

# Medication for Opioid Use Disorder: Continuous Quality Improvement

Presenters:

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- Disclosures

No financial disclosures to report

# CQI Objectives

- Documentation
- Access
- Workflow
- Measuring outcomes

IOM DIMENSIONS	ADDICTION MEDICINE EXAMPLES
<b>Safety:</b> Avoid allowing the system of care to cause injury to the patient	Access to care, delays in appointment scheduling, or medication errors
<b>Effectiveness:</b> Provide evidence-based treatment to all patients and avoid services with limited patient benefits	Use of addiction medications; screening and brief intervention in primary care, case management, and posttreatment aftercare; and offer psychological interventions such as structured family therapy, motivational interviewing, or contingency management
<b>Patient centered:</b> Provide care that is based on and guided by patient needs, preferences, and values	Establish clear two-way expectations; include family and friends in treatment process, or work with clients to create treatment plans
<b>Timely:</b> Reduce waits and delays for both the patients and staff alike	Establish walk-in hours; offer interim services; add additional groups
<b>Efficient:</b> Evaluate the process of care to create an efficient process that reduces waste and conserves resources	Eliminate excessive paperwork, reassign tasks, cross-train staff, or develop a process for a seamless transition across treatment providers
<b>Equitable:</b> Ensure that processes of care are consistently applied across gender and racial/ethnic groups	

- Documentation
  - Chart notes
  - Intake paperwork
  - Release of Information
  - Prescribing Agreement

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# 1. Chart Notes and Documentation

See Handouts.....

Questions/verbal prompting	Documentation
<p>How have you been doing with your recovery?            Tell me about any progress you made toward your goals since our last visit.</p> <ul style="list-style-type: none"> <li>• When was the last time you took your suboxone?</li> <li>• When was the last time you used opiates (heroin/fentanyl, pills)?</li> <li>• Your UDS results indicate high levels of heroin. I'm worried about your use. I'm worried that the suboxone isn't helping you to stop using.</li> <li>• How often do you use? How much? (IV or nasal?)</li> <li>• What does the heroin do for you? What benefit does it provide?</li> </ul> <p>What prevented your success in the past?            What helped your success in the past?            What's happening with your other substance use?            When was the last time you used cocaine/marijuana/ benzos/etc?            What does using ___ do for you? What are the benefits from using___?</p> <p>How do you feel when you take the Suboxone? What does it do for you?</p> <p>Describe any adverse reactions to the medication?</p> <ul style="list-style-type: none"> <li>• Any problems sleeping?</li> <li>• Any problems with appetite?</li> <li>• Any problems with your menstrual cycle?</li> </ul>	<p>Patient is making progress in treatment as documented by</p> <ul style="list-style-type: none"> <li>• He self-reports that he is abstinent from heroin for 5 days</li> <li>• That she reduced her heroin use to 3 times per week</li> </ul> <p>Patient states he took his last suboxone this morning</p> <p>He reports that he last used heroin yesterday at 5:00pm. He used 2 bags – injected in his arm.</p> <p>Patient denies any heroin use in the past 2 weeks, however her UDS results indicate large amounts of heroin and fentanyl.</p> <ul style="list-style-type: none"> <li>• When I asked her about this, he adamantly denies using.</li> <li>• When I asked him about this, he eventually admitted that he used 2 days ago.</li> </ul> <p>Patient's goal is to be completely abstinent from heroin.</p> <p>Internal motivations for change include. . .</p> <p>External motivations for change include. . . .</p> <p>Reviewed how patient is taking his medications and recommended that she try.            ..</p>



What are your recovery goals?

- What are your goals for your heroin use? What would you like to see happen with your heroin use? Is your goal to abstain? Reduce your use?
- What are your goals for your (other substance) use? What would you like to see happen with your heroin use?
- What are your goals in life?
- What would you like to see different?

What other health issues are you working on?

- Hep C
- DM, HTN

What mental health issues are you working on?

- Depression, anxiety, bipolar, ADHD?

Identify your support systems

- Employment, housing, family relationships, social support

Identify your challenges/barriers

- Employment, housing, family relationships, social support

Rate your ability to achieve recovery. Right now, what is your capacity to achieve the things you want to see happen.

Rate your ability to resist temptation. . . .

Patient identified his goals as . . .

- Abstaining from any future heroin/opiate use
- Obtaining Full time employment
- Better managing his depression

Describe physical appearance/ physical exam

Describe patient's affect & mood

Identify stage of change

Patient's ability to resist temptation when [situations] is high/medium/low.

Develop skills to increase self-efficacy

## Discussing next steps:

- What do you think will work best?
- Here's what I need to see happen on our end
  - I want to see you more frequently
  - These are program requirements. . .
  - I recommend you go to IOP
  - I require you to be attending IOP by \_\_\_\_.
- These steps have been proven to effectively help people stop using.
  - Intensive counseling
  - Participation in IOP groups
  - Attendance at NA meetings
- What mental health issues need to be managed to help support recovery? And how?
- What medical issues need to be managed to help support recovery? And how?

## Patient will do the following in the next week:

Attend 2 NA meetings

Enroll in and be attending an IOP by 3/1/2021

See Brian each week for counseling

Learn grounding skills for his trauma during sessions with Brian

Participate in weekly groups with Ashley

The patient wants a longer prescription to come in less frequently.

- We discussed it and agreed that he would come in weekly for counseling.
- I expressed my concern and shared the treatment requirements that he come more frequently.

I consulted the patient's progress with

- The BH provider who recommends . . .
- The medical provider who recommends . . .
- Supervisor, who recommends . . .
- The ECHO Team, who recommends . . .

## 2. Intake Paperwork

- Practice Information (Location, days, hours, contact info)
- Types of services offered
- Description of Purpose
- Scheduling
- Insurance
- Medication handouts/ FAQs
- Release of information/CFR 42



### 3. Prescribing Agreement

- See attachment

- Questions
- Case Discussion
- Contact Information