



GNYHA NYC ED MAT Quality Collaborative Assessment

As part of the New York City Emergency Department (ED) Medication-Assisted Treatment (MAT) Quality Collaborative, GNYHA requests that staff from your hospital complete this assessment to help establish a baseline for current hospital practices as well as inform future collaborative programming. Please coordinate with staff across your ED and hospital to answer the assessment questions at the individual hospital level. GNYHA requests your hospital complete and submit the assessment through the following link, <https://www.surveymonkey.com/r/NYCEDMAT>, by **Friday, November 6**.

If you have any questions regarding the assessment, please contact [Jared Bosk](#) and [Courtney Zyla](#).

Contact Information

Please enter the following:

Name: _____

Title: _____

Email: _____

Phone: _____

Q0 Please enter your hospital:



Section 1: ED Capacity to Prescribe Buprenorphine

Q1 Does your Emergency Department (ED) currently have any prescribers who are DATA-2000 waived?

- Yes
- No
- Not sure

[IF NO OR NOT SURE, SKIP TO Q1.2]

Q1.1 Please select what best represents your hospital’s waived prescribers’ availability both in-person and by phone.

	<i>Few shifts</i>	<i>Some shifts</i>	<i>Most shifts</i>	<i>All shifts</i>
In person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
By phone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q1.2 Has your ED done any of the following to increase the number of waived prescribers? Please select all that apply.

- Created a campaign in your ED to encourage prescribers to get waived
- Tracked and monitored number of waived ED prescribers
- Held a waiver training onsite
- Coordinated an offsite waiver training that your prescribers could attend
- Provided info to your prescribers on how they could complete waiver training independently
- Compensated prescribers for the time it took to complete their waiver training
- Other, please specify: _____
- My ED has not done anything to increase the number of waived prescribers



Section Two: Identifying Patients for Buprenorphine Induction in the ED

Q2 What best describes how your ED screens patients for Substance Use Disorders (SUD)?

- We use a standardized screening tool (e.g., ASSIST, AUDIT, DAST)
- We use a homegrown screening tool
- We do not screen for SUD
- Other, please specify: _____

[IF “We do not screen for SUD,” SKIP TO Q2.3]

Q2.1 What best describes the screening tools your ED uses?

- Screening tools ask specifically about opioids
- Screening tools ask about some specific substances, but not opioids specifically
- Screening tools only ask about substance use generally
- Other, please specify: _____

Q2.2 What best describes your ED’s process for screening patients for an SUD?

- All patients are screened
- Patients are screened when staff is available for screening
- Patients are screened only when there is a suspicion they may have an SUD
- Other, please specify: _____

Q2.3 How does your ED identify patients with potential Opioid Use Disorders (OUD)? Please select all that apply.

- Conduct formal screening
- Initiate informal conversation about opioid use
- Receive practitioner/Community referral
- Review Prescription Drug Monitoring Program (PDMP) database
- Review PSYCKES for previous OUD flags
- Review PSYCKES for case history
- Other, please specify: _____
- My ED does not have a process to identify patients with OUD



Q2.4 For patients identified as having OUD, with which subset(s) does your ED discuss buprenorphine? Please select all that apply.

- All patients
- Patients in withdrawal
- Patients who express interest
- Other, please specify: _____
- Buprenorphine is not discussed with patients

Q2.5 Does your ED provide any harm reduction strategies to patients with OUD? Please select all that apply.

- Providing opioid overdose prevention education to patients with OUD and patients at risk of opioid overdose
- Discharging patients with a high-risk of opioid overdose with a naloxone kit
- Discharging patients with a high-risk of opioid overdose with a naloxone prescription or referral to an overdose prevention program
- Discharging patients with a referral to a syringe access program
- Other, please specify: _____
- Our ED does not provide any harm reduction strategies to patients with OUD



Section 3: Increasing Provision of Buprenorphine in the ED

Q3 Is buprenorphine on your hospital's formulary?

Yes

No

Q3.1 Does your ED have a protocol in place to provide patients with OUD with buprenorphine?

Yes

No

[IF NO, SKIP TO Q4]

Q3.2 Who has been trained on the buprenorphine protocol? Please select all that apply.

- All prescribers
- Prescribers with their DATA-2000 waiver only
- Nurses
- Social workers
- Clerks
- Discharge planners
- Other, please specify: _____
- There has been no training on the buprenorphine protocol

Q3.3 Which of the following are included in your ED's buprenorphine protocol? Please select all that apply.

- Induction in the ED for patients who are eligible
- Ability for interested patient to spend time in observation until they are eligible for induction
- Process to prescribe buprenorphine to patients for home induction
- Provision of buprenorphine "home pack" to allow for home induction
- Process to prescribe buprenorphine to patients who were induced in the ED
- Process to induce patients who came into the ED because of an opioid overdose or overdose reversal
- Other, please specify: _____
- None of the above



Q3.4 How does ED staff access your ED's buprenorphine protocol? Please select all that apply.

- The protocol is available within our EMR
- Protocol pocket guides
- The protocol is available at ED stations
- Other, please specify: _____

Q3.5 What best describes how your ED determines if a patient is eligible for buprenorphine induction?

- Complete the COWS and use formal cutoff score
- Complete the COWS but also have conversation with patient to determine if they are in withdrawal
- Have conversation with patient to determine if they are in withdrawal
- Other, please specify: _____

[IF COWS IS NOT USED, SKIP TO Q3.7]

Q3.6 Please type in the minimum COWS score required to make a patient eligible for buprenorphine induction.

|____|

Q3.7 How are patients made aware of your ED's ability to provide buprenorphine? Please select all that apply.

- Signs in the waiting area and rooms mention availability of buprenorphine
- Signs in the waiting area and rooms encourage patients to discuss treatment options for opioid use
- Pamphlets provided to patients to make them aware of buprenorphine availability
- Information provided (formal and informal) to community-based providers
- Other, please specify: _____
- ED does not proactively make patients aware of availability of buprenorphine



Q3.8 Which of the following additional staffing resources are available in your ED to work with patients with OUD? Please select all that apply.

- Certified Recovery Peer Advocate (CRPA)
- Credentialed Alcohol and Substance Abuse Counselor (CASAC)/Recovery Coaches
- Social Workers
- Care Coordinators/Care Navigators
- Mental Health Counselors
- Addiction Medicine Specialist Consult
- Other, please specify: _____
- My ED does not have any of these additional staffing resources



Section 4: Improving Connections with Community OUD Providers

Q4 How frequently do the following occur for patients seen in your ED who have been identified as having OUD?

	Always	Most of the time	Sometimes	Rarely	Never
Patient is discharged with appointment scheduled with community provider					
Discharge planners have discussion with patient about different referral options					
Discharge planners hand out written list of referral options					
Patients are seen by a community provider within a day or two of their discharge					
Community providers provide information back to ED on whether patient has shown up to appointment					
Community providers provide information back to ED on whether patient remains in treatment					

Q4.1 Does your hospital have a preferred list of community SUD providers?

Yes

No

[IF NO, SKIP TO Q5]

Q4.2 How do you evaluate these community SUD providers? Please select all that apply.

- Scheduling availability
- Hours of operation
- Availability of needed services
- Proximity to hospital
- Shared prescribers
- Quality measures
- Other, please specify: _____
- Our hospital does not evaluate our community SUD providers



Section 5: Training and Data

Q5 In the last 12 months, has your ED conducted any training on Substance Use Disorder?

Yes

No

[IF NO TRAINING, SKIP TO Q5.4]

Q5.1 Which of the following staff types received training on SUD? Please select all that apply.

All prescribers

Prescribers with their DATA-2000 waiver only

Nurses

Social workers

Clerks

Discharge planners

Other, please specify: _____

Q5.2 What topics were included in the training? Please select all that apply.

Information on different types of Substance Use Disorder

Focus specifically on Opioid Use Disorder

Information on Medications for Addiction Treatment

Stigma and stigmatizing language

Data on prevalence of Substance Use Disorders

Data on mortality associated with Substance Use Disorders

Information on cycle and course of Substance Use Disorders

Other, please specify: _____

Q5.3 Who conducted the training?

Hospital staff

Public health department

Community provider

Outside training group

Other, please specify: _____



Q5.4 Does your hospital currently collect data related to OUD?

- Yes
- No
- Not sure

[IF NO, SKIP TO Q6]

Q5.5 What type of data do you collect? Please select all that apply.

- Screenings
- Protocols Initiated
- ED Inductions
- Home Inductions
- Community Referrals
- Other, please specify: _____

Q5.6 Is this data shared with ED front-line staff?

- Yes
- No
- Not sure

Q5.7 Do your community clinics share referred patients' data with you?

- Yes
- No
- Not sure

[IF NO OR NOT SURE, SKIP TO Q6]

Q5.8 What type of data do the clinics share? Please select all that apply.

- Appointments filled
- MAT refills
- Follow-up appointments filled
- Success stories
- Other, please specify: _____

[IF SUCCESS STORIES ARE NOT SHARED, SKIP TO Q6]



Q5.9 Are these community clinic success stories shared with ED staff?

Yes

No

Not sure



Section 6: Barriers and Challenges to Providing Buprenorphine in the ED

Q6 Please rank the following barriers from most challenging to least challenging regarding their impact on providing buprenorphine in your ED. (1 = most challenging, 6 = least challenging)

- _____ Prescriber buy-in
- _____ Lack of waived prescribers
- _____ Identifying eligible OUD patients
- _____ Stigma surrounding opioid addiction
- _____ Time and resources to complete induction in ED
- _____ Availability of community OUD providers to refer patients to

Q6.1 Has your ED identified any of the following champions to lead prescribing buprenorphine in your ED to patients with OUD? Please select all that apply.

- Executive champion
- Clinical champion
- Front-line staff champion
- Peer champion
- Community partner champion

Q6.2 Please provide any additional information that you think GNYHA should have to best support your hospital with your ED MAT efforts.
