

VCSQI Survey: Opioid Prescribing Practices

Welcome to VCSQI'S survey focused on assessing current opioid prescribing practices.

Thank you for participating in this survey. Your feedback is important. We will share results in aggregate and use results to provide resources for you.

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General Information About Your Practice

* 1. Which participating VCSQI SAN 2.0 practice do you represent?

* 2. Position/title of person completing survey:

* 3. Who else contributed to providing answers (positions not names):

* 4. Do any clinicians in your practice prescribe opioids?

Yes

No

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Prescribing Practices

* 5. Does your practice have an opioid prescribing protocol used by your clinicians?

Yes

No

We are in the process of developing one.

I don't know

6. Does your practice use an opioid risk assessment tool with patients prior to prescribing opioids?

- Yes, we use the Opioid Risk Tool
- No.
- Yes, we use the SOAPP-R
- I don't know
- We interview the patient to assess the risk
- Yes, we use another one. Please state the name of the risk assessment tool you use.

7. What daily Morphine Milligram Equivalents (MME) dosage of opiates do your clinicians typically prescribe as a first dose to patients with chronic pain? Please estimate an average if you have more than one prescriber and no standardized protocol.

8. What daily Morphine Milligram Equivalents (MME) of opiates do your clinicians typically prescribe to patients as a first dose with new, acute pain? Please estimate an average if you have more than one prescriber and no standardized protocol.

9. Does your practice have prescribing restrictions for the number of opiate pills prescribed?

- No
- I don't know
- Yes. Please state the limit on the number of pills prescribed)

* 10. How many days/weeks of opiate pain medication do your clinicians typically prescribe?

- 3-5 days
- 7 days/1 week
- 7-10 days
- 14 days/2 weeks
- Other (please specify)

11. On average, how soon does your team follow up with patients who are receiving opiates?

- 1-3 days
- 3-5 days
- 7-10 days
- 2 weeks/14 days
- No follow up

12. On average, how many patients are seen in your clinic per week?

- less than 5
- 6-10
- 11-20
- Other (please specify)
- 21-30
- more than 30

13. On average, how many patients per week leave the clinic visit with an opiate refill?

14. How many calls does your office receive per week from patients who are requesting a pain medication refill?

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Patient Engagement and Education

15. Does your practice document in the medical record a signed 'opiate treatment agreement' between the patient and prescriber?

- Yes
- No
- We are in the process of developing one.
- I don't know
- Other (please specify)

16. Do you have a patient/family education process to jointly determine how the patient can best manage pain and inform the patient of risks associated with opioids?

- Yes, We discuss with the patient/family pain management options and risks associated with the use of opioids.
- Yes, we discuss with the patient/family pain management options and risks associated with the use of opioids AND we also provide written information.
- No, we do not discuss these issues with the patient. (skip to #18)

17. Does your patient/family education material include information about how to safely dispose of unused opioids?

- Yes
- No

* 18. Where do your clinicians primarily see patients? (check all that apply)

- Inpatient setting (e.g., surgery)
- Ambulatory surgery center
- Outpatient clinic or office (skip to question 23)
- Other (please specify)

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Inpatient and Surgical Setting Practices

19. What department typically serves as the attending staff for post-operative patients?

- Attending from our specialty practice
- Hospitalists
- Does not apply to our inpatients or setting where we see patients
- Other (please specify)

20. Who writes post-surgical pain prescriptions at discharge?

- Physician - Hospitalist/Internal Medicine
- Physician - Surgeon
- Physician - Cardiologist
- Physician - Pain Management
- Advanced Practice Clinician (APC) - Internal Medicine
- Other (please specify)
- APC - surgical
- APC - cardiology
- APC - pain management
- Does not apply to our inpatients or the setting where we see patients

21. Does your current practice routinely use NSAIDS for post-surgical pain control?

- Yes, as non-opioid alternative (NSAID is administered in place of opioids)
- Yes, as non-opioid adjunct (NSAID is administered with opioids)
- No
- I don't know
- Other (please specify)

22. What department/specialist is responsible for completing the discharge medication reconciliation?

- Our practice's staff; we manage our own patients when they are hospitalized
- Hospitalists/internal medicine
- Each specialty reconciles the medications that pertain specifically to their role. i.e.: endocrine does diabetic Rx, cardiology does CHF Rx, Pulmonary does COPD Rx, etc.
- Other (please specify)

* 23. Do you currently measure/track opioid prescribing practices with your patients? (Check all that apply).

- We do not currently measure or track our opioid prescribing practices.
- Opioid therapy follow up: All patients 18 and older prescribed opiates for longer than six weeks duration who had a follow-up evaluation conducted at least every three months during Opioid Therapy documented in the medical record (QPP measure # 408)
- Documentation of signed opioid treatment agreement: All patients 18 and older prescribed opiates for longer than six weeks duration who signed an opioid treatment agreement at least once during Opioid Therapy documented in the medical record. (QPP measure # 412)
- Evaluation or Interview for Risk of Opioid Misuse: All patients 18 and older prescribed opiates for longer than six weeks duration evaluated for risk of opioid misuse using a brief validated instrument (e.g. Opioid Risk Tool, SOAPP-R) or patient interview documented at least once during Opioid Therapy in the medical record (QPP measure #414)
- We use the following measures to track opioid prescribing practices with our patients (please specify)

24. Please note any concerns your practice and prescribers have about prescribing opioids to patients. Also note any related topics about which you would like more education/resources.

25. Are there any questions we did not ask that you would like to address, or that you think we SHOULD ask in future surveys on this topic? Open comment box

- No
- Yes (please specify)

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Thank you for completing this survey!