

Facilitators and barriers to implementing measurement based care at The Royal's Substance Use and Concurrent Disorders Program

Category: Symposium Presentation

Abstract Body

Measurement based care (MBC) is well-known to improve patient access to care and outcomes, including for individuals living with substance use disorders and co-occurring mental health problems. Despite the benefits to patients, providers, programs, and the overall health care system, MBC is not routinely nor widely implemented in clinical settings and services. In this presentation, we will provide an overview of the findings from implementing MBC in diverse treatment settings, including an inpatient concurrent disorders program, a day treatment program, and virtual treatment services within The Royal Ottawa Mental Health Centre's Substance Use and Concurrent Disorders Program. The value of MBC to clinical service delivery as well as program development and quality improvement opportunities will be highlighted. In particular, key implementation drivers will be discussed, including: co-design and partnership with persons with lived expertise, clinicians, researchers, and administrators; collaborative integration within clinical interactions; the importance of digital health solutions; and leadership and workforce development and support. Barriers to implementation will also be discussed as well as key lessons learned and strategies used to mitigate these barriers and support change.

Key Words

- Assessment/screening
- Behavioural Interventions
- Quality Improvement
- Recovery
- Technology

Learning Objective # 1

To understanding the theoretical framework of measurement-based care for substance use disorders.

Learning Objective # 2

To understand measurement-based care as a strategy for improving quality of care and conducting applied clinical research.

Reference # 1

<https://jamanetwork.com/journals/jamapsychiatry/article-abstract/2718629>

Reference # 2

<https://pubmed.ncbi.nlm.nih.gov/32811634/>

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