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Samantha Bissonette

The University of Vermont

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Improving Awareness About Opiate Support Programs in Lamoille County

Samantha Bissonette
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Stowe Family Practice
Preceptor: Dr. Katie Marvin
Problem Identification and Description of Need

- Despite Vermont having doubled the rate per 10,000 people ages 18 to 64 receiving Medication Assisted Treatment (MAT) for Opiate Use Disorder (OUD) since 2012, there are still numerous barriers preventing patients from seeking treatment including:
  - Lack of health insurance
  - Lack of contact with medical providers
  - Fear of stigma
  - Information about treatment and support was too confusing or difficult to find
  - Services are too far from home
  - Lack of Transportation
  - Worry about how it will affect employment, parenting

- Additionally, Opiates in Vermont continue to be a problem: As of 9/15/19, there have been 87 deaths in Vermont that are attributed to opiate overdose (5).

- There is currently no statistical information in Vermont on how many people with OUD are seeking care, and of those who make treatment inquiries, how many find their way into treatment. Dr. Rawson at UVM states that “as Vermont policy makers attempt to better understand the size of the opioid addiction problem in Vermont, the failure to systematically collect these data seems to be a missed opportunity” (4).
9% of Lamoille County residents report having no health insurance (3)

12% of adults in Lamoille County do not have a regular physician, and the doctor to patient ratio is 1,150:1. The mental health worker to patient ratio is 240:1. (2)

UVM Researcher Dr. Rawson states that “The Northeast region has suboptimal access to spoke services and is disproportionally served by hubs.” (4)

87 people in Vermont have died by overdose this year (5)

Rural Areas, like Lamoille county, are more likely to experience transportation barriers, which puts patients at higher risk for poor health outcomes (1)

There is a substantial number of opioid users in Vermont who are not accessing treatment due to distance and other logistical issues (4)

Public Health Toll & Local Considerations
Community Perspective

◊ Lamoille County Sheriff Roger Marcoux, who has been instrumental in having all Lamoille County Sheriff's hand out Opiate Support Services information card on opiate-related calls.

◊ “Prior to the cards, Police and the public did not exactly know which of the many state programs or services applied to a particular issue. Many state programs overlap and it is very confusing as to who does what and when. The cards made it easier to direct people to the help they needed.”

◊ “The cards help us get the process started. I think that LE (law enforcement) officials have come a long way in understanding the scope of the problem and understanding that certain people need health related assistance and jail does not solve their addiction issue. Solve the issue and then the LE interaction stops.”

◊ “For the last four years the Lamoille County Sheriff’s Department has sponsored an opioid forum to talk about those issues with the public. We have partnered with people in recovery along with people in treatment to educate the public regarding treatment, recovery, housing and jobs. All of the community partners must work together in order to promote understanding of what works and what doesn’t work. The message is that people can recover and become productive members of the community. Support and understanding help ease people’s minds and hopefully lessons the fears and embarrassment that associated with the stigma.”
MAT Patient Perspectives

- 5 MAT patients were interviewed. They struggled with opiates between 4.5 and 15 years (average of 7.9 years) prior to seeking treatment. Only 1 of the patients interviewed entered treatment by calling the MAT line.

- All 4 of the patients who did not enter treatment through the MAT line reported that they would have sought treatment earlier had they been given or seen this card while they were struggling.

- Top 3 barriers to Treatment: worry about negative opinions from others (5/5), did not know where to find help or resources were confusing to navigate (3/5), worried that getting treatment would affect employability or ability to work (3/5).

- Representative answers when asked what they think the general public should know about MAT and OUD:
  - “It affects everyone. There’s doctors and lawyers and teachers that don’t ‘look the part’.”
  - “Lots of people don’t get help due to embarrassment, but that embarrassment can kill you”
  - “I wish people realized how common addiction is in our communities.”

- Representative answers when asked what advice they had for physicians
  - “Just be patient, and be there”
  - “Ask your patients their opinions. Get to know your patients, you will both benefit.”

- How patients describe their experiences with MAT thus far:
  - “It’s been hard, but good, and rewarding”
  - “It wasn’t what I was afraid it was going to be like. Nobody was judgmental, my privacy was kept, and everyone was caring and genuine.”
  - “The whole MAT team and program is great”
Intervention & Methods

- Built upon an existing initiative in coordination with the North Central Vermont Recovery Center (NCVRC) via aiding in the dissemination process of Harm Reduction Kits (including Lamoille County’s opiate support services information card) in local primary care offices and community centers.
- Interviewed the Lamoille County Sheriff to discuss the role that LEOs often play in someone’s journey to treatment for Opiate Use Disorder
- Interviewed patients receiving MAT at Stowe Family Practice about accessibility and feasibility of treatment and support services for Opiate Use Disorder
- Communicated with Vermont Department of Health representatives who are in the beginning stages of employing a similar opiate support information card to emergency services personnel state-wide. Informed them about dissemination processes in Lamoille County which may serve as a future goal for their initiative.
Response to Intervention

✧ Favorable response from patients, providers, and local sheriffs department
  ✧ Patients feel more welcome by seeing information about opiates in public places. One patient noted that continuing to normalize addiction will be important in reducing stigma that prevents many patients from seeking care.
  ✧ Providers have seen patients taking the card to bring home to a family member struggling with addiction, which they view as a positive first step in supporting patients with OUD. One staff member hopes to see these cards around the community more regularly.
  ✧ The local sheriff’s department reports that handing out the cards has reduced the confusion about where to refer a patient to, saved time in stressful situations, and opened the door to more positive and effective encounters between LEOs and those struggling with addiction.

✧ Vermont Department of Health Alcohol and Drug Abuse Program staff responded favorably to hearing new ideas for their future state-wide initiation of a similar information card.
Effectiveness and Limitations

Effectiveness:

- It would be helpful to have hubs and spokes in Vermont keep record of the number of patients inquiring about MAT, number of patients who go on to receive MAT, how the patients found out about MAT, barriers that prevented them from receiving MAT sooner, and perceived shortcomings with current hub & spoke system. A questionnaire like this would help identify and quantify limitations to the current hub and spoke model of care.

- It would also be helpful to keep track of patients who sought treatment because they received an opiate support services card. This data would support continued implementation of the cards and evidence of success for other counties interested in initiating a similar tool.

Limitations

- The information cards and harm reduction kits are currently only reaching populations that receive medical care and/or are utilizing the recovery center or emergency services.

- Increasing the accessibility of opiate support services has little effect on the stigma towards addiction that commonly prevents patients from seeking treatment. Improving public knowledge about addiction, stigma, and the efficacy of MAT through public outreach may encourage those who are struggling to seek treatment.
Future Recommendations

- Improve public knowledge about OUD, efficacy of MAT, and publicize MAT success stories to reduce stigma and encourage treatment
- Once stabilized on MAT, have patients complete a questionnaire about access and barriers to receiving care to better understand how to encourage current addicts to receive treatment
- Continue to disseminate opiate support information cards and harm reduction kits, and expand dissemination locations to include:
  - Community Centers
  - Emergency Rooms, Urgent Care Facilities
  - Schools
  - Grocery Stores
  - Public Transportation
  - Ads in newspapers, on television, and on the radio
Sources


