For more than a decade, Cal Hospital Compare (CHC) has been providing Californians with objective hospital performance ratings. CHC is a non-profit organization that is governed by a multi-stakeholder board, with representatives from hospitals, purchasers, consumer groups, and health plans. CHC uses an open and collaborative process to aggregate multiple sources of public data, and to establish relevant measures and scoring.

To address California’s opioid epidemic and accelerate hospital progress to reduce opioid related deaths CHC convened a multi-stakeholder work group to identify how to measure opioid safety in the hospital setting for the purpose of supporting continued quality improvement and recognize hospitals for their incredible work. CHC, in partnership with the multi-stakeholder work group, identified the following 4 elements as critical to opioid safety: prevent new opioid starts, identify and treat opioid use disorder, overdose prevention, and develop an overall culture of opioid safety. This work resulted in the Opioid Safe Hospital Self-Assessment to both measure opioid safety across hospitals and provide a roadmap for change. The assessment is rooted in evidence-based guidelines and practices, The Joint Commission’s pain management standards, and the real-life expertise of our work group members. The Opioid Safe Hospital Self-Assessment outlines key milestones to achieving opioid safety but how hospitals get there is up to them. We encourage hospitals to use this self-assessment as a source of inspiration to design and implement initiatives to reduce opioid related deaths in a way that best fits the needs of any particular hospital and the community they serve. CHC will identify Opioid Safe Hospitals using a relative threshold and the list of Opioid Safe Hospitals will be publicly reported as well as a multi-stakeholder major public communications effort.

This Opioid Safe Hospital Self-Assessment measures process and structural measures in year 1. As hospitals progress year over year CHC will introduce quantitative performance measures from 2019-2021. So that we can align future iterations of this assessment tool with work already ongoing, we are asking hospitals to share how they measure opioid safe activities and their current performance target. Sharing this information is entirely optional and will not be used to assess opioid safety in 2019.

Over the next 30 months, we will offer 15 peer-to-peer, interactive learning webinars to accelerate adoption and spread of effective practices throughout the hospital. The self-assessment toll, then, functions as the initial change package for hospital adoption. Likewise, we will monitor national developments in objective, quantitative measurement for a more rigorous process in subsequent years and to promote an objective evaluation of progress in the California hospital community.

CHC is fortunate to have received grant funding from the California Health Care Foundation to undertake this program.