

Practice based/ Service Delivery Abstract Template

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Title: 'Just Like Any Other Patient': Client and Health Provider Perceptions Following Transfer of Opioid Agonist Treatment Clients to Primary Care

Authors:

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Background:

Despite numerous initiatives, prescription of opioid agonist treatment (OAT) in NSW primary healthcare settings remains low, particularly in rural areas. This study presents findings from long-term follow-up of clients and health providers of a co-designed model for transition of OAT clients from secondary to primary care. We discuss factors of significance for long term client retention.

Description of Model of Care/Intervention:

A tailored support intervention was implemented to transition clients from public OAT services to primary care. This intervention included nurse-led support, access to a local helpline, in-service education, administrative advice, and patient advocacy. To assess the intervention, client and health professional interviews were conducted at intervals from transfer and up to 15-months post-transfer.

Effectiveness/Acceptability/Implementation:

Eleven clients were transitioned from an OAT service to one of eight primary care practices (nine General Practitioners [GPs]) and have remained there for over 12 months. Clients expressed how this project has improved their lives. While one client reported minor challenges in appointment scheduling, most providers had a positive perception toward OAT clients. These GPs welcomed the opportunity to provide care to clients within their practices. No clients have returned to the hospital -based services, and all remain on OAT.

Conclusion and Next Steps: With appropriate selection and preparation, people who are stable in treatment can successfully be transitioned to primary care. With appropriate support from public OAT services, GPs were willing to treat people who are on OAT and retain them long term. Seven of these providers had not prescribed OAT previously. Based on their positive experience with the pilot model, one GP recommended additional colleagues who expressed their willingness to begin prescribing OAT. Model testing is ongoing and will review the efficacy of supports offered to health providers and clients.

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Implications for Practice or Policy: Unaccredited GPs who take on a low number of stable clients may help to normalise prescribing OAT in primary care. They may represent an underutilised resource to increase OAT prescribing.

Disclosure of Interest Statement

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