Welcome and intro

Welcome!

As part of the MDHHS Michigan Overdose Data to Action program, the Calvin University Center for Social Research is conducting an evaluation of Michigan's statewide naloxone standing order. We have partnered with Wayne State University and the Michigan Center for Clinical Systems Improvement to design this survey of pharmacists.

What is the purpose of this survey?
The purpose of this survey is to better understand what pharmacists know and think about opioids, naloxone, and Michigan's naloxone standing order.

What will I be asked to do?
You are invited to take a 10-15 minute online survey.

How will my identity be protected?
Your answers are confidential and will not be linked to you. Your identity will be protected by using assigned code numbers to track your responses. The code list will be destroyed at the conclusion of this project. You get to choose how much information about yourself you want to provide.

What are the benefits?
Your answers will inform an evaluation of Michigan's naloxone standing order and identify opportunities for improvement.

What are the risks?
Taking the survey has minimal risk.

Is my participation voluntary?
Yes, your participation is voluntary, and you may skip questions.

Whom can I contact with questions?
You can send questions about this survey to Dr. Laura Luchies, Associate Director of the Calvin University Center for Social Research, at laura.luchies@calvin.edu or 616-526-7799. You can send questions about your rights as a research subject to Calvin University's Committee for the Protection of Human Subjects in Research at irb@calvin.edu.

Do you consent to participate in this survey?

- Yes, I consent to participate
- No, I rather not participate

This survey has been adapted in part from:


Pharmacist background

You and Your Pharmacy Practice

Throughout this survey, the term “community-based pharmacy” will be used to refer to any pharmacy setting that is best described as a community, retail, or outpatient pharmacy that dispenses medications to patients in the
community. This may include, but is not limited to, hospital outpatient pharmacies and independent or chain retail pharmacies.

Are any pharmacy settings where you practice best described as a community, retail, or outpatient pharmacy that dispenses medications to patients in the community?

☐ Yes
☐ No

In what type of pharmacy setting(s) do you practice?
Select all that apply.

☐ Chain Retail Pharmacy
☐ Grocery Pharmacy
☐ Independent Pharmacy
☐ Hospital Outpatient Pharmacy
☐ Other

What is the 5-digit ZIP code of the Michigan community-based pharmacy where you practice most often?
If your response is not accepted, please make sure there are no spaces before or after the 5-digit ZIP code.

How many years have you been practicing as a licensed pharmacist?
Which of the following degrees have you completed? Select all that apply.

- BS Pharm
- Doctor of Pharmacy (Pharm.D.)

Have you completed any of the following post-graduate training? Select all that apply.

- Residency
- Fellowship
- BPS board certificate

What is your gender?

- Male
- Female
- Prefer to self-describe
- Prefer not to answer

Which of the following best describes you? Select all that apply.

- African American or Black
What is your age?

- 18-29
- 30-39
- 40-49
- 50-59
- 60-69
- 70 or older
- Prefer not to answer

**pharmacist knowledge**

**Naloxone Training and Dispensing**

In the past 5 years, have you had any specific training on naloxone?
*Select all that apply.*

- School-based training
- Workplace-based training
- Accredited Continuing Education (CE)
- Interprofessional conference
Prior to taking this survey, did you know that Michigan implemented a **naloxone standing order (SO)** to allow pharmacists to dispense naloxone to individuals without a patient-specific prescription?

- Yes, and I have reviewed the SO policy
- Yes, but I have not reviewed the SO policy
- No, I wasn’t aware of the SO

In your opinion, how important is Michigan's statewide naloxone standing order (SO)?

- Not at all important
- Slightly important
- Moderately important
- Very important
- Extremely important

Indicate whether the following statements about Michigan's statewide naloxone standing order (SO) are true or false.

Pharmacists are required to provide one-on-one naloxone administration training to people who receive naloxone through the SO.

- True
- False
Naloxone dispensed through the SO must be accompanied by a list of substance use disorder services.

Pharmacists dispensing naloxone under the SO order have liability for damages from its use in an opioid overdose.

Under the SO, individuals may request naloxone at participating pharmacies, but pharmacists may not recommend naloxone to patients.

How difficult was it for you to understand...

the SO requirements? Very Somewhat Not at all

the pharmacist’s role in dispensing naloxone under the SO? Very Somewhat Not at all

the pharmacist’s role in counseling and education of patients under the SO? Very Somewhat Not at all

Does your community-based pharmacy use any standing orders for naloxone? Select all that apply.

☐ Yes, the statewide Michigan standing order
☐ Yes, a naloxone standing order from some other prescriber
☐ No
☐ Not sure
Is there signage to communicate the availability of naloxone at your pharmacy?

- Yes
- No
- Not sure

Have you dispensed naloxone in your pharmacy?

*Select all that apply.*

- Yes, under the Michigan standing order
- Yes, under a different standing order
- Yes, under a patient-specific prescription
- No

In the **past year**, how often...

<table>
<thead>
<tr>
<th></th>
<th>About once a week or more</th>
<th>About once a month</th>
<th>Just a few times</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you recommended naloxone to a patient who is filling an opioid prescription?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Have you recommended naloxone to a patient who may be using illegal opioids?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Has a patient asked about purchasing naloxone?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Has a patient asked about getting naloxone for free?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Have you contacted a prescriber to obtain a prescription for naloxone for a patient?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
Other than through the standing order (SO), how/where can people in your community get naloxone?

knowledge, stigma, ability

Knowledge and Opinions about Naloxone

Please indicate the extent to which you agree or disagree with the following statements.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The amount of pharmacist time required to dispense naloxone and provide appropriate counseling fits into the pharmacy workflow.</td>
<td>○</td>
<td>○</td>
<td>○</td>
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<tr>
<td>When dispensing naloxone, I regularly inform the patient about what to do during an overdose.</td>
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<td>○</td>
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<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I support the provision of naloxone to individuals without a patient-specific prescription via the Michigan standing order.</td>
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</tr>
<tr>
<td>I would rather not have to care for individuals with opioid use disorder in my pharmacy practice.</td>
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<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Increasing community access to naloxone would decrease deaths from opioid overdose.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Statement</td>
<td>Strongly disagree</td>
<td>Disagree</td>
<td>Neutral</td>
<td>Agree</td>
<td>Strongly agree</td>
</tr>
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<tr>
<td>The patients served by my community pharmacy are aware of the availability of naloxone through the standing order.</td>
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<tr>
<td>The availability of naloxone enables illicit drug use.</td>
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<td>○</td>
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<tr>
<td>People who use illicit opioids take more from society than they give.</td>
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<td>○</td>
<td>○</td>
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<td>Tolerating risky or illegal behavior sends a message to the community that these behaviors are acceptable.</td>
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<td>○</td>
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<tr>
<td>Opioid overdose is a serious problem in my community.</td>
<td>○</td>
<td>○</td>
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</tr>
<tr>
<td>I can identify factors that place individuals at risk for opioid overdose.</td>
<td>○</td>
<td>○</td>
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<tr>
<td>I can recognize physical signs of an opioid overdose.</td>
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<tr>
<td>I can confidently administer naloxone in an opioid overdose situation.</td>
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<td>○</td>
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</tr>
<tr>
<td>I am confident educating individuals and their support persons about risk factors for opioid overdose.</td>
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<tr>
<td>I am confident educating individuals and their support persons about naloxone and how to administer naloxone.</td>
<td>○</td>
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</tr>
<tr>
<td>I am confident counseling individuals and their support persons about available treatment options for opioid use disorder.</td>
<td>○</td>
<td>○</td>
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<td>○</td>
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</tbody>
</table>
The pharmacy technicians I work with treat patients requesting naloxone with dignity and respect. 

Strongly disagree  Disagree  Neutral  Agree  Strongly agree

The requirement to provide educational information when dispensing naloxone ensures patients can administer naloxone safely. 

Strongly disagree  Disagree  Neutral  Agree  Strongly agree

I keep naloxone on hand in my everyday life. 

Strongly disagree  Disagree  Neutral  Agree  Strongly agree

End Block

Almost Done...

Thank you! Please click **SUBMIT** to record your answers or click **BACK** to review your answers.