This type of experience may foster staff preparedness and willingness to perceived effectiveness in helping patients with both alcohol use disorder and opioid use disorder (OUD). Building empathy for patients is crucial in healthcare settings.

Public health initiatives are advocating for expanded training of healthcare providers to address addiction. The number of healthcare providers who prescribe or assist with the provision of Buprenorphine for OUD is increasing. Over the past two years, more than 2,000 healthcare providers have completed the Buprenorphine waiver training.

We conducted three, 2-day interprofessional staff development workshops to address addiction. The workshops were designed to provide a brief intervention that can be used by healthcare providers to help patients with AUD and OUD. The workshops utilized varied educational strategies such as lectures, discussions, role plays, and simulations.

Three simulations led interprofessional teams through scenarios involving patients with AUD and OUD. Participation included Therapists, Chaplains, Peer Support Specialists, Health Technicians, Research Scientists, and Trainees. In addition, we invited Pharmacists, Psychologists, Social Workers, Addiction Counselors, and Nurse Practitioners to participate in the workshops.

Participants watched a brief video on language and presentation techniques to enhance empathy and understanding. In addition to providing education on addiction, the workshops aimed to decrease stigma associated with the management of these patients.

Methods:
- Three simulations led interprofessional teams through scenarios involving patients with AUD and OUD.
- Participation included Therapists, Chaplains, Peer Support Specialists, Health Technicians, Research Scientists, and Trainees.
- In addition, we invited Pharmacists, Psychologists, Social Workers, Addiction Counselors, and Nurse Practitioners to participate in the workshops.

Results:
- The training was helpful in terms of improving communication skills with patients.
- Participants reported increased self-efficacy discussing treatment options and treating AUD (p = .001), efficacy diagnosing AUD (p = .009) and OUD (p < .001), efficacy of screening OUD (p = .001), and increasing perceived readiness to provide OUD treatment to primary care and general mental health settings.
- Participants also reported significant increases in attitudes and knowledge and self-efficacy discussing treatment options and treating AUD (p = .001), efficacy diagnosing AUD (p = .009) and OUD (p < .001), efficacy of screening OUD (p = .001).

Conclusions:
- An interprofessional staff development workshop had a positive impact on the knowledge, attitudes, and self-efficacy of participants.
- The workshop increased the participants' preparedness to assist with the provision of Buprenorphine for OUD. These findings suggest that increasing the number of healthcare providers who prescribe or assist with the provision of Buprenorphine for OUD is important in addressing the growing need for addiction treatment.

References: