Engaging Clinicians and Staff

Strategies to Identify Your Allies, Engage Sympathetic Neutrals, and Address Obstacles to MAT Support

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Disclosures

• Physician Owner, Groups Recover Together CA
Learning Objectives

• Discuss the mindsets, behaviors and actions that will support engagement in MAT and select methods that are most appropriate for each participant’s care setting.

• Identify changes in language and attitude that can contribute to improved engagement.

• Share common obstacles to MAT programs and discuss strategies to address those obstacles.
Group Exercise

• 2 minutes: Individually write down 2 clinician or staff behavior challenges that you face when providing addiction treatment services.

• 4 minutes: Discuss your challenges at your table and identify top two to share

• Each table shares top two challenges
Who are you working with?

• True Believers
  • Passion
  • Knowledge
  • Provide evidence based education opportunities.

• Sympathetic Neutrals
  • Provide opportunities to interact with patients
  • Regular “human impact” stories

• Merely Uninterested
  • What are they interested in? Are there intersections you can leverage?

• Actively Obstructionist
  • Focus on personal relationships
  • Change the narrative around them
Common Staff “Barriers”

- Patients/Situations escalate quickly
- Patients (and other staff) avoid particular staff members
- Patients turned away inappropriately
- Messages aren’t relayed quickly enough to avoid a crisis
- Negative attitudes affect team morale and increase burn out
- Negative speech affects how others in your organization or community view treatment
- Lack of empathy and rigid behavior
Root causes

• Stigma/Bias

• Misinformation/Lack of Knowledge

• Personal History
Change is . . .

“Never doubt that a small group of thoughtful, committed, citizens can change the world. Indeed, it is the only thing that ever has.”
— Margaret Mead

“Everyone thinks of changing the world, but no one thinks of changing himself.”
— Leo Tolstoy
Language matters

“Addict”
“Clean or Dirty”
“Non-compliant”
“Difficult”

Chronic Disease
Use Disorder
Negative or Positive Test Results
Barriers to treatment
Attitude

WE LIKE YOU. TOO :)
Include ALL staff
Define “Successful” Treatment
Offer Tours

• “The enormity of problems like hunger and social injustice can certainly motivate us to act. We can be convinced logically of the need for intervention and change. But it is the story of one individual that ultimately makes the difference—by offering living proof.”

  — John Capecci and Timothy Cage (“Living Proof: Telling Your Story to Make a Difference”)
Practice Trauma Informed Care

• For Patients
• For Staff
• For Providers
• For the Community
For Clinicians

Mentorship makes a difference

• [www.getstr-ta.org](http://www.getstr-ta.org) (Opioid Response Network)

• [https://pcssnow.org/mentoring/request-mentor/](https://pcssnow.org/mentoring/request-mentor/) (Provider Clinical Support Services/SAMHSA)

• [http://www.merfweb.org/](http://www.merfweb.org/) (MERF/CSAM)

• Substance Use Warmline at (855) 300-3595. (UCSF)
Group Exercise

• 2 minutes: Individually write down 2 ideas you might try to address clinician and/or staff behavior challenges identified earlier.

• 4 minutes: Discuss your ideas at your table and select two to share with group.

• Group report out
Questions?