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Training the Next Generation of Family Medicine Providers through Group Buprenorphine-Naloxone Visits

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Training the Next Generation of Family Medicine Providers through Group Buprenorphine-Naloxone Visits

Krystina Callahan, Lara Weinstein*, Erica Li, Sunny Lai, Alexis Silverio

Introduction: The rise in opioid use disorders (OUD) and fatal overdoses highlight the need to expand access to and capacity for treating OUD. Medication Assisted Treatment (MAT), a medication/group visit model, done in the office setting, is an effective remedy for treating OUD. Understanding residents' perspectives on their clinical training in MAT can inform the design of a more effective and responsive curriculum.

Methods: A qualitative study using group semi-structured interviews with residents in an urban family medicine residency rotating through a federally qualified health center. Interviews centered on strengths and weaknesses of the MAT program, resident likeliness to prescribe MAT, and potential training that would boost confidence were conducted. Grounded theory was utilized to identify themes among transcripts.

Results: Four interrelated themes emerged: modeling and mentorship, harm reduction, skills, and intent. Residents' desire to treat and views on harm reduction, combined with their skills and mentorship, give them the confidence and intent to utilize MAT post-residency.

Discussion: Residents have the desire to prescribe MAT post-residency but lack confidence to do so. This can be attributed to a lack of modeling, mentorship, and skills developed within residency. Addition of this into programs, combined with exposure to harm-reduction as a principle and practice, must be incorporated into programs and could play an important role in closing the "treatment gap" by training the next generation of providers in providing MAT.