

**Submission Id: 4817**

**Title**

*Implementation and Evaluation of Opioid Use Disorder Learning Sessions for Primary Care Teams*

**Priority 1 (Research Category)**

Education and training

**Presenters**

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**Abstract**

Context: Opioid use disorder (OUD) is a public health crisis in the US. Recent data suggests that only 1 in 4 individuals needing OUD treatment receive medications for OUD (MOUD) and the demand for OUD treatment is exceeding capacity in specialty programs. A shortage of clinicians exist who treat patients with OUD. Primary care is best positioned to address this shortage of clinicians and gap in care, but many care teams do not have adequate education and training to treat patients with OUD. Objective: The study aims to address gaps in primary care team confidence and knowledge of OUD treatment through the implementation and evaluation of interactive OUD learning sessions. Study Design and Analysis: Participants (n=31) attended 7 online monthly OUD learning sessions. Baseline, post-session, and post-intervention surveys were administered to participants. Questions emphasized confidence and knowledge; other topics were included too. Non-parametric tests were used to compare individual responses pre- versus post- participation and to compare responses between groups. Setting: 7 primary care practices. Population studied: Primary care physicians and team members who were not physicians. Intervention: 7 monthly online OUD learning sessions from September 2021 through March 2022. Session topics included evaluation/diagnosis of OUD, induction protocols with fentanyl concerns, dosing and monitoring for safety and diversion, among others. Outcome Measures: Changes in confidence and knowledge over time for group and individual and post-session measures for OUD practical knowledge, OUD management strategies, and subject matter expert knowledge. Results: Baseline (n=31), post-session (n=11 to 20), and post-intervention (n=21) surveys were received. Significant changes occurred in confidence and knowledge for all participants for most topics in the learning sessions. Physicians had greater increases than non-physician participants in confidence in dosing and monitoring for diversion ( $p = 0.047$ ) and had greater increases in knowledge in dosing and monitoring for safety ( $p = 0.033$ ) and dosing and monitoring for diversion ( $p = 0.024$ ). Conclusions: Team-based online learning sessions could aid in caring for patients with OUD. Scaling this research and increasing time for follow-up, may provide insight as to whether these learning sessions changed prescribing behaviors, clarified care team role differentiation, and improved individual patient or population health outcomes.