Nurse Practitioners (NPs), Controlled Substances and E FORCSE

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Background

- The number of deaths due to overdose in the United States has increased from 4000 in 1999 to 16,600 in 2010 (NEJM, 2013)
- Overdose is now the second-leading cause of accidental death in this country, where more than 2.4 million people were considered opioid abusers in 2010 (NEJM, 2013)
- The rate of drug-induced deaths in Florida is higher than the national average (ONDCP, 2013)
- Florida drug-induced deaths (16.9 per 100,000 population) exceeded the national rate (12.9 per 100,000 population) (ONDCP, 2013)
- As a direct consequence of drug use, 3,181 persons died in Florida in 2010 (ONDCP, 2013)
- The State of Florida is addressing the drug abuse epidemic by the implementation of prescription drug monitoring programs (PDMPs) and E FORCSE for all providers
- Providers are required to check E FORCSE, which is the Florida prescription drug monitoring program prior to prescribing Schedule II medications
- Until July 1, 2018, Florida APRNs were not authorized to prescribe Schedule II medications. Currently APRNs can only prescribe controlled substances for acute pain for 3 days. It may be extended to 7 days if needed for extreme cases. The diagnosis code and indication for use of the Schedule II medication needs to be on the prescription

Purpose

The goal of this project is to increase the State of Florida Advanced Practice Registered Nurse’s (APRN) knowledge about the drug prescription monitoring program (PDMP), E FORCSE and the new law requirements regarding writing controlled substances prescriptions.

Methods

- Surveys and powerpoint presentation were emailed to active licensed APRNs using the public online database from the Florida Department of Health.
- Emails were sent from May 2019-July 2019.
- A powerpoint presentation was created to educate APRNs on the new Florida law on writing controlled prescriptions and use of E FORCSE.
- A quality improvement pre/post survey was conducted to evaluate the implementation of a potential standard educational program on the new Florida prescription law and use of E FORCSE.

Instruments

Pre and post assessment surveys were formulated.

Pre assessment survey
Contains 10 questions concerning participants:
- Demographics-years in practice, type of practice, previous formal education on the topic
- Baseline knowledge and familiarity on the topic
- Determine if participants received formal education on the topic

Post assessment survey
Contains the same 10 questions concerning participants:
- Increase in knowledge
- Confidence in ability to implement knowledge gained

Results

- 80 pre assessment surveys and 63 post surveys assessment were received and analyzed.
- Participants found questions that asked about the use of E FORCSE and the required information needed to write controlled prescriptions the most difficult.
- The noted results showed overall improved scores in confidence levels after viewing the powerpoint presentation.

Question 4: I have been formally educated about E FORCSE and the new law

Question 5: I feel comfortable writing and prescribing controlled substances

Question 6: I feel comfortable using E FORCSE & the NARX scores

Results Cont.

Question 8: Written prescriptions for controlled substances do not have to have a diagnosis code and/or state acute pain

Discussion

Implications for practice: Most APRNs surveyed were familiar with the requirements for the new Florida prescription law and E FORCSE.

The results from this project identify a need for formal E FORCSE education to improve APRNs’ knowledge and prescription use which will ultimately provide safe patient care.

Limitations include:
- Small sampling size due to voluntary sampling response

Recommendations include:
- Creation and implementation of a standardized E FORCSE education program.

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