

The Zoom Interface

The screenshot shows a Zoom Webinar window with a dark header bar. The main content area displays the TTC logo and a 'Thank you for joining us today!' message. A 'Question and Answer' window is open, showing a test question and a text input field. A 'Zoom Webinar Chat' window is also open, showing a message and a 'To: All panelists' field. The bottom toolbar contains icons for Audio Settings, Chat, Raise Hand, Q&A, and Leave. Annotations with arrows point to various elements: 'Click here to maximize your session view' points to the 'Enter Full Screen' button; 'Click here to adjust your audio settings' points to the Audio Settings icon; 'Click here to leave the session' points to the Leave button; and several text boxes explain the Q&A and Chat features.

Zoom Webinar

You are viewing David Terry's screen

View Options

Click here to maximize your session view

Enter Full Screen

TTC
Technology Transfer Centers
Funded by Substance Abuse and Mental Health Services Administration

Thank you for joining us today!

You will not be on video during today's session

Select a Speaker

- Speakers (Realtek(R) Audio)
- Same as System
- Test Speaker & Microphone...
- Leave Computer Audio
- Audio Settings...

Audio Settings

Click Here to adjust your audio settings

Chat

Raise Hand

Q&A

Click here to leave the session

Leave

Question and Answer

All questions (1) My questions (1)

You 07:35 AM

This is a test question!

You can switch between questions you've asked and those asked by others using these buttons.

You can use the Q&A feature to ask questions of the host and presenters. These questions can receive text or live responses. To begin asking a question use the field below. You can see a test question above.

Type your question here...

Zoom Webinar Chat

The chat feature will allow you to talk with other people in today's webinar.

The To field will tell you who will receive your message. Be mindful of who you are chatting to.

To: All panelists

Your text can only be seen by panelists

All attendees are muted. Today's session will be recorded.

Peer Support Approaches for Healthcare Providers

Session 1: Colleagues Involved in Reaching Colleagues through Listening and Empathy (CIRCLE)

Chantal Brazeau, MD

Manasa Ayyala, MD

Ping-Hsin Chen, PhD

Margaret Swarbrick, PhD

November 9, 2021



Northeast and Caribbean (HHS Region 2)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

About Us ...

The Northeast and Caribbean MHTTC received 5 years (2018 – 2023) of funding to:

- Enhance capacity of behavioral health workforce to deliver evidence-based and promising practices to individuals with mental illnesses.
- Address full continuum of services spanning mental illness prevention, treatment, and recovery supports.
- Train related workforces (police/first responders, primary care providers, vocational services, etc.) to provide effective services to people with mental illnesses.

Supplemental funding to:

- Support school teachers and staff to address student mental health
- Support healthcare providers in wellness and self-care activities



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Our funding comes from the Substance Abuse and Mental Health Services Administration (SAMHSA), which requires us to evaluate our services. We appreciate your honest, ANONYMOUS feedback about this event, which will provide information to SAMHSA, AND assist us in planning future meetings and programs.

Feedback about this training will assist us in developing future trainings that are relevant to your professional needs. Therefore, your feedback counts!

Video Recording Information

Please Note:

We will be recording this webinar and posting it to our website along with the presentation slides and any relevant resources.

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At the time of this presentation, Miriam Delphin-Rittmon served as Assistant Secretary for Mental Health and Substance Use at SAMHSA. The opinions expressed herein are the views of the speakers, 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.

This work is supported by grant H79SM081783 from the DHHS, SAMHSA.

Your Interactions With Us

Question and Answers

- Q & A will occur at the end of the call.
- Type your questions in the Q & A feature in Zoom located on the task bar (hover over task bar).
- Note: your question is visible to all participants.

Chat and Polls

- Throughout the webinar, we will be asking for your input.
- Use the Chat or Poll features in Zoom located on the task bar.
- You can control who can see your chat comments.

The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

STRENGTHS-BASED
AND HOPEFUL

INCLUSIVE AND
ACCEPTING OF
DIVERSE CULTURES,
GENDERS,
PERSPECTIVES,
AND EXPERIENCES

HEALING-CENTERED AND
TRAUMA-RESPONSIVE

INVITING TO INDIVIDUALS
PARTICIPATING IN THEIR
OWN JOURNEYS

PERSON-FIRST AND
FREE OF LABELS

NON-JUDGMENTAL AND
AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR
AND UNDERSTANDABLE

CONSISTENT WITH
OUR ACTIONS,
POLICIES, AND PRODUCTS

Our Presenters:



Chantal Brazeau, MD



Manasa Ayyala, MD



Ping-Hsin Chen, PhD



Margaret Swarbrick, PhD



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THE STATE UNIVERSITY
OF NEW JERSEY

Colleagues Involved in Reaching Colleagues through Listening and Empathy (CIRCLE)

Chantal Brazeau, MD
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November 9, 2021

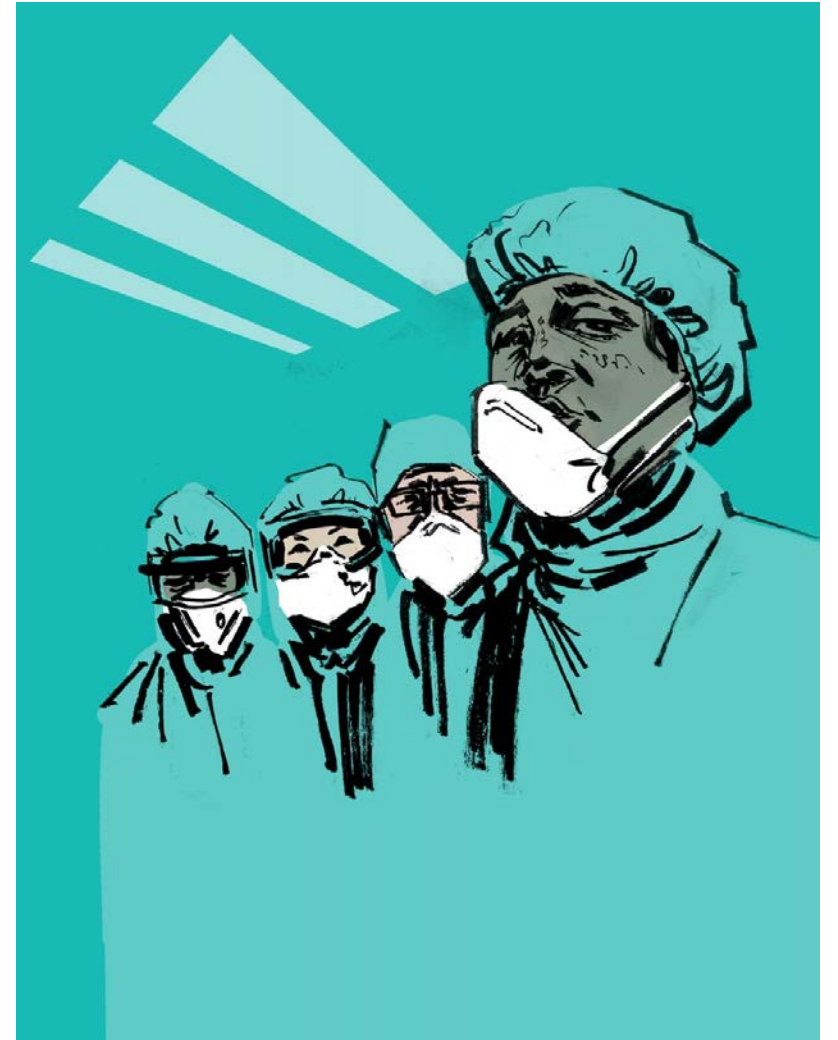
Objectives

Participants will...

- Describe the programmatic development of synchronous and asynchronous peer discussion groups using virtual meeting platforms and text messaging to support physicians during the COVID-19 pandemic.
- Describe the demographic characteristics of physicians who choose to participate in each type of groups and impact of these groups on professional fulfilment, meaning and interpersonal disengagement.
- Utilize our experience with virtual synchronous and asynchronous technology to develop a similar peer support program at their own institution

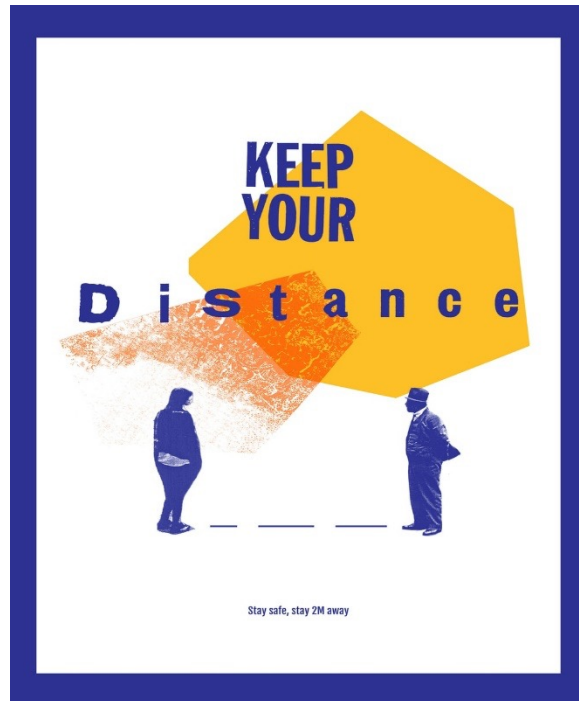
Physician Well-Being during COVID-19

- Emotional impact of COVID-19
- Increased vulnerability from prior burnout
- Increased future demands (health and financial impacts)
- Increased attention on well-being



Physician Well-Being during COVID-19

- How to conduct peer support while being physically distant?
- Focus groups: interest in virtual platforms and texting



CIRCLE

Peer Talk and Text Groups

Colleagues **I**nvolved in **R**eaching **C**olleagues through **L**istening and **E**mpathy

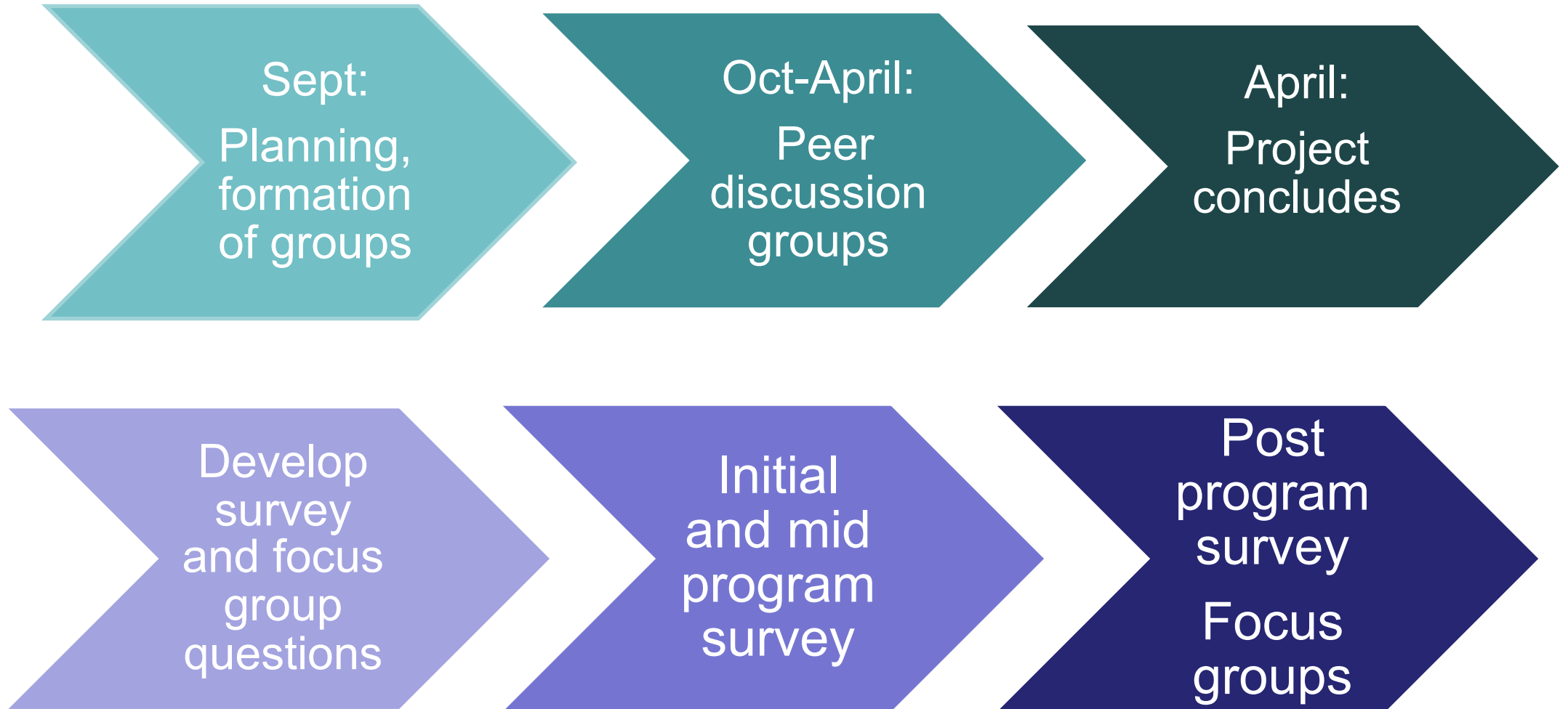
- Open enrollment: e-mail, recruitment video
- Presentations before leadership
- Self-selected group formation (with support)
- Longitudinal, twice monthly, 5-8 faculty, CME
- Choice:
 - TALK: synchronous face-to-face or virtual
 - TEXT: asynchronous on a secure platform





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Timeline




Introduction Video



Guidelines for Participating in a CIRCLE Group

- **Listen** generously/ **read texts** attentively, non-judgmentally
- Validate
- Share own experiences
- Do not attempt to “fix”
- All discussions are strictly confidential



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- It's OK not to respond right away
- Take time to reflect
- Be true to the topic AND allow flexibility
- Go where your thoughts lead you. Trust the group process...

Prompts in context...During Fall COVID Ramp-up

Integrating work and home responsibilities can be a challenge. This was true even before COVID-19. Now work-life integration seems even more challenging. We use the word integration instead of balance because balance implies a trade-off: gaining one side at the expense of the other. Integration is how to creatively consider both sides.

Questions:

What does good work-life integration look like or feel like for you?

Can you share a time when you feel you had very good work- life integration – what made it work well for you?

What pearl of wisdom can you give a colleague right now to help them find work-life integration during COVID-19?

Other Prompts

- Have you ever practiced mindfulness either as “mindful moments” or as formal meditation? If so, what was that like for you?
- Have you received appreciation from colleagues? If so, what was it like?
- What are current barriers to your professional fulfillment at work?
- What wellness strategies do you use in the face of difficult situations at work, including COVID-19?
- What is the part of your work that gives you joy?
- Share a fulfilling encounter you have had with a patient.
- How can we support each other when an error or adverse event occurs?



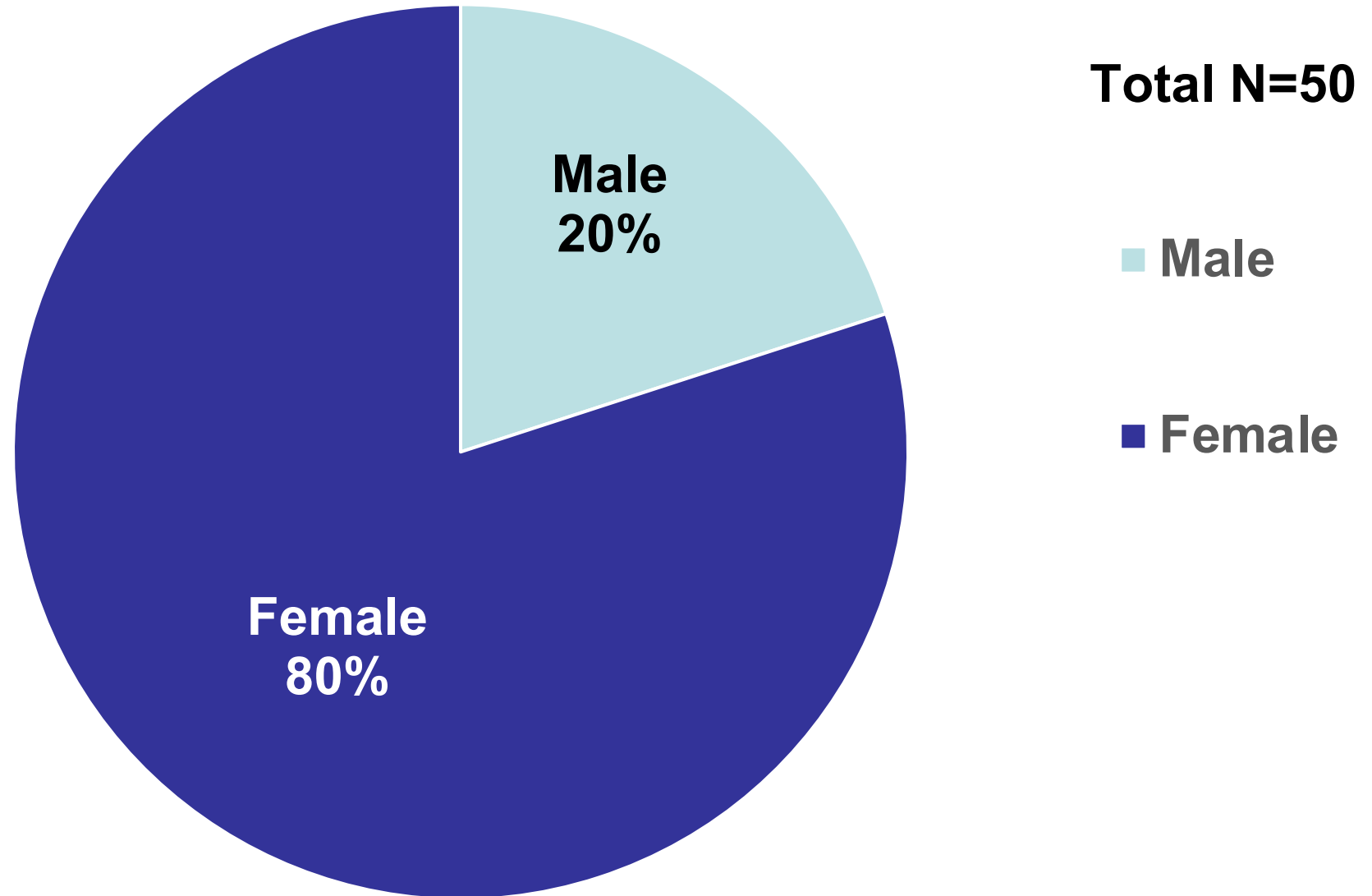
Conceptual model; M. Swarbrick, PhD

The Dilemma of the Evaluation Strategy

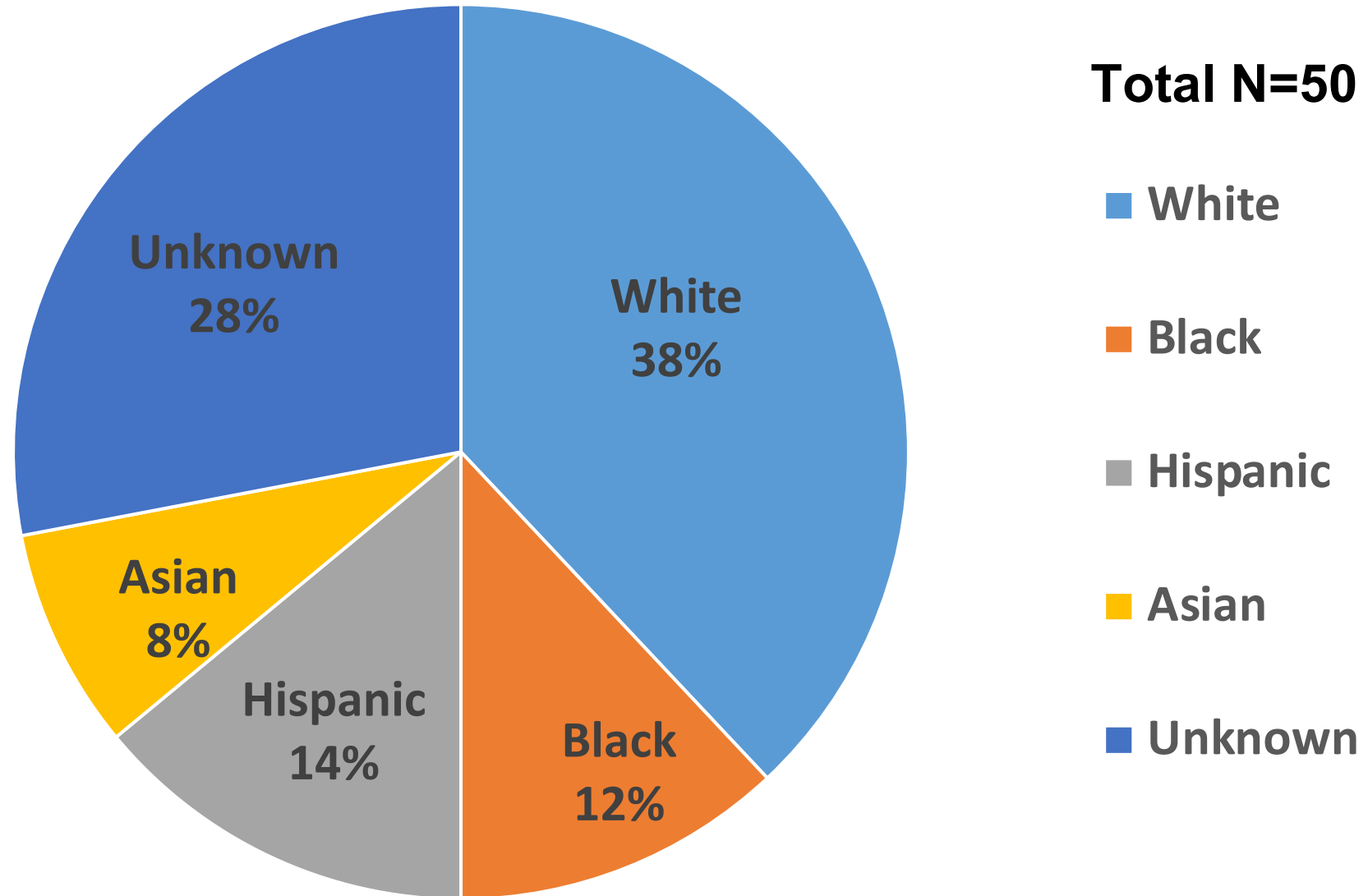
- Brevity
- Perception: A service vs. a “research project”
- **Utilization:** Who would choose what?
- **Three short anonymous surveys:**
 - Please create your anonymous identifier by indicating:
 - The last 2 letters of your undergraduate institution ____ ____
 - The last 2 digits of your cell phone ____ ____
 - The last 2 letters of your birth city ____ ____
- Professional Fulfillment Index: Interpersonal Disengagement, Professional Fulfillment, Meaning
- Demographics
- Effectiveness of talk or text



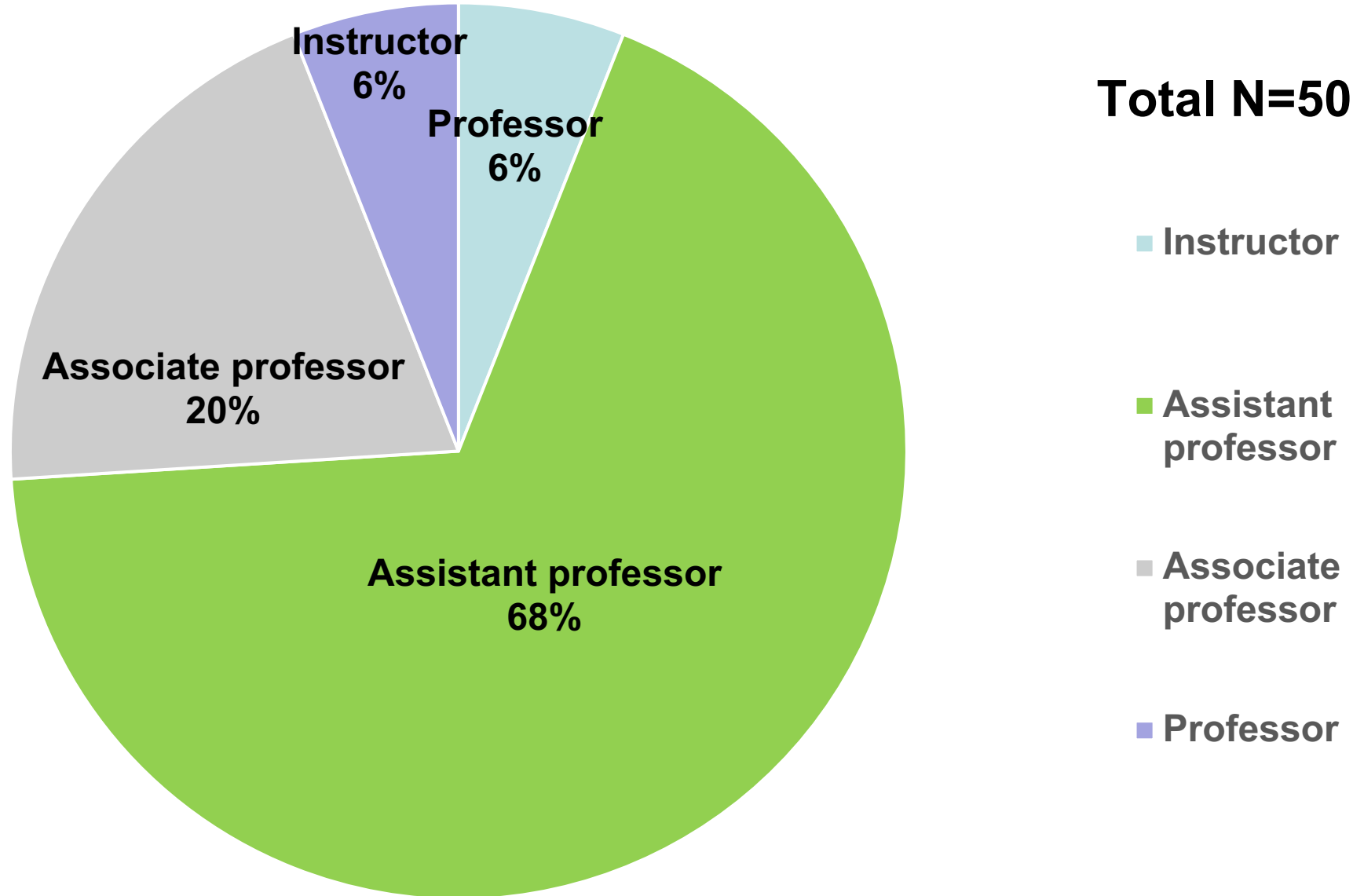
Gender of Individuals Participating in CIRCLE Groups



Race/ethnicity of Individuals Participating in CIRCLE Groups

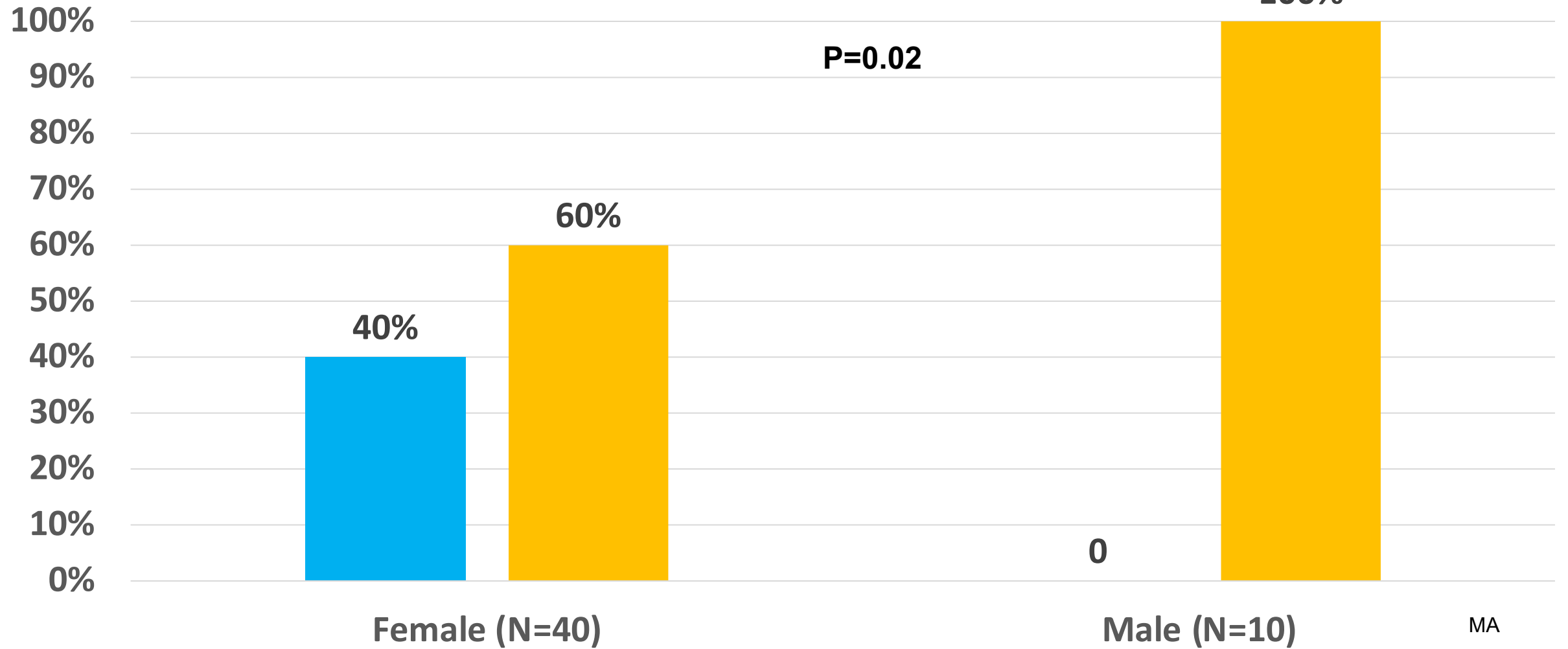


Academic Rank of Individuals Participating in CIRCLE Groups

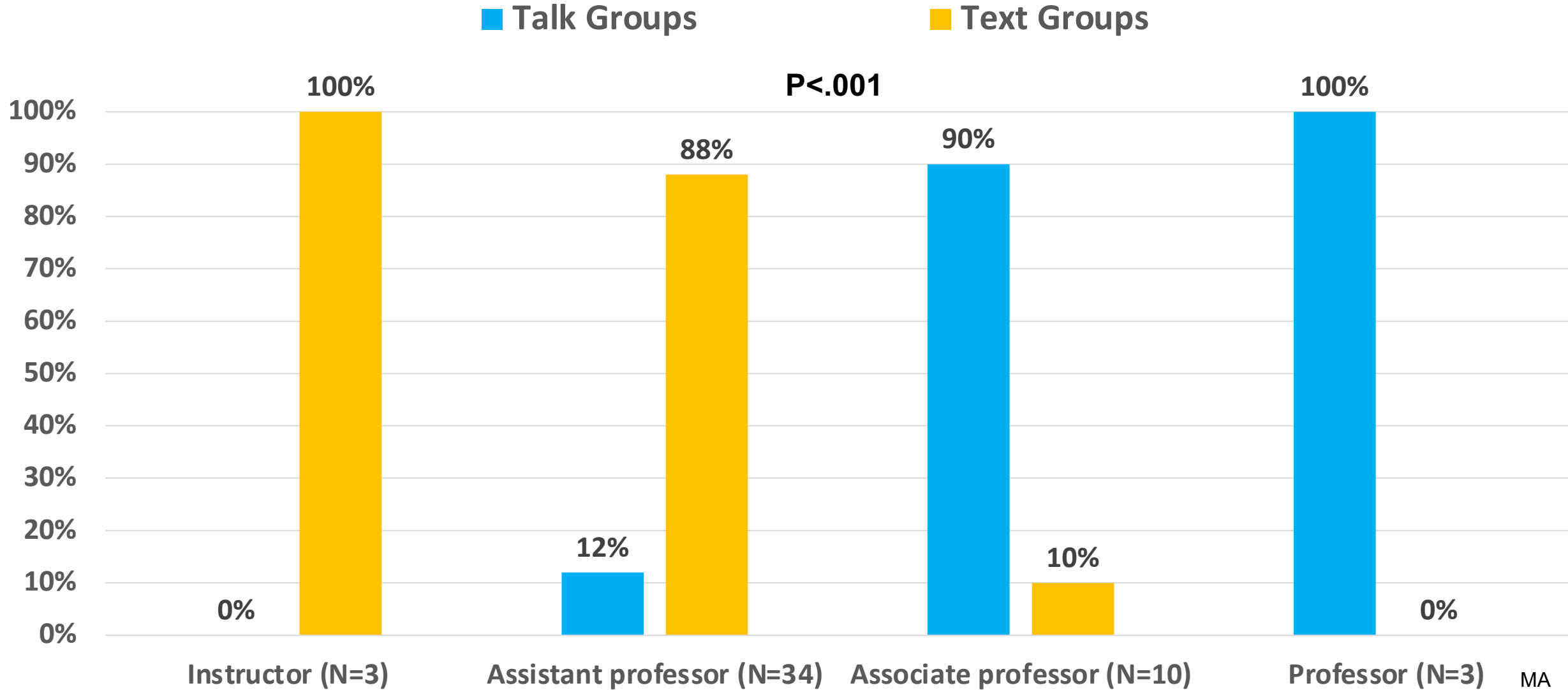


CIRCLE Group Mode by Gender

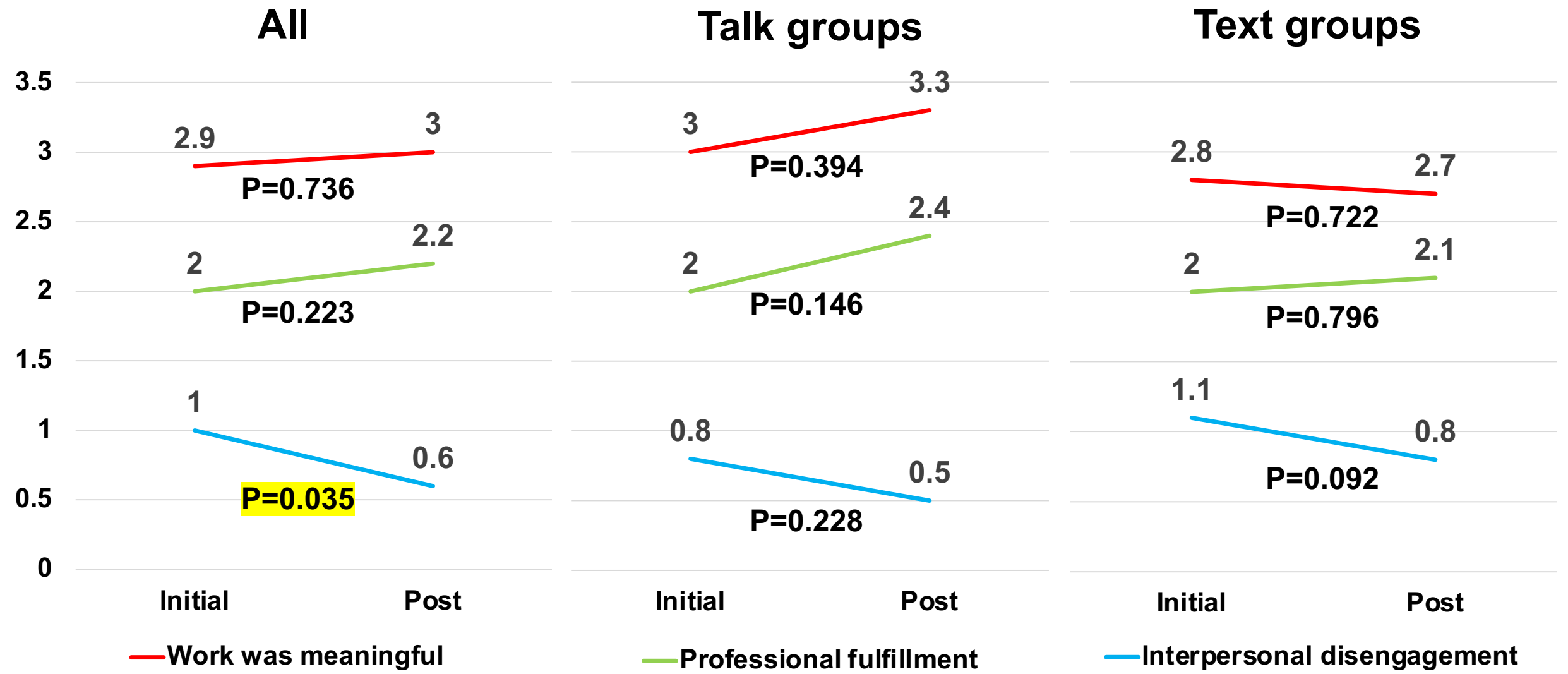
■ Talk Groups ■ Text Groups



CIRCLE Group Mode by Academic Rank

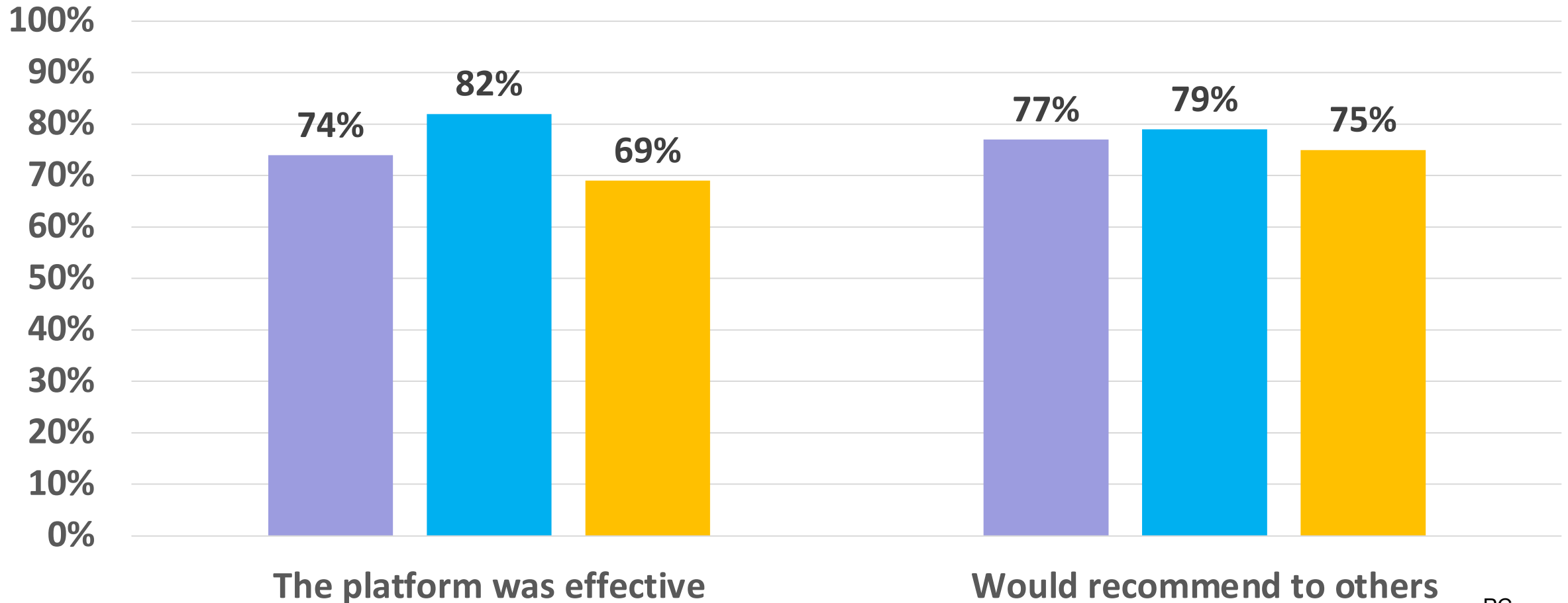


Changes between Initial and Post Surveys



Program evaluation (% Feeling Completely / Very True)

■ All ■ Talk Groups ■ Text Groups



Qualitative Evaluation

- Focus groups post-program explored:
 - meaningfulness
 - effect on general well-being
 - convenience
- For analysis, we used the Constant Comparative Method (*Olson JD et al, (2016) The Qualitative Report, 21(1), 26-42*) following techniques for multiple investigators.



Initial Focus Group Findings

- Most meaningful aspects of the groups: the deeper and more personal connection with peers, and realizing that they were not alone, especially during the isolation of COVID-19.
- The text format appealed to those who felt that their work schedule or family responsibilities precluded them from finding a unique time for all to meet.
- The virtual synchronous format appealed to those who preferred an interactive conversation in real-time that was also flexible.

Preliminary Theme: Deeper / Improved Connections during Physical Isolation

Representative Quotes:

- *We are much more closer to each other now that we can sometimes sit and just share our problems and talk to each other, if need be (talk group participant)*
- *It was really just about us and supporting one another, so I think that was the most meaningful part of it (talk group participant)*
- *It actually felt like something you look forward to in terms of just trying to connect with each other and see, you know, how everyone was doing (text group participant)*

Preliminary Theme: Realizing not alone

Representative Quotes:

- *I felt like Oh, my goodness, am I the only one really having a hard time (talk group participant)*
- *it was the shared experience it was as if I was no longer an island, I had people that were experiencing exactly as if they took the words right out of my own head when they're typing so I learned a lot (text group participant)*
- *It was so helpful almost therapeutic at times (talk group participant)*

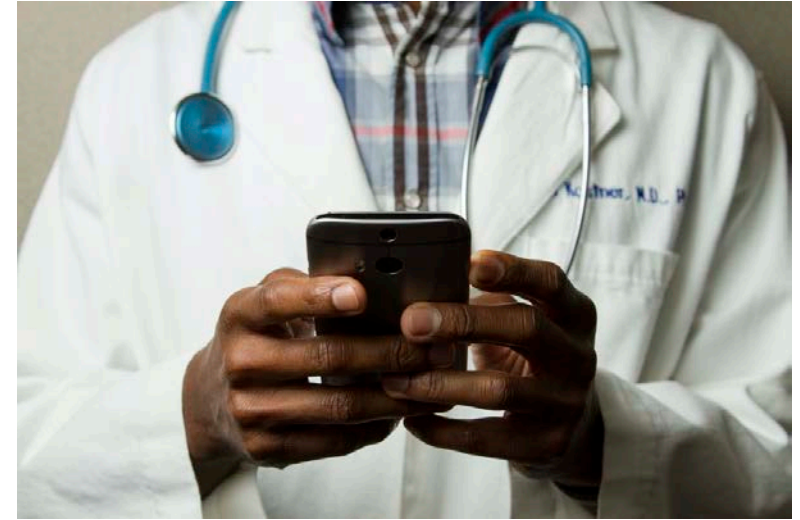
Preliminary Theme: Options of synchronous/asynchronous platform helpful to improve engagement

Representative Quotes:

- *You could just watch it whenever you [had] the free time, see what other people say and [at] your own time, be able to type in your own response (text group participant)*
- *It helped me a lot, because I tend to have my schedule packed during the day with rounds patient care and everything so being able to unwind in the evening with that made it better fun. (text group participant)*

Programmatic Considerations

- Meeting of CIRCLE groups leaders
- Discovering new information about old-time colleagues
- Having a “secondary” leader
- Change from talk to text and from text to talk
- A hybrid group
- Keeping the group meetings even if overwhelmed
- One “less connected” group
- Sharing pictures virtually or by text
- Other topics- humor



Key Takeaway Points and Future Directions

- Peer discussion groups conducted synchronously with web-based platforms and asynchronously using text-based platforms are a viable alternative to face-to-face groups
- Interpersonal disengagement was significantly reduced after participation in the CIRCLE Text/Talk Groups
- Most meaningful aspects of the groups: the deeper and more personal connection with peers, and realizing that they were not alone
- We are continuing the groups with residents and plan to engage more health professionals

Our Team Members

- **Chantal Brazeau, MD:** Professor of Psychiatry and Family Medicine, NJMS, Assistant Dean for Faculty Vitality NJMS and RWJMS, Chief Wellness Officer, RBHS. Project leader.
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Question and Answer



Evaluation Information

The MHTTC Network is funded through SAMHSA to provide this training. As part of receiving this funding we are required to submit data related to the quality of this event.

At the end of today's training please take a moment to complete a **brief** survey about today's training.



We Want to Hear From You!

- Guide our educational, training, and technical assistance efforts
- Tell us your training needs
- Responses are anonymous
- Use the QR code or link in follow-up email



TRAINING NEEDS
ASSESSMENT

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