Your Collaborative Team

The Portland Hotel Society Primary Care Team:

Nurses Sarah Foster and Kathryn Campbell
MOA Nicole Wheelhouse
Columbia Street Clinic Nurses and Doctors



Aim Statement

- For our project we are focusing on our clinic at 350 Columbia Street in the DTES. We have 2 physicians and 2-3 nurses seeing up to 50 patients a day, 5 days a week. We provide access to low barrier primary care services, as well as access to OAT and iOAT. The majority of our patients have complex health challenges, including addiction and mental illness, that are exacerbated by homelessness and extensive histories of trauma.
- Our aim is to have 80% of our POF at an optimal therapeutic dose of OAT by June 2018.



Describe your Population of Focus

- We have chosen 50 of the most frequent patients at our clinic who are currently on a sub-therapeutic dose of OAT.
- We have expanded our focus to also include outreach to patients that regularly miss their OAT doses (monitored through missed dose fax alerts from pharmacies).



Changes Tested

- Missed Dose Faxes: Clinic MOA Nicole monitored the missed dose faxes over two separate two-week periods. She recorded the dates and medication missed and compiled the info onto a spreadsheet.
- Peer Accompaniment Program: The peer program MOA tracked all off-site appointments for a two-week period in May, including which appointments involved peer accompaniment and what the appointment outcomes were.



Share your progress so far:

- We have not reached our goal of 80% of participants receiving an optimal therapeutic dose, but we have seen a steady increase over the study duration. In April we reached 67%.
- The rates of engagement with the clients has increased which is a positive outcome that will allow us to continue to support the clients in reaching their goals.
- Through the PDSA cycles we have identified clients that are in the most need of support and are developing care plans for them.
- Missed Dose Faxes: The team agrees that we are gathering useful information on specific clients that struggle with maintaining and reaching a therapeutic dose, but the process is too time consuming. We are working on developing a more efficient process.

Missed Doses May 1-15:

We received 151 faxes for 130 clients.

20 clients had 3 or more missed doses.

4 clients consistently missed doses during the current and previous study periods.

The rate of missed doses remained the same as the PDSA before.



Lessons Learned

- Following the POF for several months has allowed us to see that our team does a great job in supporting our clients that struggle the most. Through monthly chart reviews we have seen a pattern of improvement with many of the client's health and social situations. The clients continue to engage with us, a sign that they feel supported and connected.
- Evaluating our Peer Program has confirmed that it is an incredibly valuable service for our clients and the health care system as a whole. We hope to expand the program.

March 12-23:

56 appointments total.

14 appointments had a peer accompany:

14 attended their appointment – 100%

42 appointments had no peer accompany:

15 attended their appointment - 36%

18 did not show up for their appointment.

9 cancelled their appointment.

May 1-15:

47 appointments total.

11 appointments had a peer accompany:

10 attended their appointment – 90%

1 cancelled their appointment.

36 appointments had no peer accompany:

10 attended their appointment - 28%

17 did not show up for their appointment.

9 cancelled their appointment.



Looking forward...

- We will contact the pharmacies we engage with the most to see if they can provide bi-weekly or monthly reports of missed doses, so that we can track the patterns of individual clients.
- Plan and implement clinic improvements based on the feedback from client interviews. We
 will improve service delivery to support clients in continuing to engage in care and maintain
 OAT therapy.
- The clinic team will meet to discuss implementation of service improvements. Ideas that the team has discussed or implemented so far include:
 - Create a more comfortable waiting room. (TV, colouring books, tea)
 - Shorten wait times (create a fast track system).
 - Evaluate patterns in patient visits to optimize staff scheduling on the busiest days.
 - Ensure patient scripts do not end on a Friday or Monday.
 - More efficient missed dose reports from pharmacies to track repeat clients.



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