Program Evaluation: Alprazolam and Medications for Opioid Use Disorder:
One Washington Opioid Treatment Program’s Approach to Risk Management and Patient-Centered Care
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Background: Alprazolam use is disproportionately dangerous in the context of treatment for opioid use disorder due to an increased risk of respiratory depression and death when combined with methadone or buprenorphine.

Local Problem: One Opioid Treatment Program in Washington discovered an increase of alprazolam use and its subsequent involvement in patient incidents and overdose. A policy-driven program change was initiated to reduce the negative impact of hazardous alprazolam use on patient outcomes while retaining emphasis of patient-centered care principles. There had been no evaluation of the impact of the policy since implementation in April 2019.

Purpose: Assess the impact(s) of the Alprazolam Policy on agency practices, patients, and staff.

Methods: A process and outcomes evaluation was conducted using a mixed methods design.

Intervention: The RE-AIM framework for program evaluation guided an evaluation of the development, implementation, and outcomes of the Alprazolam Policy.

Measures: Quantitative data were gathered from two six-month time spans representing periods before and after policy implementation enabling assessment of change. Additional quantitative and qualitative data were collected via a staff survey allowing for analysis of staff experience and feedback regarding policy development, implementation, and outcomes.

Results: Following the implementation of the Alprazolam Policy, there was favorable change in nearly every area targeted by the policy. Data suggest that the policy was implemented as
intended. Most staff were not involved in policy development but would not change the development or implementation process.

**Conclusion:** The Alprazolam Policy is an effective, patient-centered, and scalable intervention.