

Opioid Prescription Management Toolkits

Improving Opioid Prescribing: Sustainable Solutions for Vermont Practice Fast Track and Facilitator's Toolkits



WHAT ARE THESE TOOLKITS AND WHY WERE THEY CREATED?

These toolkits collect the best practice strategies for managing opioid prescriptions in primary care (and other) ambulatory settings. The strategies resulted from a two-year project (The Opioid Prescribing Quality Improvement Project, 2012-2014) to identify the most helpful methods used to create predictable and well-managed opioid prescribing patterns for physicians, nurse practitioners, and physician assistants and their patients.

WHAT ARE SOME OF THE BEST PRACTICE STRATEGIES FOR MANAGING OPIOID PRESCRIPTIONS?

New regulations about the prescribing of chronic opioids require the use of consent forms/treatment agreements and use of the prescription monitoring system. The standard of care supported by boards of medical practice across the country recommend, under certain circumstances, a variety of practice strategies to safely prescribe and monitor chronic opioid treatment. These strategies include assessing risk for misuse, use of pill counts and urine drug testing, best-practice documentation, standardizing prescribing intervals to minimize communication issues between the patient, office staff and prescriber, and others.

WHAT ARE SOME OF THE RESULTS FROM THE OPIOID PRESCRIBING TWO-YEAR PROJECT?

All ten practices enrolled in the project reported positive results from the best practice strategies they chose to implement from the toolkit. The strategies helped prescribers standardize their approach and increase confidence in managing opioid prescriptions, helped practices change their support systems, and increased provider and staff satisfaction regarding the way opioid prescriptions are managed.

WHO SHOULD READ THESE TOOLKITS AND HOW ARE THEY DIFFERENT?

Fast Track Toolkit: This toolkit is intended for ambulatory care practices whose leaders, providers, and staff want to improve the process of managing opioid prescriptions for their chronic pain, non-palliative care patients. It is for practices with a team ready to make a quick start on a few of the 17 strategies and provides practical advice on getting started, how to adjust practice workflow, and how to implement changes. The toolkit includes an extensive appendix with policies, sample tools, and references.

Facilitator Toolkit: This toolkit is intended for practices that have not yet made a decision to work on opioid prescription management and need to develop a rationale, leadership support, and team to work on this topic. It provides three stages of development: preparation, design (of workflow), and implementation. It provides detailed guidance on measurement, team facilitation, work flow analysis, and follow up. It is best used by facilitators, staff, or leaders interested in supporting a transformative change in opioid prescription management. It includes the same appendix as the Fast Track Toolkit, with additional materials to support facilitation.

WHERE CAN I FIND THESE TOOLKITS?

These toolkits are posted on the UVM Office of Primary Care and AHEC Program website at uvm.edu/medicine/ahec.

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