Background

The **Colorado MOMs Initiative** will create monthly reports for each participating hospital, as well as aggregated reports for funders of donated naloxone and the public to track progress on naloxone dispensing. These reports will help the administrators of the **Colorado MOMs Initiative** provide targeted and informed suggestions for improvement, participating hospitals track their own progress, and funders and supporters understand the impact the project is having.

This submission guide outlines the basic required data elements as well as optional elements that hospitals may submit to generate more detailed insights

Data Sources

The primary location for data should be the hospital's electronic medical record system (EMR). This is the preferred reference. If for any reason the data described below is not available in the EMR, the secondary source would be the automated dispensing system (ADS) such as Pyxis or Omnicell. Some hospitals may wish to pull data from both sources and use the ADS data to audit and confirm the EMR data.

Required Data

To keep the reporting burden as light as possible, there is only one required data element for submission as part of participating in the **Colorado MOMs Initiative**: the number of naloxone kits dispensed per month. If naloxone product has been donated by the **Colorado MOMs Initiative**, it is asked that the hospital is able to break it down by donated vs other sources. This data element is required by funders, and submitting this data is a condition of receiving donated naloxone.

The active data collection period will run from January 2023 through September 2023. To test each hospital's data process as well as provide baseline data for comparison, we are also asking that hospitals begin by submitting a single summary number of total naloxone kits dispensed from January through December 2022. This number may be zero if your facility has not yet begun dispensing. We still ask that you use the baseline data pull to review your data process; we will monitor your submissions once your facility begins dispensing to ensure we receive accurate data. If you are joining the program after January 2023, please take the time to catch up with data submission for past months.

Inclusion Factors

Each naloxone kit dispensed should be counted if it was distributed to a hospital patient to take home from the following care settings:

Labor and delivery unit,

Obstetrics (OB) or family care unit,

OB emergency department or observation unit, and

Neonatal intensive care unit.

Exclusion Factors

The number of naloxone kits dispensed should NOT include:

Any naloxone administered in the hospital setting.

A naloxone kit that was dispensed and then rejected by the patient or otherwise returned.

Prescriptions for future naloxone kits.

Naloxone kits dispensed from an onsite retail pharmacy to the general outpatient population.

Submission

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Hospitals can report the total count of all dispensed kits as a single number each month, once each quarter. These numbers will be entered into the data collection form once a quarter within two weeks of the close of each quarter. The data submission portal for take-home naloxone kits dispensed from your obstetrical units is the same for that used for ED data. If you are not already submitting data for take-home naloxone kits dispensed from your ED, you will need to complete a form to request access to the submission portal here: https://forms.office.com/r/pcAMfurbK8

Timeline

Data submissions are due two weeks after the close of each quarter. Please make sure to submit your data in a timely manner so we can compile the data for reports back to your hospital.

Optional Data Elements

If hospitals would like more detailed insight into their progress and whether they are reaching all the patients they should, they can submit optional data on the patient populations each quarter. These are straight counts of patient visits each month at a participating hospital who fall into the primary target populations. Note that the denominator count here has been simplified from the dispensing guidelines to make data abstraction as straightforward as possible.

Inclusion Factors .

The patient count should include all obstetric visits who have at least one of the ICD10 codes for opioid use, abuse, or dependency as listed in Appendix A.

Exclusion Factors

Patients under the age of 18

Submission

Hospitals can report the total count of all identified "at risk" patient visits as a single number each month. These numbers will be entered into the data collection portal once a quarter within two weeks of the close of each quarter.