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Accessing Opioid Use Disorder Resources in Vermont

COMMUNITY HEALTH CENTERS OF BURLINGTON
BY: WENDY HOU
FEBRUARY 2019-MARCH 2019
MENTOR: HEATHER STEIN, MD
According to the CDC, drug overdoses killed 70,237 Americans in 2017, an increase of about 9.6% from 2016.

In 2016, more than 46 people died every day from prescription opioid overdoses.

There were 101 opioid-related overdose deaths in Vermont in 2016. This is a rate of 18.4 deaths per 100,000 Vermonters, which is higher than the national rate of 13.3 deaths per 100,000 individuals.

According to a study conducted by the Johns Hopkins Bloomberg School of Public Health which looked at data from the National Survey of Drug Use and Health from 2004-2013, 80% of people with opioid use disorder are not getting treatment.
According to the CDC, opioid overdoses accounted for 830,652 years of life lost among people < 65 years of age in 2008.

Prescription opioid overdose rates are highest among people aged 25-54 years.

The economic burden of opioid use disorder (OUD) is estimated at $78.5 billion per year.

Increased health care and substance abuse treatment costs contribute $28.9 billion.
Voices in the Community

Perspectives from community members on a panel from the Opioid Use Disorder: What is Our Role in Building a Humanistic Response? conference on their experience with opioid use disorder and seeking help:

- “Chittenden Clinic met me where I was at in my addiction.”
- “I needed help, and [Safe Recovery] called back in 10 minutes to schedule my appointment.”
- “I think it’s important to be aware of the innovative services for OUD available in Vermont.”

Perspectives from staff members from Turning Point on the services they offer for individuals struggling with OUD:

- “At Turning Point we offer safe spaces, peer support, and resources such as job referrals and resume workshops for individuals.”
- “It really makes a difference to talk to someone who knows where you’re coming from.”

Heather Stein, MD from CHCB:

- “One quarter of my patient visits are usually for suboxone refills, plus or minus another medical issue.”
- “Patients’ reluctance to seek treatment for OUD may stem from uncertainty of how much independence they will lose, what their days will look like.”
Need, Methodology, and Intervention

- **Need:**
  - Easily accessible handout of opioid use disorder resources with brief descriptions and contact information to offer patients at CHCB

- **Methodology:**
  - Interviewing healthcare providers at CHCB about their experience with the opioid epidemic in Vermont
  - Attending the Opioid Use Disorder: What is Our Role in Building a Humanistic Response? conference at UVMMC and listening to panel members consisting of administrators from Turning Point and Safe Recovery, as well as community members personally affected by opioid use disorder
  - Online search and review of Vermont resources for opioid use disorder and compilation of resources into a concise handout for patients interested in seeking medication-assisted treatment (MAT) and/or non-MAT services

- **Intervention:**
  - Making physical handouts of local opioid use disorder resources available to CHCB to distribute to patients
Results and Response

- Results:
  - Handout was given to medical director of CHCB to implement in the office

- Response:
  - Project was well received by staff who stated that there was a clear need for a handout on opioid use disorder resources
Effectiveness and Limitations

- **Effectiveness:**
  - More data is needed for the effectiveness of the handout to be evaluated

- **Limitations:**
  - Short timeline of project limits assessment of effectiveness
  - Intervention only staged at CHCB
  - Only CHCB providers were interviewed in person about their experiences with opioid use disorder patients
  - Only qualitative responses were collected on effectiveness of brochure
    - Quantitative, long-term data needed for a clearer view of impact on CHCB patients seeking treatment
  - Handout needs to be updated as resources change and become available in VT
Future Recommendations

- More in-depth interviews conducted with local health centers on opioid use disorder patients in Vermont needed to elucidate patient and provider experiences with the current systems.

- Involving and visiting a greater variety of health centers would help with compiling a more accurate description of services offered at each center.

- Surveys need to be conducted at CHCB to assess if the handout was of any use in making it easier for opioid use disorder patients to access treatment, and if so, making the handout available to other health centers.

- A longer timeframe with which to conduct future projects.
References


Thank you for agreeing to be interviewed. This project is a requirement for the Family Medicine clerkship. It will be stored on the Dana Library ScholarWorks website. Your name will be attached to your interview and you may be cited directly or indirectly in subsequent unpublished or published work.

The interviewer affirms that he/she has explained the nature and purpose of this project.

The interviewee affirms that he/she has consented to this interview.
  - Yes ___X___ / No ____

If not consenting as above: please add the interviewee names here for the department of Family Medicine information only.
  - Name: ______________________________________________________________