

Expanding Community-Led Partnerships: Residency Integration in a Harm Reduction Clinic

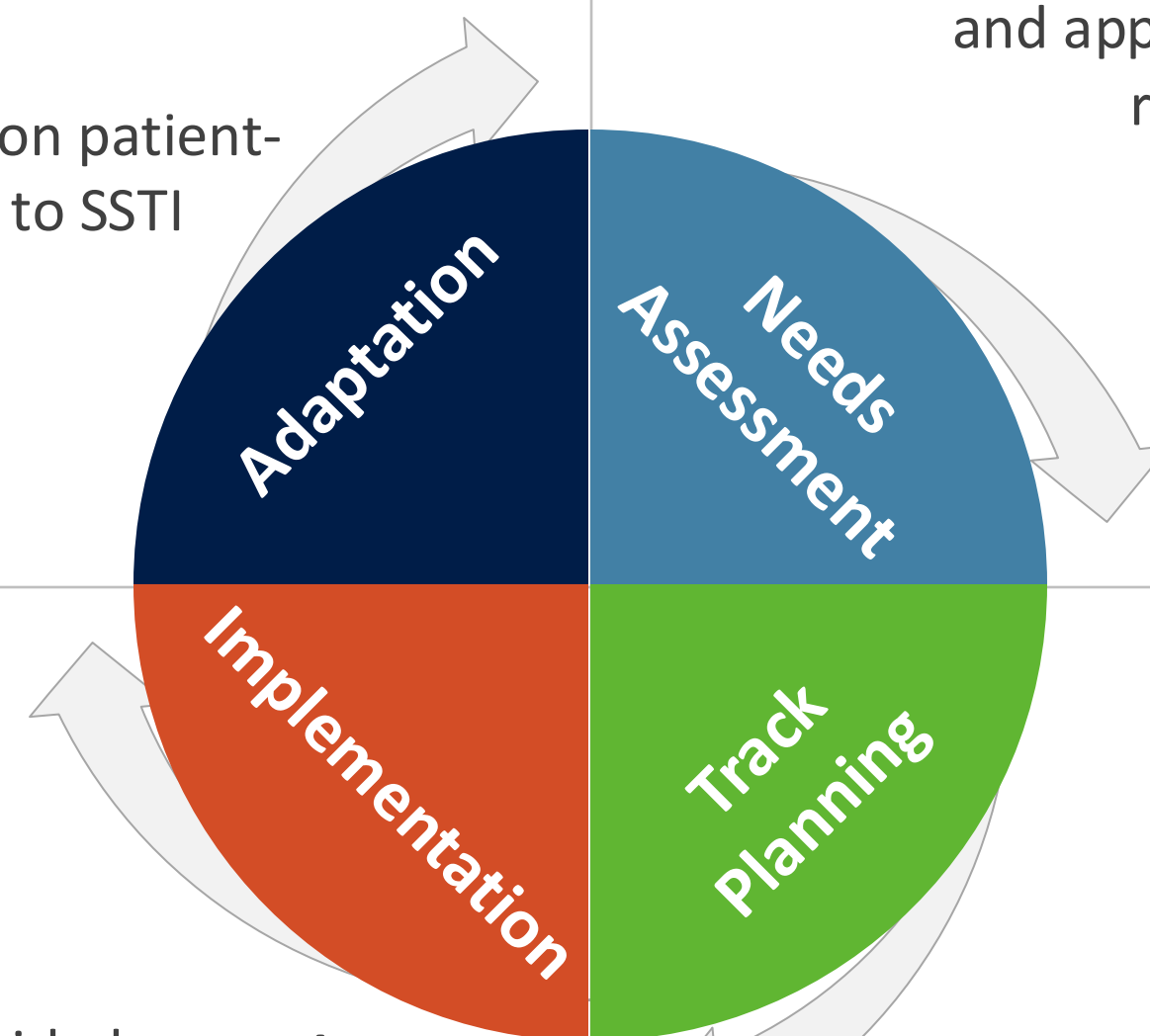
INTRODUCTION

- Harm reduction (HR) is an alternative approach to the medical model of patient care^{1,2}
- OnPoint NYC provides HR and supportive services, including drop-in “low-threshold” medical care to people who use drugs (PWUD)^{3,4}
- We expanded a clinical partnership to address overlapping community, HR agency, and educational priorities

METHODS

Patient, staff and trainee **feedback**
Learning objectives added and adjusted
Pre-reading added to enhance trainee learning and experience
New clinic protocols from trainee input
Novel “chalk talk” on patient-centered approach to SSTI

Patients & Community: Accessible, strength-based and patient-centered care
HR Agency: Staffing gap in low-threshold drop-in medical clinic
Residency Program: Developing and applying skills in harm reduction medicine



Chief Resident provided **no-cost staffing** as clinician and preceptor

Residents participated in:
 1) **Staff-led on-site HR training**
 2) 4-week **Addiction Medicine didactic curriculum**

Stakeholders worked collaboratively to solicit input from patients, staff, trainees and faculty

Learning objectives addressed key training and patient care goals

RESULTS

OnPoint Resident Track Learning Objectives

Provide holistic, low-threshold, strength-based, patient-centered clinical care in a community setting			
Understand unique lived experiences, psychosocial environments, systems of support, and health needs for PWUD			
Work collaboratively in an interdisciplinary, team-based setting		Construct clinically appropriate plans that acknowledge patient strengths, needs and preferences	
Practice harm reduction strategies	Practice motivational interviewing at all stages of change	Prescribe medication for opioid use disorder	Recognize and treat xylazine-associated skin and soft tissue infections (SSTI)

Table. Learning objectives created through collaborations with staff, patients, faculty and trainees.

Residents applied harm reduction approaches to patient care and witnessed the impact of an HR model:

“You get to take care of [patients] in a more community setting and really get to meet them where they are” (R1)

“One patient with complex medical concerns... said she would never have felt comfortable walking into a traditional clinic to receive care but trusted the staff” (R2)

Residents highlighted unique aspects of clinic within a community-based HR agency:

“Having the clinic and the safe injection site – as well as the many other resources available at the facility – together at one place is really helpful when trying to keep people engaged in care” (R1)

“Visiting the OPC and caring for patients [in the drop-in clinic] helped illuminate the barriers in accessing basic services, i.e. warm shelter and medical care” (R4)

CONCLUSION

- Collaboratively developed, novel, impactful partnership
- Residents gained clinical experience in a community-based HR agency, applied HR principles and gained valuable insight
- HR agency expanded service access to patients and community

One resident, now in fellowship, remarked how they have applied their experience to current training and practice:

“We had a session earlier in the year where we were given a bag of equipment found in a drug supply kit and asked to identify it – no one else in my group could but I was able to due to the session we had at OnPoint where we went through each item and its intended use. For someone working in infectious disease, this is incredibly important to understand. I've used this knowledge since to counsel patients on harm reduction methods when using” (R4)

Future work will continue to assess impact among residents and HR agency staff and patients.

AUTHORS & DISCLOSURES

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