

Decreasing Organizational Risk through Harm Reduction Principles

Kim Flanders, DNP, MBA, RN, NEA- BC
VP Patient Care Services/Chief Nursing Officer
Norton Hospital Louisville

Objectives

- Build knowledge around the current reality of Substance Use Disorder (SUD) patients and associated risk for healthcare organizations.
- Demonstrate integration of harm reduction principles in the hospital setting.

5 National Priorities

- Improving access to treatment and recovery services
- Promoting use of overdose-reversing drugs
- Strengthening our understanding of the epidemic through better public health surveillance
- Providing support for cutting-edge research on pain and addiction
- Advancing better practices for pain management

US Department of Health and Human Services (2019)

Targeted Population

- Emergency Department- non-admitted patients
 - Peer support partnership with Centerstone
 - Explicit discharge instructions
- Inpatients
 - Early identification (screening or diagnosis driven)
 - Symptom management
- Surgical Patients
 - Setting expectations prior to surgery
 - ERAS- Enhanced Recovery After Surgery
 - Nerve blocks and nurse centric interventions

Our Team

- Harm Reduction Manager- CADC
- Treatment Coordinator- CADC
- Social Worker
- Hospitalist
- Peer Support Specialist
- House Supervisor
- Nursing
- Security
- Bridge clinic

Our Inpatient Program

3 Screening Questions

- Are you currently taking any pain medication or any opiate replacement therapies such as methadone or suboxone , that are prescribed to you?
- Have you used heroin, fentanyl, or any other opiates such as pain medication or opiate replacement therapy, such as methadone or suboxone, not prescribed to you in the last week?
- If you were to stop taking these opioids, do you have concerns that you would experience withdrawal symptoms?

Our Inpatient Program

Cascade from Screening

- Positive initial screening cascades to COWS (Clinical Opioid Withdrawal Screening) assessment.
- Harm Reduction consult
 - Assessment of severity of use and readiness for change.
 - Patient centered approach to building motivation for behavioral change overseen by CADC
- Placement on the Harm Reduction Program
- Withdrawal management order set
 - Symptom management
 - Buprenorphine and Naloxone

Bridging

- Discharge instructions include safer injection practices, location of syringe exchange clinics, recovery resource numbers and access information.
- Bridge to desired treatment

Opioid Steering Committee

- Reviewing and revising order sets
- Nurse interventions for pain
- Monitoring and setting practice expectations to improve prescribing patterns
- Education to clinical staff