Increasing Access to Care for Pregnant Women with Opioid Use Disorder: A Quality Improvement Project Roshunya Shavon Clark, DNP, APRN, AGNP-C Project Faculty: Jose Pares-Avila, DNP, APRN, ANP-C

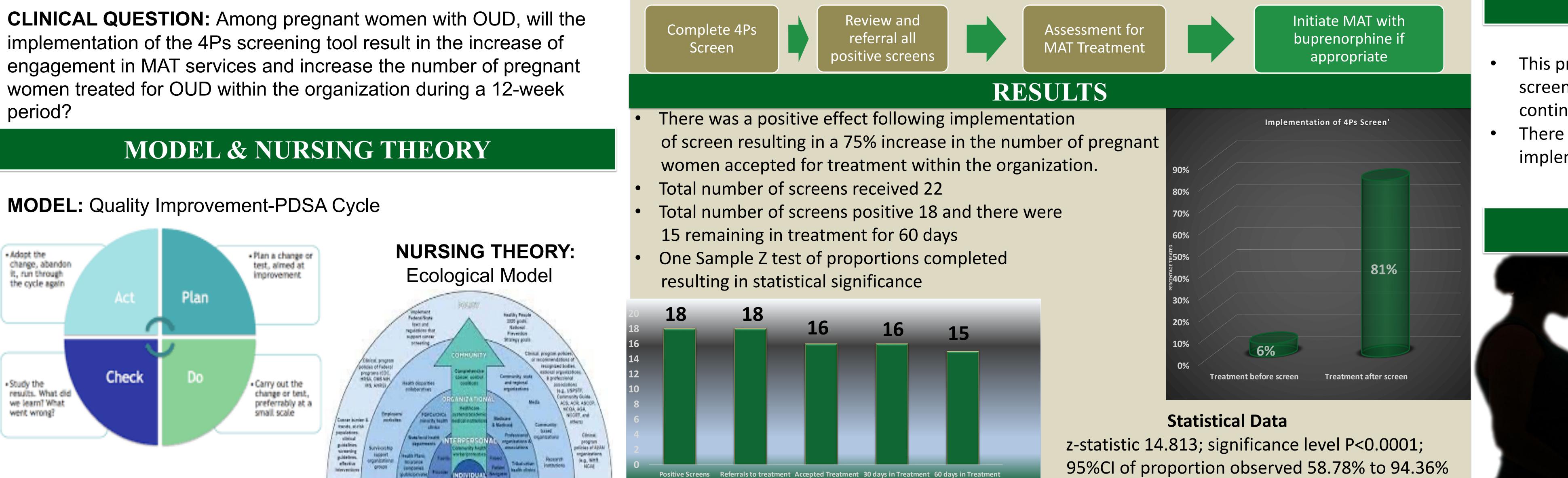
PROBLEM STATEMENT

- Addiction to opioids is now more prevalent in pregnant women as evidenced by the parallel rise with pregnant women more than quadrupling in the past decade.
- Research has shown the positive effects of the use of medication assisted treatment (MAT) for individuals with opioid use disorder, however due to the complicated nature of pregnancy many providers, organizations, and government assistance programs have omitted, restricted, or provided minimal options for women who are pregnant.
- Evidence is available that substantiates the need for global awareness to increase efforts in the treatment of pregnant women with opioid use disorder (OUD) as this vulnerable population lacks equal access to opioid abuse treatment across the nation (Hand et al, 2017).

PROJECT PURPOSE

PURPOSE: To implement an evidence-based screening tool that would increase referrals and treatment to MAT program in an organization that excludes pregnant women with OUD

AIM: To analyze the effectiveness of implementing a screening tool for referral and treatment of pregnant women with OUD



Implementation of the 4Ps screening tool increases access to treatment for pregnant women with OUD

METHODS

Subjects and Sampling

Consecutive sampling: all persons seeking admission to any program within organization who tests positive for pregnancy Inclusion criteria: All pregnant women 18 years of age or older with a documented Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition scope of care of the organization as determined by the medical director.

Setting

A substance abuse and behavioral health treatment facility where participants are admitted to inpatient residential, detox, or outpatient MAT clinic. Instruments/Tools

The 4Ps screening tool administered to all women testing positive for pregnancy

Intervention/ Data Collection/Progress

- Screening tool implemented in admissions process in all departments.
- All completed screens reviewed
- Immediate referral for MAT assessment made for positive screens. • Immediate referral for evaluation for buprenorphine induction for all referrals if active opiate use present
- Number of screens completed and number of referrals to treatment recorded for a period of 12 weeks and was held from late January to mid April 2022

- new or previously documented diagnoses code of F11.2 for OUD according to **Exclusion criteria:** Pregnant women screened with health conditions that exceed the

FINDINGS

- Based on results on increase in treatment after implementation of screening there is a positive effect of screening on referrals to treatment.
- Increasing screening presents an opportunity to increase referrals to treatment in pregnant women.

LIMITATIONS:

- Small sample size
- Staff turnover and several changes in administration and management

Screening tools for pregnant women with OUD are essential and should be implemented at departments that may encounter this population. Screening is vital to treatment and leads to treatment 60 days or more of treatment for OUD.

- This project can be sustained through the continued use of the 4Ps screening tool for pregnant women with OUD. Continued use will continue to increase access to care for pregnant women.
- There are minimal supplies and cost to implement this screen and implementation requires minimal training of entry level staff.

DISCUSSION

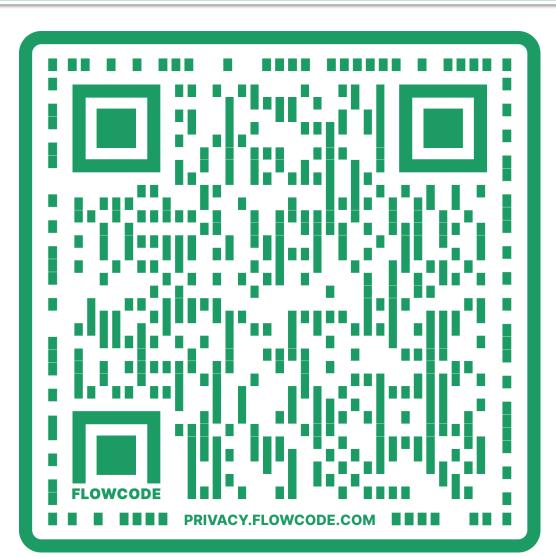
IMPLICATIONS FOR PRACTICE

• The 4Ps screening tool is useful in providing a pathway to treatment for pregnant women with OUD and serves as a gateway to the process of referral, assessment, and initiation of treatment.

SUSTAINABILITY

REFERENCES

Please scan code for complete reference list





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