An Organizational Readiness Assessment and Patient Survey for Adoption of an Opioid De-escalation Protocol in Curative Oncology Patients

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Since 2012, statistics illustrate an explosion in the number of Americans admittedly misusing prescription opioids which increase the risk of long-term adverse effects. By 2016, individuals admitting to taking opioids for nonmedical reasons exceeded eleven million and 1.9 million of these individuals met the mental health guidelines for opioid abuse. Oncology patients represent a target population with an unmet need for opioid reduction. Goals for de-escalation or tapering opioids for non-cancer pain have gained increasing attention across healthcare. Evidence-based opioid de-escalation guidelines specific for curative oncology patients are lacking in the literature. The aim of this DNP project was to determine organizational readiness for an opioid de-escalation protocol in curative oncology patients and establish patients’ baseline understanding of opioid abuse and potential de-escalation protocols. The findings indicated the majority of oncology clinic providers are somewhat confident in individual and organizational change commitment and change efficacy as demonstrated by the Organizational Readiness for Implementing Change assessment tool. Patient surveys demonstrated a significant need for education regarding opioid de-escalation and provides direction for future research.

**Keywords:** opioid, de-escalation, survey, organization, readiness assessment