

National Behavioral Health Network for Tobacco & Cancer Control:

Master Class Community of Practice



National Behavioral Health Network
For Tobacco & Cancer Control

Initiating, Operating & Facilitating Wellness Groups

May 1st, 2018



Housekeeping

Please do the following **two** steps.

1. Turn **off** or **mute** your computer speakers.

2. GoToWebinar INSTRUCTIONS:

Join the webinar:

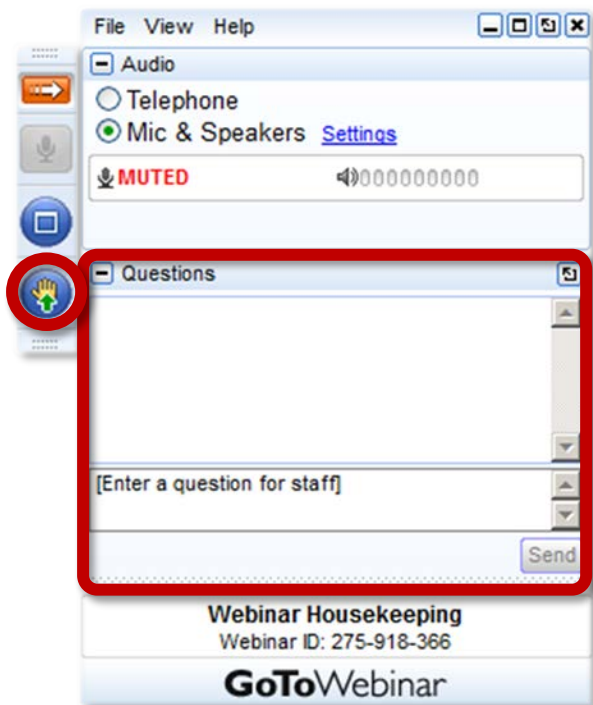
<https://attendee.gotowebinar.com/register/2209681210815806209>

Call in using your telephone: +1 (213) 929-4212

Access Code: 458-733-033

Audio PIN: Shown after joining the meeting

Please be sure to enter your unique audio pin so that we can unmute you!



The best way to ask a question is to use the question box in your GoToWebinar window.

We will have a brief Q&A session following the presentation.



Master Class CoP Resource Page



2018 Master Class CoP

SEARCH



Congratulations on being selected to participate in the 2018 Master Class Community of Practice!

The **2018 Master Class Community of Practice** (Master Class) is a 4-month initiative comprised of up to 20 community mental health and/or addiction treatment provider organizations that provide direct services to people with mental illnesses and substance use disorders and are interested in enhancing their organization's wellness activities. Participating organizations will gain access to tobacco cessation and cancer experts, training and technical assistance (TTA), and informational resources to help them develop and implement best practices to plan, initiate, operate, and sustain wellness groups focused on tobacco cessation and/or cancer control*.

Master Class CoP Materials

1. [Welcome Packet](#) (PDF)
2. [Action Planning Template](#) (word)
3. [Commitment Materials](#) (word)
4. [Master Class CoP Resources](#) (separate page)

Master Class CoP Activities (See [Welcome Packet](#) for full details)



018 Master Class CoP- Resources

SEARCH



018 Master Class CoP Resources

this page houses resources suggested by CoP faculty, peers, and NBHN staff for the 2018 Master Class CoP.

Curriculum: Tobacco Cessation, Cancer, or General Wellness

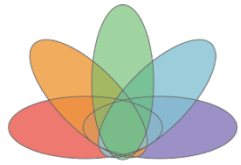
- [CHOICES](#) employs mental health consumers, called Consumer Tobacco Advocates, to deliver the vital message to smokers with mental illness that addressing tobacco is important and to motivate them to seek treatment
- [Rx for Change: Clinician-Assisted Tobacco Cessation](#) is a comprehensive tobacco cessation training program that equips health professional students and practicing clinicians, of all disciplines, with evidence-based knowledge and skills for assisting patients with quitting.
- [BHWP's Tobacco Free Toolkit for Healthcare Providers](#) is designed for a broad range of healthcare providers, including direct providers, administrators, and healthcare organizations, this toolkit provides an education on tobacco use, skills for engaging in tobacco cessation discussions, efficient methods for assessing an individual's readiness to quit, and information and research on treatments.
- [AAP's Resources for Educators and people working with Youth](#) will help to provide educators with lesson plans, statistics, and activities to help prevent tobacco use among America's youth.

<https://www.nationalcouncildocs.net/2018-master-class-cop>



Today's Agenda

- Welcome & Housekeeping
- Initiating, Operating & Facilitating Wellness Groups
- Q&A
- Wrap-up & next steps



Behavioral Health &
Wellness Program

Initiating, Operating & Facilitating Wellness Groups

Jim Pavlik
Program & Policy Analyst

Kathie Garrett
Research Senior Instructor



School of Medicine

UNIVERSITY OF COLORADO
ANSCHUTZ MEDICAL CAMPUS



Objectives

This specialized training is designed to:

- Review the role of group psychoeducation as part of a robust whole-person approach to improving wellness
- Identify best practices for sustaining group programming
- Share expert advice on creating safe, supportive group experiences that lead to better health outcomes for group participants
- Learn a stepped approach to program evaluation





Our Wellness Philosophy

Leading a meaningful and fulfilling life through conscious and self-directed behaviors, focused upon living at one's fullest potential



Eight Dimensions of Wellness



This is a Critical Issue

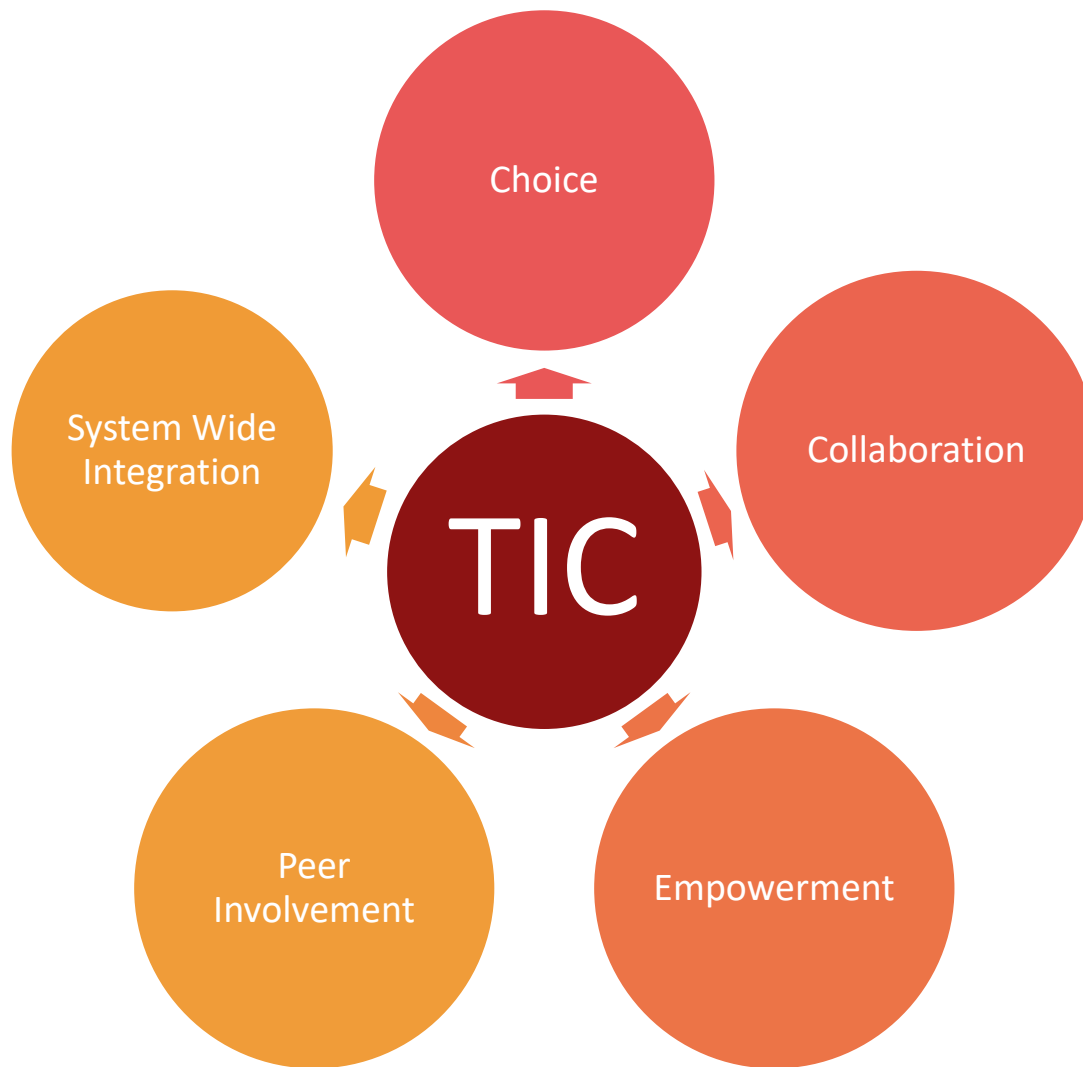
What is killing the majority of us is not infectious disease, but our chronic and modifiable behaviors





Recovery Focused Trauma Informed Care (TIC)





Core Concepts





Establishing, Supporting, & Maintaining Groups

Wellness Committee Roles

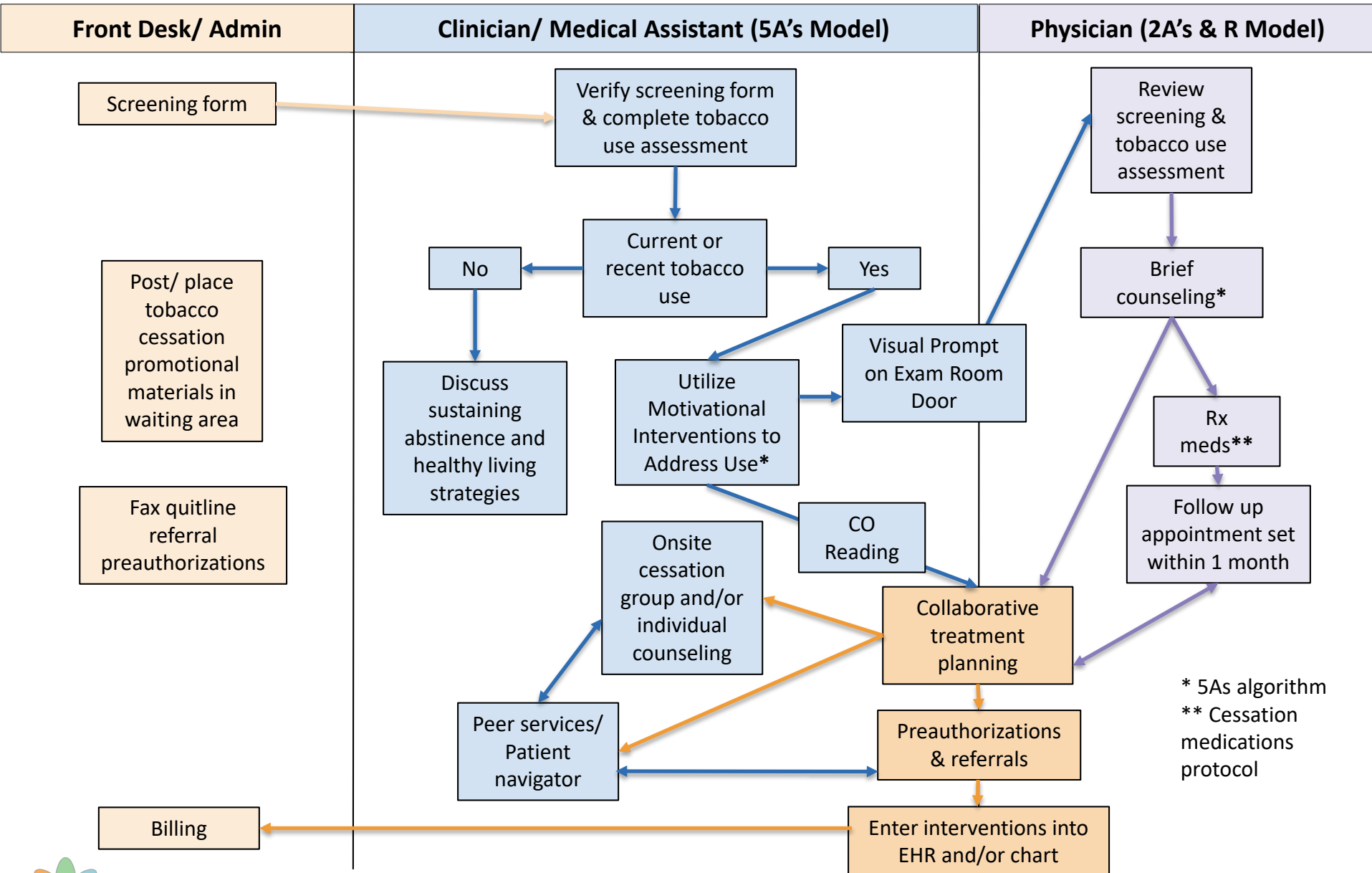
1. Conduct a workflow analysis
2. Catalogue staff skills and knowledge
3. Build enthusiasm for the project
4. Perform a needs assessment
5. Identify goals and objectives



The Workflow Analysis



Tobacco Cessation Workflow



* 5As algorithm
 ** Cessation medications protocol

Build Enthusiasm

- Internal and external communications operations
- Active and passive communications tactics
- Treatment planning and referral
- Enrollment options
- Alignment and cross-pollination with other groups
- Build in accountability for recruitment



Staff Buy-In is Critical

- Provider education is essential
- Training increases the likelihood of an evidence-based standard of care
- Behavioral health staff smoke at higher rates than the general population, but...
- Tobacco free policies and their accompanying supports increase successful quit attempts for both clients *and staff*





DIMENSIONS: Tobacco Free Group

Group Overview

Weekly, 60- to 90-minute, open group

- Participants may join at any time
- Some information does build on previous sessions
- Participants may attend as many sessions as needed
- Session topics cycle over a 6-week period



Participant Eligibility

Participants are eligible to attend group if:

- They are interested in learning information about tobacco use, tobacco cessation, and healthy living skills
- They are able to actively and appropriately participate in a group





Group Stages



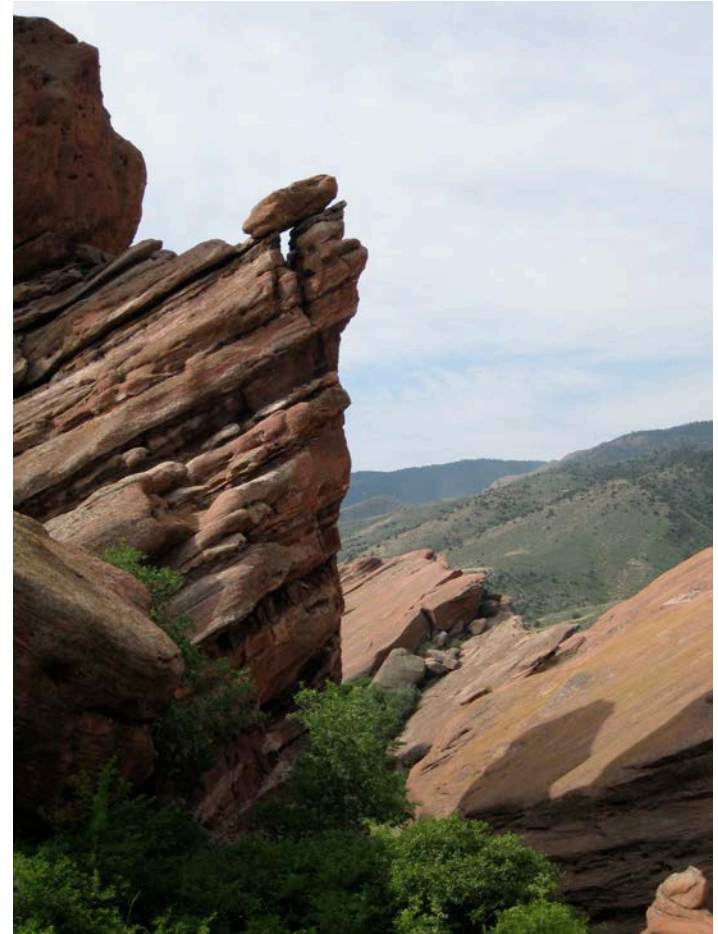
The background of the slide is a photograph of rows of green plastic stadium seats. The seats are arranged in a tiered fashion, receding into the distance. One seat in the middle ground is a contrasting yellow color. A green rounded rectangle with a thin dark border is superimposed over the seats, containing the title text.

Avoid Empty Chairs: Tips for Facilitators by Stage



Beginning Stage: Tips for Facilitators

- Lead group discussion
- Share your personal journey
- Create a positive and supportive environment
- Foster a learning environment



Beginning Stage: Tips for Facilitators



- Establish ground rules for an open and supportive environment
- Be clear about your “open door policy.” If participants drop out, allow them back in
- Changing behavior is easier when people feel supported!



Working Stage: Tips for Facilitators

- Continually encourage active group participation
- Facilitate and validate goal attainment
- Highlight common themes
- Model acceptance of conflict and caring confrontation



Ending Stage: Tips for Facilitators



- Review the group process
- Consolidate learning
- Facilitate anticipatory planning
- Deal gently with underlying feelings of loss



Transitions: Facilitator Tips

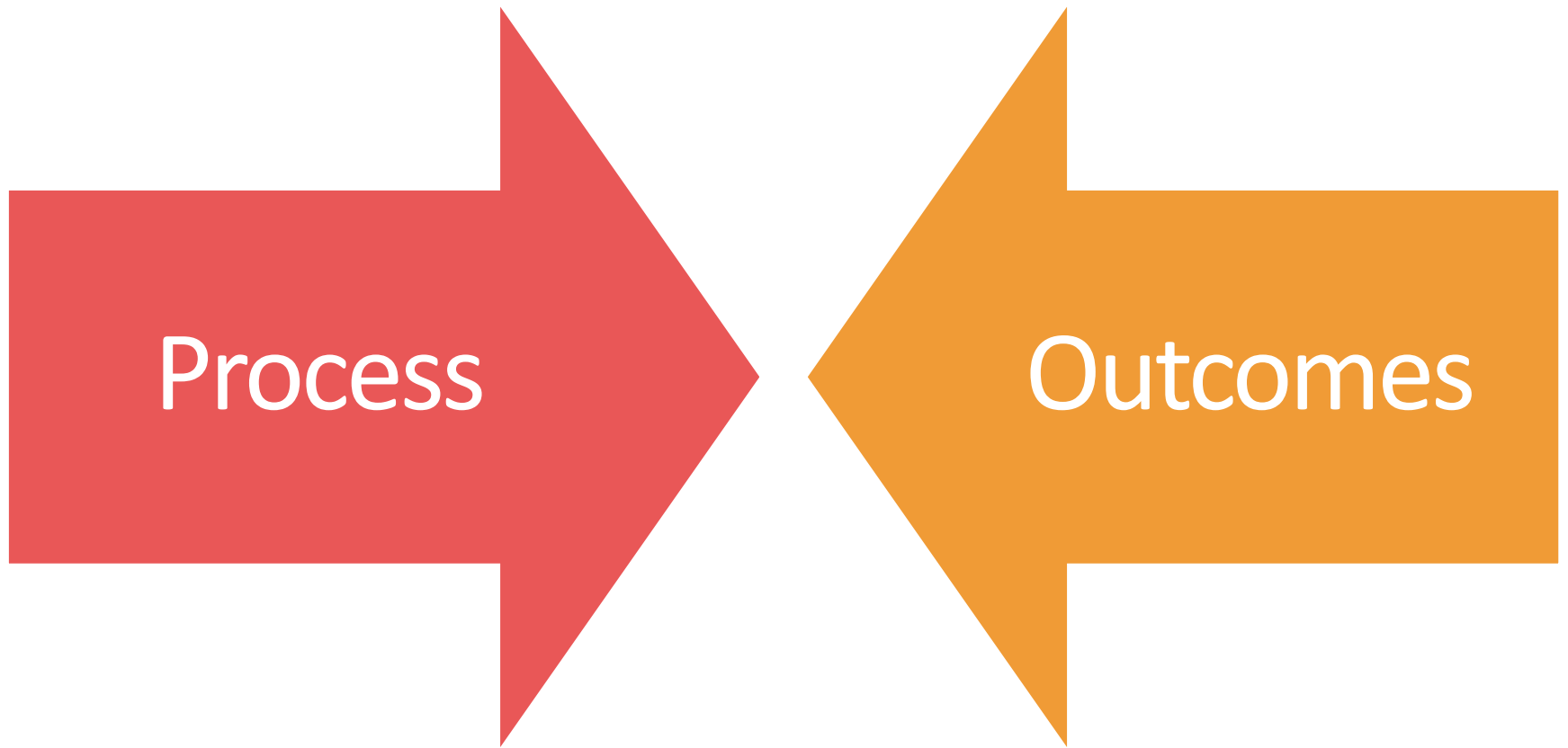
- Be sensitive and accepting of feelings
- Understand the underlying reasons for resistance
- Normalize the anxiety that accompanies transitions
- Be flexible – work with resistance and not against it





A Stepped Approach to Program Evaluation

A Classic Conflict



PROCESS

Pros

- Easily communicated and understood
- Easier to measure
- Scalable

Cons

- Less flexible in the face of changing needs/new capacities
- May not achieve program aims

OUTCOMES

Pros

- Flexibility around tasks may lead to efficiencies
- Removes bureaucratic barriers

Cons

- Outcomes are hard or impossible to measure
- Non-standard practices are harder to evaluate, hold people accountable



Blended, Stepped Approach

Phase 1

Phase 2

Phase 3

Developing referral sites

Recruitment

Attendance

Staff education/training, attitudes, and practices

Establishment and adherence to new policies

Staff confidence of new skills

Enhanced skillsets

Group (or modality) fidelity measures

Consumer experience satisfaction

Consumer longevity/completion rates

Stages of Change progress

Growth in patient knowledge, skills, & confidence

Development of new behaviors (e.g., reduction or abstinence)

Longer-term outcomes



Rapid Improvement Analysis



DIMENSIONS Action Plan

Reset Form

Name: _____ **Date:** 03-15-17

Training Location: Build a Clinic

Organization Name: N/A

Best Way to Contact You:

☐ Email: _____

☐ Phone: _____

Position (check all that apply):

☐ Administrator ☐ Other (specify): _____

☐ Peer Advocate

☐ Provider

DIMENSIONS training attended:

☐ Tobacco Free Policy – Fundamentals

☐ Tobacco Free Program – Advanced Techniques

☐ Tobacco Free Program – Fundamentals

☐ Well Body Program – Advanced Techniques

☐ Well Body Program – Fundamentals

☒ Other (specify): Build a Clinic

Readiness for change (check one):

☐ Pre-contemplation: *Not considering change*

☐ Contemplation: *Considering change*

☐ Preparation: *Making concrete plans for change*

☒ Action: *Actively taking steps toward change*

☐ Maintenance: *Sustaining changes already made*

Based on readiness for change, I will work to achieve the following goal(s) over the next 3-6 months.
Consider SMART goal criteria (Specific, Measurable, Achievable, Realistic, Timely).

Goal #1:
Will immediately put in place a process by which new patients who use tobacco and are "willing to talk to a professional about it" will be called a week after their clinic appointment. Success of this process will be reviewed during the next TA call. CAPD should track how many clients (1) set a quit date with them on the phone (2) are referred to the quit line (3) ask for a pharmacotherapy or a pharmacotherapy consult.

Completion of Goal #1 will be evidenced by:
Record of the enumerated list above.

Potential barriers to achieving Goal #1:
None?

Goal #2:
Tracy and Mary Karen will review the BHWP Tobacco Free Policy Toolkit and begin the process of filling out worksheets to design their long range plans in better detail. Long range plan will be reviewed with BHWP during next TA call and supportive short term goals will be picked at that time.

Completion of Goal #2 will be evidenced by:
Filled out worksheets from Toolkit. Brief written description (or itemized list of services and supports to be put in place as a result of the long term goal).

Potential barriers to achieving Goal #2:
Time.

Signature: _____

© 2015 Behavioral Health and Wellness Program



Behavioral Health & Wellness Program

303.724.3713

bh.wellness@ucdenver.edu

www.bhwellness.org



Behavioral Health and
Wellness Program



BHWP_UCD



Comments & Questions?





Next Steps

- 1:1 coaching with Faculty- *I will send around a signup form (various times in May)*
- Group Coaching Call #1
 - Wednesday May 2nd 4-5pm EST
- Webinar #2: Planning and Facilitating Cancer and Tobacco Cessation Educational Sessions
 - Tuesday May 15th 1:30-3pm EST
- Webinar #3: Cancer Education, Support, and Survivorship Groups
 - Tuesday, May 29th 2:00-3:30p ET
- Group Coaching Call #2
 - Wednesday May 30th 4-5pm EST



Questions? Contact Lea at
LeaS@thenationalcouncil.org