

Opioid Stewardship Series, Season 1, Episode 1: Opioid Stewardship Assessment Overview

Speaker 1 (00:02):

We're gonna be introducing HSAG's opioid stewardship program assessment and how to complete it. Um, we will cover how the results from this internal assessment will allow you as a team to identify gaps in your current opioid stewardship program. And lastly, we're gonna identify resources that are available using our rationales and references section that's linked in the assessment is how do you know if what you are doing is working well? Um, so where do you start? How do you know where your gaps are? Measuring is a distinct part of any type of programs. So that's, you know, whether it's a weight loss program, a strength training program, or even say a diabetes management program. It's important to assess an initial baseline and then intermittently evaluate progress along the way. And how do we do that? It's through assessments. So, any high performing organization utilizes internal assessments at the beginning of any program.

Speaker 1 (01:06):

So to support you in that, we're gonna introduce to you, HSAG has developed in, uh, facility assessments to evaluate opioid stewardship program implementation. These assessments were designed for a multidisciplinary team's guide to assessing current state of opioid stewardship. It's 11 questions and it's broken up into four subcategories. Um, so it's pretty simple to address, and it really gives you a nice guide of what your current strategies are that are in place. And once completed, it serves as a gap analysis to determine priority areas, uh, for really to make the greatest initial impact for implementation. Um, we've actually had 22 facilities pilot this assessment. It takes about an hour or so if you do it as a team, we do encourage multidisciplinary team, uh, collaboration when completing this. Um, but just to give you an idea, it's something that can be done in a meeting.

Speaker 1 (02:09):

Um, so we do encourage you to do so. So, to make the assessment as practical as possible for each of your teams, we develop three versions. The questions are gonna be similar in nature, uh, but are designed to address distinct facility-type characteristics relating to opioids. For instance, how many of you work in inpatient and have that feeling that ED may be their own entity? We understand there's nuances between some of these departments, and to capture that, we've developed these distinct versions of the assessment. So we have an acute, an ED, and a skilled nursing facility assessment so that you can use a distinct assessment for your care area. We're gonna cover the four subcategories that are themes in these assessments. Um, these themes are all parts of a comprehensive opioid stewardship program. So that is why we broke it down into these sections.

Speaker 1 (03:10):

First, commitment. No sustainable change occurs without organizational commitment. And so this "c" section covers leadership buy-in and structure, um, and ensures that policy alignment to standards, uh, are in place to guide practice. Second action. Uh, specific tactics and strategies are covered in this section, such as proactive screening, safe prescribing and treatment, or referrals for opioid use disorder. Next, we have the track and report section. If you aren't monitoring trends, um, you really aren't going to be able to know if improvement is being made when serving your population. That's where this section comes into play. And we did see some individuals indicate that tracking opioid quality measures was an opportunity. So, take a look at that section specifically there. Lastly, education and expertise. We know that empowering staff and patients and family with necessary knowledge is helpful to make informed decisions. And opioids are an informed decision.



Speaker 1 (<u>04:19</u>):

We want to make sure that we understand that's a big decision and just think of informed consent. We want to make sure that when prescribing opioids, patients and families and residents fully understand the impact and risks and benefits for that decision. So, that's what's covered in that section as well. We've designed the assessment to show levels of implementation. So, for each question, you'll determine whether your facility has the corresponding strategy in place using the following criteria. First, not implemented or no plan. Then you may have a plan to implement, but you may not have a start date set yet. Third, you may have a plan to implement and a start date is ready to go. Then, for those strategies that are implemented, it may be something that is new and within the last six months. Lastly, you may have a process that's been in place for over six months and really fully instituted into your process.

Speaker 1 (05:23):

So, we, we created this assessment so that you can really measure that level of implementation for each strategy. So, when your team evaluates each question, make sure to consider, um, really the institution performance all together rather than an individual or unique department. Next, we're gonna give an example for each of the given assessments, um, just to kind of give you guys a little bit of an, uh, a feel for how this works. So, for the ED assessment, here's an example question from the commitment section. The emergency department has a presence within your organization's opioid stewardship initiative. Again, you'll have the opportunity to select which level of implementation for that strategy. Um, at, you know, at this point as a team, it's also helpful to really kind of probe and kind of dive in a little bit more. Some considerations could be, as you're going through this and discussing these topics, is there a designated leader or champion that's responsible for supporting opioid stewardship efforts in the ED?

Speaker 1 (06:33):

You know, in addition, does your facility have an interdisciplinary team that meets on opioid safety topics? If so, is the ED represented in that team? These are where you can really dive into these topics and get deeper levels of questions before answering. So, as you work through as the assessment, you may be wondering why a particular question is asked to support you. In these questions, we included rationales and references that are linked At the end of the assessment for each question, there is an end note that is connected to every question. And then when you click on that end note, it'll actually bring you to a rationale for that topic. Just know that these are vetted references. So, we did the work for you to ensure that the tactics and strategies that are, uh, supported by evidence-based resources for each of these questions. So know that these assessment topics will support regulations and survey standards your facility is already expected to meet.

Speaker 1 (07:40):

Also, reviewing these references can sometimes bring potential for enhanced discussions. So let's go for another example question on the acute assessment. Here's an example question from the track and report section, your facility tracks and trends, opioid quality measures on a dashboard that is shared with an interdisciplinary team. And this may cover MME prescribing, Naloxone administration, co-prescribing of opioids and benzodiazepines. Again, take a look, measure, you know, discuss as a team, and then evaluate what level of implementation exists at your facility. So, lastly, from the skilled nursing facility assessment, here is an example question for you, and this comes from the education and expertise topic. Your facility provides education regarding pain management, pain treatment plans, and safe use of opioids medications to residents, families, and caregivers. Really, the rationale behind this question is patients and residents involved in pain management planning, guides, residents, and families in a manner that can increase treatment adherence.



Speaker 1 (<u>08:52</u>):

So, that was kind of a quick overview of examples from each of the assessments and how you can go ahead and answer those questions using those implementation levels. Let's cover a couple key points to consider. Um, first, this is an initial scan of your organization status. Remember that Rome wasn't built in a day. So we are going through this opioid stewardship journey together. It's okay if you do not have some of these strategies in place at the given moment. That's why you're here. And this tool is really the design to help you if you're kind of stuck in the mud, so to speak, where you really need some direction on where to start and to make that greatest impact. Secondly, utilize the multidisciplinary team to develop a response. Who are these team members? It may be a medical director or a CMO. We really encourage pharmacy to be involved as well.

Speaker 1 (<u>09:46</u>):

Frontline nurse champions. We want to make sure we know that what we have in place in policy is actually happening, um, at the, the point of care. Also, for sure, leadership needs to be involved as well. Your facility knows your team dynamic. So we just recommend assessing this as a team to get multiple perspectives of what currently is in place and actually occurring at your facility. So, remember to consider everyone's input. Lastly, if you have items needing additional time and exploration, maybe you need to take a look at some of those references that are tagged, um, parking lot, those items and return to them at a later point. That's fine. We want to make sure that as you complete this assessment together, it's done efficiently so that it can be a valuable time spent for you all. I'm sure many of you want to go ahead and get started, and there's really two ways you can go ahead and do that.

Speaker 1 (<u>10:41</u>):

We talked about access to the QIIP, so our quality improvement and innovation portal. Uh, once you have access, simply log and if you click the assessment tile, um, you'll then see your facility assessment fully integrated into that system. You can complete that assessment right then and there. Um, so if you have the team together, you can click on these subtopics, for instance, commitment, and then all of the questions will be there and you can answer all of the given questions right then and there. Make sure if you do it this way, at the very end, you click save, which is in bottom right, to make sure it saves into that ... the system. Secondly, you may want to print out hard copies and provide them to all the team members. Review it together and use that mechanism so that you can take a look closer at some of the rationales and references as well.

Speaker 1 (<u>11:35</u>):

If you want to proceed that way, make sure to download the assessment, which you can do directly from QIIP as well. You'll see that orange button that says download assessment, where you can download a PDF version, print them out, and then you can always return back to QIIP to then input your answers. What are are the benefits of submitting your answers into QIIP? We just want to provide you for some context. This provides an opportunity for some historical record for your team, so that you can store previous assessment answers. And as you progress, you may redo the assessment and to be able to measure what progress has been made. Also, um, you can generate reports directly from the QIIP where you can then distribute some of that information to your quality improvement committees. Lastly, HSAG is able to also track and trend community progresses. Uh, we, we contribute this information into the system and then at a later date we can share the results and really be able to show the impact of us meeting together and really focusing on these topics.

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