

STANDARDIZATION OF OPIATE SUBSTITUTION THERAPY IN BRENT, LONDON

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1. Central and North West London NHS Foundation Trust

Introduction

NICE recommends that new clients in treatment should take their daily doses of OST under direct supervision of a competent healthcare professional for up to 12 weeks or less if the client's compliance is assured and a risk assessment is completed. Supervised consumption is also recommended following a break in OST, or if there is a significant increase in the dose prescribed

Aims and Hypothesis

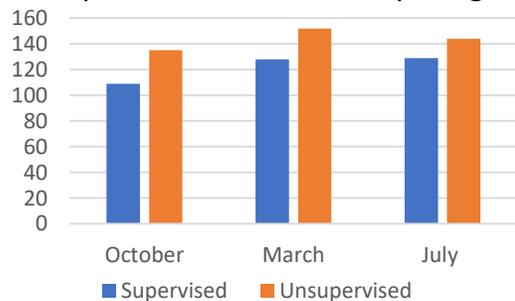
The aim of this Quality Improvement (QI) project was to standardize the use of Opioid Substitution Therapy (OST) in Brent London to improve patient experience, streamline supervision level, and reduce money spent on supervision.

Methods-

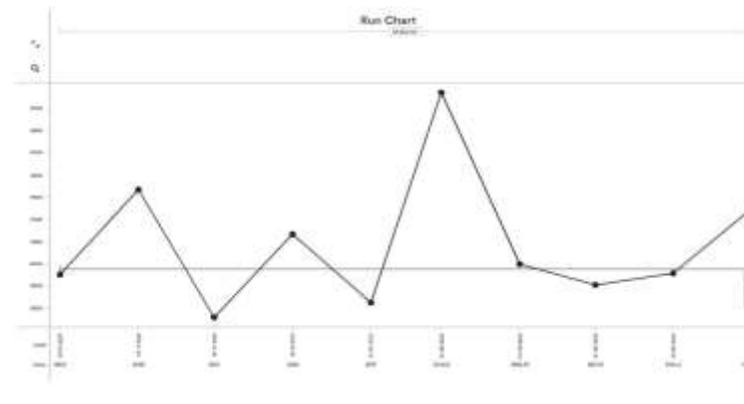
- Developing standardized OST Questionnaire for starting unsupervised OST
- Staff training to use questionnaire and undertake risk assessment
- Collecting data on patient satisfaction and expenditure each month on supervision

Result

The protocol increased patient satisfaction. Despite this, overall supervision costs rose, primarily due to a surge in new patient enrolment requiring supervised dosing.



Baseline: 44.67% of patients were on supervised OST, rising to 45.71% in March and 47.25% in July. The increase reflects guideline-driven requirements for New patients to complete atleast 2 months of supervised doses



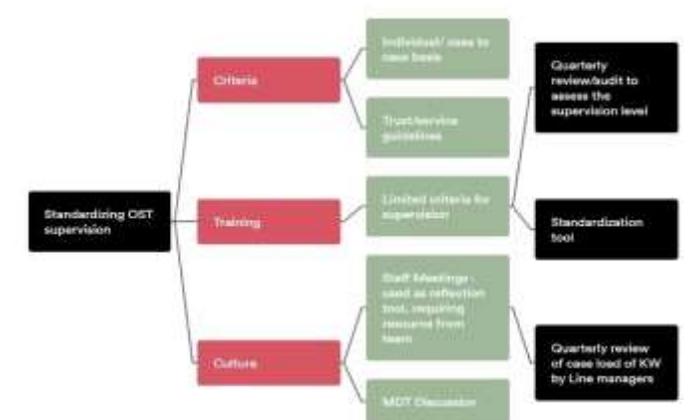
This chart represents the money spent each month on supervision. Each supervised dose cost 2.5 £

References-

1. Rules and guidance for Pharmaceutical Manufacturers and distributors (Orange Guidance)
2. CNWL opiate substitution guidance

Acknowledgement-

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Methology and Driver Diagram