HIIN PROVEMENT
RESULTS

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PAOLI HOSPITAL | ADVERSE DRUG EVENTS (ADE)

ORGANIZATION AND TEAM

INDIANA UNIVERSITY HEALTH PAOLI HOSPITAL
Paoli, Indiana

PROJECT DESIGN

>> Describe the background/context in your community that impacted your selection of the topic to address the challenge
> According to www.in.gov/tdhp, “Drug overdose deaths involving opioid in Indiana increased from 283 in 2010 to 452 in 2014.”
> Who else participated in this project in addition to the hospital team?
> Law enforcement, judge, emergency medical services (EMS), physician and nursing colleagues, pharmacist and rehabilitation services.

>> What are the results of your topic?
> Pain management coordinator (emergency department nurse), a case manager, an emergency department physician (medical director) and the emergency department nurse manager.
> Pain management coordinator
> Patients are evaluate for the risk of becoming addicted to narcotics.
> A history assessment worksheet is completed on each individual and reviewed by the Pain Management Committee monthly.
> One of three actions determined by committee members: certified letter sent to individual, no letter needed but monitor closely, no need to continue to monitor at this time.
> Letters sent to individuals explaining overuse of prescription narcotics dangers and the importance of having one provider managing pain medications prescribing. The letter also includes patient specific information obtained from Hyspact report (Indiana’s Prescription Monitoring Program) as well as known deceit, and known visits to multiple hospitals, etc.
> Many letter recipients have sent communications with gratitude for helping them get to the root cause for many EB visits.

RESULTS

>> How did your hospital’s participation in the HEN/HIIN contribute to the outcome achieved?
> Raised awareness of the opioid epidemic on the local and national level. Data collection in reference to the HEN evaluation measure: Adverse Drug Events due to opioids were monitored. Required no use of reversal agents within the hospital. The program could easily be adjusted to meet the needs of any hospital.

>> What did the results/outcome teach the team?
> June through December of 2014, there were 31 individuals identified as needing a certified letter mailed about frequent visits with requests for narcotics. There was a 68.3 percent decrease in visits by the 31 individuals.
> 2015, 17 Individuals identified, 59.8 percent decrease in visits.
> 2016, 29 Individuals identified, 60.7 percent decrease in visits.

>> What did the patient teach the team?
> Barriers to proper health care were identified in the individual reviews. The individuals were contacted and plans were developed to assist in reducing the barriers. Identified barriers were related to transportation to primary care physician (PCP) or pain management provider, education about services available such as physical therapy, occupational therapy, and addiction services.

LESSONS LEARNED

“Prescription drug abuse is a growing epidemic affecting all manner of people, from stressed out students cramming for exams, to ambitious professionals and athletes looking for an edge, to recovering soldiers returning from battle. And despite the death toll and the recurring headlines of surging overdose deaths, the rates of prescription drug abuse and addiction continue to steadily grow. An estimated 46 Americans die each day from prescription drug overdose, and more than 6 million people suffer from prescription drug abuse disorders in the U.S.” (www.bitterpill.in.gov)

>> If all rural hospitals would implement this program there would be
> Less prescription opioid availability to individuals at high risk of becoming addicted. (Opioids are the gateway drug to heroin and cocaine.)
> Elevated awareness about the dangers of prescription opioid addiction.

SPREAD AND SUSTAINABILITY

>> How easy is the intervention for others to implement?
> The program could easily be adjusted to meet the needs of the facility. Training, education, and program implementation would be required.

>> Why should other hospitals implement your intervention?
> The work of the Pain Management Committee at IU Health Paoli dramatically decreased emergency department visits from individuals requesting pain medications, thus, meeting the goal of not contributing to the detriment caused by the overuse of narcotic pain medications.

HIIN PROVEMENT

>> What commitment would you ask each hospital to make to reduce harm in prescription opioids?
> Implement a program to monitor frequent visits from individuals requesting pain medications and the number of opiates prescribed by emergency department providers at facility.

>> Will your facility commit to reducing the number of opioids prescribed in the emergency department?

SETTING THE STAGE

>> Why did you feel it was a challenge?
> It is a national epidemic.
> According to the 2009 DEA report, “Nearly 7 million Americans are abusing prescription drugs- more than the number who are abusing cocaine, heroin, hallucinogens, ecstasy, and inhalants, combined.”

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>> Why did you make the choice to address the challenge?
> Indiana University (IU) Health Paoli health care providers identified many recurring visitors to our Emergency Department with frequent complaints of various types of pain.

>> What evidence based intervention (or interventions) was/were selected to address the challenge?
> An organic Pain Management Program was created through a triad of an emergency department physician, nurse manager and emergency department registered nurse.

ADDRESSING THE CHALLENGE

>> What would have happened if you didn’t address the challenge?
> “An estimated 46 Americans die each day from prescription drug overdose and more than 6 million people suffer from prescription drug abuse disorders in the U.S. Drug overdoses were blamed more than 1,000 deaths in Indiana in 2012, a 57 percent increase over the past decade.” (bitterpill.gov)

>> What would have happened if you successfully addressed the challenge?
> June of 2014, IU Health Paoli formed a subcommittee of the Emergency Department Committee to monitor frequent visits of individuals to the emergency department with the goal of not contributing to the detriment caused by the overuse of narcotic pain medications.

>> What evidence based intervention (or interventions) was/were selected to address the challenge?
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EMERGENCY DEPARTMENT VISIT REDUCTION POST-LETTER

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