



# TPMG Opioid Safety Initiative

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# Who We Are

- **Kaiser Permanente Northern California**
  - Over 4 million members
  - 35,000 nurses and staff
  - 21 medical centers
  - >200 medical offices and other outpatient facilities
  
- **The Permanente Medical Group (TPMG)**
  - 9,000 physicians—largest medical group in the nation
  - ~70 specialties and sub-specialties





# The Permanente Medical Group Opioid Initiative Goal

Ensure that we provide safe, appropriate care to our patients across the region and that we give physicians the tools and support needed for consistent opioid prescribing, monitoring and documentation.



# Changing practices to improve safety

## Reccs

- Available evidence
- Best practices
- Expert opinion
- Regulations

## Workflows

- Multidisciplinary team
- Clinical experts
- MD education experts
- Patient edu experts
- Technology experts

## Education

- Curriculum
- In person training
- Online modules
- Refresher courses

## Analytics

- Actionable reports reflect implementation of recommendation
- Key medical & pharmacy leaders receive reports

## Comms

- Local opioid meetings
- Academic detailing based on analytics:
  - *Service line chiefs*
  - *Pain pharmacists*
  - *Regional leaders*

# Key recommendations

## Internal and Family Medicine

### New Pain Complaint:

- Max 5-7 day supply of opioids for new pain complaints

### Chronic Pain:

- Thorough intake eval
- 30 day max Rx
- Medication agreement
- Consistent monitoring, documentation, and evaluation

### Analytics:

- Monthly reports on all patients >50MME
- Trends in Rx and status of monitoring tools

## Emergency Department

### Recommendations:

- List of conditions for which opioids are not recommended
- No replacement of lost/stolen prescriptions
- Max 20 pills for acute pain (+PCP referral)
- Max 10 pills/3 days for chronic pain (+PCP referral)
- IV/IM opioids discouraged

### Analytics:

- Monthly dashboard showing Rx (pills) and IV/IM by prescriber by chief complaint

## Orthopedic Surgery

### Recommendations:

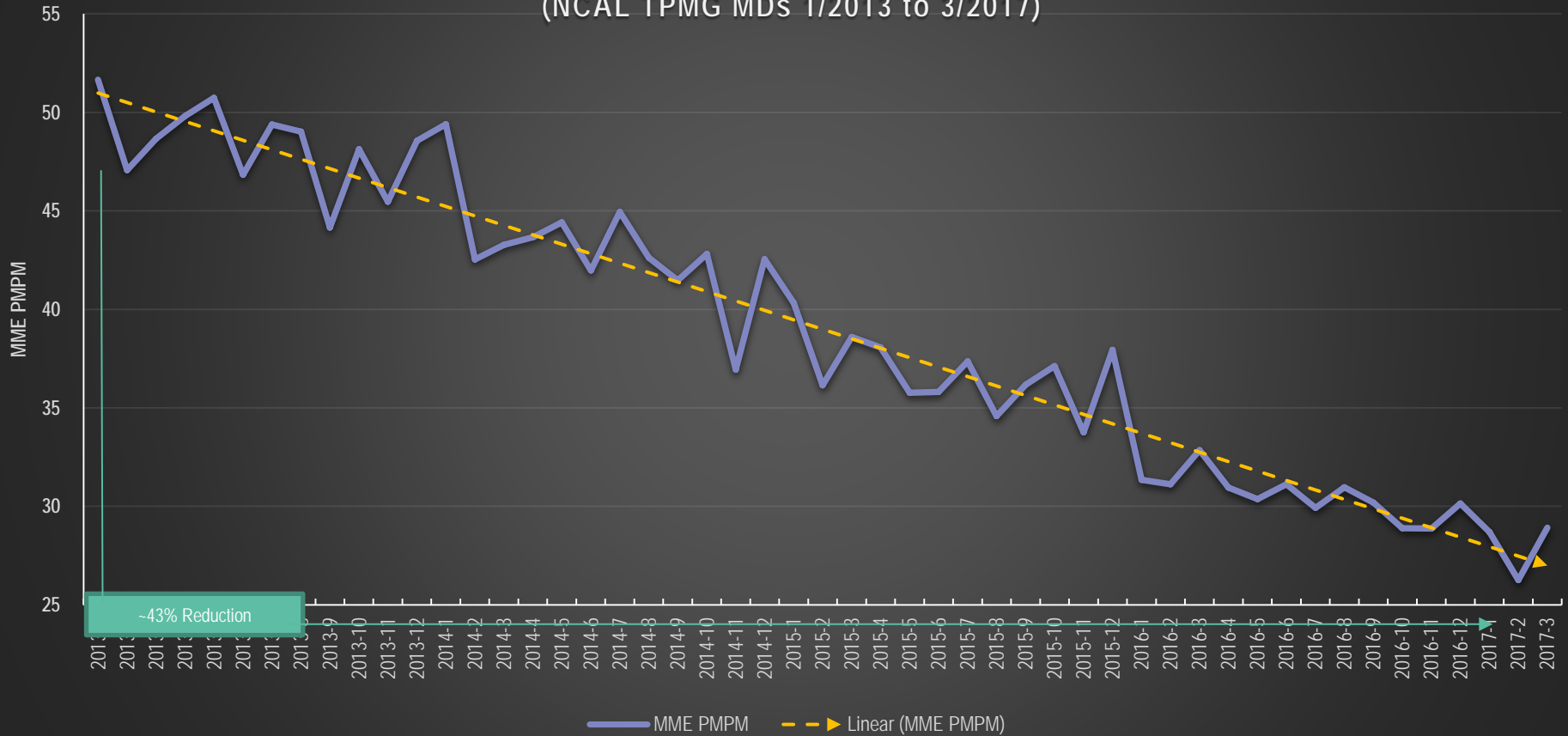
- Pursue pre-op tapering opportunities
- No post-op ER/LA opioids
- Max two weeks Rx post-op
- Recommendations for specific Rx dosage based on procedure

### Analytics:

- Periodic reports on post-op prescription size by prescriber by procedure

# Successful Reductions Across NCAL

All Opioid Outpatient Prescription  
Morphine Milligram Equivalent (MME)  
Per Member Per Month  
(NCAL TPMG MDs 1/2013 to 3/2017)



# Other measures of success

## ■ Internal and Family Medicine

- 79% (42%) of high dose opioid patients have medication agreement
- Over 75% (52%) have had a urine drug screen in the past 12 months
- Reduction in those on high dose opioids from 21.3/10,000 to 13.1/10,000 patients

## ■ Emergency Department

- Discharge opioid prescribing reduced by one third
- Parenteral opioid in ED reduced by 15% (from 16.5%-14%)
- >95% of workforce has undergone multi-hour online training



# Successful Strategies



- **Strong, visible leadership support**
- **Clarity and consistency of non-judgmental message across physicians & administration**
- **Interdisciplinary work group to oversee decisions**
- **Provide coaching, education and support**
- **Include patient-clinician communication strategies**
- **Use of physician specific data**
- **Identify individuals to help colleagues with tough cases**
- **Collaboration between the medical group and pharmacy**





# Thank you

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