

# Maximizing the Role of Your OBAT Support Staff

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# Financial Disclosures

The following session leader has no relevant Financial relationships with ineligible companies to disclose:

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# Learning Objectives

- Describing Office-Based Addiction Treatment (OBAT) support staff roles
- Describing how to utilize your support staff in OBAT
- Stakeholder Analysis Overview
- Stakeholder Analysis
  - Power / Influence Grid
  - Stakeholder Action Plan

# Utilizing Support Staff in OBAT- CQI

# OBAT Support Staff- Key Concepts

- Physician/APN providers are only a small part of the team.
- OBAT staff provide multiple points of contact for patients in need of support.
- Patients with SUD with potential relapses need contact, not always from provider.

# Support Staff - OBAT Navigator

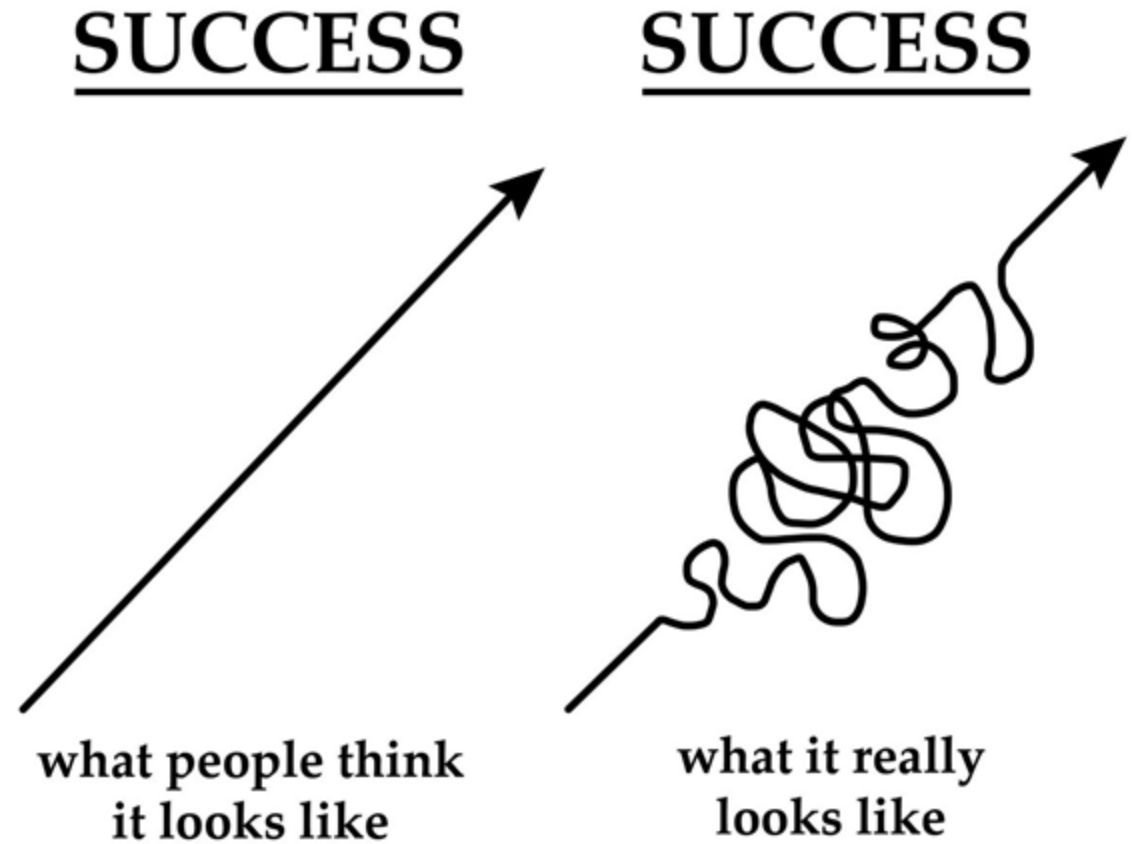
- Core component of the OBAT Model is being able to bill for additional support provided by the OBAT navigator.
- *Qualifications:* a licensed healthcare provider acting within his or her scope of practice under state law or an individual with a baccalaureate degree and at least two years of lived experience OR; an individual with an associate's degree or certified medical assistant and four years of lived experience.
- *Navigator role:* Utilize experiential knowledge, skills and coaching to guide and assist beneficiaries to obtain, and maintain, services designed to assist them maintain recovery. Tasks include:
  - Treatment/care planning - initiating and maintaining a psychosocial treatment plan (non-MAT components of care).
  - Care coordination - coordinating and ensuring that when appropriate, beneficiaries are connected with community based substance use counseling and that beneficiaries resolve identified needs.

# OBAT Navigator Supports

- Another person for the patient to connect with
- Collect histories and have ongoing conversations about other aspects of recovery:
  - Mental health and social supports
  - Social service needs
- Help make and follow up on referrals
- Be a point person for making relationships with other community partners to send and receive referrals. Help engage other stakeholders!

# OBAT Navigator Supports

Team-based care  
helps patients and  
staff!





# Team-based care considerations

- Goal is patient trust - ok if it is not always you!
- All staff can help reduce stigma/improve patient experience:
  - Opportunity to pull existing staff into OBAT model
  - Invest in training front desk, office staff, other providers on model
  - Huge role for front desk to be welcoming and validating of patients and having all staff trained helps provide consistent patient experience
- Hold case-discussion time
  - Consult with team members, especially navigator
  - Answer questions from other staff members
- Encourage ongoing learning mentality and delegation

# Resources for support staff

- Training and Events
  - OBAT Navigator Training
  - Monthly Support calls and case reviews - 3rd Thursday 12-1
- Care Plan Template
  - Example template for navigator intake and follow up visits

Events and resources are available at: <https://camdenhealth.org/coalition-building/state-initiatives/obat-events-and-trainings/>

# OBAT Support Staff

- **Admissions Staff** (LPN Assessor) – provide evidence-based assessments for SUDs using DMS-V criteria (i.e., GAIN, ASI). These are important because clients will be calling all the time to get admission to programs. It is vital to keep the lines open to bring someone in when they are ready for treatment.
  - This can be an LPN or a trained existing CMA in your office.
  - Barriers: Thinking you have to hire more staff.

# OBAT Support Staff

- **CADC** – certified alcohol and drug counselors – lead counseling groups using evidence-based models. Develop treatment and aftercare plans. Often these individuals are in recovery from SUDs.
  - RowanSOM NMI: 2 peer recovery coaches
  - See patients before or after each visit in the office
  - Telemedicine visits: call patients after visits to check in
  - Utilized for appointment reminders, wellness checks, offering advice from someone who has experienced what patients are experiencing
  - Highlight that recovery is an attainable goal

# OBAT Support Staff

- **Psych APN** – to provide assessments for co-occurring disorders and linkage to mental health services.
  - Crucial but not necessary to start OBAT.
  - If not in your office, partner with another practice.
  - Utilized for treating DSM-V diagnoses that can complicate SUD
  - Demonstrates the need to address more than SUD and that increasing doses buprenorphine products is not always the answer.

# OBAT Support Staff

- **Certified Peer Recovery Support Specialists** – provide case management, including linkage to services and follow-up. Motivate clients in their recovery.
  - Similar to CADC
  - Motivation by example, empathy, solidarity

# OBAT Support Staff

- Licensed – **LCSW and LCPC** are licensed social workers and therapists that provide evidence-based counseling groups and serve as clinical directors and supervisors for the CADCs and recovery coaches
  - Utilized with Psych APN for non-medication treatments
- **Counselors in training** – individuals interested in becoming a CADC must 3,000 hours of related experience. (one year of full-time work = 1,500 hours). Experience must be obtained within five years of application submission.

# OBAT Support Staff

- **LPN**
  - provides nursing care to patients under the direction of a physician.
- **Physician**
  - oversees outpatient detoxification of new patients. Signs treatment plans for the SUD program.



# Staff Huddle

- Twice per week at noon
- Discussed difficult cases
- Relay new information about patients
- Coordinate care escalation
- Creates a unified approach to avoid splitting

# Staff Education

- Understanding the patient with SUD
- Reducing stigma of SUD diagnosis
  - Chronic disease with relapses
- Eliminating words like "detox" or "dirty" urine
- Constant reinforcing with all staff
- Providing structure to treatment plan for patients

# Office Necessities Review

- Contract
  - Expectations of patient including medication safety
  - Hours of operation
  - After-hours contact and expectations
  - Threshold for discharge?
  - Escalation of care?
- Ability to administer rapid urine drug screens prior to office visit and send out samples for confirmation

# Office Necessities Review

- Appointments for frequent follow ups
- Weekly for 4 weeks
- Bi-monthly for 1 month
- Monthly for stable patients
  
- Relapse?
  - Start back at weekly appointments with increased counseling services

# Recovery

- All staff must know they are part of a person's long-term recovery
- Patients can utilize staff roles to varying degrees based on needs
- Recovery may be abstinence or chronic maintenance therapy
  - Depends on patient's goals and abilities

# Barriers to OBAT MATrx

- What your office's barriers to implementing OBAT?

# References

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2. *Office Based Addiction Treatment Training and Technical Assistance*. [https://www.bmcobat.org/resources/index.php?filename=22\\_2021\\_Clinical\\_Guidelines\\_1.12.2022\\_fp\\_th%2528003%2529.29.pdf](https://www.bmcobat.org/resources/index.php?filename=22_2021_Clinical_Guidelines_1.12.2022_fp_th%2528003%2529.29.pdf)
3. Tunney, S. *NJ MATrx Model*. [https://www.nj.gov/humanservices/dmhas/information/provider/Provider\\_Meetings/2019/MAAC%20OBAT.pdf](https://www.nj.gov/humanservices/dmhas/information/provider/Provider_Meetings/2019/MAAC%20OBAT.pdf)

# SUD MAT CQI – Stakeholder Analysis



# Stakeholder Analysis Overview

## What is a Stakeholder?

Any individual, group or organization that will have a significant impact on or will be significantly impacted by the quality of a specific product or service.(1)

## What is a Stakeholder Analysis?

A Stakeholder analysis is defined as a tool organizations can use to clearly identify key stakeholders for a project or other activity, understand where stakeholders stand, and develop cooperation between the stakeholders and the project team. The main objective is to ensure successful outcomes for the project or the changes to come. (1)

## When is a Stakeholder Analysis used?

Stakeholder analysis is frequently used during the preparation phase of a project and is an excellent way to assess the attitudes of stakeholders towards changes or critical actions. It can be done once or on a regular basis to track changes in stakeholder attitudes over time. (1)

- The stakeholder analysis is typically meant to be an internal document used solely by the project team
- The stakeholder analysis is not a rating system

# Stakeholder Analysis

This tool helps the team answer the questions, "Who are the key stakeholders?", "Where do they currently stand on the issues associated with this change initiative?" and, "Where do we need them to be in terms of their level of support?"

	Key Stakeholder	Role in Organization	Power/ Influence Category	Impact of Project on Stakeholder (H, M, L)	Current (0) / Desired Support (x)					Reasons for Resistance or Support
					Strongly Opposed	Opposed	Neutral	Supportive	Strongly Supportive	
1	Stakeholder 1	Quality Director	1	M				0 → x		Quality Improvement
2	Stakeholder 2	Vice President	3	M			0 → x			
3	Stakeholder 3	Operations Manager	1	H				0 x		Reduction of Rework
4	Stakeholder 4	Medical Assistant	2	M		0 →		x		Changes imposed by others.
5	Stakeholder 5	RN	2	H	0 →			x		Disagrees with priority of project relative to others.
6	Stakeholder 6	Technician	2	H					0 x	Quality Improvement
7	Stakeholder 7	Supervisor	2	H				0 x		Job will be easier.
8	Stakeholder 8	Scheduling Manager	4	H	0 →		x			Fears job loss / Feels left out of decisions.
9	Stakeholder 9	Finance Manager	3	L			0 →	x		

- 1 List stakeholders & titles
- 2 Power and influence over the project
- 3 Impact upon the stakeholder

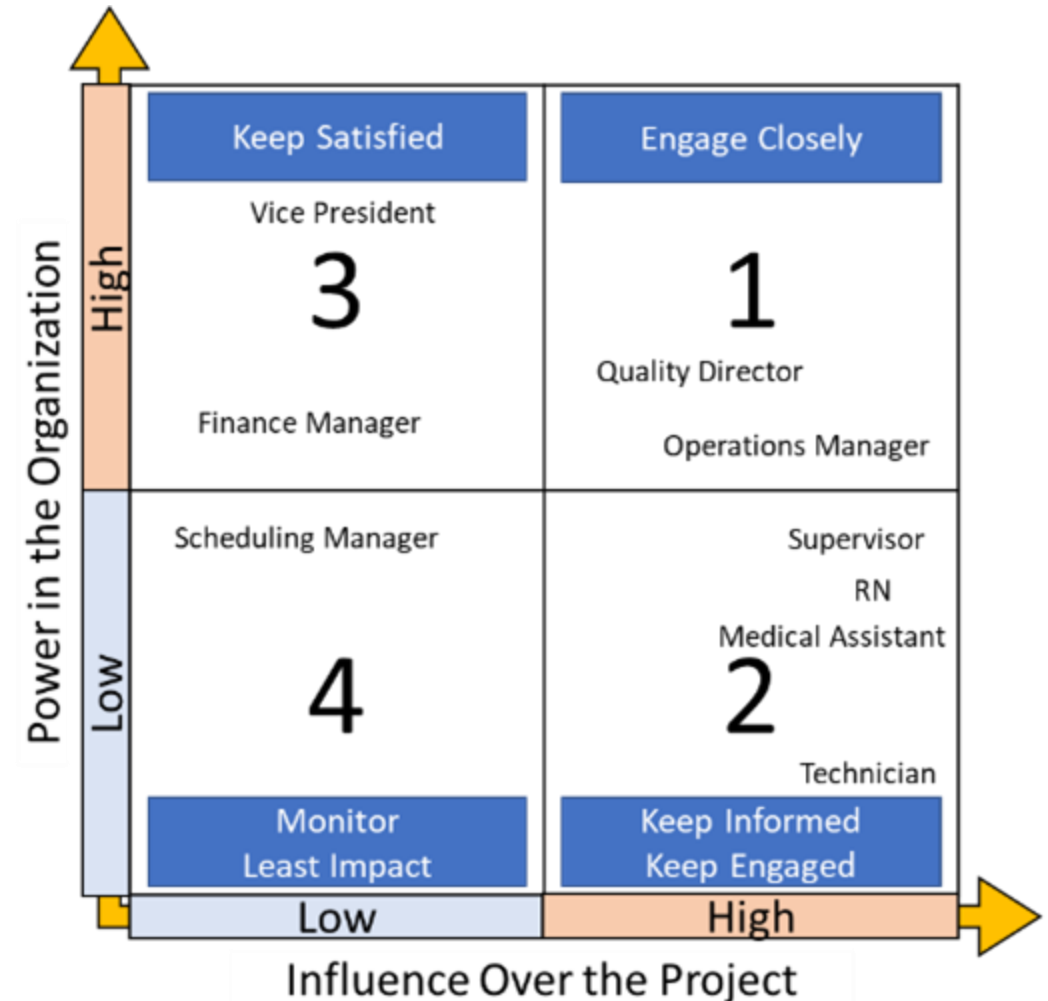
- 4 Current Support = 0 / Desired Support = x
- 5 Reason for the stakeholders resistance or support

# Stakeholder Analysis – Power / Influence Grid

2

The Power and Influence grid is used to determine who in the organization has the greatest impact upon the project

Role in Organization	Power/ Influence Category
Quality Director	1
Vice President	3
Operations Manager	1
Medical Assistant	2
RN	2
Technician	2
Supervisor	2
Scheduling Manager	4
Finance Manager	3



# Stakeholder Analysis – Action Plan

1 Stakeholder Name	2 Reasons for Resistance or Support	3 Method to address Resistance or Support	4 Leverageable Allies	5 Action to address resistance	6 Owner	Due Date
Medical Assistant	Changes imposed by others.	Engage in project team	Operations Manager	Invite MA to next team meeting	Supervisor	3/8/22

1. Name of the stakeholder
2. Perceived reasons for resistance or support of the project
3. Method / manner to address the resistance or build support for the project
4. Allies that can be used to influence the stakeholder
5. Specific action to address stakeholder resistance
6. Owner of the action and due date on when it will be completed

### **Key Points for General Stakeholder Buy-in**

- Take time to identify and list all your potential stakeholders
- Based upon the team’s knowledge determine the level of support or resistance
- Make all stakeholders aware of what you plan on doing before you do it
- Involve Stakeholders with the project (if possible)
- Keep your stakeholders aware of your progress throughout your project
- Ask for stakeholder feedback and participation

# References

1. STAKEHOLDER ANALYSIS – ASQ, [HTTPS://ASQ.ORG/QUALITY-RESOURCES/STAKEHOLDER](https://asq.org/quality-resources/stakeholder)



Thank you!  
Questions & Discussion