Expanding Access to Treatment for Opioid Use Disorder with a Family Medicine Residency

Nathaniel Bowling, MDCM
Alane O’Connor, DNP
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Objectives

1. Describe rapid access to medication assisted treatment with innovative programs
2. Discuss the importance of training family medicine residents providing treatment for OUD
3. Discuss ways to enhance collaboration within rural communities to reduce the impact of OUD
Overview

Introduction (5 min).

ED inductions (10 min).

Outpatient Plus (10 min).

Inpatient Consult Service (5 min).

Training family physicians in MAT (15 mins).

Enhancing collaboration (10 mins)
Disclosures

Neither presenter has any conflict of interest to declare.
Introduction

Opioid Crisis

Overdose Deaths

Hepatitis C/HIV

Infective Endocarditis

Neonatal Abstinence Syndrome
ED Inductions

Goals:
Decrease barriers to care
Allow for rapid access

Method:
Bring multiple stakeholders together
Develop protocol for inductions

Early results:
x patients have presented for treatment
x started on buprenorphine
x came for follow-up
Happier patients and ED providers

Next steps:
Advertise
Revisit protocol
Outpatient Plus

Goals:
Increase capacity in our hospital system

Method:
Grant-funded program, group visits

Early results:
40 patients per session

Next steps:
Expansion
Bring in outside providers
Training Family Physicians in MAT

Goals:
Increase the workforce
Have residents feeling ready

Methods:
Developing robust MAT program (including OB)
X-waiver all faculty

Early results:
Improved access within our system, state
Culture change

Next steps:
Developing formal addictions curriculum and rotations
Moving towards X-waiver requirement
Inpatient OUD Consult Service

Goals:
Improve patient care in hospital
Improve continuity of OUD care
Increase knowledge base of hospitalists

Methods:
Three core attending, rotating call

Early Results:
Relatively low call volume
Complex cases
Improved follow-up

Next steps:
Onboard residents
Advertise
Enhancing Collaboration

Goals:
Improve communication and therefore continuity of care

Methods:
Bring stakeholder together
Regular meetings (Prescribers dinner and OSC)
Cross pollinate our departments

Early results:
Converging on a shared set of practices
Easier transition to different levels of care

Next steps:
Maintenance