

Opium Safety and Advocacy State Toolkit

There are many possible solutions to address the many elements of the current opioid crisis. These complex issues require the expertise of many stakeholders from healthcare, the communities and policy agencies in each state for success. Certified Registered Nurse Anesthetists (CRNAs) are uniquely positioned to contribute through leadership or participation in collaborative initiatives to reduce the impact of the opioid crisis in their state.

This resource toolkit is offered to provide guidance for State Associations of Nurse Anesthetists (SANAs), as well as Student Registered Nurse Anesthetists (SRNAs) and CRNAs to identify opportunities to create, lead or serve when asked to be involved in a state or community initiative. Each state's opioid crisis experience and resources are unique. The American Association of Nurse Anesthetists (AANA) *Opium Safety and Advocacy State Toolkit* and related state opioid crisis resources are available at www.AANA.com/OpiumToolkit, with additional resources related to the opioid crisis at www.AANA.com/OpiumCrisis.

State Opportunities

There may be existing, newly forming, or an opportunity to develop your own collaborative to address an element or elements related to the opioid crisis. Reach out to learn more and connect with other stakeholders:

- First, start with contacting your [State Nurse Anesthetist Association](#) to identify existing or future opportunities.
- State Professional Associations
 - o State pharmacist association
 - o State rural health association
 - o State hospital association
 - o State APRN association(s)
 - o Others
- State Policy Agencies
 - o Department of Health
 - o Pharmacy Board
 - o Attorney General's Office
 - o Governor's Office
 - o Others

Community Opportunities

- Local, City, and/or County
 - o Churches
 - o Chamber of Commerce
 - o Schools, School Districts
 - o Others
- Are there existing efforts that can be brought together?

Creating the Collaborative or Coalition

- ❑ Identify a core group to organize and lead the initiative
- ❑ Develop a structure for the collaborative/coalition
 - Leaders, steering committee
 - Committees
 - Governance
 - Funding
- ❑ Clearly identify the issue and goals the collaborative/coalition is addressing
 - Mission
 - Vision
 - Gather data – assess community needs and resources
 - Goals
 - Set attainable and stretch goals as a collaborative/coalition
 - Be realistic about what you can do
 - Don't promise more than you can accomplish
- ❑ Identify interested stakeholders and those affected by the opioid crisis
 - Clinicians (e.g., first responders, nursing, surgeons, pharmacists, addiction specialists, dentists, behavioral health clinicians)
 - Consider engaging CRNAs in substance use disorder (SUD) recovery for at least 6 months to a year, who are looking for an opportunity to contribute
 - Non-clinical facility staff (e.g., social workers, administrators)
 - State level associations (see above)
 - Policy makers
 - State representatives
 - Public / patients
 - Business leaders
 - Civic leaders
- ❑ Recruit members
 - Who will align with your collaborative/coalition mission?
 - Create a simple “elevator speech” explaining why others should become involved and what you’re asking them to do. Briefly describe the initiative and explain what the initiative can accomplish in the community.
 - Use networking opportunities
 - Face-to-face meetings
 - Phone calls
 - Emails, text message
 - Social media channels
 - Other
 - Provide education and utilize data to emphasize the impact of the opioid crisis and the importance of the initiative.
 - May require a few contact attempts to get a response or interest from stakeholders.
- ❑ Communicate openly and freely with everyone
 - Gather information from all stakeholder involved to develop an action plan

- Establish a mailing list or online community for the collaborative/coalition to exchange news, updates, ideas
- Hold creative meetings
- Acknowledge and use the diversity of the group
- All voices/opinions welcome in the room, but speak with one voice outside of the room
- Develop a communication/outreach plan
 - Identify spokesperson(s) who are knowledgeable to communicate the collaborative/coalition goals and concerns
 - Develop strategy for dissemination of information
 - Social media
 - Fundraising activities
 - Engagement of the press
- Use networking opportunities to optimize your collaborative
- Monitoring progress and outcomes
 - Develop tracking and outcome measures to keep program on track
 - Identify data sources
 - Evaluate measures periodically to make improvements to reach goals

Continued Engagement with the Collaborative

- Be an active, informed participant of the collaborative/coalition, task force, etc.
- Educate collaborative/coalition and public
 - Promote enhanced recovery and perioperative care to using multimodal pain management techniques, including regional anesthesia when appropriate to reduce need for opioids
 - Live presentations at both state-level and national meetings
 - Webinars
 - Interactive panel discussions
 - Informational fliers mailed to APRNs statewide
- Connect SANA and AANA resources with the collaborative/coalition
- Actions to consider
 - Develop patient education campaigns and resources, specific to your local population and need
 - Establish online repository of information healthcare professionals can share with their patients related to the initiative or the opioid crisis
 - Educate the public to destigmatize mental illness and addiction
 - Determine whether collaborative can address other social determinants of health which patients may be lacking (e.g., food, transportation, jobs). Can the collaborative link patients to these resources?

Healthcare Facility Opportunities

- Identify collaborative interprofessional opportunities to address opioid safety at your facility
 - Pharmacy
 - Surgery
 - Nursing

- Physical therapy
- Others
- Become involved in policy and procedure development covering topics such as opioid-safety, SUD, patient screening for SUD, etc.
- ❑ Collaborate to proactively decrease opioid use
 - Increase use of multimodal, non-opioid pain management across all practice settings with minimal or no prescribed opioid
 - [AANA Enhanced Recovery After Surgery Resources](#)
 - [A Holistic Approach to Pain Management: Integrated, Multimodal, and Interdisciplinary Treatment](#)
 - [Regional Anesthesia and Analgesia Techniques – An Element of Multimodal Pain Management](#)
 - [Chronic Pain Management Guidelines](#)
 - Surgeon or primary care monitor continued opioid use after 90 days to assess pain origin and alternative pain management techniques
- ❑ Collaborate with an addictionologist or primary care to develop comprehensive policy to provide pain management services for chronic pain patient or patient who is in opioid abuse disorder recovery
- ❑ Identify strategies to implement Enhanced Recovery After Surgery® pathways to include multimodal anesthesia, and other opioid-sparing techniques (e.g., regional anesthesia) during the peri-operative process.
- ❑ Conduct patient and caregiver education on non-opioid pain relief options, prescription safety, and appropriate opioid use, storage, and disposal.

AANA Collaboration

- ❑ Inform AANA Professional Practice (practice@aana.com) if you are involved in any opioid-related initiatives at your local or state level.
- ❑ Become involved as a subject matter expert with the AANA to assist SANAs and nurse anesthetists who have interest in opioid crisis activities.
- ❑ AANA monitors for opportunities to become involved with task forces, panels, present testimony, or develop written comment to federal agencies (e.g., U.S. Food and Drug Administration, Department of Health and Human Services). We may call on your expertise as opportunities arise.
- ❑ Share your resources with the AANA and help AANA develop new resources for the website.

AANA and Other Resources

- ❑ AANA Professional Practice Division
847-655-8874
practice@aana.com
- ❑ AANA Peer Assistance Helpline
800-654-5167
- ❑ [AANA Opioid Crisis Resource Webpage](#)
 - Opioid crisis data – nationwide and by state
 - Opioid safety resources (providers)

- Substance use disorder resources including educational materials on the disease of addiction and links to related government agencies, organizations, and support groups (patients and providers)
- Managing chronic pain resource (patients)
- Resources on getting help for CRNAs/SRNAs
- AANA opioid-related advocacy comment letters
- Prescription medication disposal
- SUD workplace resources and policy considerations
- ❑ [Future of Anesthesia Care Today](#)
- ❑ [AANA Enhanced Recovery after Surgery Resources](#)
 - Includes ERAS Considerations for Pathway Development and Implementation
- ❑ [The Society for Opioid Free Anesthesia \(SOFA\)](#)
- ❑ Centers for Disease Control and Prevention (CDC)
 - [Pocket guide: Tapering opioids for chronic pain](#)
 - [Checklist for prescribing opioids for chronic pain](#)
 - [Nonopioid treatments for chronic pain](#)
 - [Assessing benefits and harms of opioid therapy](#)
 - [Calculating total daily dose of opioids for safer dosage](#)
 - [Prescription drug monitoring programs \(PDMPs\)](#)
 - [Turn the Tide pocket guide](#)
- ❑ Drug Enforcement Administration (DEA)
 - [State Prescription Drug Monitoring Programs](#)
- ❑ National Alliance for Model State Drug Laws
 - [Prescription Drug Monitoring Programs](#)
 - Provides links to each state's statutes and regulations regarding PDMPs
- ❑ National Association of State Controlled Substance Authorities
 - [Prescription Drug Monitoring Programs](#)
 - Provides a list of state contacts for PDMPs
- ❑ National Conference of State Legislatures (NCSL):
 - [Prescribing Policies: States Confront Opioid Overdose Epidemic](#), information on state legislation and prescribing policies
 - [State opioid policy updates](#)
- ❑ National Quality Forum (NQF)
 - [National Quality Partners Opioid Stewardship Action Team](#)
- ❑ National Safety Council (NSC)
 - [NSC State of Safety: A State by State Report](#)