

California Health Improvement Project (CHIP) Reducing Opiate Overdoses Through Safe Opiate Prescribing Support

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Problem Statement and Underlying Causes

96 Patients died of accidental opiate-related overdose in Contra Costa County in 2014. Unsafe opiate prescribing practices at CCHS facilities are prevalent, including:

- No chronic opiate patient registry
- Inconsistent use of recommended best-practices that reduce opiate diversion and doctor shopping for high-risk patients

Project Description

Create an automated, population based registry of patients receiving chronic opiate prescriptions in the system. Identify and disseminate three safety practices that conform to standard of care and create systems to support providers in conforming to those practices for all of their patients. Monitor if this reduces the number of opiate related ED visits and deaths in our system.

Goal and Objectives

Goal:

Reduce Opiate Overdoses in Contra Costa County by 10% by the end of 2016

Output-oriented Objectives:

- Create an automated registry of all chronic opiate patients listed by provider by October 2015
- By July 2016, create health home team workflows with PCP to ensure safety processes are followed for all registry patients:
 - Appointment every 6 months
 - Toxicology screen every 6 months
 - CURES report every year

Outcome-oriented Objectives:

- By December 2016 increase the # of opiate patients who have had an appt with PCP in past 6 months by 20%
- By December 2016 increase the # of opiate patients who have had a utox in the past 6 months by 20%
- By December 2016 increase the # of opiate patients who have had a signed opiate contract on file by 20%



Outputs & Outcomes

Outputs Achieved

- Created EMR-based chronic opiate registry
- Created working group at CCHS to help implement goals and objectives - Safe Opioid Prescribing and Review Committee (SOPARC)
- Created new pain and opiate peer review group for CCHS
- Applied for and received CHCF grant to create and implement safer management practices amongst the health home teams at CCHS Identified nursing partners and developed metrics for “share the care” model
- Expect to have baseline data for % meeting goal for Utox and appt within 6 months; CURES report will be available October 2015

Outcomes Achieved

- We are following Contra Costa county data for opiate overdoses and overdose –related ED visits; however, 2015 data not yet available.
- Our plan is to follow this data indefinitely as we slowly implement and achieve our increases in safety prescribing practices

Lessons Learned

- ➔ Strong data helps get buy-in. Although getting a registry took time, knowing that 15% of our patients chronically receive opiate prescriptions helped put the issue on the map. Seeing that 4 out of the top 8 prescribed medications in our system was also eye-opening. Looking at overdose related deaths most effective.
- ➔ Working on this project is helping CCHS expand and clarify the roles of the health home team – this will have benefits across the spectrum of clinical care
- ➔ Stigma around addiction and pain remains a barrier to building effective safety systems.
- ➔ Creating standard work for team-based care requires many small tests of change.

About My Organization

Contra Costa Health Services

Our vision is for Contra Costa County to be the healthiest community in the nation.

Contra Costa Health Services is the largest department of County government, employing more than 3,500 individuals and serving over 200,000 people in our county.

We provide high quality services in several integrated divisions including a hospital, nine ambulatory sites, a thriving public health network, a health plan, mental health, homeless and drug and alcohol services as well as EMS and hazmat services.

We work in partnership with our patients, cities and diverse communities, as well as other health, education and human service agents.

Contact Me

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