

**Purpose:** To provide instructions on how to complete the Opioid Stewardship Hospital Self Assessment Tool (OSSAT) and undertake a gap analysis

## Undertaking a gap analysis using OSSAT

## <u>Benefits</u>

Provides a maturity assessment to help with continuing to build an Opioid Stewardship (OS) Program your hospital/s by:

- Undertaking a gap analysis
- Using the results to identify priority areas and developing a local strategy
- Identifying the resource requirements
- Allowing for inter hospital collaboration

## **Background**

There has been substantial Australian research into hospital-based strategies in response to the increased awareness of opioid-related safety risks and escalating opioid prescription. Despite this, it seems that processes in place across hospitals in Australia are highly variable and often target only isolated areas without a coordinated approach.

At present, there is no clear prescriptive method for Australian hospital managers and clinicians to review, reflect and self-assess their hospital's action and improvement activities supporting the quality and safe use of opioids. This makes it difficult to consider, prioritise and plan strategies to achieve the most significant improvements in opioid use, safety and pain management within hospital settings. Therefore, we aimed to develop a framework and a set of self-reflective questions to facilitate the implementation, improvement and review of OS.

We developed a tool with broad applicability in collaboration with a diverse group of experts as the issues of pain and safe opioid use appear in all areas of clinical practice. The OSSAT will provide a starting point for considering OS strategies in Australian Hospitals and a platform from which to develop frameworks which are more specific to unique clinical areas within hospitals. Your participation in this pilot will provide information on generalisability of this tool across Australian settings.



## The Self Assessment Tool

The OSSAT consists of 27 criteria across 7 constructs, which aim to ensure 'adequate analgesia' is achieved using the most appropriate pharmacological and non-pharmacological methods ensuring holistic pain management with minimal harm to the patient and community. This self-assessment was mainly developed to assist hospitals in the prioritising of their OS related improvement activities.

## The pilot

The de-identified aggregated results of this assessment will be used for research and educational purposes.

## **How to Use OSSAT**

#### The Team

**Establish** a multidisciplinary team to complete the self-assessment.

You will need to *identify* individuals for the team / meetings with organisational knowledge of pain management and opioid stewardship e.g. Director of Pharmacy, Medication Safety Officer, Lead for Acute Pain services or representation from groups such as Medicine Committee, Medication Safety Committee or Opioid Stewardship Committee.

**Appoint** a member of your team to coordinate the self-assessment. Based on our experience we anticipate that it will take 2 team meetings of approximately 1 hour each to complete this self-assessment.

#### Completing the survey

Complete the demographic Information

# Construct 1-7:

Indicate using the scoring system in the columns in the far-right hand side the degree to which each criterion has been implemented in your healthcare setting (see Figure 1).

- Category 1 Considered, but not implemented indicate *which* areas have been considered
- Category 2 Partially implemented in some or all areas or across some or all disciplines if some areas/disciplines indicate which areas



**Category 3** Fully implemented in some areas or disciplines – indicate *which* areas/disciplines

Category 4 Fully implemented across the facility



Figure 1

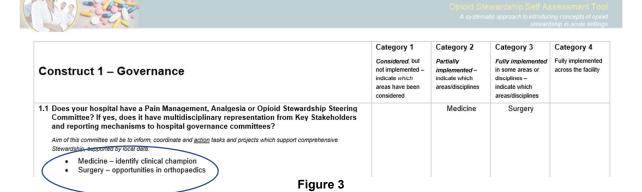
You might find that some items are well integrated in certain clinical areas e.g. surgery but less well in others e.g. medicine. Please specify in the table (see Figure 2).



If there is uncertainty within your team regarding an assessment, please verify with relevant clinicians.

In addition to the scoring system include notes that will assist in developing your customised plan for improvement e.g. clinical areas of interest, challenges, special patient populations (see Figure 3).





Use the *Special considerations or comments relevant to local context* section to note additional criteria, plans for follow-up implementation (see Figure 4).

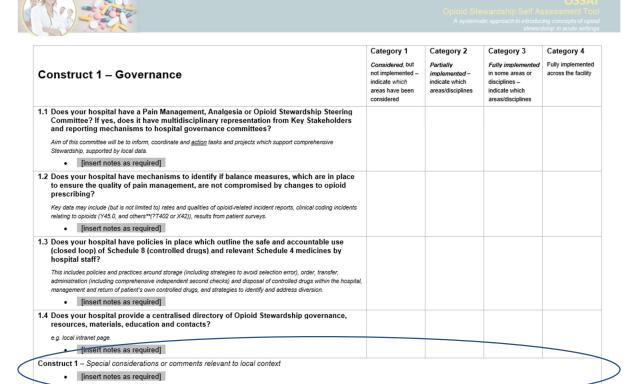


Figure 4



## **Questions**

If there is ambiguity in the interpretation of some questions, please don't hesitate to contact the project lead for clarification (details below).

## <u>Feedback</u>

Please don't hesitate to provide feedback to the project lead; you may wish to see additional questions or have feedback on the format of the survey. This information will be considered for developing future iterations of the survey or where relevant incorporated into a *Frequently Asked Questions* section.

# On completion of the survey

Please email the finalised survey to Champika.pattullo@health.qld.gov.au

You will be contacted after all the pilot sites have returned their completed surveys; however, a meeting can be organised at a time of your choosing if you wish to discuss findings from your facility.

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