



Assessing if take-home doses can improve client outcomes

This section suggests factors for prescribers and the clinical team to consider when they are assessing if take-home dose(s) would be beneficial for their client. It also recommends cases where caution should be used before prescribing take-home doses.

1

Understand the client's individual needs and goals

2

Complete a clinical assessment

3

Identify further criteria that indicate if take-home doses could help the client reach their self-identified goals

More details on these three considerations are provided in the following sections.

Understanding a client's individual needs

Take-home doses are recommended as part of a treatment plan that supports the needs and priorities of a client and improves their wellbeing and safety. The following list provides some of the questions to consider when determining a client's needs:

- Is the client requesting take-home doses?
- What are the clients self-identified needs and goals?
- Would take-home doses support the client in achieving their self-identified goals?
- Would take-home doses allow the client to attend work or school?
- Would take-home doses improve a clients' engagement with their treatment program?
- Is the client homebound due to a health status (e.g. physical disability, infectious illness)?

These considerations can be determined during a holistic clinical assessment. The next section describes further recommendations on what to consider during a clinical assessment.



Client receiving care at Crosstown Clinic.
(CHÉOS, retrieved November 2022).

Feedback from clients with lived/living experience:

Clients wanted to highlight the importance of discussing their personal goals with a prescriber.

"Having these discussions makes me feel like [my prescriber] cares about me."

"I want to work, travel, and improve my relationship with my child."

Completing a clinical assessment

A clinical assessment is completed by the prescriber and may be evaluated by a Review Committee (See section titled “Making the decision to prescribe take-home doses” for more information on the Review Committee).

During a clinical assessment the following questions can be considered:

What are the client’s needs?

- This can be a discussion between the prescriber and the client

Has the client completed a “Treatment Outcome Profile” (TOP) form?

- This form can be found in the [Appendix 1](#) (item #3)
- The TOP is a set of questions that can enhance assessment and care plan reviews

Has the client completed a Urine Drug Screen (UDS)?

- UDS helps determine if a client is currently using any other substances that might affect treatment with take-home doses
- It is required to satisfy potential regulatory concerns that are often present with OAT
- Crosstown Clinic completes UDS monthly when a new take-home dose prescription is given
- At Crosstown, clinicians send an EMR request to a nurse or clinic support worker to collect the sample
- Once UDS specimens are collected at the clinic and they can be tested on site (Rapid UDS) or sent to the lab for testing

The Protocol for TOP Reporting

