# Addressing the Toxic Drug Supply Crisis: Diversifying OUD Treatment Options

Communities across the province face growing risks due to the potency and toxicity of the illegal drug supply. People are turning to leaders like you for actionable solutions. Recognizing the urgent need for diversified opioid use disorder treatment, our team engaged stakeholders to build on existing strengths and identify effective, actionable strategies. We conducted extensive fieldwork, collaborating with healthcare providers, clients, and other stakeholders, to uncover how injectable and oral OAT programs in BC engage and keep clients connected to care. We identified four core elements to diversifying opioid use disorder (OUD) care: 1) flexible care delivery, 2) responsiveness to clients' needs, 3) supporting social capital, and 4) offering a spectrum of medications and formulations. This document is provided as a distillation of our findings and should be interpreted in the context of the full report, available at: <a href="https://docatk.nih.gov/bit.ly/jo

**Here is what you can do.** This checklist distills our findings and research into actionable steps that MoH can take today to create a system of care that supports everyone, everywhere:

# **Ensure Equitable Access to a Spectrum of Medications**

- ☐ Stay ahead of the illicit market by ensuring all medications and formulations with a DIN can be prescribed for OUD and are covered under the provincial formulary, including those that adapt to changes in administration method (e.g., powder) and tolerances (e.g., fentanyl)
- ☐ Ensure BC's formulary covers these medications in doses that adequately respond to individuals' rising tolerances
- Collaborate with health authorities and providers to identify barriers to accessing and providing prescribed alternatives (e.g., sufentanil, fentanyl tablets). This includes assessing procurement, distribution, funding, and regulatory compliance barriers and solutions

### **Expand Pharmacist Renumeration and Scope**

- Develop a funding model to expand pharmacists' role in OUD care, including client clinical support, medication administration (e.g., fentanyl transdermal patches), assessments, and medication deliveries
- □ Support BC Pharmacist Association's call to allow pharmacists to modify doses or complete missing OAT prescription information to avoid treatment delays, and facilitate pharmacist-initiated OAT prescribing or complex prescription adaptation, especially in rural and remote areas

## Facilitate Flexible Medication Dispensing

- Modify regulations and supply agreements to allow opioid prescriptions for OUD, including injectables, to be accessed outside of specialized clinics and health authority pharmacies such as through community pharmacies, supportive housing, and community-based organizations
- ☐ Ensure prescribers and pharmacists can individualize dispensing methods to support the pursuit of work, school, or other recovery-supportive activities, including take-home doses (where indicated) and medication deliveries

### Strengthen the Evidence Base

- Partner with and fund a range of researchers and research institutions to explore diverse OUD treatment options, including injectables and prescribed alternatives.
  Collaborate with Health Canada to advance these efforts, leveraging their support to facilitate knowledge production and dissemination to build capacity
- Ensure study designs do not threaten participants' engagement in care, such as non-inferiority and crossover studies, and that participants can continue with their preferred medication at study completion

We recognize that these actions are complex and there are additional considerations, rules, and regulations that influence what you can do. Our team is committed to collaborating to understand these nuances and to facilitate the implementation of these approaches. We are eager to meet with you to discuss these matters further and work together towards effective solutions.

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