Cass Lake IHS Harm Reduction

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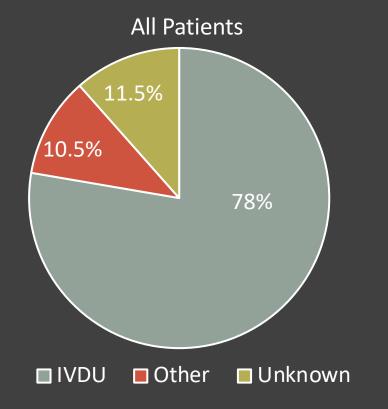
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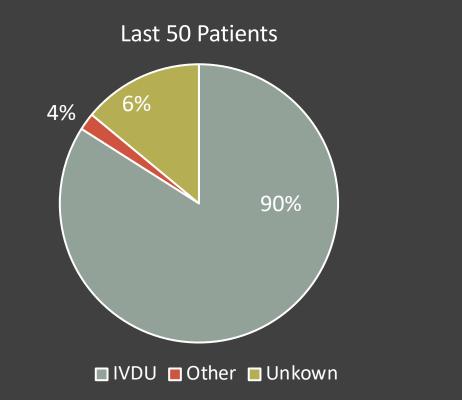
Learning Objectives

- Understand the need for local harm reduction services
- Describe the steps taken to initiate harm reduction services
- Identify benefits of harm reduction services

Need for Local Harm Reduction Services

Risk Factors for Hepatitis C at Cass Lake





Need for Syringe Services



- MN Pharmacy Syringe Access
 - Pharmacies can voluntarily participate
 - Individual pharmacist may decide
 - Limit of 10 syringes
 - Can not display syringes for purchase
 - Can not advertise availability of syringes

Need for Syringe Services

ER visits for STD testing

• Need for quick and easy access to testing outside of the ER

Association between our syphilis cases and IVDU

Increase in ER overdose visits
 Need for additional access to naloxone

Patients accessing ER for services not empaneled with primary care provider

Getting Started - People

- Meetings with Tribal counterparts

 What services we can both provide
 What gaps can we fill for each other
 Meeting with Tribal Police Department
- Pharmacy leadership and staff buy in oSurvey staff
- Presentation to medical staff
- Word of mouth advertising
 - One Facebook post after ~ 3 months

Getting Started- Education

- Gathered resources for patients
 - Mental Health
 - Substance use
 - Patient education
 - Safer injection
 - Numbers for clinic appointments
 - Sharps disposal in Minnesota
- Education for pharmacy staff (ongoing)
 - Background presentation given
 - Invited NPAIHB staff to present and answer questions
 - Emailed resources on harm reduction
 - Rationale behind items provided

Getting Started-Supplies

- Created list of supplies needed
- Compared pricing from different sources
- Created NASEN account
- Majority of items the pharmacy already offered or the facility orders for other departments
- Identified funding source
- Resources
 - NPAIHB
 - National Harm Reduction Coalition
 - NASEN
 - NASTAD

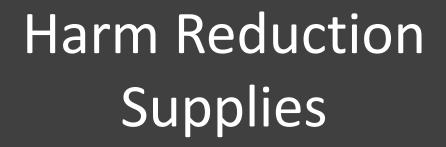
Harm Reduction at CLIHS

- Within CLIHS pharmacy provides harm reduction services which include
 - Syringe services
 - Sharps containers/syringe disposal
 - Naloxone
 - STI testing
 - Condom distribution
 - Education on safer use
 - Resources for mental health and addiction

Harm Reduction at CLIHS

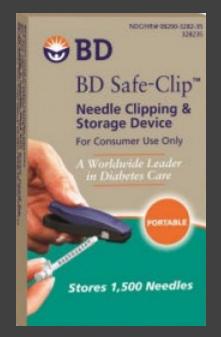
- Patients complete a voluntary intake form
 - \odot Provided a participant card with an ID number
 - Encounter is not documented in medical record
 - Naloxone prescription and STD testing is entered in EHR, but not linked to harm reduction visit
- Pharmacist or student pharmacist provides information on what is available
 Handouts on safer use and mental health and addiction resources
 Participant can request items they would like
- Return visit participants can show their participant card to request services or ask to speak with a pharmacist
- Pharmacy tracks visits based on ID number















Harm reduction through Tribal Health

- 2 nurses
 - 1 RN, 1 LPN
- All of the same services provided at Cass Lake IHS
- Ability to meet people where they are at
- Abscess and wound care
- Rapid HCV and HIV testing
- Visit 3 different communities one day each week
- Disease intervention services
 - Syphilis, HCV, other STIs

Participant Demographics

- First participant 10/24/22
- Currently have 75 participants
- Median age: 35
 - Age range: 21-67
 - 53 participants with no primary care provider (70%)
- 320 visits
- ~15,500 syringes, 250 naloxone, and 1,000 condoms provided

STI Testing first 7 months

- STD panel ordered at 8 visits (6 patients)
 - o 3 positive HCV
 - 3 reactive RPR
 - o 1 late latent case in need of treatment
 - o 2 with history of treated syphilis
- 7 participants with known HCV in need of treatment
- 35 participants

Pharmacy Based Incentive Program

- Implemented July 10th 2023
- \$10 incentive card offered for STI testing
 - Testing ordered under pharmacy standing order
 - No STI testing within the last 3 months
- Second \$10 incentive card offered for notification of results or if treatment needed
 - Treatment ordered under pharmacy standing order
- No advertising done
- Do not have to be part of harm reduction program

Pharmacy Based Incentive Program

- 85 incentive cards given out
- 49 individual patients completed STI bundle
 - 10 not part of harm reduction program
- Positive results 21 positives in 17 patients
 - 2- syphilis cases- late latent
 - 8- Hepatitis C (+ 5 with previous positive in EHR)
 - 3- Chlamydia
 - 1- Gonorrhea
 - 6- Trichomoniasis
 - 1- Pregnancy
- 4 positives were outside of harm reduction program

Difficult to Reach Patients

- Tribal Disease Intervention Specialist Consult
 - Utilized if unable to reach patient by phone
 - Consult placed in EHR
 - Can assist with getting patient into clinic, obtaining labs, or providing treatment

Follow up Flag

- Placed and removed by one pharmacist
- Only used as a last resort if patient unable to be contacted after multiple attempts
- Education needed for staff to ensure action when patient presents
- Need to proactively remove flag as soon as action is taken
- Internal communication
 - Notes in harm reduction binder
 - Notes in Scriptpro

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New Note		
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Opportunities for Growth

- Community engagement
 - Homeless shelters
 - Opioid Treatment Program
 - Powwows
- Talk about your program
- Ask questions about other programs or services in your area

What Works Well

- People know where to find us
 - Consistent hours
 - Consistent location
- Always a pharmacist available
 - 10 pharmacists and typically 1-2 students
- Private space
 - Same space used for all pharmacy services
- Lab available during harm reduction program hours
- Ability to test and treat for STIs/HCV within the pharmacy
- Same Day clinic and ER on site if needed

What Could Be Better

- Multiple staff might be a disadvantage
- How do we engage more with patients
- Consider adding fentanyl or xylazine test strips
- Input from people with lived experience
- Offer rapid testing
- Remove barriers for HCV treatment
- Could offer additional supplies

Key Takeaways

- It is ok to start small
 - Growth provides an opportunity for education/conversation
- Be flexible
- Alternate forms of communication are needed
- You don't have to be an expert
- We are always learning

Resources

Materials for Syringe Services Programs: A Guide for Staff & Volunteers | NASTAD

Safer Drug Use Technique | Bevel Up (bvlup.com)

National Harm Reduction TA Center

NASEN | North America Syringe Exchange Network: NASEN Directory

Questions?