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Naloxone: From Legislation to Distribution

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Swedish Learning & Celebration Days 2024

Naloxone: From Legislation to Distribution

SB 5195: Distributing Opioid Overdose Reversal Medications

Background and Problem Statement

- **Issue:** Escalating rates of opioid-related fatal and non-fatal overdose in Washington State¹.
- **Challenge:** Insufficient access to naloxone for at-risk individuals.
- **Consequence:**
 - **Increased preventable fatalities**
 - **Over utilization of emergency services**
 - **An escalating public health burden**
- **Legislative Response:** Enactment of Senate Bill 5195².
- **Objective:** Systematize naloxone distribution to reduce overdose deaths.

¹ Washington State Department of Health. (n.d.). *Opioid trends*. Retrieved from the Washington State Department of Health website.

² Washington State Legislature. (2021, November 22). An act relating to opioid overdose prevention and response. Substitute Senate Bill 5195.

[<https://lawfilesext.leg.wa.gov/biennium/2021-22/Pdf/Bills/Session%20Laws/Senate/5195-S2.SL.pdf?q=20211122091602>]

Research Question & Project Aims

The adoption of nurse-initiated orders (NIO) in Emergency Departments (ED) will contribute to the distribution of naloxone pre-pack kits and reduce the incidence of overdoses

Project Aims:

Aim 1: Assess compliance with naloxone prepack distribution criteria under SB5195.

Aim 2: Assess factors associated with naloxone distribution.

Aim 3: Implement NIO naloxone prepack distribution.

Aim 4: Assess efficacy of NIO implementation.

Methods

Two retrospective analyses and a pre-post intervention study, aiming to generate valuable insights for healthcare improvement.

Project Protocol

First, a **chart abstraction of all patients with a naloxone BPA to determine current adherence to distribution requirements.**

Second, a **chart abstraction of all patients who met criteria based on the Best Practice Alert (BPA).**

Next, **implement the naloxone NIO procedure.**

Finally, **compare efficacy of NIO implementation with those from the retrospective chart abstraction.**

Inclusion & Exclusion Criteria & Considerations for Vulnerable Populations

Inclusion Criteria	Exclusion Criteria
<ul style="list-style-type: none">• Providence Swedish Provider BPA<ul style="list-style-type: none">○ Active OUD or opioid OD related Dx listed as an encounter, problem list, or medical history Dx○ The inpatient MEDD is $<$ or $=$ 50○ The outpatient MEDD is $<$ or $=$ 50○ Social history reflects history of heroin or narcotic use○ Naloxone during encounter○ COWS ordered during encounter	<ul style="list-style-type: none">• Patients not meeting inclusion criteria.• Patients who would meet criteria but outside the BPA<ul style="list-style-type: none">○ Fentanyl use○ Opioid medication outside morphine used or prescribed○ Polysubstance use○ Stimulant use or other frequently laced substances

Analysis of Data

Aim 1: To determine BPA alerts and relation to naloxone distribution.

Aim 2: To determine factors associated with naloxone distribution.

Aim 3: To examine the trends before and after the NIO intervention.

Findings

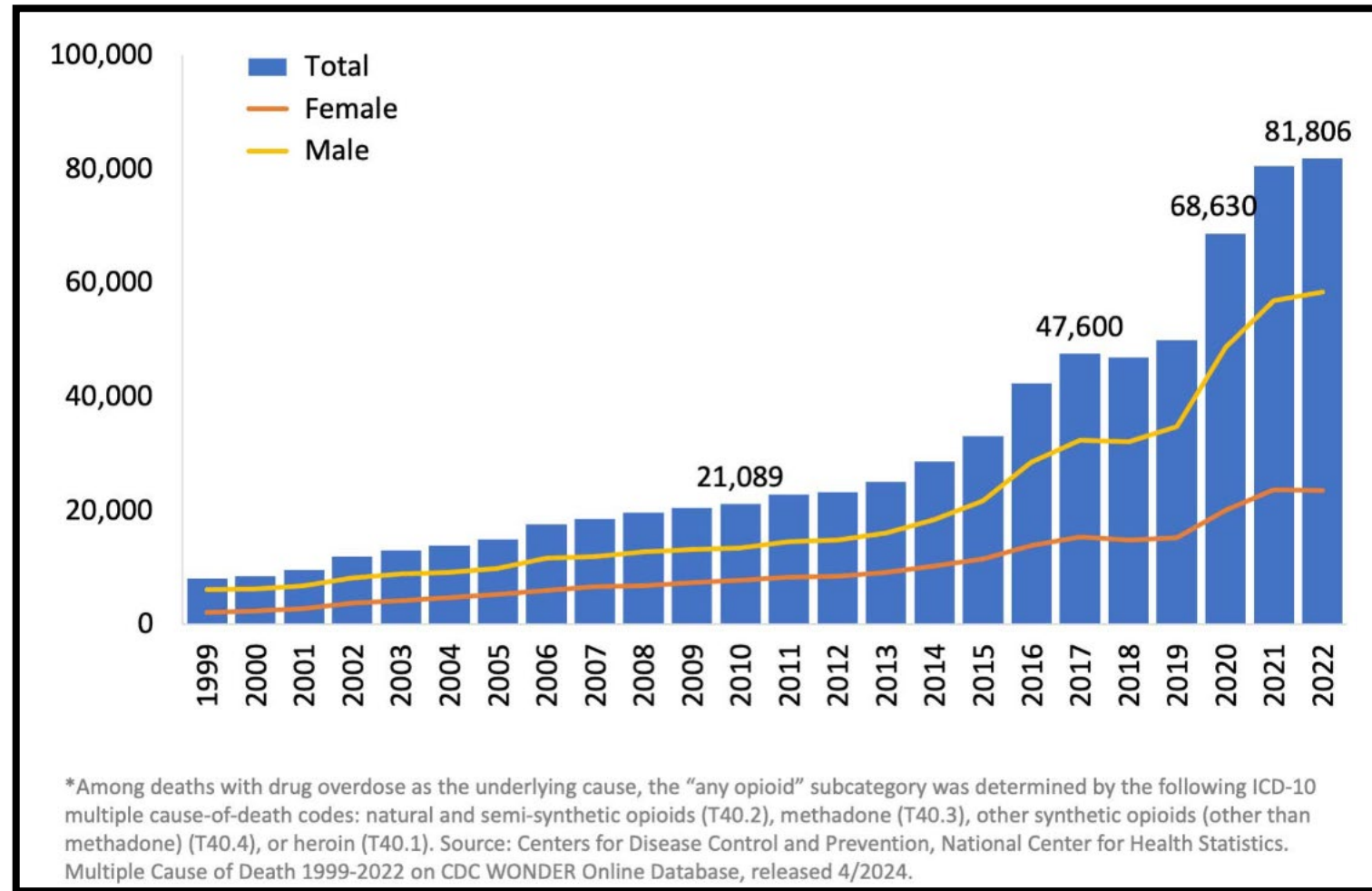
Objective: Assess compliance with naloxone distribution criteria under SB5195

- **Result: Compliance was evaluated through chart abstraction of patients with a naloxone Best Practice Alert (BPA).**

Snapshot of the National Opioid Epidemic

National overdose deaths involving any opioid (all ages)¹

Profound increase has been due to the rise in fentanyl. By 2022, fentanyl accounted for 70% of overdose deaths.²



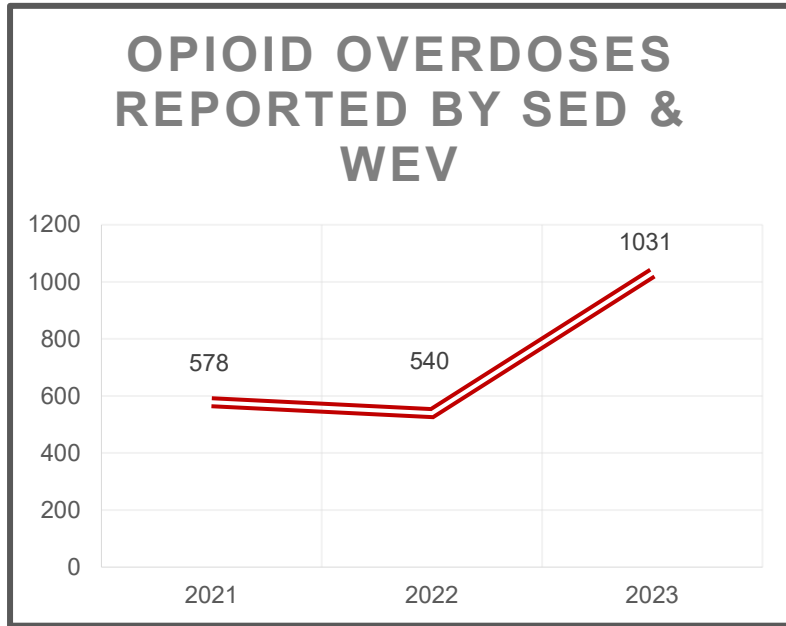
Data sources:

1-[Drug Overdose Death Rates | NIDA](#)

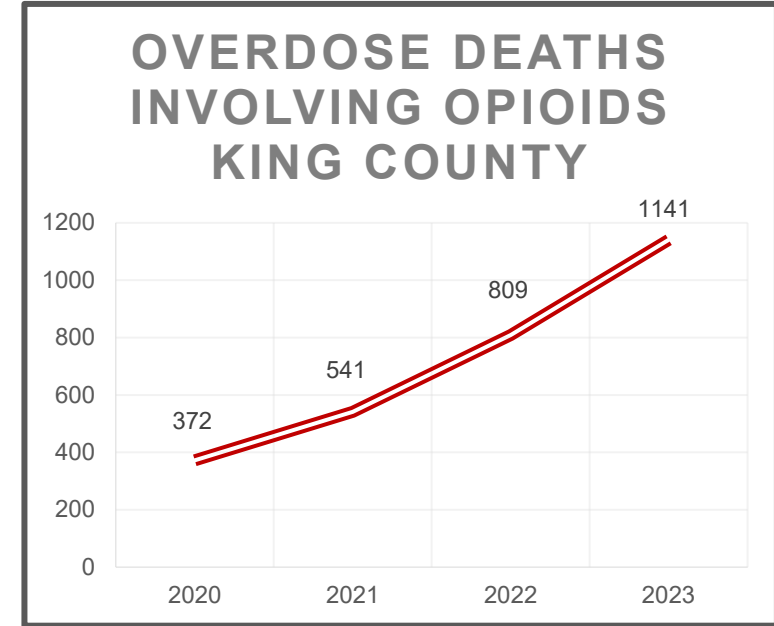
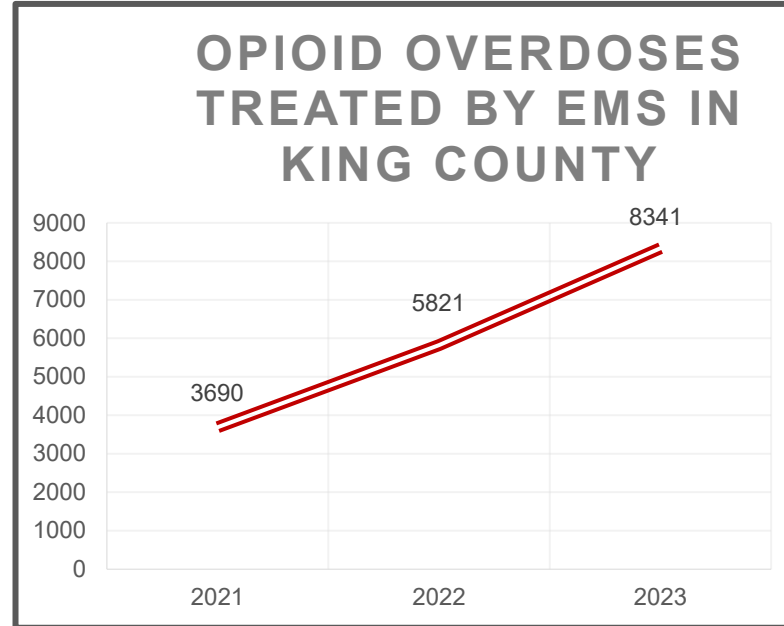
2-[USAfacts.org](#) reporting CDC data

Impact on Our Communities

Snohomish County

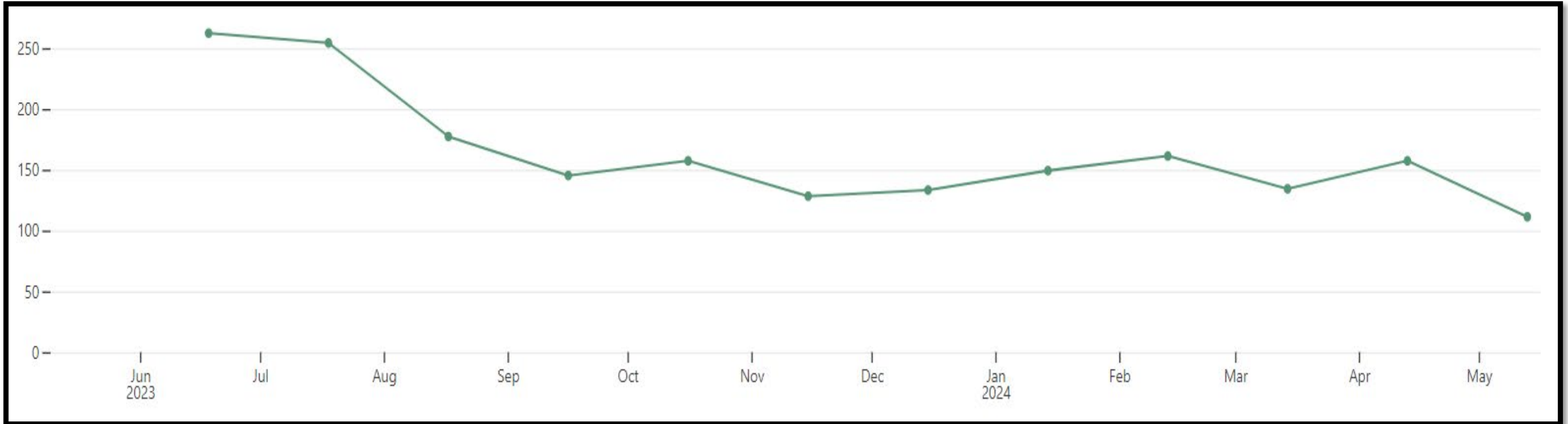


King County



Data sources: Snohomish County Health Department; [King County Overdose Dashboard](#)

How often do we dispense naloxone prepacks from the ED?



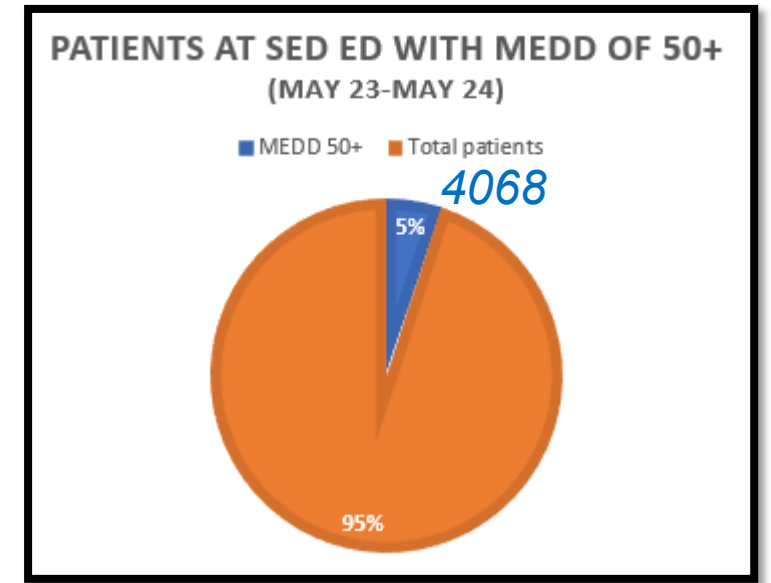
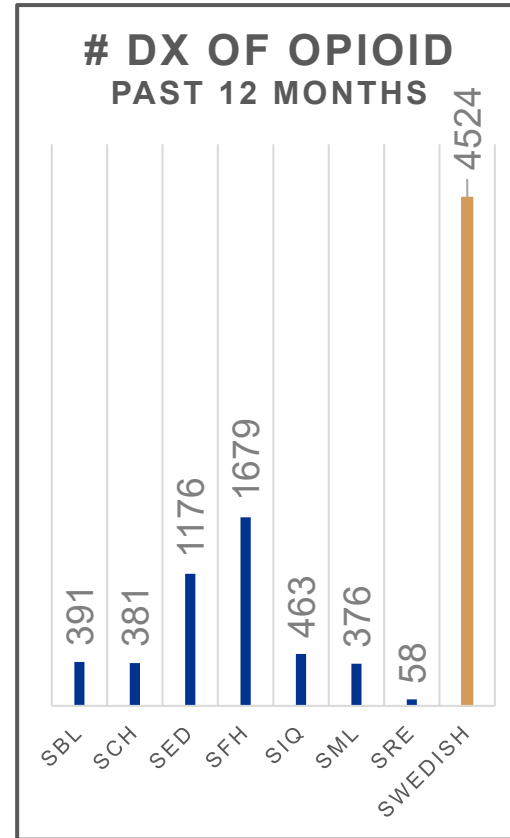
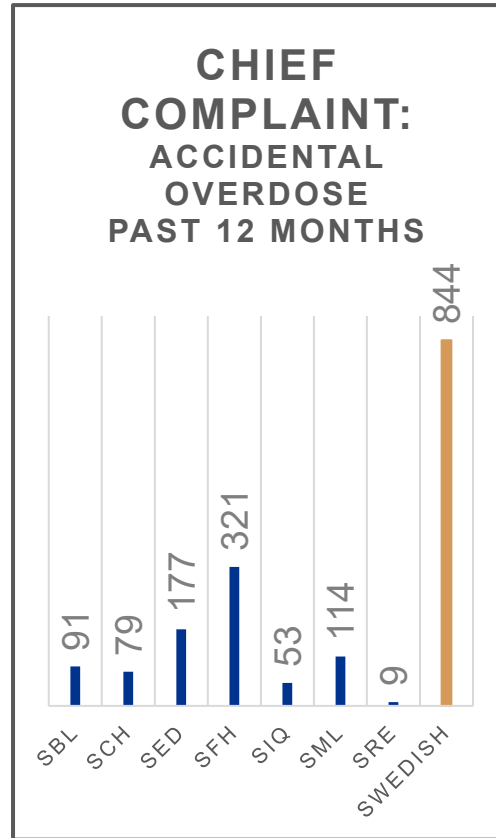
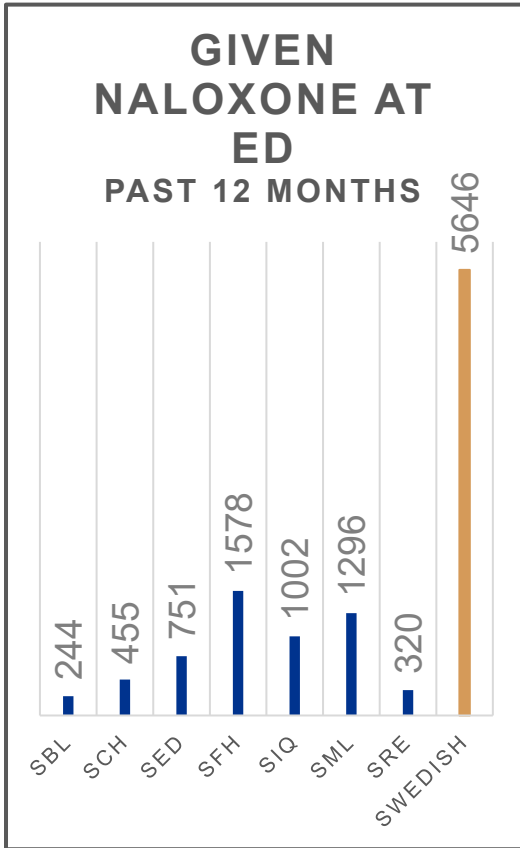
2022 dispenses from all seven Legacy Swedish Emergency Departments in the past 12 months

Data source: LogicStream (pulls from Epic data) looking at number of times a naloxone homepack was *dispensed*

There's room to improve

Creating a “denominator” for who is at risk for opioid overdose is challenging to calculate due to limitations in Epic data, but here is data based off the same criteria the BPA uses:

2022 Naloxone prepack dispenses for all Swedish EDs the past 12 months



Data source: Epic (workbench reports and SlicerDicer)

Discussion

Escalating Opioid Crisis:

- **Washington State faces a severe opioid crisis, with fentanyl accounting for 70% of overdose deaths in 2022.**
- **Impact of SB 5195:**
- **The enactment of SB 5195 aims to ensure naloxone distribution to at-risk individuals, significantly reducing preventable fatalities and public health burdens.**

Extent of Fentanyl's Impact:

- **In reviewing the data from slide 9 we see that overdose rates have nearly doubled since 2020/2021**
- **Significant Improvement in Patient Metrics:**
- **The substantial improvement in systolic blood pressure and patient satisfaction following the implementation of NIO naloxone distribution was unexpected, showcasing the effectiveness of systematic approaches.**

Reasoning:

- **These findings emphasize the critical role of targeted legislative actions and systematic naloxone distribution in mitigating the opioid crisis, revealing both the severity of the problem and the potential for impactful solutions.**

Clinical/Research Implications

Implications for the Nursing Community

- **Enhanced Training:** Specialized training for managing signs and symptoms related to opioid use disorder, opioid overdoses, early recognition, and patient recovery.
- **Systematic Naloxone Distribution:** Standardize best practices across healthcare facilities to reduce fatalities.
- **Policy Advocacy:** Nurses advocate for policies ensuring naloxone availability for at-risk individuals.
- **Holistic Care:** Adopt a holistic, person first approach that involves treatment plan collaboration and patient support networks.
- **Cultural Humility:** Ensure interventions are accessible and tailored to diverse populations.

Recommended Next Steps

- **Expand Naloxone Training:** Develop comprehensive training programs for healthcare providers.
- **Continuous Monitoring:** Establish processes to assess and adjust naloxone distribution effectiveness.
- **Policy Development:** Advocate for similar legislative measures nationwide.
- **Community Outreach:** Educate the public about opioid risks and naloxone availability.
- **Research and Innovation:** Promote research into new overdose prevention and response methods.

References

Washington State Department of Health. (n.d.). Opioid trends. Retrieved from the Washington State Department of Health website.

Washington State Legislature. (2021, November 22). An act relating to opioid overdose prevention and response. Substitute Senate Bill 5195. [<https://lawfilesexternal.wa.gov/biennium/2021-22/Pdf/Bills/Session%20Laws/Senate/5195-S2.SL.pdf?q=20211122091602>]

Appendix A

Inclusion & Exclusion Criteria & Considerations for Vulnerable Populations

Key:

- Morphine Equivalent Daily Dose (MEDD)
- Clinical Opioid Withdrawal Scale(COWS)
- Opioid Use Disorder (OUD)
- Overdose (OD)
- Diagnosis (Dx)
- Best Practice Alert (BPA)

Thank you!

Questions

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