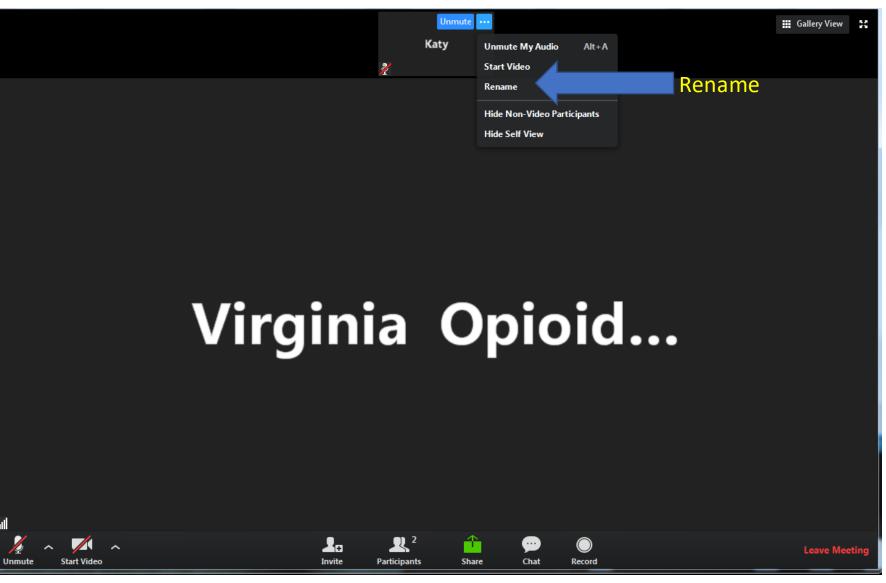


Virginia Opioid Addiction ECHO* Clinic February 4, 2022

*ECHO: Extension of Community Healthcare Outcomes



Helpful Reminders

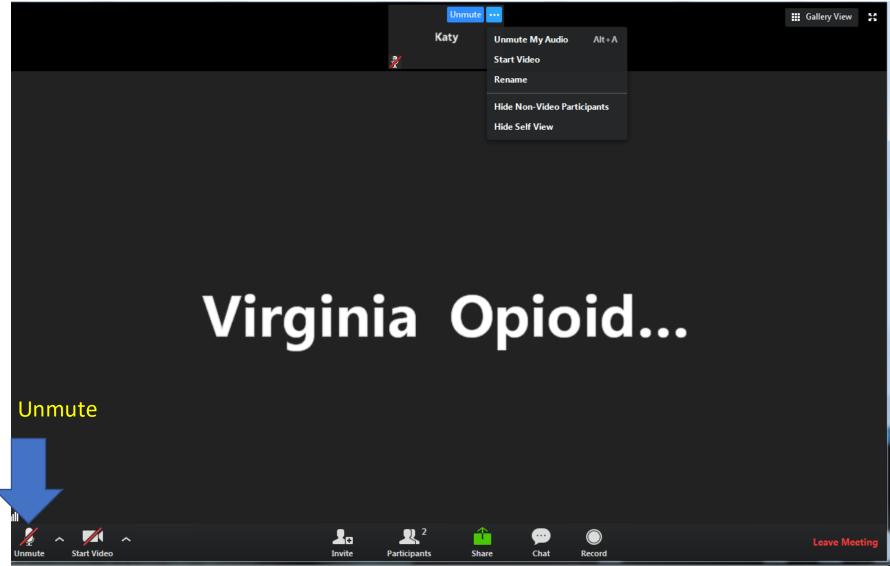




 Rename your Zoom screen, with your name and organization



Helpful Reminders

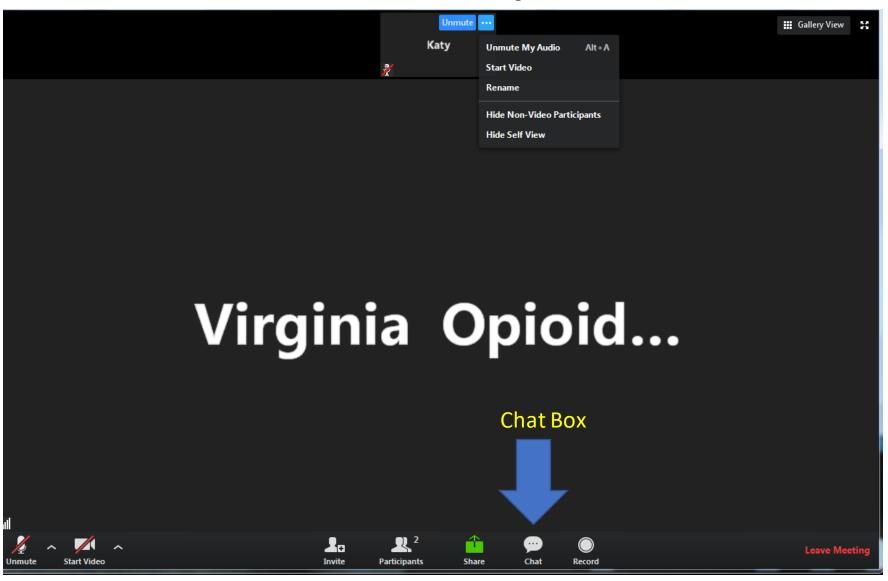




- You are all on mute please unmute to talk
- If joining by telephone audio only, *6 to mute and unmute



Helpful Reminders





- Please type your full name and organization into the chat box
- Use the chat function to speak with IT or ask questions



VCU Opioid Addiction ECHO Clinics











- Bi-Weekly 1 hour tele-ECHO Clinics
- Every tele-ECHO clinic includes a 30 minute didactic presentation followed by case discussions
- Didactic presentations are developed and delivered by inter-professional experts
- Website Link: <u>www.vcuhealth.org/echo</u>



Hub and Participant Introductions



VCU Team				
Clinical Director	Gerard Moeller, MD			
Administrative Medical Director ECHO Hub	Vimal Mishra, MD, MMCi			
Clinical Experts	Lori Keyser-Marcus, PhD Courtney Holmes, PhD Albert Arias, MD Salim Zulfiqar, MD Megan Lemay, MD Katie Adams, PharmD			
Didactic Presentation	Amy Ressler, LCSW			
Program Manager	Bhakti Dave, MPH			
Acute Telehealth Manager	Tamera Barnes, MD			
IT Support	Vladimir Lavrentyev, MBA			

- Name
- Organization

Reminder: Mute and Unmute screen to talk

*6 for phone audio
Use chat function for Introduction



What to Expect



- I. Didactic Presentation
 - I. Amy Ressler, LCSW
- II. Case presentations
 - I. Case 1
 - I. Case summary
 - II. Clarifying questions
 - III. Recommendations
- III. Closing and questions



Lets get started!
Didactic Presentation







Disclosures

Amy Ressler, LCSW has no financial conflicts of interest to disclose.

There is no commercial or in-kind support for this activity.



Who, Why, How and What of HPMP

Health Practitioners' Monitoring Program

Learning objectives:

- Who is HPMP
- What is it HPMP does
- Benefits of HPMP

Who is HPMP

 A Department of Health Professions' (DHP) Program contracted with the VCUHS

 HPMP offers an alternative to disciplinary action for qualified healthcare practitioners with a substance use diagnosis, a mental health diagnosis, or a physical diagnosis that may alter their ability to practice their profession safely.

Who we monitor

2019 data

Substance use disorder (86.5%)

Alcohol 40.35%

Opioids 30.7%

Mental Health Diagnosis (10.5%)

- 62% Nursing
- 24% Medicine
- 4% each Dentistry and Pharmacy
- 1% each Audiology/Speech Language, Counseling, LTC, Optometry, PT, Social Work, Veterinary Medicine

Why we monitor

- Recovery support
- Safe return to productive practice
- Disciplinary action may be avoided or lessened
- Regarding success rates, below is a take of the different Boards' professionals who complete the program (2019 data):
 - 40.65% of nursing clients
 - 55.68% of medicine clients
 - 48.89% of pharmacy clients
 - 52.71% of dentistry clients
 - 46.67% behavioral health boards (counseling, social work and psychology) clients
 - 55.56% veterinary clients
 - 62.50% physical therapy clients
 - 50% other boards (audiology & speech language pathology, funeral directors & embalmers, long-term care administrators, & optometry) clients

How clients are referred

Before a DHP complaint:

Voluntary

Employer

Treatment Provider

Upon receipt of a complaint:

DHP Enforcement Division

Board Order

How HPMP monitors

Provides ongoing monitoring of compliance with program requirements through

Treatment referral and monitoring

A dedicated case manager

Toxicology monitoring

Approval to return to practice

Work site monitoring



Questions?









• 12:35-12:55 [20 min]

• 5 min: Presentation

• 2 min: Clarifying questions- Spokes

• 2 min: Clarifying questions – Hub

• 2 min: Recommendations – Spokes

• 2 min: Recommendations – Hub

• 5 min: Summary - Hub

Reminder: Mute and Unmute to talk

*6 for phone audio

Use chat function for questions



Main Question

How to manage patients in a program with cannabis use disorder.



Patient Demographics

Pt is a 31yo white male. Pt is unemployed having a high school education. Pt. lives with his mother.

Background Information

Pt. engaged in psychotherapy in 2018. At that time his presenting problem was severe anxiety, not wanting to leave home or interact with others. He reported daily panic attacks and 'flipping out' for no reason. He was ruminating about his father's death (crushed working under a car). He reported smoking cannabis daily from age 15yo. When wasn't high he reported being irritable and angry. Had a back injury from working in a wearhouse and was on workman's comp. Diagnosis was MDD, GAD and Cannabis use disorder. As an adult, he'd had 5 jobs not keeping it for longer than a year. He admitted putting himself in situations to be fired. Pt. had had just one girl friend in high school and no subsequent relationships.

in October 2019, pt admitted using opioid pills. He had been slowly sneaking them from him mother who'd stored them; she'd had a cancer dx but recovered. He had gone through all of her pills. Added OUD to his DX.



Previous Interventions

From 2018 he was treated with individual therapy and referred to psychiatry. Pt. was one of our first patients in our office based opioid treatment program in 11/2019. He stopped opioid use. He had infrequent relapses, primarily when he would visit another state where he'd grown up and visited old friends who were actively using. Once he relapsed to opiates because he could not get any 'weed' and so he used heroin.

He credits group therapy for developing improved social skills and confidence. We tried repeated to provide support and encouragement to seek employment and independence. His depression and chronic back pain have improved with duloxetine (and the buprenophine). We've kept him in our 'red' weekly phase of treatment b/c of his cannabis use disorder and limited functioning. We tried following a mode of treatment recommend by UVA, of decreasing buprenophine gradually, when cannabis use did not decline. This was ineffective. Pt. just got angry. In that time cannabis became legal, so we decided that it didn't make sense to remove the buprenophine it would put him more at risk so we abandoned that. He has responded a bit to peer support.

He has recently discovered 'wax' which seems to provide him a more intense high. On 3 occasions he has been so high that he has been socially inappropriate in group and with the medical provider.

Plans for Future Treatment/ Patient Goals

The patient says that he wants to get a job and his own place. He has always said he had modest goals to have a family.

We are not really sure what more to do; we keep using MI. He remains highly ambivalent about reducing his use of cannabis. He certainly does not want to relapse back to use of opiates. He can say that he should stop smoking that he should get a job that he wants to be independent. But he takes no action. He comes weekly to treatment and has good communication with our team.

Reminder: Main Question

How to manage patients in a program with cannabis use disorder.









- Case studies
 - Submit: www.vcuhealth.org/echo
 - Receive feedback from participants and content experts
 - Earn \$100 for presenting



The success of our telehealth program depends on our participants and those who submit case studies to be discussed during clinics. We recognize the following providers for their contributions:

- Ademola Adetunji, NP from Fairfax County CSB
- Tara Belfast-Hurd, MBA-PA from Department of Behavioral Health and Developmental Services
- · Michael Bohan, MD from Meridian Psychotherapy
- · Ramona Boyd, NP from Health Wagon
- . Diane Boyer, DNP from Region Ten CSB
- Melissa Bradner, MD from VCU Health
- Kayla Brandt, B.S. from Crossroads Community Service Board
- Candace Fletcher, PharmD Candidate from Hopkins Medical Association
- Susan Cecere, LPN from Hampton Newport News
- Kimberly Dexter, DNP from Hampton Newport News CSB
- Candace Fletcher, PharmD from Hopkins Medical Association
- . Michael Fox, DO from VCU Health
- Shannon Garrett, FNP from West Grace Health Center
- LaShawna Giles, MSW from Hampton Newport News CSB
- . Sharon Hardy, BSW, CSAC from Hampton-Newport News CSB
- . Kara Howard, NP from Southwest Montana Community Health Center
- Sunny Kim, NP from VCU Health
- · Heidi Kulberg, MD from Meridian Health
- · Thokozeni Lipato, MD from VCU Health
- Caitlin Martin, MD from VCU Health
- Jennifer Melilo, FNP from Chesapeake Integrated Behavioral Health
- Dawn Merritt, QMHP from Eastern Shore CSB
- Maureen Murphy-Ryan, MD from AppleGate Recovery
- Faisal Mohsin, MD from Hampton-Newport News CSB
- Jeromy Mullins, PharmD Candidate from Hopkins Medical Association
- . Stephanie Osler, LCSW from Children's Hospital of the King's Daughters
- Davina Pavie, QMHP from Hanover County CSB
- Winona Pearson, LMSW from Middle Peninsula Northern Neck CSB
- Jennifer Phelps, BS, LPN from Horizons Behavioral Health
- · Crystal Phillips, PharmD from Appalachian College of Pharmacy



- Tierra Ruffin, LPC from Hampton-Newport News CSB
- Manhal Saleeby, MD from VCU Health Community Memorial Hospital
- Jenny Sear-Cockram, NP from Chesterfield County Mental Health Support Services
- · Elizabeth Signorelli-Moore, LPC from Region 1 CSB
- Amber Sission, QMHP from Eastern Shore CSB
- Daniel Spencer, MD from Children's Hospital of the King's Daughters
- Linda Southall, QMHP from Alleghany Highlands CSB
- · Cynthia Straub, FNP-C, ACHPN from Memorial Regional Medical Center
- · Saba Suhail, MD from Ballad Health
- Michelle Tanner, LPC from Hanover County CSB
- Barbara Trandel, MD from Colonial Behavioral Health
- · Bill Trost, MD from Danville-Pittsylvania Community Service
- · Art Van Zee, MD from Stone Mountain Health Services
- Ashley Wilson, MD from VCU Health
- Sarah Woodhouse, MD from Chesterfield Mental Health
- Susan Mayorga, BA, CBIS from Community Health Center of the New River Valley
- Jordan Siebert, Peer Recovery Specialist from Daily Planet Health Services



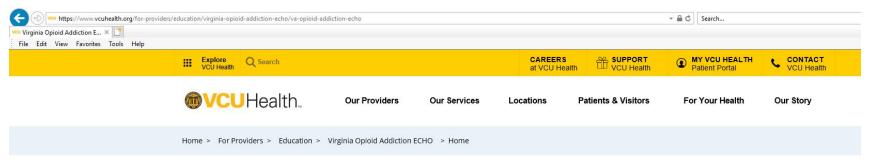


Claim Your CME and Provide Feedback



- www.vcuhealth.org/echo
- To claim CME credit for today's session
- Feedback
 - Overall feedback related to session content and flow?
 - Ideas for guest speakers?







Virginia Opioid Addiction ECHO



Welcome to the Virginia Opioid Addiction Extension for Community Health Outcomes or ECHO, a virtual network of health care experts and providers tackling the opioid crisis across Virginia. Register now for a



Network, Participate and Present

- · Engage in a collaborative community with your peers.
- · Listen, learn, and discuss didactic and case presentations in real-time.
- Take the opportunity to submit your de-identified study for feedback from a team of addiction specialists. We appreciate those who have already provided case studies for our clinics.
- · Provide valuable feedback & claim CME credit if you participate in live clinic sessions.

Benefits

TeleECHO Clinic!

· Improved patient outcomes.

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· Continuing Medical Education Credits: This activity has been approved for AMA PRA Category 1 Credit™.









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□ wa	atch video			
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		Neutral		
		Unlikely		
		Very Unlikely		
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With a first				
What no	on-opioid related topics would you be interested in?			

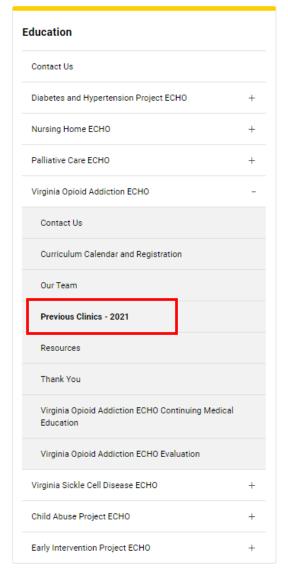




www.vcuhealth.org/echo

To view previously recorded clinics and claim credit





Previous Clinics - 2021

Review topics we covered in previous Virginia Opioid Addiction ECHO clinics.

January 15, Buprenorphine Taper

Presented by Masaru Nishiaoki, MD

- View Presentation
- View Video

January 29, Panel Discussion: COVID and Chronic Conditions

Panelists: Albert Arias, MD, Alex Krist, MD and Katherine Rose, MD

- View Presentation
- View Video

February 12, Grief Impacting Recovery

Presented by Courtney Holmes, PhD

- View Presentation
- Video Video

February 26, Virginia Drug Court System

Presented by Melanie Meadows

- View Presentation
- View Video

March 12, COVID and Recovery: Panel Discussion

Presented by Tom Bannard, MBA Omri Morris, CPRS Raymond Barnes, CPRS Erin Trinh, CPRS

- View Presentation
- View Video

March 26, Effects of Pharmacology on Cognitive Function

Presented by Gerry Moeller, MD

- View Presentation
- View Video
- View Resource

April 9, PropER Clinic and SUD Virtual Bridge Clinic: Linking Patients from ED to PCP and SUD Care

Presented by Taruna Aurora, MD and Brandon Wills, MD

- View Presentation
- View Video







VCU Virginia Opioid Addiction TeleECHO Clinics

Bi-Weekly Fridays - 12-1:30 pm

Mark Your Calendar --- Upcoming Sessions

Feb 18: TBD

March 4: Cannabis Induced Psychosis

Dr. Art Calloway, MD

March 18: Behavioral health Treatmens for SUD

Dr. Sarah Meshberg-Cohen, Phd

Please refer and register at vcuhealth.org/echo





THANK YOU!

Reminder: Mute and Unmute to talk

*6 for phone audio

Use chat function for questions

