

Dacotah Foundation Collaboration

Amy.Werremeyer@ndsu.edu Heidi.Eukel@ndsu.edu

www.one-program.org



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A. Triage Tool

Use this flowchart to determine which services to offer to your clients.

B. Medication Safety Questionnaire and Outcomes

FRONT: Use this questionnaire for <u>every patient</u> and re-assess every 6 months BACK: Use this to document what services were provided to each patient

Provide Deterra bag and pill organizer as needed. For more supplies, contact heidi.eukel@ndsu.edu

ENTER into REDCAP

For clients with opioid:

C. Screening and Outcomes

FRONT: Use this tool to screen each patient for opioid misuse and overdose risk

ENTER into REDCAP

D. Patient Brochure for Opioid Safety

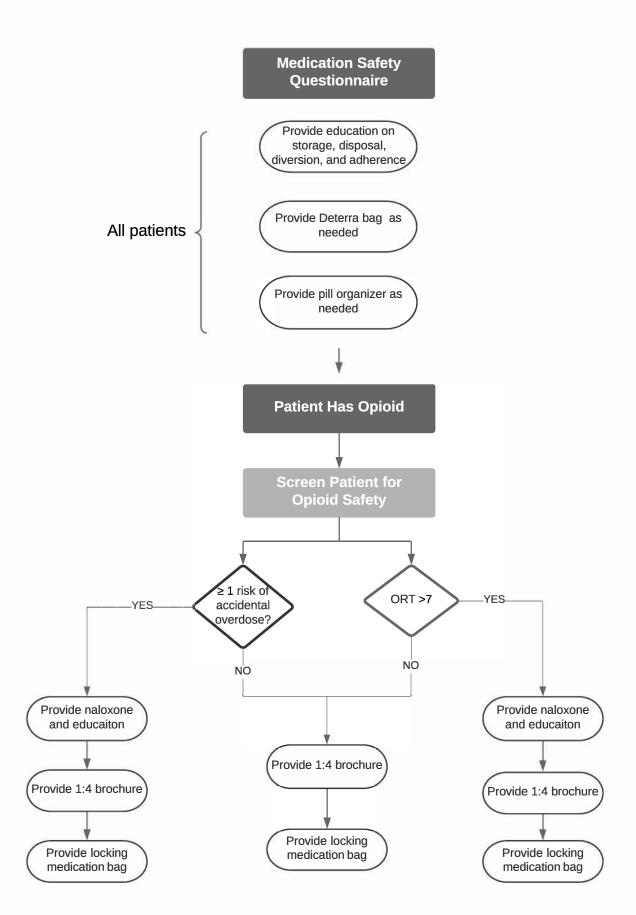
Provide one of these brochures to each patient who is actively taking or has an opioid medication in the home

For more brochures, contact heidi.eukel@ndsu.edu

E. RedCAP directions for use

F. FAQ document







Medication Safety Questionnaire

Patient name:	 (blinded to ONE	Program)
	`	8,

Patient age: _____ Patient birth gender: _____

How does the patient typically store his or her medications?

- Medication is stored in locked box
- Medication is stored in safe designated area
- Medication is stored in unsafe designated area
- Medication storage not designated

*Provide education about medication storage

How does the patient typically dispose of unused or expired medications?

	Not applicable/no meds to dispose of			
	Medication not discarded			
	Medication discarded in trash/flushed			
	Other potentially unsafe method			
	Medication disposal with approved measures:			
<u> </u>		Pharmacy MedSafe		
		Local public health unit		
		Police station		
		Kitty litter, coffee grounds, or other		
		Medication disposal product (Deterra, DisposeRx, etc.)		
		Other:		

*Provide education about medication disposal

Does the patient forget to take medications?

Never
Occasionally
Frequently

*Provide education about medication adherence

Has the patient used someone else's or given their medications to someone else before (diversion)?

Patient has diverted a prescription medication at least 1 time

- Patient has been approached with request to divert their medication at least 1 time
- Patient has taken a diverted medication at least 1 time
- No /Not applicable

*Provide education about avoidance of medication diversion

Does the patient take medication(s) for pain or opioid use disorder?



- No, not taking medication for pain or opioid use disorder
- Yes, taking medication for pain

Taking a non-opioid for pain (Celebrex, NSAID, etc.)

Taking an opioid for pain (oxycodone, hydrocodone, morphine, etc.)

If yes, proceed to opioid screening

THE RESULTS OF THIS DOCUMENT MUST BE ENTERED INTO REDCAP

Put a check in the box next to those items which apply to the patient.

	Yes	F	Μ
Family history of substance abuse			
Alcohol		1	3
Illegal drugs		2	3
Prescription medication misuse		4	4
Personal history of substance abuse			
Alcohol		3	3
Illegal drugs		4	4
Prescription medication misuse		5	5
Age between 16 - 45 years		1	1
History of preadolescent sexual abuse		3	0
Psychological disease			
Examples: attention deficit disorder (ADD), obsessive compulsive disorder (OCD), bipolar disorder, schizophrenia		2	2
Depression		1	1
	T-+-1 C		

Total Score: Low risk: 0 - 3 Moderate risk:

Moderate risk: 4 – 7 **High risk: ≥ 8**

Patient's age: _____ (at risk if > 64 years old) Medical history: Circle all those which apply to the patient. anxiety COPD/emphysema asthma depression sleep apnea liver disease kidney disease While using this medication is there a chance the patient may consume any of the following? YES NO Medication used to treat anxiety Examples: Xanax® (alprazolam), Ativan® (lorazepam), Valium® (diazepam) Klonopin® (clonazepam) YES NO Medication used to treat depression YES NO Medication known as a muscle relaxer Examples: Flexeril[®] (cyclobenzaprine), Skelaxin[®] (metaxalone) YES NO Medication used to aid in sleep (prescription or over the counter) YES NO Cough or cold medication YES NO Alcohol YES NO Are you currently taking other opioid medications? Examples: fentanyl (Blue 30, others), Oxycontin[®] (oxycodone), Vicodin[®] (hydrocodone), morphine, heroin YES NO Have you previously been or are you currently in treatment for opioid use disorder? YES NO Have you previously been or are you currently prescribed a medication for opioid use disorder? Examples: Suboxone, methadone IF YES: Would you be interested in continuing it while incarcerated, if available? YES/NO IF NO: Would you be interested in starting to take a medication for opioid use disorder while incarcerated if it were available and prescribed for you? YES/NO



Outcomes Worksheet

For all patients:				
Yes	No	Education about medication storage was provided		
Yes	No	Education about medication disposal was provided		
Yes	No	Education about medication adherence was provided		
Yes	No	Education about medication diversion was provided to the patient		
Yes	No	Patient was provided a Deterra bag or other disposal device for medication disposal		
Yes	No	Patient was provided a pill organizer to assist with medication adherence		
For pa	For patients taking an opioid:			
Yes	No		ACCIDENTAL OVERDOSE RISK ASSESSMENT Today, the patient was identified as at risk for accidental overdose based on current disease states or current medications	
Yes	No		OPIOID MISUSE RISK ASSESSMENT Today, the patient was identified at high risk for future opioid misuse (ORT ≥ 8) If yes, the risk of opioid misuse was discussed with the patient	
Yes	No	Not indicated for this patient	Naloxone was provided to the patient	
Yes	No	Not indicated for this patient	1 in 4 brochure was provided for this patient	
Yes	No	Not indicated for this patient	A medication lock box was provided for this patient	

1in4 people receiving long-term opioid therapy STRUGGLES WITH

Prescription opioid addiction A GROWING EPIDEMIC...

- Opioids work by blocking the feeling of pain without fixing the underlying cause.
- Prescription opioids may be habit forming and lead to addiction even when taken as prescribed.
- Patients taking prescription opioids are also at risk for impaired breathing, unintentional overdose or death.
- Caution when taking prescription opioids with:
 - alcohol
 - benzodiazepines (ex. Xanax®, Valium®)
 - muscle relaxers (ex. Soma®, Flexeril®)
 - hypnotics (ex. Ambien[®], Lunesta[®])

KEEP YOURSELF AND YOUR LOVED ONES SAFE:



Lock

Keep medication out of sight and in a safe and secure place.



Monitor

Keep track of medication and take only as directed.



Take Back

Drop off unused medication at local Take Back locations. To find a location near you, go to **www.takeback.nd.gov.**

IF YOU ARE CONCERNED:

- Talk to your pharmacist or practitioner about **naloxone**, a treatment to reverse overdose.
- · Follow-up with your practitioner
- Find behavioral health treatment providers at www.findtreatment.samhsa.gov.



Developed in partnership with the ND Board of Pharmacy and ND Pharmacist Association

For more information, go to: prevention.nd.gov/takeback



Introduction

The REDCap Data Collection tool is used for both online and offline data collection. REDCap can be used for paperless data collection. REDCap is designed to follow the same format as the paper documentation provided in the training materials.

A REDCap user name will be emailed to you when you join the program. It is used to access the online data collection. The REDCap mobile application is used for offline data collection. The mobile app operates on iOS and Android systems. Those using Windows laptops can install an Android emulator which will allow for use of the REDCap mobile application. IT support is recommended for this installation.

Online Data Collection

- Go to <u>https://redcap.qualityhealthnd.org/</u>
- Enter your login and password
- Select the ONE Program for Essentia Health project
- Data collection is accomplished through the Record Status Dashboard (in green circle in Figure 1)
 - You can edit existing records or Add a new record from this menu
- The Medication Safety Questionnaire is designed to follow the same order and format as the paper documents
- Responses to some of the items will generate additional tools to be completed
 - For example, stating a patient is on an opioid will open the Opioid Risk Assessment tool.
- When assessment is complete, finish the data collection by completing the Outcomes Worksheet items.
- Save your results
- A green circle beside a record indicates all information has been provided.
- A training video is available here: INSERT LINK TO ONE PROGRAM YOU TUBE PAGE

Offline Data Collection

- Information and step by step instructions for downloading and set up the mobile app are available by clicking on the REDCap Moblie App menu item (enclosed in red box in Figure 1) in the online REDCap project
- Set up the project as directed (the videos are helpful)
- If using a Windows laptop for offline data collection, an Android emulator can be used to run the REDCap mobile app in Windows. IT support and approval will likely be needed.
 - We recommend using the AVD Manager in Android Studio
 - Make sure to set up the emulator device with Google Play
- Follow on screen prompts to collect data offline
- When device is again connected to internet, open the REDCap Mobile App and choose the Send Data to Server option. Follow the prompts on the screen to sync your data with the online server.
- A training video is available here: INSERT LINK TO ONE PROGRAM YOU TUBE PAGE





Figure 1 – REDCap Project Home

Please contact jayme.steig@ndsu.edu with any questions.



Frequently Asked Questions

- How often should I screen my patients?
 - Clients should be screened initially or at admission and then every 6 months thereafter. If there is a significant event (i.e. surgery) please feel free to screen again
- For the ORT, what level of "family history" is suggested?
 - Family history includes first degree biological family members (parents, siblings, and children)
- With OTC sleep aids, do you count herbals such as valerian root and melatonin?
 - On the patient intake form, we are more concerned with products that contain diphenhydramine. Herbals have been shown in a few small case reports but when taken at normal doses, this isn't as much of a concern.
- What if a patient refuses the opioid screening or medication lock box?
 - These are services above and beyond your standard care. Clients have an option to refuse. Simply document this.
- For Narcan Nasal, what training could be used to instruct clients on use?
 - Here is a valuable video! https://www.youtube.com/watch?v=WnjgrRNMfKM