## How to (re) capture & keep attention on the CA opioid epidemic

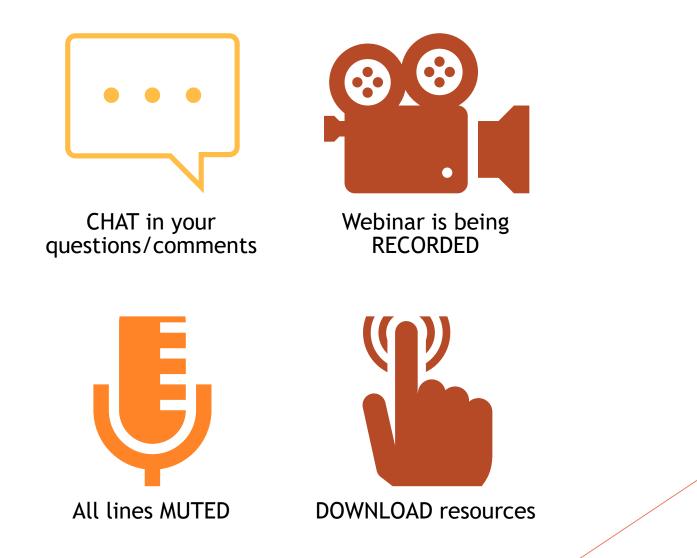
June 23, 2020

10:00am -11:00am Pacific Time

**Cal** Hospital Compare

Opioid Care Honor Roll 2020 Webinar Series - 1 of 5

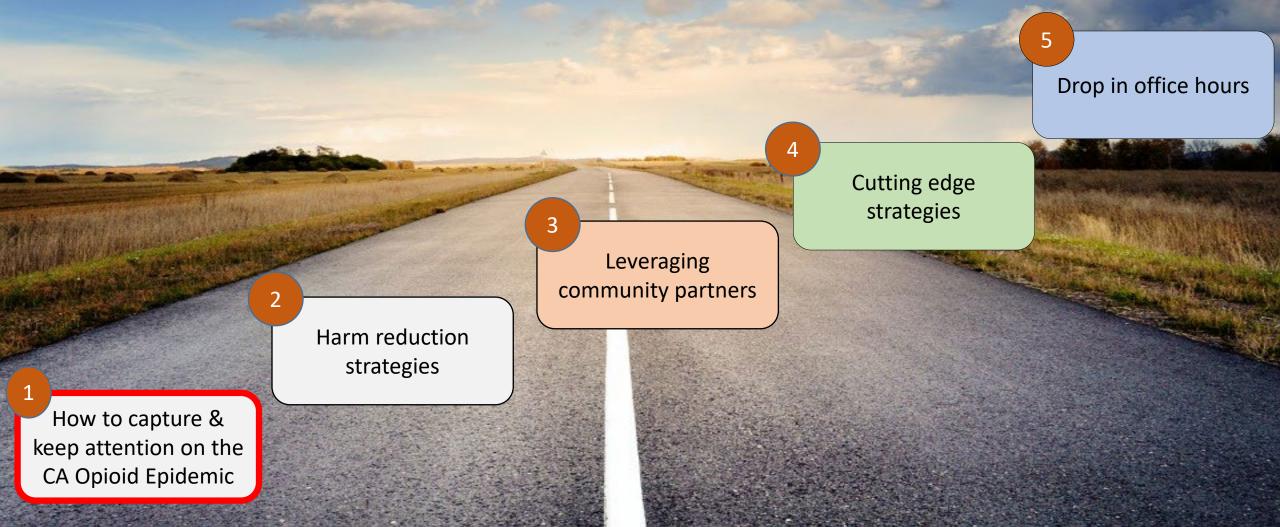
#### Using Adobe Webinar Platform





- Considered the value of attaining the 2020 Opioid Care Honor Roll & identified when you will apply for the designation
- Examined the impact of COVID-19 on pain management practices & patients with opioid use disorder
- Heard from peers their successes & lessons learned capturing & keeping attention on the California opioid epidemic in their hospitals
- Determined which cross cutting strategies to apply to your own work
- Communicated how Cal Hospital Compare can support your hospital's progress over the remaining webinars

## Opioid Care Honor Roll 2020 Webinar Series Roadmap



#### Cal Hospital Compare

**About:** For more than a decade, Cal Hospital Compare (CHC) has been providing Californians with objective hospital performance ratings. CHC is a non-profit organization that is governed by a multi-stakeholder board, with representatives from hospitals, purchasers, consumer groups, and health plans. In effort to accelerate improvement and recognize high performance by California hospitals, CHC publishes an annual Patient Safety Honor Roll and Low-Risk C-section Honor Roll.



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#### Facilitators



#### Alex Stack

Director, Programs & Strategic Initiatives, CHC



Aimee Moulin Co-Director CA Bridge



#### **Guest Speakers**



Casey Grover, MD ED Medical Director CHOMP

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#### POLL: What is your role?



### POLL:

## What are you currently working on to improve opioid safety in your hospital?

## 2020 Opioid Care Honor Roll



#### **Program Timeline**

#### 2019

- Pilot year of Opioid Care Honor Roll & self assessment tool
- 5-part learning webinar series
- Recognized by Sec. Ghaly, CHHS

#### 2020

- Inaugural year
- Refined selfassessment tool
- Launched resource library
- 5-part learning webinar series
- Recognition

#### 2021

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• Stay tuned!





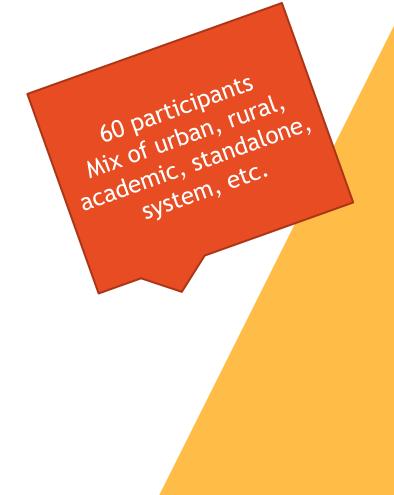


#### Cal Hospital Compare Announces 2019 Honor Rolls

December 13, 2019

Sacramento, CA – On December 13, 2019, California Health and Human Services Agency Secretary Dr. Mark Ghaly, along with Cal Hospital Compare, recognized hospitals across California for their high performance in maternity care, patient safety, and commitment to safe opioid care.

#### **Pilot Year Results**



Naloxone distribution Engaging providers, staff, patients Addressing stigma Measurement

> MAT Timely follow up

Discharge prescribing practices Alternatives to opioids

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#### Countdown!

To apply for the Opioid Care Honor Roll submit your Opioid Management Hospital Self-Assessment between

June 22, 2020 - October 9, 2020



### Apply Now

#### **Programs**

Maternity Care Honor Roll

**Opioid Care Honor Roll** 

Opioid Resource Library

Patient Safety Honor Roll

#### **Opioid Care Honor Roll**

#### Register for the 2020 Opioid Care Honor Roll Webinar Series!

In 2019, Cal Hospital Compare (CHC) launched the Opioid Care Honor Roll Program to help address the ongoing crisis. According to state data, nearly 2,200 Californians died of an opioid-related overdose in 2017. Patients with opioid use disorder are frequently hospitalized or visit the emergency department due to complications of the condition without also receiving treatment for the underlying disease of opioid addiction. This is a missed opportunity and leaves patients untreated and at high risk of future overdose. In this pilot year of the program, 60 hospitals voluntarily reported their progress on addressing the opioid crisis. While results show that all participating hospitals are making progress, it's clear more work is needed. In 2020, Cal Hospital Compare will continue to offer learning opportunities to support the rapid spread of evidence-based practices among hospitals and will announce the first Opioid Care Honor Roll recipients. All California hospitals are invited to participate. For more information on 2019 Opioid Care Honor Program learnings and next steps check out this fact sheet.

To measure opioid safety across all California hospitals, in a standardized way, CHC developed the *Opioid Management Hospital Self-Assessment*. This self- assessment measures opioid safety across 4 domains: 1) safe & effective opioid use, 2) identifying and managing patients with Opioid Use Disorder, 3) preventing harm in high-risk patients, and 4) applying cross-cutting organizational strategies. CHC designed this tool as both a measurement and quality improvement tool. All California, adult, acute care hospitals are eligible to participate in this program.

The 2020 self-assessment period starts June 22, 2020 and closes October 9, 2020. Submit your self-assessment results here.

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### POLL:

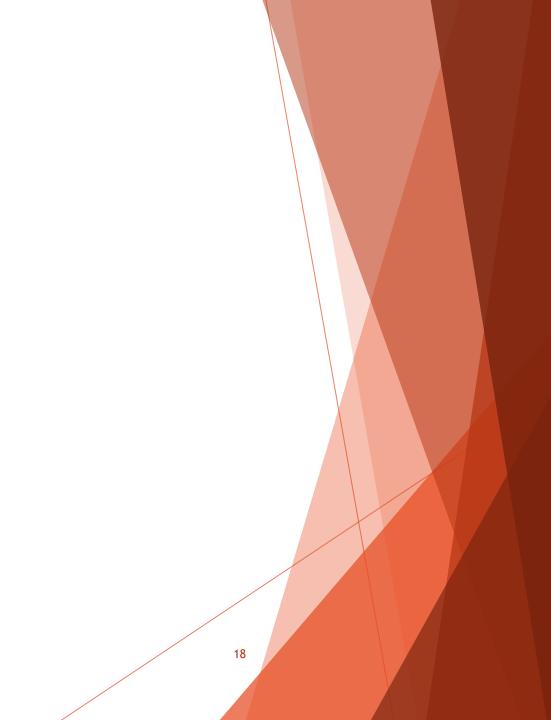
What is the first step you will take to apply for the 2020 Opioid Care Honor Roll?



#### CHAT: What questions do you have?

### Impact of COVID-19

Hospital operations, patients, providers, staff...





ARTICLE

## The Adverse Impact of Covid-19 on Individuals with OUD Highlights the Urgent Need for **Reform to** The coronavirus pandemic is having detrimental impacts on **Emergency** individuals with opioid use disorder. Social isolation, decreased access to medications or illicit drug supply, and reduced access to Based Trea harm-reduction strategies all compound the challenges facing a vulnerable population with comorbid conditions. The ED continues to offer access to care 24/7/365 and is a proven setting



THE CORONAVIRUS CRISIS

## A New Addiction Crisis: Treatment Centers Face Financial Collapse

June 15, 2020 · 9:00 AM ET

Fewer patients in recent months have been showing up for drug and alcohol treatment at REACH Health Services in Baltimore. But Dr. Yngvild Olsen, the medical director there, suspects it's not for good reasons: Some have likely relapsed or delayed drug and alcohol addiction treatment, while others likely fear infection and have stayed home.

#### Impact on Hospitals















### POLL:

What impact has the pandemic had on your hospital's opioid stewardship activities?



#### POLL: Have you changed your opioid prescribing practices for opioids?



## POLL:

Have you seen an increase in OUD related overdoses at your hospital?

## How to (re)capture & keep attention on the CA opioid epidemic

#### Progress

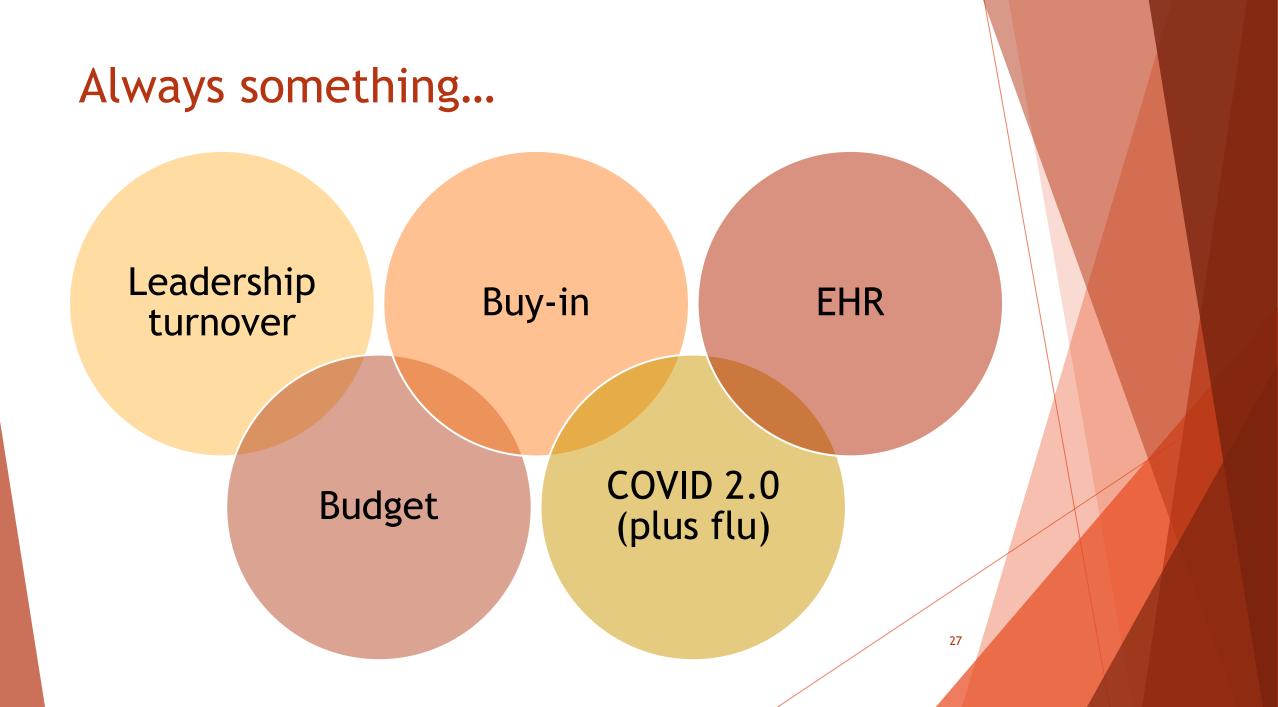
#### Infection control processes down

#### Resuming elective surgeries

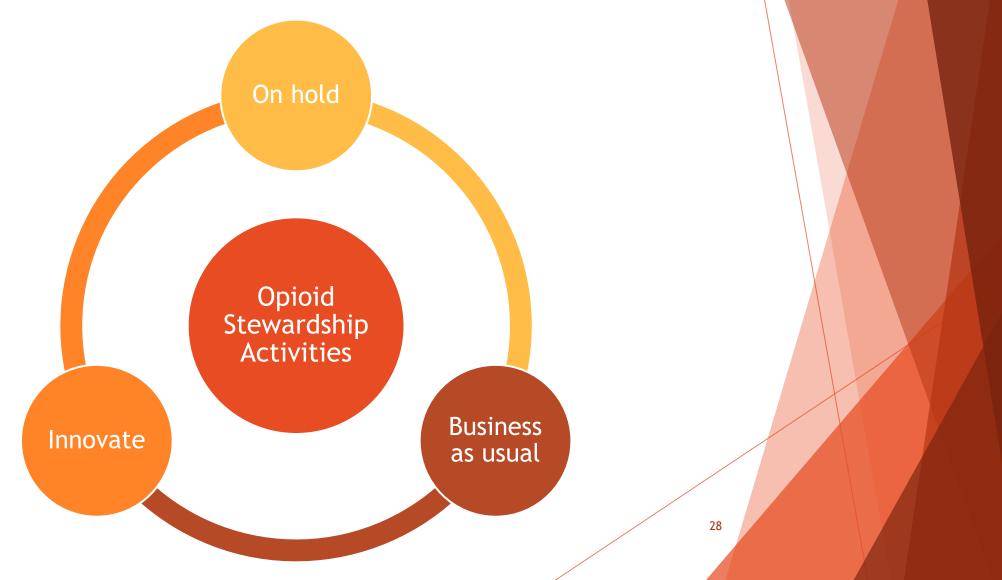
EDs are here for you

Can we talk about/do

something else??



#### **CA Hospital Approaches**



#### Resiliency & Flexibility



#### Mapping it back to the Self-Assessment

Measure	Level 1 <i>Basic Mgmt.</i> (1 pt)	Level 2 <i>Hospita</i> <i>Standar</i> (2 pts)		Level 3 Integration & Innovation (3 pts)	Level 4 Practice Improvement (4 pts)
<ul> <li>Safe &amp; Effective Opioid Use</li> <li>Appropriate opioid discharge prescribing guidelines</li> <li>Alternatives to opioids for pain management</li> </ul>			<ul> <li>Overdose Prevention</li> <li>Naloxone education &amp; distribution program</li> </ul>		
<ul> <li>Identification &amp; Treatment</li> <li>Medication Assisted Treatment (MAT)</li> <li>Timely follow up care</li> </ul>			<ul> <li>Cross-cutting Opioid Management Best Practices</li> <li>Organizational infrastructure</li> <li>Address stigma with physicians &amp; staff</li> <li>Patient &amp; family engagement</li> </ul>		

Source: Opioid Management Hospital Self-Assessment



#### CHAT: What questions do you have?

# To boldly go where no one has gone before

Building an ED Telehealth Followup Program

Casey Grover, MD Community Hospital of the Monterey Peninsula





## Moving parts

- ED providers design the process
- ED practice coordinator/admin run it
- Registration (aka Patient Access) contact people/register visits
- IT/EPIC build it
- Admin see the value and approve it





Wait, how do we register ER visits before they show up? And what about insurance?

- Setting the stage for telehealth follow-up during ED visit
- Getting/documenting consent on the day of the telehealth visit





- This is a telemedicine follow-up visit after a normal ED visit. To ensure that all necessary consents have been obtained, I
  personally asked the patient the following questions:
- This is a telemedicine visit that is meant to replace a follow up visit in the ER. We are using telemedicine to maintain social distancing to help us all stay safe during COVID-19. Do we have your permission today for me, Dr. Smith, to see you and evaluate you via telemedicine?
- Patient response: (\*\*\*Yes/No)
- 2. Do we have your permission to use or record any video or digital photographing of injuries or procedures for inclusion in the medical record, and electronic transmission of de-identified images between healthcare providers?"
- Patient response: (\*\*\*Yes/No)
- 3. I would like to let you know about our privacy policies. In accord with state and federal regulations protecting the
  privacy of patient healthcare information, if any person inquires about you by using your first and last name, the
  hospital may release at its discretion either none or only the following information: your general condition
  (undetermined, good, fair, serious, critical). In addition, Community Hospital of the Monterey Peninsula may disclose
  patient healthcare information to those parties responsible for payment of all or part of the hospital's charges or to
  other health care providers responsible for continuing care and treatment. Do we have your permission to continue?
- Patient response: (\*\*\*Yes/No)
- 4. In addition to maintaining social distancing while providing good medical care, telemedicine visits are less expensive than in-person visits. Since this visit is meant to - safely - replace an in person visit, do we have your permission to bill your insurance for this telemedicine encounter?"
- Patient response: (\*\*\*Yes/No)

## Pitfalls

- Technologically challenged patients and providers
- Kids/Pajamas/Life at home
- Bad Wifi
- Concerned administrators/Facility fees





# Originating Site Fee - Update 4/30/20

<u>https://www.cms.gov/newsroom/press-releases/trump-administration-issues-second-round-sweeping-changes-support-us-healthcare-system-during-covid?utm\_source=Telehealth+Enthusiasts&utm\_campaign=bee59bee5d-EMAIL\_CAMPAIGN\_2020\_04\_30\_11\_31&utm\_medium=email&utm\_term=0\_ae00b0e89a-bee59bee5d-353265290</u>

 Hospitals may bill as the originating site for telehealth services furnished by hospital-based practitioners to Medicare patients registered as hospital outpatients, including when the patient is located at home.





## And....

- 18 cases of ED followup (all comers) through May 1
- 8/8 rated the service line 5 stars!

• Thank you to Sameer Bakhda, MD, Kavitha Weaver, and Michelle Krueger-Kalinski, MD





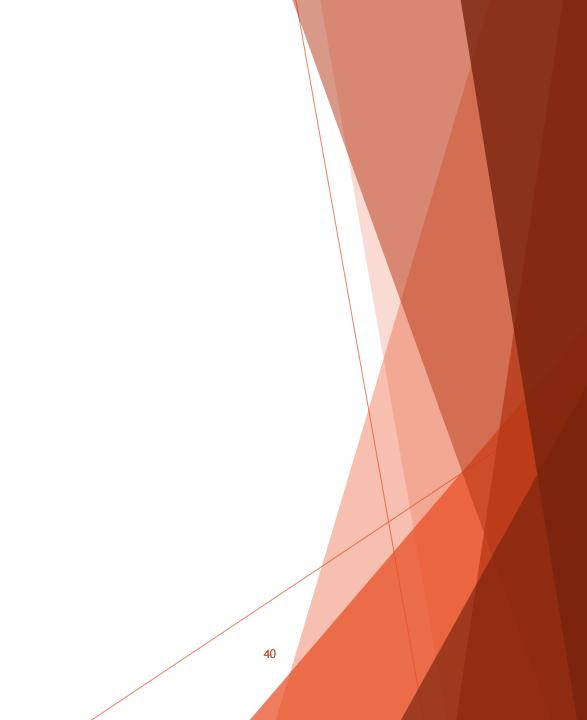


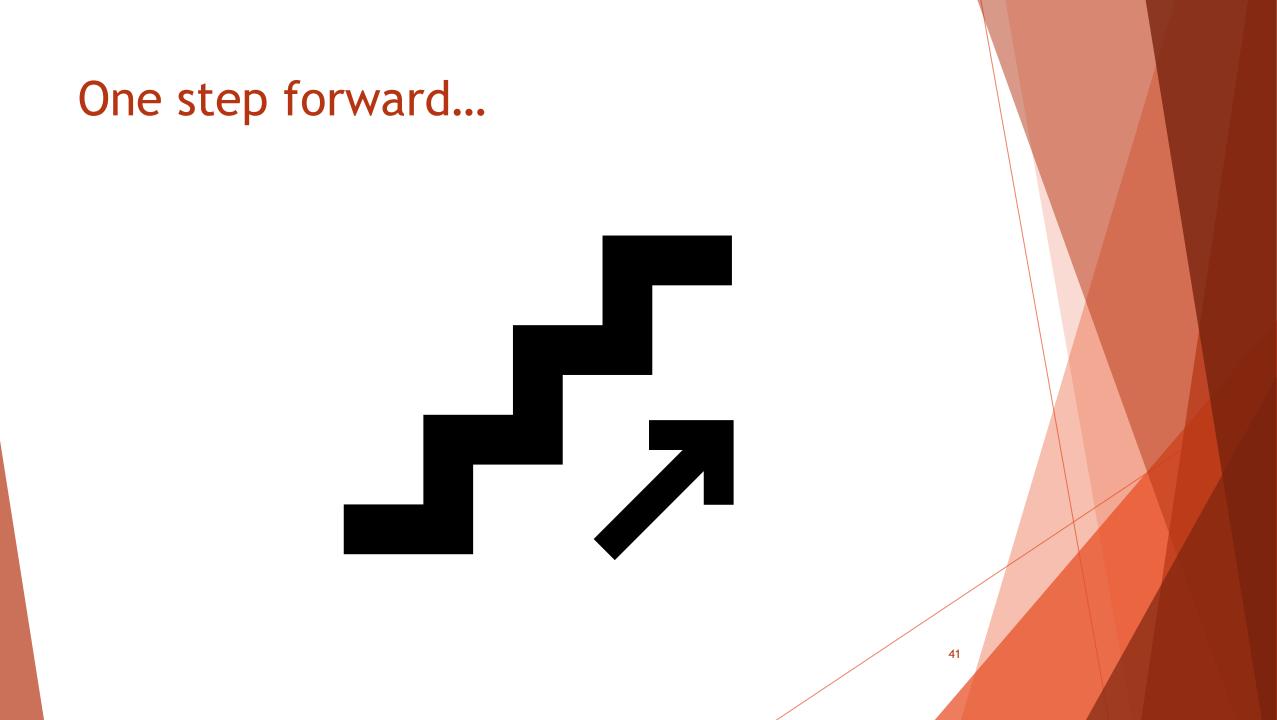
## CHAT: What questions do you have?

# UC Davis Health

Accelerating improvement

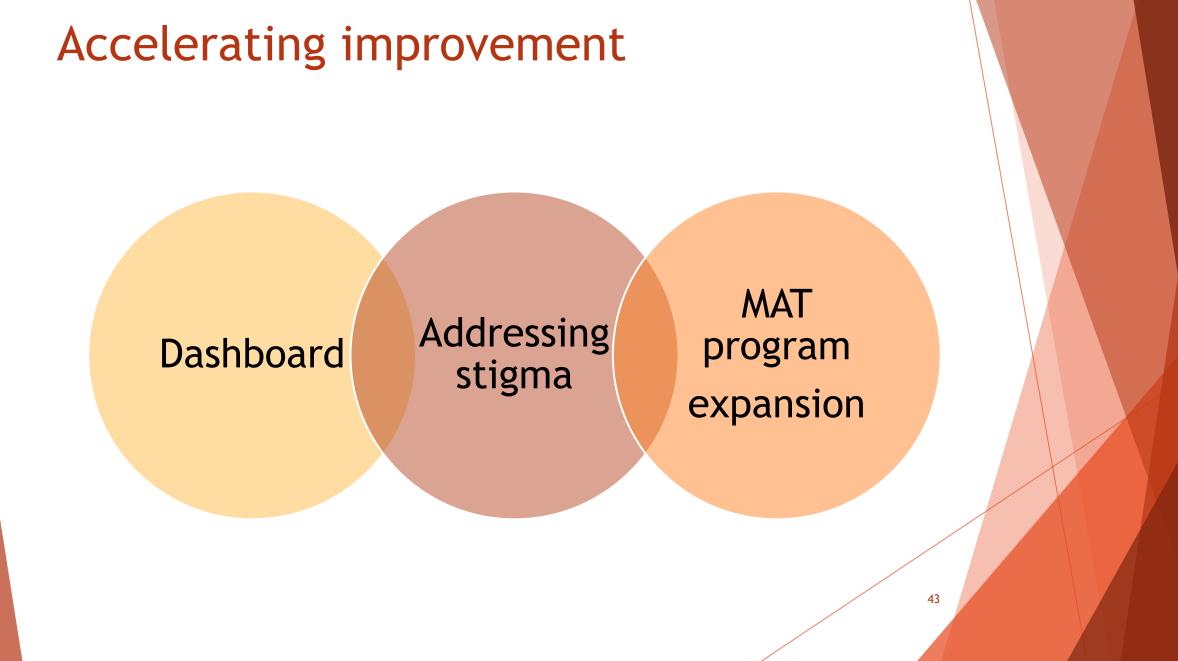
Aimee Moulin, MD





## Creating the Business Case







## CHAT: What questions do you have?





#### CHAT:

What questions do you have? What are you struggling with? What do you want to learn more about? What questions do you have for your peers?

# Key Points



# Wrap up





Register: Cal Hospital Compare > Programs > Opioid Care Honor Roll



#### CHAT: What do you want to learn more about as part of this webinar series?

## Resources & Follow Up Materials



Find Hospitals About Programs Choosing Hospitals 🧕 My Hospitals 🗸



Programs	Opioid Care Honor Roll
Maternity Care Honor Roll	Register for the 2020 Opioid Care Honor Roll Webinar Series!
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Opioid Resource Library	an opioid-related overdose in 2017. Patients with opioid use disorder are frequently hospitalized or visit the emergency department due to complications of the condition without also receiving treatment for the underlying disease of opioid addiction. This is a missed
Patient Safety Honor Roll	opportunity and leaves patients untreated and at high risk of future overdose. In this pilot year of the program, 60 hospitals voluntarily reported their progress on addressing the opioid crisis. While results show that all patientication hospitals are making progress. It's

#### Source: Cal Hospital Compare Website > Programs

#### Programs

Maternity Care Honor Roll

Opioid Care Honor Roll

Opioid Resource Library

Patient Safety Honor Roll



#### **Opioid Resource Library**

As part of our work to address California's opioid epidemic and accelerate hospital progress to reduce opioid related deaths we've amassed a collection of practical, evidence-based resources. Many of these resources have been developed by California hospitals and opioid coalitions. In the spirit of peer learning these resources are publicly available here. Embedded within this resource library you will also find tools to actively engage patients, families, and friends in appropriate opioid use. If you have any questions and/or would like to share a resource that has helped your hospital in addressing the opioid crisis please contact Alex Stack, Director at astack@cynosurehealth.org.

#### 1. Foundational resources

Our short list of must-read resources for all hospitals, at any state in their journey, aiming to change the way they provide opioid care in service of reducing opioid use disorder (OUD) related deaths and increasing access to treatment for all.

#### 6. Webinar Series Resources

a. Access slides, recordings, and other related resources here for the 2019 & 2020 Opioid Care Honor Roll Webinar Series

 Addressing California's Opioid Epidemic – Introducing the Opioid Care Honor Roll (May 9, 2019)

#### Show Resources

 Beyond adopting prescribing guidelines: monitoring and strengthening the prescribing patterns of clinicians (Jun 6, 2019)

#### Show Resources

 Initiating MAT in the hospital: Unique aspects from the ED and inpatient settings (Jul 10, 2019)

#### Show Resources

 The nuts and bolts of dispensing naloxone to high-risk patients and their support systems (Aug 27, 2019)



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Aimee Moulin Co-Director CA BRIDGE aimee@bridgetotreatment.org

# Thank you!

Please give us the gift of feedback and complete the event evaluation

