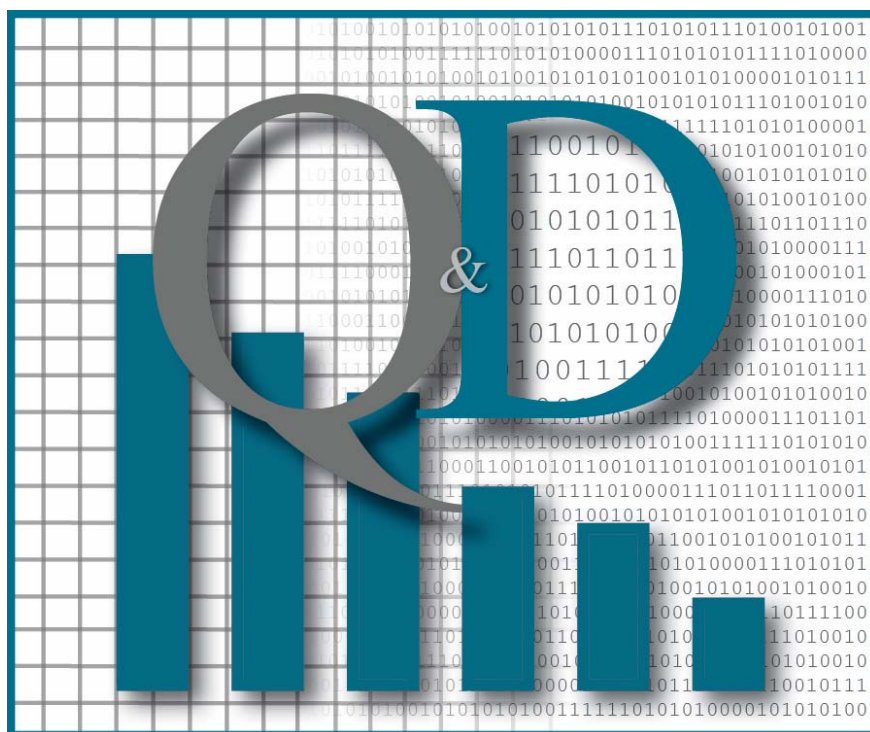




The West Virginia ALTO Project

Pre-Launch Checklists



A Product of the WVHA Quality Committee

West Virginia ALTO Project

ALTO Project Leader

Role:

Sets the direction for implementation of the WV 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.

February 2020 (5 months prior):

- Review the *2017 Colorado Opioid Safety Pilot Results Report*
- Read and understand Colorado ACEP 2017 *Prescribing & Treatment Guidelines*, focusing on the ALTO section
- Review the Using Alternatives to Opioids (ALTOs) in Hospital Emergency Departments Pre-Launch Checklists
- Work with executive team to clearly identify goals and expectations
- Present to hospital Board of Directors as requested
- Identify appropriate ALTO Project team members:
 - o ED Medical Director
 - o ED Nurse Director
 - o Pharmacy Director
 - o Quality Improvement Champion
 - o Communications and Marketing Director
 - o IT/Data Support

March 2020 (4 months prior):

- Work with team to identify scope of work and quality metrics based on executive team goals
- Set up performance improvement strategy with Quality Improvement Champion
 - o [Resource: Institute for Healthcare Improvement \(IHI\) Plan-Do-Study-Act \(PDSA\) model for change](#)
- If not already submitting data, review data capabilities with IT/Data Support

- Work with communications and marketing to develop internal and external communication plan

April 2020 (3 months prior):

- Follow up with team action items as outlined below:
 - o Ensure internal communication plan is launched
 - o Progress toward goal report to executive team

May 2020 (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

June 2020 (1 month prior):

- Ensure all necessary supplies and equipment are ready and available
- Work with organization and/or system IT/Data Support to finalize any changes to reports
- Ensure all training is complete

June 2020 (1 week prior):

- Hold final planning meeting
 - Check for and remove remaining barriers
 - Attend final quality improvement readiness meetings
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West Virginia ALTO Project

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.

March 2020 (4 months prior):

- Read and understand Colorado ACEP *2017 Prescribing & Treatment Guidelines*, focusing on the ALTO section
- Work with other team members to coordinate roles and responsibilities
- Present implementation plan at Medical Executive Committee
- Develop ED clinician implementation plan
- Begin communication with the ED clinicians and building support for the ALTO Project

April 2020 (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

May 2020 (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

June 2020 (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
- Test ALTO process; test locum tenens process

June 2020 (1 week prior):

- Attend final planning meeting
 - Check for and remove remaining barriers
 - Attend final quality improvement readiness meeting
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West Virginia ALTO Project

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.

March 2020 (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

April 2020 (3 months prior):

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

May 2020 (2 months prior):

- Work with ED medical director as directed to assist in provider communication
- Assist with developing locum tenens provider education process

June 2020 (1 month prior):

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

June 2020 (1 week prior):

- Attend final planning meeting
 - Check for and remove remaining barriers
 - Attend final quality improvement readiness meeting
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West Virginia ALTO Project

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 nurse education, including patient and family engagement. Together with clinician leadership, ensures ongoing hospital-wide communication. Responsible for educating float pool ED staff. Responsible for checking data reports prior to submission.

March 2020 (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 ALTO Project

April 2020 (3 months prior):

- Work with ED providers and pharmacy and therapeutics committee (P&T) to change high-risk policies to meet the recommended 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

May 2020 (2 months prior):

- Educate ED nursing staff on ALTO medications:
 - o Administration
 - o Side effects
- Review baseline data
- Listen to challenges and remove barriers
- Review and coach staff on patient satisfaction and communication skills
- Begin purposeful leadership rounds outside ED to educate hospital staff on intent of ED changes; work with unit directors and managers

June 2020 (1 month prior):

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

June 2020 (1 week prior):

- Attend final planning meeting
 - Check for and remove remaining barriers
 - Attend final quality improvement readiness meeting
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West Virginia ALTO Project

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 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.

March 2020 (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 Nurse Director

April 2020 (3 months prior):

- Attend in-person nursing education
- Utilize online nurse education resources
- Assist with communication and nurse training
- Talk with ED providers to develop team processes and appropriate patient/family communication strategies

May 2020 (2 months prior):

- Work with ED nursing director to assist in nurse and patient/family communication
- Assist with developing float pool/traveler education process

June 2020 (1 month prior):

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

June 2020 (1 week prior):

- Attend final planning meeting
 - Check for and remove remaining barriers
 - Attend final quality improvement readiness meeting
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West Virginia ALTO Project

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.

March 2020 (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”

April 2020 (3 months prior):

- Collaborate with organization and/or system IT/Data Support 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.

May 2020 (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

June 2020 (1 month prior):

- Test process, tools and order sets
- Ensure all necessary supplies and equipment are ready and available
- Work with organization and/or system IT champion and data champion to test reports
- Ensure smart pumps are updated and working

June 2020 (2 weeks prior):

- Ensure nurse education is complete
- Ensure provider questions are answered
- Ensure stocking is complete

June 2020 (1 week prior):

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

West Virginia ALTO Project

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.

March 2020 (4 months prior):

- Read and understand Colorado ACEP *2017 Prescribing & Treatment Guidelines*, focusing on the ALTO section
- Work with project leader 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 begin collection of baseline data
- Work with ALTO team members to ensure all high-risk medication policies meet regulatory compliance

April 2020 (3 months prior):

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

May 2020 (2 months prior):

- Continue launch prep
- Work with IT/Data Support to identify how quality metrics will be collected

June 2020 (1 month prior):

- Hold quality improvement pre-launch meeting
- Ensure all process and quality improvement tools are ready for launch
- Utilize quality improvement huddles

June 2020 (2 weeks prior):

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

June 2020 (1 week prior):

- Attend final planning meeting
 - Check for and remove remaining barriers
 - Host final quality improvement readiness meeting
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West Virginia ALTO Project

Communications and Marketing Director

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

Role:

Establishes an effective system and process for the design, implementation and sustainment for ongoing, effective communication and marketing plan 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.

March 2020 (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 communication plan

April 2020 (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

May 2020 (2 months prior):

- Continue consistent and positive messages for all associates

June 2020 (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”

June 2020 (1 week prior):

- Attend final planning meeting
 - Check for and remove remaining barriers
 - Attend final quality improvement readiness meeting
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West Virginia ALTO Project

IT/Data 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.

March 2020 (4 months prior):

- Read and understand Colorado ACEP 2017 Prescribing & Treatment Guidelines, focusing on the ALTO section
- Begin work on creating ALTO order set
- Work with project leader and quality champion to understand the scope of project and specific role and responsibilities
- Identify data report writing point contact (if person other than IT/Data Support)
- If not already submitting data, review data capabilities with ALTO Project Leader

April 2020 (3 months prior):

- Complete first draft ED ALTO order set
- If not already submitted, submit administration and count data to WVHA

May 2020 (2 months prior):

- Obtain final approval for the ED ALTO order set
- Review baseline data and ensure all data collection fields populate correctly (e.g., dates, medications, doses, dosing units, etc.)

June 2020 (1 month prior):

- Work with IT, ED Nurse Director, and ED Medical Director to finalize any changes to reports
- Attend data software report training session if applicable

June 2020 (1 week prior):

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