

Your Collaborative Team

- Women's and Heatley Intensive Case Management Teams
- BOOST team members: Kaillie Kangro, Team Leader; Marjory Ditmars, RN; Michelle Apps, RSW; Natasha Lineham, NP; PJ Harston, Peer Specialist
- Women's ICMT engages with women (Trans* inclusive) with moderate to severe substance use who are disconnected from health services due to experiences of marginalization and trauma
- Heatley ICMT works with people with moderate to severe substance use, and barriers accessing services such as housing and mental health.
- Both teams recently moved to the new Heatley Community Health Centre at 330 Heatley. Both teams work on an outreach basis to best connect with clients where they are at.
- The Women's ICMT is expecting to get a mobile health unit in Spring 2018

Aim Statements

1. All of ICMTs' clients are assessed for Opiate Use Disorder (OUD) and properly diagnosed (304.0)
2. 50 % of ICMTs' clients who are diagnosed with OUD are initiated on oral opiate agonist treatment (not including clients who are already receiving opiate agonist treatment). ICMT's will first focus on clients who are followed by ICMT's NP's and GP's.
3. 50 % of ICMTs' clients are retained on oral opioid agonist treatment for more than 3 months
4. All of ICMTs' clients are trained on THN and received a THN kit

Describe your Population of Focus

- Adults (18+) with moderate to severe substance use who reside in the downtown eastside. These clients benefit from an assertive outreach model
- Both teams work to bring primary care, mental health and addictions care to clients in the community (e.g., shelters, SROs, on the street, etc.)
- Heatley receives referrals from other healthcare providers, including primary and acute care services
- Women's receives referrals from identified community partners such as WISH, Downtown Eastside Women's Centre, Atira, Raincity, First United Church, etc.

Changes Tested

- In the process of implementing a “THN Blitz” on a sample group of clients
- Ran a PDSA cycle with one case manager’s caseload
 - How much time does it take to plan and implement a THN blitz ?
 - Had to ensure that all team members were trained to dispense THN kits and train clients on how to respond to an overdose
 - Had to find out if non regulated healthcare professionals (e.g., CLWs, peers) were allowed to dispense and train clients on THN under VCH policy
 - Documentation – how to track dispensing and training easily. Initially attempted to track on EMR OUD form but ran into issues
 - Creative problem solving around some clients feeling triggered about having a needle in their room and clients who have limited mobility

Lessons Learned

- Team buy-in is necessary to really be effective in delivering any services changes and changes to practice
- Having weekly BOOST meetings really helped keep us accountable to our aim statements. Having easy access to BOOST staff was helpful for problem solving and access to other BOOST-related resources
- Creativity and flexibility is really important when working with our population of focus

Looking forward...

- About to launch a PDSA cycle for participant feedback in collaboration with Raincity Housing
- Complete THN Blitz with entire ICMT caseload
- Create a process for tracking client adherence to oOAT
- Expanded scope of practice for NPs in being able to do oOAT starts
- Finalize/PDSA oOAT starts in the community workflow/make a visual

Contact Information

- Women's Intensive Case Management Team: 778-866-3827
- Heatley Intensive Case Management Team: 604-290-2335
- 330 Heatley Ave, Vancouver, BC V6A 3G3