## VCH Region Application Form: Custom Clinical Rotation (for OAT Prescribers)



## **Information for Applicant**

The Vancouver Coastal Health Regional Addiction Program (VCH RAP), Overdose Emergency Response (OER) team and BC Centre on Substance Use (BCCSU) are committed to building capacity amongst care providers to support patients who use substances.

VCH RAP is currently funding select care providers for their time in completing custom opioid agonist treatment (OAT) clinical rotation. Clinical rotations are for OAT prescribers who have already completed their POATSP (Provincial Opioid Addiction Treatment Support Program) training and who are interested in expanding their skill-base and expertise in the area of OAT.

- **Who?** Physicians or Nurse Practitioners (NPs) who have completed POATSP training and who are wanting to experience a clinical rotation to further upskill in the area of OAT prescribing. In order for your application to be considered for funding, you must be practicing/working within the VCH region and able to take on OAT patients.
- **What?** 5 or 10 day clinical rotation for prescribers will be tailored to meet the unique training needs and learning goals of the applicant. This is an intensive upskilling opportunity to support prescribers who are in a capacity to take on OAT patients and/or who already support patients in accessing OAT.
- **How?** Complete this application and submit it to be **oatnetwork@vch.ca** for review. Funding opportunities for custom clinical rotations are limited.
- When? There is no deadline to apply. Applications are accepted and reviewed on a rolling basis.
- **Note:** Priority will be given to prescribers (physicians and NPs) working in family medicine, emergency medicine and/or in a treatment facility or addictions clinic setting. Prescribers working in under-serviced areas of the VCH region will also be prioritized.

## **Application Form**

Please check box to confirm you <u>HAVE ALREADY</u> completed POATSP.		
First Name:		
Last Name:		
Preferred Name:		
5 digit MSP number if applicable:		
Email:		
Phone:		
Designation:		
$\square$ Physician/medical doctor (non-resident)		
□ Nurse Practitioner		
□ Other		

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Practice setting (check all that currently apply):			
☐ Family Practice	☐ Hospital		
☐ Primary Care Clinic	$\square$ Substance Use Treatment Centre		
$\square$ Substance Use Speciality Clinic	☐ Emergency Department		
☐ Other:			
City/cities where you work:			
If you are a VCH employee, please detail where and in what capacity or indicate N/A			
	<del></del>		

Please detail why you are interested in this particular clinical capacity building opportunity at this time.

Share on which skills/knowledge areas you would like to improve on at this time. How would you like your clinical training to be tailored and why? How will training enable you to better support or take on more OAT clients? If applicable, please specify if you will be providing shared care or locuming for OAT providers.

Please email completed application form to <a href="mailto:oatnetwork@vch.ca">oatnetwork@vch.ca</a>