

Mobile Safer Opioid Supply Program: An Innovative Harm Reduction Approach

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**PARKDALE
QUEEN WEST**
Community
Health Centre

The Need for Mobile SOS



Limited capacity



Barriers for individuals
who are precariously
housed/unhoused

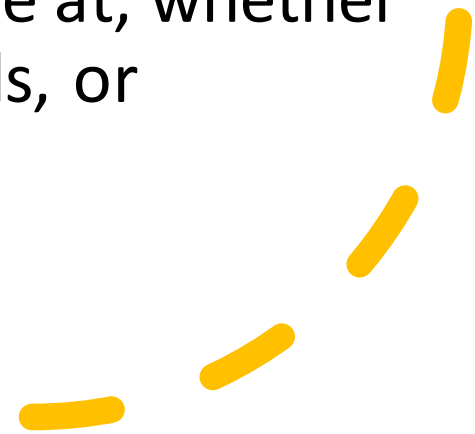


Limited providers to
deliver service



Rigid shelter adherence
protocols and frequency
of discharges

Mobile SOS Program

- LIHC's HOME program started in 2020
 - PQWCHC program launched in November 2021
 - Consists of two Nurse Practitioners (NP), one Registered Nurse (RN), and a Case Manager
 - Assists clients to navigate the healthcare system and links them to wrap-around services
 - Provides services where clients are at, whether respites, shelters, sheltering hotels, or recovery sites
- 



Mobile SOS Goals of Care

By meeting clients where they are at, our team aims to:

- Promote client engagement
- Retain clients
- Minimize the no-show rate for appointments
- Connect client to supportive health and social care



Mobile SOS & Harm Reduction



- Access to pharmaceutical opioids of known quality, quantity, and strength
- NOT abstinence based
- Promotion of harm reduction sites, techniques, and supplies
- Decrease OD rates
- Decrease infection rates



Referral Pathway

- Approved referral sources include:
 - iPHARE (Integrated Prevention and Harm Reduction Initiative)
 - LAUNCH (FKA MOVID - Mobile Outreach Harm Reduction)
 - The Recovery Site
 - Shelter operators
- Inter-team transfers, peer- and self-referrals are alternative paths
- Coordination with partners is key to clients' success

Onboarding Process



Referral Received



Screening Assessment



Onboarding

- The referral source is engaged in every step of this process

Nursing Onboarding Process



Pre-intake:

Chart creation

ConnectingOntario review

Alert NPs to enter lab requisitions

Connecting with shelter to arrange client appointment



Intake:

Health history

Physical assessment



Post-intake:

Alert NPs of contraindications

Corroborate health history with ConnectingOntario

Fill out contact information & CPP

Case Management Intake

Case manager meets with the client to complete an informal intake based on what the client is looking to work on

- Connection to legal supports and the navigation of the legal system
- Obtaining new ID
- Filing taxes/ obtaining Notice of Assessment for housing purposes
- Appointment accompaniments
- Connection to counselling
- Support in applying for government financial assistance (i.e., ODSP, OW, CPP)
- Connection to employment and/ or peer support work
- Filling out and/ or updating housing applications
- Attending and/ or booking dental, eye, foot, and hearing appointments that often get overlooked



SOS Program Demographics

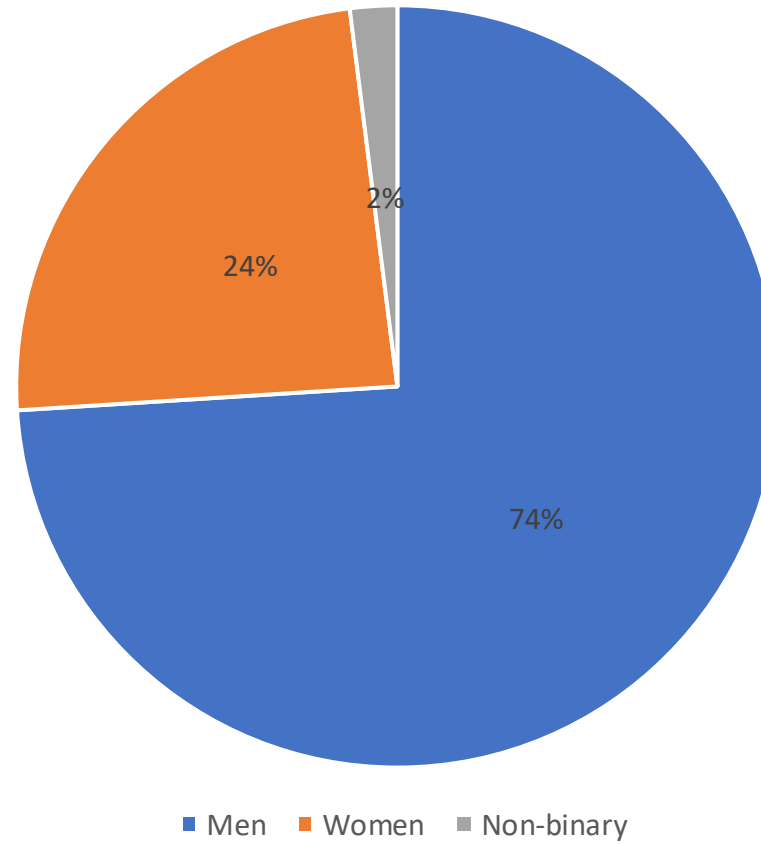
129 Referrals Received

- 50 Active
- 6 Discharged
- 4 Declined d/t OAT only preference
- 6 Transferred to fixed-site program
- 2 Referred to external SOS programs
- 18 Ineligible
- 19 Poor engagement/not interested
- 24 Unable to locate





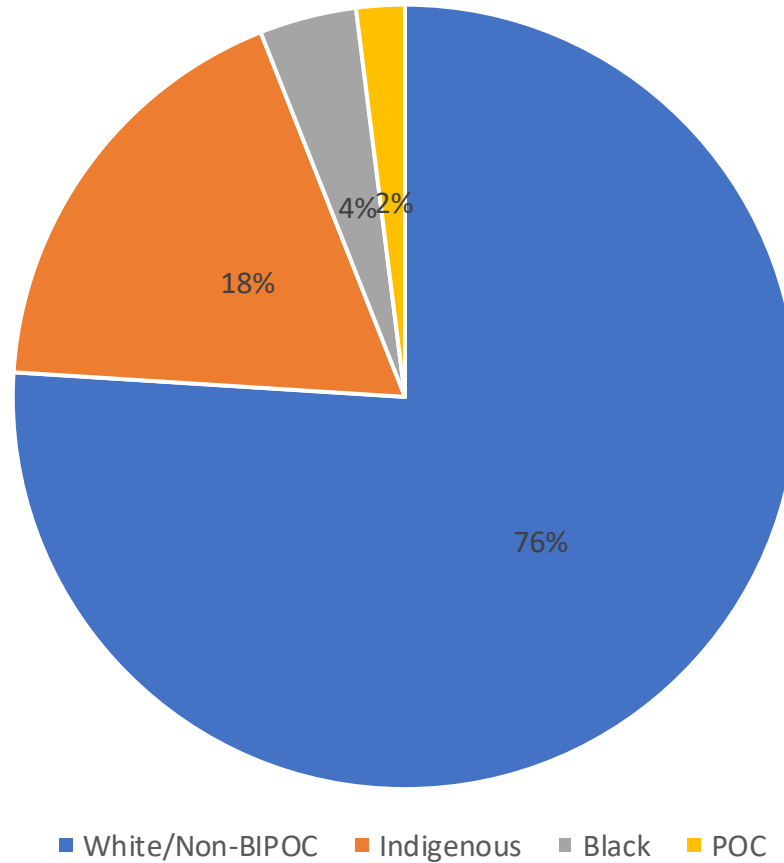
Client Demographics – Gender



Trans: 4%



Client Demographics - Race





How has SOS Changed Your Life?

Themes from data collection:

- Less fentanyl use
- Less ODs
- Less visits to the ED
- Connection to health care
- Better connection to family
- More money
- Not dopesick
- Less illegal activities
- Still alive

n = 7

Successes & Challenges

Successes

- Providing low barrier care
- Client retention and engagement
- Connecting clients to care (primary care, Hep C treatment, wrap-around services)

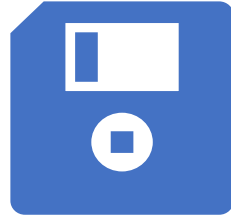
Challenges

- Collaborating with shelter operators
- Promoting SOS as harm reduction
- Following clients after discharge from shelter system

Future of Mobile SOS



Hepatitis C
management



Long term data
collection



Mobile advisory
committee



Connecting with
other mobile
teams



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Questions?

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