

# Creating Caring Connections in the Emergency Department

Category: Oral Presentation

## Abstract Body

Health Sciences North in Sudbury, Ontario launched the Addictions Medicine Consult Service (AMCS) in 2019 with the goal to improve quality of care for the individuals with problematic substance use or substance use disorders. The Sudbury district has higher than provincial averages rate of use for alcohol, and a higher than provincial average mortality rate related to Opioids. The Emergency Department (ED) is the access point for most people requiring acute services from the hospital. Making the ED the first connection point for AMCS in order to help address the needs of patients presenting with substance use concerns is thought to be an area of quality improvement for the hospital.

The AMCS referral data demonstrated a prevalence in inpatient referrals for opioid use, and stimulant use, but little was known about those who are not referred to the service, what substances they used or what care they required. A retrospective chart review was completed for all Emergency Department charts that were coded as Substance Use as the main reason for presentation for fiscal year 2021-2022. The purpose of the review was to use the findings to modify program policies and processes to be ideally aligned to meet the needs of the users. Alcohol and opioid use disorder (AUD; OUD) were the most prevalent conditions representing 48% and 31% of presentations to the ED respectively. However, AMCS referrals occurred in only 7% of all substance use presentations, which had been disproportionately focused on OUD. In addition to frequency of use, those with OUD were more likely to be unhoused, and those with AUD more likely to be housed.

The findings informed an improvement plan for 2023-2024 which includes increasing in-person patient contact during AMCS hours starting April 2023; increasing collaborative care through daily contact by the AMCS registered nurse or nurse practitioner, with the emergency department team including registration, learners, nursing, mental health staff and physicians; adding a phone call follow up for off hours referrals and increasing the referrals to the most appropriate community team, based on the patient's needs and goals.

At the time of the presentation, the first and a portion of the second quarter data will be reported.

## Key Words

- Alcohol
- Opioids/Opiates
- Prevention/Harm Reduction

- Quality Improvement
- Treatment Models/Programs

#### Learning Objective # 1

Discover the benefit of using broader evaluation processes to achieve a more sensitive perspective, and help identify referral gaps in the Emergency Department related to substance use care.

#### Learning Objective # 2

Examine the effectiveness of addictions consult service changes to guide patient care improvements and quality outcomes

#### Reference # 1

Myran, D.T., Friesen, E.L., Pugliese, M., Milani, C. & Tanuseputro, P. (2023). Changes in mortality for the general population and individual with pre-pandemic acute care for alcohol or opioids during the COVID-19 pandemic in Ontario, Canada. *The Canadian Journal of Psychiatry*, doi: 10.1177/07067437231

#### Reference # 2

Baldassarre, M., Caputo, F. ....Domenicali, M. (2018). Accesses for alcohol intoxication to the emergency department and the risk of re-hospitalization. *Addictive behaviors*. 77(1-6)

---

#### **Lead Author**

Mrs. Laura Hill

Nurse Practitioner Addiction Medicine Consult Service | Health Science North/Horizon sante nord

---

#### **Co-Author**

Prof. Roberta Heale

Professor | Laurentian University

---

#### **Co-Author**

Mrs. Adele Bodson

Quality and Education Lead for Addiction Services | Health Sciences North