IMPROVING CARE IN BURNABY HOSPITAL: KNOWLEDGE ASSESSMENT AND TRANSLATION ON SUBSTANCE USE RESOURCES

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Introduction

- Substance-related deaths were a record high count of 2236 deaths in 2021¹.
- The Burnaby Hospital (BH) Addiction Medicine Consult Team (AMCT) was formed in in July 2021 to provide an interdisciplinary approach to patients with addiction care needs.
- However, healthcare providers in BH report a relative lack of experience, access and knowledge of addition care resources in the Fraser Health region.
- This unmet need may impact patients' access to community resources and outpatient services.

Proposed Solution

To create an easy-to-use tool that educates BH staff on substance use and its related resources

Project Design and Strategy



ASSESS Survey staff on initial knowledge of substance use

resources

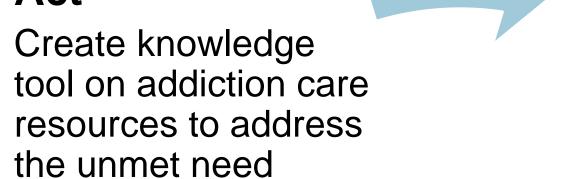


DEVELOP Create and distribute a knowledge translation tool with local substance use



EVALUATE Assess efficacy of the tool and change in patient care in BH

Act Create knowledge tool on addiction care resources to address

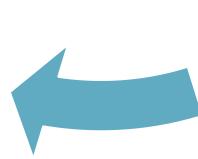


resources



Study

Identify gaps in knowledge on addiction medicine resources



Do Evaluate care providers' knowledge and experience

Plan

survey

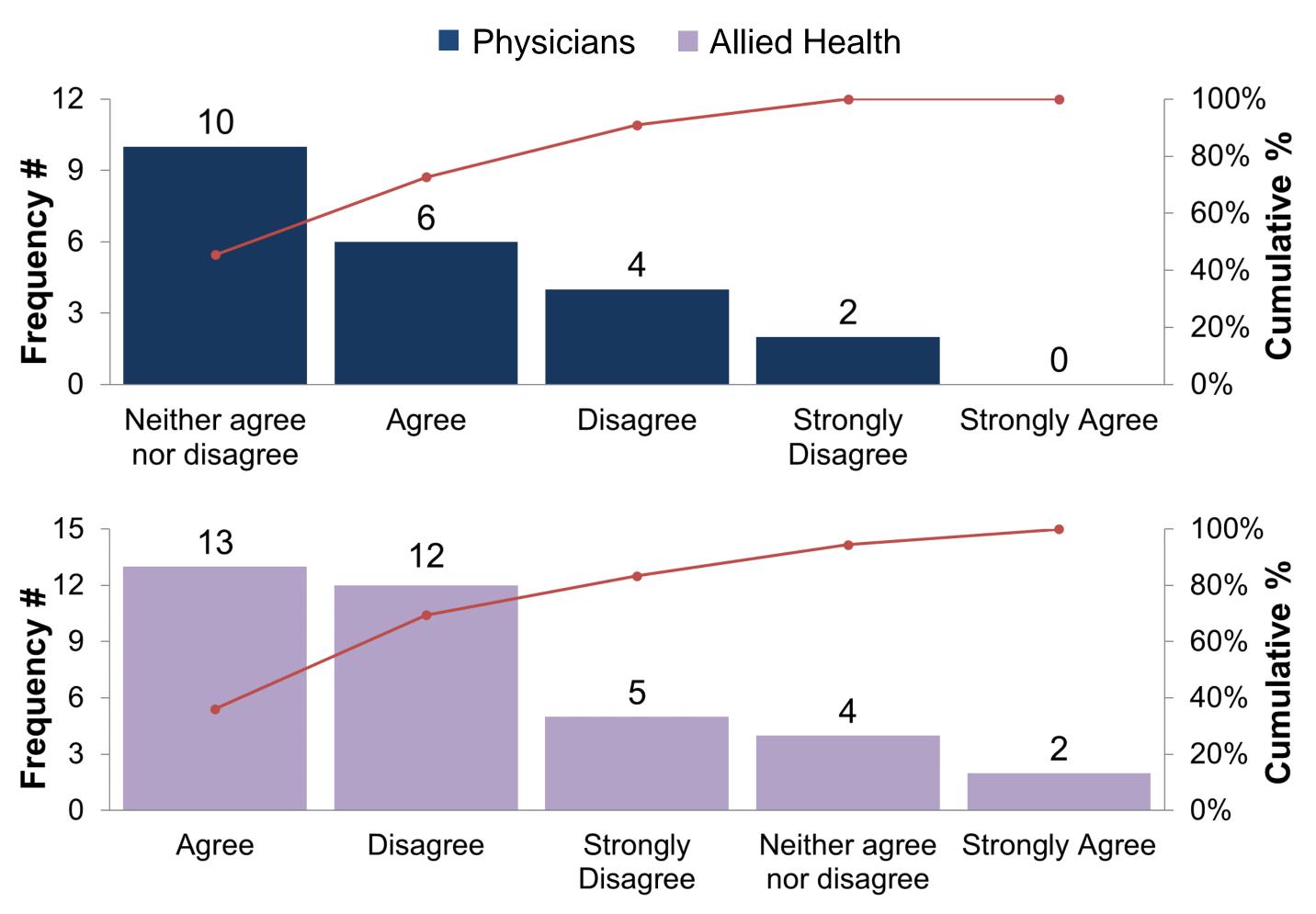
Develop needs

assessment

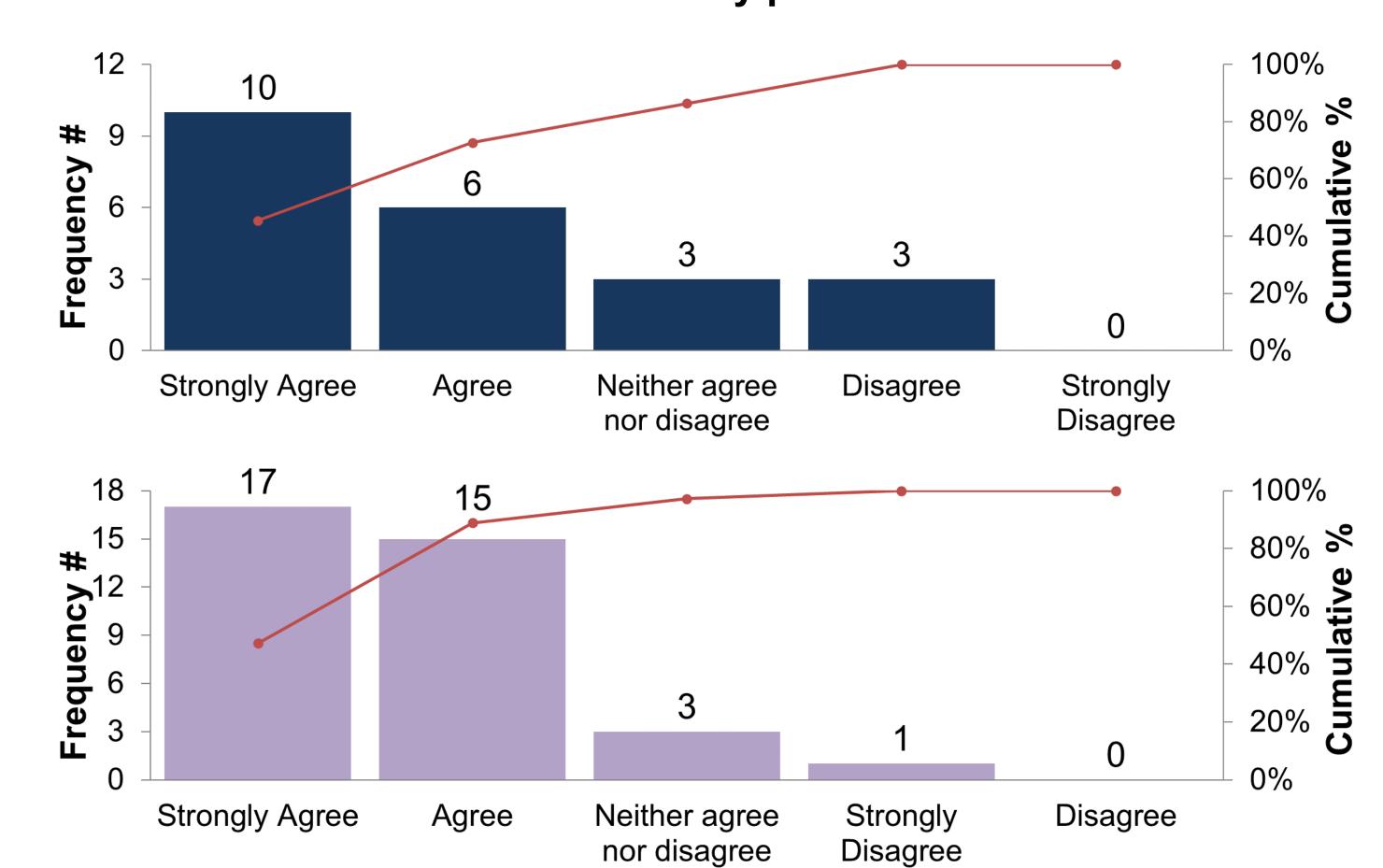
Stage 1: Assess – Results

22 physicians and 36 allied healthcare workers (nurses, OTs, PTs, dieticians, social workers) responded to a 5-item Likert scale questionnaire on addiction medicine proficiency and experience.

"I know where to direct my patients when they are looking for addiction resources to access."



"Learning more about addiction medicine resources would be beneficial to my practice."



Implications

- 67.2%* of providers report not having proficient knowledge on addiction medicine (AM) resources.
- 63.6%* physicians and 63.9%* allied health workers report a desire to learn more about AM resources, but only 45.5%* and 44.4%* respectively know where to go to access more information.
- Findings suggest guidance, education and consolidation of AM resources would be beneficial for Burnaby Hospital staff and their practice.

* = not shown in graphs

Next Steps

Tool Creation

(Currently)

- Establish list of local resources on addiction medicine
- Design modality for dissemination

Evaluate Tool and Change

- Modify and improve tool based on feedback
- Re-survey on addiction resource knowledge
- Analyze patient engagement with services

Acknowledgements

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References

BC Coroners Service. (2022) Illicit Drug Toxicity Deaths in BC January 1, 2012 – March 31, 2022. Retrieved from the Government of BC website: https://www2.gov.bc.ca/assets/gov/birth-adoption-deathmarriage-and-divorce/deaths/coroners-service/statistical/illicit-drug.pdf







