

Next Steps

Angie Semple

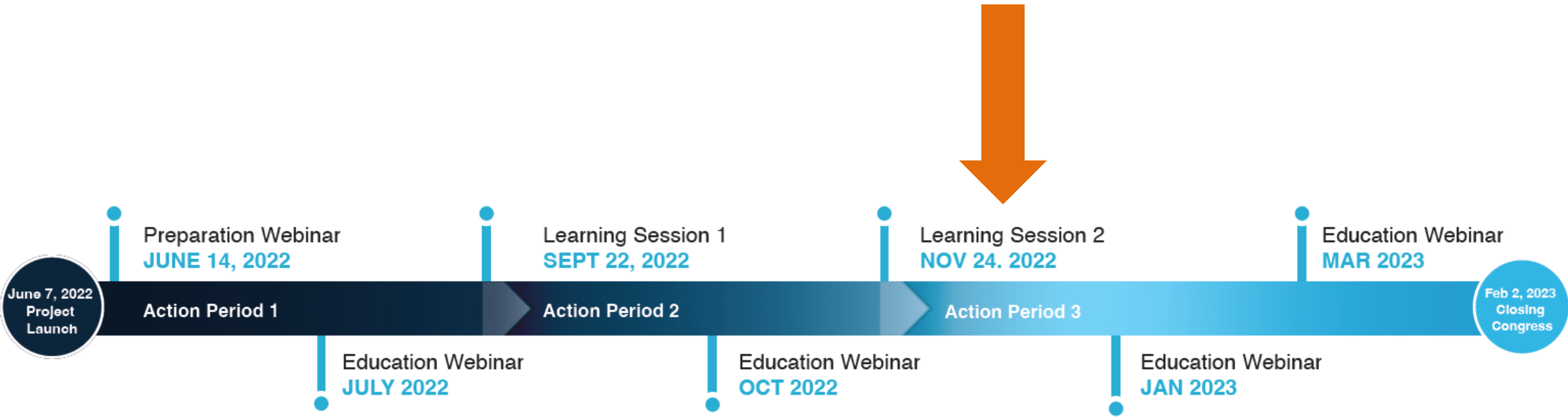
Quality Leader

BC Centre for Excellence in HIV/AIDS

WHAT'S
NEXT?



Interior Health BOOST Timeline



Key Upcoming Dates

- Educational Webinar 3 — ***January 17th, 8-9AM***
- Closing Congress — ***February 2nd, 9AM-3PM***
- Educational Webinar 4 — ***March 7th, 8-9am***



Regular Meetings

Continue to meet regularly with your BOOST team and QI Coach



Bi-Monthly Webinar

Educational Webinar 3
January 17th, 2023, 8-9AM



Monthly Reporting

Next reporting (for November) will be due **December 7th, 2022**



Learning Session

Closing Congress:
February 2nd, 2023, 9am-3pm
Virtual event on Zoom



EL

Use it for questions, sharing of information, etc.

Email Listserv

(regular communication)

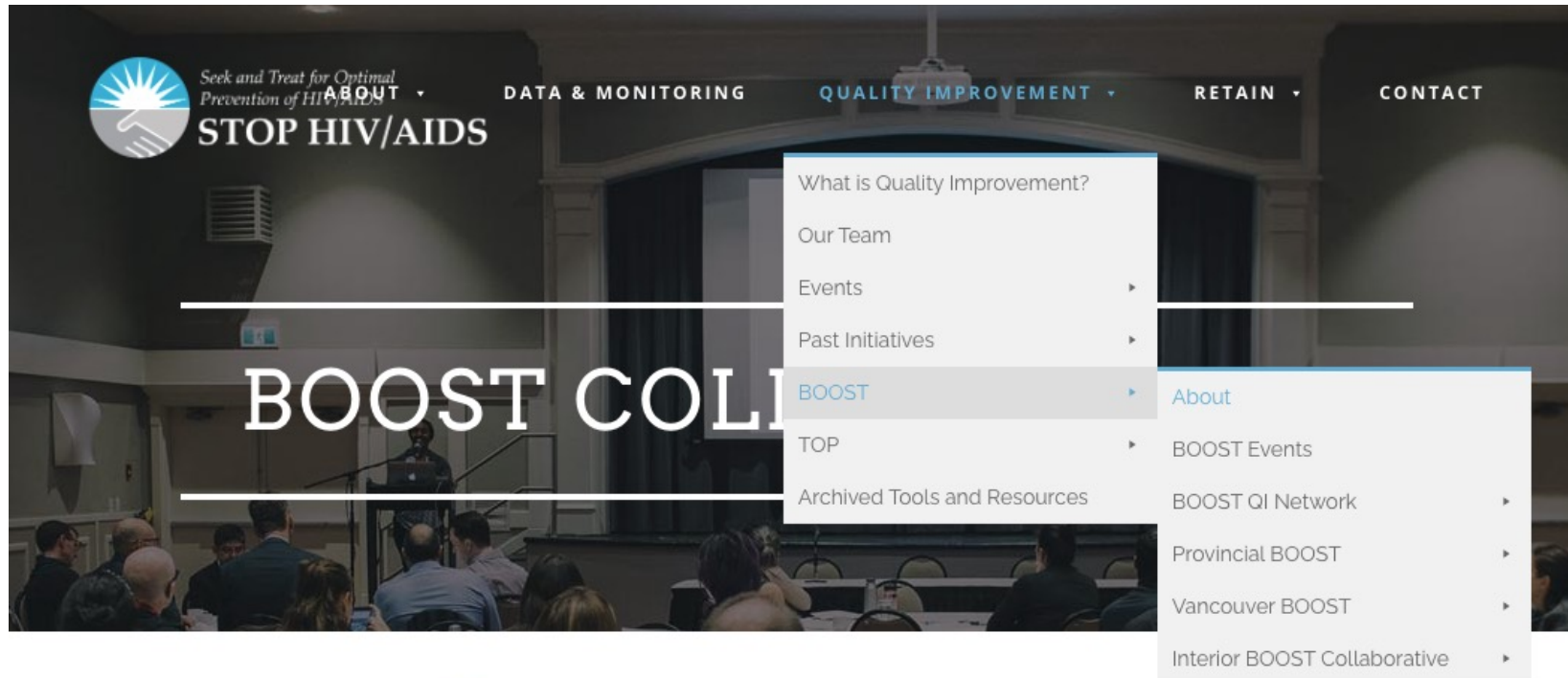
Send an email to:

BOOSTCOLLABORATIVE@stophiv aids.bc.ca



BOOST Website


(resource hub)




<https://stophiv aids.ca/oud-collaborative/>


[www.stophiv aids.ca/oud-collaborative/](https://stophiv aids.ca/oud-collaborative/)

Quarterly Data Summary Reports



Quarterly Data Summary Report
(July 2022 to September 2022)






Team & Collaborative Progress

Tips for interpreting quality improvement (QI) indicators:

- Measurement for improvement is distinct from measurement for research and accountability.
- Improvement seeks to collect just enough data, good enough data, and consistent bias is acceptable so as to accelerate improvement.

***A note on the data presented in this document:** Data presented in this report is provided on a monthly basis by the teams participating in the Collaborative, and the number of teams submitting data varies each month. If you have any questions regarding this report, contact boostcollaborative@bcsh.ca


What are we trying to accomplish?
How will we know that a change is an improvement?
What change can we make that will result in improvement?




BOOST CORE MEASURES	Definition/Numerator	Denominator	Target
1. Population of Focus (POF)	Clients diagnosed with an opioid use disorder and receiving OUD care from the participating team	POF	90%
2. Active OAT prescription	Clients with a current OAT prescription that has not expired at the time of data collection	POF with an OAT	90%
3. Retention on OAT for 3 months	Clients with an OAT prescription for an extended period of 3 months or greater	Total number of participating teams	100%
4. Patient Voice Process	Participating teams with a regular and ongoing process in place to capture the patient voice	Participating teams	100%

Population of Focus (POF) & Clients with an Active OAT Prescription (Rx)

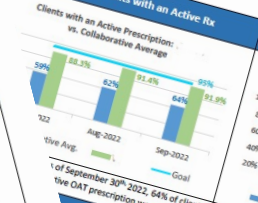
BOOST Collaborative: Population of Focus vs. Active Prescription Over Time




OAT: Population of Focus vs. Active Prescription Over Time



Measure 1: Clients with an Active Rx vs. Collaborative Average



Measure 2: Clients retained on OAT > 3 months vs. Collaborative Average



Measure 3: A Process to Monitor & Incorporate the Client/Family Voice

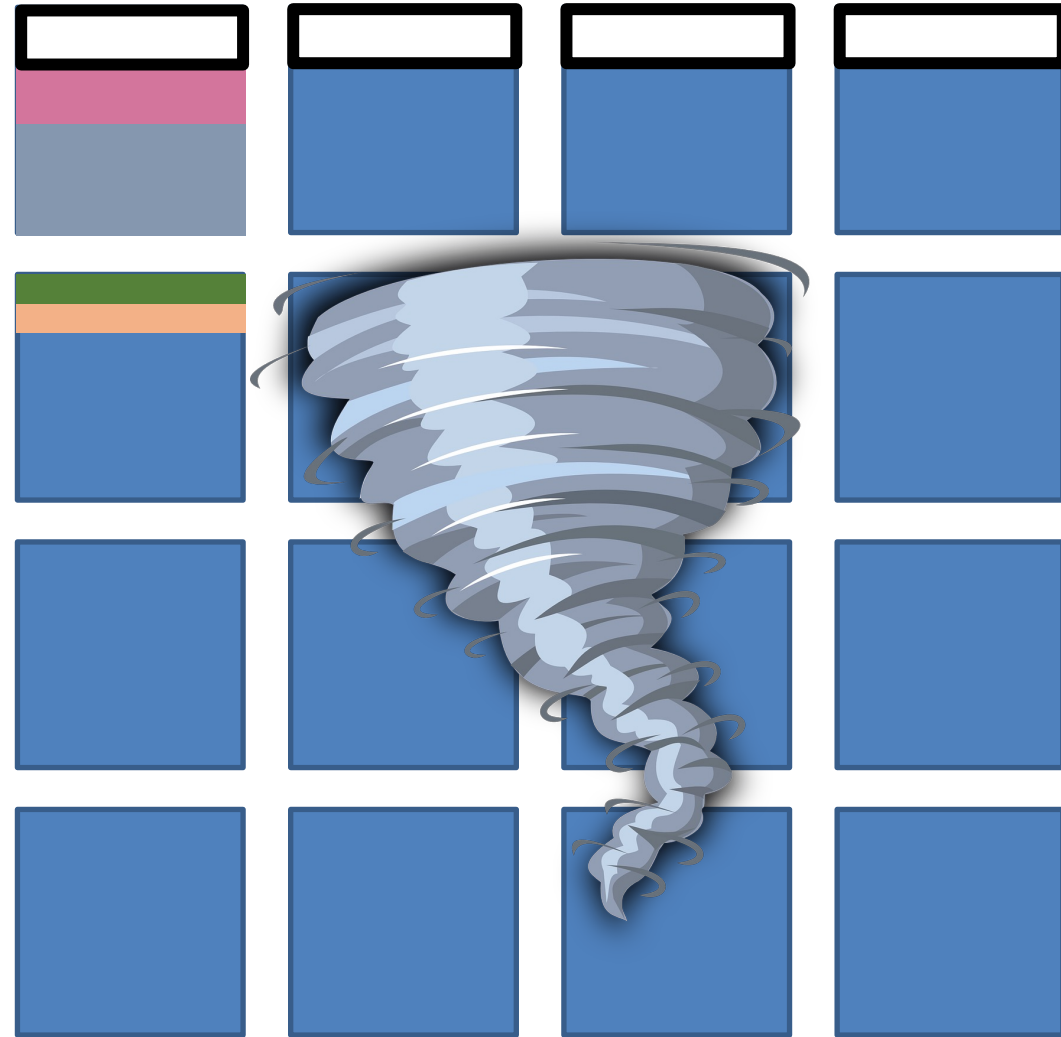
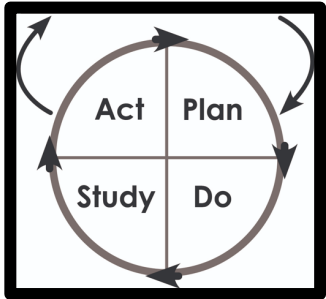
100%
25%
0%
1p-2022 GOAL

This is defined as a process to capture the client or family voice that is embedded in the workflow of a participating team. The information on the left represents the percentage of teams that have engaged and used the client/family voice in their QI work.

WH Assessment Score for Collaborative

Each team is given a score on a monthly basis using the WH Assessment Score for Collaborative. This tool allows the Collaborative core team to determine how well teams are doing in meeting improvement goals and implementing changes. The goal of the Collaborative is for teams to sustain improvements in most outcomes, with 75% of goals achieved and spread to a larger population has begun. For more details, visit: <https://canhivoids.ca/en/wh-assessment/collaborative-assessment-lead/>

The above demonstrates the number of clients with OUD that participating teams are caring for and how many of those clients have an active OAT prescription. The overall Collaborative data, as of September 2022, reveals a gap of 36% (455 clients) that are not on OAT. . . has reported data for all three months of this reporting period. The data reveals great active OAT prescription and retention rates.



BOOST Core Team and Subject Matter Experts



Closing Remarks

Hancke de Kock

Medical Lead

Interior Health

BC-CfE

BOOST



BEST PRACTICES IN ORAL OPIOID AGONIST THERAPY
COLLABORATIVE



Interior Health



CONTACT US: boostcollaborative@bccfe.ca

VISIT THE WEBSITE: <http://www.stophiv aids.ca/oud-collaborative>