

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' dropdown. 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

Enter Full Screen

Click here to maximize your session view

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 2: ONE 2 ONE 2 CARE: Colleagues Aligning to Respond with Empathy

Chantal Brazeau, MD

Manasa Ayyala, MD

Ping-Hsin Chen, PhD

Margaret Swarbrick, PhD

November 16, 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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<https://bit.ly/3IU0xF4>

We Want Your Feedback!

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



RUTGERS
THE STATE UNIVERSITY
OF NEW JERSEY

ONE 2 ONE 2 CARE
Colleagues Aligning to Respond with
Empathy

November 16, 2021

ONE 2 ONE 2 CARE Team

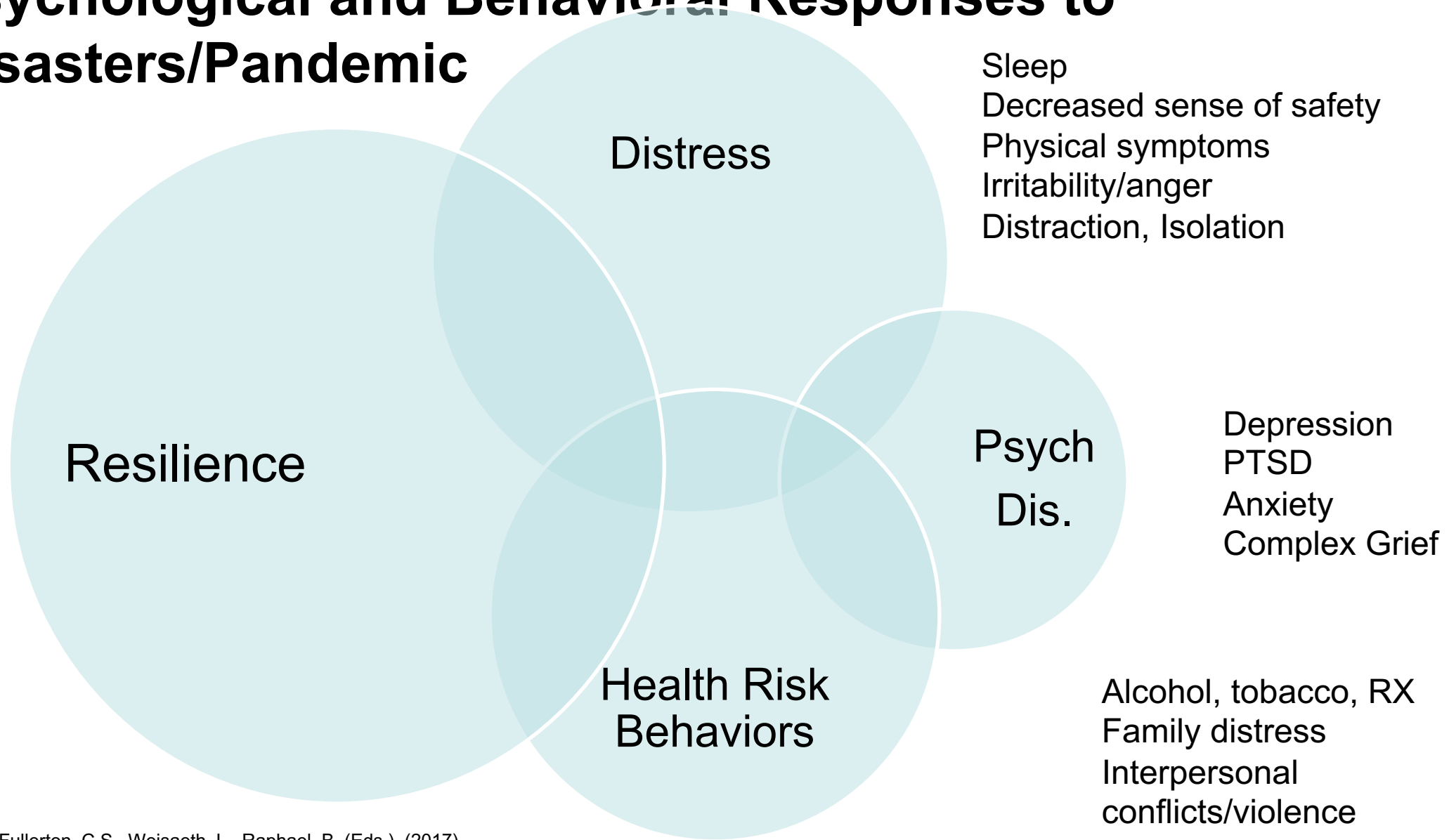
Chantal Brazeau, MD, Assistant Dean for Faculty Vitality, NJMS and RWJMS , Chief Wellness Officer, RBHS

Peggy Swarbrick, PhD, FAOTA, Research Professor and Associate Director, Center of Alcohol and Substance Use

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Psychological and Behavioral Responses to Disasters/Pandemic



Need for the Peer Support Program?

Emotional impact of
COVID-19

Burnout even prior
to the pandemic

Negative impact on
clinical care and
university missions

Health and financial
impacts will
increase demands
of all faculty

Physicians are self-
reliant but respond
well to peers

Burnout Existed before COVID-19

- **Emotional exhaustion:** tired, nothing left to give, no pleasure
lost energy
- **Depersonalization:** cynicism, going through the motions, treating diseases instead of people with diseases
lost enthusiasm
- **Decreased sense of personal accomplishment:** never good enough, not worthwhile
lost confidence



Goals for ONE 2 ONE 2 CARE Peer Support Program

Develop a worksite evidence-based, peer support program for physicians and faculty to support their well-being and their ability to provide excellent patient-centered care and fulfill their research and education missions during this crisis and beyond

Develop a sense of community within our workplace culture through peer support approaches

Improve participant well-being

Provide proof-of-concept for future funding for other RBHS members

Creating a Culture of Peer Support

Even short connections can be powerful

Create opportunities- place and spaces where people can share and support one another

Moving from individualized management of stressors to a systems view (like medical errors)

Move from blame to support

ONE 2 ONE 2 CARE

Colleagues Aligning to Respond with Empathy



One or two faculty/physicians (peer-supporters) per department are trained in peer support techniques to provide support on-site at work and one-on-one support for faculty/physicians who meet with them after emotionally difficult situations. CME approved.

ONE 2 ONE 2 CARE

Colleagues Aligning to Respond with Empathy



Chair nominations, invitations



31 faculty/physicians peer-supporters



Trained in peer support techniques



One-on-one support on-the-spot, on-site or scheduled



For colleagues after challenging work situations



Monthly meetings and CME for peer supporters

Training Outline

Introductions

Mental health
consequences of
natural disasters,
burnout

Peer-Supporter
roles,
competencies
and boundaries

Peer Support
Process

When to refer to
a mental health
professional

Practice sessions
(role-play) with
likely scenarios

Peer Support:
Define Role and
Competencies

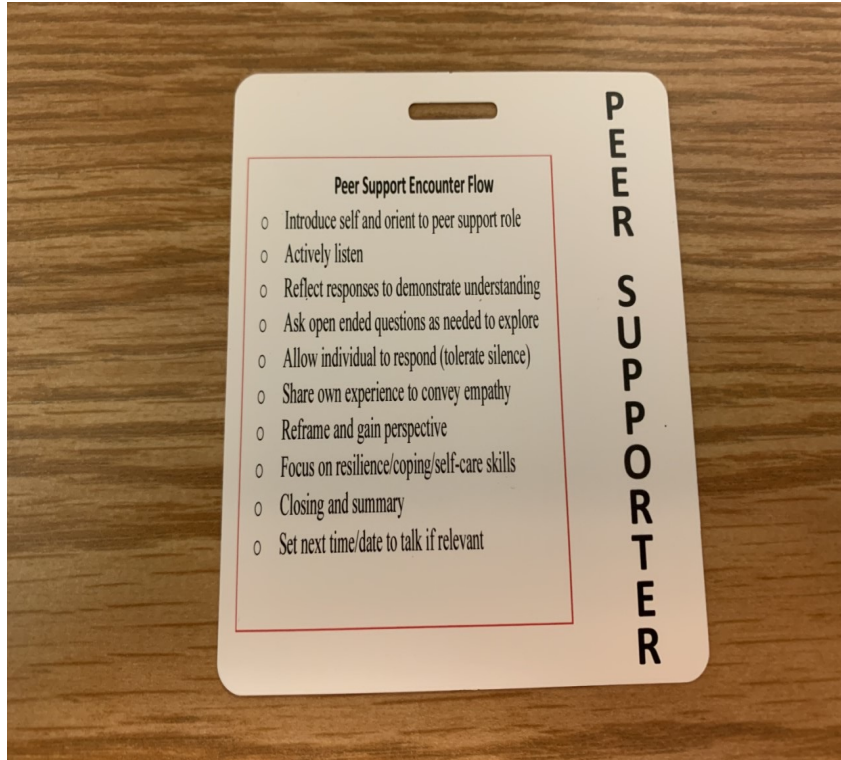
Orienting/Opening

Connection -
Listening &
Reflecting

Reframing &
Gaining
Perspective

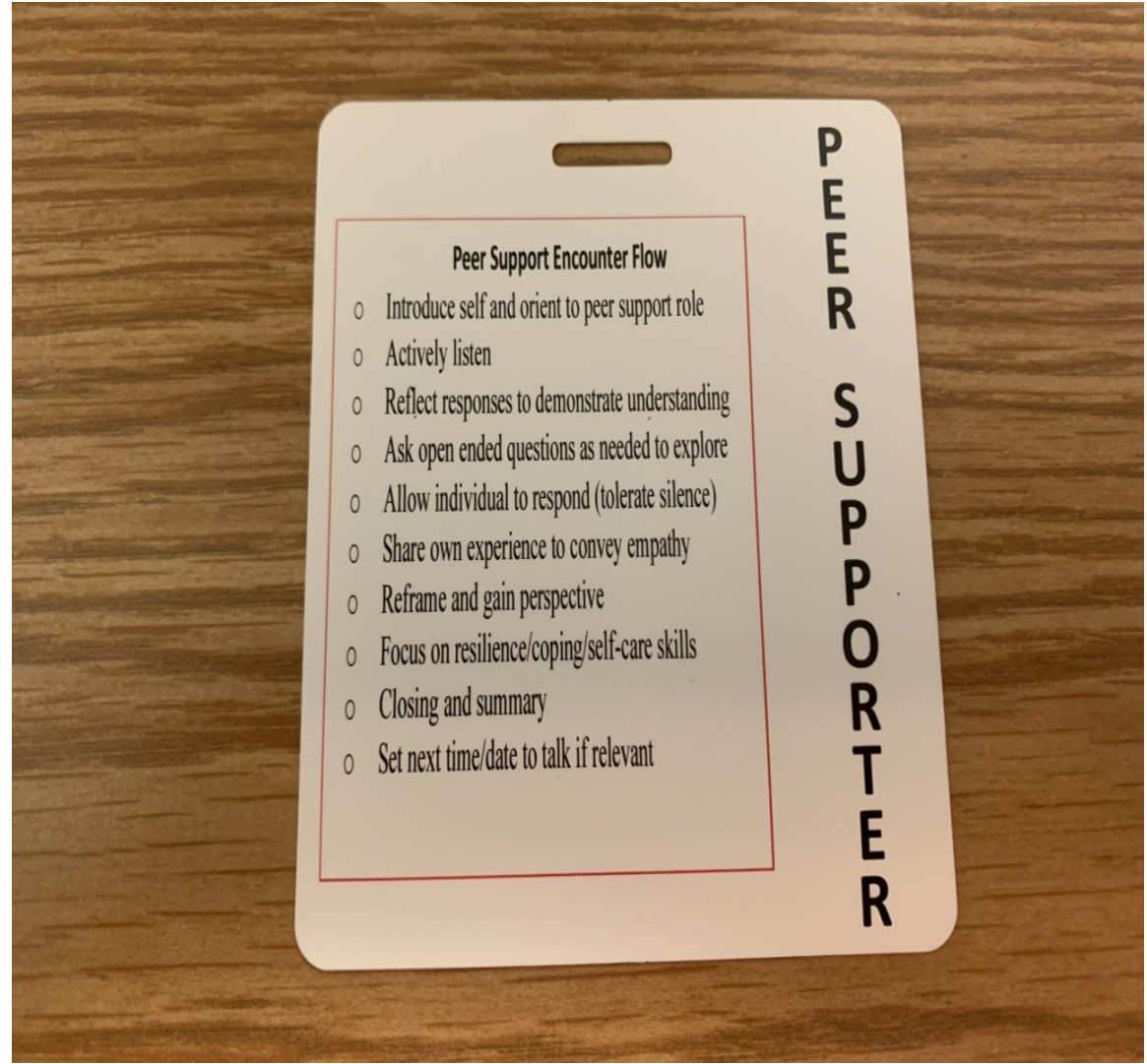
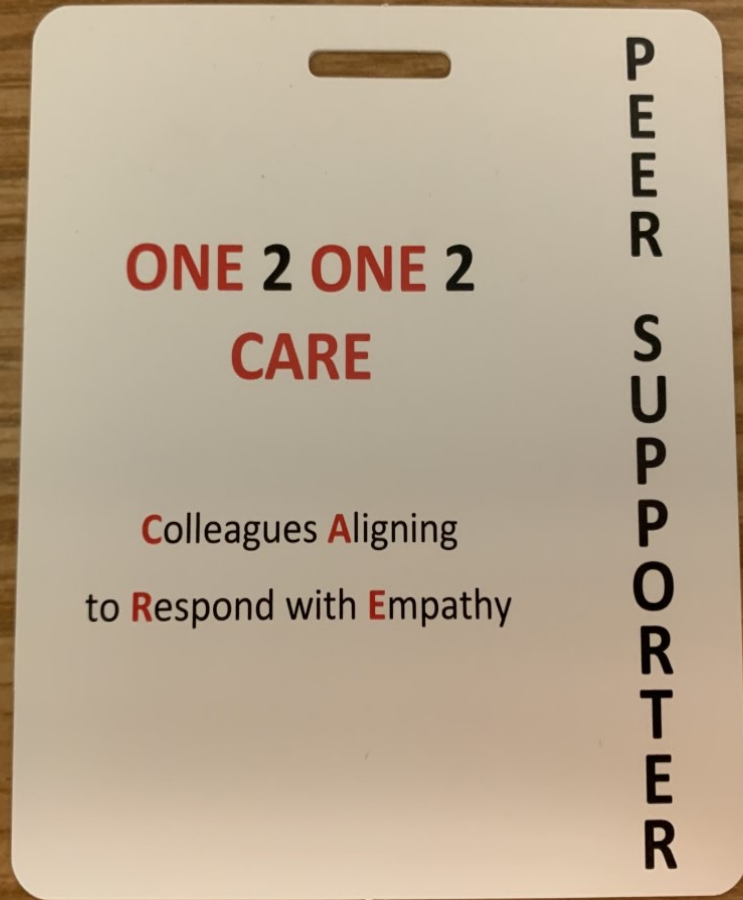
Focus on
Resilience and
Coping

Closing:
Summarizing
and Resources



Peer Support Checklist

Checklist Skill	Completed/Observed
Introduced self and oriented to peer support role	<input type="checkbox"/>
Actively listened	<input type="checkbox"/>
Reflected responses to demonstrate understanding	<input type="checkbox"/>
Asked open ended questions as needed to explore	<input type="checkbox"/>
Allowed individual to respond (tolerated silence)	<input type="checkbox"/>
Shared own experiences to convey empathy	<input type="checkbox"/>
Reframed & Gained Perspective	<input type="checkbox"/>
Focus on Resilience/ Self care/ Elicit peer's personal coping strategies	<input type="checkbox"/>
Closing and Summary	<input type="checkbox"/>
Set next time/date to talk if relevant	<input type="checkbox"/>



The Flow of a Peer –Support Encounter

CONNECTION



Be present

Eliminate distractions (close computer tabs, silence cell phone, etc.)

Orient

Lead with strengths

Share narrative when relevant

Communication Skills: Active Listening, Reflective Responding, Building trust to engage

Blocks to Listening

Distraction

Comparing

Judging

Mind-reading

Identifying

Advising

Placating

Filtering

Rehearsing

Derailing

Practice #1: At the work-site

- **Trio:** Peer-supporter, peer, observer
- *Choose ONE of the following scenarios:*
 - You see a colleague experiencing a hectic clinical day with multiple emergencies and bad patient outcomes (e.g. several deaths during COVID-19, a long-term patient dies)
 - You witness a colleague receiving yet again news that a grant has not been funded
- **Peer supporter:** Practice orienting and peer-support skills
- **Peer:** Respond as you would if you were in that situation
- **Observer:** Make notes using the checklist skill
- 10 minutes
- Debrief using checklist

Recruitment & Announcements

- List-serve announcements
- Faculty Wellness Champions
- Chairs:
 - Nominated potential peer supporters
 - Encouraged participation in peer groups
- Presentation before executive leadership- reminders
- Presentation of peer-supporters in list-serve and newsletters



RUTGERS

Robert Wood Johnson
Medical School

RUTGERS

New Jersey Medical School

One 2 One 2 CARE Peer Supporters: Colleagues Aligning to Respond with Empathy



I am pleased to introduce you to faculty who have agreed to be peer-supporters for colleagues at **New Jersey Medical School** and **Robert Wood Johnson Medical School**.

This group of faculty has received training in peer support techniques and are available to colleagues at the work-site or during scheduled times to provide support during challenging work situations.

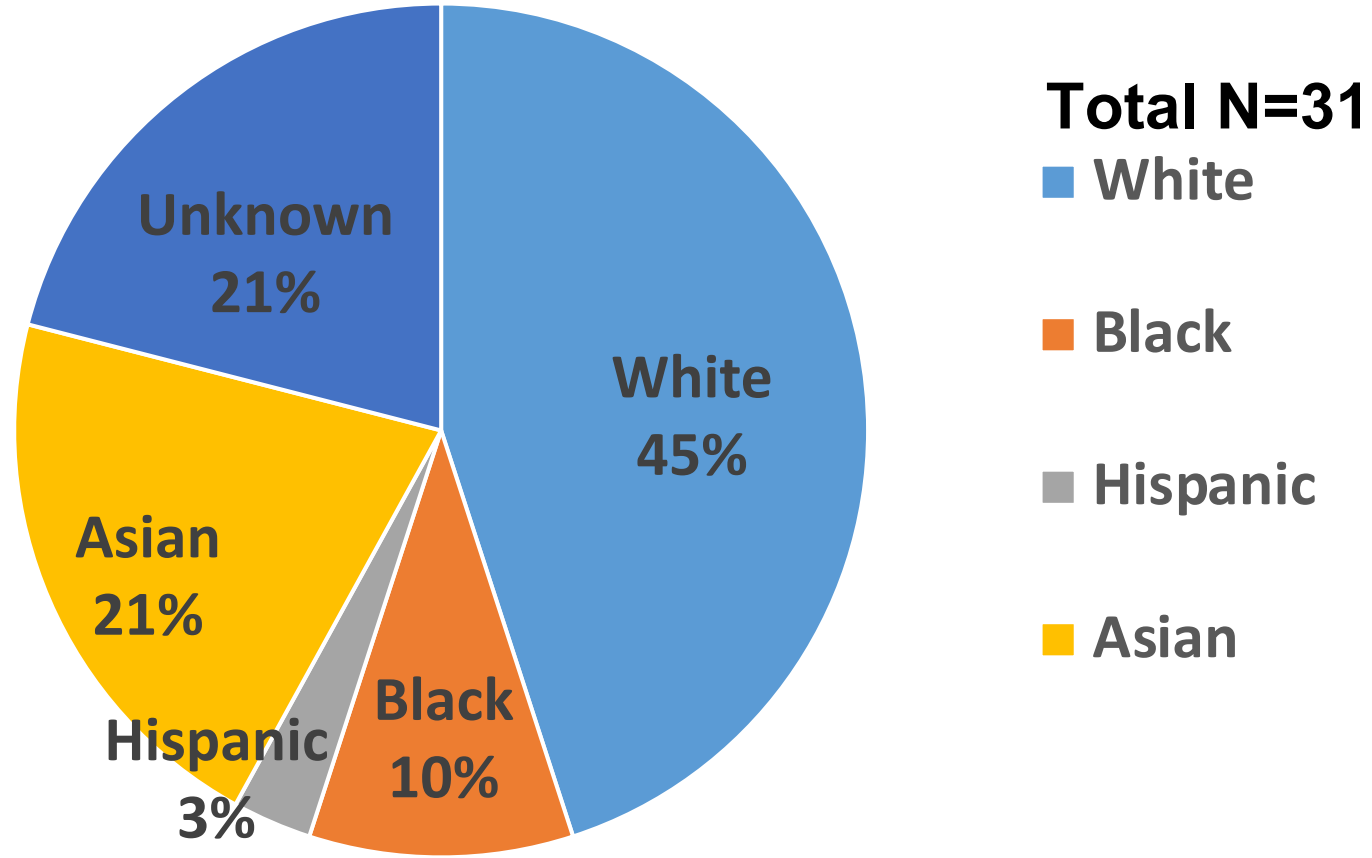
Funding to start the program, called **ONE 2 ONE 2 CARE: Colleagues Aligning to Respond with Empathy**, was provided due to the stresses related to COVID-19. We plan to continue beyond the pandemic because supporting each other as colleagues through the challenges of day-to-day work is an important part of building a fulfilling work community.

Please do not hesitate to contact me at chantal.brazeau@rutgers.edu to learn about planning a confidential conversation with a peer-supporter colleague.

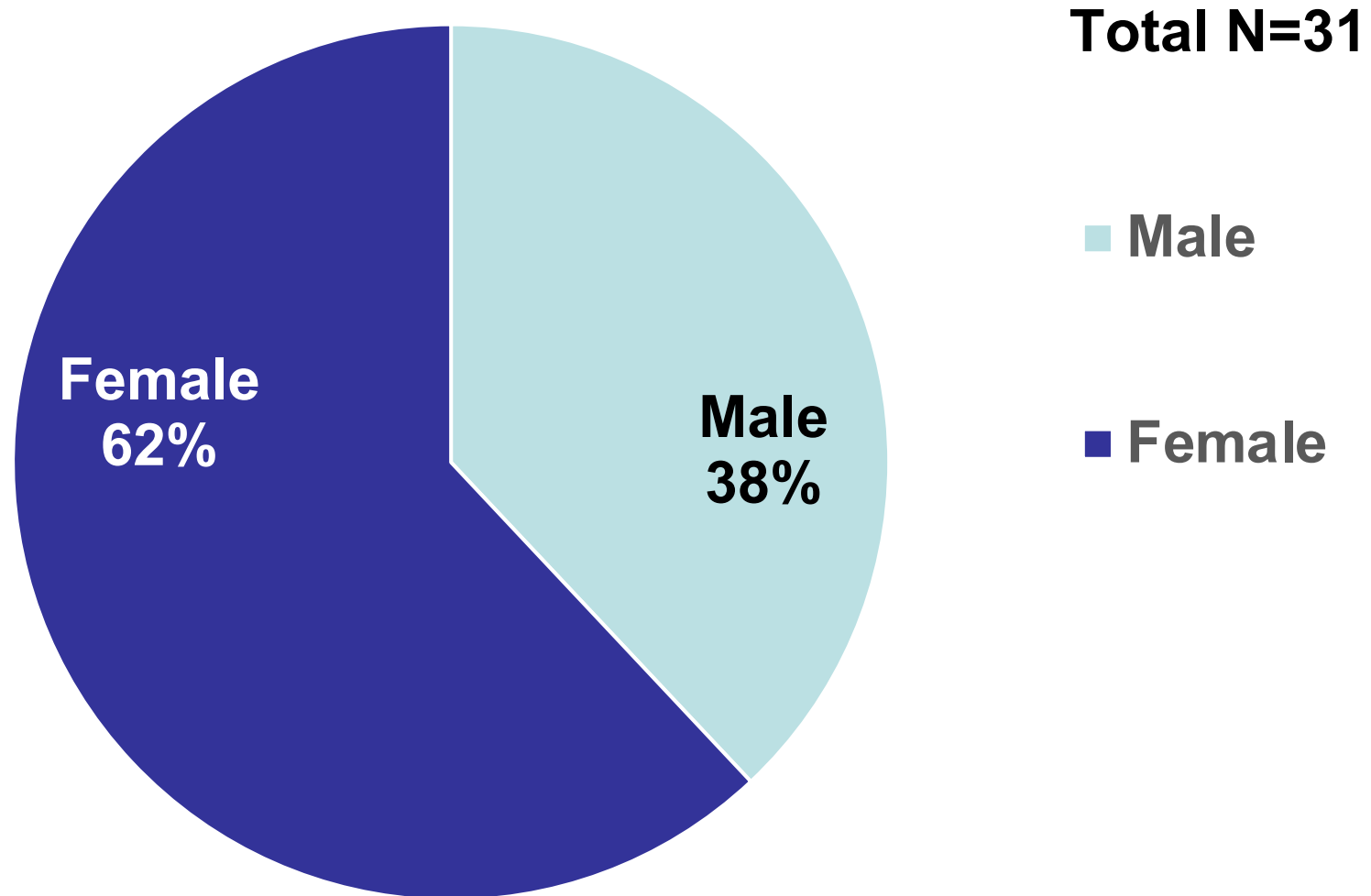
Please join me in welcoming and thanking our new peer-supporter faculty listed below for their service!

Chantal Brazeau, MD

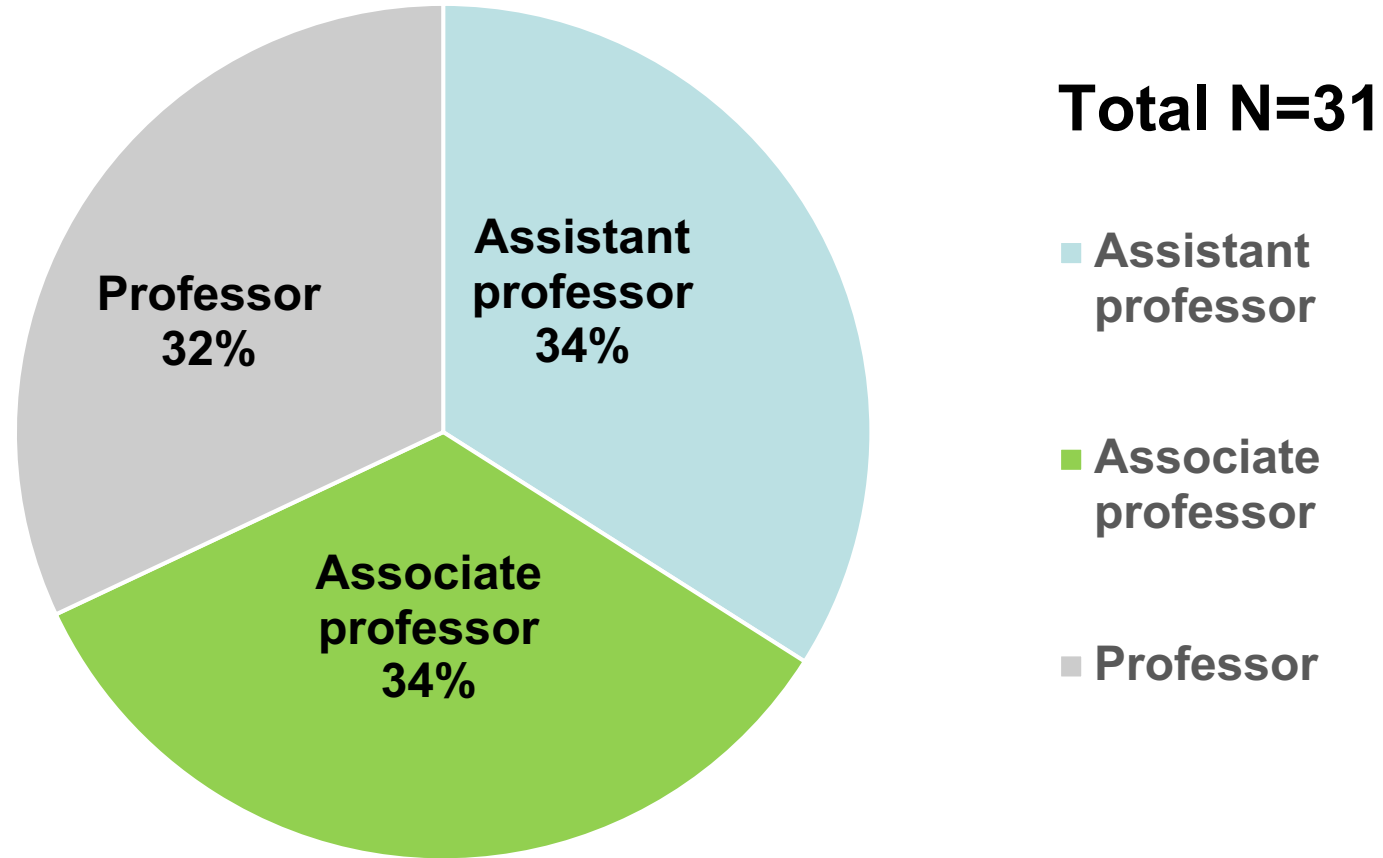
Peer Supporter Race/ethnicity



Peer Supporter Gender



Academic Rank of Peer Supporters



Survey Data: At the final evaluation (52% RR)

75% reported very or completely true that the training helped them feel prepared to address the needs of colleagues.



50% of the peer-supporters reported very or completely true that they felt able to offer important support to enhance fellow colleagues' well-being.



94% reported “very or completely true” that “During peer-supporter meetings, I was provided adequate support to perform my role as a peer-supporter”.

Our Accomplishments: Numbers and People Supported in first 6 months

32 reported encounters where Peer Support Skills were used

All but 2 were informal or “on-the-spot”

Most encounters were with faculty colleagues: 24

Encounters with individuals other than faculty:

Medical or graduate students : 3

Healthcare team members: 3

Patients: 2

Common Topics Discussed by those supported

Altercations or interpersonal conflicts

Frustrations about work

Challenging patient outcomes

Personal issues affecting work (e.g. health)

Racially based traumatic encounter

Burnout

Lessons Learned: Recurrent Focus Group Themes

Importance of active listening

It can be difficult to resist the temptation to “fix”

Re-framing and showing other perspectives

Reaching out to people who don’t “look like themselves”

Asking the person about their own way of coping not used as much

Representative Quotes

“I think what was really great was the skill set that we now had access to that it was just it was just making us aware of different ways to reframe things”

“For me most challenging was jumping to a quick [“fix”...] not listening and [...] through this peer support training, [...] I now [...] learned [...] to listen more and also about reframing. And I think that that's been really helpful for me.”

“It's meaningful to feel like [...] there's a chance to help in a different way that we're not used to, and in a more official kind of capacity and more just that feeling that may be able to contribute in a different way.”

“I think it comes in handy with [...] all levels of people that we work with.”

“I think that's part of the grooming, that I wanted for myself and I think that it actually helped tremendously in the interpersonal communication skills [...] how to communicate better [in a] more supportive way.”

“People just stated that they [...] were glad they we did this, [...] when you had a chance to talk to someone about it.”

Practical Strategies/Resources



Be clear about who is your target population and their need and why

Who
Why and How
How
Gather feedback and involvement



Be sure to have leadership /departmental Support

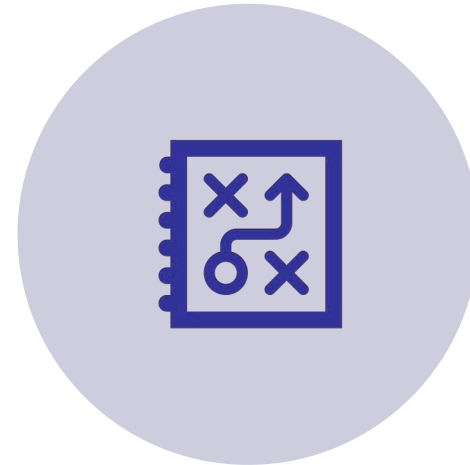


Think through all the supports needed to implement (HR and adm support, virtual technology, etc)

Practical Strategies/Resources



**CONSIDER MARKETING
STRATEGIES/TOOLS**



**ANTICIPATE POTENTIAL
OBSTACLES/PLAN TO
OVERCOME**

Practical Strategies



Create target outcomes and create simple systems to gather and track data and information



Open methods of communication and provide feedback to participants, funders and stakeholders about progress successes and challenges

Questions?

Feedback?



Contact Information

- **Chantal Brazeau, MD**, Assistant Dean for Faculty Vitality, NJMS and RWJMS , Chief Wellness Officer, RBHS
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and

**Support by Rutgers New Jersey Medical School, Robert Wood
Johnson Medical School and University Behavioral Health Care**



*“Empathy is...
communicating
that incredibly
healing message of,
‘You’re not alone.’”*

-Brené Brown

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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.



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