

STAKEHOLDER PERSPECTIVES ON IMPROVING CARE FOR TRAUMA Patients Who Use Methamphetamine

Josiah D. Morita (josiahmorita@uog.edu); Nicholas Schumann, PsyD; Alex Brito, MD; Miki Kiyokawa, MD; Sacha McBain, PhD; Josh Ng-Kamstra, MDCM, MPH | The Queen's Medical Center, Honolulu, Hawai'i

Background

- Approximately 17,000 people in the state of Hawai'i report using methamphetamine on a regular basis¹, more than twice the national average²
- Given that methamphetamine use is a risk factor for traumatic injury, providing comprehensive addiction care to trauma patients who use methamphetamine may improve health outcomes and decrease trauma recidivism
- Objective: Qualitatively assess facilitators and barriers to the implementation of a methamphetamine treatment program at a Level 1 trauma center
- The proposed methamphetamine treatment program would utilize Contingency Management, which is a behavioral intervention to provide extrinsic motivation for a reduction in stimulant use³
- Both healthcare stakeholders and patients were interviewed; qualitative results from the former are presented here

Methods

- A semi-structured interview guide was developed to query issues relevant to improving patient care and interrogate barriers and facilitators to program implementation
- Each interview was deidentified prior to transcription to ensure participant confidentiality
- A Template Analysis approach was used to code the interviews; the template was constructed iteratively using a priori themes and codes relevant to the data
- Coding was performed in duplicate prior to a consensus meeting to determine the final codes for each transcript to ensure comprehensive, accurate, and reproducible data

References: Pacific Health Analytics Collaborative. Hawaii Behavioral Health Dashboard 2020. Available at: <https://www.hawaii.edu/agng/hbhd/page01sh>.
"2017-2018 National Survey on Drug Use and Health: Model-Based Prevalence Estimates (50 States and the District of Columbia)." n.d.
Brown HD, DeFulio A. Contingency management for the treatment of methamphetamine use disorder: A systematic review. *Drug Alcohol Depend* 2020; 216:108307.

Results

A total of fifteen stakeholders were interviewed: Four trauma surgeons, two other trauma care providers, two addictions providers, two clinical specialists in disposition planning, two surgical trainees, a nursing leader, an emergency physician, and a hospital physician leader.

REPRESENTATIVE QUOTATIONS BY STAKEHOLDERS

THEME: GENERAL ATTITUDE TOWARDS PATIENTS USING METHAMPHETAMINE

- 5/15** (33.3%) stakeholders reported that their attitudes change after a positive methamphetamine screen
- 13/15** (86.7%) stakeholders believed their colleagues' attitudes change after a positive methamphetamine screen

THEME: SUGGESTED IMPROVEMENTS TO CARE

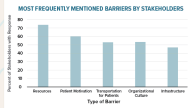
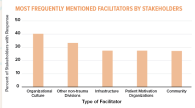
- 8/15** (53.3%) stakeholders said to increase availability of addictions care post-hospitalization
- 7/15** (46.7%) stakeholders said to bridge services between inpatient and outpatient care

THEME: GENERAL OPINIONS ON CONTINGENCY MANAGEMENT

- 13/15** (86.7%) stakeholders were not aware of contingency management
- 12/15** (80.0%) stakeholders believed that contingency management would be effective after they were given more information

“ Maybe they engage more in riskier behaviors than the general population.
It's an additional data point to help understand the patient's situation.
I've seen team members completely disregard patients.
Anything is better than nothing
From the hospital, if they went back to the community, [it would help] if there was some bridge in between.
Having open conversations with people regarding their use.
Winning a prize or getting something in return for doing something, I feel like always incentivizes people to come back and to keep going.
There's a lot of benefit to doing that. It'll definitely decrease recidivism.
”

FREQUENTLY MENTIONED FACILITATORS AND BARRIERS



Discussion

- It is essential to obtain stakeholder perspectives prior to the implementation of a methamphetamine treatment program
- Many stakeholders believed that their colleagues' attitudes change in the presence of a positive methamphetamine screen; this highlights an opportunity for more staff education on treating patients who use methamphetamine to reduce stigma.
- Providers identified that improvement in access to inpatient addictions consultation (>2 days/week), expansion in bridge services, and increased access to outpatient addictions care should be prioritized to improve patient care
- Organizational culture was found to be the most common facilitator; capitalizing on the ethos of The Queen's Medical Center as a safety-net hospital may facilitate change
- Patient motivation was seen as both a facilitator and a barrier, so obtaining patient perspectives will give more insight into if a methamphetamine treatment program would be beneficial
- Limitations: Only 15 stakeholders were interviewed, and not all professions were included; saturation may not have been fully reached for some topics

Conclusion

- Based on stakeholder responses, The Queen's Medical Center should prioritize:
 - Improving access to inpatient addictions consultations
 - Increasing staff education for treating patients with methamphetamine use disorder (MUD)
 - Creating outpatient services to help patients decrease their methamphetamine use when they are discharged
- The findings may provide a platform for further collaboration with other trauma systems
- Ongoing research assesses patient perspectives on how to improve their care meeting to determine the final codes for each transcript to ensure comprehensive, accurate, and reproducible data

Disclosures: Presenting author has no conflicts of interest or any other financial relationships to declare.