

Cross Cutting Opioid Management Best Practices						
Measure	Stage 0 (0 pt.) <i>Getting started</i>	Stage 1 (1 pt.) <i>Basic management</i>	Stage 2 (2 pts.) <i>Hospital wide standards</i>	Stage 3 (3 pts.) <i>Integration & innovation</i>	Stage 4 (4 pts.) <i>Practice Improvement</i>	Stage 5 (5 pts.) <i>Sustainability</i>
<p>Patient and family engagement</p> <p>Actively engage patients, families, and friends in appropriately using opioids for pain management (opioid prescribing, treatment, and overdose prevention via naloxone, harm reduction services provided by the hospital and within the community, risk associated with illicit fentanyl use, hospital quality improvement initiatives, etc.)</p>	<p>Patients and families are not actively engaged in OUD prevention/treatment, and/or quality improvement initiatives</p>	<p>Provides general education to all patients, families, and friends in at least 2 service lines (e.g., ED, Burn Care, General Medicine, Behavioral Health, OB, Cardiology, Surgery, etc.) regarding opioid risk including risk associated with illicit fentanyl, alternatives, and overdose prevention strategies (e.g., posters about preventing or responding to an overdose, brochures/fact sheets on opioid risk and alternative pain management strategies, general information on hospital pain management strategies on website or portal, etc.)</p>	<p>Provides focused education to opioid naïve and opioid tolerant patients via conversations with care providers (e.g., MAT options, opioid risk and alternatives, naloxone use, etc.)</p> <p>Patients are part of a shared decision-making process for acute and/or chronic pain management (e.g., establish realistic pain trajectory and pain management plan with a special focus on managing pain associated with common procedures such as c-sections and hip/knee, risk and side effects associated with opioid use, etc.)</p>	<p>Provides opportunities for patients and families to engage in hospital wide opioid management activities (Patient Family Advisory Council, Youth Advisory Council, volunteer or paid peer navigator positions, program design, etc.)</p>	<p>Your hospital is actively measuring and developing strategies to improve patient and family engagement</p> <p>Measurement includes patient experience and/or patient reported outcomes (e.g., patient states that they were given education on the risk/benefits associated with long term opioid use, treatment options, etc.)</p>	<p>Hospital has achieved its performance target on related key performance indicators, with sustained performance over a 12-month period</p> <p>Hospital continues to monitor performance but addressing stigma is no longer an active QI initiative</p> <p>Great job!</p>