

Nurse Practitioners (NPs), Controlled Substances and E FORCSE

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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 (DPMP), E FORCSE and the new law requirements regarding writing controlled substances prescriptions.

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

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

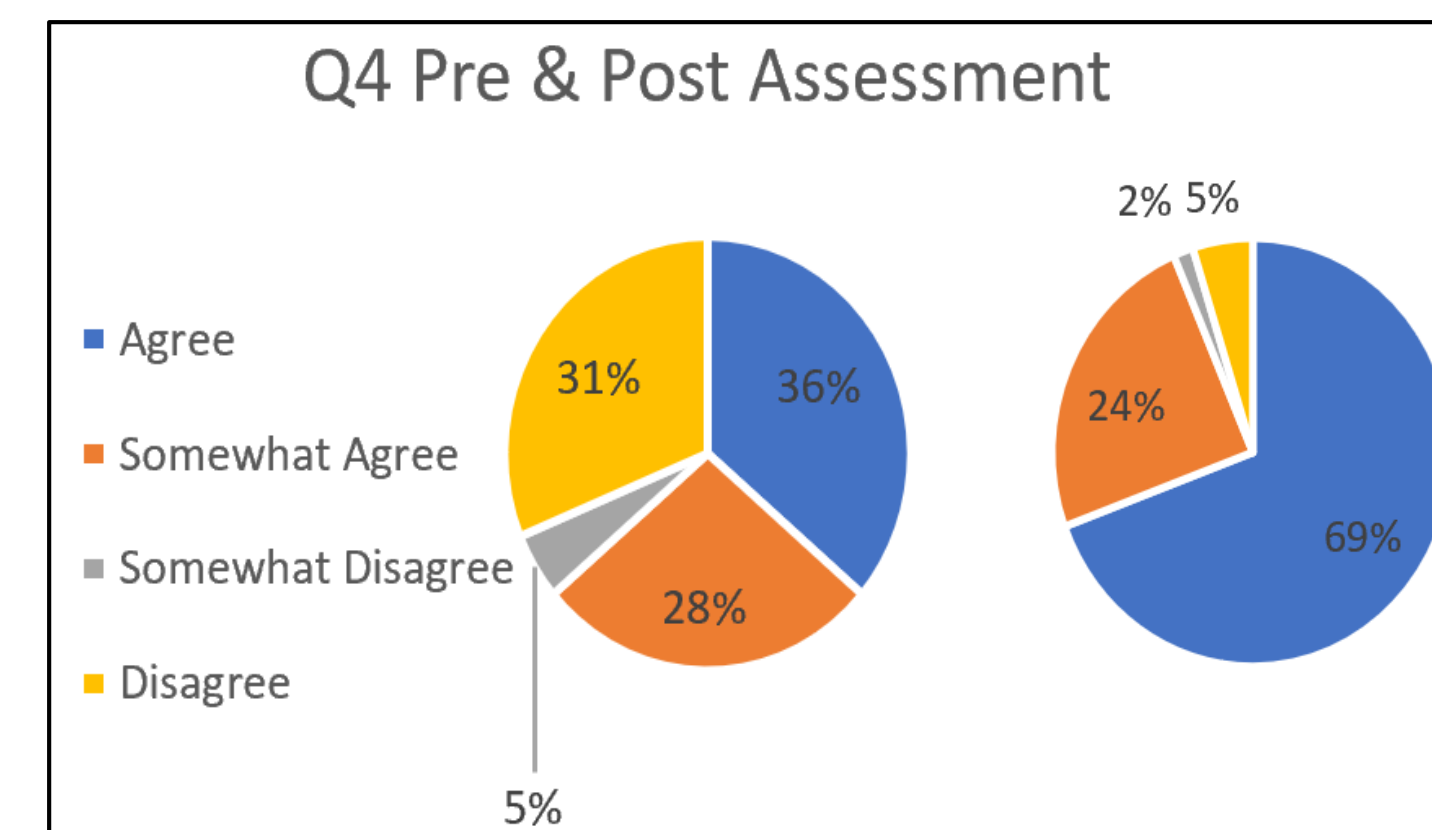
References

- Available upon request.

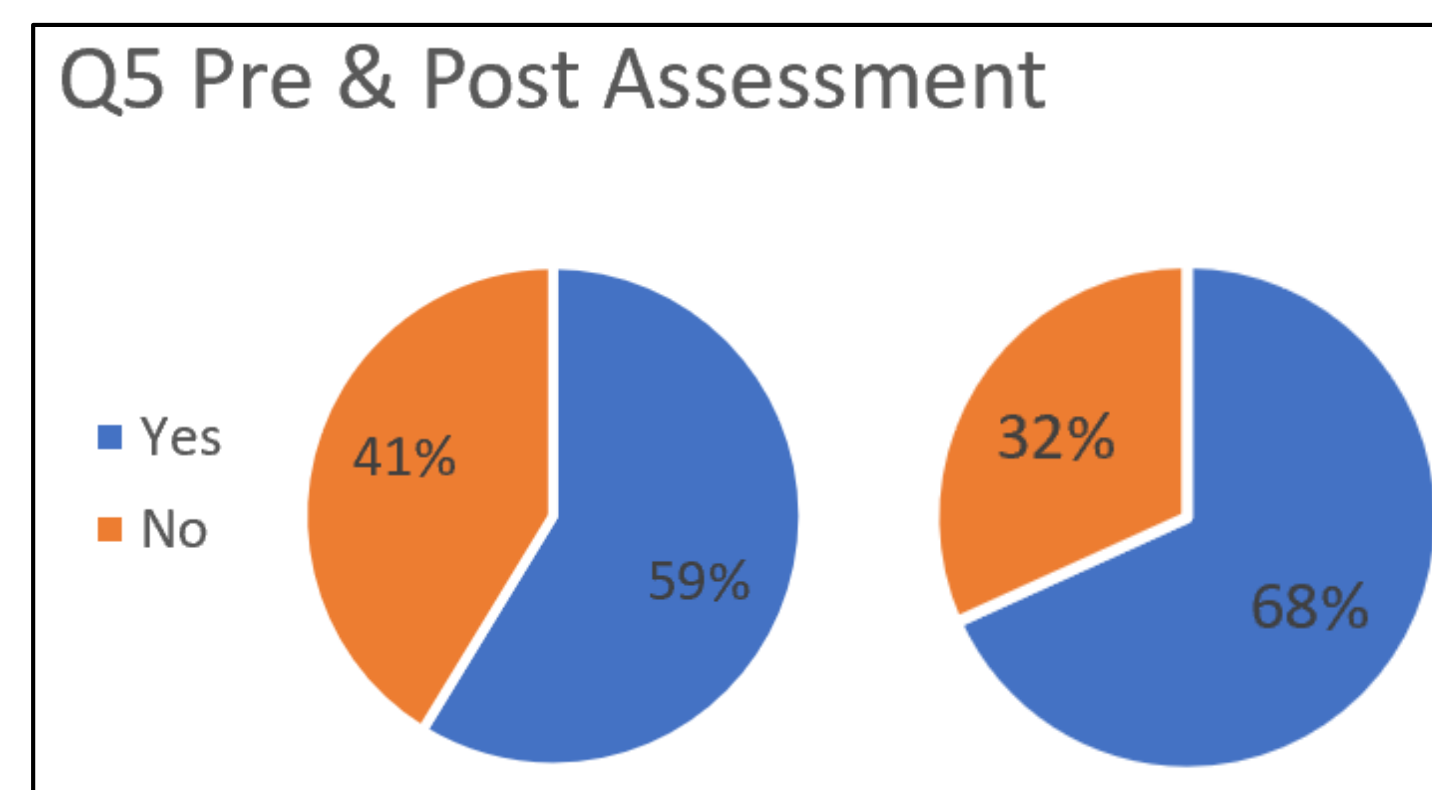
Results

- 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.

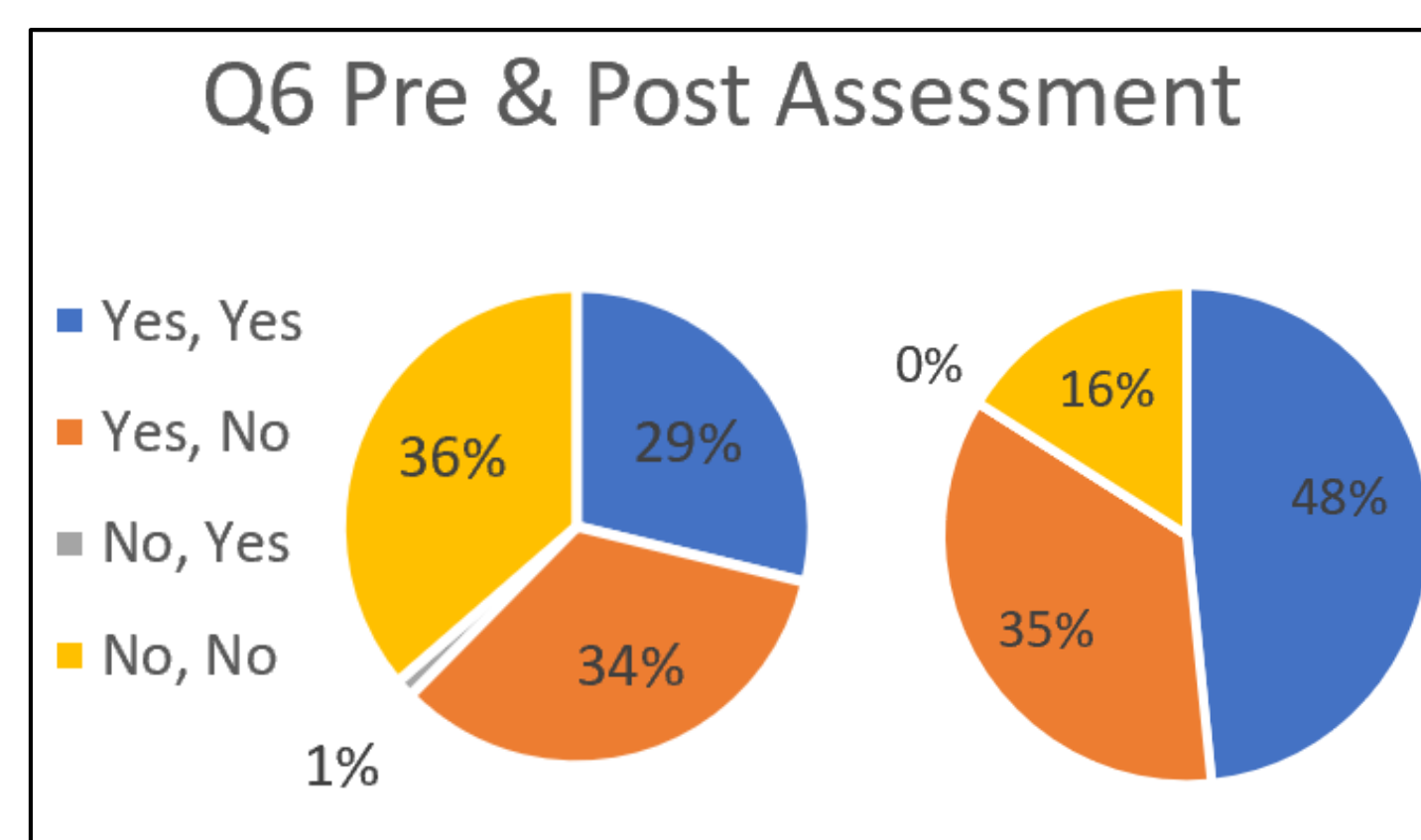
Question 4: I have been formally educated about E FORCSE and the new law



Question 5: I feel comfortable writing and prescribing controlled substances

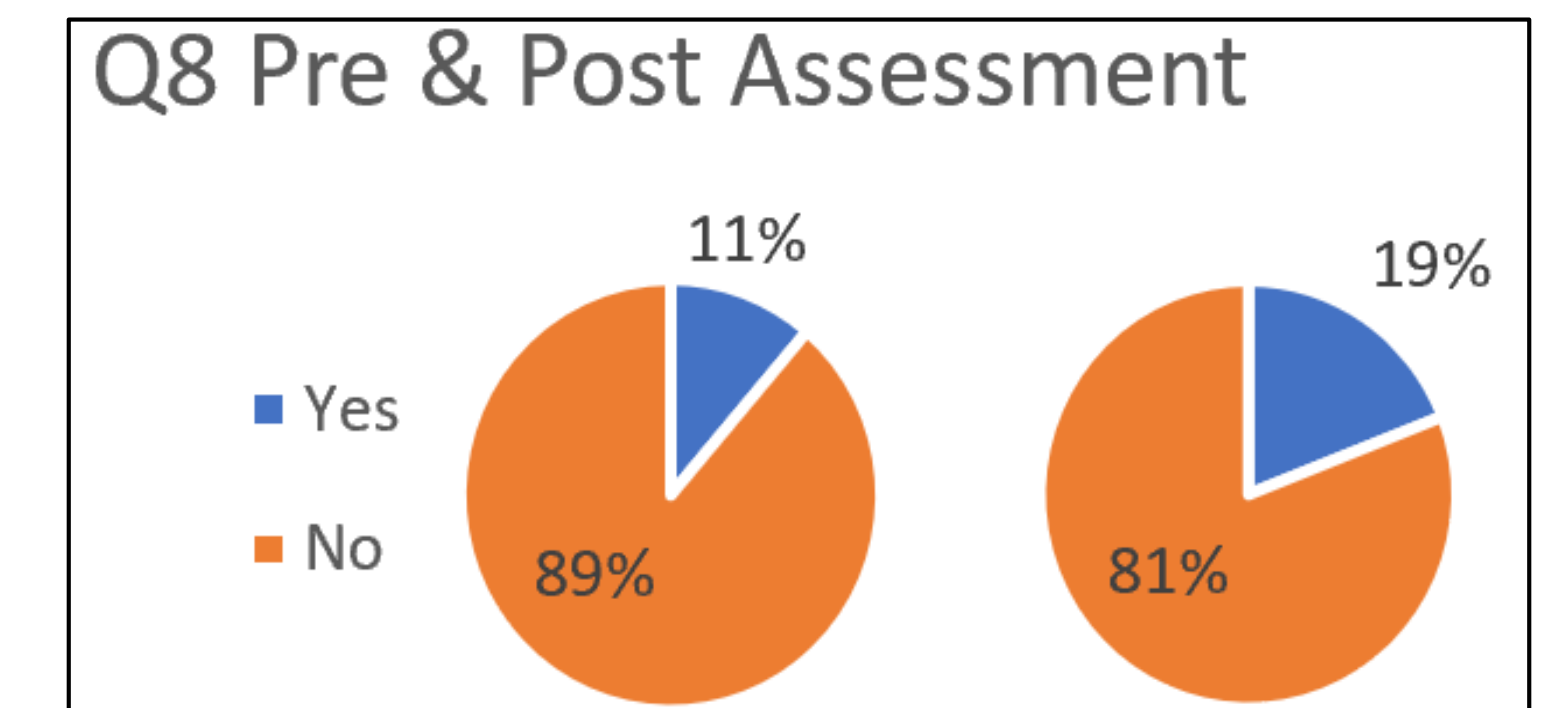


Question 6: I feel comfortable using E FORCSE & the NARX scores



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.

Acknowledgements

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