

# Change Package & Measurement Strategy

## APPLAUD Action Series

Approaches and Pharmacotherapies  
for Patients Living with Alcohol Use Disorder


# Territorial Acknowledgements

In doing work throughout the province, we would like to acknowledge that we are living and working with humility and respect on the traditional territories of the First Nations Peoples of what is now colonially known as British Columbia. We also recognize Métis People and Métis Chartered Communities, as well as the Inuit and urban Indigenous Peoples living across the province on various traditional territories.

## About APPLAUD

[Approaches and Pharmacotherapies for Patients Living with Alcohol Use Disorder](#) (APPLAUD) is a four-month interactive action series focused on sharing knowledge and tools that improve the quality of primary care for patients living with alcohol use disorder (AUD) in British Columbia. APPLAUD is offered by [Health Quality BC](#) in partnership with the [Canadian Alcohol Use Disorder Society](#), with support from health system partners including the BC Centre on Substance Use and funding from the Ministry of Mental Health & Addictions.

Through APPLAUD, participants will connect with colleagues and experts to help put evidence-informed and patient-centred approaches into practice to better screen, diagnose and treat people living with AUD. By engaging in an “all teach, all learn” approach in learning sessions and with curated resources, participants can learn tangible ways to improve the care they deliver for their patients with AUD.



# Change Package & Measurement Strategy

The purpose of this document is to support APPLAUD participants in identifying gaps of knowledge in AUD care and explore different resources to better inform and improve practice.


In this package you will find the **Alcohol Use Disorder Patient Care Pathway** which has been designed to help primary care teams navigate the flow of AUD care; use tools and scripts to guide conversations with patients about their alcohol consumption and care planning; and explore team-based care and community supports to meet patient-centred care goals. A section on measurement follows to help participants learn from implemented changes and inform their quality improvement projects, including example measures.

For any questions about the content of this document, email [substanceuse@healthqualitybc.ca](mailto:substanceuse@healthqualitybc.ca).

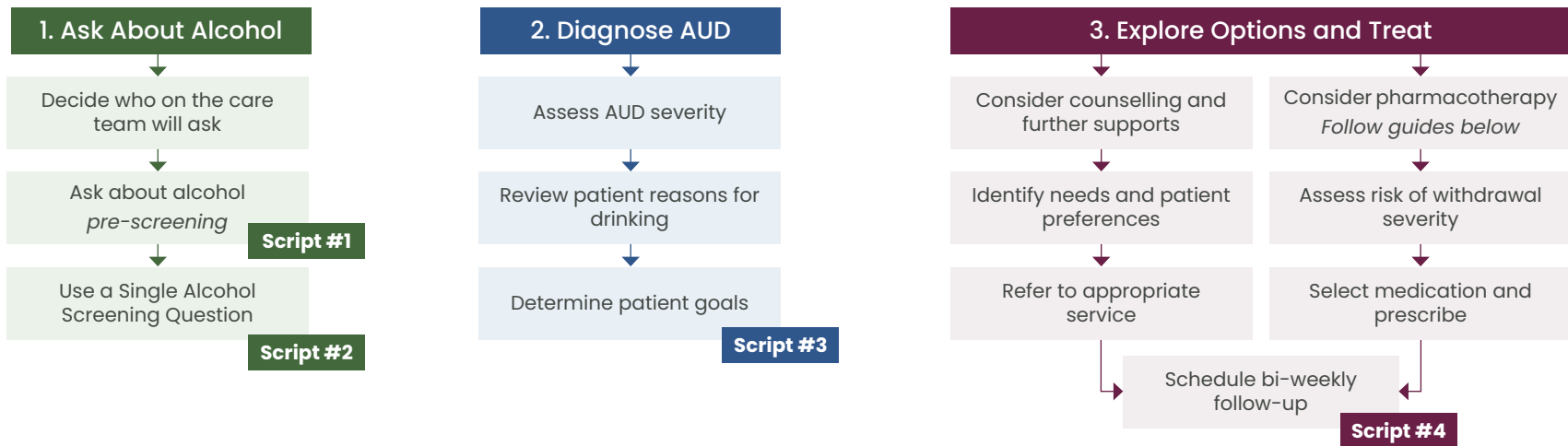
## USING THE ALCOHOL USE DISORDER PATIENT CARE PATHWAY

The AUD Patient Care Pathway has been developed using expert knowledge and opinion, as well as guidance from the provincial and national AUD care clinical guidelines. This can be used as a starting point and should be adapted with use.

This tool is divided into three sections:

1. **Ask About Alcohol:** Beginning the conversation about alcohol consumption with patients and screening.
  2. **Diagnose AUD:** Getting to know the patient's alcohol use behaviours and their goals moving forward.
  3. **Explore Options and Treat:** Patient care and treatment planning that is ongoing and iterative, with a focus on strengthening the relationship through counselling, further supports, and/or pharmacotherapies.
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# Alcohol Use Disorder (AUD) Patient Care Pathway



## TOOLS & RESOURCES

<p><b>Care Team Effectiveness Tools</b></p> <ul style="list-style-type: none"> <li>Use a <a href="#">teamwork agreement</a> to share tasks</li> <li>Try <a href="#">team huddles</a> to discuss patients with AUD</li> </ul>	<p><b>Patient Conversation Tools</b></p> <ul style="list-style-type: none"> <li>Practice <a href="#">motivational interviewing</a></li> <li>Use open-ended questions, affirmations &amp; reflections</li> </ul>	<p><b>Pharmacotherapy Guide – <a href="#">Canadian AUD Guidelines</a></b></p> <p>Refer to the Canadian AUD Guidelines and offer <a href="#">counselling</a> and/or <a href="#">medications</a>. For counselling, make a referral based on cost and availability. For medications, the first line options are:</p> <ul style="list-style-type: none"> <li>Naltrexone (best for abstinence or reducing drinking)</li> <li>Acamprosate (best for abstinence)</li> <li>See <a href="#">table</a> for detailed medication guidance</li> </ul>		
<p><b>Script #1 – Sample: Asking About Alcohol</b></p> <ul style="list-style-type: none"> <li>Talk about alcohol in relation to other conditions or co-morbidities</li> <li>“It’s routine for us to periodically ask about substance use. I haven’t asked you about this in a while. Is it ok to ask you a few questions about alcohol?”</li> </ul>	<p><b>AUD Severity Assessment</b></p> <ul style="list-style-type: none"> <li><a href="#">DSM-5</a> Tool</li> <li>Patient Conversation Tools</li> </ul>	<p><b>Pharmacotherapy Guide – <a href="#">CAUDS Medication Selection Tool</a></b></p> <ul style="list-style-type: none"> <li>Review reasons for drinking and goals of the patient</li> <li>Use questionnaire to determine appropriate medication</li> <li><i>*Refer to the guideline note on the following page</i></li> </ul>	<p><b>Risk of Severe withdrawal Tool</b></p> <ul style="list-style-type: none"> <li><a href="#">PAWS Scale</a></li> </ul>	
<p><b>Script #2 – Single Screening Question</b></p> <ul style="list-style-type: none"> <li>“In the past year, how often have you consumed more than 4 drinks (women) or 5 drinks (men) on any one occasion?”</li> </ul>	<p><b>Script #3 – Patient Goals and Options</b></p> <ul style="list-style-type: none"> <li>Have <a href="#">conversations that matter</a> to patients</li> <li>Set patient-centred goals and share options</li> <li>“Would you like to drink less? Abstinence does not need to be your goal now.”</li> </ul>		<p><b>Script #4 – Follow-up</b></p> <ul style="list-style-type: none"> <li>“Since our previous talk, how has your alcohol use changed?”</li> <li>“Are you interested in trying other possible supports?”</li> </ul>	<p><b>Further Supports</b></p> <ul style="list-style-type: none"> <li><a href="#">SMART Groups</a> or AA</li> <li>Local <a href="#">MHSU services</a></li> <li>Dietitians &amp; other allied health</li> </ul>

# Measuring for Improvement

Measuring is an important part of improvement work. How can we learn from the changes we have tried? How can we demonstrate that a change has led to the desired outcome? How do we know if the improved outcome is a result of our effort?

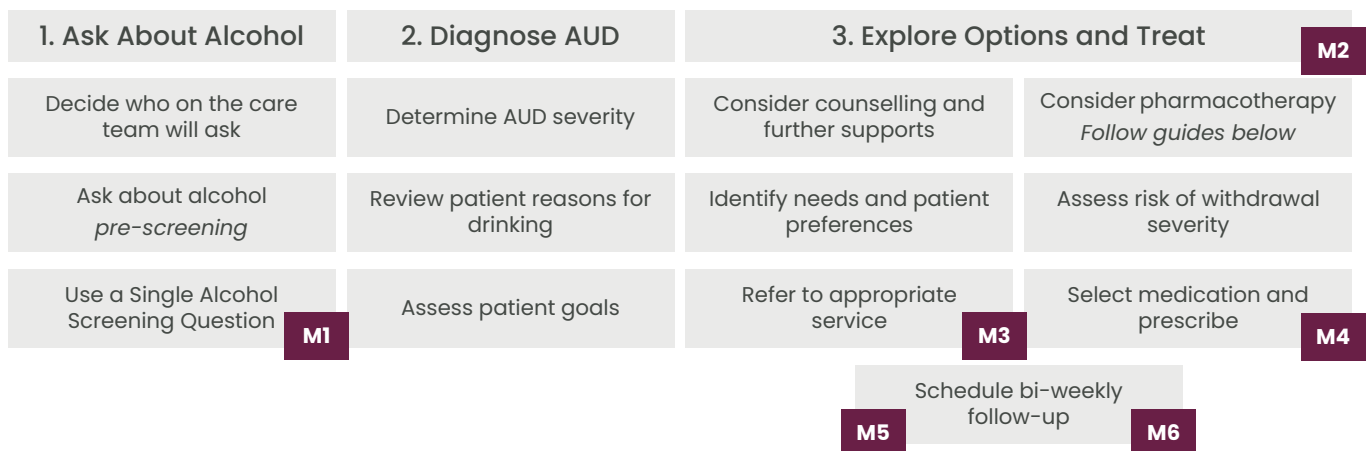
## DATA COLLECTION

The table below contains measures and simple data collection strategies to help inform whether the changes implemented are making a difference. Using the reference number in the first column, see the following section for guidance on where you can start collecting data in your practice.

REF	MEASURE NAME	DESCRIPTION	DATA COLLECTION STRATEGY
M1	Percent of patients screened for AUD	Patients screened per week divided by total patients per week	Tally each patient appointment (in person or via phone) where AUD screening occurs on a piece of paper or online tracker like excel*
M2	Number of conversations with patients about alcohol use	Number of patients with an initial or follow-up conversation about alcohol use per week	Tally each patient appointment (in person or via phone) where alcohol use is discussed in care on a piece of paper or online tracker like excel*
M3	Percent of patients connected with further supports	Number of patients connected with further supports divided by the number of patients who screened positive	Tally each patient appointment where further supports were shared, including referrals, on a piece of paper or online tracker like excel*
M4	Number of AUD medication prescriptions	Prescriptions written per week for AUD medications: Acamprosate, Baclofen, Gabapentin, Naltrexone and Topiramate	Tally prescriptions for each AUD medication on a piece of paper or online tracker like excel*
M5	Number of drinks per patient per week	Total weekly number of drinks divided by number of patients displayed from a common start week	Tally number of drinks mentioned by patients with AUD that week and sum it each week, using a piece of paper or online tracker like excel*
M6	Patient satisfaction	Use a scale to assess how satisfied the patient has been with AUD screening and treatment options in reaching their goals	Develop a simple survey or have a physician or nurse perform an interview for qualitative data on the AUD treatment

\*If retrospective data collection is needed, refer to patient charts.

## AUD PATIENT CARE PATHWAY MEASUREMENT



**Guideline Note:** The CAUDS medication selection tool (MST) is based upon information originally compiled by Dr. Jeff Harries, MD, MBA, and communicated through various means to other BC clinicians. It is included here as an option within quality improvement projects to explore opportunities for supporting patients with alcohol use disorder (AUD). It is a non-validated tool used by prescribing practitioners along with their own discretion, clinical judgment, and conversations with patients. Research and discussions with a variety of clinical experts continue to evolve related to caring for people with AUD. Information known to date has influenced the materials presented in this APPLAUD Action Series – please use along with your own clinical expertise and judgment.