

# Vancouver Native Health Medical Clinic BOOST Collaborative Team

- Team Members

Doctors	Residents	Nurses	Support Staff
Dr. Glen Bowlsby	Dr. Scott Hodgson	<b>Greta Pauls (L)</b>	Amir Wachtel
Dr. David Tu	Dr. Lauren Taylor	Krista Townsend	Cherry Tria
<b>Dr. Piotr Klakowicz (L)</b>			Daniel Raff
Dr. Aida Sadr			Tina Braun

- Brief Description:
  - Located in DTES
  - ~ 2000 active clients
  - 2/3 identify as Indigenous persons

# Aim Statement

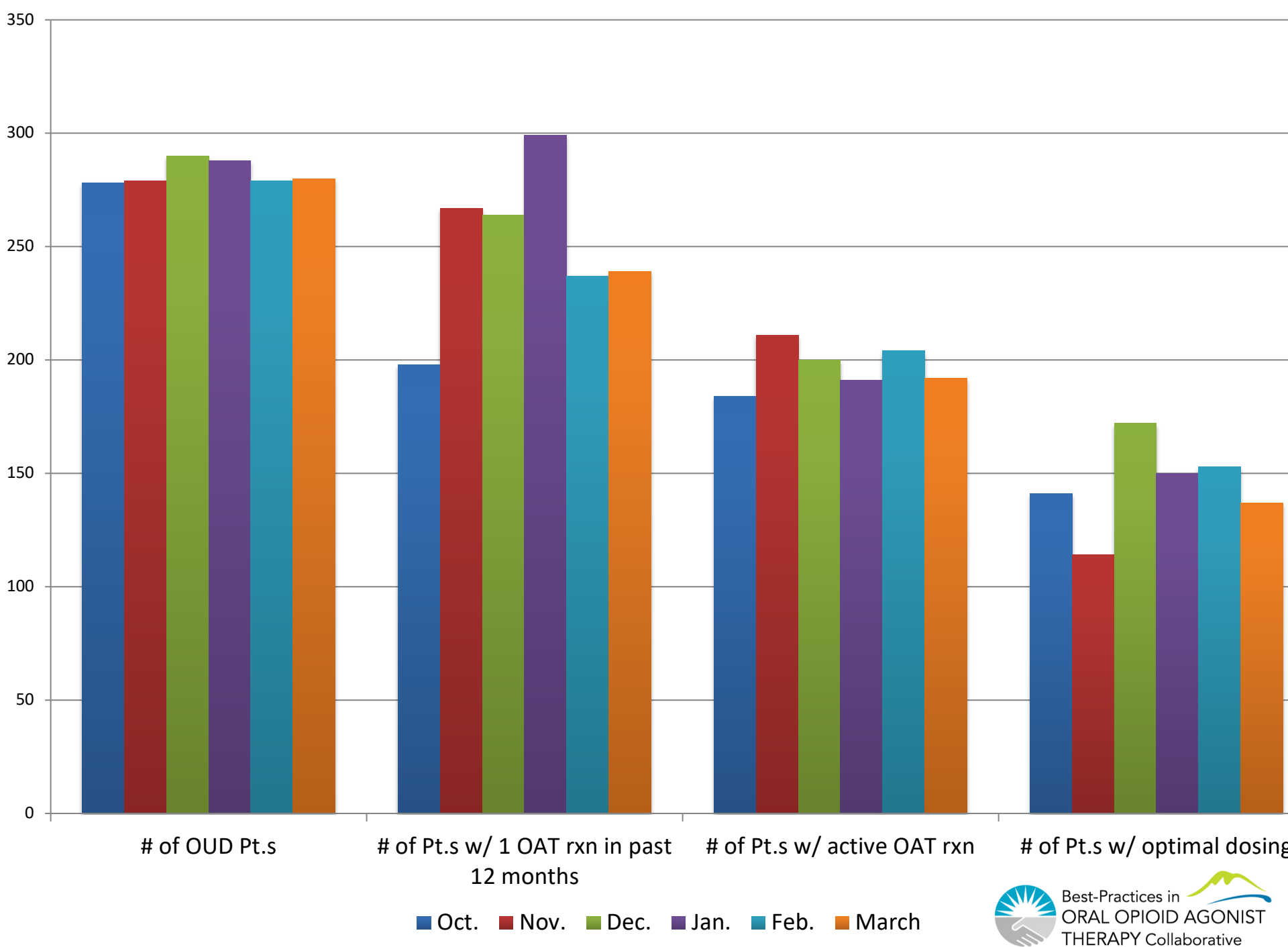
- To evolve the system of care for active VNHS registered clients with OUD so that there are significant improvements in :
  - OUD diagnosis
  - OAT initiation
  - OAT retention
  - more positive client impacts
  - a decrease in illicit opiate poisonings and deaths

# Aim Statement

- What are you trying to accomplish?
  - 90% of active VNH clients assessed for OUD and entered into the OUD registry
  - 90% of active OUD clients be initiated on OAT
  - 90% of clients receiving OAT achieve clinical remission within 6 months of initiating treatment
  - 90% of quarterly client narratives - suggest positive impacts related to SUD care

# Data Collection

- Developed new Electronic Opioid Use Form:
  - Creates scripts
  - Tracks script information → Medication, Dosage, and End Dates
- Awaiting an EMR software update before the new form can be implemented
- Currently manually updating medication info. for the entire OUD registry:
  - Time Consuming
  - Inefficient
  - Results in incomplete data capture



# Opioid Use Form

## Visit Checklist

Pharmanet Reviewed

Any ORT missed doses in last 7 days  Yes  No

If yes, describe

Current substance use reviewed   
Last Checked:

# ODs in the last 30 Days  Last Value:

Linkage to social work/counseling discussed   
Last Checked:

Last Date Verified	Verified Today
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Has THN kit	<input type="checkbox"/>
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Has THN training	<input type="checkbox"/>
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Has access to harm reduction supplies	<input type="checkbox"/>
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Aware of supervised consumption sites	<input type="checkbox"/>
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Last Score

First Score 0

## Rx Writer

OAT Med

Daily Dose(mg)

Start Day

Last Day

Rx Duration(days)

Carry Directions  DWI  Carries

Witnessed Ingestion

Direction For Use

- Kadian
- Methadone
- Suboxone
- Hydromorphone

YYYY-MM-DD

YYYY-MM-DD

days

## Treatment Course

Treatment Stage

First ever OAT initiation date

Most recent OAT start date

Stable dose date

OAT Duration 0

YYYY-MM-DD

YYYY-MM-DD

YYYY-MM-DD

Save



# Capturing Pt. Voice

- In the previous action period we captured the voices of 10 OUD clients receiving OAT and 1 OUD client not receiving OAT
- Goal: To capture voices of more OUD clients not receiving OAT
  - What are the barriers to their care?
  - Develop plans to address these
- Plan:
  - Focus Group meeting with clients
  - Coordinate this effort with STOP team nurse (Krista T.)

# Pharmacy Note on Scripts

- What small tests of change have you tried?
  - Incorporating pharmacies to increase client engagement
  - Attached label to scripts requesting that pharmacies inform patients and doctors when script is expired
- What were you measuring?
  - Whether pharmacies are willing to aid in increasing client engagement
  - If pharmacy's aid prevented expired scripts by inducing:
    - Visits to clinic
    - Doctor writing bridging scripts
- Results:
  - Pharmacies did not report end date



# Medi-Net Change

- What small tests of change have you tried?
  - Contacted ministry to suggest quality improvement regarding Medi-Net reporting OAT by provider
    - To get end dates from data-base
- Analysis:
  - Not currently possible

# Substance Screen Trial

- What small tests of change have you tried?
  - A 30 sec substance screen on a convenience sample of 20 patients over 10 days
- What were you measuring?
  - Whether patient's substance use was known to the clinic before the screen
  - VNHS Clinic disease registries used to confirm this
- Analysis:
  - 100% capture for opiates
  - All OUD patients started on replacement therapy
  - Weaknesses in stimulant, cannabis, nicotine and alcohol capture



# Tracking Prescription End Dates

- What small tests of change have you tried?
  - Tracking script end dates by physicians versus relying on patients to check in and book appointments
- What were you measuring?
  - Which method resulted in fewer expired scripts
- Analysis:
  - Trial still in progress
- Obstacle:
  - Flux in front-end staff has made it difficult to develop and test a clinic-wide method



# Looking forward...

- What is next?
  1. Updating the EMR → New eForm
  2. Capturing OUD patient voice of those not on OAT
  3. A trial comparing various quality of life scales

# Contact Information

- Contact Info.:
  - Piotr Klakowicz:
    - [piotr.klakowicz@gmail.com](mailto:piotr.klakowicz@gmail.com)
  - Greta Pauls
    - [gretapauls@gmail.com](mailto:gretapauls@gmail.com)
  - Amir Wachtel
    - [amir.wachtel94@gmail.com](mailto:amir.wachtel94@gmail.com)



Clinic Mascot: Coco

