

Your Collaborative Team

- Tell us who you are

We are from the WEMHT

- Team name, team members and roles

Anna is a social worker and Rachelle is a psych nurse Case Manager

- Brief description of your practice/program, your physical space, and the population you serve

We are a community team located in the West End that serves a catchment area from Yaletown, through Stanley Park to Beach Ave. We serve people with concurrent disorders and chronic mental health challenges

Aim Statement

- What are you trying to accomplish?

By July 2018, we will capture data reflecting 100% of new clients who have had, or currently have a substance use disorder, specifically opioid use disorder

- What aspect of care are you trying to improve?

Our point of changes is to improve capturing data around substance use

- Why is this important to do now?

Currently there is no consistent way to capture, retrieve or utilize information related to our client's substance use

Describe your Population of Focus

- Who are your clients?

Our clients are adults (19 and above) with predominantly an Axis 1 diagnosis. Many of our clients have a concurrent disorder, at varying stages of change.

Changes Tested

- What small tests of change have you tried?

Case Managers have documented which of their clients are receiving OAT. This information was manually retrieved via PharmaNet. Data showed that approximately 4% of our team caseload were being prescribed OAT.

- What were you measuring?

We were trying to determine how many of our clients have OUD. Accessing PharmaNet to determine who is receiving treatment was the only consistent method of retrieving data regarding OUD.

We have been working to implement a consistent practice method documenting which clients have a substance use disorder and their primary drug of choice.

- Did you implement them?

Not at this time

Lessons Learned

- Share your progress so far- what have you learned about your POF, partnerships, etc.

We do not have a consistent means of documenting substance use disorders for our population.

We do not have the means of accessing information from other teams i.e. EMR/Three Bridges

- Share any lessons learned or opportunities for improvement you encountered

Information sharing across health care providers and teams (for us Three Bridges)

- How did you address these?

We are working with the PARIS team to implement realistic changes so this information can be captured

Looking forward...

- What is next?

If we had the information, could we better support our clients in their harm reduction or recovery. I.e. Provide a referral to the RAAC?

Contact Information

- Team contact information
- WEMHT 604-687-7994