#### Welcome to our Celebrate & Learn Webinar!

- ONLY if you are connecting to the audio by cellphone or landline (e.g., not your computer), your audio connection and visual connection need to be joined for the breakouts. To join them:
  - ✓ First: Find your participant ID; if you are using your phone for your audio, your Zoom Meeting Participant ID should be at the top of your Zoom window
  - ✓ Then: Once you find your participant ID, press: #number# (e.g., #24321#)
  - ✓ The following message should briefly pop-up: "You are now using your audio for your meeting"
  - **Please** rename yourself so we know what team you're from. This will help facilitate discussion and follow-up. To rename yourself:
    - ✓ Find the participant list: Go to the bottom of your Zoom window and click on **Participants**
    - ✓ Hover/click: Once the participant list pops up, hover over your name on the participant list; you may be able to click rename or you may have to click the more button and then click rename
    - ✓ Enter your new name: Enter your first name and your clinic's name (e.g., Briana CCI, or Shelly ATSH coach)

#### Addiction Treatment Starts Here



Celebrate & Learn Webinar

September 29, 2020



#### Webinar Reminders

1. Everyone is muted.



\*6 to unmute



\*6 to re-mute

- 2. Use the chat box for questions and to share what you're working on.
- 3. This webinar is being recorded in the main room. The slides and webinar recording will be posted to the ATSH program page.

## Agenda



Introductions + Housekeeping + Virtual Warm-Up

Guess Your Progress: ATSH By the Numbers

Team Reflections

Coaching Insights

Resilience & Team Wellness

Closing & What's Next

## Today's session

- We're excited to be with you today!
- Please turn your video on, if possible
- Same breakout groups throughout,
   so get to know one another
- We know it can be hard not to multi-task during your endless days of Zoom meetings. Try to stay with us, please, especially during the breakouts.



Breakout prompts: We'll put all the prompts in the chat box before you go to your breakout



Timer: Timer in the breakouts gives a 2-minute warning. It appears in the top right-hand corner of the screen so be on the lookout (or someone can volunteer to monitor time).

## Virtual Warm-Up

#### Instructions:

- You will be assigned to a breakout room with at least 5 other ATSH participants.
- You will have 10 minutes in the breakout to answer these two questions (we will put the questions in the chat box):
  - ► If you could only eat one food for the rest of your life, what would you choose?
  - What was your first job?



 After the 10 minutes is up, breakouts will close and you'll be transferred back to the main room.

## **Guess Your Progress**



# ATSH BY THE NUM3ERS

Represents 66 sites from Primary Care (Wave 1 & 2) + Behavioral Health



## Access Measures

#### Adoption:

- # of x-waivered prescribers
- # of active prescribers

#### Reach:

- > # of patients prescribed buprenorphine
- # of patients prescribed naltrexone long-acting injection

#### Retention:

# of new patients retained for 6 months

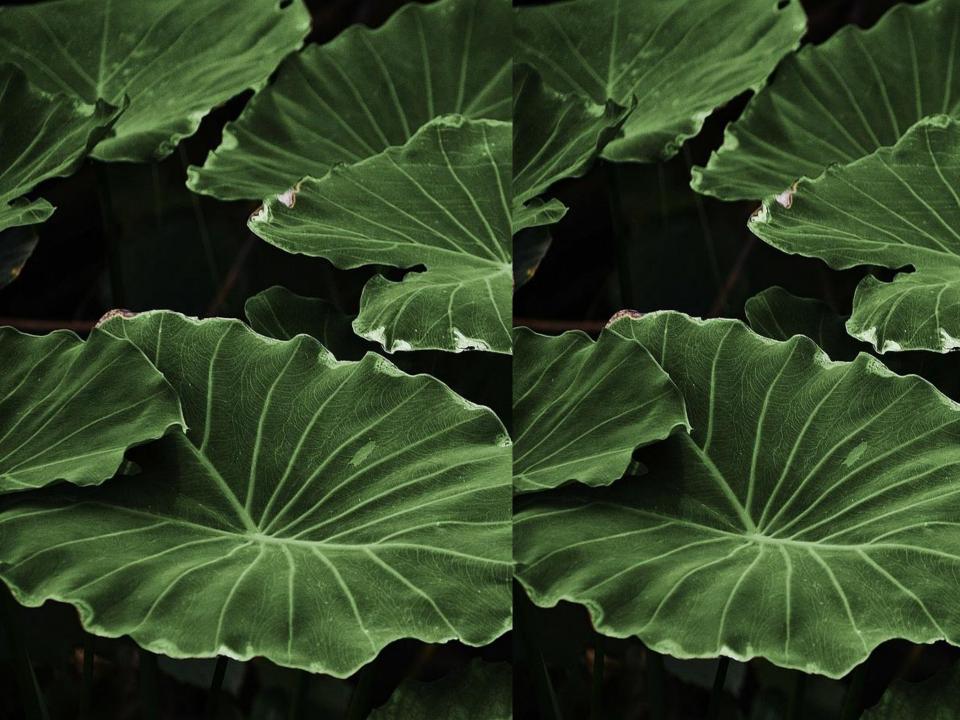
You also tracked quality measures around screening, treatment initiation, engagement and toxicology monitoring!



# We Want to Celebrate Your Data Successes!

Collectively, there were improvements across all the access measures!

Can you guess which data match the measures?











## In Summary:

- 100 more x-waivered prescribers
- 85 more active prescribers
- 966 more patients prescribed buprenorphine
- 164 more patients prescribed naltrexone long-acting injection
- 76 more patients retained over 6 months

Huge congratulations to everyone! These data demonstrate growth in expanding access and treatment to patients so that they can get the care they need and live healthier lives.

#### **Team Reflections**



#### **Breakout Discussions**

- Before the Breakout 1 minute to individually reflect:
  - ► What is one impactful change that your organization made to advance access to MAT for your patients?
- In the Breakout:
  - You will have 10 minutes to discuss your impactful changes and write them on the <u>ATSH Celebration: Reflection Wall</u>.
     (In the chat box, we will add a link to the Reflection Wall and also repeat these instructions.)
    - To add your impactful change to the Reflection Wall, —
      double click on the page and it will open a text box.
       First, type your name and organization. Then, type your impactful change in the text box.
    - We will revisit the Reflection Wall later in the webinar to see what you shared.



## Welcome Back!

#### Your Breakout – What Did You Hear?

- New ideas?
- What resonated with you?





#### **Stretch Break**



Welcome back from the break!

A

We'll get started shortly.



## **Coaching Insights**



#### **Coaching Insights**

Mark McGovern, PhD

ATSH Fyaluator

Primary Care Wave 1 & 2



Brian Hurley, MD

ATSH Clinical Director and Coach

Primary Care Wave 1 & 2



Katie Bell, MSN RN-BC CARN PHN

ATSH Coach

Primary Care Wave 1 & 2



Shelly Virva, LMSW CSW

ATSH Coach

Primary Care Wave 1 & BH



Joe Sepulveda, MD

ATSH Coach

Primary Care Wave 2



Dominique McDowell, BA RLPS SUDCII

ATSH Assistant Coach

Primary Care Wave 2



Danny Contreras, SUDCC III-CS

ATSH Assistant Coach

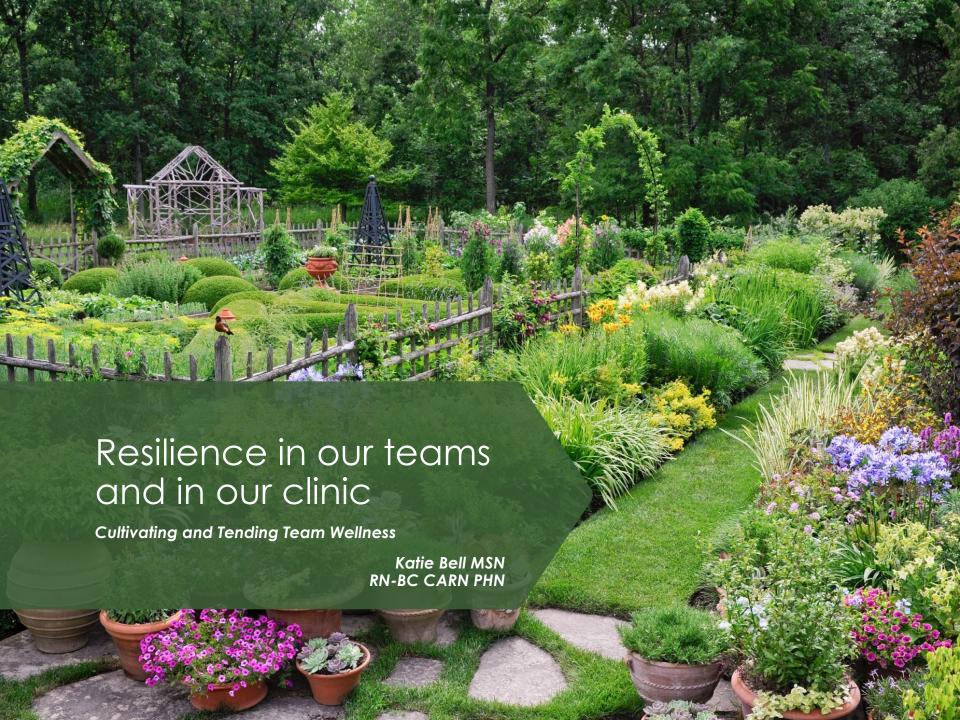
Primary Care Wave 2





#### Resilience & Team Wellness





## The pressures on clinic life can be extraordinary

- Burn-out how mild to moderate to severe is your burn-out right now?
  - The workload and productivity demands with complex high need patients and limited resources
- Medical and Administrative hierarchy prevails how we get the job done but built-in inequality
- Work Cliques our co-workers become like family, but cliques can exclude as well as include
- Silos isolated disciplines and teams can cause communication challenges
- Increased relapse and overdose among our patients.

COVID -19!!!!!



"Resilience is the capacity of a system, enterprise, or a person to maintain its core purpose & integrity in the face of dramatically changed circumstances." –Andrew Zolli

## What we are doing today?

- Exploring ways to cultivate and tend resilience in our clinic culture to support Team Wellness
- Our resources for this session:

Forming virtual circle

Curiosity

Reflecting and sharing

our cultures within cultures

Our social intelligence

Our personal understanding of group centered resilience

Collective wisdom and collaboration



## Joy

"Once upon the time, when women were birds there was a simple understanding to sing at dawn and to sing at dusk was to heal the world through joy. The birds still remember what we have forgotten, that the world is meant to be celebrated."

-Terry Tempest Williams

## The Power of the Circle

- Balances clinic hierarchies
- Circles assign value to every member in the team
- Sitting in a circle can bring the felt experience of safety and comfort – belonging
- Settles the nervous system and settles the group
- Circles allow us to learn from each other
- Where do we already circle up?
  - Morning huddles

Listening happens.



## This is what a virtual circle looks like



## Resilience is expressed

#### Resilience prompts for breakouts:

- Storytelling
- Humor and laughter
- Music
- Dancing
- Food
- Visual Art/Adornment
- Gift giving (acknowledgement)
- Ceremonies and Festivals
- Games, Sports and Play
- Wisdom Sayings
- Group Values belonging and inclusion
- Connection with nature

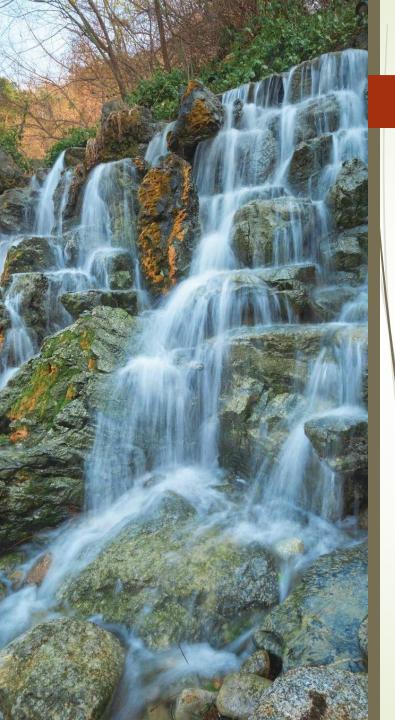


### Instructions for Breakout Group Process

- Before your breakout, individually take one minute to look at the Resilience prompts.
  Select a prompt that resonates with you and think about how you can, or could, use that concept to cultivate resilience in your clinic.
- In your circle, share your prompt and 1 or 2 simple ways that the prompt can be used to cultivate resilience and team wellness in your clinic. Example, "We can use storytelling in our weekly Patient Care Reviews".
- You will have 10 minutes in your breakout for everyone to share.
- Jot down a few of your favorite resilience ideas to bring back to the main room when the breakout returns.

#### Resilience prompts:

- Storytelling
- Humor and laughter
- Music
- Dancing
- Food
- Visual Art/Adornment
- Gift giving (acknowledgement)
- Ceremonies and Festivals
- Games, Sports and Play
- Wisdom Sayings
- Group Values belonging and inclusion
- Connection with nature



Coming back to the main group
The waterfall technique:

DO NOT HIT "SEND" UNTIL I TELL YOU'SO

In the chat box, share your idea (or an idea you heard) on one way you can build resilience in your clinic.

\*\*\*DO NOT HIT "SEND"
UNTIL I TELL YOU SO\*\*\*

## Final thoughts

- The work of tending our culture of the clinic belongs to everyone looking to admin and leadership to do the work reinforces hierarchy. Small things tend our culture.
- Social Intelligence
- Listening
- Importance of trust
- Serving each other "Do you need anything from me today?"
- Intentional new groupings be inclusive
- Welcome aboard potlucks rather than just good-bye potlucks

## Kintsugi

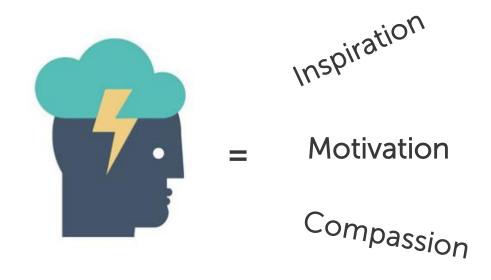
Kintsugi is the Japanese art of putting broken pottery pieces back together with gold built on the idea that in embracing flaws and imperfections, you can create an even stronger, more beautiful piece of art.



#### **ATSH Celebration: Reflection Wall**



## Reflections Wall . . . What We're Reading





#### Poll

 On a scale of 1 – 5, please select the number that best represents your experience with today's session 5 - Excellent
4 - Very Good
3 - Good
2 - Fair
1 - Poor

2. Please select the number that best represents your response to the statement: Today's session was a valuable use of my time.

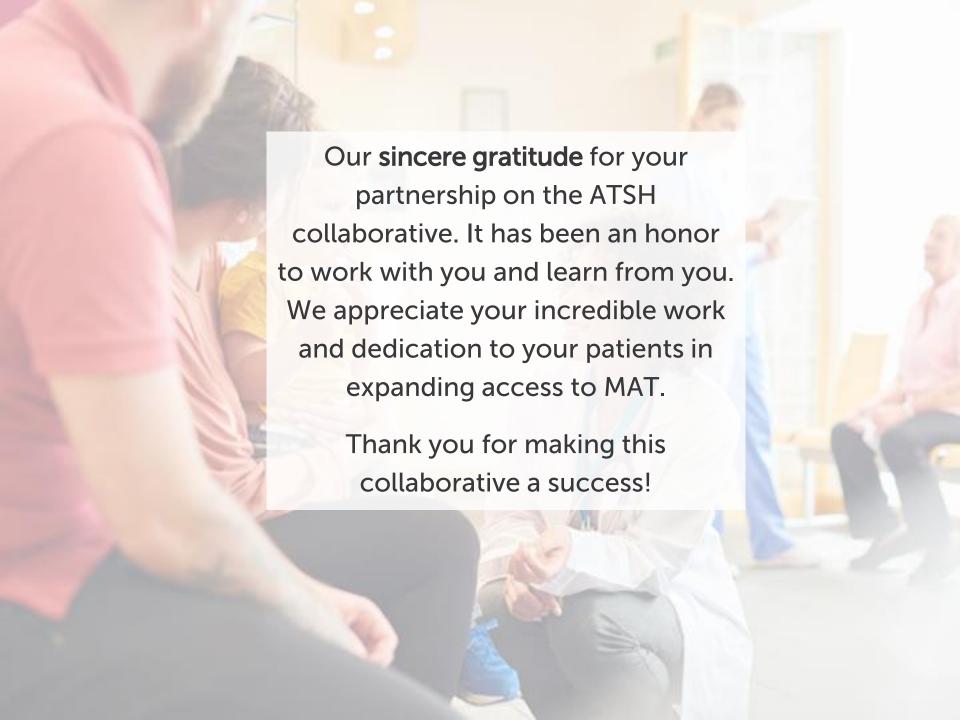
5 - Strongly Agree
4 - Agree
3 - Neutral
2 - Disagree
1 - Strongly Disagree

3. By selecting **yes** or **no**, please indicate whether it was helpful being in the same breakout group throughout the course of the webinar.

Yes – I enjoyed staying with the same group

No – I would have preferred to switch groups

Unsure/No opinion



#### What's Next for ATSH?



## Next Steps for ATSH! New Opportunities!

|                         | ATSH Collaborative (Wave 3)   | ATSH Learning Network  |
|-------------------------|---|--|
| Overview                | 18-month learning collaborative with a target of 25 – 30 primary care sites.  | 18-month learning network with a target of up to 15 primary care sites.  |
| Eligibility             | Sites that are *new* to MAT or creating new access points (no formal MAT program in place.)   | Sites with mature MAT programs in place  |
| Technical<br>Assistance | <ul> <li>Virtual and In-Person Learning Sessions</li> <li>Topical Webinars</li> <li>Monthly Coaching</li> <li>Virtual Peer Groups</li> <li>Site Visits</li> <li>Online Resource Center</li> <li>Tracking &amp; Benchmark Performance</li> </ul> | <ul> <li>Quarterly Webinars</li> <li>Coaching</li> <li>Virtual Peer Groups</li> <li>Site Visits</li> <li>Online Resource Center</li> </ul> |
| Timeline                | November 2020: RFA Released<br>January 2021: Proposals Due<br>March 2021: Program launch  | TBD (likely similar timeline to collaborative)   |



