

# Implementing Medication-Assisted Treatment In A FQHC: The Valleywise Health Case Study

November 21, 2024 | 1:00 pm ET

**Note:** The following text was transcribed using Otter.ai. Any misspellings and typos are a result of that service being used.

Hello everyone.

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00:00:04.795 --> 00:00:06.035

My name is Corey Thornton.

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00:00:06.035 --> 00:00:07.715

I'm the senior editor here at Open Minds.

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00:00:07.715 --> 00:00:10.275

And welcome to today's Circle, executive Roundtable,

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00:00:10.275 --> 00:00:13.795

implementing Medication assisted treatment at an FQHC,

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00:00:14.055 --> 00:00:15.755

the Valley Wise Health Case study.

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00:00:15.945 --> 00:00:18.315

Today's Roundtable features Vicki Stables, director

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00:00:18.315 --> 00:00:19.275

of Outpatient Behavioral Health

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00:00:19.435 --> 00:00:20.475

Services at Valley Wise Health.

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00:00:20.775 --> 00:00:22.555  
During the q and a, she will be joined

11  
00:00:22.555 --> 00:00:25.435  
by Open Minds Executive Vice President Karen Cari.

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00:00:25.495 --> 00:00:27.755  
Before we get started, I have a few housekeeping reminders.

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00:00:27.755 --> 00:00:29.995  
Your audio was, is muted for today's briefing.

14  
00:00:30.505 --> 00:00:32.115  
However, during the q

15  
00:00:32.115 --> 00:00:34.435  
and a, we encourage you to submit any questions you may have

16  
00:00:34.435 --> 00:00:35.875  
using the question box located

17  
00:00:35.875 --> 00:00:36.915  
on the right side of your screen.

18  
00:00:37.295 --> 00:00:38.875  
And finally, the slides and the recording

19  
00:00:38.875 --> 00:00:40.835  
for today's round table will be archived

20  
00:00:40.835 --> 00:00:43.275  
and available for subscription members on the Open Minds

21  
00:00:43.275 --> 00:00:44.355  
website starting tomorrow.

22  
00:00:45.015 --> 00:00:46.275  
And with that, here's Vicki.

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00:00:47.345 --> 00:00:50.035  
Good afternoon everyone. Thank you for joining us today.

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00:00:50.525 --> 00:00:53.315

Today I'm gonna talk about implementing medication assisted

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00:00:53.315 --> 00:00:57.315

treatment in our Valley wise Health FQHC system.

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00:00:57.895 --> 00:01:00.515

I'm also gonna just talk about some of the other areas

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00:01:01.055 --> 00:01:02.395

of our hospital system,

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which in which we also have implemented

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00:01:04.875 --> 00:01:06.355

medication assisted treatment.

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00:01:06.945 --> 00:01:09.315

I'll give it a little bit of background about who we are,

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00:01:09.775 --> 00:01:12.555

why we did this, and kind of what are some

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00:01:12.555 --> 00:01:15.155

of the opportunities as well as some of the challenges

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00:01:15.155 --> 00:01:17.875

that we've encountered as we move forward

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00:01:17.985 --> 00:01:19.355

with this key initiative.

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00:01:22.445 --> 00:01:25.135

Okay. Just to start, I always like to kind of level set

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00:01:25.135 --> 00:01:26.535

and just start with what our mission

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00:01:26.555 --> 00:01:27.735

is at Valley Wise Health.

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00:01:27.795 --> 00:01:30.455

And our mission is to provide exceptional care without

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00:01:30.455 --> 00:01:32.135

exception every patient, every time.

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00:01:32.555 --> 00:01:35.815

And I think we always try to keep that as at the forefront

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00:01:35.815 --> 00:01:36.855

of everything that we do.

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00:01:36.885 --> 00:01:40.215

That this is really about how do we improve services

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00:01:40.435 --> 00:01:43.775

for those people who we serve, um, and,

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00:01:43.915 --> 00:01:45.495

and the individuals in our community

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00:01:45.495 --> 00:01:47.775

to make it a better community for everyone.

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00:01:48.595 --> 00:01:51.775

Um, we are the, what's called the public, um,

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00:01:52.035 --> 00:01:53.655

safety Net System Hospital.

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00:01:54.235 --> 00:01:58.135

Um, value-Wise went, um, under a name change

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00:01:58.555 --> 00:02:01.815

as a part of a whole redesign of our system.

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00:02:02.355 --> 00:02:05.655

We were formally the, um, county hospital.

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00:02:06.315 --> 00:02:11.295

And so we've had a long history, 140 plus years history

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00:02:11.315 --> 00:02:14.335  
of providing care to underserved population,

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00:02:14.565 --> 00:02:15.935  
diverse populations.

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00:02:16.275 --> 00:02:18.375  
We always talk about, we serve the individuals

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00:02:18.375 --> 00:02:21.975  
that other folks, um, are unwilling or unable to serve.

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00:02:22.555 --> 00:02:25.655  
Um, we're also one of the most, um, largest

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00:02:26.975 --> 00:02:29.255  
teaching facilities in the Southwest.

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00:02:29.715 --> 00:02:32.815  
Um, in all of our, all of our hospital systems,

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00:02:33.315 --> 00:02:35.655  
in our programs, in our behavioral health programs,

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00:02:35.715 --> 00:02:38.255  
our integrated behavioral health, we always are working

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00:02:38.255 --> 00:02:40.895  
with residents and students really trying to

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00:02:41.425 --> 00:02:44.255  
teach the future, um, of individuals.

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00:02:44.255 --> 00:02:46.735  
And that's where with medication assisted treatment,

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00:02:46.735 --> 00:02:48.815  
we did a lot of work with our residents.

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00:02:48.815 --> 00:02:50.615  
And I'll talk a little bit about that more in the few,

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00:02:50.795 --> 00:02:52.495  
and when I go over lessons learned.

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00:02:53.115 --> 00:02:54.655  
Um, but we are one of the larger,

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00:02:54.965 --> 00:02:58.215  
largest public teaching systems as well

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00:02:58.355 --> 00:03:01.845  
as the safety net hospital system here in Maricopa County.

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00:03:02.665 --> 00:03:06.365  
Um, we serve nearly 16,000 inpatient admissions,

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00:03:06.475 --> 00:03:10.405  
plus 70,000 adult and pediatric ed visits annually.

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00:03:11.065 --> 00:03:13.085  
Um, 70% of the individuals

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00:03:13.085 --> 00:03:15.485  
that we serve are vulnerable patients,

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00:03:15.485 --> 00:03:19.005  
financially vulnerable, who are uninsured, uninsured or,

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00:03:19.225 --> 00:03:20.245  
or underinsured.

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00:03:20.545 --> 00:03:23.525  
Um, with the majority of them being covered by access,

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00:03:23.855 --> 00:03:25.805  
which is Arizona's Medicaid program

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00:03:26.665 --> 00:03:28.125  
or the federal emergency.

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00:03:28.425 --> 00:03:32.165  
Um, services. We have a huge refugee program as well.

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00:03:33.185 --> 00:03:36.845

Um, valley Wise Health has our medical hospital.

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00:03:37.105 --> 00:03:40.165

Uh, we just actually redid our medical hospital.

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00:03:40.185 --> 00:03:43.565

We have three behavioral health hospitals for individuals

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00:03:43.565 --> 00:03:45.885

who are going to order over court ordered treatment,

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00:03:45.885 --> 00:03:47.005

court order evaluation.

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00:03:47.385 --> 00:03:50.285

And we have 30 community 13 community health centers

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00:03:50.285 --> 00:03:51.445

throughout Maricopa County.

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00:03:53.035 --> 00:03:55.455

Um, and I'll talk a little bit more about some

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00:03:55.455 --> 00:03:57.575

of the other services that we have as well.

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00:03:58.155 --> 00:04:00.015

But I first wanted to start with kind

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00:04:00.015 --> 00:04:01.335

of our needs assessment,

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00:04:01.515 --> 00:04:03.535

our Community Health Needs assessment report.

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00:04:03.535 --> 00:04:06.615

And we do this every three years to really identify

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00:04:06.725 --> 00:04:09.255

what are the key indicators, what are the, what are,

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00:04:09.255 --> 00:04:12.255

how do we make sure that we're providing the services

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00:04:12.525 --> 00:04:16.175

that our community really needs and can, can benefit from.

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00:04:16.795 --> 00:04:20.735

And, and this assessment, which we call our CHNA

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00:04:20.735 --> 00:04:23.615

or our Community Health Needs Assessment, um,

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00:04:23.615 --> 00:04:27.495

really prioritizes what we're gonna focus on, um,

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00:04:27.515 --> 00:04:29.295

within our hospital system.

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00:04:29.755 --> 00:04:31.695

And this guides us against

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00:04:31.815 --> 00:04:33.535

strategically for where we're gonna look.

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00:04:33.595 --> 00:04:35.575

And so, I'm not gonna go into a lot of details.

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00:04:35.835 --> 00:04:37.335

I'm sure you'll get a copy of the slides.

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00:04:37.395 --> 00:04:40.575

You can look through that. I also have my email address at

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00:04:40.575 --> 00:04:43.575

the end of the presentation today, so feel free to reach out

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00:04:43.575 --> 00:04:44.735

with me if you have any questions

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00:04:44.875 --> 00:04:46.655

or you, did you, you thought of something later

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00:04:46.755 --> 00:04:49.255

and you weren't sure, um, shoot me an email.

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00:04:49.835 --> 00:04:52.135

Um, I think the one thing that really stood out

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00:04:52.135 --> 00:04:56.015

to the US the most is that the priorities

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00:04:56.085 --> 00:04:59.375

that really came out in this needs assessment were

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00:04:59.375 --> 00:05:03.255

around substance use, um, around drug overdose,

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00:05:03.485 --> 00:05:05.015

alcohol related substance use,

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00:05:05.275 --> 00:05:08.415

and also mental health were the key key areas

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00:05:09.125 --> 00:05:12.735

that really came out as the focus for us to focus on.

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00:05:13.475 --> 00:05:16.135

Um, and then again, here's some additional information

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00:05:16.905 --> 00:05:21.495

about, um, the populations that we serve, more breakdown

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00:05:21.835 --> 00:05:25.375

of, um, of our populations within our community health

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00:05:25.375 --> 00:05:27.695

centers, as well as our hospital system.

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00:05:28.235 --> 00:05:31.735

But again, two primary areas that really came out

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00:05:31.735 --> 00:05:32.735

of this needs assessment

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00:05:32.835 --> 00:05:35.695

and this large document that it created with,

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00:05:35.755 --> 00:05:39.535

and that we used as our strategic kind of light to tell us

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00:05:39.535 --> 00:05:41.695

what we need to do with substance use and mental health.

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00:05:42.635 --> 00:05:46.415

Um, as I mentioned, we have 13, um,

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00:05:46.415 --> 00:05:48.975

community health centers throughout Maricopa County.

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00:05:49.235 --> 00:05:52.735

We also have, um, our behavioral health centers,

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00:05:52.745 --> 00:05:54.015

three behavioral health centers.

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00:05:54.155 --> 00:05:57.485

We have emergency rooms, we have, um, specialized care.

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00:05:57.785 --> 00:05:59.725

We have a national burn center.

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00:06:00.425 --> 00:06:04.925

Um, we have a, a whole variety of services, um,

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00:06:04.925 --> 00:06:08.285

throughout our hospital system to serve Maricopa County.

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00:06:08.945 --> 00:06:10.645

Um, just to kind of level set,

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00:06:10.765 --> 00:06:13.005

Maricopa County is the fourth largest county

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00:06:13.005 --> 00:06:14.365

in, in the United States.

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00:06:15.105 --> 00:06:17.605

And one of the problems that we wanted

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00:06:17.605 --> 00:06:21.605

to really focus on was opioid deaths in Arizona

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00:06:21.605 --> 00:06:24.605

because of the significant number of deaths, um,

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00:06:24.605 --> 00:06:26.445

that were happening and that we'd seen

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00:06:26.465 --> 00:06:28.845

and the continued growth for the need, um,

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00:06:28.985 --> 00:06:30.045

to address this issue.

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00:06:30.785 --> 00:06:35.205

We were really fortunate, um, that, um,

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00:06:36.605 --> 00:06:38.845

I came on board about eight years ago,

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00:06:38.865 --> 00:06:41.525

almost nine years ago now, um, to valley wise

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00:06:41.665 --> 00:06:43.085

to grow our outpatient

146

00:06:43.145 --> 00:06:44.645

and behavioral health services

147

00:06:44.935 --> 00:06:46.365

throughout our service system.

148

00:06:47.065 --> 00:06:50.205

Um, and so one of the things

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00:06:50.205 --> 00:06:54.405

that we did is we actually applied for a SAMHSA grant

150  
00:06:54.705 --> 00:06:57.925  
to really focus on, um, getting some additional funding

151  
00:06:58.065 --> 00:07:01.125  
to help us support this initiative.

152  
00:07:01.705 --> 00:07:04.725  
Um, valley Wise had never in all of their history

153  
00:07:04.725 --> 00:07:06.365  
that had applied for a SAMHSA grant.

154  
00:07:06.425 --> 00:07:07.605  
So we were very excited

155  
00:07:07.665 --> 00:07:09.805  
to receive our first ever SAMHSA grant.

156  
00:07:10.145 --> 00:07:14.325  
We got about \$2.6 million for a five year period.

157  
00:07:14.905 --> 00:07:18.005  
Um, our grant we focused on was going to Matt

158  
00:07:18.005 --> 00:07:19.725  
to fight opioid use disorders.

159  
00:07:20.305 --> 00:07:23.405  
Um, we really wanted to focus on this area of

160  
00:07:23.755 --> 00:07:25.325  
what are the gaps in our care

161  
00:07:25.785 --> 00:07:28.245  
and how do we begin to build capacity

162  
00:07:28.465 --> 00:07:29.885  
and expand our workforce.

163  
00:07:30.545 --> 00:07:32.685  
Um, one of the things we always wanna do,

164  
00:07:32.785 --> 00:07:35.645  
and we do a lot of braided funding, we're very fortunate.

165  
00:07:35.645 --> 00:07:36.845  
We also have a foundation,

166  
00:07:36.945 --> 00:07:39.725  
so we get some foundation funding, we get all

167  
00:07:39.725 --> 00:07:42.165  
of our funding, we accept all the major, um,

168  
00:07:43.385 --> 00:07:44.925  
health plans, all the payers.

169  
00:07:45.305 --> 00:07:47.005  
Um, again, as I mentioned earlier,

170  
00:07:47.705 --> 00:07:50.485  
we have a large Medicaid population access.

171  
00:07:50.865 --> 00:07:52.565  
Um, but we try to really kind of,

172  
00:07:52.785 --> 00:07:55.205  
how do we utilize all the different funding

173  
00:07:55.385 --> 00:07:56.925  
to build our service system

174  
00:07:57.305 --> 00:07:59.165  
and to do it in a sustainable manner.

175  
00:07:59.545 --> 00:08:01.005  
Um, so one of the areas here

176  
00:08:01.005 --> 00:08:04.045  
that we focused on in this grant was really looking at

177  
00:08:04.425 --> 00:08:06.725  
how do we build an integrated team

178

00:08:07.105 --> 00:08:10.205  
of peer recovery support specialists, um,

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00:08:10.355 --> 00:08:13.605  
that can support individuals receiving MAT services

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00:08:14.315 --> 00:08:18.005  
from our primary care providers and our psychiatrists,

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00:08:18.345 --> 00:08:21.525  
and how do we use these dollars kind of as that ramp up

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00:08:21.625 --> 00:08:26.485  
to pay for their initial onboarding, hiring, training,

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00:08:26.595 --> 00:08:28.485  
getting them in place,

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00:08:28.905 --> 00:08:31.245  
and then they would be able to sustain,

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00:08:31.545 --> 00:08:34.285  
we can sustain those positions ongoing

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00:08:34.945 --> 00:08:36.485  
by billing for those services.

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00:08:36.855 --> 00:08:39.725  
We're very fortunate in Arizona that, um,

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00:08:39.875 --> 00:08:42.485  
peer delivered services are a covered service.

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00:08:43.065 --> 00:08:45.965  
And just for folks who may not be familiar with, um,

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00:08:46.025 --> 00:08:47.965  
the term peer recovery support specialist,

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00:08:48.105 --> 00:08:49.205  
I'm hoping everyone is,

192  
00:08:49.625 --> 00:08:52.325  
but just in case you're not, those are individuals

193  
00:08:52.345 --> 00:08:54.965  
who they themselves are in recovery,

194  
00:08:55.045 --> 00:08:56.085  
either from mental health

195  
00:08:56.105 --> 00:08:59.085  
or substance use For this specific, um, program,

196  
00:08:59.465 --> 00:09:03.325  
we hired individuals who are in recovery, um, from

197  
00:09:04.125 --> 00:09:07.645  
substance use and who can then share their knowledge,

198  
00:09:07.655 --> 00:09:08.685  
their experience.

199  
00:09:08.795 --> 00:09:10.085  
They're also trained

200  
00:09:10.185 --> 00:09:13.445  
and certified in Arizona to deliver these services.

201  
00:09:14.105 --> 00:09:18.005  
Um, these services are then paid at, um,

202  
00:09:18.785 --> 00:09:23.165  
either the, um, contracted rate, the fee for service rate,

203  
00:09:23.345 --> 00:09:25.965  
if it's an through, um, access,

204  
00:09:26.025 --> 00:09:27.365  
or through one of the health plans,

205  
00:09:27.905 --> 00:09:32.285  
or if it's in one of our FQHC, the actual

206  
00:09:32.965 --> 00:09:35.725  
services delivered by peer recovery support specialists

207  
00:09:35.905 --> 00:09:37.845  
and our integrated behavioral health clinicians

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00:09:37.845 --> 00:09:39.845  
and others is paid at the PPS rate.

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00:09:40.225 --> 00:09:42.365  
Um, and so we do get that full PPS rate,

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00:09:42.365 --> 00:09:44.005  
which is unbelievable.

211  
00:09:44.105 --> 00:09:47.005  
And so it really helped us to utilize, again, this funding

212  
00:09:47.065 --> 00:09:49.005  
to do that initial ramp up,

213  
00:09:49.385 --> 00:09:52.805  
but then to be able to sustain them long-term.

214  
00:09:53.625 --> 00:09:56.205  
And I'll talk about some of the achievements we've had

215  
00:09:56.205 --> 00:09:59.685  
with this grant and overall how we utilize this funding

216  
00:09:59.865 --> 00:10:02.365  
to really, um, fuel, um,

217  
00:10:02.375 --> 00:10:05.605  
medication assisted treatment services in our federally

218  
00:10:05.605 --> 00:10:07.125  
qualified health centers in all

219  
00:10:07.125 --> 00:10:09.565  
of our specialty behavioral health clinics and,

220  
00:10:09.665 --> 00:10:13.085  
and also in our ERs and other areas of our hospital system.

221  
00:10:13.945 --> 00:10:16.485  
Um, we also wanted to increase the number

222  
00:10:16.485 --> 00:10:17.845  
of licensed providers.

223  
00:10:17.985 --> 00:10:20.205  
One of the things that we said early on is

224  
00:10:20.205 --> 00:10:22.485  
that we will not do medication alone.

225  
00:10:22.625 --> 00:10:26.205  
We really wanna focus on a whole comprehensive team of folks

226  
00:10:26.305 --> 00:10:28.925  
who can work together to support the individual

227  
00:10:29.545 --> 00:10:32.405  
who is in need of medication assisted treatment so

228  
00:10:32.405 --> 00:10:33.605  
that they're, um, working

229  
00:10:33.675 --> 00:10:35.885  
with an independently licensed clinician

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00:10:36.105 --> 00:10:38.125  
and a peer support in addition

231  
00:10:38.145 --> 00:10:40.925  
to either their primary care provider or psychiatrist.

232  
00:10:41.865 --> 00:10:45.485  
Um, another area we wanna focus on was really kind of

233  
00:10:46.085 --> 00:10:48.245  
reducing the stigma related to MAT services.

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00:10:49.065 --> 00:10:50.405

Um, and I'll talk about some

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00:10:50.405 --> 00:10:52.685

of the lessons learned later on about some

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00:10:52.685 --> 00:10:56.005

of the challenges we had even in getting

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00:10:56.985 --> 00:11:00.125

buy-in from leadership to apply for this grant, um,

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00:11:00.125 --> 00:11:02.565

and getting buy-in from folks prior

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00:11:02.565 --> 00:11:03.925

to applying for this grant.

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00:11:04.305 --> 00:11:06.045

We also had gotten, um,

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00:11:06.355 --> 00:11:08.885

some funding from our Arizona Alliance

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00:11:08.885 --> 00:11:11.885

of Community Health Centers to do a needs assessment

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00:11:12.425 --> 00:11:15.405

and to have, um, an individual do interviews

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00:11:15.405 --> 00:11:17.925

with our primary care providers to see kind

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00:11:17.925 --> 00:11:19.125

of a readiness assessment.

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00:11:19.425 --> 00:11:22.805

How ready are we to start providing behavioral health

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00:11:23.165 --> 00:11:24.805

services in our community health centers?

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00:11:25.225 --> 00:11:27.525

And one of the things we learned early on was

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00:11:27.525 --> 00:11:29.925

that there was a lot of stigma, a lot of fear,

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00:11:30.265 --> 00:11:31.365

and a lot of concerns.

251

00:11:31.525 --> 00:11:33.245

I think there was this negative belief

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00:11:33.245 --> 00:11:35.365

that if we started providing behavioral health,

253

00:11:35.705 --> 00:11:39.085

if we started doing more services, serving individuals, um,

254

00:11:39.085 --> 00:11:41.685

struggling with substance use, that, you know,

255

00:11:41.825 --> 00:11:45.005

you we're gonna have these people camped out in our clinics,

256

00:11:45.005 --> 00:11:48.965

we're gonna have these people, you know, um, doing all sorts

257

00:11:48.965 --> 00:11:52.325

of things and just, you know, those, all those things that,

258

00:11:52.795 --> 00:11:54.885

that stigma that, you know,

259

00:11:54.885 --> 00:11:58.285

unfortunately has traditionally been associated with, um,

260

00:11:58.645 --> 00:12:00.205

providers who provide these services.

261

00:12:00.785 --> 00:12:03.125

And so we had to do a lot of work to say,

262

00:12:03.465 --> 00:12:05.245

now we're gonna have a whole comprehensive

263

00:12:05.315 --> 00:12:06.365

team to support people.

264

00:12:06.365 --> 00:12:08.285

We're gonna be addressing social determinants of health,

265

00:12:08.675 --> 00:12:11.325

that the doctor's not gonna be there alone trying

266

00:12:11.485 --> 00:12:15.125

to manage this, that they have a whole team, a whole, um,

267

00:12:15.235 --> 00:12:16.845

care team that's gonna work together

268

00:12:16.905 --> 00:12:18.885

to support the individual to be successful.

269

00:12:19.985 --> 00:12:22.845

Um, we also wanted to look at how do we expand referrals

270

00:12:22.845 --> 00:12:24.405

with our partnering organizations.

271

00:12:24.905 --> 00:12:28.725

Um, as, uh, FQHC, we can only do so much.

272

00:12:29.055 --> 00:12:30.445

We're not able to do,

273

00:12:30.495 --> 00:12:32.965

we're not currently doing intensive outpatient,

274

00:12:33.135 --> 00:12:35.205

we're not doing detox, those kind of things.

275

00:12:35.425 --> 00:12:38.205

So we have to have strong partnerships, um, as well

276  
00:12:38.205 --> 00:12:40.965  
as strong partnerships to address those social determinants

277  
00:12:40.965 --> 00:12:43.365  
of health that our system is not able to do.

278  
00:12:44.185 --> 00:12:47.965  
Um, when we first, um, applied for this grant,

279  
00:12:48.145 --> 00:12:50.685  
and every time we talk about this grant,

280  
00:12:50.945 --> 00:12:53.205  
we let folks know why this is so critical.

281  
00:12:53.225 --> 00:12:54.285  
And the, and the reason is

282  
00:12:54.285 --> 00:12:57.045  
that more than five people every day die from

283  
00:12:57.045 --> 00:12:58.685  
opioid overdoses in Arizona.

284  
00:12:59.065 --> 00:13:02.085  
And this that was, um, prior to covid.

285  
00:13:02.305 --> 00:13:04.445  
And so I can only imagine that that number,

286  
00:13:04.505 --> 00:13:07.645  
and I probably need to update this slide to see what exactly

287  
00:13:07.675 --> 00:13:08.925  
that number is currently,

288  
00:13:08.985 --> 00:13:11.485  
but there was a huge need, a huge demand.

289  
00:13:14.195 --> 00:13:16.055  
So just to talk a little bit about some

290  
00:13:16.055 --> 00:13:19.015  
of the accomplishments that we've been able to accomplish

291  
00:13:19.075 --> 00:13:20.855  
to date, um, with our grant,

292  
00:13:20.855 --> 00:13:23.935  
as we've had 165 patients enrolled, um,

293  
00:13:24.075 --> 00:13:28.095  
84, 80 5% of our SAMHSA year to date goal.

294  
00:13:28.115 --> 00:13:30.495  
And I don't know if people are familiar with SAMHSA

295  
00:13:30.835 --> 00:13:32.855  
and grants and all of the requirements

296  
00:13:32.875 --> 00:13:33.895  
and different things like that.

297  
00:13:33.955 --> 00:13:35.775  
So there's a lot of reporting requirements.

298  
00:13:36.275 --> 00:13:38.535  
Um, we're very fortunate we have an evaluator

299  
00:13:38.535 --> 00:13:41.015  
that helps us in doing the evaluation of this grant.

300  
00:13:41.115 --> 00:13:44.695  
And is, is looking at areas not only what are we achieving,

301  
00:13:44.835 --> 00:13:46.735  
but what are the opportunities for us.

302  
00:13:46.835 --> 00:13:48.135  
And, and we're really lucky

303  
00:13:48.135 --> 00:13:50.535  
that we have a strong partnership with our evaluator

304  
00:13:50.635 --> 00:13:54.175  
who has a history of working with programs that provide

305  
00:13:54.895 --> 00:13:56.655  
substance use and medication assisted treatment

306  
00:13:56.655 --> 00:13:57.815  
so we can learn from her

307  
00:13:58.115 --> 00:14:00.255  
and learn from our data about how we can improve things.

308  
00:14:01.155 --> 00:14:03.775  
Um, so as of to date,

309  
00:14:03.875 --> 00:14:06.415  
we have deployed five peer support specialists

310  
00:14:06.415 --> 00:14:09.415  
that work across those 13 community health centers.

311  
00:14:10.075 --> 00:14:11.855  
Um, we have licensed clinicians

312  
00:14:11.885 --> 00:14:13.775  
that partner at each of those sites.

313  
00:14:14.275 --> 00:14:17.455  
Um, one of the things we also focused on is, as many

314  
00:14:17.455 --> 00:14:19.975  
of you all probably are experiencing as well,

315  
00:14:20.395 --> 00:14:23.415  
we don't have enough providers to meet the demand

316  
00:14:23.415 --> 00:14:25.855  
of services, and we definitely don't have enough

317  
00:14:26.255 --> 00:14:29.975  
independently or, or, um, associate licensed clinicians.

318

00:14:30.435 --> 00:14:32.855

Um, and so we have developed a whole

319

00:14:33.495 --> 00:14:36.775

training program within our, um, service system

320

00:14:36.945 --> 00:14:41.735

where we pair up a licensed clinician also with, um,

321

00:14:42.005 --> 00:14:44.975

individuals who are working on becoming independently

322

00:14:45.255 --> 00:14:47.975

licensed so that we can provide that clinical supervision

323

00:14:47.995 --> 00:14:50.575

for them and grow our whole workforce.

324

00:14:51.145 --> 00:14:52.685

And so we're really trying to develop

325

00:14:52.685 --> 00:14:55.245

that career ladder within Valley Wise health so

326

00:14:55.245 --> 00:14:58.165

that we can grow our future clinicians, you know,

327

00:14:58.165 --> 00:15:00.765

just like we do our residences and everything else.

328

00:15:00.935 --> 00:15:04.605

Again, focusing on that teaching hospital, um, and, and,

329

00:15:04.605 --> 00:15:07.245

and focus on that expansion of how do we grow the future.

330

00:15:08.305 --> 00:15:12.205

Um, we've recruited to date seven providers within our

331

00:15:13.015 --> 00:15:15.645

FQHCs who are medical physicians

332

00:15:15.785 --> 00:15:17.685  
who are providing MAT services,

333

00:15:17.865 --> 00:15:20.205  
who have received specialized training, who partner

334

00:15:20.235 --> 00:15:23.525  
with folks who work with a team to really meet the needs

335

00:15:23.665 --> 00:15:25.805  
of individuals and feed families.

336

00:15:26.145 --> 00:15:28.445  
Um, we're also have our

337

00:15:28.965 --> 00:15:31.725  
specialty behavioral health programs, um, outside

338

00:15:31.725 --> 00:15:34.845  
of our FQHC, but under the umbrella of our hospital.

339

00:15:35.225 --> 00:15:38.805  
And so those specialty programs that we have, um, and,

340

00:15:38.905 --> 00:15:42.925  
and working in a hospital system, we decided

341

00:15:42.945 --> 00:15:45.445  
to call them our specialty behavioral health programs.

342

00:15:45.445 --> 00:15:48.605  
Oftentimes they're referred to as clinic serving persons

343

00:15:48.605 --> 00:15:50.765  
with serious mental illness, behavioral health

344

00:15:50.765 --> 00:15:52.605  
problems, that type of thing.

345

00:15:52.665 --> 00:15:54.765  
So they're, um, licensed outpatient

346

00:15:54.765 --> 00:15:56.045  
behavioral health programs.

347

00:15:56.385 --> 00:15:57.965  
Um, and we have several areas.

348

00:15:58.185 --> 00:16:01.245  
We have two first episode centers that serve young folks

349

00:16:01.305 --> 00:16:04.125  
who are experiencing their first episode of psychosis.

350

00:16:04.825 --> 00:16:08.805  
Um, and we're trying to intervene early, keep them on track

351

00:16:08.805 --> 00:16:11.765  
with their life, a very comprehensive team of folks.

352

00:16:12.225 --> 00:16:13.965  
Um, and, um, employment

353

00:16:13.965 --> 00:16:17.285  
and education specialists, um, case managers

354

00:16:17.585 --> 00:16:20.445  
or team specialists referred to nursing doctor,

355

00:16:20.685 --> 00:16:23.525  
a whole comprehensive team outpatient program

356

00:16:23.835 --> 00:16:26.965  
that is really focusing on helping young folks

357

00:16:27.065 --> 00:16:29.685  
who are experiencing their first episode of psychosis,

358

00:16:29.825 --> 00:16:32.205  
as well as working with their entire family

359

00:16:32.585 --> 00:16:35.445  
to help support them so that they can stay on track

360

00:16:35.445 --> 00:16:37.245

with their goals, their dreams in their life.

361

00:16:37.585 --> 00:16:39.885

That's one program. We also have, um,

362

00:16:40.025 --> 00:16:43.165

two assertive community treatment programs, um,

363

00:16:43.215 --> 00:16:46.045

which are intensive services serving individuals

364

00:16:46.065 --> 00:16:47.325

who have a serious mental illness,

365

00:16:47.785 --> 00:16:50.565

who really have struggled in the traditional behavioral

366

00:16:50.565 --> 00:16:52.365

health system and have not done well.

367

00:16:52.785 --> 00:16:56.605

Um, we always kind of describe it as a, as a whole kind

368

00:16:56.605 --> 00:16:59.125

of a hospital system without walls

369

00:16:59.275 --> 00:17:02.285

that really do whatever it takes to keep people

370

00:17:02.825 --> 00:17:05.205

in the community and keep them successful.

371

00:17:05.705 --> 00:17:10.325

Um, those teams run 24 7, as does our first episode centers.

372

00:17:10.825 --> 00:17:13.765

Um, and they have psychiatrists, nursing,

373

00:17:14.625 --> 00:17:16.165

um, peer supports.

374

00:17:16.165 --> 00:17:17.485

All of our teams have peer support.

375

00:17:18.025 --> 00:17:19.245

Um, we have employment

376

00:17:19.445 --> 00:17:22.925

and rehab, um, employment specialists that are working

377

00:17:22.995 --> 00:17:25.565

with individuals to keep them successful

378

00:17:25.705 --> 00:17:27.205

and keep them in the community.

379

00:17:27.375 --> 00:17:29.045

Oftentimes we say folks

380

00:17:29.105 --> 00:17:32.445

who are receiving assertive community treatment, um, would,

381

00:17:32.555 --> 00:17:35.605

without these services probably be institutionalized either

382

00:17:35.605 --> 00:17:40.085

in a hospital, in a criminal justice setting system, um,

383

00:17:40.785 --> 00:17:41.885

on the streets are dead.

384

00:17:41.985 --> 00:17:44.565

And so it really does save lives every day.

385

00:17:44.565 --> 00:17:45.565

Those two programs.

386

00:17:46.225 --> 00:17:48.845

Um, and then one of our sort of community treatment teams

387

00:17:49.425 --> 00:17:53.125

is really focused on serving individuals who have, um,

388

00:17:53.225 --> 00:17:55.645  
are involved in the, um, justice system,

389

00:17:55.645 --> 00:17:57.445  
and it's called a forensic act team.

390

00:17:57.985 --> 00:17:59.685  
So kind of a little bit

391

00:17:59.685 --> 00:18:01.245  
of overview of some of those services.

392

00:18:01.305 --> 00:18:05.045  
Within all of those programs, we can provide mat inductions,

393

00:18:05.045 --> 00:18:08.605  
ongoing mat services, as well as having peer support, um,

394

00:18:08.605 --> 00:18:11.205  
counseling services, and a whole variety of other services

395

00:18:11.345 --> 00:18:13.405  
to support individuals in being, um,

396

00:18:13.405 --> 00:18:14.685  
successful in their recovery.

397

00:18:15.745 --> 00:18:19.645  
Um, as I mentioned, we've listed seven providers, um, within

398

00:18:20.185 --> 00:18:22.565  
our FQHCs or our federal qualified health centers.

399

00:18:22.635 --> 00:18:25.165  
Five of those are MDs and two are nurse practitioners.

400

00:18:27.605 --> 00:18:31.505  
Um, to date, just on some of, in our enrollment numbers, um,

401

00:18:31.685 --> 00:18:33.105  
as I talk about lessons learned,

402  
00:18:33.105 --> 00:18:36.145  
you'll hear me talk about this took a while to get it going,

403  
00:18:36.245 --> 00:18:40.105  
to get buy-in to get people on board to recruit, um,

404  
00:18:40.105 --> 00:18:41.265  
medical providers.

405  
00:18:41.485 --> 00:18:44.145  
We didn't have any problem getting psychiatrists,

406  
00:18:44.145 --> 00:18:45.905  
but trying to get medical providers

407  
00:18:46.005 --> 00:18:48.425  
to do mat services was really a challenge.

408  
00:18:49.165 --> 00:18:50.985  
Um, so our first year of our goal,

409  
00:18:51.125 --> 00:18:53.025  
you can see we didn't quite hit our target.

410  
00:18:53.125 --> 00:18:55.905  
We, we knew it would be a huge lift for us

411  
00:18:55.925 --> 00:18:58.105  
to do this in our service system, so we said,

412  
00:18:58.105 --> 00:19:00.465  
we're just gonna do 25, and we actually only got six,

413  
00:19:00.765 --> 00:19:02.345  
but then we started getting momentum.

414  
00:19:02.405 --> 00:19:05.225  
And one of the things that we learned is as we continue to,

415  
00:19:05.445 --> 00:19:08.905  
um, present to folks talk about, folks talk about this,

416

00:19:09.355 --> 00:19:10.625  
we're starting to get more people,

417

00:19:10.625 --> 00:19:13.105  
we're getting more providers as well as we're getting, um,

418

00:19:13.175 --> 00:19:15.265  
more in input and, and,

419

00:19:15.285 --> 00:19:16.945  
and more people enrolled in the program.

420

00:19:17.285 --> 00:19:19.225  
So we did hit our targets in year two.

421

00:19:20.005 --> 00:19:22.585  
Um, in year three, we were a little short,

422

00:19:23.165 --> 00:19:24.345  
um, of our target.

423

00:19:24.645 --> 00:19:27.745  
Um, but then in year four, we again are making progress.

424

00:19:28.205 --> 00:19:31.665  
Um, our goal is really to continue to build those services

425

00:19:31.965 --> 00:19:36.145  
by building a whole cadre of primary care providers,

426

00:19:36.335 --> 00:19:40.025  
psychiatrists, um, independently licensed clinicians,

427

00:19:40.055 --> 00:19:42.265  
peer support, everyone to really, uh,

428

00:19:42.285 --> 00:19:44.025  
um, identify and address this.

429

00:19:44.445 --> 00:19:47.105  
One of the things that also we worked in with this grant,

430

00:19:47.125 --> 00:19:48.905  
and again, trying to blend funding

431

00:19:49.045 --> 00:19:50.265  
and blend initiatives,

432

00:19:50.485 --> 00:19:53.225  
is we also have another initiative in Arizona

433

00:19:53.225 --> 00:19:55.505  
that's called Targeted Investment, um,

434

00:19:55.505 --> 00:19:57.385  
which was really focused on working

435

00:19:57.695 --> 00:19:59.585  
with folks in the justice system

436

00:20:00.165 --> 00:20:02.905  
and how can we work to, um,

437

00:20:03.895 --> 00:20:06.945  
conduct inReach and into the prison.

438

00:20:07.205 --> 00:20:10.025  
And we specifically target with the prison, not the jail.

439

00:20:10.605 --> 00:20:12.625  
Um, and so we're doing a lot of work

440

00:20:12.625 --> 00:20:15.385  
with the justice population under target and investment,

441

00:20:15.445 --> 00:20:18.545  
but we're hooking it together with our MAT program as well

442

00:20:18.725 --> 00:20:22.505  
and connecting folks with services so that upon release, um,

443

00:20:22.615 --> 00:20:24.425  
upon reentry back into the community,

444

00:20:24.615 --> 00:20:27.305

that they can get those MAT services that are needed.

445

00:20:28.045 --> 00:20:30.225

Um, we also have a mobile unit

446

00:20:30.365 --> 00:20:33.305

and we actually have our value wise Health mobile unit now

447

00:20:33.305 --> 00:20:37.825

that is, that goes to all of the parole orientations

448

00:20:38.365 --> 00:20:41.745

in Maricopa County, so that as people have to,

449

00:20:41.745 --> 00:20:45.385

they are required to attend an orientation, uh,

450

00:20:45.535 --> 00:20:47.765

upon reentry upon release from prison.

451

00:20:48.225 --> 00:20:51.365

Um, and so we have our service system right there.

452

00:20:51.545 --> 00:20:55.605

We have, um, peers that are right there to welcome them back

453

00:20:55.605 --> 00:20:58.485

to the community, but also engage them if they have

454

00:20:58.485 --> 00:21:00.125

immediate needs with our mobile unit

455

00:21:00.305 --> 00:21:02.965

or get them connected with appointments within, um,

456

00:21:03.025 --> 00:21:04.365

to making sure that, and

457

00:21:04.365 --> 00:21:08.385

that has really helped our enrollments as well, focusing on

458  
00:21:08.385 --> 00:21:11.705  
that partnership between our justice involved initiatives

459  
00:21:11.725 --> 00:21:14.745  
and then our medication assisted treatment initiatives.

460  
00:21:15.255 --> 00:21:18.905  
This is just a breakdown of our, um, kind of the population

461  
00:21:18.905 --> 00:21:20.105  
that we're currently serving.

462  
00:21:20.645 --> 00:21:23.785  
Um, right now we are serving more males than females.

463  
00:21:23.935 --> 00:21:26.065  
It's about 70 to 30%.

464  
00:21:26.605 --> 00:21:28.545  
Um, looking at our age groups,

465  
00:21:28.725 --> 00:21:30.825  
you can see we have a diverse, um,

466  
00:21:31.045 --> 00:21:33.425  
age group population that we're serving.

467  
00:21:34.005 --> 00:21:37.185  
Um, we are not providing medication assisted treatment

468  
00:21:37.245 --> 00:21:38.825  
to anyone under 18.

469  
00:21:39.275 --> 00:21:43.465  
There is still some barriers to doing that with licensing

470  
00:21:43.525 --> 00:21:44.705  
and different requirements.

471  
00:21:45.165 --> 00:21:47.945  
And so right now, that's not an area we're focused on,

472

00:21:48.265 --> 00:21:50.385

although we hope to someday focus on that.

473

00:21:50.845 --> 00:21:52.305

Um, we are able

474

00:21:52.725 --> 00:21:55.745

to serve if somebody needed medication assisted treatment

475

00:21:55.745 --> 00:21:57.305

through our first episode centers

476

00:21:57.305 --> 00:21:59.185

because they serve 15 to 21.

477

00:21:59.475 --> 00:22:01.545

Those two programs are a little separate

478

00:22:01.575 --> 00:22:03.305

that they would be able to meet that need.

479

00:22:04.055 --> 00:22:07.315

Um, our ethnicity breakdown, we're in Arizona,

480

00:22:07.415 --> 00:22:11.075

so we have a large Hispanic Hispanic population, um,

481

00:22:11.475 --> 00:22:13.795

although I think we could probably do a little better in

482

00:22:13.795 --> 00:22:16.235

that area as well with our outreach and engagement.

483

00:22:16.535 --> 00:22:20.395

Um, and we're still serving about 87% of individuals

484

00:22:20.395 --> 00:22:21.555

who identify as white.

485

00:22:21.695 --> 00:22:24.275

Um, so we have some opportunity to expand

486  
00:22:24.455 --> 00:22:27.875  
and really look at what are some of our marketing materials

487  
00:22:27.875 --> 00:22:30.195  
and information, um, to reach some

488  
00:22:30.195 --> 00:22:31.835  
of those underserved populations

489  
00:22:31.835 --> 00:22:33.275  
that we know there is a need

490  
00:22:33.775 --> 00:22:36.075  
but are not engaging yet in services with us.

491  
00:22:38.015 --> 00:22:40.675  
Um, one of the things that I was asked to do is just

492  
00:22:40.675 --> 00:22:42.755  
to talk a little bit about kind of what is

493  
00:22:42.755 --> 00:22:44.635  
that population in more details, right?

494  
00:22:44.755 --> 00:22:47.675  
I gave you that high level male female, that type of thing.

495  
00:22:47.675 --> 00:22:49.795  
And you, again, you can look at the charts in more detail

496  
00:22:49.795 --> 00:22:51.275  
later, but I just wanted to talk

497  
00:22:51.275 --> 00:22:53.675  
to you a little bit about kind of what is a,

498  
00:22:53.835 --> 00:22:55.395  
a complex patient portrait.

499  
00:22:55.425 --> 00:22:58.235  
What is, what does this look like, somebody who's seeking

500

00:22:58.755 --> 00:23:00.235  
recovery, seeking our services.

501

00:23:00.855 --> 00:23:03.475  
Um, and here's just some characteristics of those folks

502

00:23:03.535 --> 00:23:05.315  
who are receiving our MAT services.

503

00:23:05.735 --> 00:23:07.835  
And this is based on, um, data

504

00:23:07.865 --> 00:23:09.955  
that we must collect for our SAMHSA grant.

505

00:23:10.015 --> 00:23:11.035  
And, you know, and,

506

00:23:11.055 --> 00:23:14.075  
and we do, um, an initial interview with folks,

507

00:23:14.615 --> 00:23:18.275  
and then we also do, uh, a six month interview

508

00:23:18.295 --> 00:23:19.915  
and then a, a final interview

509

00:23:19.975 --> 00:23:21.915  
to really look at those outcomes of folks

510

00:23:21.975 --> 00:23:24.035  
who are getting services under this grant.

511

00:23:24.575 --> 00:23:26.835  
But our main age is about 40 years old.

512

00:23:27.245 --> 00:23:28.715  
We're not serving a lot of veterans.

513

00:23:28.715 --> 00:23:30.795  
And that was one of the areas that we, again, we wanted

514

00:23:30.795 --> 00:23:32.755  
to identify that we need to do better

515

00:23:32.975 --> 00:23:34.795  
and seeking out serving veterans.

516

00:23:35.275 --> 00:23:37.355  
Although I think one of the challenges is a lot

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00:23:37.355 --> 00:23:39.715  
of the veterans get served through

518

00:23:39.715 --> 00:23:41.315  
that veteran system of care.

519

00:23:41.855 --> 00:23:44.315  
Um, but developing those partnerships with them.

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00:23:44.615 --> 00:23:46.845  
And the VA has actually had a, a,

521

00:23:46.965 --> 00:23:49.685  
a very strong medication assisted treatment program here in

522

00:23:49.685 --> 00:23:50.885  
Arizona for many years.

523

00:23:51.905 --> 00:23:56.325  
Um, 40% of the folks speak a, a language other than English.

524

00:23:57.025 --> 00:23:59.085  
Um, 56% of the individuals

525

00:23:59.085 --> 00:24:02.325  
that are serving report using fentanyl in the last 30 days.

526

00:24:02.825 --> 00:24:05.805  
You know, and one of the things we looked at initially

527

00:24:05.865 --> 00:24:07.485  
as a harm reduction strategy

528  
00:24:08.065 --> 00:24:11.565  
was looking at fentanyl test strips, and would we need that?

529  
00:24:11.705 --> 00:24:13.165  
And, and, and more recently,

530  
00:24:13.325 --> 00:24:16.885  
I think there's a lot more awareness of, you know, a lot

531  
00:24:16.885 --> 00:24:19.005  
of people aren't really seeing that as, as, as one

532  
00:24:19.005 --> 00:24:20.885  
of the best strategies, um,

533  
00:24:21.115 --> 00:24:25.325  
because pretty much most things are now have some trace

534  
00:24:25.345 --> 00:24:28.045  
of fentanyl in 'em and, and, and a variety of things.

535  
00:24:28.065 --> 00:24:31.765  
So we kind of put that aside for right now as, as, as,

536  
00:24:31.785 --> 00:24:33.645  
as looking at implementing that and,

537  
00:24:33.665 --> 00:24:36.245  
and just really helping to people to understand

538  
00:24:36.245 --> 00:24:38.645  
and to recognize that most of the substances

539  
00:24:38.645 --> 00:24:41.445  
that they're using right now do contain fentanyl.

540  
00:24:41.905 --> 00:24:43.245  
Um, 22%.

541  
00:24:43.425 --> 00:24:45.965  
Um, we've also reported using methamphetamine,

542

00:24:46.845 --> 00:24:48.085  
a lot of tobacco use.

543

00:24:48.345 --> 00:24:53.205  
Um, 64%, most people are coming in requesting buprenorphine.

544

00:24:53.705 --> 00:24:58.045  
Um, also almost 70% report having a prior history

545

00:24:58.185 --> 00:25:01.525  
of mental health as well as struggling with substance use.

546

00:25:02.105 --> 00:25:04.885  
And the, the most common mental health diagnosis is,

547

00:25:04.885 --> 00:25:06.165  
are major depression, bipolar,

548

00:25:06.465 --> 00:25:08.405  
and generalized anxiety disorder.

549

00:25:10.275 --> 00:25:12.655  
Um, additional characteristics, um,

550

00:25:13.205 --> 00:25:16.815  
individuals have tried at at least 2.6

551

00:25:16.815 --> 00:25:18.375  
times in the past.

552

00:25:19.075 --> 00:25:22.255  
Um, this is not their first recovery, um, attempt.

553

00:25:22.795 --> 00:25:25.055  
Um, and, and what I always like to talk

554

00:25:25.055 --> 00:25:27.575  
with our teams about too is this probably is not

555

00:25:27.575 --> 00:25:28.615  
gonna be their last, right?

556

00:25:28.715 --> 00:25:33.375

We have to recognize that relapse is part of, you know, uh,

557

00:25:33.375 --> 00:25:36.335

of, of the recovery, um, process.

558

00:25:36.715 --> 00:25:39.895

And so we have to recognize and, and really work with people

559

00:25:39.955 --> 00:25:42.055

and develop those relapse prevention plans.

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00:25:42.435 --> 00:25:44.735

Um, but then make sure that, you know, that the,

561

00:25:44.765 --> 00:25:48.455

it's not a shameful, it's not, uh, it's not an a,

562

00:25:48.475 --> 00:25:49.615

you know, it's part of the process.

563

00:25:49.755 --> 00:25:51.775

So we wanna in make sure we're touching base,

564

00:25:51.775 --> 00:25:53.695

we're reengaging reconnecting with people

565

00:25:53.805 --> 00:25:57.215

because we, we recognize that there are gonna be, um,

566

00:25:57.495 --> 00:25:59.415

relapses, um, for individuals.

567

00:25:59.415 --> 00:26:01.295

And how do we make sure that it's comfortable

568

00:26:01.295 --> 00:26:02.495

for them to talk about it.

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00:26:02.795 --> 00:26:05.695

You know, we, we don't, um, we don't do a, our,

570

00:26:05.715 --> 00:26:07.975

our role is not here to drug test people

571

00:26:08.075 --> 00:26:09.615

to say positive or negative.

572

00:26:09.815 --> 00:26:12.175

I always say our goal is to develop a, a,

573

00:26:12.255 --> 00:26:15.175

a Thera Strong Therapeutic alliance, a strong relationship

574

00:26:15.175 --> 00:26:17.495

with them so that they are comfortable talking

575

00:26:17.495 --> 00:26:19.975

with us about the relapses so that we can help

576

00:26:20.275 --> 00:26:22.655

to prevent them in the future so that we can help them

577

00:26:22.715 --> 00:26:26.295

to identify a plan, to see what their triggers are, to see

578

00:26:26.295 --> 00:26:30.135

what their challenges are to, to, to intervene early and,

579

00:26:30.195 --> 00:26:31.815

and to really prevent that relapse.

580

00:26:33.155 --> 00:26:35.775

Um, again, the majority of individuals coming

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00:26:35.795 --> 00:26:36.935

to us are unemployed.

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00:26:36.935 --> 00:26:41.735

51% are unemployed, 64% have a high school diploma or less.

583

00:26:42.315 --> 00:26:46.645

Um, this was an interesting 94% reported being housed,

584

00:26:46.645 --> 00:26:48.085  
but then when you dig a little deeper

585

00:26:48.225 --> 00:26:50.685  
and ask them, what does that housing look like for you?

586

00:26:51.195 --> 00:26:52.325  
73%

587

00:26:52.325 --> 00:26:54.965  
of those actually reported living in somebody else's house.

588

00:26:55.025 --> 00:26:57.525  
So they weren't living independently or in their own home.

589

00:26:57.525 --> 00:26:58.765  
They were living with someone else.

590

00:26:59.585 --> 00:27:02.325  
Um, income, as you can imagine, again,

591

00:27:02.325 --> 00:27:06.005  
being the public safety net system, um, income is very low

592

00:27:06.145 --> 00:27:07.405  
for the individuals that we're serving.

593

00:27:07.985 --> 00:27:12.005  
Um, we had 38% of the individuals that we are serving

594

00:27:12.005 --> 00:27:14.525  
through this grant also are justice involved.

595

00:27:14.785 --> 00:27:16.045  
Now, that might be skewed

596

00:27:16.045 --> 00:27:18.405  
because we're also have a lot of initiatives that are

597

00:27:19.045 --> 00:27:21.765  
reaching and and focused on justice involvement.

598

00:27:22.145 --> 00:27:24.605

Um, as a hospital system, I'm, I'm really proud

599

00:27:24.605 --> 00:27:28.005

to say we have partnered with our criminal justice partners

600

00:27:28.065 --> 00:27:31.965

to really make Valley Wise a place to support individuals

601

00:27:32.185 --> 00:27:34.405

and their families who are orienting the community,

602

00:27:34.405 --> 00:27:35.725

either from prison, jail

603

00:27:35.785 --> 00:27:38.125

or other, um, other involvement

604

00:27:38.235 --> 00:27:39.885

with the, the justice system.

605

00:27:40.345 --> 00:27:43.525

Um, we actually just invested in hiring, um,

606

00:27:43.965 --> 00:27:47.045

a justice liaison, the first one ever for value wise,

607

00:27:47.375 --> 00:27:50.565

whose sole job is to help us to look at

608

00:27:50.955 --> 00:27:54.045

what are the opportunities that we can do to have better

609

00:27:54.785 --> 00:27:57.445

ev avenues for engaging people,

610

00:27:57.445 --> 00:28:00.805

getting people into our services prior to release,

611

00:28:01.375 --> 00:28:04.765

connecting, um, women coming out of prison with our, our,

612

00:28:05.025 --> 00:28:08.325

our community resource centers, connecting people

613

00:28:08.435 --> 00:28:09.685

with our service system.

614

00:28:10.345 --> 00:28:12.325

Um, initially, you know, there was a lot

615

00:28:12.325 --> 00:28:15.845

of discussion about, um, do we co-locate

616

00:28:16.505 --> 00:28:18.645

within probation or within parole?

617

00:28:18.705 --> 00:28:20.765

And we said, no, we wanna make sure that

618

00:28:21.305 --> 00:28:24.725

our hospital system, our community health centers, um,

619

00:28:24.865 --> 00:28:26.885

our services are inviting

620

00:28:26.985 --> 00:28:30.285

and engaging to justice involved, you know, who wants

621

00:28:30.285 --> 00:28:33.285

to bring their child to an integrated clinic

622

00:28:34.185 --> 00:28:35.365

at a parole office?

623

00:28:35.475 --> 00:28:36.845

That didn't make any sense to us.

624

00:28:36.945 --> 00:28:38.485

So we really have focused on that

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00:28:38.745 --> 00:28:42.165

and we're continuing to focus on looking at different areas

626

00:28:42.225 --> 00:28:44.445  
around, um, better serving individuals

627

00:28:45.275 --> 00:28:46.375  
who are justice involved.

628

00:28:46.955 --> 00:28:51.135  
Um, let's see, 91% of the individuals we served, um,

629

00:28:51.315 --> 00:28:53.695  
had contact with families in the last three days,

630

00:28:53.695 --> 00:28:58.615  
and 78% actually said, um, they are satisfied

631

00:28:58.765 --> 00:29:00.135  
with their relationships.

632

00:29:01.585 --> 00:29:04.165  
Um, as we all know, addiction

633

00:29:04.165 --> 00:29:06.885  
and recovery, you know, impacts

634

00:29:07.705 --> 00:29:09.445  
so many areas of people's lives.

635

00:29:09.665 --> 00:29:13.245  
And so, um, when we look at those social determinants

636

00:29:13.245 --> 00:29:15.845  
of health, and we are doing those social determinants

637

00:29:15.845 --> 00:29:18.165  
of health screening on individuals, um,

638

00:29:18.235 --> 00:29:20.485  
that are served throughout our service system so

639

00:29:20.485 --> 00:29:22.685  
that we can really help them to be successful

640

00:29:22.945 --> 00:29:24.965

by addressing their behavioral health needs,

641

00:29:24.965 --> 00:29:26.485

their education, their employment,

642

00:29:26.485 --> 00:29:27.725

looking at affordable housing,

643

00:29:27.995 --> 00:29:30.525

looking at ongoing recovery supports

644

00:29:30.605 --> 00:29:31.765

and other service needs.

645

00:29:34.245 --> 00:29:37.065

Um, here's just some information on some of our outcomes.

646

00:29:37.165 --> 00:29:40.505

We just did a recent analysis, um, at

647

00:29:40.575 --> 00:29:43.605

what are the significant differences between our pre,

648

00:29:44.505 --> 00:29:45.805

you know, um, g

649

00:29:46.925 --> 00:29:49.945

and then our, um, six month go GR evaluation.

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00:29:50.205 --> 00:29:54.065

And I'm really excited to see the significant abstinence

651

00:29:54.215 --> 00:29:55.705

that people are reporting.

652

00:29:56.165 --> 00:29:58.585

Um, also, you know, and,

653

00:29:58.685 --> 00:30:01.025

and no involvement with justice

654

00:30:02.255 --> 00:30:04.675

hasn't really changed a whole lot and probably

655

00:30:05.035 --> 00:30:07.075

'cause a lot of that is as people are coming into our

656

00:30:07.075 --> 00:30:08.675

service system, within that six months,

657

00:30:08.985 --> 00:30:11.075

they still might be on probation or parole

658

00:30:11.175 --> 00:30:13.755

or have a, you know, so, so we're not gonna see a lot

659

00:30:13.755 --> 00:30:14.995

of change initially there.

660

00:30:15.575 --> 00:30:18.835

Um, but we have seen significant change in employment

661

00:30:19.175 --> 00:30:21.275

and significant change in stable housing.

662

00:30:22.015 --> 00:30:25.675

Um, so I'm excited to continue to do that.

663

00:30:27.885 --> 00:30:30.145

Um, lessons learned.

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00:30:30.525 --> 00:30:32.545

Um, let me talk a little bit about

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00:30:32.545 --> 00:30:33.585

some of the lessons learned.

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00:30:33.585 --> 00:30:36.265

And I, I, I shared some of those along the way, is really

667

00:30:36.265 --> 00:30:38.785

around that stigma and am myth associated

668

00:30:39.255 --> 00:30:40.905  
with just serving this population.

669

00:30:41.065 --> 00:30:43.385  
I talked about that initial, um, kind

670

00:30:43.385 --> 00:30:45.825  
of readiness assessment where, you know,

671

00:30:45.845 --> 00:30:49.785  
we had doctors very much saying, um, I, you know,

672

00:30:50.085 --> 00:30:51.385  
we don't serve that population.

673

00:30:51.385 --> 00:30:52.545  
They don't come to our clinics.

674

00:30:52.545 --> 00:30:54.385  
And we're like, well, yeah, actually they do,

675

00:30:54.385 --> 00:30:55.465  
and they're already here.

676

00:30:55.605 --> 00:30:57.265  
You're just not meeting their needs

677

00:30:57.325 --> 00:30:58.585  
and they're going to other places

678

00:30:59.165 --> 00:31:01.825  
to get their substance abuse services

679

00:31:01.925 --> 00:31:03.105  
or mental health services.

680

00:31:03.415 --> 00:31:05.945  
They might be coming to you for primary care,

681

00:31:06.325 --> 00:31:07.945  
but that doesn't mean they don't have those needs.

682

00:31:08.245 --> 00:31:09.465

And we really wanna make sure

683

00:31:09.465 --> 00:31:11.905

that value wise is a one stop shop for everyone

684

00:31:11.905 --> 00:31:13.425

that you can get all of your health needs.

685

00:31:13.805 --> 00:31:16.025

Not that we are the best fit for everyone.

686

00:31:16.125 --> 00:31:17.385

We still wanna give people choices.

687

00:31:17.605 --> 00:31:20.145

We still wanna connect people with other services,

688

00:31:20.645 --> 00:31:24.225

but again, we want to be offering that as much as possible.

689

00:31:24.325 --> 00:31:27.465

We know from the research, we know from the, the reports,

690

00:31:27.775 --> 00:31:30.905

when you just do a referral to someone else, very few

691

00:31:31.085 --> 00:31:32.425

of those are very successful.

692

00:31:32.425 --> 00:31:35.625

And unfortunately, that's when we see people recycling

693

00:31:35.625 --> 00:31:39.785

through our hospitals, our ERs, um, and those situations in

694

00:31:39.785 --> 00:31:42.065

and out of both our behavioral health and mental hospitals.

695

00:31:42.065 --> 00:31:45.435

And so we wanna make sure, you know, that, that

696  
00:31:46.175 --> 00:31:49.235  
we can offer all of those services to meet people's needs

697  
00:31:49.415 --> 00:31:51.115  
and, and help them to be successful.

698  
00:31:51.775 --> 00:31:55.675  
Um, we've done a lot of, um, training with folks.

699  
00:31:55.925 --> 00:31:59.915  
We're still working. We've, um, built some online webinars.

700  
00:31:59.925 --> 00:32:02.755  
We've been going to what's called our dyad meetings

701  
00:32:02.755 --> 00:32:06.435  
where we have our primary care leadership talking about the

702  
00:32:06.435 --> 00:32:08.835  
grants, talking about the success, um,

703  
00:32:09.695 --> 00:32:13.355  
and then also just getting more information out to folks.

704  
00:32:13.735 --> 00:32:17.195  
Um, we're getting ready to work on actually getting, um,

705  
00:32:17.195 --> 00:32:20.155  
Narcan vending machines within our community health centers.

706  
00:32:20.375 --> 00:32:22.715  
I'm really excited about that, making sure that

707  
00:32:22.985 --> 00:32:25.515  
that Narcan is available to everyone.

708  
00:32:25.895 --> 00:32:28.795  
Um, I think there's still a fear for people to have to go up

709  
00:32:28.795 --> 00:32:31.395  
and ask for it or to ask for their provider.

710  
00:32:31.495 --> 00:32:34.475  
So I think this is another opportunity to, for people

711  
00:32:34.475 --> 00:32:38.435  
to access this, um, in more of a private, um,

712  
00:32:39.205 --> 00:32:41.265  
non-confrontational kind of method to make sure

713  
00:32:41.265 --> 00:32:42.385  
that people have that available.

714  
00:32:42.925 --> 00:32:45.825  
Um, but there is still a lot of challenges,

715  
00:32:46.325 --> 00:32:47.705  
um, with getting folks.

716  
00:32:47.725 --> 00:32:49.905  
And we had a lot of challenges even with the training

717  
00:32:50.005 --> 00:32:52.745  
of providers because, and, and it's so funny

718  
00:32:52.905 --> 00:32:56.065  
'cause we have, uh, kind of our champions that are working

719  
00:32:56.065 --> 00:32:58.745  
with us, our champion providers in this area, they're like,

720  
00:32:58.745 --> 00:33:00.745  
you're prescribing a lot of medications

721  
00:33:00.855 --> 00:33:04.425  
that are much more dangerous, much more harmful,

722  
00:33:04.735 --> 00:33:07.665  
much more risky than medication assisted

723  
00:33:07.665 --> 00:33:08.705  
treatment interventions.

724

00:33:09.165 --> 00:33:13.265

Um, so, you know, trying to, to kind

725

00:33:14.285 --> 00:33:17.145

de myth that, that these medications are so harmful.

726

00:33:17.285 --> 00:33:19.665

And I know that with some of the lessening

727

00:33:19.665 --> 00:33:22.585

of the restrictions for providers to be able to do that,

728

00:33:23.005 --> 00:33:24.785

we thought we would have a huge amount

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00:33:24.785 --> 00:33:26.865

of providers ready and willing to do that.

730

00:33:26.885 --> 00:33:28.505

And we unfortunately didn't.

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00:33:28.965 --> 00:33:31.665

Um, one of the things working with our medical director,

732

00:33:32.005 --> 00:33:33.585

you know, I kind of went in there

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00:33:33.585 --> 00:33:35.585

and said, you know, we really need to do this.

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00:33:35.805 --> 00:33:37.305

Um, we need to, we need

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00:33:37.305 --> 00:33:39.705

to get more providers on board, and how can we do that?

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00:33:40.045 --> 00:33:42.665

You know, and we talked about can we mandate any new

737

00:33:42.905 --> 00:33:44.505

provider coming in to Valley wise?

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00:33:44.845 --> 00:33:48.505

Can we make sure that they are willing and able to do this

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00:33:48.525 --> 00:33:49.985

and make this a requirement?

740

00:33:50.725 --> 00:33:54.745

Um, and unfortunately, given just the shortages of,

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00:33:54.925 --> 00:33:58.785

of primary care doctors, um, the shortages we're struggling

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00:33:58.785 --> 00:34:00.465

with, we couldn't mandate it.

743

00:34:00.565 --> 00:34:03.065

So we had to really do it on a voluntary basis.

744

00:34:03.285 --> 00:34:05.985

So really how do we get those champions to talk

745

00:34:05.985 --> 00:34:08.145

with other people, to talk with their colleagues,

746

00:34:08.365 --> 00:34:11.505

to share their successes, um, to address that.

747

00:34:11.825 --> 00:34:14.705

I think one of the other things that have been critical

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00:34:14.705 --> 00:34:18.705

to addressing the stigma within our healthcare system is the

749

00:34:18.705 --> 00:34:19.785

hiring of peer support.

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00:34:20.325 --> 00:34:24.305

So providers, doctors, nurses, everyone in our hospital,

751

00:34:25.065 --> 00:34:27.905

everyone at our clinics, having people who they themselves

752

00:34:28.485 --> 00:34:32.585  
are in recovery and who are doing amazing

753

00:34:32.845 --> 00:34:34.305  
and giving back and,

754

00:34:34.365 --> 00:34:39.225  
and sharing their experiences to help, um, save lives, um,

755

00:34:39.365 --> 00:34:42.025  
has been probably one of the best strategies

756

00:34:42.445 --> 00:34:43.945  
to reducing stigma is

757

00:34:43.945 --> 00:34:46.425  
because then the, then everyone can see they're a

758

00:34:46.425 --> 00:34:47.465  
part of the care team.

759

00:34:47.695 --> 00:34:49.305  
They're, they're my colleagues.

760

00:34:49.455 --> 00:34:51.785  
They're, they're people I'm working with every day,

761

00:34:52.165 --> 00:34:54.865  
and they can do this, others can do this as well.

762

00:34:54.885 --> 00:34:57.705  
And they bring that hope, that encouragement, not only

763

00:34:57.725 --> 00:34:58.785  
to the people they're serving,

764

00:34:59.005 --> 00:35:01.145  
but also to our other service providers.

765

00:35:02.015 --> 00:35:04.115  
Um, so I talked a little bit about recruiting.

766

00:35:04.275 --> 00:35:06.235

A lot of the recruiting already I said is,

767

00:35:06.535 --> 00:35:09.955

is from our champions, um, trying to do that.

768

00:35:10.295 --> 00:35:13.395

You know, I, I was telling the story at another presentation

769

00:35:13.445 --> 00:35:15.915

about, you know, when we first brought up we wanted

770

00:35:15.915 --> 00:35:17.395

to do this, people, you know,

771

00:35:17.495 --> 00:35:19.875

our leadership was kind of leery about this.

772

00:35:19.875 --> 00:35:21.395

They were kinda like, well, you know,

773

00:35:21.395 --> 00:35:23.035

we got all these other issues, we have all these other

774

00:35:23.035 --> 00:35:24.915

things, you know, we,

775

00:35:25.185 --> 00:35:28.835

they too were a little bit leery about really EE expanding,

776

00:35:29.295 --> 00:35:30.515

um, into this area.

777

00:35:31.175 --> 00:35:33.835

And one of the things we did is we outlined all

778

00:35:33.835 --> 00:35:35.715

of the other federally qualified health centers

779

00:35:35.895 --> 00:35:38.325

and all the other providers within our community

780

00:35:38.325 --> 00:35:40.485

who were doing this and said, you know,

781

00:35:40.585 --> 00:35:44.325

if we wanna be competitive, if we wanna be, you know,

782

00:35:44.555 --> 00:35:47.365

providing meeting our mission, meeting our goal,

783

00:35:47.505 --> 00:35:50.085

or you know, then we need to be there.

784

00:35:50.185 --> 00:35:53.485

And I think that really opened up people's eyes too, to say,

785

00:35:54.035 --> 00:35:57.165

this is no longer the exceptions.

786

00:35:57.435 --> 00:35:59.645

This is what we have to expect.

787

00:35:59.905 --> 00:36:01.325

People have these needs

788

00:36:01.425 --> 00:36:02.925

and we need to be able to address them.

789

00:36:04.665 --> 00:36:07.325

Um, training providers I'll share at the end of the,

790

00:36:07.385 --> 00:36:08.485

or if I don't get time to,

791

00:36:08.485 --> 00:36:10.925

you can see in the slide deck later, we had to, we had

792

00:36:10.925 --> 00:36:13.125

to do a whole kind of, it,

793

00:36:13.125 --> 00:36:16.645

it wasn't a one model training for our providers.

794  
00:36:16.845 --> 00:36:19.885  
'cause we had providers that had worked in our residency

795  
00:36:19.885 --> 00:36:23.925  
program who had been paired with providers

796  
00:36:23.925 --> 00:36:25.925  
who now were being hired, were ready to go with mat.

797  
00:36:25.945 --> 00:36:30.325  
We had providers that were already had, had addiction,

798  
00:36:30.745 --> 00:36:31.965  
you know, were addictionologists

799  
00:36:31.985 --> 00:36:34.325  
and had specialty in this area that came to us.

800  
00:36:34.475 --> 00:36:35.605  
They didn't need any training,

801  
00:36:35.985 --> 00:36:38.165  
but then we had other providers who were really kind

802  
00:36:38.165 --> 00:36:39.285  
of hesitant, were fearful.

803  
00:36:39.665 --> 00:36:41.485  
And so we had to do everything from,

804  
00:36:41.745 --> 00:36:43.405  
here's a couple webinars to watch

805  
00:36:43.745 --> 00:36:47.685  
to here's somebody you are going to shadow for the day

806  
00:36:47.865 --> 00:36:50.165  
and observe and watch and work with them.

807  
00:36:50.705 --> 00:36:53.405  
We also, um, with the grant funding that we had,

808

00:36:53.545 --> 00:36:56.965

we were able to hire, um, a national expert, um,

809

00:36:57.075 --> 00:36:59.685

that could be available, kind of like on call

810

00:36:59.785 --> 00:37:03.445

to answer questions, to meet with the providers to kind

811

00:37:03.445 --> 00:37:06.365

of alleviate their anxiety and, and, and,

812

00:37:06.385 --> 00:37:07.725

and their fears around this.

813

00:37:08.305 --> 00:37:09.325

Um, and you know,

814

00:37:09.385 --> 00:37:10.885

and again, making sure

815

00:37:10.885 --> 00:37:13.445

that we have a comprehensive care team supporting the

816

00:37:13.445 --> 00:37:14.685

person, not only so

817

00:37:14.685 --> 00:37:16.645

that the person doesn't feel like they're out there

818

00:37:16.665 --> 00:37:18.085

and they don't have that support,

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00:37:18.145 --> 00:37:20.405

but also to make sure that the, the provider has

820

00:37:20.405 --> 00:37:23.285

that support and that encouragement, you know, and, and,

821

00:37:23.285 --> 00:37:24.885

and that expertise to help them.

822

00:37:26.125 --> 00:37:29.065

Um, identifying patient and participants.

823

00:37:29.445 --> 00:37:33.705

We did, um, recruiting brochures, um, we

824

00:37:34.365 --> 00:37:35.705

put materials out there,

825

00:37:36.085 --> 00:37:37.145

but I think one of the areas

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00:37:37.175 --> 00:37:39.785

that we really did is we're going into the community

827

00:37:39.785 --> 00:37:42.905

where people are going to those parole orientations,

828

00:37:43.165 --> 00:37:45.305

making sure that our mobile unit knows

829

00:37:45.305 --> 00:37:47.145

that we have these services available so

830

00:37:47.145 --> 00:37:48.625

that they're meeting with everyone.

831

00:37:49.005 --> 00:37:51.705

Um, just getting the word out about this and,

832

00:37:51.725 --> 00:37:54.945

and making sure that we are, um, having

833

00:37:54.945 --> 00:37:57.465

that we're right now in the process of getting, um,

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00:37:58.095 --> 00:38:01.985

some additional materials that we can have available in,

835

00:38:02.125 --> 00:38:04.705

in our waiting rooms in, in our areas.

836  
00:38:04.965 --> 00:38:08.105  
And again, I think the vending machines are gonna be amazing

837  
00:38:08.215 --> 00:38:11.225  
once we get that in place, um, for people to be able

838  
00:38:11.225 --> 00:38:14.905  
to access, um, both Narcan but also other information and,

839  
00:38:15.005 --> 00:38:16.545  
and, and really talk about

840  
00:38:16.885 --> 00:38:19.305  
how we really wanna support people in this area.

841  
00:38:20.155 --> 00:38:21.195  
I think I've already talked about our

842  
00:38:21.195 --> 00:38:22.595  
clinician and peer support.

843  
00:38:23.375 --> 00:38:26.595  
Um, you know, we have been very fortunate in

844  
00:38:26.595 --> 00:38:29.515  
that we've been able to hire amazing folks.

845  
00:38:29.675 --> 00:38:33.195  
I think one of the most challenging things for a clinician

846  
00:38:33.735 --> 00:38:36.605  
and others who are working in a federally qualified health

847  
00:38:36.605 --> 00:38:37.805  
center is you have to be able

848  
00:38:37.805 --> 00:38:39.205  
to do a little bit of everything.

849  
00:38:39.745 --> 00:38:44.575  
Um, so, you know, we right now have between two

850

00:38:44.875 --> 00:38:48.015  
and four, um, clinicians in each

851

00:38:48.015 --> 00:38:49.575  
of our federally qualified health centers.

852

00:38:49.675 --> 00:38:51.935  
But when we first started, we only had one,

853

00:38:52.715 --> 00:38:54.055  
um, in the health center.

854

00:38:54.235 --> 00:38:55.735  
And so they had to like,

855

00:38:55.795 --> 00:38:58.935  
and they got referrals from everything from I need

856

00:38:58.935 --> 00:39:01.975  
to lose weight to, I'm struggling with substance use,

857

00:39:02.035 --> 00:39:03.135  
to, I'm depressed.

858

00:39:03.555 --> 00:39:06.975  
And over the years we've really expanded our, um,

859

00:39:07.305 --> 00:39:09.535  
clinicians, our peer support services.

860

00:39:09.875 --> 00:39:12.535  
But in addition, within our federally qualified health

861

00:39:12.535 --> 00:39:14.775  
centers be, we've also expanded

862

00:39:15.075 --> 00:39:18.215  
and we also have psychiatry services available where a lot

863

00:39:18.215 --> 00:39:21.535  
of times, um, primary care would refer out to psychiatry.

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00:39:21.795 --> 00:39:25.175

We now have in-house, um, both adult psychiatry

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00:39:25.395 --> 00:39:26.575

and then we also have child

866

00:39:26.575 --> 00:39:30.255

and adolescent psychiatry services available for individuals

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00:39:30.255 --> 00:39:34.175

who are within our, um, federally or FQHCs

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00:39:34.175 --> 00:39:35.255

or community health centers.

869

00:39:35.675 --> 00:39:36.855

And our, our child

870

00:39:36.855 --> 00:39:40.055

and adolescent program was an amazing program

871

00:39:40.165 --> 00:39:44.735

because it's partnered up with all of our residencies

872

00:39:44.995 --> 00:39:48.095

and, um, our child and adolescent fellows

873

00:39:48.115 --> 00:39:49.975

who are working in that program.

874

00:39:50.515 --> 00:39:53.895

Uh, again, really trying to build that future workforce now.

875

00:39:54.395 --> 00:39:56.655

Um, and, and setting up those expectations.

876

00:39:57.735 --> 00:40:01.795

Um, scheduling was a bit of a challenge, right,

877

00:40:01.795 --> 00:40:03.195

because you needed more time.

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00:40:03.535 --> 00:40:05.075

So we had to get agreement

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00:40:05.305 --> 00:40:09.515

because the traditional 15 minute block

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00:40:09.735 --> 00:40:11.875

for the appointment, or 10 minute block for

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00:40:11.875 --> 00:40:13.515

that primary care appointment's not

882

00:40:13.515 --> 00:40:14.715

gonna work for this, right?

883

00:40:15.095 --> 00:40:19.915

So we did kind of a plan where the doctor met with the,

884

00:40:20.025 --> 00:40:21.515

it's, it's a three part schedule.

885

00:40:21.615 --> 00:40:24.155

So we schedule for the doctor to come in, meet,

886

00:40:24.535 --> 00:40:27.515

do the initial induction, they then meet with the peer

887

00:40:27.615 --> 00:40:30.475

or the clinician, they go through those evaluations,

888

00:40:30.475 --> 00:40:32.755

through the social determinants of health, identify

889

00:40:32.755 --> 00:40:35.315

what supports, but are there with them through that.

890

00:40:35.575 --> 00:40:38.075

And then the doctor comes back in to check on them,

891

00:40:38.105 --> 00:40:39.275

make sure everything's okay,

892

00:40:39.275 --> 00:40:40.675

and schedule any follow-up appointments

893

00:40:40.675 --> 00:40:42.675

or address any, maybe if they're having any,

894

00:40:42.985 --> 00:40:44.555

they need some comfort medications,

895

00:40:44.655 --> 00:40:46.035

any issues or challenges.

896

00:40:46.055 --> 00:40:48.715

And then, and figure out that schedule for going forward.

897

00:40:49.095 --> 00:40:51.555

So we had to build specialized schedules so

898

00:40:51.555 --> 00:40:53.235

that we could schedule these appointments,

899

00:40:53.255 --> 00:40:54.475

but that we had blocks.

900

00:40:54.855 --> 00:40:56.795

But then again, you know, you,

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00:40:56.795 --> 00:40:58.555

you're not always sure when somebody comes in,

902

00:40:58.705 --> 00:41:00.955

they might come in for a regular appointment,

903

00:41:00.955 --> 00:41:02.275

but then they want to do this.

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00:41:02.735 --> 00:41:04.315

And so trying to figure out how

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00:41:04.315 --> 00:41:06.035

to have some flexibility within that.

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00:41:06.495 --> 00:41:09.795

Um, and so we've had, we've had to do a lot of work

907

00:41:09.795 --> 00:41:12.395

around scheduling and how we do those kinds of things.

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00:41:12.895 --> 00:41:16.435

Um, we are fortunate that our services are, are Bill

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00:41:16.435 --> 00:41:18.355

and encountered through our PPS rate.

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00:41:18.575 --> 00:41:20.595

Our clinicians are paid at the PPS rate.

911

00:41:20.815 --> 00:41:22.995

Our doctors are paid at that.

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00:41:23.415 --> 00:41:25.435

Um, our peer supports are paid at that.

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00:41:25.855 --> 00:41:29.955

Um, and so it, it, it really has been very successful for us

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00:41:29.955 --> 00:41:31.675

to take that initial grant funding

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00:41:32.055 --> 00:41:33.765

and that initial funding that we use

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00:41:33.765 --> 00:41:37.325

through targeted investment to hire staff, then

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00:41:37.345 --> 00:41:40.085

to ramp them up so that they can be sustainable.

918

00:41:40.085 --> 00:41:42.525

And we're not reliant on grant foundation

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00:41:42.825 --> 00:41:45.725

or other kind of funding to, to keep those positions.

920

00:41:46.065 --> 00:41:49.005

And we've been able in the past eight years, again,

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00:41:49.005 --> 00:41:51.965

to grow our program in our integrated behavioral health

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00:41:51.965 --> 00:41:56.925

program with kind of using that model, um, of using any kind

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00:41:56.925 --> 00:41:59.285

of funding, but making sure it's sustainable going forward.

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00:41:59.585 --> 00:42:02.205

We started with one integrated behavioral health clinician,

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00:42:02.585 --> 00:42:05.205

um, eight years ago or nine years ago now.

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00:42:05.385 --> 00:42:09.325

And we now have a team of over 140 different, um,

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00:42:10.325 --> 00:42:14.285

providers in behavioral health, psychiatrists fellows, um,

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00:42:14.355 --> 00:42:15.805

peer support and everything working

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00:42:15.805 --> 00:42:17.005

within our system of care.

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00:42:17.375 --> 00:42:20.765

We've also been able to expand our outpatient programs,

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00:42:20.765 --> 00:42:23.365

our specialty behavioral health clinics, um, to,

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00:42:23.365 --> 00:42:25.485

we now have five clinics, um, with a variety

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00:42:25.485 --> 00:42:27.005

of programs within those clinics.

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00:42:28.035 --> 00:42:30.295

Um, microdosing, um,

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00:42:30.685 --> 00:42:33.015

when I first did this presentation a while back,

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00:42:33.015 --> 00:42:34.775

that was kind of the new thing and right.

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00:42:34.875 --> 00:42:35.935

And how are we doing that?

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00:42:35.955 --> 00:42:37.735

And we had a, a doctor who came on

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00:42:37.735 --> 00:42:42.275

and was like, we had this very rigid, um, policy

940

00:42:42.375 --> 00:42:45.235

and procedure for, you know, for doing mat inductions.

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00:42:45.815 --> 00:42:49.595

And as we got more expertise and more people coming in and,

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00:42:49.655 --> 00:42:52.835

and people, um, we, we realized very quickly we had

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00:42:52.835 --> 00:42:54.155

to change that policy and procedure.

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00:42:54.215 --> 00:42:55.755

We had to be like, okay, we have

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00:42:55.755 --> 00:42:57.555

to have some flexibility in this.

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00:42:57.775 --> 00:43:01.315

We have to definitely have some specific guidelines, um,

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00:43:01.335 --> 00:43:04.355

but we cannot have like these really rigid

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00:43:06.025 --> 00:43:07.315  
processes in place.

949

00:43:07.695 --> 00:43:09.115  
We need to meet people where they're at.

950

00:43:09.175 --> 00:43:11.235  
We need to have a, a variety of opportunities

951

00:43:11.335 --> 00:43:12.875  
and ways to meet people's needs.

952

00:43:13.255 --> 00:43:15.475  
And so we've really changed that policy

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00:43:15.575 --> 00:43:18.555  
and procedure now, um, to be much more flexible,

954

00:43:18.655 --> 00:43:22.075  
to be much more fluid to, as things change

955

00:43:22.135 --> 00:43:26.915  
and as there's, um, updates and system changes to do that.

956

00:43:28.035 --> 00:43:30.615  
Um, and then as with anything else,

957

00:43:30.615 --> 00:43:32.615  
there's always competing priorities.

958

00:43:32.715 --> 00:43:35.015  
How do we do that? One of the things I'm really lucky in our

959

00:43:35.015 --> 00:43:38.095  
new strategic plan, um, we have strategic plan

960

00:43:38.715 --> 00:43:42.175  
for our entire hospital system that focuses around, um,

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00:43:42.395 --> 00:43:44.255  
stigma and harm reduction.

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00:43:44.765 --> 00:43:46.055

Also looking at expansion

963

00:43:46.055 --> 00:43:48.975

of medication assisted treatment services, increase

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00:43:48.975 --> 00:43:50.095

of behavioral health services.

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00:43:50.555 --> 00:43:53.055

And so it's no longer just a grant

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00:43:53.435 --> 00:43:55.815

or it's this initiative, it's part

967

00:43:55.815 --> 00:43:57.975

of our overall strategic plan for our hospital.

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00:44:00.545 --> 00:44:03.045

Um, just to kind of see how we're kind

969

00:44:03.045 --> 00:44:05.365

of targeting different clinics and,

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00:44:05.425 --> 00:44:08.565

and looking at some of those specialty popul populations

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00:44:08.565 --> 00:44:11.405

that we're really still trying to work with our justice

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00:44:11.925 --> 00:44:13.845

involved persons with a serious mental illness.

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00:44:14.265 --> 00:44:16.045

Um, active duty military.

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00:44:16.705 --> 00:44:18.885

Um, we have a very specialized program.

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00:44:19.345 --> 00:44:22.885

Um, our McDonald clinic was one of the first, you know,

976  
00:44:23.045 --> 00:44:25.965  
programs that really focused on supporting individuals

977  
00:44:25.965 --> 00:44:27.125  
with HIV and aids.

978  
00:44:27.185 --> 00:44:29.605  
And so we're really working with that clinic as well

979  
00:44:29.705 --> 00:44:32.125  
to make sure that we have medication assisted treatment

980  
00:44:32.125 --> 00:44:34.325  
there as well as those support services.

981  
00:44:34.425 --> 00:44:36.245  
And then veterans and military families.

982  
00:44:38.025 --> 00:44:41.045  
Um, this talked about kind of that new provider training.

983  
00:44:41.265 --> 00:44:43.245  
You know, it's kinda like, I have no experience.

984  
00:44:43.805 --> 00:44:46.885  
I have some experience, but I need a little more ta, um,

985  
00:44:47.105 --> 00:44:48.165  
or I'm ready to go.

986  
00:44:48.945 --> 00:44:50.085  
You know, that we had

987  
00:44:50.085 --> 00:44:53.125  
to look at really being very individualized about

988  
00:44:53.225 --> 00:44:54.685  
how we bring people on,

989  
00:44:55.025 --> 00:44:59.125  
but we also utilized that grant funding to reimburse

990

00:44:59.145 --> 00:45:01.605

for the downtime because anytime you pull,

991

00:45:01.605 --> 00:45:03.725

as everyone knows, you pull a provider offline,

992

00:45:03.785 --> 00:45:05.405

you're losing money for them to go

993

00:45:05.405 --> 00:45:06.685

to training and that type of thing.

994

00:45:06.905 --> 00:45:09.965

So we were able to use funding to say, okay,

995

00:45:10.475 --> 00:45:14.965

that downtime funding will be reimbursed so

996

00:45:14.965 --> 00:45:17.685

that the individual can get the training and needs,

997

00:45:17.705 --> 00:45:20.165

and we don't have to worry about the coverage

998

00:45:20.185 --> 00:45:22.205

for those appointments or those types of things so

999

00:45:22.205 --> 00:45:25.845

that there's not a loss of appointments when people need to,

1000

00:45:26.425 --> 00:45:27.845

um, have the training done.

1001

00:45:32.165 --> 00:45:35.345

So I went through a lot of information pretty quickly.

1002

00:45:36.045 --> 00:45:39.225

Um, so I think we're ready to open it up for questions.

1003

00:45:45.725 --> 00:45:48.105

So we'll give, uh, we'll give Corey a moment

1004

00:45:48.205 --> 00:45:50.345

to let us know if some questions have come in.

1005

00:45:50.435 --> 00:45:53.105

Thank you so much for sharing your experience.

1006

00:45:54.185 --> 00:45:56.585

A lot of exciting work has been done there.

1007

00:45:58.045 --> 00:45:59.635

Karen, more To go, Karen, we

1008

00:45:59.635 --> 00:46:02.805

Have not, we have not received any questions yet.

1009

00:46:02.865 --> 00:46:04.485

So if you guys would like to proceed, I'd like

1010

00:46:04.485 --> 00:46:06.165

to remind everybody in the crowd if you would like

1011

00:46:06.165 --> 00:46:08.285

to submit any where there's a question box in the right hand

1012

00:46:08.285 --> 00:46:10.765

side of your screen and you can, uh, ask anything you like.

1013

00:46:12.685 --> 00:46:14.955

Thank you so much. And please don't hesitate

1014

00:46:14.955 --> 00:46:16.075

to send us a question.

1015

00:46:16.695 --> 00:46:20.635

Um, Vicki, the first thing that comes to mind for me is, um,

1016

00:46:22.035 --> 00:46:24.845

when I hear you say that this is now part

1017

00:46:24.845 --> 00:46:27.725

of your overall strategic plan, that suggests to me

1018

00:46:27.725 --> 00:46:29.125  
that you've had a lot of

1019

00:46:30.175 --> 00:46:33.965  
leadership buy-in in Absolutely.

1020

00:46:35.155 --> 00:46:38.575  
And that's probably a huge part of the recipe for success.

1021

00:46:38.675 --> 00:46:41.335  
So can you talk a little bit about that process

1022

00:46:41.515 --> 00:46:43.815  
and how you brought your leaders in to this

1023

00:46:44.035 --> 00:46:45.615  
and how they champion this effort?

1024

00:46:46.325 --> 00:46:48.775  
Okay, definitely. Well, I think one of the things I have

1025

00:46:48.775 --> 00:46:53.535  
to, I, I'm, I'm always grateful for is, um, my VP

1026

00:46:53.535 --> 00:46:55.935  
of behavioral health, so the vice president

1027

00:46:55.935 --> 00:46:57.855  
of behavioral health who oversees all

1028

00:46:57.855 --> 00:47:00.695  
of our inpatient behavioral health programs are three

1029

00:47:01.095 --> 00:47:03.935  
hospitals that provide inpatient, um,

1030

00:47:03.985 --> 00:47:06.575  
court order evaluation, court order treatment for all

1031

00:47:06.575 --> 00:47:10.175  
of Maricopa County, and also then works with me on all

1032

00:47:10.175 --> 00:47:11.495  
of our outpatient programs.

1033

00:47:11.995 --> 00:47:16.655  
It has been such a great support and really speaks to this

1034

00:47:17.195 --> 00:47:20.855  
and is very knowledgeable and, and talks with the other VPs

1035

00:47:20.855 --> 00:47:22.775  
and the other leaders about this program.

1036

00:47:23.595 --> 00:47:27.975  
Um, and then also our VP of ambulatory care, our CEO

1037

00:47:28.395 --> 00:47:30.765  
of our federally qualified health centers,

1038

00:47:31.465 --> 00:47:33.525  
she herself is a licensed clinician.

1039

00:47:34.225 --> 00:47:35.605  
So she gets it.

1040

00:47:35.785 --> 00:47:38.885  
She understands this need, she understands that.

1041

00:47:38.905 --> 00:47:43.865  
And I think the other thing is, you know, we have

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00:47:43.965 --> 00:47:47.185  
so many people now who are more open

1043

00:47:47.325 --> 00:47:51.825  
and willing to share that they have a family member,

1044

00:47:51.895 --> 00:47:54.505  
they have a loved one, or they themselves might have

1045

00:47:54.505 --> 00:47:56.865  
experienced a behavioral health or substance use challenge.

1046  
00:47:57.285 --> 00:48:01.105  
And so our system as a whole is talking about it more.

1047  
00:48:01.405 --> 00:48:03.265  
We have leaders who are, you know,

1048  
00:48:04.035 --> 00:48:07.185  
constantly bringing this up as a key priority.

1049  
00:48:07.845 --> 00:48:10.385  
We also, as a part of a proposition

1050  
00:48:10.395 --> 00:48:12.105  
where we were value wise, health,

1051  
00:48:12.205 --> 00:48:14.025  
got almost a billion dollars

1052  
00:48:14.205 --> 00:48:18.625  
to redesign our whole service system for Maricopa County.

1053  
00:48:18.805 --> 00:48:20.465  
One of the key things that was in

1054  
00:48:20.465 --> 00:48:22.665  
that is we must address behavioral health.

1055  
00:48:23.045 --> 00:48:27.745  
So we as a hospital system made a commitment to,

1056  
00:48:28.365 --> 00:48:31.585  
you know, the, the voters in Maricopa County when they gave

1057  
00:48:31.585 --> 00:48:33.945  
us this funding that we would address mental

1058  
00:48:33.945 --> 00:48:34.985  
health and substance use.

1059  
00:48:35.485 --> 00:48:38.025  
Um, and so that was a commitment as well.

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00:48:38.725 --> 00:48:40.945

And I think that, you know, and, and,

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00:48:40.945 --> 00:48:42.585

and as they say money talks, right?

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00:48:42.775 --> 00:48:44.025

I'll just, I'll say that

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00:48:44.085 --> 00:48:45.505

and sometimes I can be a little direct,

1064

00:48:45.565 --> 00:48:46.705

but money talks, right?

1065

00:48:47.005 --> 00:48:49.025

So as we're funding these programs

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00:48:49.245 --> 00:48:53.185

and behavioral health is getting paid, you have a person

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00:48:53.405 --> 00:48:54.825

who is a licensed clinician

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00:48:55.285 --> 00:48:57.145

or you have a certified behavioral health

1069

00:48:57.885 --> 00:49:01.135

peer support person who can bill at the same rate

1070

00:49:01.675 --> 00:49:03.575

as a physician, right?

1071

00:49:04.235 --> 00:49:08.095

And so not only are we meeting the needs of folks,

1072

00:49:08.475 --> 00:49:11.215

but we're also getting reimbursed for those services.

1073

00:49:11.915 --> 00:49:13.615

You know, so it's that.

1074

00:49:13.635 --> 00:49:15.775

And I think, again, going back

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00:49:15.775 --> 00:49:19.015

to the leadership here at Valley Wise, you know,

1076

00:49:19.475 --> 00:49:22.215

we talk about whole health, right?

1077

00:49:22.215 --> 00:49:25.775

That we wanna be able to have a one stop shop for our folks,

1078

00:49:25.915 --> 00:49:27.015

for our community.

1079

00:49:27.435 --> 00:49:29.535

Um, we know that the research shows

1080

00:49:29.535 --> 00:49:31.775

that when you do the referrals, people don't get there.

1081

00:49:32.075 --> 00:49:34.735

And so we have to build that system, um,

1082

00:49:34.735 --> 00:49:37.095

but then also funding that system, right?

1083

00:49:37.515 --> 00:49:40.855

So I am constantly writing grants, working

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00:49:40.855 --> 00:49:45.015

with our foundation, looking at opportunities, how can we,

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00:49:45.315 --> 00:49:49.095

you know, take this and do this and add this to that

1086

00:49:49.115 --> 00:49:50.415

and making sure that all

1087

00:49:50.415 --> 00:49:52.815

of our strategies are addressing these areas.

1088

00:49:54.635 --> 00:49:57.105

Thank you. Um, the other thing that,

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00:49:57.215 --> 00:50:00.305

that I was thinking about as you were speaking particularly

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00:50:00.565 --> 00:50:03.425

around the issue of, of stigma

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00:50:04.165 --> 00:50:08.305

and getting providers bought into being part

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00:50:08.405 --> 00:50:10.465

of providing MAT services,

1093

00:50:11.745 --> 00:50:13.065

I was thinking about a couple of things.

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00:50:13.205 --> 00:50:17.185

We, we had written some briefings about how um,

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00:50:17.705 --> 00:50:21.065

although the waivers allowed people to prescribe, um,

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00:50:21.065 --> 00:50:22.345

medication assisted treatment,

1097

00:50:22.455 --> 00:50:25.505

that the prescribing didn't actually rise.

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00:50:26.005 --> 00:50:29.345

And so in looking into that,

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00:50:30.075 --> 00:50:32.705

there were several things that came out about that.

1100

00:50:32.885 --> 00:50:36.975

And one of them was of course, the need for education,

1101

00:50:36.975 --> 00:50:38.495

which it sounds like you're addressing.

1102

00:50:39.075 --> 00:50:41.975

And then to the need for workflows

1103

00:50:42.035 --> 00:50:43.735

and ongoing clinical support.

1104

00:50:43.825 --> 00:50:47.655

Could you speak to how you're providing workflows

1105

00:50:47.655 --> 00:50:48.775

that work for people?

1106

00:50:48.995 --> 00:50:51.455

And then also ongoing clinical support.

1107

00:50:52.245 --> 00:50:56.975

Okay. Let me know if I, all sorts of things came

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00:50:56.975 --> 00:50:58.935

to my mind, so if I missed something, let me know.

1109

00:50:59.315 --> 00:51:01.375

But one of the things, um, one of the, one

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00:51:01.375 --> 00:51:03.375

of the strategies we really looked at is

1111

00:51:03.755 --> 00:51:05.215

the future workforce, right?

1112

00:51:05.275 --> 00:51:07.095

So that's why we have our residency program

1113

00:51:07.475 --> 00:51:08.575

and we're making sure that,

1114

00:51:08.755 --> 00:51:12.055

and our residency program, that they are

1115

00:51:13.595 --> 00:51:16.095

all, all of the medical providers and,

1116  
00:51:16.435 --> 00:51:19.255  
and our psychiatrists, anybody who touches our, any

1117  
00:51:19.255 --> 00:51:22.255  
of our residency programs, that they understand

1118  
00:51:22.285 --> 00:51:25.215  
that they are going to do this, that this is the, again,

1119  
00:51:25.275 --> 00:51:27.695  
the expectation, our residency program.

1120  
00:51:27.995 --> 00:51:30.575  
Um, I was really excited 'cause they came to us

1121  
00:51:30.635 --> 00:51:33.415  
and said, we're not getting enough experience, you know,

1122  
00:51:33.415 --> 00:51:35.055  
with these one two inductions.

1123  
00:51:35.315 --> 00:51:36.455  
And so the person

1124  
00:51:36.515 --> 00:51:39.615  
who oversees our residency program actually now has a cl a

1125  
00:51:39.875 --> 00:51:42.095  
mat clinic that they're designing

1126  
00:51:42.195 --> 00:51:43.935  
and in the process of implementing

1127  
00:51:43.935 --> 00:51:47.215  
and have started to being, seeing people on a regular basis.

1128  
00:51:47.355 --> 00:51:49.455  
So again, getting people really comfortable with that.

1129  
00:51:49.955 --> 00:51:53.175  
Um, so making sure that our residents do that.

1130  
00:51:53.435 --> 00:51:56.815  
The other thing is, is again, that comfort level and, and,

1131  
00:51:56.835 --> 00:51:58.855  
and, you know, I don't know who coined this term,

1132  
00:51:58.995 --> 00:52:01.215  
but I love it and I use it all the time,

1133  
00:52:01.445 --> 00:52:03.055  
that pills don't teach skills.

1134  
00:52:03.555 --> 00:52:05.695  
And so that we have to make sure that we're,

1135  
00:52:05.795 --> 00:52:08.975  
we have a full group of people that are working together

1136  
00:52:09.155 --> 00:52:11.135  
to help people be supportive

1137  
00:52:11.515 --> 00:52:14.735  
and to help people, you know, achieve their recovery goals.

1138  
00:52:14.915 --> 00:52:17.455  
And so that's why we've always said we're not gonna just do

1139  
00:52:17.455 --> 00:52:18.575  
medications alone.

1140  
00:52:18.965 --> 00:52:22.295  
That we wanna make sure that people are, are linked in and,

1141  
00:52:22.315 --> 00:52:23.615  
and supported in doing that.

1142  
00:52:23.615 --> 00:52:25.655  
And that our providers are linked in

1143  
00:52:25.655 --> 00:52:28.655  
and supported, um, to provide those services.

1144

00:52:29.075 --> 00:52:31.495

You know, I know when I first did training on social

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00:52:31.895 --> 00:52:34.215

determinants of health that, you know, I went to, uh, one

1146

00:52:34.215 --> 00:52:36.295

of our provider meetings and I'm talking about the needs

1147

00:52:36.295 --> 00:52:38.655

to do social de we have to do all these screenings,

1148

00:52:38.915 --> 00:52:41.535

and it was just like mutiny, no, we can't do that.

1149

00:52:41.535 --> 00:52:42.895

If we identify all these needs

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00:52:42.895 --> 00:52:44.655

and we don't meet 'em, we're gonna be liable.

1151

00:52:44.755 --> 00:52:47.215

All of a sudden, you know, it, it's all on us.

1152

00:52:47.275 --> 00:52:49.695

And we, and, and that's why I think it's so critical

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00:52:49.925 --> 00:52:52.175

that the providers know it's, they're not alone.

1154

00:52:52.565 --> 00:52:55.735

That this is a whole care team that's gonna work together

1155

00:52:55.835 --> 00:52:58.295

to support that patient and to support them.

1156

00:53:00.015 --> 00:53:02.245

Thank you. Um, and did I miss anything?

1157

00:53:02.385 --> 00:53:04.405

I'm sorry. Is there any other part of that? No,

1158  
00:53:04.605 --> 00:53:05.765  
I think, I think you hit the, I

1159  
00:53:05.765 --> 00:53:06.805  
think you hit the high points.

1160  
00:53:07.065 --> 00:53:10.125  
Um, I am wondering though, as you've rolled this out

1161  
00:53:10.265 --> 00:53:11.285  
and people have,

1162  
00:53:11.745 --> 00:53:13.525  
and you've really championed this effort,

1163  
00:53:14.235 --> 00:53:17.525  
have there been providers who were initially reluctant

1164  
00:53:17.705 --> 00:53:20.165  
and then decided that they would

1165  
00:53:20.895 --> 00:53:23.685  
start, start providing?

1166  
00:53:24.225 --> 00:53:25.605  
Yes, absolutely.

1167  
00:53:25.745 --> 00:53:30.285  
And I think no much, no matter how much training I do,

1168  
00:53:30.425 --> 00:53:32.445  
no ma how information we do.

1169  
00:53:32.605 --> 00:53:35.685  
I still think one of the strongest ways

1170  
00:53:35.785 --> 00:53:40.235  
to get buy-in from providers is by having a champion, right?

1171  
00:53:40.235 --> 00:53:43.035  
Having a champion that's working there in their clinic

1172

00:53:43.455 --> 00:53:47.635

that's doing this, that, um, says, you know,

1173

00:53:48.095 --> 00:53:49.115

let me just help you through it.

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00:53:49.215 --> 00:53:51.875

Let me, you know, that, that can have that mentoring.

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00:53:52.135 --> 00:53:53.675

And, and that to me is critical.

1176

00:53:54.015 --> 00:53:56.795

We had, you know, at one of our clinics, we had a provider

1177

00:53:56.815 --> 00:53:58.075

who just was like, Mm-Hmm.

1178

00:53:58.335 --> 00:54:01.955

Not my thing. Um, we also had a psychiatrist who was kind

1179

00:54:02.075 --> 00:54:03.835

of like, Nope, this is not my area.

1180

00:54:03.865 --> 00:54:05.035

It's gonna take too much time.

1181

00:54:05.355 --> 00:54:07.995

I don't, you know, I I just wanna send people out.

1182

00:54:08.535 --> 00:54:10.635

And both of them, after mentoring

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00:54:10.635 --> 00:54:12.195

and working with champions, both

1184

00:54:12.195 --> 00:54:15.475

of them now are onboard excited in talking

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00:54:15.475 --> 00:54:17.795

to other people about that because, and, and,

1186

00:54:17.795 --> 00:54:18.995  
and one of the things we've talked

1187

00:54:18.995 --> 00:54:21.435  
to doctors about too is the induction seems

1188

00:54:21.435 --> 00:54:23.035  
to be the most fearful thing, right?

1189

00:54:23.035 --> 00:54:25.675  
They're afraid of the induction, they're afraid of people

1190

00:54:25.705 --> 00:54:28.195  
that you know, that going into withdrawal or,

1191

00:54:28.335 --> 00:54:31.875  
or are having, you know, symptoms that are uncomfortable

1192

00:54:31.935 --> 00:54:34.635  
or, you know, that that is the, the hardest thing.

1193

00:54:34.635 --> 00:54:36.795  
So we talk about people about, you don't need

1194

00:54:36.795 --> 00:54:37.915  
to necessarily do that.

1195

00:54:38.025 --> 00:54:40.395  
Many of the people just may maybe need those

1196

00:54:40.505 --> 00:54:41.515  
ongoing services.

1197

00:54:42.055 --> 00:54:44.715  
So how can you, you know, begin to think about that,

1198

00:54:45.085 --> 00:54:47.515  
don't look as, uh, we're just gonna be taken in.

1199

00:54:47.535 --> 00:54:49.395  
And that, that was one of the things when we first

1200  
00:54:49.755 --> 00:54:52.275  
identified MAP providers, you know, I didn't say,

1201  
00:54:52.595 --> 00:54:54.635  
'cause we're, we are not, uh, you know, a,

1202  
00:54:54.795 --> 00:54:55.915  
a part two provider.

1203  
00:54:56.055 --> 00:54:58.835  
We are, you know, we do not hold ourselves out

1204  
00:54:58.935 --> 00:55:00.995  
as we are just doing MAT services, right?

1205  
00:55:01.295 --> 00:55:04.235  
MAT services are a part of our primary care services.

1206  
00:55:05.015 --> 00:55:08.395  
And so really looking at that,

1207  
00:55:08.605 --> 00:55:11.475  
we're not gonna be advertising, look at

1208  
00:55:11.475 --> 00:55:12.555  
who you're serving now.

1209  
00:55:13.075 --> 00:55:14.995  
'cause you already are serving these individuals.

1210  
00:55:15.055 --> 00:55:17.355  
You are already serving people who need this.

1211  
00:55:17.855 --> 00:55:18.955  
You are already serving people

1212  
00:55:18.955 --> 00:55:20.475  
who are receiving these services.

1213  
00:55:20.655 --> 00:55:21.755  
You might just not know.

1214

00:55:22.295 --> 00:55:23.715

Um, and so really increasing

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00:55:23.785 --> 00:55:27.875

that awareness about it's not about a whole new population,

1216

00:55:27.945 --> 00:55:30.275

it's about better serving the people you're already serving

1217

00:55:30.455 --> 00:55:35.155

and being able to do that in a much more, um, comprehensive,

1218

00:55:35.705 --> 00:55:39.955

much more collab, collaborative, um, way.

1219

00:55:41.705 --> 00:55:45.695

Thank you. I think, um, one of the things that our, uh,

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00:55:45.915 --> 00:55:49.735

our audience is always interested in is the roles that

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00:55:50.305 --> 00:55:52.335

technology plays in all of this.

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00:55:52.875 --> 00:55:55.895

And if there are any, um,

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00:55:57.035 --> 00:55:59.705

technology investments that you made that

1224

00:56:00.215 --> 00:56:02.905

made this go better, made workflows go well,

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00:56:03.285 --> 00:56:05.945

or if you are providing, um,

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00:56:06.165 --> 00:56:08.225

it sounds like you're doing a lot of on the ground services,

1227

00:56:08.255 --> 00:56:10.185

like assertive of community treatment and everything,

1228

00:56:10.285 --> 00:56:11.625  
but are some of these

1229

00:56:12.145 --> 00:56:14.225  
services being provided virtually as well?

1230

00:56:14.285 --> 00:56:17.385  
Is it a hybrid Absolutely. Service plan?

1231

00:56:18.055 --> 00:56:19.945  
Yeah. And, and I'll say out

1232

00:56:19.945 --> 00:56:22.025  
of all the negative things about Covid, right?

1233

00:56:22.025 --> 00:56:23.845  
Covid, we know there's so many negative things,

1234

00:56:24.205 --> 00:56:25.525  
horrible things that happened as a part of covid.

1235

00:56:25.665 --> 00:56:28.885  
But the one thing that was like the, the best outcome

1236

00:56:28.885 --> 00:56:30.005  
of covid was telehealth.

1237

00:56:31.265 --> 00:56:33.725  
We were, we had been proposing on our behavioral health

1238

00:56:33.835 --> 00:56:36.445  
side, 'cause we knew other providers were doing telehealth,

1239

00:56:36.625 --> 00:56:39.125  
we knew that there was a lot of opportunity there for us.

1240

00:56:39.265 --> 00:56:42.365  
We also knew we didn't have a lot of space, right?

1241

00:56:42.365 --> 00:56:43.525  
So when I'm sitting here saying,

1242

00:56:43.565 --> 00:56:45.165

I wanna hire behavioral health clinicians,

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00:56:45.325 --> 00:56:47.205

I wanna hire more psychiatrists, I wanna do that,

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00:56:47.205 --> 00:56:48.325

we're like, we're outta space.

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00:56:48.345 --> 00:56:49.645

We don't have anywhere to put 'em.

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00:56:49.825 --> 00:56:53.645

But when Covid came, you know, we had this three year plan

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00:56:53.665 --> 00:56:56.885

of trying to test out one clinician to do,

1248

00:56:57.185 --> 00:56:58.365

you know, remote services.

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00:56:58.495 --> 00:57:01.285

Covid came and bam, we had telehealth overnight.

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00:57:01.505 --> 00:57:03.165

It was like, it just,

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00:57:03.425 --> 00:57:06.005

and that's why I was really able to grow our workforce,

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00:57:06.585 --> 00:57:09.445

you know, so quickly, um, was

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00:57:09.445 --> 00:57:11.125

because we could do telehealth services.

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00:57:11.585 --> 00:57:13.245

And I think from some folks,

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00:57:13.265 --> 00:57:14.925

and when I talk to our clinicians, when I talk

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00:57:14.925 --> 00:57:16.725

to our psychiatrist, when I talk to other people,

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00:57:17.125 --> 00:57:18.565

I think it's opened the door.

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00:57:19.185 --> 00:57:21.405

Um, because of that stigma, that fear

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00:57:21.835 --> 00:57:25.285

that telehealth appointment can allow people

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00:57:25.305 --> 00:57:26.765

to have just enough space

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00:57:26.825 --> 00:57:29.845

to maybe feel comfortable sharing some things they might not

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00:57:29.845 --> 00:57:34.125

have shared when you're in that space, um, with the person,

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00:57:34.345 --> 00:57:36.725

it also opened up access to people.

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00:57:37.195 --> 00:57:39.245

Many of the people we serve, have children,

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00:57:39.515 --> 00:57:42.885

have transportation issues, have a variety of issues

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00:57:43.235 --> 00:57:44.285

that for them to get.

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00:57:44.345 --> 00:57:47.965

And, and if you've ever ridden the bus in Arizona when it's

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00:57:47.965 --> 00:57:51.445

120, you can imagine nobody wants to do that to come

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00:57:51.545 --> 00:57:53.405

for a 15, 20 minute visit, right?

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00:57:53.595 --> 00:57:54.965

It's gonna take you all day.

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00:57:54.985 --> 00:57:56.565

And that's just you, if you have kids

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00:57:56.665 --> 00:57:58.845

or other things, you know, you're gonna lose job,

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00:57:58.865 --> 00:58:00.645

you're gonna lose time at work, all

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00:58:00.645 --> 00:58:01.885

that kind of stuff, right?

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00:58:02.105 --> 00:58:04.325

So telehealth opened the door to access,

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00:58:04.425 --> 00:58:06.485

you can now access it on your phone.

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00:58:06.625 --> 00:58:08.485

You can and you know, in your living room

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00:58:08.505 --> 00:58:10.285

and your whatever it, you know,

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00:58:10.285 --> 00:58:14.245

and we saw our referrals just continue to increase,

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00:58:14.865 --> 00:58:16.165

um, for behavioral health.

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00:58:16.745 --> 00:58:18.685

Um, and I think a lot of that is

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00:58:18.685 --> 00:58:21.645

because telehealth has expanded the ability to do that.

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00:58:23.105 --> 00:58:26.665

Absolutely. Um, one question did come in, Vicki, there,

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00:58:26.925 --> 00:58:29.745

one of our members wants to know about, um,

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00:58:30.235 --> 00:58:32.145

42 CFR part two

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00:58:33.245 --> 00:58:35.785

and whether you separate your MAT

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00:58:35.845 --> 00:58:38.545

and SUD records from your primary care records.

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00:58:39.245 --> 00:58:43.305

We do not, we are not considered, you know, a primary, um,

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00:58:43.735 --> 00:58:44.865

part two provider.

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00:58:45.445 --> 00:58:49.225

All of the services that we do are under our v uh,

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00:58:49.245 --> 00:58:50.305

are under primary care.

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00:58:50.805 --> 00:58:53.825

So one of the things in our integrated behavioral health

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00:58:53.825 --> 00:58:54.865

program, um,

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00:58:54.925 --> 00:58:57.865

and within our MAT services, it's all under the umbrella

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00:58:57.925 --> 00:59:00.145

of primary care or under the umbrella

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00:59:00.245 --> 00:59:02.225

of our outpatient behavioral health clinic.

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00:59:02.765 --> 00:59:05.065

Um, and so we do not have separate records.

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00:59:05.485 --> 00:59:09.305  
We do, I will say, have, um, what's called sensitive notes

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00:59:10.005 --> 00:59:13.585  
so that counseling notes are, um, blocked out.

1300  
00:59:14.335 --> 00:59:17.475  
Um, so you have to, you write a, a, a, you know, a very

1301  
00:59:18.275 --> 00:59:21.035  
overview note that says what you did so that you can,

1302  
00:59:21.085 --> 00:59:22.205  
can have enough information

1303  
00:59:22.205 --> 00:59:23.605  
for billing and that type of thing.

1304  
00:59:23.905 --> 00:59:27.565  
But we're able to do those sensitive notes, um, separate

1305  
00:59:27.905 --> 00:59:31.165  
and those are blocked out from folks being able to read.

1306  
00:59:32.595 --> 00:59:33.945  
Thank you. That was very helpful.

1307  
00:59:34.225 --> 00:59:37.075  
I appreciate it. I think we, but I

1308  
00:59:37.075 --> 00:59:38.835  
Know we're, we're constantly relooking at that.

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00:59:38.995 --> 00:59:41.595  
I just had a, yeah. A meeting with our compliance officer

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00:59:41.735 --> 00:59:42.835  
and all of our attorneys

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00:59:42.895 --> 00:59:45.235  
and there's this fear, do we need to like,

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00:59:45.235 --> 00:59:46.275  
have this whole thing

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00:59:46.375 --> 00:59:48.595  
and are we now holding ourselves out there

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00:59:48.595 --> 00:59:50.155  
as substance abuse providers?

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00:59:50.215 --> 00:59:52.755  
And, you know, so it it, it is a fine line.

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00:59:52.775 --> 00:59:55.075  
You have to, um, and one of the things I now, um,

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00:59:55.075 --> 00:59:59.915  
there was a, there was a flow chart that was developed

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00:59:59.915 --> 01:00:02.875  
by, um, somebody within the FQHC system

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01:00:03.305 --> 01:00:05.195  
that it really was a nice flow chart

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01:00:05.195 --> 01:00:08.035  
that said if you do this, if you do that, then you need,

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01:00:08.055 --> 01:00:10.395  
you know, you are under these restrictions

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01:00:10.415 --> 01:00:11.715  
or if you don't, then you're not.

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01:00:12.255 --> 01:00:15.675  
Um, and if, if it's helpful, I can send that over to you all

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01:00:15.675 --> 01:00:16.875  
to take a look at it.

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01:00:16.875 --> 01:00:19.355  
It was a great resource to say, oh, oh,

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01:00:20.015 --> 01:00:21.195  
how do we, how do we determine

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01:00:21.215 --> 01:00:22.215  
You? That sounds great.

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01:00:22.215 --> 01:00:23.195  
We would love to have that.

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01:00:25.855 --> 01:00:27.945  
Well, thank you for being with us today, Vicki.

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01:00:27.945 --> 01:00:29.665  
This was really helpful and,

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01:00:29.725 --> 01:00:32.505  
and, uh, we appreciate your participation in telling us

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01:00:32.515 --> 01:00:34.825  
about all of the wonderful services you're providing.

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01:00:35.575 --> 01:00:36.945  
Well, I appreciate the opportunity

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01:00:37.345 --> 01:00:40.305  
'cause I, I really believe, you know, having that, and, and,

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01:00:40.305 --> 01:00:41.145  
and we talk a lot about

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01:00:41.145 --> 01:00:42.705  
medication assisted treatment focused.

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01:00:42.785 --> 01:00:45.065  
I kind of focused on the opioid, um, use,

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01:00:45.165 --> 01:00:47.945  
but we also provide it for tobacco sensation.

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01:00:48.005 --> 01:00:50.145  
We also provide it for, you know,

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01:00:50.175 --> 01:00:51.265  
alcohol and different things.

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01:00:51.325 --> 01:00:54.065  
But you know, again, I, I believe you know, it,

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01:00:54.175 --> 01:00:55.545  
it's saves people's lives

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01:00:55.605 --> 01:00:57.905  
and the more we can talk about it, the more we can reduce

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01:00:57.905 --> 01:01:00.945  
that stigma, the more we can let people know, um,

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01:01:01.015 --> 01:01:03.425  
that these services need to be available.

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01:01:03.575 --> 01:01:06.345  
They are funded, um, they can make a difference.

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01:01:06.445 --> 01:01:08.025  
And, and, and the more they're

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01:01:08.025 --> 01:01:09.385  
available to people, the better.

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01:01:10.205 --> 01:01:12.185  
So thank you for giving me the opportunity today.

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01:01:12.875 --> 01:01:15.265  
Thank you Vicki.

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01:01:15.265 --> 01:01:18.145  
Karen, I want to thank both you, uh, both of you for today

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01:01:18.145 --> 01:01:19.785  
and I want to thank everybody who joined us

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01:01:19.785 --> 01:01:21.825  
and I wanna remind everybody that the slides

1354  
01:01:21.845 --> 01:01:24.705  
and the recordings for this will be made available on the

1355  
01:01:24.705 --> 01:01:26.345  
Open Minds website starting tomorrow.

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01:01:26.885 --> 01:01:29.265  
And I also invite you to join us next week, Thursday,

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01:01:29.545 --> 01:01:32.865  
December 5th at 1:00 PM Eastern for the session, A Culture

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01:01:33.205 --> 01:01:36.425  
of Compassion, the Shatterproof National Stigma Initiative

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01:01:36.495 --> 01:01:38.545  
Case Study Register for that event,

1360  
01:01:38.545 --> 01:01:40.985  
or for a full list of upcoming round tables,

1361  
01:01:41.285 --> 01:01:44.025  
you can visit the Executive Round Tables page under the

1362  
01:01:44.025 --> 01:01:47.785  
executive education tab@www.open

1363  
01:01:47.915 --> 01:01:49.025  
minds.com.

1364  
01:01:49.175 --> 01:01:51.545  
Once again, Vicki, Karen, thank you very much.

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01:01:51.785 --> 01:01:53.385  
I hope you both have a wonderful weekend.