

**2019 WNA Professional Policy Committee
Report and Recommendations on WNA's Role in Addressing the Opioid Epidemic in Wisconsin
Adopted by the WNA Membership January 18, 2019**

Report Summary

Background

As efforts to minimize the number of opioid prescriptions issued to patients are improving, Wisconsin is now seeing a significant rise in the use of illicit drugs. This is due to the lack of access to prescription drugs like oxycodone and fentanyl. Individuals that are addicted to opioids are using heroin and synthetic fentanyl. Opioid abuse has become a public health crisis and the public can benefit from the engagement of registered nurses as a resource to combating this issue. The representatives to the ANA Membership Assembly meeting in June 2018 participated in a dialogue forum related to the need for personal protective equipment for nurses as a caution to exposure to patients that have overdosed.

Governor Walker's Task Force on Opioid Abuse released, Combating Opioid Abuse Report 2017. The report summarized the legislation that was passed during the 2017 legislative biennium, implementation updates, and recommendations that identify some strategies for the utilization nurses.

<https://hope.wi.gov/Documents/Jan18%20Opioid%20Report%20JH%202.pdf>

In August 2016, the American Nurses Association developed the ANA Issue Brief, The Opioid Epidemic: Addressing the Growing Drug Overdose Problem 2016.

https://www.nursingworld.org/~4ae212/globalassets/docs/ana/ana_issue-brief-opioids_2016may20.pdf

ANA has developed resources to aid in managing and reducing the opioid epidemic that include outlining best practices, treatment and deterrence, pain management and federal legislation.

https://www.nursingworld.org/~4ae212/globalassets/docs/ana/ana_issue-brief-opioids_2016may20.pdf

In addition, policy related proposals that support the nurses role in addressing the nations opioid crisis have been identified by ANA that address: expanded patient access to Medication Assisted Therapy (MAT): -- through the utilization of Advanced Practice Registered Nurses to prescribe be a MAT independent provider, -- Prescriber Education & Training: ANA believes the current crisis calls for additional support and focus on prescriber education to ensure that health care professionals who prescribe opioids are properly trained and educated in opioid prescribing, --. Deterrent Formulations: ANA urges greater investments in the scientific and clinical research needed to advance the development, assessment, and deployment of abuse-deterrent technologies. Issues surrounding abuse and misuse of prescription opioids must be balanced with the real and legitimate needs of those seeking treatment for pain; -- Increase Access to Opioid Antagonist – Naloxone: ANA supports increasing access to Naloxone for first responders, family, friends, and caregivers of those who are known to be chronic users of opioids. Naloxone is a critical tool in preventing overdose by opioids such as heroin, morphine, and oxycodone.

https://www.nursingworld.org/~4ae212/globalassets/docs/ana/ana_nursings-role-in-opioid-crisis_2016.pdf

Report from the October 26, 2018 WNA Dialogue Forum

There were 85 participants that attended the October 26, 2018 WNA Dialogue Forum. Fifty-eight (58%) of the participants were undergraduate nursing students. The participants were provided an overview of the opioid epidemic in Wisconsin that addressed the policy, practice, education and nursing workforce.

Following the presentation the participants were asked that at each table to reviewed and discuss specific questions.

The process used for this Dialogue Forum topic was to assign the participant tables a specific category to discuss and identify areas where WNA could provide support. The specific categories are as follows:

- Advocacy/policy
- Education
- Practice
- Workforce
- Leadership

Below is the summary of WNA's possible role in addressing the Opioid Epidemic in Wisconsin.

Advocacy/policy

1. Work with ANA on supporting a National Prescription Drug Monitoring Program (PDMP) for tracking and reporting of opioid dispensing and prescribing—collaboration with other states (or regions) is important.
2. Work with ANA on supporting national standards for safe medication and sharps disposal.
3. Require Accrediting Bodies for Schools of Nursing to develop and offer an education program on treatment of opioid addiction.
4. Work with ANA on supporting a federal standard that address PPE procedures for health care providers at risk for exposure to opioid-related products.

Education

1. Education about acute use of opioids as a chronic condition.
2. Observation of “addicts” simulation.
3. Provide education about resources that are available around addiction.
4. More discharge information to patients and families regarding fentanyl transfer through skin.
5. More education about opioid resources and AODA counselors—resources are limited, and people may not know where to go for help.
6. We need to see addicts talk to us about education—this makes the problem real.
7. Most opioid education is about acute use, not chronic addiction—it's important that the education to health care professionals is relevant
8. Family education and support.
9. Education to all staff.
10. Education on confrontation.

Practice

1. Educate nurses, communities, and families on signs/symptoms of overdose & alternative non-pharmacologic therapies.
2. Educate more about the hospital setting: PPE, signing off, and pain contracts.
3. Advocate for the patient and the appropriate balance.
4. Work with social workers on available resources in ER, ICU, and community get patient needed care and help.
5. OB/NICU training for staff about addiction.

Workforce

1. Overdose cart/isolation kit with all PPE protection to nurse from contamination.
2. Specialized “overdose nurse”—more knowledge about patient care and workplace safety to support other staff.
3. WNA to host a conference/session about the topic for education.
4. Enforce safe disposal .
5. WNA can advocate for implementation of such interventions and provide support to workplaces.
6. Create a “safe workplace” committee within organizations.

Leadership

1. Promote legislation—this will help with education around the topic.
2. Topic of WNA meetings/events could be about this epidemic.

3. Figuring out how to bill for services: funding and advocate.
4. Promoting more education to student nurses and emergency services.
5. Promoting safety for patients going through withdrawal.
6. Encourage holistic non-pharmacologic pain interventions.
7. Teach patients about disposal methods for narcotics and provide safe storage options for patients.
8. Increased education to patients on complications/risks of opioids.
9. Opioid screening tool in Electronic Medical Record (EMR) to address opioid use with patients and evaluate need.

Adoption of the following recommendations: That the WNA Board of Directors

- 1. Establish a Task Force to identify WNA's role in addressing the opioid epidemic in Wisconsin.**
- 2. Task Force members to include WNA's three councils, related Mutual Interest Groups and other interested WNA members.**
- 3. Task Force to explore the areas of nursing-related policy/regulatory, practice, research, education, workforce and leadership.**
- 4. Task Force to explore forming partnerships with community-based organizations focused on prevention of drug dependency and promotion of mental health in the community.**
- 5. Report progress to the WNA Board and at the 2019 WNA Annual Meeting.**