Substance Use Resource Team

Cultural Change in Substance Use Disorder Treatment
An Organizational Approach

NAADAC
October 7, 2023

Presented by: Jen Stout, LICSW, MLADC; Peter Fifield, LCMHC, MLADC; and Kellie Mueller, MEd

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Manager of Substance Use Disorder Program and Integrated Behavioral Health Program, Wentworth-Douglass Hospital
Peter manages the Doorway and the integrated program which embeds behavioral health clinicians in primary and specialty care practices in Wentworth-Douglass' outpatient system.
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Kellie Mueller, M.Ed.
Assistant Vice President, Behavioral Health Services, Wentworth-Douglass Hospital
Kellie oversees all behavioral health programming and is responsible for the strategic planning to increase the depth and breadth of behavioral health services throughout the Wentworth-Douglass Health system.
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Jennifer Stout, MLADC, LICSW
Clinical Supervisor at The Doorway, Wentworth-Douglass Hospital
Jen provides assessment and referral services to individuals seeking substance use disorder treatment, as well as access to community based low barrier supports and resources. Jen also provides therapy to individuals with co-occurring trauma and substance use disorders at the Doorway.
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Quotes

“I am still really struggling with helping to manage these patients and their behaviors for 12 hours”

“The RN is often the person who gets things taken out on them after someone else’s behavior”

“My job is to fix things. I can’t fix this”

“They are often a burden and a safety issue which effects both staff and other patients on the floors”

“I need more experience”

“Sometimes when asking for adjunct meds...I feel like we get a lot of pushback from providers”

Big Picture Thinking: What’s going on?

<table>
<thead>
<tr>
<th>Resilience</th>
<th>Burnout</th>
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</thead>
<tbody>
<tr>
<td>Education</td>
<td>Confusion</td>
</tr>
<tr>
<td>Acceptance</td>
<td>Stigma</td>
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What is the Need?

**Competence**
- Do I have the right skills?

**Confidence**
- Am I comfortable?

**Support: technical & emotional**
- Do we have protocols?
  - Who can I turn to?

**Resources: staff & patients**
- What is available?

Project Team

**Operations Excellence**
- Structured approach to project management

**Allies**
- "Preaching to the choir"
- Early adopters
- Interdisciplinary

**Goal statement**
- Increase awareness, compassion & knowledge
- Decrease stigma, judgement & frustrations
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Diffusion of Innovation

What are the parts of DOI

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Baseline Data Collected 10/20
SURT Design Team 12/20 to 2/21
Training of 1st Cohort (n=90) 2/21 to 5/21
Training of 2nd Cohort (n=60) 9/21 to 1/22
Creation of SURT-Toolkit 1/22 to 8/22
Offered SURTified 8/22 to 12/22
SURT Toolkit 5/23

Objective: Create a Substance Use Resource Team by Training 6 Members

MENTORS
- Higher Level of Expertise
- Support & Guidance to Champions

CHAMPION
- Desire for Increased Education
- Passion to Champions
Nursing / Provider Survey

Educational needs

Comfort/Confidence level

AMA?

Drug Withdrawal Timelines

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Assembling Your Team

**Designated departments**
- Emergency Department
- Behavioral Health
- Social Work
- Care Coordination
- Hospitalists
- Inpatient Units

**Personal invitation**
- Letter to managers

**Initial hospital focus**
- Opened to outpatient
  - Primary Care & Specialty Care Practices

**All are welcome**
- Clinical
- Non-clinical
- Behind the scenes

Training

First round of training = 90 Champions

Second round of training = 60 Champions

Third round of training = 25 Champions
SURT members come from over 45 different departments within the organization and over 40 different job categories.

SURT Members from Different Departments Across the Organization

SURT Members’ Roles Across the Organization

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**Sustainability**

- Cohorts
- Organizational Awareness
- Communication
- Ongoing Education
- Sustainability
Survey

<table>
<thead>
<tr>
<th>Notes:</th>
<th>Baseline Data</th>
<th>Intervention Period</th>
<th>Post-Intervention</th>
<th>Post-Intervention</th>
<th>Post-Intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>% clinicians who feel confident in caring for SUD patients (somewhat or strongly agree)</td>
<td>Nov-20</td>
<td>Dec 20</td>
<td>Jan 21</td>
<td>Feb 21</td>
<td>Mar 21</td>
</tr>
<tr>
<td>% clinicians who feel comfortable assessing SUD patient needs (somewhat or strongly agree)</td>
<td></td>
<td>Jan 21</td>
<td>Feb 21</td>
<td>Mar 21</td>
<td>Apr 21</td>
</tr>
<tr>
<td>% clinicians who feel knowledgeable about support and resources for staff caring for SUD patients (somewhat or strongly agree)</td>
<td></td>
<td>Apr 21</td>
<td>May 21</td>
<td>Jun 21</td>
<td>Jul 21</td>
</tr>
<tr>
<td>% clinicians who feel knowledgeable about support and resources available to SUD patients (somewhat or strongly agree)</td>
<td></td>
<td>Jul 21</td>
<td>Aug 21</td>
<td>Sep 21</td>
<td>Oct 21</td>
</tr>
<tr>
<td>% clinicians who feel confident in caring for SUD patients (somewhat or strongly agree)</td>
<td></td>
<td>Oct 21</td>
<td>Nov 21</td>
<td>Dec 21</td>
<td>Jan 22</td>
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Go-Live!
Mentors identified, education modules developed, champions selected and educated.

59.13%

76.47%

43.96%

42.24%

79.03%

79.03%

61.12%

66.12%

81.81%

79.54%

59.09%

56.81%

86.27%

88.23%

76.47%

70.58%
The competition is getting HOTTER!
We have new pepperoni to add to our pizzas!

OGI: 7

WHC: 8
How to Use the Tool Kit

Create a comprehensive plan
Allow for flexibility and evolution
Module review
Champion expectations
Broaden your view
Culture change
Initiative vs. project
Sustainability

Other Efforts in our Community

Exeter Health Resources: TRUST (Trauma Unified Support Team)

<table>
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<tr>
<th>Task</th>
<th>Champion</th>
<th>Mentor</th>
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<tr>
<td>✓ Completed 3 Core modules: TIC 101, SUD and Patient Experience</td>
<td>✓ Completed 5/12 Modules, 2 of which must include the Core Modules (Can be asynchronous or live classes)</td>
<td>✓ Completed all modules 12/12 (including all live classes)</td>
</tr>
<tr>
<td>✓ Participate in case reviews and/or didactics on their unit as appropriate</td>
<td>✓ Serve as a resource to their assigned units/departments</td>
<td>✓ Serve as mentors to champions and as a resource to their assigned units/departments</td>
</tr>
<tr>
<td>✓ Responsible for communicating TIC information through the use of staff meetings and unit huddles as appropriate and under the guidance of their Mentor and/or the TIC Steering Committee</td>
<td>✓ Assist in identifying and reporting case review topics and/or debrief opportunities to their Mentor</td>
<td>✓ Attend the TIC Steering Committee meetings</td>
</tr>
<tr>
<td>✓ Facilitate communications from the TIC Steering Committee</td>
<td>✓ Report questions/feedback back to the Steering Committee</td>
<td>✓ Stay up-to-date on continuing education opportunities around TIC</td>
</tr>
<tr>
<td>✓ Maintain at least monthly communication with Champions on their unit</td>
<td>✓</td>
<td></td>
</tr>
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Big Picture Thinking: Final Thoughts?

- Burnout
- Confusion
- Stigma

- Resilience
- Education
- Acceptance

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Champion Feedback

“We use the same language and skill set working with those addicted to food and or tobacco as staff do with people with substance misuse.”

“I believe that everyone, no matter what field you go into in healthcare, will interact with people struggling with substance misuse. I think it should be standard training for anyone in our health system.”

“Knowing that I have resources available to me when needed has removed the fear of starting the conversation.”

“It has made me more compassionate and understanding of the struggles and stigma that these patients face...SURT has made me a better person, not just a better pharmacist.”

What next? email: Maria.Reed@WDHospital.org

“What building a tool kit is more than just putting arrows in your quiver. It is about learning, over time, through disciplined practice, how to become an archer.”