BRITISH COLUMBIA CENTRE ON SUBSTANCE USE

Frequently Asked Questions

Risk Mitigation in the Context of Dual Public Health Emergencies Update and Opioid Use Disorder Practice Update

January 26, 2022

This document addresses key questions the BCCSU has received about the *Interim Clinical Guidance: Risk Mitigation in the Context of Dual Health Emergencies Update* and the *Opioid Use Disorder: Practice Update*.

About the interim guidance and practice update

1. Why was *Interim Clinical Guidance: Risk Mitigation in the Context of Dual Health Emergencies (Risk Mitigation)* updated?

   After more than a year of prescribing experience from *Risk Mitigation*, the emergence of preliminary evaluation data and experience from clinicians and people who use drugs has led to the development of an updated document: *Risk Mitigation in the Context of Dual Health Emergencies—Update*.

   The *Risk Mitigation Update* features expanded and amended guidance for mitigating substance-related risks in the context of COVID-19, including example clinical scenarios, guidance on patient planning beyond initial medication trial, and billing.

2. How do *Risk Mitigation Update*, *Opioid Use Disorder: Practice Update*, and *Access to Prescribed Safer Supply* policy intersect?

   Clinical experience from *Risk Mitigation* prescribing informed the development of an *Opioid Use Disorder: Practice Update*. This document consists of two sections. The first provides updated guidance on the provision of opioid agonist treatment. The second provides an overview of experience from over a year of *Risk Mitigation* prescribing of opioids as well as guidance on prescribing certain opioids as a harm reduction option outside the context of COVID-19 risk. This document helps to enact, but is distinct from, *Access to Prescribed Safer Supply in British Columbia: Policy Direction* which was released in July 2021 by the Ministry of Mental Health and Addictions, Ministry of Health, and the Office of the Provincial Health Officer.

Prescriptions

3. What is the purpose of adding an "SA" code to prescriptions for prescribed safer supply?

   This code indicates to the dispensing pharmacist that the prescription is to be tagged with the non-public facing code that will allow the prescription to be identified in the PharmaNet database to assist with evaluation.

4. Is the "SA" code required on every risk mitigation or safer supply prescription or only the first prescription of the series for a given patient?

   The code is required on each prescription for risk mitigation or safer supply. This will assist in evaluation efforts.

5. How should the "SA" code be added to risk mitigation or safer supply prescriptions for medications that are not written on a Controlled Prescription Program Form (i.e., benzodiazepines and stimulants)?

   This depends on the software. The code could be added in the "SIG" or comments section. Alternatively, it may be easier to write the code on the prescription. The code is not meant to be part of the patient's directions for use.

6. In the event that a prescriber does not include the "SA" code on relevant prescriptions, how will the pharmacy proceed?

   The pharmacy will contact the prescriber to confirm whether or not the prescription is for prescribed safer supply (including risk mitigation prescribing). If the prescriber is not available and the pharmacist knows that the prescription is for safer supply (for example, the patient has previously received the same prescription), the pharmacist can insert the SA code without confirmation from the prescriber.

7. What happens if the "SA" code is missed (e.g., not included on risk mitigation or safer supply prescriptions or not documented at the pharmacy)? Will this impact the medication dispensed to patients?

   The purpose of including the intervention code is to enable evaluation of prescribed safer supply (including risk mitigation prescribing). The code is not public facing and there will be no impacts to the medication dispensed to patient if the "SA" code is missed.