

Lessons Learned from Implementing Injectable Opioid Agonist Treatment in an Innovative Community Based Model

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Rationale

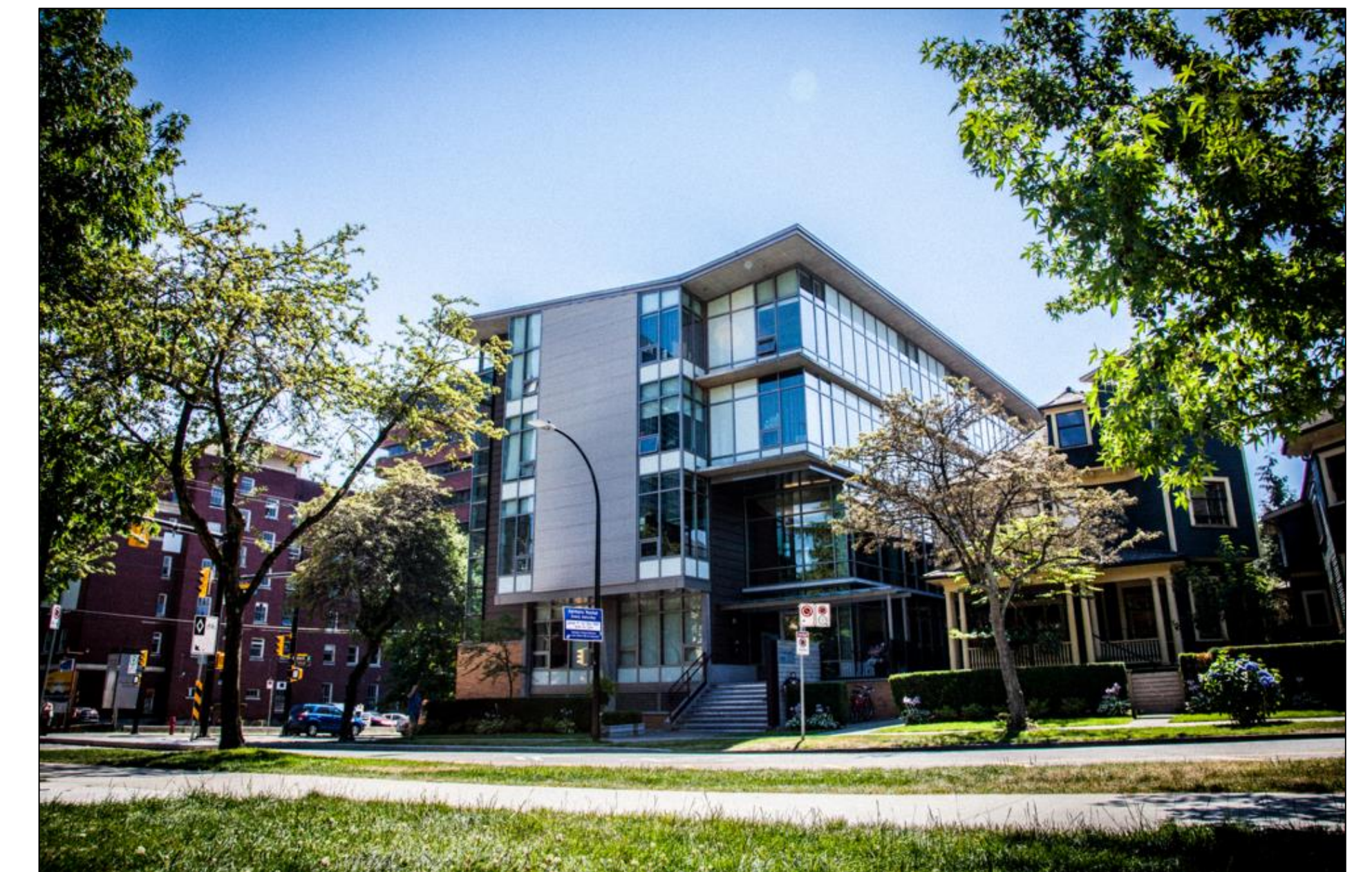
In 2019 the Dr. Peter AIDS Foundation began planning for delivery of injectable opioid agonist treatment (iOAT) at its health care facility in Vancouver, British Columbia. Delivery of this service at our integrated care setting is unique as it utilizes a community based model.

The road to treatment delivery was not smooth, with numerous obstacles arising throughout the planning and implementation phases. Dr. Peter Centre staff have used these experiences to generate learning lessons around delivering iOAT in our distinctive setting, with the aim of sharing knowledge with other organizations interested in offering this treatment.



The Dr. Peter Centre Holistic Complex Care

- HIV health care facility in Vancouver's West End
- Care and support for people living with HIV and other health and social challenges
- 18 years of Supervised Consumption Services:
 - 2002-2015 via Provincial scope of nursing practice
 - 2016-present via Federal exemption
- An integrated care setting with a host of services



Food & Nutrition

Wholesome nutrient-dense meals & dietary guidance for improved health.

Community Linkages

Housing advocacy & assistance with other social and medical services.

HIV Medication Maintenance

Treatment adherence support to suppress the virus & prevent new HIV transmissions.

Art & Music Therapy

Creative expression, self-awareness & communication skills development.

Social Participation

Social engagement, computer literacy, conflict resolution & a sense of belonging.

Counselling

Mental health, emotional wellness & addictions.

Complementary Therapy

Weekly activities, gardening, fitness, yoga & acupuncture.

Complex Nursing

Health stabilization, supervised injection, long-term support & compassionate end-of-life care.



This is where iOAT fits within our services

Lessons Learned - Planning

Organizational Considerations

iOAT will impact the capacity of your organization as the program grows. Therefore, having a clear understanding of how this treatment fits into your organization is critical. Timing of service preparation and delivery, along with organizational communication, require careful consideration. Timelines will shift and communicating project progress is important for potential clients, staff, and external partners in the greater community.

iOAT Prescribers

Having an experienced iOAT prescriber who aligns with your organizational goals will assist with design and delivery of the service model. This will also help champion the program to primary care physicians. This can be challenging as this service is new and complex, which requires additional physician training. The treatment also requires continued monitoring of the patient which means physicians need to be on call. Renumeration for providing iOAT is another aspect to consider based on provincial limitations. Organizations may want to consider utilizing a Nurse Practitioner in service delivery (and if so, determine the role they will have).

Staffing Resources

Offering iOAT in an integrated care setting means that staff will need to be prepared for changes. Staffing numbers will fluctuate as iOAT delivery changes. Advanced planning for training of staff and required staffing levels across your organization is critical. Organizations will need to balance staffing resources with all other services and activities offered. Defining scope of practice to address the intensity of iOAT is an important staffing decision. A positive point is that client engagement with other services offered may increase as they follow iOAT scheduling. This can have significant impact on staffing work load.

Financial Constraints

iOAT is an expensive service to offer. It is important to research and plan for all potential cost pressures that may arise from both within your organization and with external partners (even if they are being covered by those partners). For example, pharmacies may require renovations or new equipment, and delivery of iOAT drugs may require additional precautions which will increase cost.

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Treatment Room Design

- The physical environment for iOAT delivery is very important as it sets the space for how engaged patients will be in their treatment and how comfortable they will be throughout it.
- Planning for flow through the space is necessary, and ensuring staff and patients follow it through communication is critical. Adjusting flow during treatment can lead to issues within the space.
- Depending on existing space, iOAT renovations may impact other care locations in your organization and this needs to be accounted for when planning is done.
- Examples of considerations: specific locks/handles on doors that some participants may find triggering based on level of sound or similarity to prison locks; towel warmers for comfort and assistance with locating injection sites; direction of patient flow and spacing for equipment.

Engaging Clients

Engaging with potential iOAT participants prior to service start about the design of treatment space can help with functionality of the program. At the Dr. Peter Centre, our iOAT lead nurse consulting with participants about decorations and room set up. Relationship building with patients is key for both therapeutic and nursing purposes and engagement with design can help this process.

Examples:

- Little things to remove focus from medical aspect of treatment (such as reading materials and pictures)
- Photos of smiling faces
- Artwork from participants; thoughtful placing of photos and artwork to be mindful of client experiences



Lessons Learned - Implementation

Pharmacy Considerations

Our model utilizes a community based pharmacy which requires establishing a solid relationship and ongoing communication. This is critical when considering using hydromorphone outside of hospital settings. Other considerations include: delivery, drug supply, staffing/training, pricing, and following specific community guidelines. There is a higher cost for hydromorphone in non-health authority agencies (this will be based on provincial coverage and policy).

Documentation

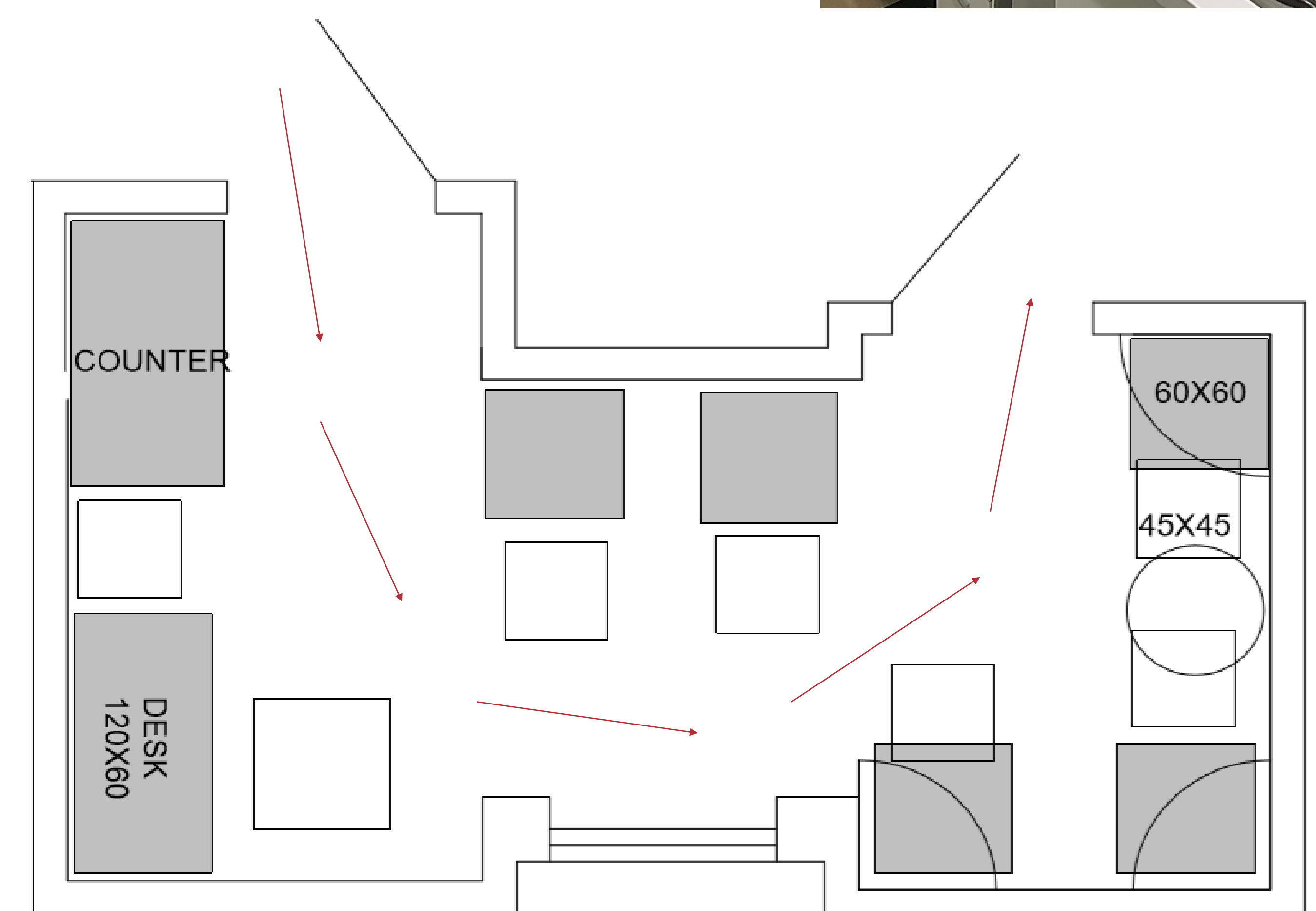
This is a documentation intensive treatment option. Many aspects to consider and electronic formatting can help manage the volume. These aspects can include: clinical aspects (handling narcotics), tracking patient progress, and planning aspects of deliveries and preparation. Organizations need to build capacity for creating and adapting materials. Unique procedures and documentation are needed for each organization, and if using external documents as templates, carefully review to see how they align with your model. Plain language documents are helpful for staff and clients.

Collaboration

Building relationships with existing communities of practice (e.g. nursing community of practice) is useful during all phases of service delivery. There are many care providers involved with iOAT, so connecting with established groups is helpful. Nothing happens in isolation with this treatment so organizations need to address how different groups will collaborate.

Peer Perspective

The Dr. Peter Centre hired two 'Peer Liaisons' to help with implementing iOAT. These positions serve a critical role in helping bring people into the program. If possible, organizations should consider starting similar positions as early as possible when planning iOAT delivery. Peers are an important way to share positive impacts of the service. Additionally they are helpful in prompting the organization to consider how and when they should engage people about treatment.



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We have no conflicts of interests to declare.

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