Welcome to ONE.
(the opioid and naloxone education program)

About Us

The Opioid and Naloxone Education (ONE) Program (formally known as ONE RX) is a community pharmacy-based initiative aimed at improving population health by screening patients for opioid misuse and accidental overdose. The program provides resources to pharmacists and patients. It integrates community pharmacy practice into public health initiatives in North Dakota, aligning pharmacy with preventative care. It has led to improvements in pharmacy procedures, a decrease in patient stigma, an increase in naloxone delivery, and notable effects on population-level evaluations.

The ONE Program also includes the provision of opioid risk reduction efforts to home health programs, correctional facilities, North Dakota colleges and universities, collaborations with local public health units, and evidence-based data collection and dissemination.

Publications

A Primary Prevention Approach to the Opioid Epidemic, DOI:10.2105/AJPH.2019.305060
  o Opioid Risk Tool (ORT), part of North Dakota's ONE Rx project, identifies patients at risk for opioid risk disorder
  o In four months, 1032 individuals were screened with 4.6% at elevated risk and 18% receiving ONE Rx interventions

Changes in Pharmacists' Perceptions After a Training in Opioid Misuse and Accidental Overdose Prevention, DOI:10.1097/CEH.0000000000000233
  o Training program was delivered to 43 pharmacists on addiction, opioid risks, naloxone role, opioid dispensing, consultation pearls, and patient communication
  o Survey revealed significant changes in perceptions about opioid addiction, family history, counseling support, screening tools, and patient perspectives related to behavioral change

Evaluation of a Program to Screen Patients in Community Pharmacies for Opioid Misuse and Accidental Overdose, DOI:10.5888/pcd19.220028
  o 3.9% of 8,217 patients were screened using the ONE Program
  o 18.3% identified at overdose risk
  o 41.1% of patients received risk-dependent interventions

Examining Attitudes and Beliefs that Inhibit Pharmacist Implementation of a Statewide Opioid Harm Reduction Program, DOI:10.24926/iip.v11i4.3446
  o Survey with a 74% response rate was developed to identify barriers to opioid risk screening implementation
  o Pharmacists showed positive attitudes towards reducing negative opioid outcomes

o The perceived behavioral control of pharmacists is the most influential factor in the unsuccessful implementation of opioid risk screening

Implementation of a Statewide Program within Community Pharmacies to Prevent Opioid Misuse and Accidental Overdose, DOI:10.1016/j.japh.2019.09.003
  o Successful implementation: 240 pharmacists and 41 technicians trained
  o Over 1700 patients were screened for opioid misuse and accidental overdose

Improving Community Pharmacist-Delivered Care for Patients With Psychiatric Disorders Filling an Opioid Prescription, DOI:10.1176/appi.ps.202100592
  o Pharmacists provide less frequent care to psychiatric patients, yet they experience more drug-related problems and use more opioids
  o ONE program associated with opioid safety impacts: increased distribution and acceptance of naloxone, increased opioid partial filling, increased patient education about opioid use disorder and medication take-back options, reduced pharmacist stigma
  o Should be explored for enhanced education and critical interventions for psychiatric disorders

Longitudinal Evaluation of Pharmacists' Social Distance Preference and Attitudes Toward Patients with Opioid Misuse Following an Educational Training Program, DOI:10.1080/08897077.2022.2060449
  o Integrating stigma reduction components in opioid training reduces pharmacist stigma and negative attitudes towards opioid misuse
  o Stigma reduction decreases immediately after training and lasts for 12 months
  o Significant changes in negative attitudes were observed from baseline to post-survey and 12 months post-training

Nurse Delivered Medication Safety Screening Program for Home Care Visits, DOI:10.1111/phn.13178
  o Modified ONE Program for Home Health Nurses
  o Interventions: education, medication lock boxes, drug disposal packets, naloxone
  o 85% of clients are properly storing medication, 38% are not disposing of unused medications

Opioid Risk Stratification in the Community Pharmacy: The Utility of the Opioid Risk Tool, DOI:10.1016/j.sapharm.2022.07.009
  o 6,460 patients were screened and given ORT scores representing low, moderate, and high risk of opioid use disorder
  o Low, moderate, and high ORT scores were found in 87.5, 8.2, and 3.9% of opioid patients respectively
  o High scores linked to community support services, provider contact, male gender, and opioid use in the last 60 days

Patient Acceptance of Naloxone Resulting from Targeted Intervention from Community Pharmacists to Prevent Opioid Misuse and Accidental Overdose, DOI:10.1080/08897077.2020.1827126
  o Pharmacists' screen patients and dispense naloxone to high-risk patients
  o Resulted in 5.81% take-home naloxone acceptance
  o Higher patient acceptance at community pharmacies compared to national rates

Pharmacists Stigma Toward Patients Engaged in Opioid Misuse: When "Social Distance" Does Not Mean Disease Prevention, DOI:10.1080/08897077.2021.1900988
- o 187 pharmacists preferred social distance from opioid misuse patients
- o Experienced pharmacists, less personal experience with substance use disorder, and belief in excessive time and effort required for opioid use disorder had higher Social Distance Scores
- o Pharmacists were comfortable performing pharmacy tasks with patients with opioid misuse but less comfortable forming therapeutic relationships

Program Evaluation of the Opioid and Naloxone Education (ONE Rx) Program using the RE-AIM Model, DOI:10.1016/j.sapharm.2019.11.016
- o 97.1% of patients at risk received a pharmacist-led intervention
- o 44.8% of enrolled pharmacists completed at least five screenings, and 80.0% maintained the program three months later

Patient Experience and Satisfaction with Opioid-Related Screening and Intervention in Community Pharmacies, DOI: 10.1177/08971900221109528
- o Fear of patient dissatisfaction limits screening
- o Results showed positive experiences: feeling comfortable with the process (86.5%), taking appropriate time (93.2%), and feeling safer (86.3%)

Impact of Implementing Screening and Interventions to Target Prevention of Opioid Misuse and Accidental Overdose in the Inpatient Setting, DOI:10.1177/08971900221144183
- o Utilized ONE tool for opioid screening in hospitals
- o Evaluated outcomes: morphine milligram equivalents (MME) pre- and post-hospitalization and at discharge; naloxone orders at discharge; overdose risk comparison
- o Screening associated with decreased total daily MME and increased non-opioid analgesics

A Longitudinal Comparison of Pharmacy Documentation Platforms Using the Technology Acceptance Model, DOI:10.1177/87551225221128207
- o REDCap versus DocStation Platforms for Opioid Risk Screening
- o REDCap: Time-efficient information entry
- o DocStation: Offers more opportunities, management support, and IT support

Implementation of a Pharmacy Follow-Up Program for Dispensed Opioid Medications, DOI: 10.3390/ijerph20176628
- o Pharmacy technicians called patients 5–12 days post-opioid dispensation
- o 1789 phone calls were completed in 18 months
- o 40% of patients were still using opioids, 10% experienced side effects requiring consultation, and 78% of patients desired to dispose of unused medication at the pharmacy

Availability of Buprenorphine/Naloxone Films and Naloxone Nasal Spray in Community Pharmacies in 11 U.S. States, DOI: 10.1016/j.drugalcdep.2022.109518
- o A cross-sectional secret shopper telephone audit was conducted in 5734 active licensed pharmacies in 11 U.S. states

- o Both buprenorphine/naloxone films (BUP/NX) and naloxone nasal spray (NNS) medications are available in 41.2% of pharmacies
- o BUP/NX and NNS are not readily accessible

Opioid Risk Screening: Program Evaluation from the Community Pharmacists' Perspective,
DOI: https://doi.org/10.1016/j.japh.2021.12.003
- o All pharmacists noted improved patient communication and interventions
- o 66% disagreed that it was a time-consuming screening process
- o 14% suggested additional assistance may be needed

Opioid Misuse and Overdose: Changes in Pharmacist Practices and Outcomes,
DOI:10.1097/CEH.0000000000000317
- o 97% of respondents recommended ONE program
- o 67% increase in naloxone prescriptions by pharmacists and dispensing doubled from 23% to 46%
- o Interventions include medication take back programs, naloxone dispensing to high-risk patients, and opioid use disorder discussion

Assessing a Medication Safety and Disposal Program Using the Health Belief Model,
DOI:10.24926/iip.v14i3.5546
- o Increase in self-medication due to OTC status and internet self-care information
- o 25 senior participants attended, and 23 pre- and post-surveys completed
- o Program impact on self-medication practices: understanding herbal/OTC product risks, improved medication disposal methods, OTC 'Drug Facts' comprehension, OTC label information, and proper medication expiration dates

Moving Opioid Misuse Prevention Upstream: A Pilot Study of Community Pharmacists Screening for Opioid Misuse, DOI: 10.1016/j.sapharm.2018.07.011.
- o Study aimed to design and evaluate the Opioid Misuse Risk Prevention Toolkit in community pharmacy practice sites
- o Suggests pharmacist-provided services like naloxone prescribing, addiction risk counseling, partial opioid prescription fills, medication takeback education, and community resource referrals
- o Enhances patient conversations and the opioid misuse screening process

A Call to Develop Opioid Risk Assessment Programs for Implementation in the Pharmacy Setting Doi: 10.1016/j.japh.2023.10.018
- o Study evaluated the Opioid Risk Tool, and NarxCare, two opioid safety screening tools that are being used in pharmacy practice presently
- o Strengths and weaknesses of each tool were identified, with a call to increase opioid risk assessment in the pharmacy setting
- o This paper is a call to identify one, cohesive, validated opioid risk assessment tool that can be used to guide clinical decision-making and care for patients

https://one-program.org