



TELEHEALTH LEARNING AND CONSULTATION (TLC) TUESDAYS

April 14: Telehealth Tools



PRESENTED BY:

Shane Hudson, Pres. & CEO, CKF Addiction Treatment

Dulcinea Rakestraw, BSW, MPH

JK Costello, M.D., MPH, The Steadman Group

Disclaimer

This presentation was prepared for the Mountain Plains Mental Health Technology Transfer Center (Mountain Plains MHTTC), Mid-America Mental Health Technology Transfer Center (Mid-America MHTTC), and the Mid-America Addiction Technology Transfer Center (Mid-America ATTC) Network under a cooperative agreement from the Substance Abuse and Mental Health Services Administration (SAMHSA). All material appearing in this presentation, except that taken directly from copyrighted sources, is in the public domain and may be reproduced or copied without permission from SAMHSA or the authors. Citation of the source is appreciated. Do not reproduce or distribute this presentation for a fee without specific, written authorization from the Mountain Plains MHTTC, Mid-America MHTTC, or Mid-America ATTC. For more information on obtaining copies of this presentation please email david.v.terry@und.edu, gberry@wiche.edu, or lauren.robinson@unmc.edu.

At the time of this presentation, Elinore F. McCance-Katz served as SAMHSA Assistant Secretary. The opinions expressed herein are the views of Hudson, Rakestraw and Costello and do not reflect the official position of the Department of Health and Human Services (DHHS), or SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this presentation is intended or should be inferred. Additionally, Hudson, Rakestraw, and Costello have no financial, personal, or professional conflicts of interest in this training.

Presenters



Shane Hudson, MS, LCP,LCAC

Shane is the President & CEO of CKF Addiction Treatment. He is a member of numerous local and state committees in order to provide advocacy for Kansans suffering from addiction as well as the field of addiction treatment as a whole. Shane is a recognized leader in promoting screening in medical settings, medication assisted treatment, and the use of technology to improve access to services. CKF serves nearly 2,000 patients annually through its detoxification, residential, outpatient, and telehealth services in Kansas. Through hospital-based services at Salina Regional and Stormont Vail, CKF serves an additional 5,500 patient annually. CKF has been the recipient of a federal Opioid Grant through SAMHSA to serve eligible individuals in 65 Kansas counties for the past 3 years.



Dulcinea Rakestraw, MPH, BSW

Dulcinea has worked in the fields of child welfare, addiction treatment & prevention and behavioral health care for almost 20 years. She is currently a doctoral candidate in community psychology at Wichita State University. She is passionate about providing safety and stability for children along with opportunities for treatment and recovery for individuals facing addiction.



Presenters



JK Costello, MD, MPH is a physician/consultant who develops population health models for substance use disorder. He works with publicly-funded health care and public health systems to improve addiction prevention, treatment and recovery. He helps expand medication-assisted treatment (MAT) in Colorado jails, develops value-based payments for MAT for Medicaid health plans, and, improves recovery options in rural Colorado. He is an expert on the payment and regulatory landscape for substance use disorder treatment.



Presenter



Telehealth Tools: Utilizing myStrength for Telehealth Addiction Groups

Shane Hudson, MS, LCP,LCAC



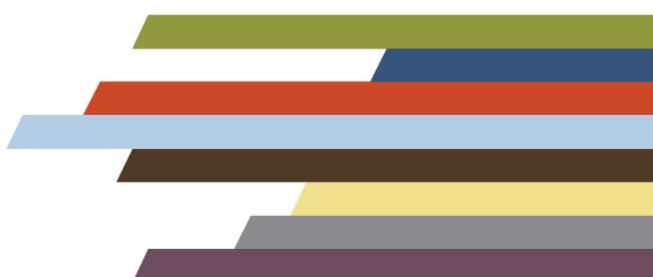
Traditional In-Person Outpatient Treatment Groups: Structure

Intensive Outpatient (Level 2)

- 9 hours per week minimum
- Monday, Wednesday, Thursday evening (3 hours per)
- Tuesday, Thursday, Friday morning (3 hours per)

Outpatient (Level 1)

- Less than 9 hours per week (6 hours typical)
- Monday, Wednesday evening (3 hours per)
- Tuesday, Thursday morning (3 hours per)



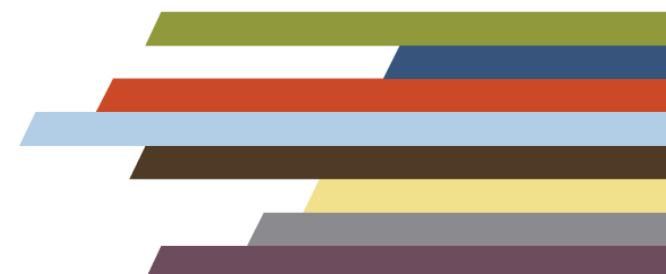
Traditional In-Person Outpatient Treatment Groups: Curriculum

Didactic Sessions including Evidence Based Curriculum

- Curriculum varies by agency
- CKF utilizes Living in Balance

Group Counseling Sessions

- Check-In
- Processing
- Discussion
- Readings
- Worksheets
- Activities

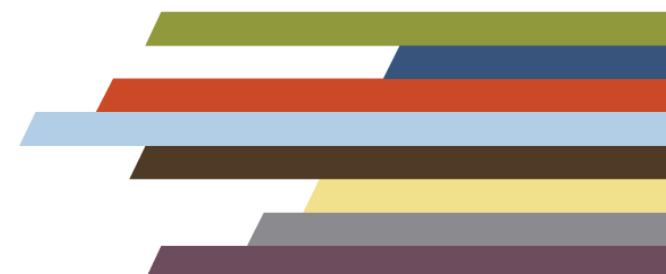


How well does this translate to telehealth?

Can work and has worked

What's missing?

- 24/7 access to support and resources when patient needs it most
- Ability to work at own pace Curriculum exists inside and outside of treatment groups
- Self guided exploration of additional resources
- Staff monitoring of patient engagement in between sessions



PATIENT FEEDBACK

"I THINK THE MEETINGS ARE GREAT. EVERYONE IS OPEN AND HONEST WITH EACH OTHER. I FEEL VERY COMFORTABLE IN OUR GROUP. THE FACILITATOR IS GREAT."

"I LOVE THE TELEHEALTH SYSTEM. I AM SO LUCKY TO BE A PART OF SUCH A WONDERFUL GROUP OF PEOPLE WHO CARE."

"VERY CONVENIENT AND EFFECTIVE FORM OF COMMUNICATION FOR TREATMENT SERVICES."

"IF I DIDN'T HAVE THIS I DON'T KNOW WHAT I WOULD DO!"



CKF

ADDICTION TREATMENT
HELP | HOPE | HEALING

Giving patients the ability to access **CKF TELEHEALTH** Addiction Treatment from anywhere!

Call or visit our website to learn more about **CKF TELEHEALTH** Addiction Treatment

785-825-6224

WWW.CKFADDICTIONTREATMENT.ORG

TELEHEALTH
CKF ADDICTION TREATMENT
HELP | HOPE | HEALING



Providing quality, effective, and innovative substance use disorder prevention & treatment since 1967.

CKF **TELEHEALTH** Addiction Treatment

Opioid Grant (2017)

- Support Groups and MAT

Kansas Connecting Communities (KCC)(2019)

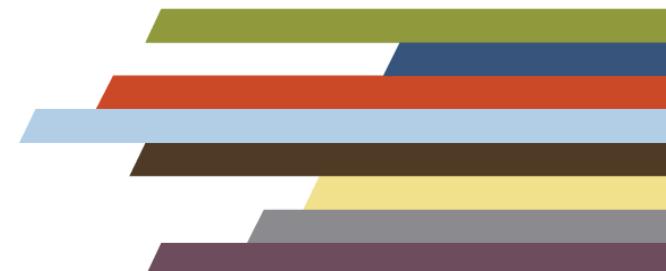
- Assessment and Treatment

Hoxie Medical Clinic (2020)

- Assessment and Treatment

COVID-19 response

- *100% telehealth for all outpatient services*

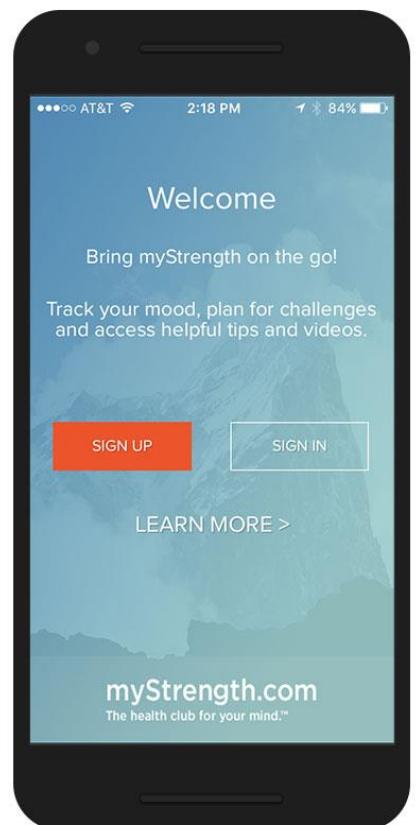


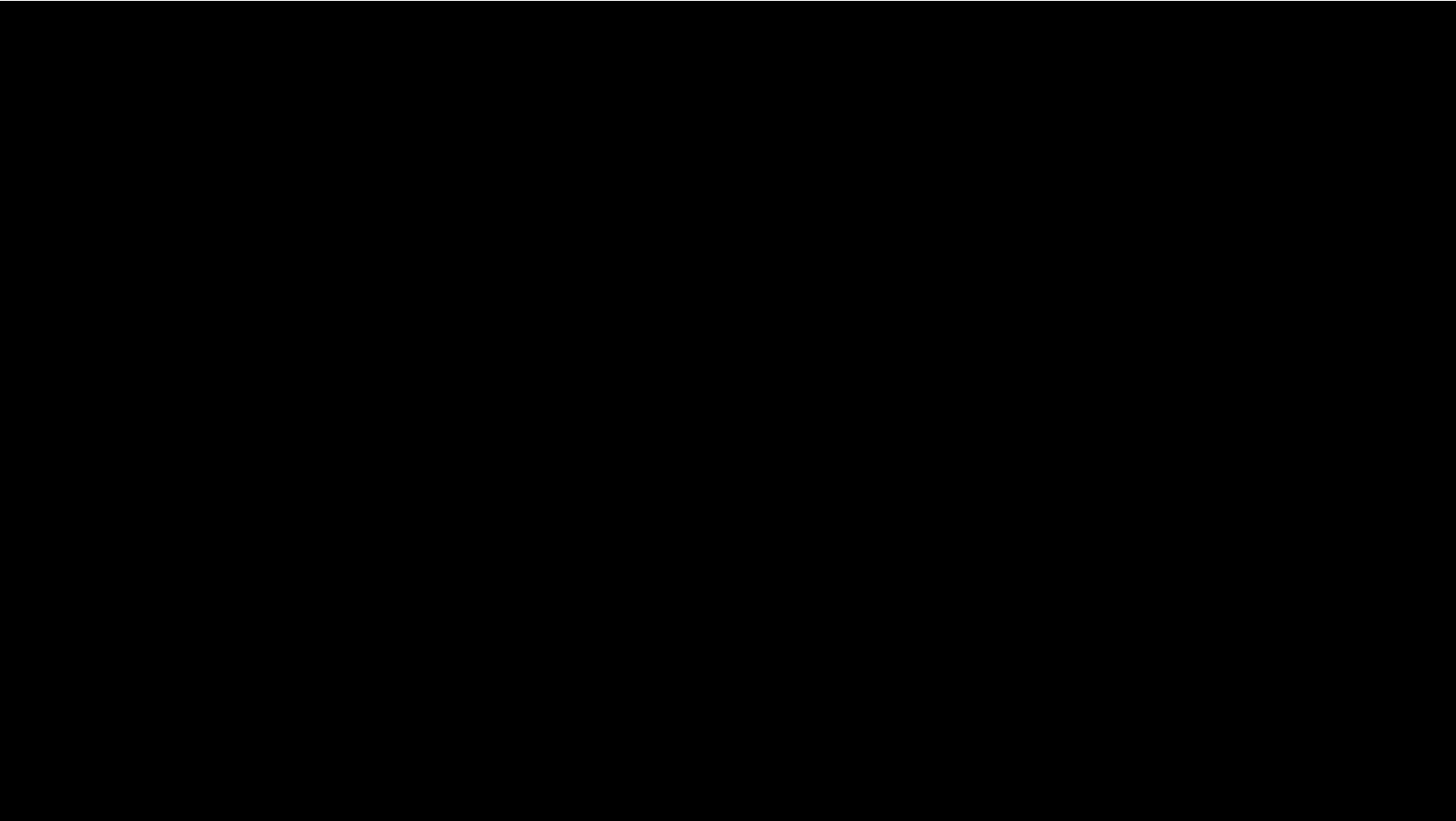


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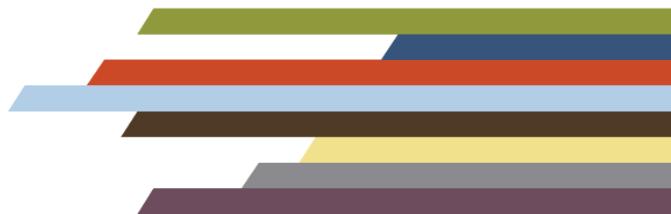


- Began using myStrength in 2018 to incorporate into treatment groups and engage patients referred to Opioid Grant
- Available to patients, patients' family members, and employees
- Whole Health
- Goal Setting
- Evidence Based Curriculum





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Intended Purpose



Preparing for the First Session

Get client registered with myStrength to start self-examination process during wait times



Initial Assessment

Discuss baseline wellness assessment results and treatment goals



Individual Treatment Session

Share appropriate myStrength condition-specific handouts



Skill-Building/Homework

Assign eLearning modules, tools, and resources to align with treatment plan



Group Session

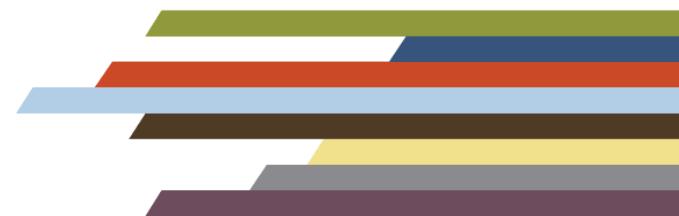
Use videos to start a group discussion or work through an eLearning module together



Client Self-Management after Discharge

Reinforce myStrength as a resource clients can use to continue self-management skills

Clinician Perspective



Clinician Perspective: The Curriculum

PROGRAMS

MANAGING DEPRESSION



CONTROLLING ANXIETY



REDUCING STRESS



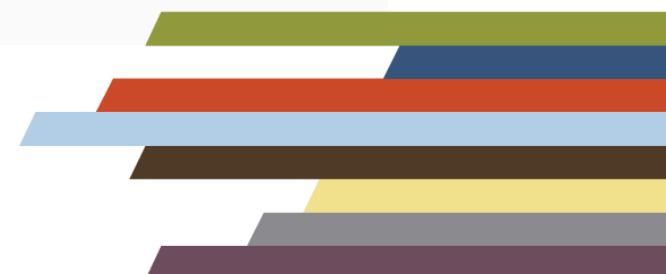
DRUG OR ALCOHOL RECOVERY



MANAGING CHRONIC PAIN



IMPROVING SLEEP



Clinician Perspective: The Curriculum

Module 1: Getting Started

Stages of Change

Module 2: Understanding Your Use

Patterns of Use
Your Decision System
The Stage of Your Mind
The Old Way
A New Way
Why Change is Hard

Module 3: Putting You in Charge

Choose a Title
Face It
Replace It
Connect
Putting It All Together

Module 4: Making it Stick

Eating and Sleeping
Relationships
Boundaries
What's Next

Clinician Perspective: The Curriculum

Welcome to ProviderConnect™
Tools for succeeding with myStrength

Overview Case Planning Tools Announcements

LIBRARY

- [Handout - Getting the Most From Your Therapeutic Group Experience.pdf](#)
- [Handout - Starting Therapy.pdf](#)
- [Handout - Graduating From Therapy.pdf](#)
- [ACT Made Simple - Worksheets.pdf](#)
- [Mindfulness and Meditation Guide BW.pdf](#)
- [Tools from the Drug & Alcohol Program.pdf](#)
- [Tools from the Depression Modules.pdf](#)

Clinician Perspective: Patient Progress

User Dashboard

Assessment	Focus	Access Code	Referrer	Interaction	Review
Show 20 users per page	▼	Showing 0 - 20 of 1425 results	< Prev	Next >	
User	DOB/Age ?	Referrer	Current Focus	Last Interaction	Last Review
test131617 test131617@example.c...	Age: 27	Madeline CHSCFMKANNAPO...	Anxiety	03/14/18 Login	Not Reviewed
					<div>12 DASS-ANX</div> <div>22 DASS-DEP</div>
test165496 test165496@example.c...	Age: 21	No referrer CHS	Mindfulness and Stress Reduction	03/14/18 Login	Not Reviewed
					<div>6 DASS-ANX</div> <div>2 DASS-DEP</div>
test165386 test165386@example.c...	Age: 28	Madeline CHSRIVERBENDFA...	Anxiety	03/14/18 Login	Not Reviewed
					<div>24 DASS-ANX</div> <div>18 DASS-DEP</div>
test165061 test165061@example.c...	Age: 54	No referrer CHS	Anxiety	03/14/18 Login	05/08/18 emelendez@mystr...
					<div>38 DASS-ANX</div> <div>24 DASS-DEP</div>

Click on a user row to view a snapshot of their recent data.



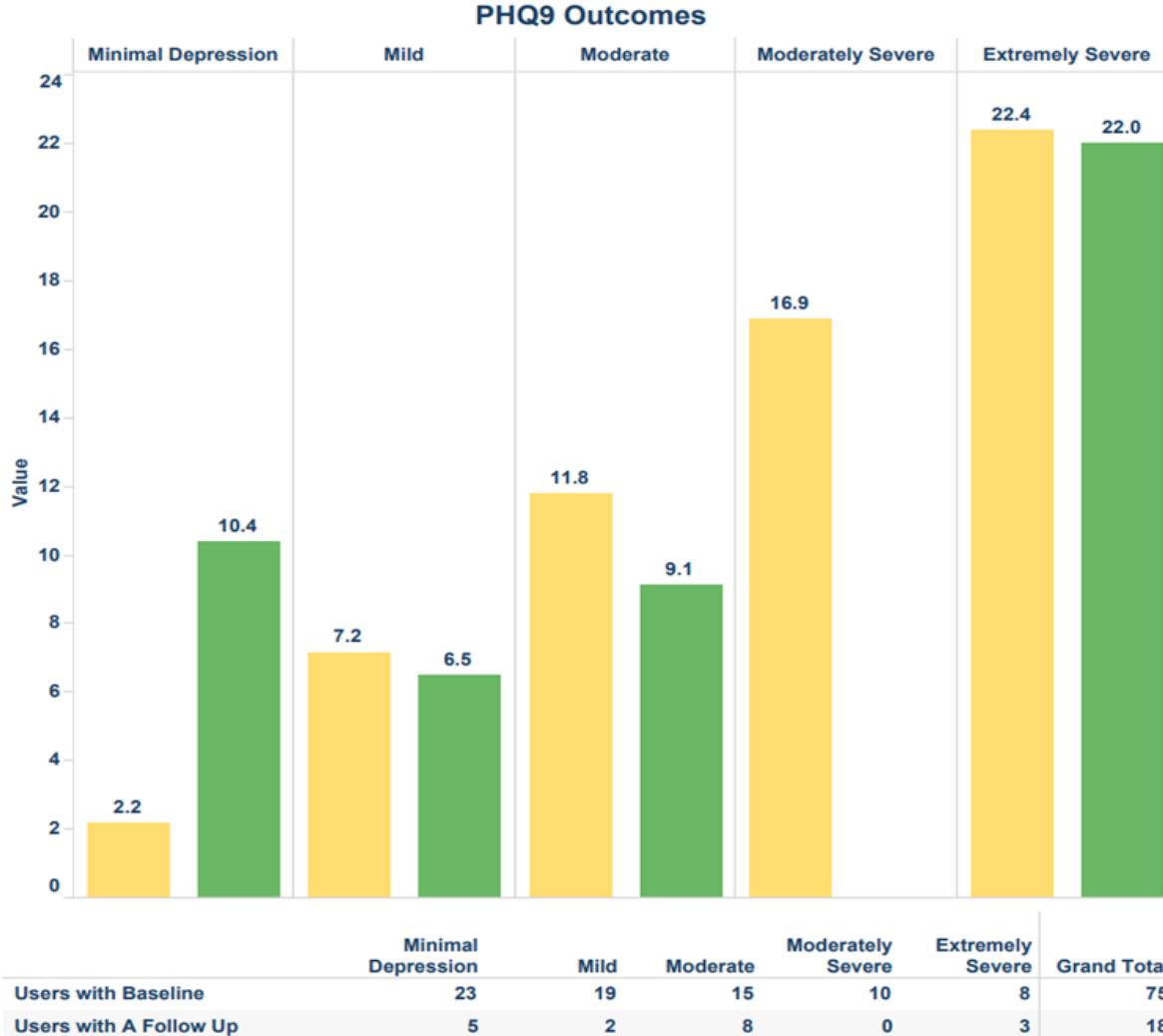
Clinician Perspective: Patient Progress



Clinician Perspective: Reports

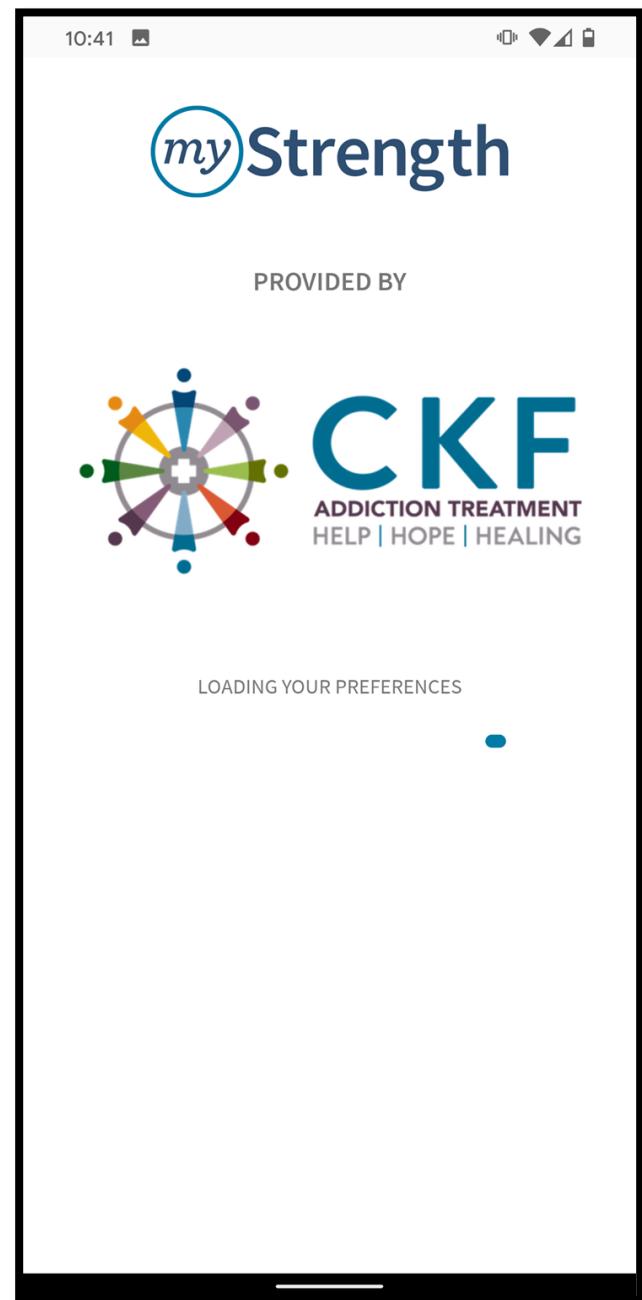
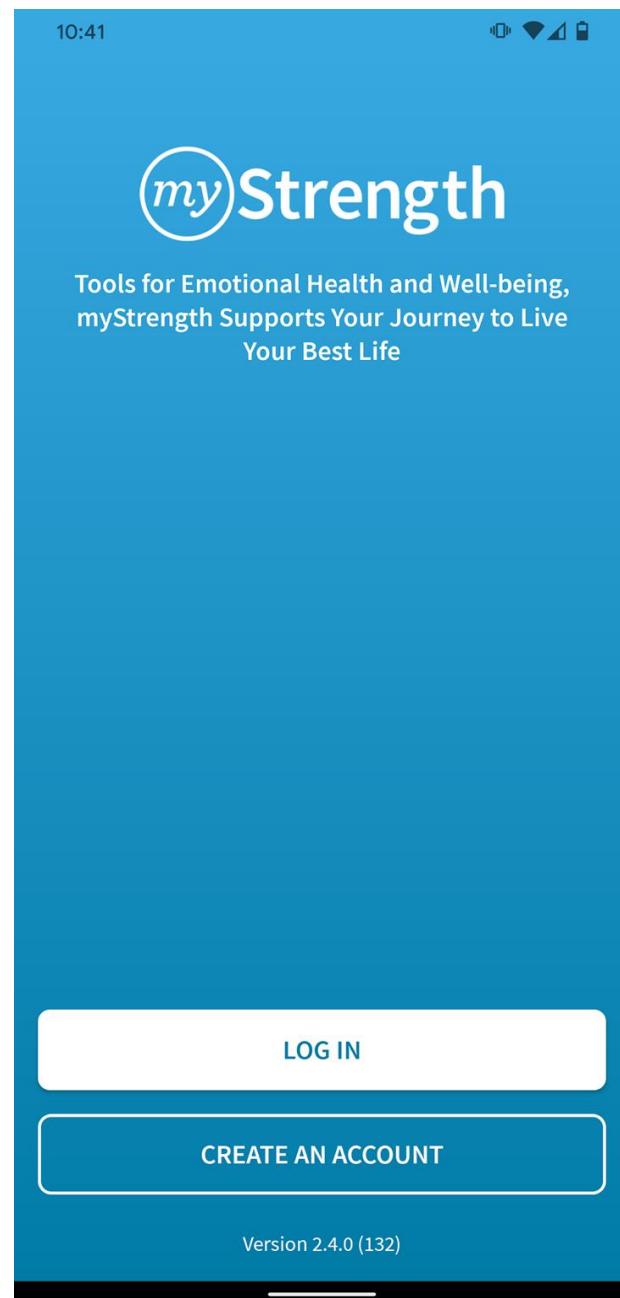


PHQ9 Outcomes Report

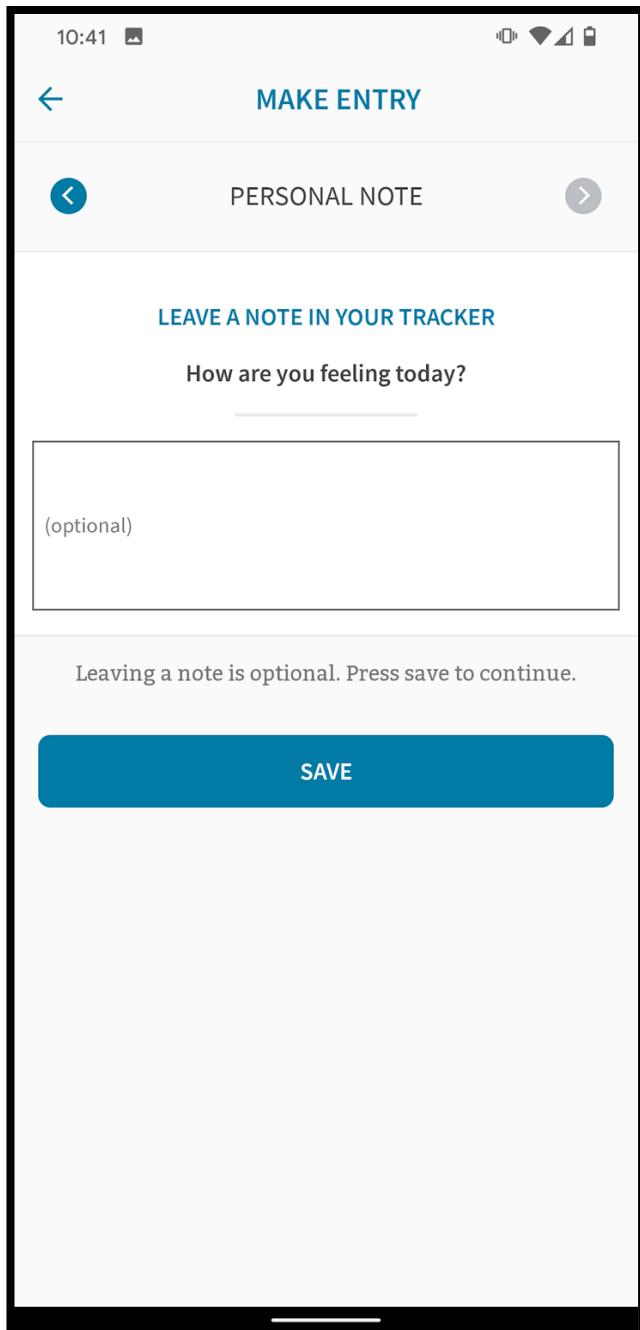
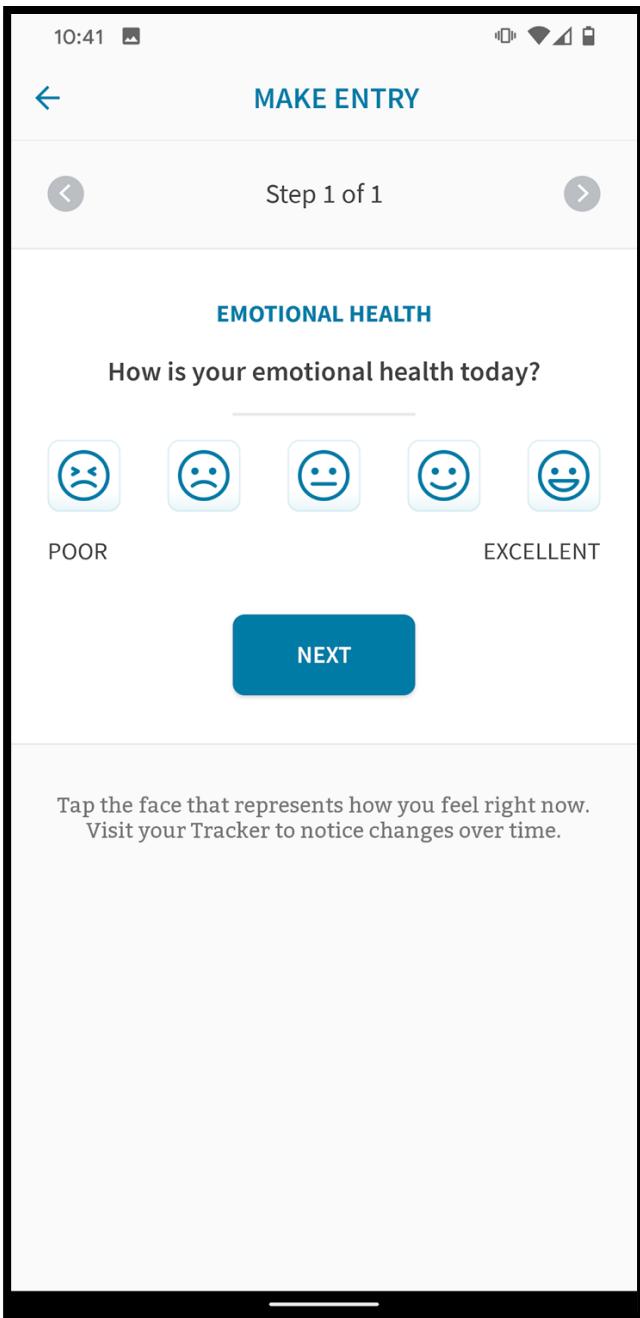


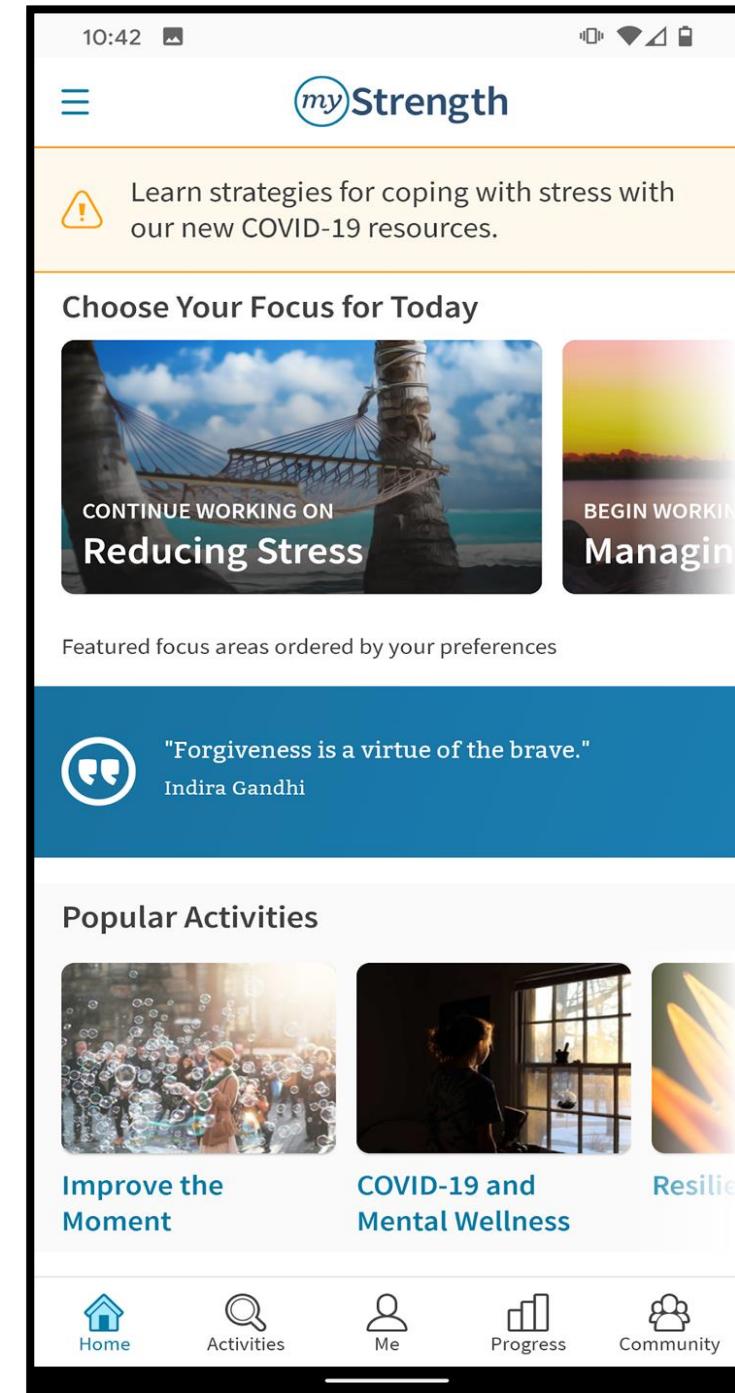
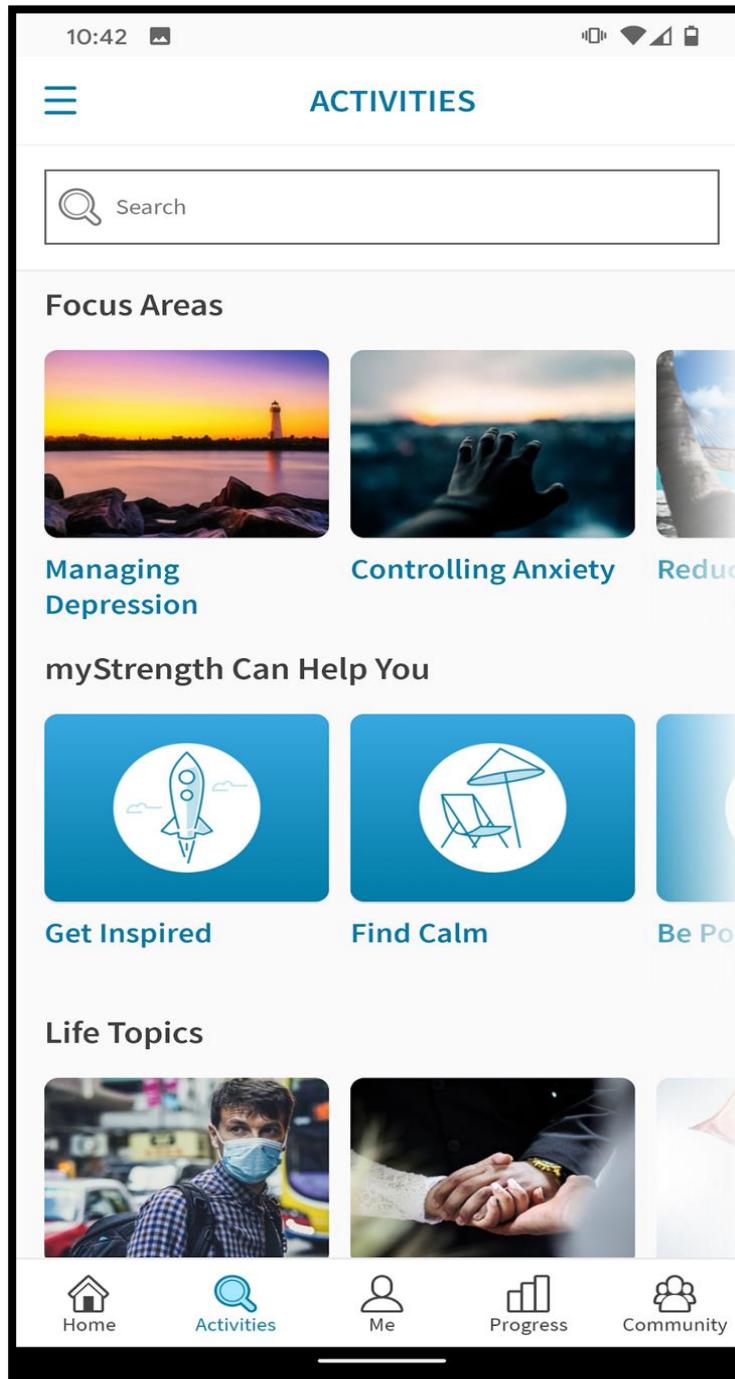
Patient Perspective





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Activities

Today's Focus: Reducing Stress ▾

SEARCH

GET HELP

LOG OUT

Learn strategies for coping with stress with our new [COVID-19 resources](#).



What would you like to do, Shane?

Guide Me
Reducing Stress

Continue

OR

Discover
Something New

Search



“A successful person is one who can lay a firm foundation with the bricks that others throw at him or her.”

DAVID BRINKLEY

Activities

Today's Focus: Reducing Stress



SEARCH

GET HELP

LOG OUT

STRESS REDUCTION AT MYSTRENGTH

What Can I Do About Stress?

An overview of three techniques that will lower your stress.

Begin Activity

Skip Activity

Activity 1 of 5



STRESS REDUCTION AT MYSTRENGTH



What Can I Do About Stress?

An overview of three techniques that will lower your stress.

Activities

Today's Focus: Reducing Stress ▾

SEARCH

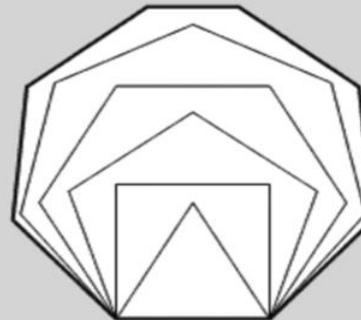
GET HELP

LOG OUT

A visual tool to relax your mind.

Research shows that deep, calm breaths can reduce stress and anxiety. This animation is a great way to center yourself and get your breathing under control.

TAKE DEEP BREATHS IN SYNC WITH THIS



[SHOW PLAINTEXT VERSION](#)

Activities

Today's Focus: Reducing Stress

SEARCH

GET HELP

LOG OUT

Community Inspirations

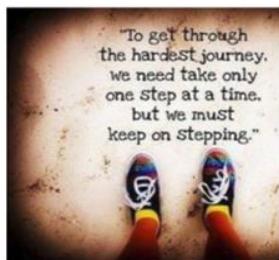
 Upload

Popular

New

My Inspirations

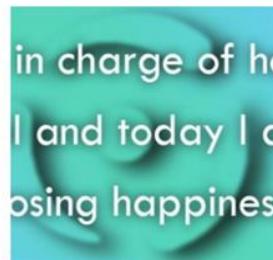
Manage



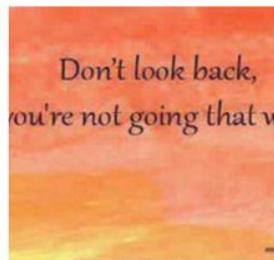
Hopeful



kalias



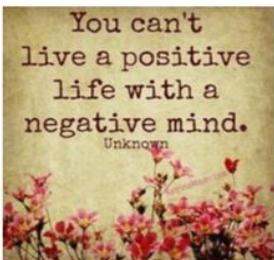
Hopeful



damageddreamr



Jac



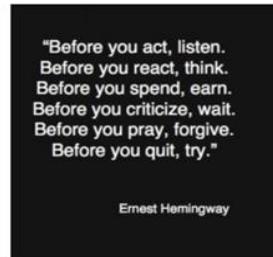
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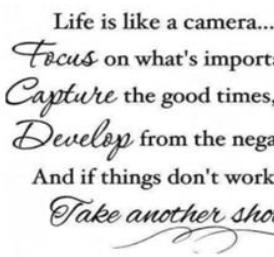
epictraveller



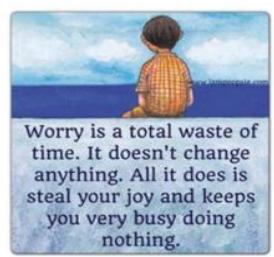
matts



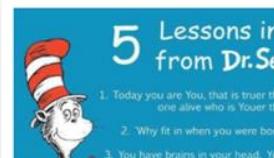
epictraveller



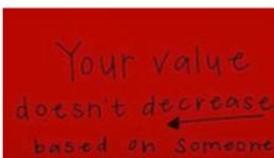
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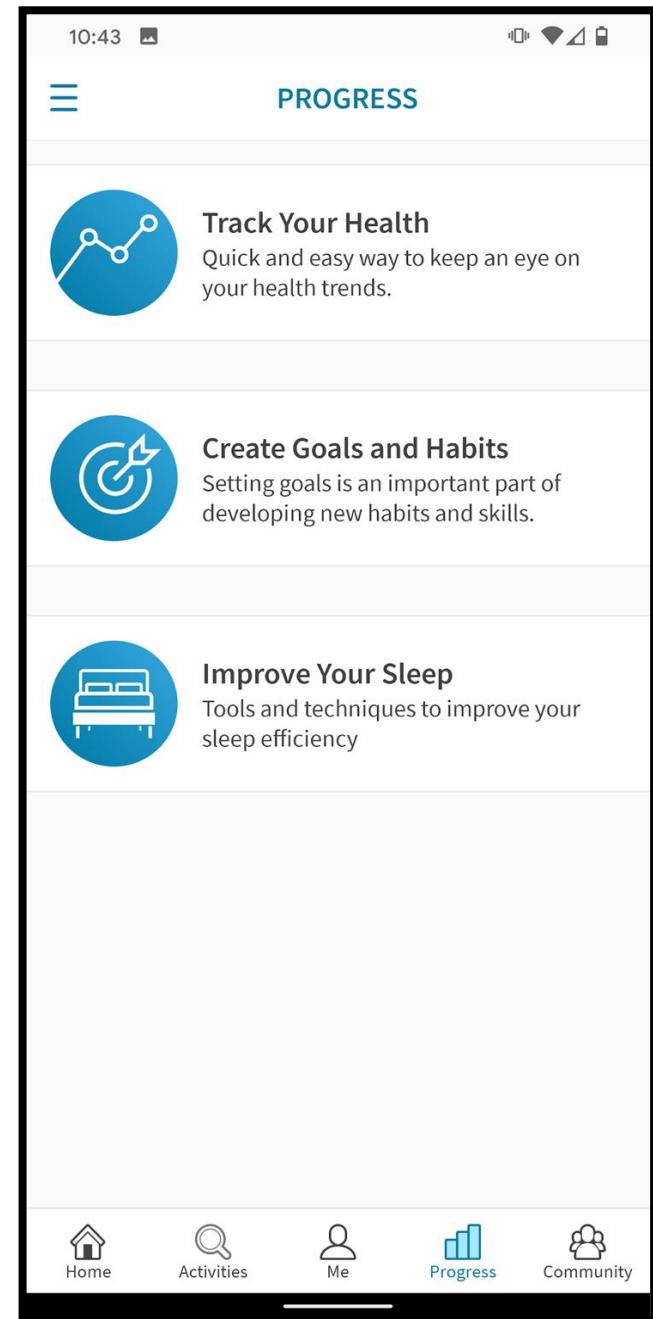
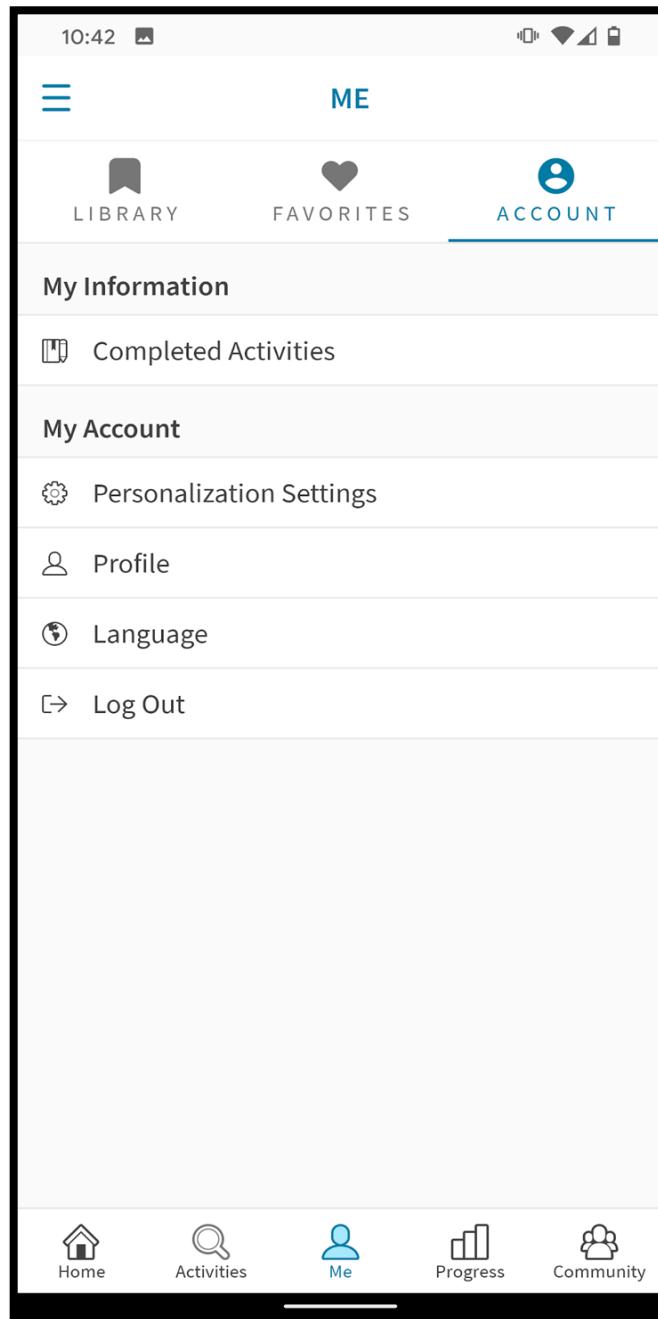


damageddreamr



1. Today you are You, that is truer than anyone else who is You.
2. Why fit in when you were born to stand out.
3. You have brains in your head. You...





References

- myStrength
 - www.myStrength.com

Presenter



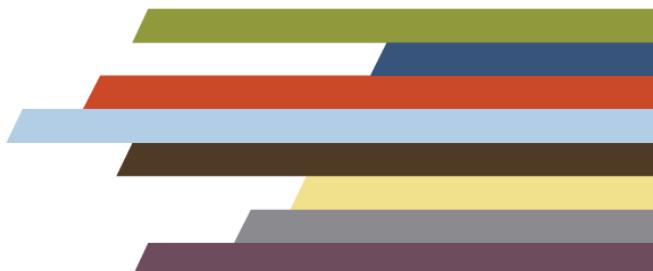
42 CFR Part 2 Confidentiality of Substance Use Disorder Patient Records

Dulcinea Rakestraw, BSW, MPH



History of 42 CFR Part 2

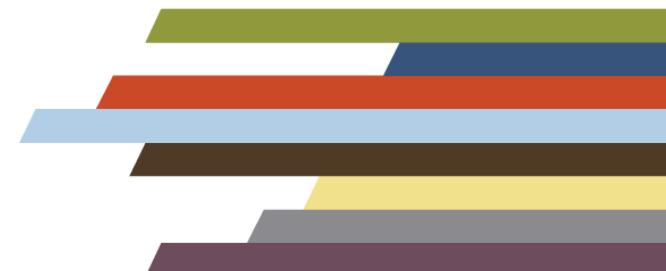
- Passed in the early 1970's as a set of regulations developed by the Federal government to establish specific parameters protecting substance abuse patients
- The law says treatment information cannot be obtained or released against the patient's will or without their consent
- Stricter than most other fields (including HIPAA)
- State Law can be more restrictive, but not less



Importance of 42 CFR Part 2



- Counters stigma
- Protects reputation, privacy and civil rights
- Encourages people to enter treatment



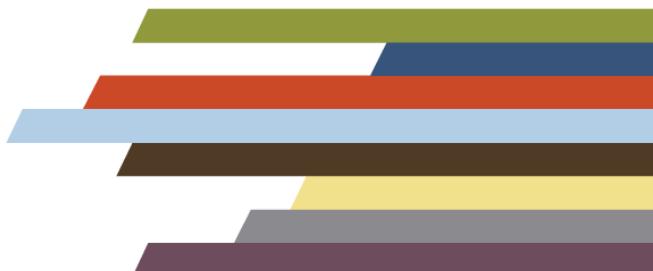
Scope

- Restricts Disclosure of:
 - Client identifying information as a recipient of or applicant for substance abuse treatment
 - By Federally assisted alcohol/drug programs
- Applies whether or not the person seeking information:
 - Already has the information
 - Has other means to obtain it
 - Enjoys official status
 - Has obtained a subpoena or warrant
 - Is authorized by State Law

Exceptions

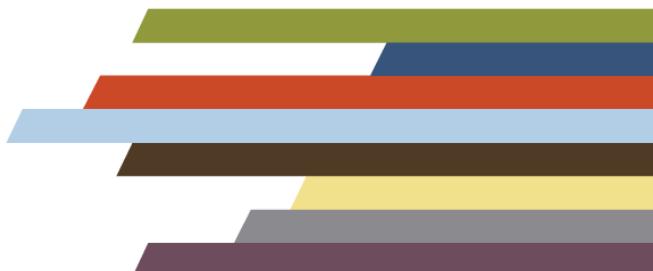


- No Patient Identifying Information (PII)
- Proper Consent
- Internal Communication
- Qualified Service Organization Agreement
- Child Abuse/Neglect
- Research and Audit
- Court Order
- Medical Emergencies
- Crime on Premises or Against Program Personnel



How is 42 CFR Part 2 more restrictive than HIPAA?

- Consents are required for when disclosures are for purposes of coordinating an individual's treatment for other health conditions.
- HIPAA's standards are more relaxed when it comes to affording law enforcement access to treatment records.
 - 42 CFR, Part 2 requires a special court order that depends on the satisfaction of higher standards before disclosure can be made to law enforcement.



Q&A With Presenters



Shane Hudson MS, LCP,LCAC



Dulcinea Rakestraw, BSW, MPH



JK Costello, MD, MPH

