

# Engaging patients in OUD Treatment: *Learnings from CHAMP*

Elizabeth J. Austin, PhD, MPH  
September, 2023

SCHOOL OF PUBLIC HEALTH  
HEALTH SYSTEMS AND  
POPULATION HEALTH  
UNIVERSITY OF WASHINGTON



1

## Overview

- > Patient engagement in OUD treatment is essential
- > Primary care teams may use many strategies to engage patients
- > More needs to be understood about best practices for engaging patients

HEALTH SYSTEMS AND POPULATION HEALTH  
UNIVERSITY OF WASHINGTON SCHOOL OF PUBLIC HEALTH

2

## Agenda

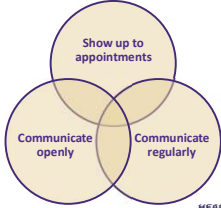
- > Share learnings from the CHAMP study about patient engagement
  - How engagement is assessed
  - What strategies are used to engage patients
  - What makes engaging patients easy or hard
- > Discussion & feedback
  - What would you add or change?
  - How should we share these learnings with other clinics?

HEALTH SYSTEMS AND POPULATION HEALTH  
UNIVERSITY OF WASHINGTON SCHOOL OF PUBLIC HEALTH

3

## How do we assess engagement?

A patient is engaged in their OUD treatment when they:



HEALTH SYSTEMS AND POPULATION HEALTH  
UNIVERSITY OF WASHINGTON SCHOOL OF PUBLIC HEALTH

4

### How do we assess engagement?

Very engaged in care

Not engaged in care

HEALTH SYSTEMS AND POPULATION HEALTH  
UNIVERSITY OF WASHINGTON | SCHOOL OF PUBLIC HEALTH

5

### Discussion

- > Thoughts & feedback?
- > What other ways do you assess a patient's engagement in care?
- > Are there measures of engagement you'd like to see or use in routine care?

HEALTH SYSTEMS AND POPULATION HEALTH  
UNIVERSITY OF WASHINGTON | SCHOOL OF PUBLIC HEALTH

6

### How do we engage patients?

- Environment of disclosure
- Normalize treatment
- Gentle persistence
- Avoid stigmatizing responses
- Goal-oriented
- Encouragement

HEALTH SYSTEMS AND POPULATION HEALTH  
UNIVERSITY OF WASHINGTON | SCHOOL OF PUBLIC HEALTH

7

### How do we engage patients?

- Environment of disclosure**
  - Creating a safe space to discuss OUD
  - Placing OUD in a biomedical context, like any other co-morbidity
- Normalize treatment**
  - Normalizing getting OUD treatment in primary care
  - Providing education that is tailored to a patient's opioid use history
  - Setting expectations for how treatment will unfold
- Gentle persistence**
  - Offering multiple communication avenues and modalities
  - Outreaching to patients informally, just to check in

HEALTH SYSTEMS AND POPULATION HEALTH  
UNIVERSITY OF WASHINGTON | SCHOOL OF PUBLIC HEALTH

8

### How do we engage patients?

- Avoiding stigmatizing responses**
  - Prioritizing patient wellbeing over treatment requirements (e.g., harm reduction)
  - Using scenarios of conflict as information-gathering opportunities
- Goal-oriented**
  - Grounding treatment in patient goals for quality of life
  - Tailoring treatment requirements to individual patient goals
- Encouragement**
  - Connecting with patients beyond treatment (e.g., celebrating birthdays or important anniversaries)
  - Looking for opportunities, big or small, to celebrate accomplishments

HEALTH SYSTEMS AND POPULATION HEALTH  
UNIVERSITY OF WASHINGTON | SCHOOL OF PUBLIC HEALTH

9

### How do we engage patients?

- Environment of disclosure
- Normalize treatment
- Gentle persistence
- Avoid stigmatizing responses
- Goal-oriented
- Encouragement

HEALTH SYSTEMS AND POPULATION HEALTH  
UNIVERSITY OF WASHINGTON | SCHOOL OF PUBLIC HEALTH

10

### Discussion

- > Thoughts & feedback?
- > How might this be used in practice?
- > How should we share this with other clinical teams?

HEALTH SYSTEMS AND POPULATION HEALTH  
UNIVERSITY OF WASHINGTON | SCHOOL OF PUBLIC HEALTH

11

### What makes engaging patients easy or hard?

```

    graph LR
      A[PATIENT FACTORS] --> B[CLINICIAN FACTORS]
      B --> C[HEALTH SYSTEM FACTORS]
  
```

- PATIENT FACTORS**
  - Inconsistent phone use
  - Negative attitudes about treatment
  - Other stressors in their lives
- CLINICIAN FACTORS**
  - Confidence in skills for OUD treatment
  - Harm reduction beliefs
  - Feeling discouraged when patients fall out of care
- HEALTH SYSTEM FACTORS**
  - Inflexible schedules
  - Limited time outside of patient care
  - Team collaboration
  - Patient portals and other EMR tools
  - Organizational vision for OUD care

HEALTH SYSTEMS AND POPULATION HEALTH  
UNIVERSITY OF WASHINGTON | SCHOOL OF PUBLIC HEALTH

12

**Discussion**

- > Thoughts & feedback?
- > What did we miss? What would you add?
- > What types of resources would you find helpful?

HEALTH SYSTEMS AND POPULATION HEALTH  
UNIVERSITY OF WASHINGTON SCHOOL OF PUBLIC HEALTH

13

**Contact**

Elizabeth Austin, [austie@uw.edu](mailto:austie@uw.edu)

HEALTH SYSTEMS AND POPULATION HEALTH  
UNIVERSITY OF WASHINGTON SCHOOL OF PUBLIC HEALTH

14