The purpose of this project was to obtain feedback from Veterans and their caregivers who received naloxone (opioid overdose reversal) kits from the James A Haley Veterans Hospital (JAHVH), Tampa, FL to determine if there is any indication areas for improvement.

Background

- Estimated 47,055 deaths occurred in US in 2014 from drug overdose and 60.9% of those deaths involved an opioid.
- Diagnosed opioid abuse is about 7 times higher among Veteran patients than non-Veteran patients.
- Opioid overdose is preventable.
- Naloxone is an opioid antagonist that can effectively reverse effects of opioid overdose.
- The Veteran Health Administration launched the opioid overdose education and Naloxone distribution (OEND) program to address the opioid overdose crisis among Veterans with increased risks of opioid overdose.
- Feedback from JAHVH Veterans patients who were issued Naloxone kits is needed to determine if the OEND program is achieving its intended objectives.

Methods

- Obtain QI determination approval from the VA Research and Development Committee.
- Meet with team of stakeholders (USF faculty, VA research investigators, VA patient safety specialists, VA Chief of Pharmacy, VA national Opioid overdose Education and Naloxone Distribution program, and the JAHVH pain committee) to develop QI project goals.
- Obtain Satisfaction feedback from Veterans and Caregivers from JAHVH who received naloxone kits between January 2018 and December 2018.
- Call attempts to intended recipients (n=50).

Results

- 96% of contacted respondents completed the feedback calls.
- 57% of the respondents reported not receiving any education related to Naloxone kit.
- 22% of respondents indicated being very satisfied with training.
- 9% of respondents reported using kit in overdose incidents and reported very satisfactory experience.
- 57% of respondents indicated not being sure of the signs of opioid overdose.
- 65% reported not knowing what to do when their current Naloxone kit expires.
- 57% of respondents indicated that having the kit available worked well for them while 43% indicated that receiving a demonstration on how to use the kit would enhance their satisfaction with the program.

Discussion

The findings suggest that there is room for quality improvement of the Naloxone distribution program in these areas:

- Ascertain patients' preference for injectable or nasal Naloxone kit before dispensing.
- Inform patients they are receiving a kit before mailing it to patients.
- Standardize education or training related to kit distribution to include verbal, written, demonstration, opioid overdose signs and symptoms recognition and how to use the kit.
- Include at least annual re-training.
- Include instructions on checking expiration dates on naloxone kits and what to do if the kits expire.

Addressing the gaps and the concerns raised by respondents has the potential to increase the satisfaction of patients and overall success of the program.

Acknowledgments

This material is the result of work supported with resources and the use of facilities at the James A. Haley Veterans’ Hospital and Clinics in Tampa, FL. The contents do not represent the views of the U.S. Department of Veterans Affairs or the United States Government.

My deepest gratitude goes to Dr. Marcia Johansson, USF faculty and project supervisor; Dr. Elizabeth Oliva, the VA National Opioid overdose Education and Naloxone Distribution (OEND) coordinator; and Dr. Kim Mowery, Chief of Pharmacy at the JAHVA for all the support and valued guidance.

References

References available upon request.