

Tips for using video conferencing and telephone for recovery support services

PRESENTER: Hello and welcome to Top Telehealth Tips and Lessons Learned. Part of the Telehealth Learning and Discussion series for substance use disorder treatment and recovery support providers. This project is brought to you by the Addiction Technology Transfer Center Network, The Center for Excellence on Protected Health Information, The National Consortium of Telehealth Resource Centers and the Center for the Application of Substance Abuse Technologies at the University of Nevada, Reno in response to the COVID-19 pandemic.

Today speakers are Lisa Walker and Darlene Schultz from the Utah Support Advocates for Recovery Awareness. Lisa and Darlene discuss the top five tips for using video conferencing and telephone for recovery support services.

LISA WALKER: Darlene and I will go ahead and add the tips that we have come up with since transferring over to telehealth. Prior to this we were doing everything in person, like most of us. So my name is Lisa Walker. I'm the director of operations at USARA. And that stands for Utah Support Advocates for Recovery Awareness.

And we are located here in Salt Lake City. And then we also have several recovery community centers statewide. And then also, I am co-presenting with Darlene Schultz. And she is our family support facilitator who has been doing it for at least a decade. She is amazing and really helps us out with all things family. So I will let Darlene go ahead and get started.

DARLENE SHULTZ: So here USARA, what we had to do to switch from in-person to virtual and actually the transition seemed, as far as I'm concerned, to go very, very smoothly. We needed to coordinate and setup access to the communication platforms. Which I feel like we were ahead of the game on this.

We have our community outreach and empowerment coordinator, Evan Doan, that is a techie-- our special techie, and we've been calling Radar for those of you that know M*A*S*H. He had us completely set up on so many things any way that the transition seemed to be pretty easy.

So we were already doing Zoom and GoToConnect. As a staff, we were holding our weekly meetings so that we could include the rural areas in those meetings. We added Google Hangout and FaceTime, of course, once we went virtual.

We were set up on Slack and we've set up channels now for each of the teams. So the teams can communicate within their team, with each other, and then we can communicate as a whole staff every day on that as well. It's kind of fun to get up every morning and see everybody telling everybody, have a good day, good morning.

This morning we had a great Slack message from one of our team coaches. She usually goes into the hospitals, but since COVID we can't do that anymore. And one of her participants was in the

hospital detoxing and she needed to get some information to her, so she sent it to the charge nurse and the charge nurse printed it off, gave it to the gal, and she found treatment.

And the charge nurse ended up responding to our coach. You know, good job. What a great way to communicate, finding a different way to communicate and help this person. So being able to hear that through Slack was kind of nice because we all got to celebrate with her for that.

Email and text messaging is important, especially for volunteers. I use a lot of volunteers. So we communicate a lot through email and text messaging. Facebook Messenger, the coaches and their participants use that a lot more now. And then phone and voicemail, our phone line is setup and all the extensions have been forwarded to the proper people. So, you know, any participants that call in and need that support have it through that.

So this our organizational strategy. The first thing we had to do as a leadership team is get together and discuss, how are we going to make this look? How is this going to look? How are we going to keep our employees safe and engaged and working efficiently?

And we got with our program teams to identify their needs and their solutions. And the staff support, it was go time. And our staff is amazing. Everybody jumped in with both feet, whether they have big families at home, they're home homeschooling or not, and we pulled it all together.

Virtual staff meetings, we were already doing virtual staff meetings to include our rural areas. But now it's all of us. So that's been kind of interesting because now we see how those rural people feel having to look on a screen and instead of having that connection being right in the same room.

We have a USARA e-newsletter that goes out. And we've held one town hall virtual meeting on Zoom. And we are planning another one probably within the next month and then we would like to continue those quarterly. I'll turn the time over to Lisa for providing recovery support and group meetings.

LISA WALKER: Thank you, Darlene. I'll just add that that virtual town hall was so important and we probably had at least 40 people show up. And what we did is we had several of the leaders in our state either legislative wise or in the recovery community coming together to answer questions, much like we're doing today. And we found that to be very effective.

And so again, just as a reminder, USARA is all non-clinical peer support. At least 80% of us work here are all people in recovery. And then myself and a couple of substance use disorder counselors, we can provide all of the supervision for the 18 peer recovery coaches that we have.

So we were very lucky and blessed from our funding because every coach was already equipped with a laptop. And then we also all get a phone stipend. So in that way, we are really already ahead of the game. And I definitely want people on this call to know that perhaps the RCOs in their state also operating virtually and just what an added benefit it is to have this other person on and available.

We have been attending family recovery meetings with DCFS virtually. We have been [INAUDIBLE] drug court and actually holding a special just all-recovery e-meeting for families that are in drug court and it's been really helpful and effective and a lot of people showing up.

So we are doing a lot of our meetings online. So Darlene is running several of the family craft meetings and that's been going really well. I think she already discussed the ways that they are able to continue to do that in spite of maybe family members being at home. Especially right now where they don't want to be out on the street and exposed to COVID, and probably family members adjusting their boundaries a bit in that way.

We have always done a coffee and recovery meeting. And what that is is it's just an all recovery meeting. We have a couple of inspirational decks of cards and everybody pulls a card and shares on the topic. And so we have continued to do that on Wednesday mornings.

And what's great about that is, like a lot of our staff join it and so they are getting support as well as giving support. And we've had really great success with that. So I would definitely encourage a meeting like that. And then, the all-recovery support, a lot of the meetings we're not having to carry right now because meetings such as Dharma recovery, smart recovery, through their own lines and on portal and all the 12-step meetings, they're already being provided. And so that's really great.

I think the biggest thing that we've had to do here at USARA is provide more support for our peer recovery coaches. So we're meeting once a week every Thursday morning. All of us get on and just talk about what's going on. Not only were we dealing with COVID, we also had a 5.7 magnitude earthquake here.

And I personally have never been in an earthquake and it was so frightening. Many of us were shook. And then we've had all of the aftershocks going on since. So really this feeling of like unsafe and, sort of, how do we all get through that together, stay sober, you know, and keep supporting one another.

So we've done the all staff, and then, you know, we break off into our teams. And the unity that's coming about through all this is really just made our staff that much stronger. So we're doing that and that's going really well. And then just the links to the online meetings.

And so we have recovery podcasts, like we just have to think out of the box. We're spending so much time on webinars like this, etcetera. So it was a big deal to close our recovery community centers. And our coaches want it and our participants want us back.

So we're continuing to do our best by engaging. We're doing this on our private Facebook pages. We have five centers and all centers are using their Facebook. We're using our funding that we would normally use for social activities to engage people on Facebook.

So we're giving gift cards for participation in contests and it's all about, like, what are you grateful for? What are you doing for self-care? And we are having wonderful engagement that

way. We are using a lot of, like, email and phone calls in our rural areas, especially where either people don't have data, or they just don't have access to the internet.

There's resources for that, but they don't reach to the rural areas. And so they have had to be really creative there. And sometimes it's two calls a week, and the coaches have time to do that.

DARLENE SHULTZ: So our craft family support group, we were running 17 groups in 12 different Utah counties before COVID. So we had to put a hold on all of those meetings and temporarily suspend them. And then we identified our online group meetings.

We have three new online family support meetings that our participants can join each week. They're the same as the in-person meetings, other than we're meeting online. We started a program called Craft Connect in February.

It's our virtual program. So it was kind of good timing, I guess, to practice that virtual craft meeting. And that's continuing. So now we have five online craft family support groups for family members that are struggling and that need that support.

We also implemented a new program, a phone coaching, using the craft skills and the family peer support. We have five coaches that offer one on one 20-minute peer support session. All the family members have to do is get online and request a session and our peer coaches will work with them on those craft skills and encourage them to get to an online craft meeting.

Some of the challenges we've had is technology. Family members do not like technology and they're a little bit nervous about that, but we kind of walk them through. The other thing I was going to say is materials. Getting materials to our participants has been a challenge as well.

We've had to be creative and deliver them to their front porch. I even had to deliver some materials, hide them in a bush, and take a picture of the bush and the store that it was left at. And one of our participants picked it up and came to the group that night. So being very creative to help these family members that are struggling so much right now with everything going on.

We have our website that we put all the information on, and how the family members can access these meetings. And also we put that on Facebook and other social media.

PRESENTER: Thank you so much for joining us today. For a transcript of this podcast, presentation slides, and other related resources, please visit our website at www.telehealthlearning.org. This podcast is supported by funding from the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, and Health Resources and Services Administration.

Its contents are solely the responsibility of the presenters and do not necessarily represent the official views of HHS, SAMHSA or HRSA. Information shared and views expressed reflect the speaker's best understanding of science and promising practices and should not be seen as directives.

We encourage all listeners to reflect on the contexts discussed during the series and to take that information to colleagues and or supervisors for further discussion, especially in the context of state rules and regulations. In addition, content related to privacy and security and 42 CFR Part 2 presented during these sessions should not be construed as legal advice, and listeners are directed to discuss recommendations with their agency's legal counsel.

Finally, listeners should consult SAMSHA resources that provide additional information regarding delivery and services virtually. Once again, thank you to our listeners for tuning in today. We hope that you'll join us again.