

HQIC Patient Safety: Opioids

Welcome!

- All lines are muted, so please ask your questions in the Chat panel.
- For technical issues, chat to “All Panelists.”
- Please actively participate in polling questions that pop up on the lower right-hand side of your screen near the end of the presentation.

We will get started shortly!

HQIC Opioids: Multimodal Pain Management



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 **ALLIANT**
HEALTH SOLUTIONS

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Hospital Quality Improvement Contractors
CENTERS FOR MEDICARE & MEDICAID SERVICES
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Alabama Hospital Association
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Hospital Quality Improvement

Welcome from all of us!



Opioid Co-Leads



Lynne Hall, RN, BSN

Lynne has over 30 years of healthcare experience, including as a Labor and Delivery and neonatal nurse and at Georgia Hospital Association (GHA) as an advocate for patient safety and quality. She also represents GHA as a Maternal/Child Expert with the Georgia Department of Public Health. Lynne is a member of the leadership team for the GA Perinatal Quality Collaborative and currently serves on the Maternal Mortality Review Committee.

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Jennifer Massey, PharmD

Jennifer has 15 years of experience in clinical pharmacy in the acute care hospital setting and in various roles at Alliant Health Solutions working on the CMS contract for the Quality Innovation Network–Quality Improvement Organization (QIN–QIO). She currently serves as SME for Opioids and Adverse Drug Events for HQIC.

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Learning Objectives

- Introduction to Multimodal Pain Management.
- Describe the different elements that make up Multimodal Pain Management.
- Understand how Multimodal Pain Management can be used in hospitals to decrease opioid-related adverse drug events and decrease high-dose opioid prescribing.

Opioids

- Pain management in the hospital is important for patients and their families.
- Pain management can be complex or simple.
- Individual pain perception differs per individual.
- Appropriately treating pain may increase HCAHPS score.
- Inadequate pain management can adversely affect the patient psychologically by increasing stress and anxiety and can delay the healing process.

Pain Management

- Pain is described by:
 - Intensity
 - Duration
 - Aggravating and relieving conditions
 - Structures involved in causing the pain
- Multimodal Pain Management has a role in identifying the source of the pain to help provide the optimal treatment plan.

Multimodal Pain Management

- There are many ways to increase comfort during a hospital stay.
- Use patient and family to form a plan for pain management.
- Discuss with the patient what kinds of comfort measures help (reading, music, aromatherapy).
- Develop a comfort menu with alternatives to opioids.

Pain Management Options

- Interventional procedures
- Medication management
- Physical therapy or chiropractic therapy
- Psychological counseling and support
- Acupuncture and other alternative therapies
- Referral to other medical specialists

Pain Treatment Options

- Physical Techniques:
 - Hot and cold therapy
 - Massage
 - Physical therapy
 - Acupuncture
- Mind-Body Techniques:
 - Yoga
 - Tai chi
 - Deep breathing

Pain Treatment Options

- Medication Therapy
 - Injections, patches, ointments
 - Acetaminophen
 - Non-steroidal anti-inflammatory drugs (NSAIDs)
 - Muscle relaxants
 - Mixed Amine Reuptake Inhibitor/Opioid

Examples of Comfort Menu

- Warm pack/cold pack/ice/heat
- Warm blankets
- Warm washcloth
- Extra pillow(s) (neck, knees, ankles)
- Humidification for your oxygen tube
- Saline nose spray
- Fan
- Bed repositioning
- A walk in the hall
- Shower
- Pet therapy if available
- Grooming items such as lip balm, toothbrush, floss, cotton swab, mouthwash, lotion or shampoo
- Gentle stretching/range of motion exercises
- A particular food or beverage
- A visit from a chaplain or social worker
- Soothing music and guided imagery therapy (TV channel)
- Sleep

Tips for Success

- Include a comfort menu or cart
- Staff buy-in to remove barriers
- Training staff on alternatives

Comfort Menu



We want to do everything we can to make you more comfortable and help control any pain. There are many ways to soothe your pain without using medications. Let your nurse know what items or activities might make you more comfortable by checking the boxes below.*

Check items below that you are interested in trying...

Relaxation

- Stress ball
- Massage/handheld back massager
- Hand massage
- Visit from chaplain
- Reading visit
- Talking visit
- Relaxing music
- Soft background sounds/sound machine
- Guided Imagery Therapy: helping you imagine positive and relaxing things
- Quiet/uninterrupted time
- Pet therapy
- Essential oils
- Darkness
- Neck or lumbar pillow
- Temperature adjustment

Comfort

- Warm pack
- Cold pack
- Ice
- Warm blanket(s)
- Warm washcloth
- Cool washcloth
- Extra pillow(s) - (neck, knees, ankles, lumbar)
- Humidification for your oxygen source
- Saline nose spray
- Fan
- Repositioning
- Warm bath or shower
- Walking
- Gentle stretching
- Food or beverage

Entertainment

- Book (audio, large print)
- Magazine
- Movie
- Wi-Fi for your personal laptop or tablet
- Deck of cards
- Puzzle book (crossword puzzles, word searches, Sudoku)
- Notepad and pen
- Coloring book
- Board games
- Arts & crafts
- Your favorite music
- Television
- Handheld electronic game
- Activity apron/blanket

Feel Better

- Lip balm
- Toothbrush/toothpaste/dental floss
- Deodorant
- Comb or brush
- Q-tip/cotton swab/nail file
- Shampoo/conditioner
- Scalp massage
- Robe
- Hair band
- Mouth swab/mouth wash
- Lotion
- Lollipop/Lozanges
- Chocolates
- Sunshine
- Prayer
- Pet visit
- Pajama (from home or from staff)
- Pedicure/Manicure

Sleep

- Ear plugs
- Eye shield/mask
- Quiet
- Night light
- Television/Music/Sound Machine
- Uninterrupted sleep time

Other/Additional Info:

Nonpharmacologic Therapy Menu

Nonpharmacologic Therapy Menu

Therapies you and your nurse can do now

Music Therapy

- TV Channel 20
- Listen to your music

Relaxation¹

- Deep breathing
- Stretching
- Progressive muscle relaxation
- Prayer
- Meditation

Guided Imagery¹

- Meditate on images on music TV Channel 20
- Create own images

¹Ask your nurse for instructions

Distraction

- Read
- Electronic games
- Crossword puzzles, word searches
- Board games
- Watch TV

Ask your nurse about arranging the following therapies

Music Therapy²

- Live music in your room

Massage Therapy

- Battery operated massage units

Aromatherapy

- Essential oils to smell

Distraction Resources

- Crossword puzzles, word searches
- Checkers/Chess
- Books
- Have someone read to you²

Pet Therapy²

- Pet visit in your room

Positioning

- Repositioning
- Elevation of extremity

Physical Agents

- Heat or cold

² Call Volunteer Services to schedule
NOTE: Based on availability

Best Practices in Pain Management

Table 2: Key Best Practices in Pain Management

- Help staff to recognize the mechanism of the most common types of pain, e.g., nociceptive, inflammatory and neuropathic.
- Perform a multidimensional pain assessment and establish a pain diagnosis or diagnoses.
- Collaborate effectively as a member of the interdisciplinary team and engage the patient in an appropriate, balanced, goal-oriented, multimodal treatment plan.
- Involve longitudinal providers (primary care, outpatient specialists) early on in the pain management plan.
- Provide evidence-based and mechanism-targeted pain management guidelines.
- Provide appropriate specialty care.
- Dispense opioids in the safest manner and establish a system to monitor for side effects.
- Assess the impact of pain on function and risk for addiction.
- Discuss with the patient the treatment plan including monitoring, and realistic goals and limitations of pain therapy for the specific pain problem.
- Use a balanced, multimodal approach combining drugs with different mechanisms of action and non-drug techniques.
- Provide oral analgesia when possible.
- Limit administration of intravenous opioids to acute needs (e.g., painful procedures) and when patients are unable to take oral medications.

https://www.hospitalmedicine.org/globalassets/clinical-topics/clinical-pdf/shm_painmanagement_guide.pdf

Key Takeaways

- Understand Multimodal Pain Management.
- Describe the different elements that make up Multimodal Pain Management.
- Understand how Multimodal Pain Management can be used in hospitals to decrease opioid-related adverse drug events and decrease high-dose opioid prescribing.

How will this change what you do? Please tell us in the chat.



Opioid Interventions

	Opioid ADE and Stewardship
Pharmacy-Led Interventions	Pharmacy-led Opioid Stewardship Committee with a physician champion to review order sets and change prescribing practices.
Prescriber-Led Interventions	Patients are not concurrently prescribed opioids and benzodiazepines.
	Only one prescriber was managing the opioids, benzodiazepines and hypnotics in this patient.
	The patient was prescribed adjunctive non-opioid medications for pain management.
	Dispense Naloxone to all patients who are prescribed an opioid in the ED.
	Outpatient prescription for Naloxone for all patients discharged on opioids.
Referral-Focused Interventions	A standard process was used to assess the patient for an OUD.
	Alert primary care of positive OUD.
	Structured process for referral to substance use, mental health treatment and peer support services.

Opioid Interventions

	Opioid ADE and Stewardship
Protocol-Based Interventions	The patient was prescribed/offered non-pharmacologic "comfort" interventions for managing pain.
	Consult CSRS/PDMP prior to continuing or prescribing new opioids.
	Initiate urine drug testing prior to prescribing opioids.
	Pain reassessment completed before and after each narcotic dose.
	For patient's prescribed opioids at discharge: discharge summary sent to patient's primary care provider and/or pain management specialist within three days.
Patient-Focused Interventions	Patient's medical record does not contain stigmatizing language (e.g., drug user, addict, junkie, habit, abuse, clean, dirty)
	Patient was asked for permission to discuss with her/his key support person (e.g., significant other, family member, friend) opioid risk, pain management alternatives and/or MAT as appropriate.
	Provide 'Do's and Don'ts of Pain Medicines' to patients receiving an opioid at discharge.

Resources


- [Multimodal pain management: A better approach to pain control - Mayo Clinic](#)
- [Multimodal Pain Management: Considerations for Clinicians Treating Pain - resourcesforintegratedcare.com](#)
- [Alliant Health Solutions Comfort Menu](#)
- [Managing Pain and Improving Comfort - John Hopkins Medicine](#)
- [What works: How can we make you more comfortable? - American Nurse Journal](#)
- [Improving Pain Management for Hospitalized Medical Patients - Society of Hospital Medicine](#)

Questions?



Email us at HospitalQuality@allianthealth.org or call us at 678-527-3681.

HQIC Goals



Behavioral Health Outcomes & Opioid Misuse

- ✓ Promote opioid best practices
- ✓ Decrease high dose opioid prescribing and opioid adverse events in all settings
- ✓ Increase access to behavioral health services



Patient Safety

- ✓ Reduce risky medication combinations
- ✓ Reduce adverse drug events
- ✓ Reduce *C. diff* in all settings



Quality of Care Transitions

- ✓ Convene community coalitions
- ✓ Identify and promote optical care for super utilizers
- ✓ Reduce community-based adverse drug events

Upcoming Events

January 13th, 2022

11:30am EST

(occurring the second Thursday of each month)



Opioid HQIC Patient Safety Network

Jennifer Massey and Lynne Hall

www.quality.allianthealth.org

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Thank you for joining us!
How did we do today?

Alliant Health Solutions



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