Creating an Integrated Opioid Policy for Multi-State Hospice Practices: Improving Opioid Compliance and Patient Safety

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INTRODUCTION

The nation is currently immersed in an opioid epidemic. Multi-state providers face the conundrum of complying with both federal and state regulations while reconciling state-to-state differences. To ensure patient access to safe opioid treatment, hospice operators must align their policies with national, state and local rules. The development and implementation of a comprehensive, practice-specific opioid policy and sustainable regulatory database informs hospice practice protocols for care standardization, secures regulatory compliance and enhances the medico-legal fortitude of a multi-state healthcare organization.

OBJECTIVES

Goal: Review, synthesize and reconcile federal, state, and local opioid regulations and create a system for a sustainable database in order to develop, implement and maintain opioid policies in 190 hospice offices across 35 states to ensure safe, compliant opioid practice.

Aim 1: Create a repository of federal, state, and local opioid regulations.

Aim 2: Appraise and synthesize opioid regulations to develop a comprehensive hospice practice-specific opioid policy.
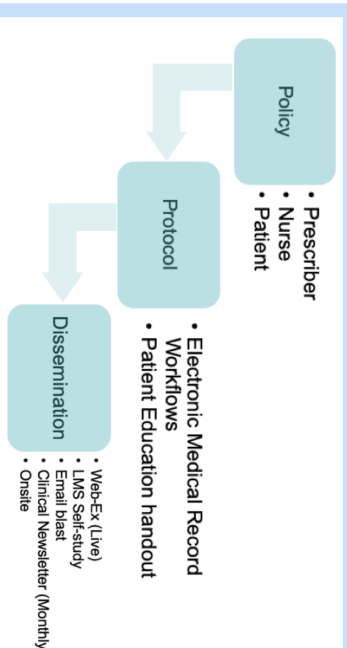
Aim 3: Implement the policy system-wide, multi-state.

Aim 4: Evaluate clinicians' adherence to the policy.

METHODS

The project was implemented at Amedisys Inc, the third-largest hospice provider in the United States.

Aim 1: Using Microsoft Office 365 SharePoint, the Policy Manager downloaded all federal and state opioid regulations to create a centralized, sustainable repository.

Aim 2: Applying the KTA framework, opioid laws and regulations were synthesized by a multi-disciplinary core team. The gathered knowledge was translated into actionable system-level policy for hospice practice.

- Prescriber
- Nurse
- Patient

Policy → Protocol → Dissemination

Policy
- Prescriber
- Nurse
- Patient

Protocol
- Electronic Medical Record Workflows
- Patient Education handout

Dissemination
- Web-Ex (Live)
- LMS Self-study
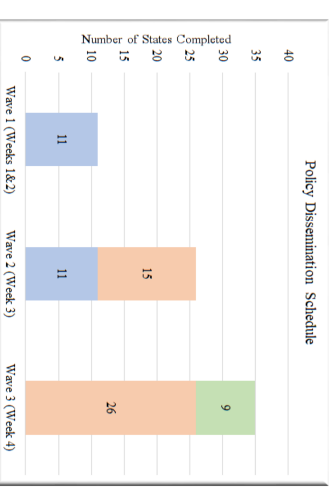- Email blast
- Clinical Newsletter (Monthly)
- Onsite

Aim 3: Policy and protocol requirements were embedded into the electronic medical record (EMR) documentation software and education was disseminated via mandatory webinars and an online learning management system.

Aim 4: Clinician adherence to policy and protocols was monitored via EMR system-generated reporting. A comparison of opioid-related events pre- and post-policy implementation was conducted.

RESULTS

By end of November 2020, 100% of the hospice clinicians received education on the umbrella opioid medication policy and state specific guidance.

Policy Dissemination Schedule

Number of States Completed

	Wave 1 (Weeks 1&2)	Wave 2 (Week 3)	Wave 3 (Week 4)
	11	11	26
		15	9

Type of Opioid-Related Events	# Pre-Policy Implementation (12/2019-1/2020)	# Post-Policy Implementation (12/2020-1/2021)
Prescriber failure to follow opioid protocol	2	0
Clinician failure to follow opioid policy	6	3
Clinician failure to follow opioid disposal protocol	6	2
Clinician failure to do opioid medication reconciliation during home visit to the patient	18	8

In each of the opioid-related events category, at least 50% reduction was seen.

IMPLICATIONS

This DNP project has applicability to improve compliant opioid practice in a variety of care settings nationwide. A system-wide policy implementation of standardized opioid practice has the potential to reduce patient harm associated with variability in practice.

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