

EVALUATION OF A GP AND DRUG & ALCOHOL SHARED CARE PROGRAM USING HEALTH OUTCOMES OF CLIENTS IN SOUTH EASTERN SYDNEY, AUSTRALIA

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Introduction and Aims: The Shared Care Program (SCP) has been available since 2012 to general practitioners (GPs) in south eastern Sydney. A specialist drug and alcohol nurse is available to support GPs, co-manage clients and facilitate referrals where required. Patients can be referred from GPs or public D&A treatment services. We assessed whether the SCP is effective for supporting D&A treatment in GP settings.

Design and Methods: Data was collected by the SCP nurse during routine care using the Australian Treatment Outcomes Profile (ATOP), a 1-page validated clinical outcomes monitoring tool administered at start of service and upon clinical review or discharge.

Results: Start of Service data was available for 152 of 367 clients presenting between January 2012 and September 2015; 93 clients completed at least one Progress ATOP. The mean age of clients was 44 years and 66% were female. The 93 clients with more than one ATOP completed comprised 61 GP-referred clients, and 32 opioid treatment program (OTP)-referred clients.

At baseline, GP-referred clients were more likely to have lower quality of life, more housing instability and more abstinence days. At review, GP-referred clients reported significant increases in physical wellbeing, housing stability and quality of life, while OTP-referred clients showed significant increase in abstinence days. Both groups showed improvement in drug use days, housing status and psychological wellbeing.

Discussion and Conclusions: SCP clients showed improvements on drug use and wellbeing markers. Our study shows SCP can enhance the capacity of D&A clients to receive appropriate treatment in GP settings.

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