# Lessons learned from an injectable opioid agonist therapy (iOAT) program in British Columbia

PRESENTED BY

Amanda Giacomazzo, Moderator Scott Elliott Rosalind Baltzer Turje Damon Hassan Ora Sagmoen Michael Bonneau

March 10<sup>th</sup>, 2020



### Webinar Agenda (1 hour)

Welcome and speaker introductions

### Amanda Giacomazzo, 5 minutes

Overview and information about the Dr. Peter Centre

### Scott Elliott, 10 minutes

Clinical and organizational lessons learned

### Rosalind Baltzer Turje, 20 minutes

Peer perspective on the Dr. Peter Centre iOAT program

### Ora Sagmoen, 10 minutes

Questions and discussion

### All, 10 minutes

### **Scott Elliot**

Scott joined as Executive Director of the Dr. Peter Centre in 2017 and has 30 years of experience in the non-profit sector. In his two and a half years at the Dr. Peter Centre, Scott has initiated an iOAT program as well as a Hepatitis C program. In 2019, Scott was elected to the Board of Directors of CATIE. Scott also sits on a variety of national committees related to STBBIs and is on the planning committee for the Stimulus 2020 conference.

Scott has served as Chief Executive Officer of imagine1day and has held leadership roles with the Vancouver Art Gallery, the Vancouver Aquarium, Philanthropic Solutions Inc., Arts Umbrella, Canada World Youth and the BC Persons with AIDS Society (now Positive Living).

Scott is motivated by a deep desire to make transformative change in the lives of people with HIV, mental illness, addiction, poverty, and complex medical needs.

### **Rosalind Baltzer Turje**

Rosalind is Senior Director of Clinical Programs at the Dr. Peter Centre. She joined the Dr. Peter AIDS Foundation in 2002 and manages a team of clinical and non-clinical staff. She has worked professionally in the field of mental health since 1980 as a clinician and administrator and was on faculty in the Psychiatric Nursing Department at Douglas College teaching in the diploma and advanced diploma programs. Rosalind Baltzer Turje has also worked as a consultant with health regions in service planning and evaluation and holds undergraduate degrees in Cell Biology and Nursing, as well as a Master's in Individual Psychology.

### Ora Sagmoen

Ora was born and raised in Vancouver, BC. She has been active in the Downtown Eastside (DTES) for over 40 years. Over the last 10 years she has worked at Canada's first injection site working closely with people who are marginalized in multiple ways. Oralie joined the team at the Dr. Peter Centre in late 2019 to assist with the new iOAT program. She is assisting potential and existing clients bridge the gap when joining iOAT by sharing insight on what to expect.

When Ora is not working she enjoys distributing food to less fortunate people in the DTES by collecting and distributing donations from local restaurants in the area.

### **Damon Hassan**

Damon is a registered nurse and holds a Bachelor of Arts degree in psychology along with a Bachelor of Science degree in nursing, both from the University of British Columbia. He has 13 years of experience working in the areas of addiction and harm reduction. He has previously worked for Vancouver Coastal Health psychiatry programs at Vancouver General Hospital and joined the Dr. Peter Centre in 2006. Damon is the nursing lead for the iOAT program at the Dr. Peter Centre and is responsible for the daily operations of the program.

Damon is a fan of comedy and makes sure to attend the Just for Laughs festival in Vancouver as often as possible.

### Michael Bonneau

Michael is a current recipient of iOAT at the Dr. Peter Centre and was the second person to join the program. As a person with lived experience, Michael has been learning to live with aspects of substance use since he was a teenager. He is currently working in various jobs that are part of Vancouver's Downtown Eastside community and is in the process of starting a new workout routine as iOAT has given him free time during the day to do so.

Michael counts himself lucky to be both a participant and a peer worker at the Dr. Peter Centre. He likes spending his free time biking the trails of Stanley Park and spends about 95% of life with his 3 ½ pound Chihuahua.



# Lessons Learned in the Planning and Implementation of iOAT in an Integrated Health Care Setting

Scott Elliot, Executive Director
Rosalind Baltzer Turje, Senior Director of Clinical Programs
Damon Hassan, Registered Nurse and iOAT Nursing Lead
Oralie Sagmoen, Peer Liaison
Michael Bonneau, Peer Liaison



# **Land Acknowledgement**

The Dr. Peter Centre where this work is being done is located on the traditional, ancestral, and unceded territory of the Coast Salish peoples – including the Skwxwú7mesh (Squamish), Stó:lō and Səlílwəta?/Selilwitulh (Tsleil-Waututh) and xwməθkwəyəm (Musqueam) Nations.



Image sources: https://www.squamish.net/, https://twnsacredtrust.ca/, https://www.musqueam.bc.ca/

### What is iOAT?

Injectable Opioid
Agonist Treatment
(iOAT) provides
medically supervised
pharmaceutical grade
opioids for injection

## Health Canada approves injectable hydromorphone to treat opioid addiction





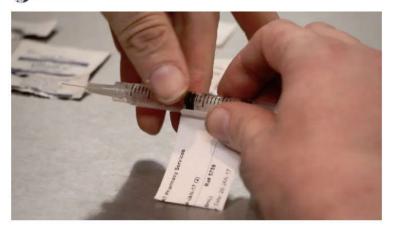




Canada is first country to approve the pain drug for severe opioid use disorder, says Health Canada



Rafferty Baker - CBC News - Posted: May 16, 2019 5:00 AM PT | Last Updated: May 16



Source: CBC News, Posting Date May 16, 2019

# What we're <u>not</u> going to talk about (But we can if you really want us to!)

\_\_\_\_\_ In-depth exploration of evidence-based research showing the positive impacts of iOAT

## 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:
  - o 2002-2015 via Provincial scope of nursing practice
  - o 2016-present via Federal exemption







### **One More Tool**



# **Dr. Peter Centre iOAT Program**

### **Project Title**

"Overcoming barriers to iOAT: An implementation evaluation of iOAT in an integrated health care facility for health service organizations across Canada"

### **Project Duration**

30 months

Funded through Health Canada's Substance Use & Addictions Program (SUAP)

# **Top of Mind**

- Opioid use disorder treatment
- Creating a new community model
- Challenges we have experienced

# **Lessons Learned – Planning**



### **Organizational:**

Have a clear understanding of how iOAT fits your organization, and recognize that timing and communication require careful consideration

 iOAT will impact the capacity of your organization as the program grows and people get involved with the treatment

### **iOAT Prescribers:**

Important to find a 'champion' when setting up your iOAT delivery model

Having an experienced iOAT prescriber who aligns well with
 organizational goals is important

# **Lessons Learned – Planning**

### **Staffing resources:**

Advanced planning for training of staff and required staffing levels is critical

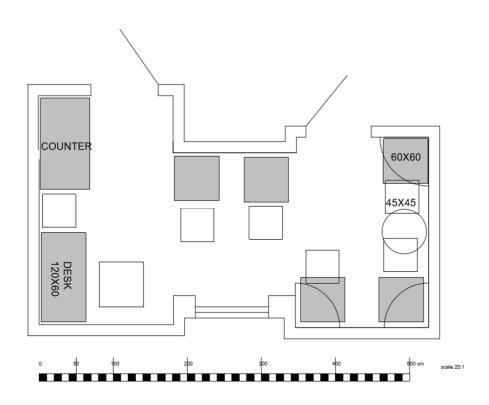
- Offering iOAT in an integrated setting means that there will be changes for staff
- Client engagement may increase (a positive point) but this has impact on staffing work load

### **Financial Constraints:**

The treatment is expensive to offer

Requires advanced knowledge and planning of cost pressures

# **Dr. Peter Centre iOAT Program – Floor Plan**



# **Lessons Learned – Engaging Clients**





# **Lessons Learned – Engaging Clients**



# **Lessons Learned – Implementation**

### **Pharmacy:**

Ongoing communication and established partnerships are critical when dealing with the many considerations around hydromorphone

• Examples: delivery, drug supply, staffing/training (hospital vs. community), specific guidelines, and pricing

### **Program Evaluation:**

Standardized processes and clear communication are important for accurate data management and tracking

# **Lessons Learned – Implementation**

### **Documentation:**

Many aspects to consider and electronic formatting is best to manage volume

Build capacity for material creation / adaptation



Building relationships with existing communities of practice are useful during implementation (and planning)

Many care providers involved with this treatment

### Nothing in isolation

 Overlap of various professional groups in treatment delivery → how do you collaborate?



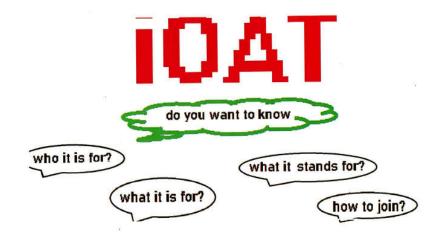


# **Knowledge Translation To Date**

- Undertake knowledge translation / exchange activities with organizations across Canada to support these organizations in pursuing implementing iOAT
- Suite of KT products (e.g. presentations, tip sheets, plain language fact sheets, etc.)
- Experiential learning opportunities for 36 health care professionals / policy makers
  - Shadow DPC staff as they provide iOAT

# Peer Perspectives with Michael and Ora

- We are involved with the "hands on" iOAT team
  - Interact with participants at our "Ask me about iOAT" sessions
  - Attend the support group
- Doing the job that I wish had been around when I started iOAT



# ASK ME ABOUT IT !!!

WHERE:

**UPSTAIRS AT THE ROUND TABLE** 

### WHEN:

WEDNESDAY 10-11 am & 2-3 pm





# Peer Perspectives with Michael and Ora

- The Peer Liaison opportunity is an amazing way to bring people into the program
  - Would have been great to start the position earlier
  - Important to look at how and when you engage people
- Sharing about what the iOAT program has done for us is a way to spread awareness about the program and how it is set up at the Dr. Peter Centre

# **Acknowledgements**

Project funding provided by Health Canada's Substance Use and Addictions Program (SUAP)

Presentation prepared by: Nigel Morgan, Knowledge Translation Officer at the Dr. Peter Centre

# Thank you!

**Questions?** 

# **Audience questions?**

Please type your question or comment into the chat box.

# Thank you

Please complete the webinar evaluation that will be provided following this webinar.

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