



Team Based Care  
&  
Medications for Opioid Use  
Disorder

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A Pharmacist's Role in Supporting  
Treatment and Recovery

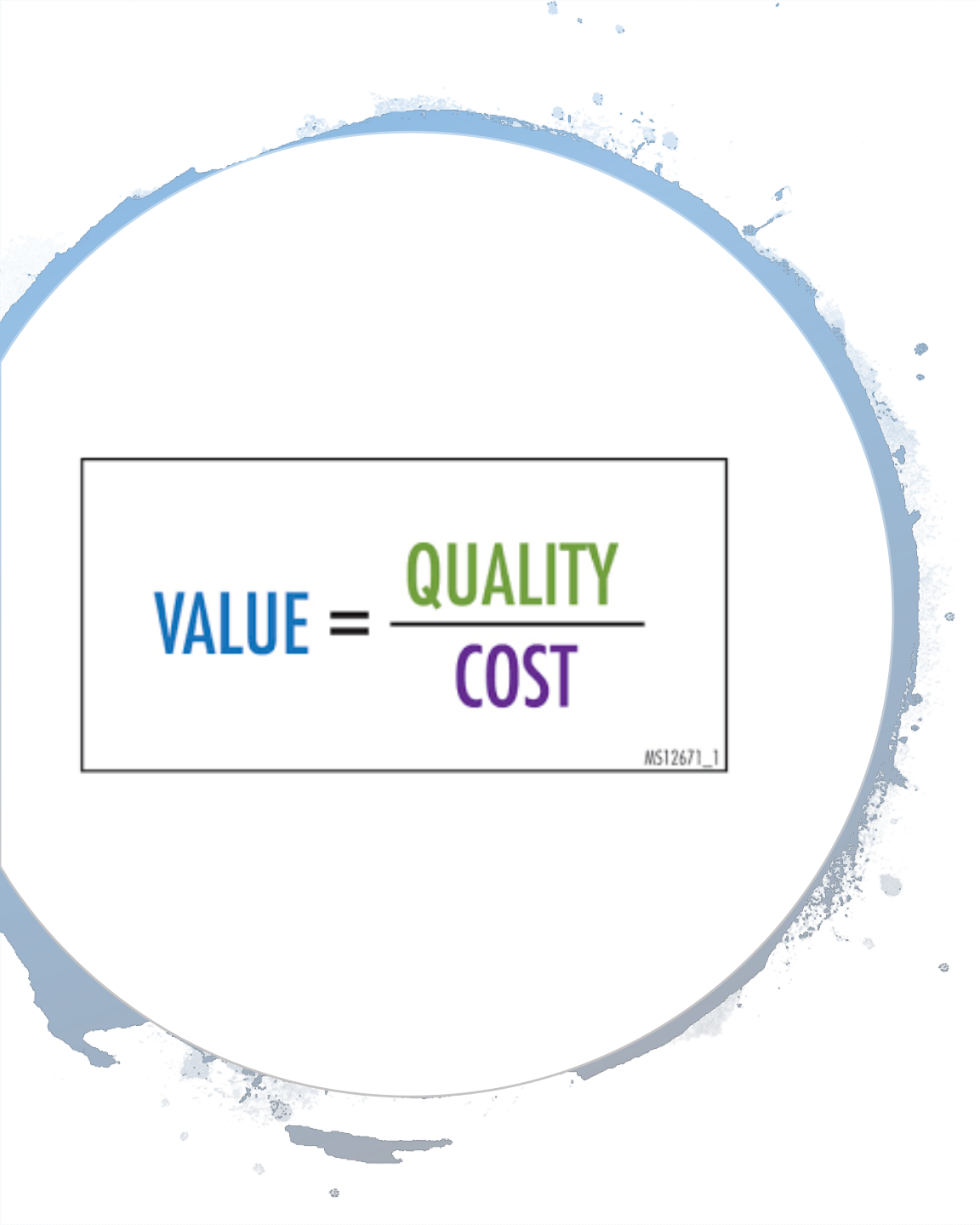
# Objectives

- Understand the impact of implicit bias and how perceptions and beliefs can impact overall community wellness
- Explore the role of advanced practice pharmacists in supporting recovery and assuring access to treatment
- Describe available training resources to increase clinical competency in managing medications for opioid use disorder

# Scope of the Issue

## Opioid Overdose Mortality

- CDC data indicates that American Indians and Alaska Natives (AI/AN) had the second highest overdose death from rates from all opioids in 2017 (15.7 deaths/100,000 population) among racial/ethnic groups in the US
- AI/AN had the highest overdose death rate for prescription opioids (7.2)
- AI/AN had the second highest overdose death rates from heroin (5.2)
- AI/AN had the third highest from synthetic opioids (6.5)
- The overall rate of overdose deaths for AI/AN increased by **13%** between 2015-2017


$$\text{VALUE} = \frac{\text{QUALITY}}{\text{COST}}$$

MS12671\_1

# The Case for Advanced Practice Pharmacists...

- Rich history of team-based care
- Reduced Staff Turn-Over –resources, relationships, referrals, improved continuity of care
- Communication & Education
- Outcomes



# Role of the Pharmacist in Treatment Planning

# Opioid Use Disorder & Addiction



*“Addiction is a treatable, chronic medical disease involving complex interactions among brain circuits, genetics, the environment, and an individual’s life experiences. People with addiction use substances or engage in behaviors that become compulsive and often continue despite harmful consequences.”*

ASAM Board of Directors, September 2019.

# Check Yourself

- Implicit Bias – Implicit Association Test
- Show Kindness – person centered care
- Replace attitudes with evidence
- Speak-up
- Share positive stories

<https://www.mdadvantageonline.com/feature-articles/words-matter-addressing-implicit-bias-in-the-treatment-of-opioid-use-disorder/>

<https://www.porticonetwork.ca/documents/77404/475940/CAMH+2005+Beyond+the+Label+Toolkit.pdf/06c1a452-bee9-4874-83ed-ecd22d9b1000>

# 'Core' Clinical Pharmacist Privileges

- 'Comfortable' Addressing:
  - Trauma-informed SBIRT
  - Naloxone
  - Expanded Harm Reduction
  - 'First Do No Harm' – special populations
  - Relate to PDMP findings as you would a POC BG 450 –this can be hard

SBIRT Adult Alcohol Pocket Card.pdf | Open with Google Docs

RAISE THE SUBJECT	PROVIDE FEEDBACK	ENHANCE MOTIVATION	NEGOTIATE PLAN
<p>"Thank you for completing this questionnaire – is it ok if we review your results?"</p> <p>"Can you tell me more about your drinking or drug use? What does a typical week look like?"</p>	<p>"I recommend drinking below low-risk limits to help prevent new health problems or make existing ones worse."</p> <p>"Many patients who score into this zone have difficulty just cutting back and need to abstain from drinking alcohol."</p>	<p>"What do you like and what are you concerned about when it comes to your alcohol/drug use?"</p> <p>"On a scale of 0-10, how ready are you to cut back/seek specialized treatment? Why not a lower number?"</p>	<p>Summarize conversation.</p> <p>Then: "What steps do you think you can take to reach your goal of cutting back/seeking specialized treatment?"</p>

AUDIT SCORING				AUDIT-C SCORING	RESOURCES FOR PROVIDERS:
I HEALTHY	II RISKY	III HARMFUL	IV DEPENDENT	POSITIVE	
M 0-4	5-14	15-19	20+	M 4 or more	link.ou.edu/SBIRT
W 0-3	4-12	13-19	20+	W 3 or more	www.samhsa.gov/sbirt
					www.211oklahoma.org



The UNIVERSITY of OKLAHOMA  
Anne and Henry Zarrow School of Social Work

OHSU SBIRT Link: <http://www.sbirtoregon.org/training-curriculum/>



# Specialty Pharmacist SUD Care



PHARMACISTS ARE ACCESSIBLE MEDICATION EXPERTS



TEAM BASED CARE UNDER COLLABORATIVE PRACTICE AGREEMENT



PHARMACISTS AND CHRONIC DISEASE MODEL



SGM 19-01 [ASSURING ACCESS TO MEDICATION ASSISTED TREATMENT](#)



MEDICATION-FIRST MODELS AS A FIRST STEP TO RECOVERY— WITHDRAWAL MANAGEMENT



PATIENT (AND PROVIDER) EDUCATION, GOAL SETTING



SYSTEMS-BASED APPROACHES

# Systems Failures

“We are routinely placing individuals with high problem severity, complexity, and chronicity in treatment modalities whose low intensity and short duration offer little realistic hope for successful post-treatment recovery maintenance. For those with the most severe problems and the least recovery capital, this expectation is not a chance, but a set-up for failure—  
a systems failure masked as personal failure.”

Bill White, 2013

# A Road-Map for Success

- Define Your Practice as a Learning Organization
  - Required Elements:
    - Shared Vision
    - Team Learning
    - Systems Thinking
    - Organizational Learning
    - Personal Mastery
  - Road Map for Success:
    - Recruiting staff
    - Building relationships
    - Identifying resources: identifying stakeholders and creating partnerships
    - Measuring and understanding community needs
  - Performance Improvement project guided by Strategic Plan



# Resources

- Your mentors, colleagues, and community where you serve
- CPNP [Pharmacist Toolkit: Opioid Use Disorder](#)
- [PCSS MAT](#)
- [VA Boot Camp](#)
- [DATA Wavier Training for MLPs](#)
- [SAMHSA TIP 63](#)
- Find an ECHO
- UCSF Warmline
- [www.ihs.gov/opioids](http://www.ihs.gov/opioids)



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