Evaluating Implementation of Life-Saving Opioid Overdose Education and Naloxone Distribution (OEND) within the Veterans Health Administration

Melissa L.D. Christopher, Pharm.D.
National Director, Academic Detailing Program Office
Pharmacy Benefits Management – VA Central Office

Exploring Naloxone Uptake and Use—A Public Meeting Presentation

July 2, 2015
OEND – A Healthcare System Model

• Opioid Overdose Education and Naloxone Distribution

• A harm reduction and risk mitigation initiative that aims to decrease opioid-related overdose deaths

• Key Components
  – Education and training
    • Opioid overdose prevention and recognition
    • Opioid overdose rescue response
  – Risk mitigation strategies
  – Issuing naloxone kits
Overview of Evaluation Approaches

- National
- Veterans Integrated Service Network (VISN) and Facility
- Lessons Learned
National Evaluation Approaches

• VA OEND Naloxone Kit Distribution Report

• Academic Detailing and OEND
  • Naloxone Reversal Report
  • Outreach to identify and resolve barriers for VA clinical staff to further expand access to high risk populations
VA OEND Naloxone Kit Distribution Report

- Tool provides daily updates on OEND implementation progress to facilities
  - Number of kit prescriptions
  - Number of patients receiving kits
  - Real-time distribution to identify locations that may need assistance getting their OEND programming started

- FY15 year to date, **115 medical centers are participating in the OEND program with over 5400 kits released**
Results: OEND Kit Distribution (June 2015)

<table>
<thead>
<tr>
<th>State</th>
<th>Opioid Reversals</th>
</tr>
</thead>
<tbody>
<tr>
<td>CA</td>
<td>1</td>
</tr>
<tr>
<td>CO</td>
<td>1</td>
</tr>
<tr>
<td>GA</td>
<td>4</td>
</tr>
<tr>
<td>MA</td>
<td>25</td>
</tr>
<tr>
<td>MI</td>
<td>3</td>
</tr>
<tr>
<td>MO</td>
<td>1</td>
</tr>
<tr>
<td>OH</td>
<td>35</td>
</tr>
<tr>
<td>PA</td>
<td>5</td>
</tr>
<tr>
<td>RI</td>
<td>1</td>
</tr>
<tr>
<td>UT</td>
<td>1</td>
</tr>
<tr>
<td>WA</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>79</td>
</tr>
</tbody>
</table>

Top 5 VA Facilities for Naloxone Kits Released

<table>
<thead>
<tr>
<th>Rank</th>
<th>Facility</th>
<th># Kits Released</th>
<th>VISN</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>PHILADELPHIA</td>
<td>430</td>
<td>4</td>
</tr>
<tr>
<td>#2</td>
<td>BATTLE CREEK</td>
<td>310</td>
<td>11</td>
</tr>
<tr>
<td>#3</td>
<td>CLEVELAND</td>
<td>300</td>
<td>10</td>
</tr>
<tr>
<td>#4</td>
<td>BOSTON</td>
<td>245</td>
<td>1</td>
</tr>
<tr>
<td>#5</td>
<td>INDIANAPOLIS</td>
<td>195</td>
<td>11</td>
</tr>
</tbody>
</table>
Naloxone Reversal Reporting

- Centralized reversal tracking tool that standardizes documentation and aggregation of spontaneous reporting of reversal events
- Academic Detailing Program Office provides training sessions to the field on how to report a reversal to the centralized reversal tracking tool
- Outreach to prescriber if reversal is reported to consider additional intervention, replacement prescription and provider need for additional resources/educational programming
Results: 79 Reversals Reported

- Daily updates of Naloxone Reversal Tracker through spontaneous reports from field creates a healthcare system culture of excitement and encouragement that we can make a difference with this life saving intervention.
- 7% of patients prescribed a naloxone kit have received more than one kit.
- Replacement supply for patients who have lost their kits or are requesting a different dosage form (switching from nasal to auto injector is a common reason reported by prescribers for additional kits issued to the same patient).
Results: OEND Clinician Outreach by Academic Detailers

OEND Educational Outreach Pharmacist Visits with Prescribing Staff and Clinical Support Staff
(October 2014 to May 2015)

329 education visits with 1105 providers
OEND – Academic Detailing Supports Implementation

OEND Implementation by Fiscal Quarter

Academic Detailing Program Office initiates OEND involvement

*QTR 3 Incomplete
Other Implementation Considerations

- Electronic Medical Record note template to guide education and process
  - Quick prescription orders empower and remind prescribers to offer this intervention with instructions defaulted to make the process more efficient
- Patient education groups provide an opportunity for patients to discuss questions and learn in supportive environment
  - Incorporate OEND into existing pain educational efforts
- Use multiple health care disciplines to roll-out education
  - Start in SUD clinics or residential units
VA Healthcare System Strategies: Opioid Therapy Risk Reduction Report

- This report allows VA clinicians to look at their patients on long term opioids and assess risk mitigation strategies including when a naloxone kit was last dispensed
VISN and Facility Evaluation Approaches

- Pilot program implementation of OEND was used to inform VA on steps for healthcare system implementation
- Research project—Facilitators and Barriers of OEND implementation VISNs 10 and 21
- Facility evaluation programs utilizing patient measures
  - Patient feedback survey programs
  - Pre- and post-test assessments following OEND education
  - Call-back programs
Research in Progress: Implementing Overdose Education and Naloxone Distribution: A Formative Evaluation (PI: Oliva)

<table>
<thead>
<tr>
<th>Aims</th>
<th>Method</th>
<th>Product(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aim 1</td>
<td>Qualitative</td>
<td>Effective Strategies for OEND Implementation Guidebook</td>
</tr>
<tr>
<td></td>
<td>Interviews with key stakeholders from VISNs 10 and 21; Patient focus groups with patients receiving OEND training within residential treatment settings in VISN 21.</td>
<td>Data will be synthesized into a guidebook that identifies effective strategies for OEND implementation and key barriers/facilitators</td>
</tr>
<tr>
<td>Aim 2</td>
<td>Technical Assistance</td>
<td>National OEND Implementation Toolkit and Manuscript</td>
</tr>
<tr>
<td></td>
<td>Use guidebook developed in Aim 1 as a basis for a VA OEND implementation toolkit. Toolkit will be modeled after existing national toolkits endorsed by OMHO/MHS.</td>
<td>A SharePoint will be developed to house the national OEND implementation toolkit. The main manuscript &quot;Using Formative Evaluation to Facilitate Implementation of Overdose Education and Naloxone Distribution within VA&quot; will be submitted to Implementation Science.</td>
</tr>
</tbody>
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VA Health Services Research & Development, Quality Enhancement Research Initiative, Rapid Response Project
This survey is administered after OEND training for quality improvement purposes.

Includes questions to identify whether OEND training is meeting the intended goals (how to prevent, identify, respond to an overdose), and ways to improve training.

Overdose Education and Naloxone Distribution (OEND) Patient Feedback Survey

GOAL: You are being asked to provide feedback on the Overdose Education and Naloxone Distribution (OEND) training that you just received. This survey is anonymous so that you can feel free to provide us honest feedback so that we can improve OEND training for future patients who will be trained. Thank you for your feedback and for helping us to improve this training!

1. Overall, how satisfied are you with the OEND training that you received?
   - Not at all satisfied
   - Somewhat satisfied
   - Extremely satisfied

2. How helpful was the OEND training in teaching you how to prevent an overdose?
   - Not at all helpful
   - Somewhat helpful
   - Extremely helpful

3. How helpful was the OEND training in teaching you how to identify an opioid overdose?
   - Not at all helpful
   - Somewhat helpful
   - Extremely helpful

4. How helpful was the OEND training in teaching you what to do during an opioid overdose?
   - Not at all helpful
   - Somewhat helpful
   - Extremely helpful

5. How confident are you that you could administer naloxone if you witnessed an overdose?
   - Not at all confident
   - Somewhat confident
   - Extremely confident

6. How important is it for the program to provide OEND training to patients?
   - Not at all important
   - Somewhat important
   - Extremely important

Please explain: ____________________________________________________________

7. What are one or two things you learned that you did not already know?
   ____________________________________________________________

8. What are one or two things you would like to learn more about/did not fully understand?
   ____________________________________________________________

9. What can the program do to improve OEND training?
OEND Patient Feedback Survey*

<table>
<thead>
<tr>
<th>Survey Topic</th>
<th>Rating</th>
</tr>
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<tbody>
<tr>
<td>Overall Satisfaction</td>
<td>4.37</td>
</tr>
<tr>
<td>Identify opioid overdose</td>
<td>4.52</td>
</tr>
<tr>
<td>Knowing what to do during opioid overdose</td>
<td>4.61</td>
</tr>
<tr>
<td>Confident could administer naloxone</td>
<td>4.51</td>
</tr>
<tr>
<td>Importance of OEND training</td>
<td>4.68</td>
</tr>
</tbody>
</table>

*Questions about this slide should be directed toward Elizabeth.Oliva@va.gov
A VA facility instituted a call back process involving case managers calling Veterans who, in the past 6 months, were trained in OEND and who were dispensed naloxone kits. This allows staff to identify if a reversal occurred and if additional patient interventions are needed.
Lessons Learned

• Capitalize on Electronic Medical Records to capture naloxone dispensing
  – Mechanisms need to be in place to capture various methods of dispensing
  – Electronic medical records need to tie events with prescription dispensing so clinical teams know to follow-up with patients at high risk

• Providers may not be aware of OEND
  – Modeling the process of education with the patient, using videos and having demo kits in their office facilitates the uptake of new prescriptions and OEND education

• Need evaluation to show value of OEND
  – Particularly for patients prescribed opioids as the current evidence base is for individuals with Opioid Use Disorder
Questions?

Contact Academic Detailing Program Office:
PharmacyAcademicDetailingProgram@va.gov