Overdose Outreach Team

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Best-Practices in
ORAL OPIOID AGONIST
THERAPY Collaborative

Overdose Outreach Team

- OOT is comprised of 3 ORWs and 2 SWs, plus administrative and leadership support.
- OOT was created as a stand alone team when Mobile Medical Unit (MMU) closed down in April 2017.
- OOT provides connections to addictions care and support for clients in the VCH region who have recently experienced opioid overdose, and/or are at high risk for opioid overdose.
- Services Include:
  - Navigation to appropriate services
  - Support in accessing Opioid Agonist Therapy (OAT) (e.g., methadone, suboxone etc.)
  - Overdose prevention education

Aim Statement

OOT aims to increase access to substance use and other relevant health and community services and resources by:

- ✓ Ensuring that 95% of total received referrals have contact attempts made (phone, email, text, in person) within 3 business days (previously tracking 'contact made' with client).
- ✓ Ensuring that 95% of active referrals are successfully linked to substance use or other relevant health or community resources. Target for 95% by March 2018.
- ✓ Promoting information and resource sharing across the continuum of care by building new relationships with two new sites each month who serve clients at high risk for overdose. For example, ED, detoxes, supervised consumption sites, and overdose prevention sites.

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Population of Focus

People who live within VCH region (North Vancouver, Vancouver, Richmond) who have experienced an overdose or are at risk of an overdose and would like support navigating substance use services.

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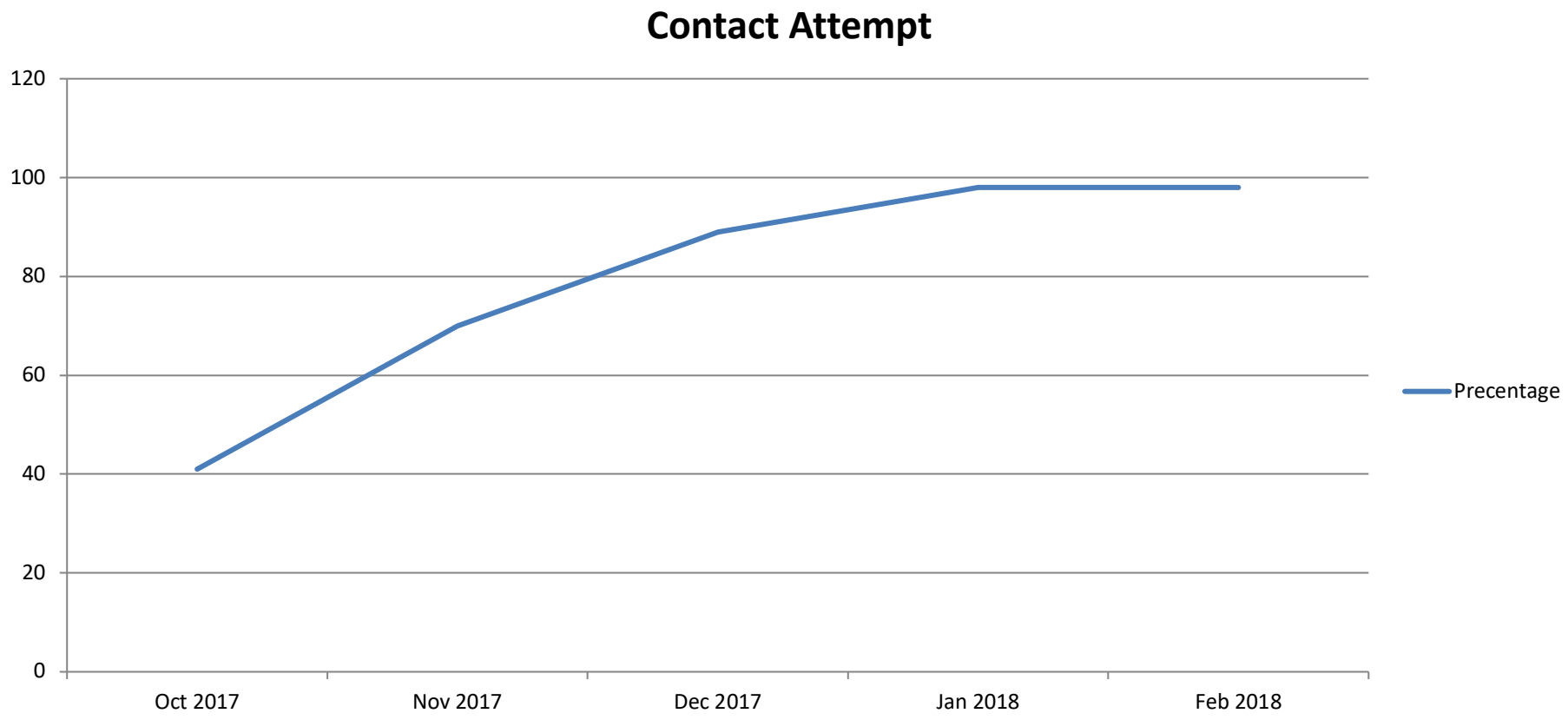
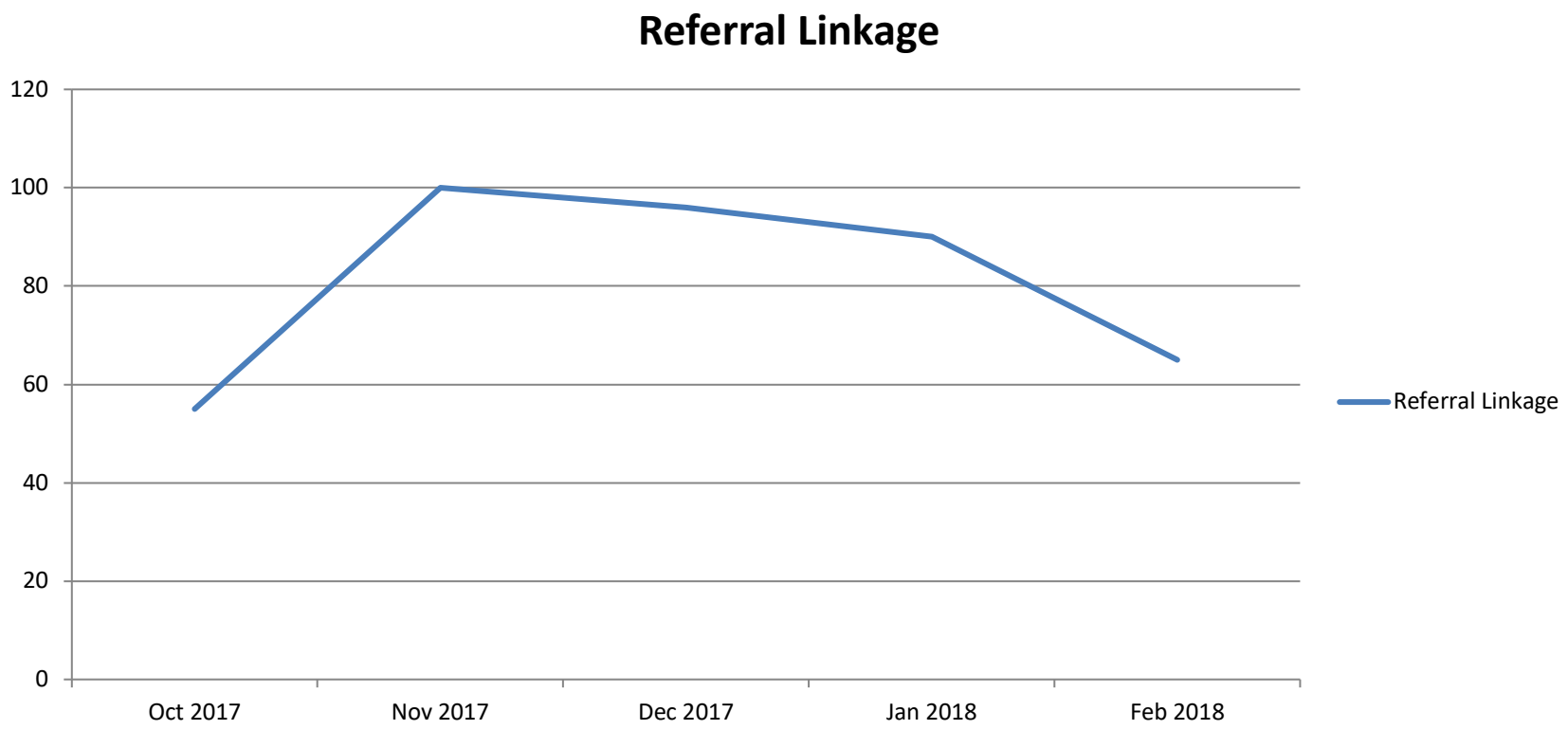
Run Chart

Ensuring that 95% of total received referrals have contact attempts made (phone, email, text, in person) within 3 business days.



Run Chart

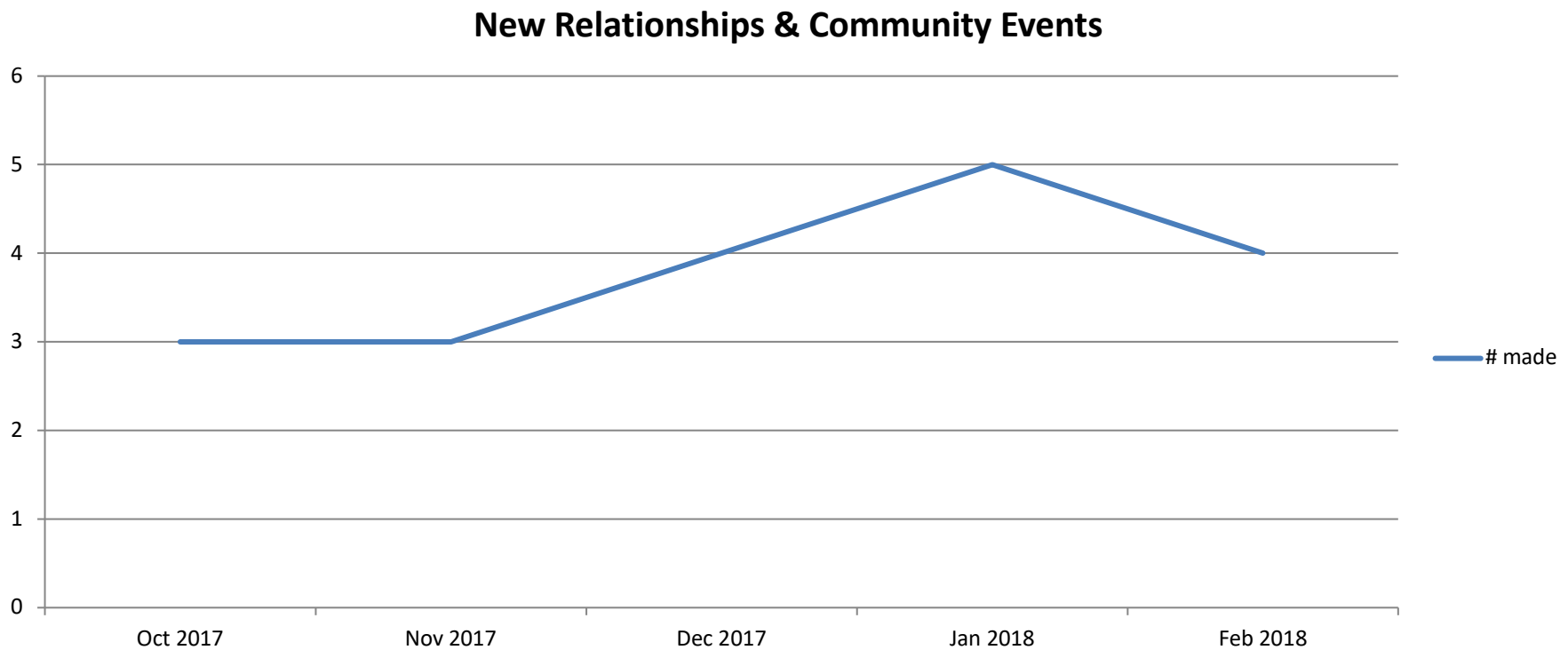
Ensuring that 95% of active referrals are successfully linked to substance use or other relevant health or community resources. Target for 95% by March 2018.



Some clients from January and February are still active and have yet to receive a linkage outcome.

Run Chart

Promoting information and resource sharing across the continuum of care by building new relationships with two new sites each month who serve clients at high risk for overdose



Including: Homeless Connect event, Strathcona BIA Security (Paladin), VPD – DTES, Vancouver Detox (Access Central, START and Harbour Light), TORO, Housing Overdose Prevention Network

Changes Tested
Narrative Report

Ensuring that the OOT Tracking Sheet data reflects front-line practice/experience:

- Changed definition from “Contact Made” to “Contact Attempt” in November 2017
- January 2018 amended “contact attempt” to “contact attempt/referral processed” to better reflect front-line practice
- If client is already followed/connected with a team or health care provider, inform them of recent events and referral to OOT
- Team member on the phone have reduced their caseload for the two weeks they are on the referral phone
- When processing new referrals team member will make 1st client contact attempt

Changes Tested
Narrative Report

To assess whether community resource partners are benefitting from team drop-in hours:

- Split drop-in Social Work hours on Tuesdays between PHS Clinic and Molson iOAT in February 2018
- Insite: Paused at the moment. In the process of setting up meeting with Tim Gauthier
- SPH/RAAC: Temporality went to Thursdays. Switching back to Monday mornings as there are more referrals/drop-ins during that time
- VANDU OAT meeting: Team has met/received many referrals from group, maintaining drop-in hours
- Culture Saves Lives – Spirit Group: Ongoing

Lessons Learned

- Building relationships with service providers is key
- Important to maintain open communication with community resource partners to ensure services being provided continue to be effective/meet community needs
- Having drop-in hours at various clinics and community partners has reduced the number of calls to OOT for non-overdose/health care related referrals

Looking forward…

- Project Plan: Connect with key VCH substance use programs and services spanning acute and community care

- Info Exchange with Heatley, DCHC and Pender CHC with TORO

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