Developing A Questionnaire And Data Analysis Process: Identification Of Practice And Provider Stigma Score In Order To Improve And Measure Training Efforts

Jessica Deemer
Angela Colistra LPC, PhD, MS
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Jessica Deemer, Angela Colistra, PhD

Department of Family Medicine
Lehigh Valley Health Network, Allentown, Pennsylvania

Introduction and Objectives

- Barriers exist within primary care that prevent appropriate treatment for substance abuse disorder:
  - Lack of institutional support for prescribing buprenorphine due to insufficient staff training, lack of time and complex regulations
  - Lack of psychosocial and mental health support
  - Social stigma present within primary care heavily represented though language, patient identification and treatment

- Goals:
  - Develop a questionnaire that aims to identify stigmatizing language towards individuals with opioid use disorder across the interdisciplinary teams to target training and education
  - Conduct a pilot questionnaire to gather feedback and improve the design to fully execute a larger scale project with IRB approval in the near future

Method

- Total of 12 articles found including 3 cohort studies and 2 meta analyses
- Attended 8 meetings with the PacMAT team
- Developed three surveys including three patients with moderate opioid use disorder but varying socioeconomic backgrounds and 9 follow up questions
- Questionnaires developed and reviewed with PacMAT Team
- Questionnaire reviewed by the Stakeholder Groups on the Task Force Team to collect feedback on how to improve the questionnaire

Results

- 17 responses were recorded which provided feedback

<table>
<thead>
<tr>
<th>Frequent Feedback Received</th>
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</thead>
<tbody>
<tr>
<td>Remove at least one question</td>
</tr>
<tr>
<td>Replace ‘suboxones’ with ‘buprenorphine’ in question 8</td>
</tr>
<tr>
<td>Question 8 should have the option to choose more than one answer</td>
</tr>
<tr>
<td>It is difficult to word a description of the patient and their urine test results to the medical assistant as that is always done verbally and briefly</td>
</tr>
</tbody>
</table>

Figure 1 displays the most received feedback from participants during the pilot

<table>
<thead>
<tr>
<th>Original Questionnaire</th>
<th>Changes Made</th>
</tr>
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<tbody>
<tr>
<td>“The patient took a urine drug screen and the results indicated that she has recently used fentanyl and marijuana. How would you describe these drug test results to the medical assistant?”</td>
<td>“The patient took a urine drug screen and the results indicated that she has recently used fentanyl and marijuana. How would you describe these drug test results to the patient? Question REMOVED”</td>
</tr>
<tr>
<td>“What are your beliefs about this patient and her response to the urine drug screen?”</td>
<td>“It is decided to induce the patient on buprenorphine and at her 60 day visit the patient takes another urine test. The results indicate that she has a return to substance use and there is no buprenorphine metabolites in the urine, but opioids are in the urine. What would your approach be now for the patient?”</td>
</tr>
<tr>
<td>“It is decided to induce the patient on buprenorphine and refer to higher level of care”</td>
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</tr>
<tr>
<td>- Mandate behavioral health care if treatment will continue</td>
<td>- Discontinue buprenorphine and refer to higher level of care</td>
</tr>
<tr>
<td>- Ask patient about urine drug screen results and recovery goals and move forward from that place</td>
<td>- Mandate behavioral health care if treatment will continue</td>
</tr>
</tbody>
</table>

Figure 2 displays the changes made to the questionnaire using the feedback

Conclusion

- Using the feedback from the 17 responses, changes were made to the questionnaire to improve the design
- In total, 2 open ended questions were removed to shorten the length of the survey
- Participants can now choose more than one answer in the multiple choice question to ensure the participant can fully express their desired treatment plan
- With changes made, it is estimated for the questionnaire to now take an average of five minutes. Each questionnaire now includes one patient case, 4 open ended questions, 1 multiple choice question, and 2 questions on a Likert scale

Future Directions

- Validate a stigma questionnaire and data tracking system using the ‘addictionary’ as a coding tool in order to track stigmatizing language
- Submission of an IRB in order to send the questionnaire out on a greater scale
- Send questionnaire to each of the 14 primary care sites
- Collect an average stigma score at each of the 14 primary care practices
- Target the primary stigma at each practice and develop changes in order to diminish the stigma against opioid use disorder patients at each of the practices

References and Acknowledgments


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