

## **ABSTRACT: 2019 ELAM Institutional Action Project**

**Project Title:** A Curriculum Strategy for Training in Opioid Use Disorder and Opioid Prescribing

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**Topic Category:** Education

### **Background, Significance of project:**

As Chair of the BIDMC Opioid Care Committee (OCC), I am charged with integrating existing resources and creating new strategies to address the continuum of opioid use and abuse. This ranges from primary prevention via patient and provider education on opioid prescribing and use and opioid alternatives, to treatment of the patient with opioid use disorder (OUD) presenting for care. In 2016, BIDMC signed the Massachusetts Hospital Association (MHA) Hospital Commitment to Prescription Opioid Management. This document includes a commitment to train residents and fellows in direct care specialties in ten Competencies for the Prevention and Management of Prescription Drug Misuse.

### **Purpose/Objectives:**

OCC will create, curate, and distribute a series of education modules for providers that can be customized by specialty, acute vs chronic pain management, provider type (trainee, MD, NP/PA, RN) and location (BIDMC, community affiliates and clinics).

### **Methods/Approach/Evaluation Strategy:**

Two content experts recruited from OCC membership introduced a proposal to a Program Director (PD) Council meeting to assess interest in creating a centralized curriculum. Overall, PDs agreed with need, however expressed reservations about adding further required web modules without meaningful learning. An survey was emailed to all PDs, asking whether their ACGME program requirements include OUD and/or opioid prescribing, if current relevant training exists and, if so, which teaching formats were utilized. 14/55 programs responded. None cited specific requirements; the majority utilized grand rounds and/or small group didactic format for teaching on these topics. Program "champions" were solicited and small-group brainstorming sessions yielded consensus on a hybrid approach: use of 2 free, and highly-regarded web-based training modules ([www.scopeofpain.org](http://www.scopeofpain.org) and [www.opioidprescribing.org](http://www.opioidprescribing.org), Boston University School of Medicine) combined with a bank of case stems to be used to assess knowledge, identify gaps, and facilitate small group discussions. Programs will select a set of cases from the bank relevant to the needs of their particular specialty.

### **Outcomes/Results:**

Champions representing a cross-section of specialties are meeting to produce the case stem bank. Curriculum will be initiated for the 2019-20 academic year. PDs and trainees will be surveyed regarding satisfaction with approach, improved knowledge and comfort with opioid prescribing, OUD recognition and treatment. Once vetted with trainees, the curriculum will be expanded to advanced practice providers (APPs) within BIDMC and next to APPs practicing at our community affiliates.

### **Discussion/Conclusion with Statement of Impact/Potential Impact:**

The long term goal of the OCC is to improve prescribing patterns in pain treatment (fewer opioids, increased multimodal therapies) without sacrificing patient satisfaction as well as increasing recognition of and access to treatment of OUD. Consistent education of our front-line prescribers is the first step.

# A Curricular Strategy for Training in Opioid Prescribing and Opioid Use Disorder

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Collaborators: M. Moris Aner, MD Christopher F Rowley, MD / Mentors: Peter Healy, MHA, President BIDMC; Patricia H. Folcarelli, RN, PhD, VP Health Care Quality

## Background

- Massachusetts ranks among the top ten states with the highest rates of drug overdose deaths involving opioids (Fig 1).
- Overprescribing of opioid medications may lead to misuse by the patient or diversion to others (Fig 2).
- Education on appropriate prescribing has been shown to reduce the quantity of opioids prescribed without increasing the rate of patient refill requests in the postoperative period.
- Treatment of opioid use disorder (OUD) is subject to provider bias, lack of resources, and substantial relapse risk.
- Medication assisted therapy is evidence-based, but remains underutilized.
- The BIDMC Opioid Care Committee (OCC) is charged with integrating existing resources and creating new strategies to address the continuum of opioid use and abuse.
- This includes primary prevention via patient and provider education on opioid prescribing and use, opioid alternatives, and treatment of OUD.

Figure 1

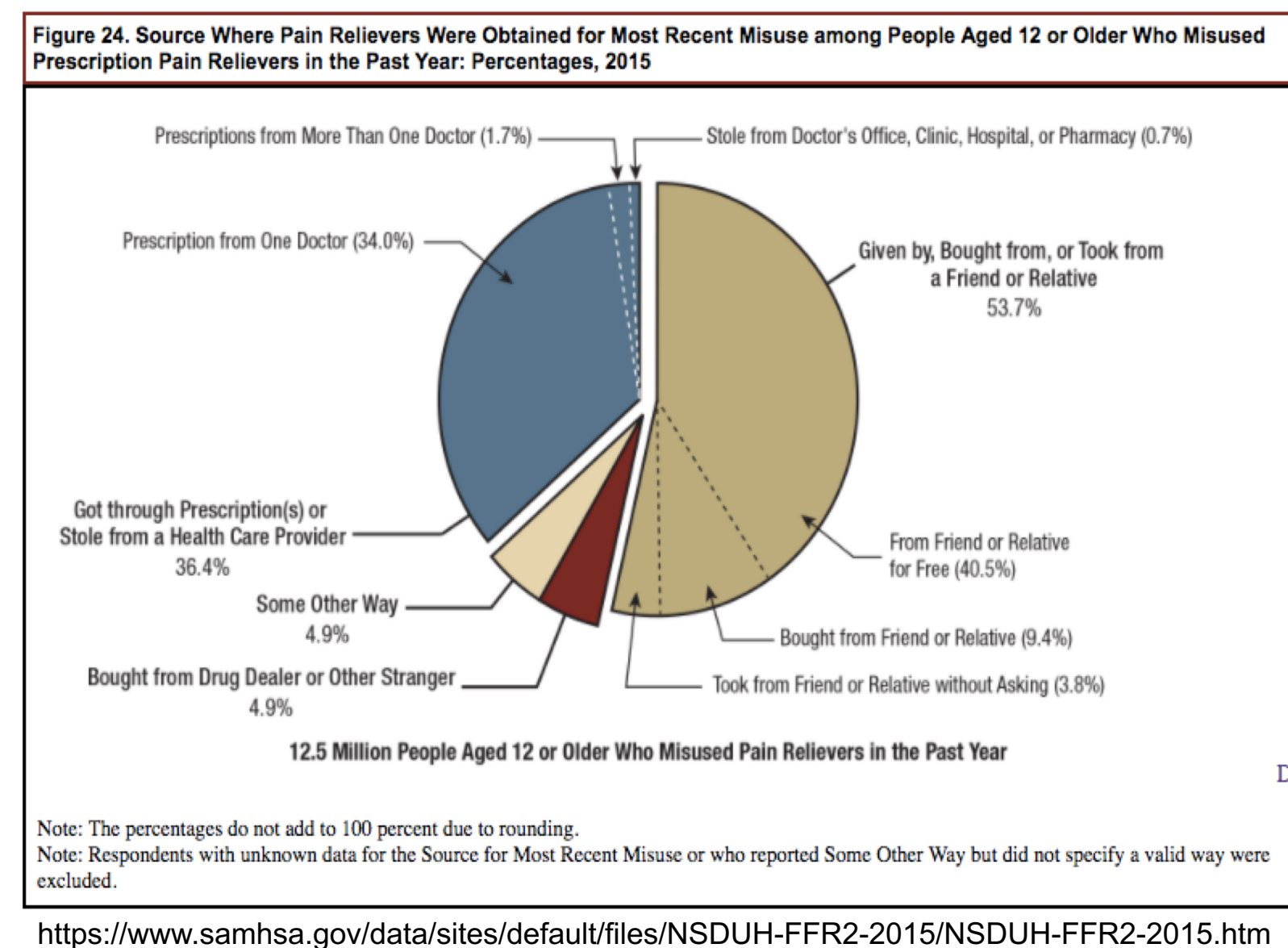
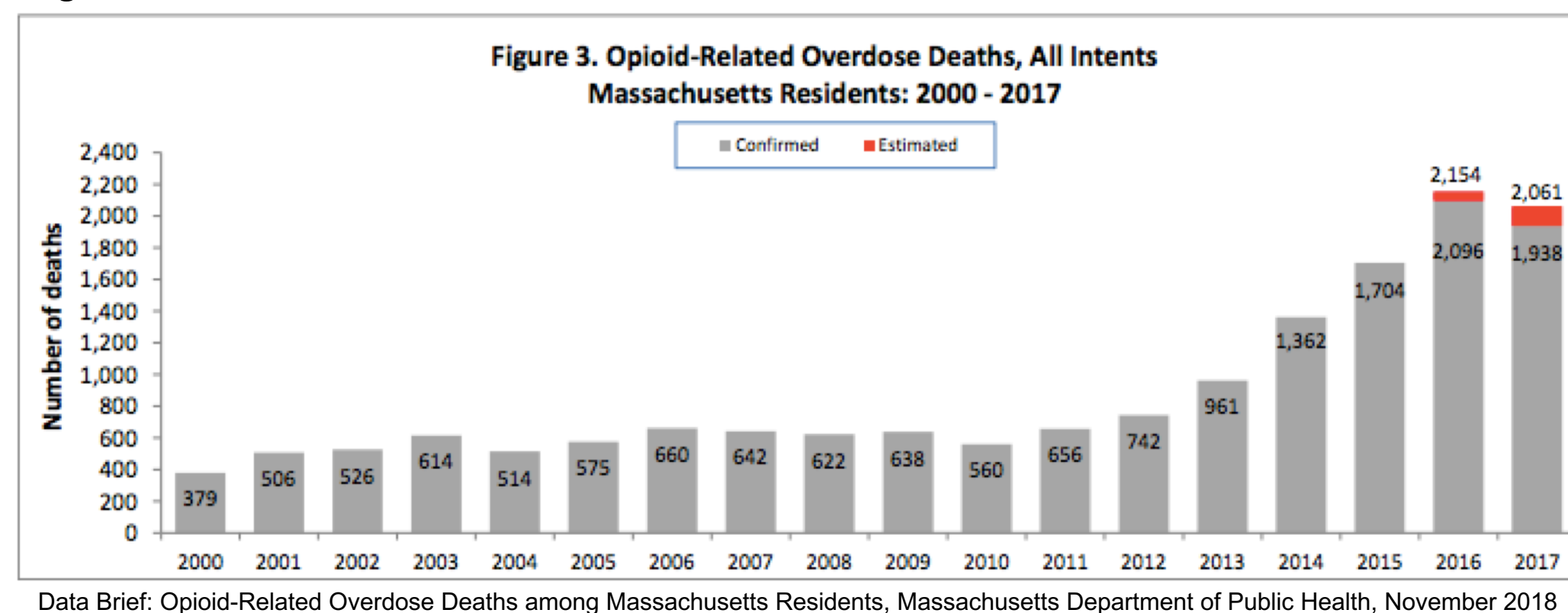


Figure 2



## Objective

The OCC will create, curate, and distribute a series of education modules for providers that can be customized by specialty, acute vs chronic pain management, provider type (trainee, MD, NP/PA, RN) and location (BIDMC, community affiliates and clinics).

## Methods

- Two content experts recruited from OCC assessed program director (PD) interest in creating a centralized curriculum.
- Overall, PDs agreed with need, however expressed reservations about adding further required web modules without meaningful learning.
- Survey emailed to all PDs (Table):
  - Do ACGME program requirements include OUD and/or opioid prescribing?
  - Does current relevant training exist?
  - If so, which teaching formats were utilized?
  - 14/55 programs responded.
- Small-group brainstorming yielded consensus on a hybrid approach
  - 2 web-based training modules: [www.scopeofpain.org](http://www.scopeofpain.org) and [www.opioidprescribing.org](http://www.opioidprescribing.org) (Boston University School of Medicine)
  - Create a bank of case stems to assess knowledge, identify gaps, and facilitate small group discussions.
  - Programs will select a set of relevant cases for use.

## Results

- "Champions" representing a cross-section of specialties meeting to produce case stem bank.
- Curriculum will be initiated for the 2019-20 academic year.
- PDs and trainees will be surveyed:
  - satisfaction with approach
  - improved knowledge re opioid prescribing, OUD recognition and treatment
  - Improved comfort with opioid prescribing, OUD recognition and treatment
- Plan to expand curriculum to advanced practice providers (APPs) at BIDMC and community affiliates.

Table: Program Director opioid education survey results

Training program	ACGME program requirements	Formats utilized for opioid education
Anesthesiology	No	Grand rounds Small group
Cardiac Electrophysiology	No	None
Endocrinology	No	None
Hematology Oncology	No	Small group
Internal Medicine	No	Small group Clinical rounds Grand rounds
Interventional Radiology	No	None
OB/GYN	No	Small group Grand rounds
Pain Medicine	Yes	Small group Grand rounds
Pathology	No	None
Reproductive Endocrinology/Infertility	No	Grand rounds
Rheumatology	No	Grand Rounds
Surgery	No	Grand Rounds Small group
Surgical Critical Care	No	Grand Rounds
Vascular Neurology	No	MA BORM online CME Grand rounds

## Discussion and Impact

- The long term goal of the OCC is to improve prescribing patterns in pain treatment (fewer opioids, increased multimodal therapies) without sacrificing patient satisfaction, and increasing recognition of and access to treatment of OUD.
- Consistent education of our front-line prescribers is the first step.
- Development of an opioid prescribing dashboard is in progress to provide practice-level feedback to trainees.

Presented at the 2019 ELAM® Leaders Forum

## Contact

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