a myth written on it and start the timer while they work together or individually to bust the myth. After the allotted time, have everyone share their answers with the group. Remember to maintain a supportive learning environment. If a participant's answer is still not quite there, find an encouraging way to offer an alternative myth-busting fact.

## ■ Role Play

- Select 2 volunteers, have one be the patient and the other be the nurse, pharmacist, or prescriber. Hand the patient the patient prompts from either scenario 1 or write out prompts from your own clinical experience with patients. Have the volunteers role play in front of the other participants to see how the provider would respond to their patient's questions and concerns about opioids and naloxone. Provide encouragement as needed.

## ■ Bingo

- Use the key messages bingo sheets to keep participants engaged during the end of your training. If they're not up for the role play activity, have them mark their bingo sheet as you go over the key messages to discuss with patients. This will make learning more hands-on and if anyone gets a "bingo!" they can read out loud the key messages that helped them win.

# Agenda Template

*Complete the template to plan your training.*

**Training Date:**

**Training Time:**

**Training Location:**

**Participants:**

Time	Activity
Example: 9:00-9:15 am	Example: Welcome and review OEND training objectives with participants

# Local Dissemination: Social Media

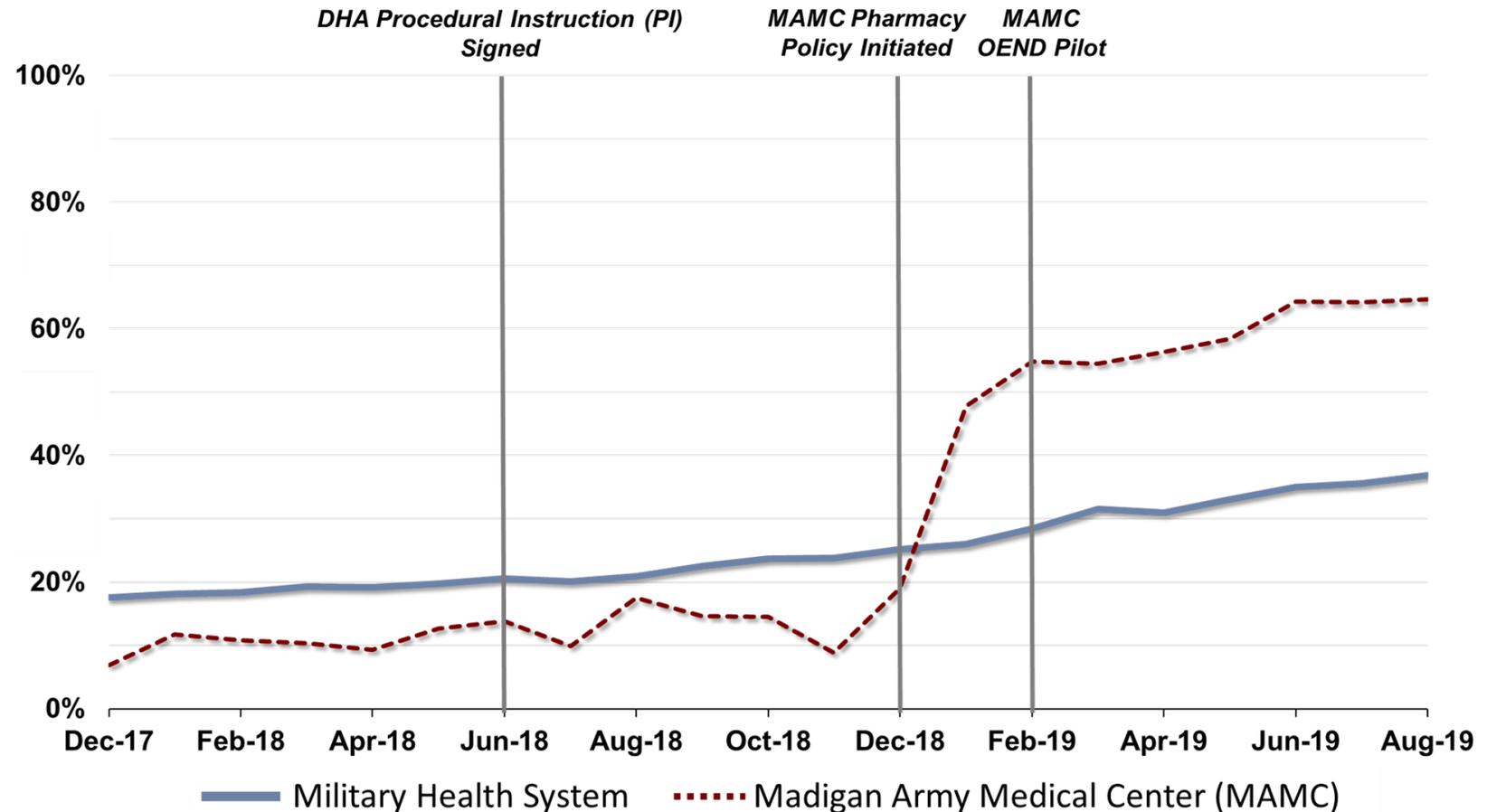
- In addition to training Market and MTF providers in delivering the OEND program and improving their naloxone prescribing, you can also use the Social Media Campaign Plan to get the word out about naloxone.
- Work with your local Public Affairs Offices to develop a social media campaign plan, using the example plan and infographics found in your materials.
- Follow-up with the local Public Affairs Offices to see how many people accessed the information. This can be used to guide further dissemination efforts at your sites.

# Conclusion

- This program has already shown measurable success at the OEND MTF pilot site, effecting a demonstrable uptick in naloxone co-prescriptions.
- Our overall goal is to improve co-prescription rates across the Military Health System and ensure that warfighters and beneficiaries are receiving the highest standard of care.

*Where does your clinic compare to the MHS on the plot below?*

**Percent of Patients at an Elevated Risk for an Overdose Who Were Dispensed Naloxone**



\*Elevated Risk defined as having a Risk Index for Overdose or Serious Opioid-Induced Respiratory Depression (RIOSORD) > 32