

# Opioid Review and MAT Clinic Care Plans

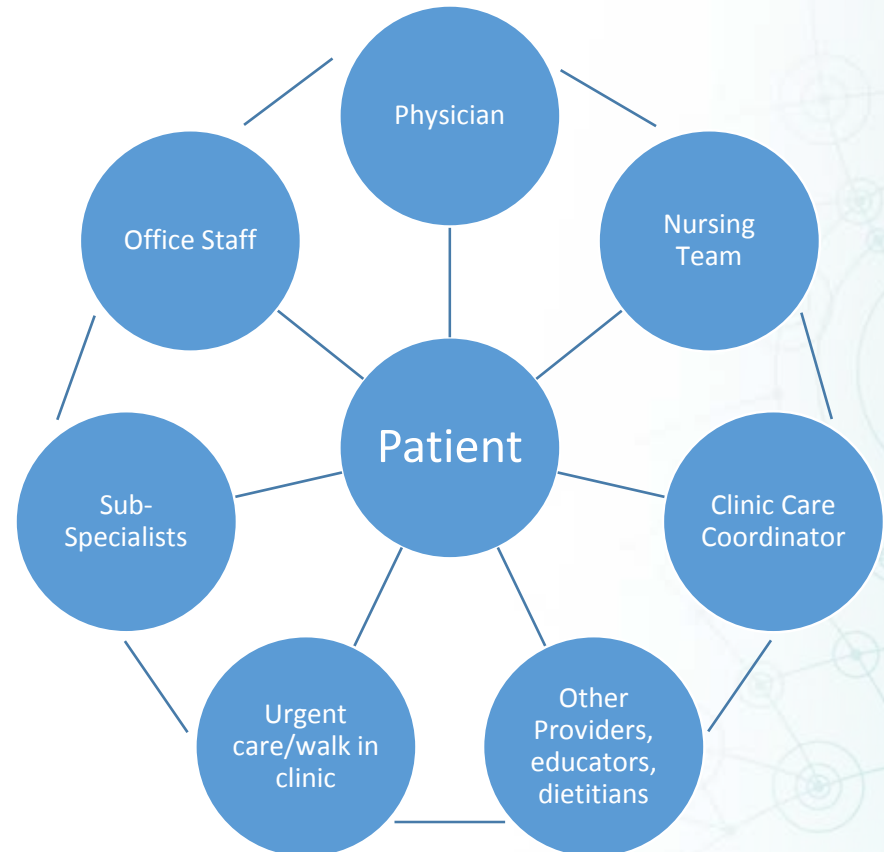
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# Learning Objectives

- Formulate comprehensive care plans with an understanding of the basic components
- Implement and incorporate into daily work flow
- Illustrate the important activities in a care plan to help monitor patients on chronic controlled substances

# Controlled Substance Care Team

- The CSCT is modeled after the Patient Centered Medical Home concept- placing the individual patient's needs and safety as the emphasis
- Addressed by monitoring medications and getting patients access to any services they may need



# Controlled Substance Program Care Plan

- Start with formulating a list of patients on three (3) consecutive months of controlled substances
  - Divide list out by who has active care plans and who does not
  - Those who have active drug screens
  - Those with the highest morphine equivalents
- These patients should have documented care plans

# Controlled Substance Program Care Plan

- Most effective flow of working through list is addressing highest risk patients first
- High risk patients:
  - Dispute over early refills
  - Making a scene at a pharmacy
  - Law enforcement concerns regarding misuse
  - History of frequent emergency department visits
  - Patients with history of drug-related crimes, overdoses, or incarceration
  - DOC

# Controlled Substance Program Care Plan

- The plan is tailored to chronic controlled substance use
- Care plan starts by outlining the diagnosis(es), goal and plan for the patient.
- The RN Care Coordinator sits with the patient and reads through the plan with a social worker or other witness present



# Terms of Agreement

- When the care plan is signed, the patients agree to:
  - Knowing the risks associated with controlled substances
  - Not using illegal substances while on controlled substances
  - Not being involved in the sale, possession or diversion of controlled medications
  - If a problem with drug or alcohol addiction occurs, a program may be recommended
  - Active participation in program(s) to improve function

# Terms of Agreement

- When the care plan is signed, the patients agree to:
  - Inform provider of all medications patient is taking
  - Allowing provider to communicate with other health care professionals
  - Only using one pharmacy to fill controlled medications
  - Inform the clinic if prescription insurance changes, and thus the pharmacy changes
  - Inform clinic if contact information changes
  - Current arrangement that exists between clinic and pharmacy to transport of hard copy prescription



# Terms of Agreement

- When the care plan is signed, the patients agree to:
  - Making no early refill requests, unless special circumstance
  - Possibly being requested to come to clinic to pick up written prescription
  - Following-up with provider regarding control of condition and keeping all scheduled appointments
  - Contact the clinic if unavoidable emergency occurs requiring a prescription for a controlled medicine from another provider

# Terms of Agreement

- When the care plan is signed, the patients agree to:
  - Obtaining all controlled medicines from one provider
  - Taking medication as prescribed
  - Random pill counts and testing of urine
  - Respond within 24 hours for random pill counts and drug screens
  - Understanding that violations of care plan agreement may result in dismissal from clinic

# Work Flow

- Patient identified as needing a care plan
- Urine drug screen (witnessed if possible)
- RN Care Coordinator or Social Worker
  - Review care plan
  - Obtain signatures
  - Previous records obtained
  - Releases for other providers
  - If concerns, look at DOC (past history of drug related charges)
- Primary Physician signs with patient