

The Colorado ALTO Project

Produced in collaboration by the Colorado Hospital Association and the Colorado Chapter of the American College of Emergency Physicians

Using Alternatives to Opioids (ALTOs) in Hospital Emergency Departments PRE-LAUNCH CHECKLIST

Based on the Colorado Chapter of the American College of Emergency Physicians
2017 Opioid Prescribing & Treatment Guidelines

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Colorado ALTO Project Champion

Role:

Sets the direction for implementation of the Colorado ALTO Project by effectively developing an Opioid Safety Team, establishing goals, timelines, project tracking, an implementation schedule, a communication plan, performance improvement plan and an effective use of resources. Responsible for translating the Executive Team's opioid safety goals and expectations into an action plan.

5 months prior:

- Read and understand Colorado ACEP *2017 Prescribing & Treatment Guidelines*, focusing on the ALTO section.
- Work with Executive Team to clearly identify goals and expectations.
- Present to hospital Board of Directors as requested.
- Identify champions. Recommended team members include:
 - ED Medical Director
 - ED Nurse Director
 - Pharmacy Director
 - Quality Champion
 - Communications and Marketing Champion
 - IT Champion
 - Data Support

4 months prior:

- Work with team to identify scope of work and quality metrics based on Executive Team goals.
- Set up performance improvement strategy.
 - [Resource: Institute for Healthcare Improvement \(IHI\) Plan-Do-Study-Act \(PDSA\) model for change](#)
- Review electronic medical records for data pulling capabilities.
- Work with communications and marketing to develop internal and external communication plan.

3 months prior:

- Follow up with team action items as outlined below:
 - Ensure internal communications plan is launched.
 - Progress toward goal report to Executive Team.

2 months prior:

- Ongoing performance improvement readiness.
- Ensure all team members are trained, ready for launch and there have been no key turnover issues for the team.

1 month prior:

- Ensure all necessary supplies and equipment are ready and available.
- Work with organization and/or system IT Champion and Data Champion to beta test reports.
- Ensure all training is complete.
- Beta test launch including all reports.

1 week prior:

- Hold final planning meeting.
- Check for and remove remaining barriers.
- Attend final quality improvement readiness meetings.

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ED Medical Director

Role:

Establishes an effective provider system and process for the design, implementation and sustainment of the Colorado ALTO Project. Responsible for ED clinician ALTO education and practice compliance. Together with nursing leadership, ensures ongoing hospital-wide communication about the Colorado ALTO Project. Responsible for clinician ALTO data – communicating to key stakeholders and removing barriers to change.

4 months prior:

- Read and understand Colorado ACEP *2017 Prescribing & Treatment Guidelines*, focusing on the ALTO section.
- Work with champions to coordinate roles and responsibilities.
- Develop ED Clinician implementation plan.
- Present ALTO ED Opioid Safety Action Plan at Medical Executive Committee.
- Begin communications and building support with ED clinicians.

3 months prior:

- Review high-risk policies to ensure medications such as Ketamine and IV drip lidocaine can be given for pain in the ED; have policies approved one month prior to launch.
- Assist in developing communication plan.
- Cover specific education on trigger point injections/IV nerve blocks.
- Work with the medical staff office to develop a strategy for house-wide and clinic provider education.

2 months prior:

- Continue ALTO education, communication and support.
- Review baseline data.
- Check order set progress.
- Develop orientation and education process for locum tenens ED providers.

1 month prior:

- Review and finalize ED high risk medication policies.
- Ongoing provider training.
 - Consider talking with colleagues outside the ED to check for understanding about ED-based ALTO work.
- Beta test data collection; ALTO process; test locum tenens process.

1 week prior:

- Attend final planning meeting.
- Check for and remove remaining barriers.
- Attend final quality improvement readiness meetings.

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ED Provider

Role:

Assists in designing and implementing an effective provider process for the Colorado ALTO Project. Works with other ED providers and nursing staff to ensure patients receive the best pain management possible using ALTOs as a first line of defense and opioids as a rescue drug. Educates patients, family members, hospital staff and other providers on the importance and benefits of the ALTO work in driving down administration of opioids in the ED.

4 months prior:

- Read and understand Colorado ACEP *2017 Prescribing & Treatment Guidelines*, focusing on the ALTO section.
- Research, ask questions, discuss concerns.
- Identify potential barriers to implementing the ALTO initiative and discuss with ED Medical Director.

3 months prior:

- Attend provider education online and in person.
- Assist with communication and provider training as needed.
- Talk with ED nursing staff to develop team processes and appropriate patient/family communication strategies.

2 months prior:

- Work with ED Medical Director as directed to assist in provider communication.
- Assist with developing locum tenens provider education process.

1 month prior:

- Test process, tools, order sets – ensure all necessary supplies and equipment are ready and available.

1 week prior:

- Attend final planning meeting.
- Check for and remove remaining barriers.
- Attend final quality improvement readiness meetings.

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ED Nurse Director

Role:

Establishes an effective system and process for the design, implementation and sustainment of the Colorado ALTO Project for the ED clinical nursing staff. Responsible for ED education, including patient and family engagement. Together with clinician leadership, ensures ongoing hospital-wide communication. Responsible for education float pool ED staff. Responsible for checking data reports prior to submission.

4 months prior:

- Read and understand Colorado ACEP *2017 Prescribing & Treatment Guidelines*, focusing on the ALTO section.
- Work with ED Medical Director to develop implementation plan.
- Begin communication with the ED staff and building support for the Colorado ALTO Project.

3 months prior:

- Work with ED providers and Pharmacy and Therapeutics Committee (P&T) to change high-risk policies to meet the recommended Colorado ACEP ALTO guidelines.
- Design nurse education and develop schedules (nurse training materials are available).
- Develop float pool nurse education process to ensure sustainment of ALTO guidelines with float pool or traveling nurses.

2 months prior:

- Educate ED nursing staff on medications: administration, side effects, scripting, champion improvement work – review data, check compliance, listen to challenges and remove barriers.

- Develop customer pain satisfaction education and communication skills.
 - Sample AIDET® scripting provided
- Begin purposeful leadership rounds outside ED to educate hospital staff on intent of ED changes; work with unit directors and managers.

1 month prior:

- Test process, tools, order sets, patient rounding.
- Review communication plan to ensure internal clinical and non-clinical staff communications are complete and adequate.
- Consider making leadership rounds outside the ED to check for house-wide understanding of ED-based ALTO work.
- Ensure all necessary supplies and equipment are ready and available.
- Collaborate with providers to ensure consistent messaging to patients and families.

1 week prior:

- Attend final planning meeting.
- Check for and remove remaining barriers.
- Attend final quality improvement readiness meetings.

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ED Nurse

Role:

Assists in designing and implementing an effective clinical nursing process for the Colorado ALTO Project. Works with other ED nursing staff and providers ensure patients receive the best pain management possible using ALTOs as a first line of defense and opioids as a rescue drug. Educates patients, family members, hospital staff and other providers on the importance and benefits of the ALTO work in driving down administration of opioids in the ED.

4 months prior:

- Read and understand Colorado ACEP 2017 *Prescribing & Treatment Guidelines*, focusing on the ALTO section.
- Research, ask questions, discuss concerns.
- Identify potential barriers to implementation and discuss with ED Nursing Director.

3 months prior:

- Attend nursing education online and in person.
- Assist with communication and nurse training as needed.
- Talk with ED providers to develop team processes and appropriated patient/family communication strategies.

2 months prior:

- Work with ED Nursing Director as directed to assist in nurse and patient/family communication.
- Assist with developing float pool/traveler education process.

1 month prior:

- Test process, tools, order sets – ensure all necessary supplies and equipment are ready and available.

1 week prior:

- Attend final planning meeting.
- Check for and remove remaining barriers.
- Attend final quality improvement readiness meetings.

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Pharmacy Director

Role:

Establishes an effective system and process for the design, implementation and sustainment of the Colorado ALTO Project. Responsible for pharmacist education and integrating that education with clinicians and nursing staff. Responsible for ALTO medication management as outlined below.

4 months prior:

- Read and understand Colorado ACEP 2017 *Prescribing & Treatment Guidelines*, focusing on the ALTO section.
- Facilitate product acquisition and availability to nursing staff – goal is to stock all medications in the order set in ED automated dispensing machines to facilitate quick delivery.
 - Any medication that cannot be stocked in automated dispensing machines (i.e., must be made in IV room, lidocaine gtt) – treat as STAT orders and make and take immediately to ED.
- Work with ED director, anesthesia, P&T committee, nursing, regulatory and all other key stakeholders to facilitate appropriate administration of medications.
 - High Risk Medication Administration policy should reflect that low-dose ketamine bolus/drips and IV lidocaine at the appropriate dose can be transferred to a non-ICU area.
 - Procedural Sedation policy should reflect dosing cutoffs for when ketamine administration requires a “timeout.”

3 months prior:

- Collaborate with organization and/or system IT Champion and Data Champion to create order entries in the Computerized Physician Order Entry (CPOE) that will facilitate easy ordering of medications. This means clearly labeled individual order entries vs. creating an order set.

2 months prior:

- Secure medication approval and stock medications for use in the ED for the following medications:
 - Ketamine pain dose IV and drip – IV push may require less concentrated product (50mg/5 ml prefilled syringes)
 - Lidocaine IV and patches
 - Haldol
 - Toradol
 - Capsaicin topical
 - Gabapentin
- Update smart pump medication libraries to reflect offered medication therapies including standard drip concentration, dosages and maximum dose limits.
- Educate pharmacy staff on ALTO therapies.

1 month prior:

- Test process, tools, order sets.
- Ensure all necessary supplies and equipment are ready and available.
- Work with organization and/or system IT Champion and Data Champion to beta test reports.

2 weeks prior:

- Ensure smart pumps are updated and working.
- Ensure nurse education is complete.
- Ensure provider questions are answered.
- Ensure stocking is complete.

1 week prior:

- Attend final planning meeting.
- Check for and remove remaining barriers.
- Attend final quality improvement readiness meetings.

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Quality Improvement Champion

Role:

Establishes an effective quality improvement system and process for the design, implementation and sustainment of the Colorado ALTO Project using an evidenced-based model for improvement. Together with the Project Champion, ensures ongoing hospital-wide communication about quality metrics and performance improvement progress toward goal. Also responsible for assisting in analysis of data and working with team members to make changes based on data. Works closely with the Data Champion to ensure data integrity prior to submission.

4 months prior:

- Read and understand Colorado ACEP 2017 *Prescribing & Treatment Guidelines*, focusing on the ALTO section.
- Works with Project Champion to understand organization goals for ALTO work and align with ongoing quality improvement work.
- Identify model of improvement for integration of ALTO change initiative and set up performance improvement work, quality metrics design and tracking.
- Identify and collect baseline data.
- Work with ALTO champions to ensure all high-risk medication policies meet regulatory compliance.

3 months prior:

- Train in performance improvement tools and techniques as needed.
 - [Resource: IHI's Virtual Training – On Demand: An Introduction to the Model for Improvement](#)

2 months prior:

- Continue launch prep.
- Work with Data Champion to identify how quality metrics will be collected.

1 month prior:

- Hold quality improvement pre-launch meeting.
- Ensure all process and quality improvement tools ready for launch.
- Discuss quality improvement five-minute huddles.

2 weeks prior:

- Begin huddles.
- Ensure metrics and dashboards are ready.
- Double check data collection tools and reports.

1 week prior:

- Attend final planning meeting.
- Check for and remove remaining barriers.
- Host final quality improvement readiness meetings.

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Communications and Marketing Director

One of the most important lessons learned: Develop an intentional, ongoing marketing and communication strategy.

Role:

Establishes an effective system and process for the design, implementation and sustainment for ongoing, effective communication and marketing plans for the Colorado ALTO Project. Major audiences to consider include, but are not limited to: emergency department clinical and non-clinical staff, hospital/system-wide clinical and non-clinical staff, the community at large, hospital owned clinics and specialty offices.

4 months prior:

- Read and understand Colorado ACEP 2017 *Prescribing & Treatment Guidelines*, focusing on the ALTO section.
- Identify key stakeholders, message and key take-aways.
- Develop internal, external and community communications plan.

3 months prior:

- Develop consistent messaging for clinical, non-clinical and community.
- Develop key talking point fact sheets for distribution to managers, directors and staff.
- Identify how to communicate with the community, patients and families.
- Begin marketing/communicating/promoting initiative high-level introduction.

2 months prior:

- Continue consistent and positive messages for all associates.

2 weeks prior:

- Intentional leadership rounding – all units, all floors – do people know about the initiative? What do they know?
- Create a “Top 10 Most Commonly Asked Questions Discovered on Rounding.”

1 week prior:

- Attend final planning meeting.
- Check for and remove remaining barriers.
- Attend final quality improvement readiness meetings.

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IT Champion

Role:

Serves as point person for building reports and orders needed to implement the ALTO initiative. This includes creating order entries in CPOE that will facilitate easy ordering of medications; building reports to facilitate access to emergency room data to include specific opioid and ALTO fields and reports that will filter medication administration specific data.

4 months prior:

- Read and understand Colorado ACEP 2017 *Prescribing & Treatment Guidelines*, focusing on the ALTO section.
- Begin work on creating ALTO order set.
- Identify data report writing point contact (if other than IT Champion).

3 months prior:

- Complete first draft ED ALTO order set.

2 months prior:

- Conduct a test run of writing data report and pulling data to ensure all fields populate correctly (e.g., dates, medications, doses, dosing units, etc.).
- Final approval ED ALTO order set.

1 month prior:

- Work with Data Support to beta test reports.

1 week prior:

- Attend final planning meeting.
- Check for and remove remaining barriers.
- Attend final quality improvement readiness meetings.

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Data Support

Role:

Serves as point person for collecting, organizing and submitting data. Responsible for ensuring the data is clinically checked for quality integrity prior to submission.

4 months prior:

- Read and understand Colorado ACEP *2017 Prescribing & Treatment Guidelines*, focusing on the ALTO section.
- Work with Project and Quality Champions to understand the scope of project and specific role and responsibilities.

3 months prior:

- Check in with IT as reports are written to make sure questions are answered during report build.

2 months prior:

- Conduct a test run and pull data to ensure all fields populate correctly (e.g., dates, medications, doses, dosing units, etc.).

1 month prior:

- Attend data software report training session if applicable.
- Work with IT, ED Nurse Director and ED Medical Director to beta test reports.

1 week prior:

- Attend final planning meeting.
- Check for and remove remaining barriers.
- Attend final quality improvement readiness meetings.