## Kelowna OAT Clinic



## Kelowna OAT

We are a stand alone OAT and iOAT clinic serving Kelowna, West Kelowna, Lake Country and Peachland. Our clinic is co-located with Kelowna Mental Health & Substance Use. Drop in appointments are available every day.

#### **OAT Hours:**

Mon-Fri: 8:30AM – 8:00 PM Saturday: 8:30 AM – 4:00 PM **iOAT Hours:** 

8:00AM – 8:00PM every day





### Aims

- Survive working in a high volume clinic and improve patient experience to ensure that new patients are seen as quickly as possible, don't have to wait long, and have support with all aspects of treatment.



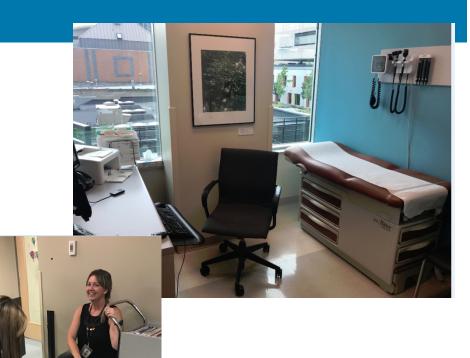
BRITISH COLUMBIA CENTRE for EXCELLENCE in HIV/AIDS



# **Clinic Team**

- Includes:
  - 1 Nurse Practitioner
  - 8 physicians
  - 2 Social Workers
  - 2 Nurses
  - A small army of MOAs



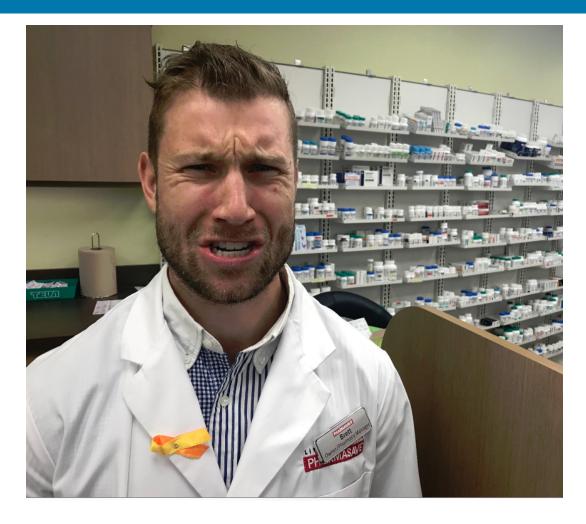






# **Special Thanks**

-Brett and his team from Pharmasave (located in same building)

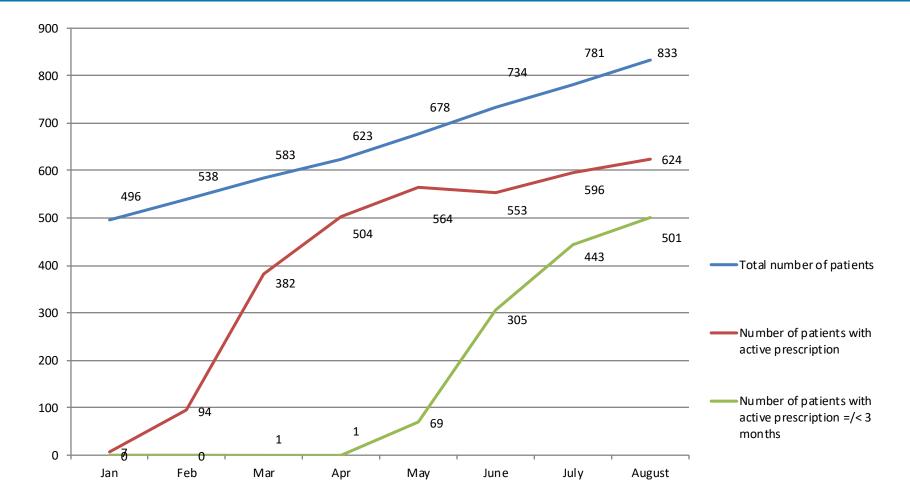




BRITISH COLUMBIA CENTRE for EXCELLENCE in HIV/AIDS



#### **BOOST** measures





BRITISH COLUMBIA CENTRE for EXCELLENCE in HIV/AIDS



# progress so far:

- Implemented prescribing in Profile
- Developed missed dose protocol
- Optimized MOA tasks desk, sample room, phone, faxes
- Support with coverage of medications
- Creation of weekly dashboard showing performance measures
- Clinicians call people who have missed 2-3 doses before their dose is reduced or cancelled
- Cross training SCS staff in OAT to better understand OAT
- Daily call to City cells to identify people with OUD or who are on OAT
- Cross coverage of prescribers so that most daily requests are met
- Regular huddles to identify issues affecting the clinic that day
- Maintain regular communication with referral sources (hospital, corrections, withdrawal management)





#### Lessons Learned

 Takes a lot of time to perfect data collection and prescriptions in Profile.
 Patient Name Test, Intrahealth
 DOB 28 Jan 1970
 PHN 987654321

Patient Nar	ne <mark>Test</mark>	t, Intrahea	lth					DOE	3 28 Jan 1	1970		PHN <sup>98</sup>	87654321		
Provider	HC	V Ab Sta	tus 🔿 Ye	s 💿	No	HCV PC	CR Status	e 🖲 Pos	○ Neg ○	) Treated	La	st QTc:	73 test valu	le	
Checklist	HB	V Status	In	imune 🔿	Not Immune	Contra	ceptive:				Last QT	c Date:	02 Mar 2	018	
OAT	Medicati	on:	Pre	scription Typ	e F	Previous P	rescriptio	ns 🗸 s	how Only OA	T Prescrip	tions				
Suboxone v Dose Unchanged v					ged 👻 🛛	Date	te 25 Feb 2019 4 Feb 2019 4 Feb							)19	
QUANTITY: mg/day -			de	iys 👻	Medication	Suboxon	Suboxone 196 mg			Kadian OAT 560 mg			Suboxone 140 mg		
QUANTITY: mg/day -				uc	1Y5 Y	Start 26 Feb 2019			24 Feb 2019			18 Feb 2019			
START:			END:			Dose	se 28 mg Oral 80 mg Oral					20 mg Oral			
Carries	Daily	Witness	7 - DAYS	WEEK WITNE	SSED	Duration	ration 1 week 1 week					1 week			
INGESTION						Dispense									
Directions for Use Clear Basic Instructions					ructions	Instructions					-				
							tnessed	ingestion, I	Feb 26 - M	. 80 mg o	f Kadian ea	ch day fo	. 20 mg o	fSuboxon	
					_	4									
						Prescrintio	ons on this	Encount	ter						
						Prescriptions on this Encounter Date Prescription									
						24 Jul 2019			mg, Dose:50	ma everv	1 day, Tak	e 50 ma SL	dailv, dailv	witness	
FOLIO			_										,		
NUMBER:		New Ro	c -	Pr	int Rx										
Missed Dos	es				En	counter N	lotes					Bas	sic Visit	No Sho	
			class M						oxone50 m	ng/day					
last 7 days			Clear M	ssed Dose /	510				loing well.						
last 30 days	s:		Show	Missed Dos	es A	new prese	cription ha	s been p	rovided for	2 weeks	s at a dos	e of 50 m	g/day.		
UDS Result	e				No	vt annoint	ment is: 1	wook							
Screening Com					INC.	xt appoint	ment is, i	WEEK							
Client did not	present fo	r scheduled	random scr	eening No	test could be	enerformed									
Client did not	presentito	i scrieduleu	random ser	cening, No	test could be	e per tormeu	•								
Date:	Rando	Super	Witne	Meth	Bupre	Fentanyl	Morph	Оху	Cocaine	Amph	Benzos	Ox PCC	Creat	Temp	
27 May 2	True	False	False												
	Falco	False	False	-	-	-	-	-	-	-	-				
27 May 2019	I GIBC					-	-	-	-	-	-				
27 May 2019	False	False	False	-	-										
27 May 2019 09 May 2019	False	False	False	-	-	-	-	-	-	-	-				
27 May 2019 09 May 2019 <b>06 May 2</b>	False False True	False False	False False	-	-	-	-	-	-	-	-				
27 May 2019 09 May 2019	False False	False	False	-	-	-	- +	-	-	- +					







- Challenge for physicians to participate in QI work due to busy clinics and multiple commitments.
- Providing regular tracking stats provides opportunity to tweak clinic processes.

Provider (Physician/ NP) Stats:	Mon Jun 10	Tue Jun 11	Wed Jun 12	Thu Jun 13	Fri Jun 14	Sat Jun 15	Totals
Total Provider Hours / day (Clinic Hours)	14.5	14	15.5	13	7	3	67
Number of patients booked / day	93	60	68	100	35	17	373
Number of no shows for booked provider appointment	27	23	22	40	6	8	126
Number of patients seen / day	66	37	46	60	29	9	247
Percentage of no shows	29%	38%	32%	40%	17%	47%	35%
Number of New Starts	3	2	5	4	2	0	13
Number of Transfers	0	0	0	0	0	0	0
Number of Re-Starts	5	1	6	1	0	0	8
Number of Files Closed	0	0	0	0	0	0	0





# Looking Forward

- Use new Profile functionality to send appointment reminders by text for every appointment.
- Regional OAT standardization of clinic guidelines includes QI and treatment retention ideas that can be adopted by other clinics
- Automated reporting allows other clinics to look at their own treatment and retention performance measures



#### Quality Improvement & Treatment Retention

The BC Centre for Excellence in HIV/AIDS has led a quality improvement collaborative called BOOST (Best Practice in Oral Opioid Agonist) where they set some high-level targets for all clinics to try to achieve. These targets are:

- 95% of clients with opioid use disorder have an active prescription
- 95% of those clients with an active prescription will be retained in treatment for greater than 3 months.
- All clinics have a way to incorporate the patient voice



