How to Implement Group Psychotherapy in Family Practice to Combat and Address Opioid Crisis Using Your EMR

Panel

Dr. Carlos Yu, OntarioMD Physician Peer Leader, **Jeffrey Yu**, OntarioMD Clinic Manager Peer Leader, and **Anita Iacone**, Ajax Harwood Clinic

Faculty/Presenter Disclosures

- Faculty: Carlos Yu (MD), Anita Iacono, Jeffrey Yu

- Relationship with Commercial Interests: none

Disclosure of Commercial Support

- No commercial support.

Overview of the Setting

- Family Health Organization (Capitation Model Ontario)
- Downtown Ajax: Priority neighbourhood of Durham - low income
- 6,000+ patients
- 4 physicians
- 8 support staff

Learning Objectives

1. Learn how to run and bill for groups to support mental health.
2. Use queries to find patients most in need of group psychotherapy and mental health support (e.g. patients on opioids/narcotics, antidepressants, etc.)
3. Create measurements to track anxiety and depression scores and view changes over time.
4. Create charting templates to make scribing more efficient.

The Relationship between Mental Health, Mental Illness and Chronic Physical Conditions

Mental health and physical health are fundamentally linked. People living with a serious mental illness are at higher risk of experiencing a wide range of chronic physical conditions. Conversely, people living with chronic physical health conditions experience depression and anxiety at twice the rate of the general population. *(December, 2008)*

Canadian Mental Health Association

Promoting mental health at Ajax Harwood Clinic
One week at a glance

Dr. Maria's Running/Walking Group

Thursday Diabetes Management Group

Central East LHIN: Self-Management for Chronic Pain

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Tuesday Healthy Lifestyle Group

Tuesday Stress Reduction Group

Billing

Psychotherapy

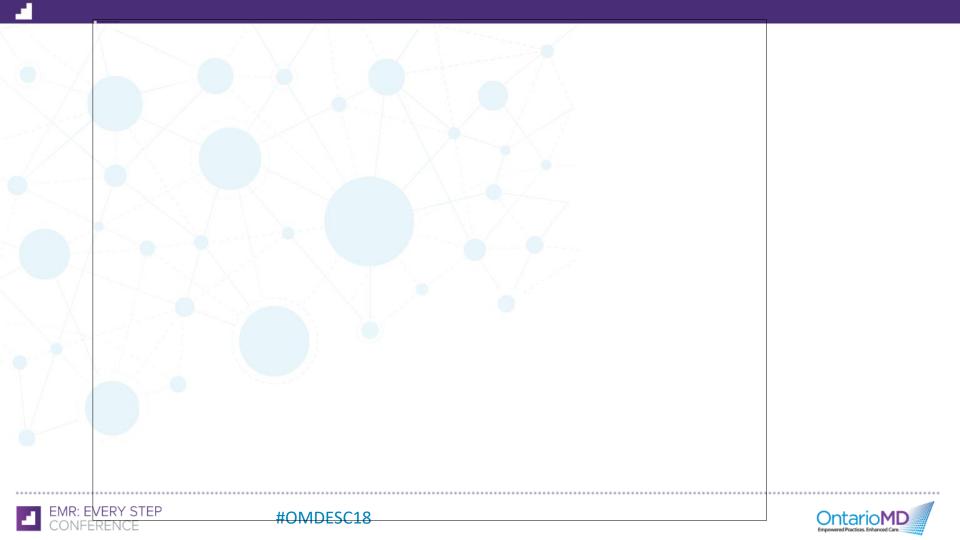Includes narcoanalysis or psychoanalysis or treatment of sexual dysfunction - see General Preamble GP37.

Note:

Psychotherapy outside hospital and hypnotherapy may not be claimed as such when provided in conjunction with a consultation or other assessments rendered by a physician during the same patient visit unless there are clearly defined different diagnoses for the two services. Unit means ½ hour or major part thereof - see General Preamble GP5, GP37 to GP41 for definitions and time-keeping requirements.

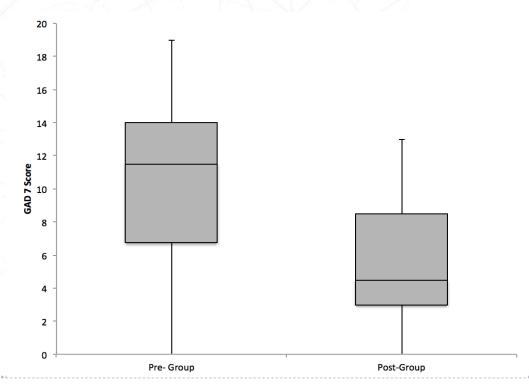|			
K007	Individual care	per unit	62.75
	Group - per member - first 12 units per day		
K019	- 2 people	per unit	31.40
K020	- 3 people	per unit	20.90
K012	- 4 people	per unit	15.80
K024	- 5 people	per unit	13.00
K025	- 6 to 12 people	per unit	11.05
K010	- additional units per member (maximum 6 units per patient per day)	per unit	10.00

Running Workshop for Collaborative Mental Health Conference 2018
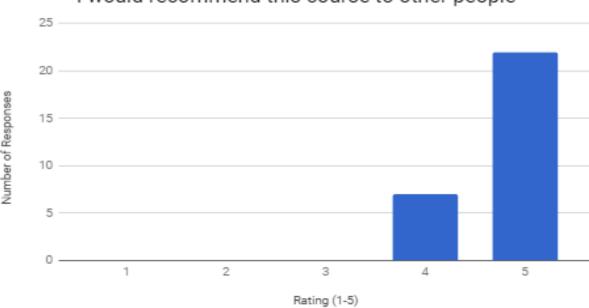
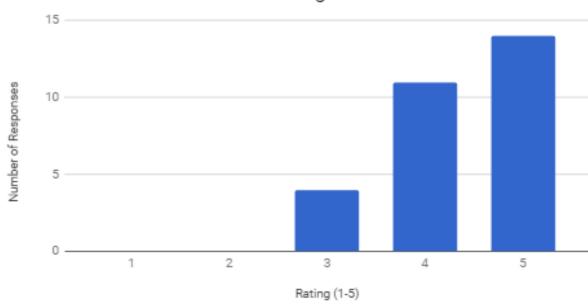# Anxiety Measures (GAD7), pre- vs post-Intervention

Stress Reduction Course Feedback
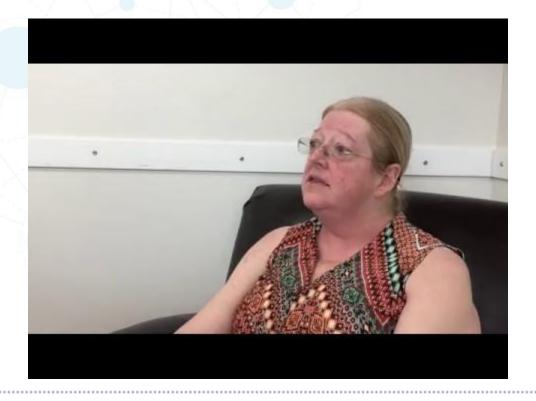

I would recommend this course to other people

Stress Reduction Course Feedback

This course made me feel more confident in coping with life challenges

Patient Testimonials

Patient Testimonials

We can all do this!!

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Toolkit for Running Self-Management Groups in Family Practice

- Slide Deck Templates
- Outlines
- Group Facilitation Tips
- Sample Group Norms
- Dialogue Prompts
- Useful links to open-source content
- Printable Mnemonic Cards

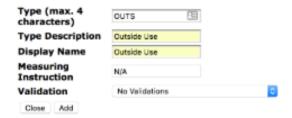# Toolkit for Running Self Management Groups in Family Practice

Table of Contents

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#OMDESC18

How to Create Measurements to Track Changes

How to create new measurements (e.g.: a measurement for sinus rhythm)

Admin → Customize oscarMeasurements → Add Measurement Type → Fill in details as needed → press Add

Type (max. 4 characters)	OUTS
Type Description	Outside Use
Display Name	Outside Use
Measuring Instruction	N/A
Validation	No Validations

Close   Add

Information that you add to measurements will also be automatically added to your chart/toilet role. The additional advantage of inputting this information as measurements is that you can "graph the data" to easily monitor changes in measurements over time.

For more information on measurements, see this link
http://oscarmanual.org/oscar_emr_12/General%20Operation/administration/oscarencounter-2/measurements

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Report by Template

Report By Template allows you to run different "scripts" that mine your OSCAR database for specific reports. Some examples of scripts that can be run include:

- Generate a list of all your patients on opioids
- Generate a list of all your patients on a specific drug
- Generate a list of all your diabetic patients
- Generate a list of all your patients that are overdue for their FOBT

Report by Template, cont.

"Report By Template" can be found under "Admin", which is located in the top bar

Under Admin, "Report By Template" is found under the section oscarReport

Report by Template, cont.

You can add new Report Templates to your OSCAR system by clicking "Add Template" (Use control/command+F to find this quickly).

113. A090- All Patients treated with Anti-hyperglycemic agents

Add Template

Once you click "Add Template," simply navigate to the files containing the script you want to upload, and click "Upload and Add".

Report by Template, cont.

Report by Template

Add Template
Upload Templates: | Choose File | No file chosen | | Upload & Add |

Additional scripts can be found at: http://oscarcanada.org/oscar-users/emr-resource/report-templates

A NOTE ON REPORT BY TEMPLATE: For most of these to work, they require documentation in OSCAR to be relatively "tidy". If this is not the case, the generated reports may be unreliable. (i.e.: if you try to run a "report by template" to find a list of your diabetic patients, the report will not include any patients that were not listed as Diabetic in the Disease Registry)

Script for Finding Patients on Opioids

```
<report title="Opioids by provider" description="Opioids by provider" active="1">
<query>
select concat( "<a href=../../../Oscar12_1/demographic/demographiccontrol.jsp?demographic_no=", de.demographic_no, "&displaymode=edit&dboperation=search_detail/ target='blank'>", de.demographic_no,
"<a/>" ) as "Demo#", de.last_name"Surname",de.first_name"First name", de.phone"Phone", de.address as address, de.city as city, (Year(CURDATE())- de.year_of_birth)"Age", dr.BN"Drug",
dr.GN"Trade",dr.lastUpdateDate"lud"
from
(SELECT @row_number:=0) AS t, drugs dr, demographic de
where dr.demographic_no = de.demographic_no and de.patient_status = 'AC' and (Year(CURDATE())- de.year_of_birth)>40 and dr.lastUpdateDate > ((PERIOD_ADD(EXTRACT(YEAR_MONTH FROM
CURDATE()),-3)*100)+1) and

(dr.BN like CONCAT('oxycodone','%') OR dr.GN like CONCAT('oxycodone','%') or dr.BN like CONCAT('fentanyl','%') OR dr.GN like CONCAT('fentanyl','%') or dr.BN like CONCAT('morphine','%') OR dr.GN like
CONCAT('morphine','%') or dr.BN like CONCAT('codeine','%') or dr.GN like CONCAT('codeine','%') or dr.BN like CONCAT('imodium','%') OR dr.GN like CONCAT('imodium','%') or dr.BN like
CONCAT('hydrocodone','%') OR dr.GN like CONCAT('hydrocodone','%')or dr.BN like CONCAT('hydromorphone','%') OR dr.GN like CONCAT('hydromorphone','%') or dr.BN like CONCAT('tramadol','%') OR
dr.GN like CONCAT('tramadol','%') or dr.BN like CONCAT('demerol','%') OR dr.GN like CONCAT('demerol','%')) and de.provider_no = {provider_no}
group by de.last_name, de.first_name
order by dr.GN
;</query>

<param id="provider_no" type="list" description="Provider Number">
<param-query> select p.provider_no,
concat(p.last_name,',',p.first_name,'(',p.provider_no,')') from
provider p inner join drugs dr on dr.provider_no=p.provider_no
group
by p.last_name order by p.last_name;</param-query>
</param>

</report>
```

Finding More Reports/e-Forms/Scripts

Try Googling OSCAR E-forms/Scripts/Reports/etc.

Link to get you started: http://oscarcanada.org/oscar-users/emr-resource/eform/eform-examples

Report by Template, Summary

Report by Template can be used to generate reports on basically anything, provided that information is in OSCAR, and you can write the script to do it.
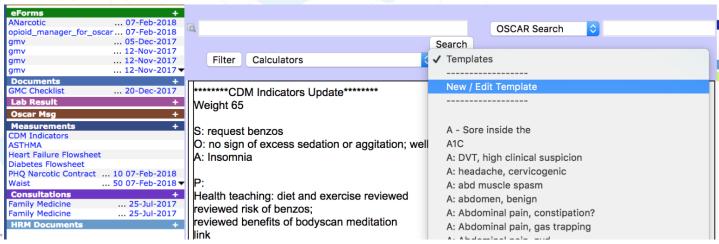
More information on what you can do with Report by Template can be found here
http://oscarcanada.org/oscar-users/emr-resource/report-templates/Introduction%20to%20Database%20Searching%20Workshop%202012%20.pdf

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How to Make Charting More Efficient Using Templates

Instead of always typing new charting notes at each encounter, you can use templates.

You can create new templates on the fly, by going to any patient encounter window, clicking the "Templates" dropdown menu, and click New/Edit Template

Tips for Naming and Writing Templates

Naming Templates: The most important thing is to come up with a naming scheme that works for you, and allows you to find the templates you need easily. Avoid using dashes. You also want to make sure you create something that you can remember!

Writing effective templates: In terms of how detailed your templates should be, there is a sweet spot. You want your templates to detailed enough so that you can avoid manually writing as much as possible. At the same time, if your templates are too detailed, you will have to edit them frequently to remove unwanted parts. We like to use a multitude of "smaller" templates that can be combined into a larger diagnosis.

Template Examples

A: DVT, none

A: DVT, none; pulled calf

S: No swelling now; no pain; calf ok; no sob; no cp;

O: No significant swelling or tenderness; calf not tender; no evidence of PE; no tachycardia; chest is clear; negative Holmer's

P: Will follow closely.

t: Flu shot

S: No allergy to neomycin or eggs, no hx of reactions to flu shots; no URTI; no hx of Guillain Barre or Myasthenia Gravis;

O: No acute illness, throat normal normal; chest clear

A: Eligible for flu shot

P: Flu shot given IM by aseptic and non-intravascular technique. If first shot asked to remain in the office for 20 minutes after vaccination; warned of ORS;

Template Examples

A: Sciatica

S: no cauda equina syndrome symptoms;

O: reflexes intact;

P: will continue with conservative management; swimming recommended

Insomnia Bodyscan Instead of Benzos

S: request benzos

O: no sign of excess sedation or aggitation; well kept; well nourished

A: Insomnia

P: Health teaching: diet and exercise reviewed

reviewed risk of benzos;

reviewed benefits of bodyscan meditation

Link: http://www.stillmind.com.au/Documents/Body%20Scan%20Meditation%20orig.pdf

agree to try bodyscan instead

Template Examples for Group Psychotherapy

Mindfulness Group Therapy Session
Session 1, Mindfulness Basics
This course has been based on the Mindfulness Without Borders Program.
Start time:
End Time:

A: Anxiety.
S: See uploaded documents: PHQ9, GAD7, Insomnia Severity Index, Loneliness Scale.
O: Synopsis: Mindfulness is a way of paying attention, on purpose, to the present moment. It is the ability to focus on what is happening in the moment and seeing things just as they are.
Core Practices: TUZA (3 minute breathing meditation), TAKE 5 (breathing meditation using 5 deep breaths).
Learning Objectives: Develop attention and appreciation of the present moment.
Learning Outcomes: Decrease stress and promote well-being.
Dialogue: Tell a story of a time when you acted on autopilot. What would you do differently to be more mindful?
P: Be Mindful Take Away Practice: Practice TUZA or TAKE 5 everyday before the next session. Alternatively, patients may chose to practice different meditation techniques that they find beneficial (e.g. yoga, guided imagery, lovingkindness meditation, etc.).

Original Article

Are Mindfulness-Based Interventions Effective for Substance Use Disorders? A Systematic Review of the Evidence

Alberto Chiesa ✉ & Alessandro Serretti

- Current evidence suggests that Mindfulness-Based Interventions can significantly reduce consumption of several substances, including cigarettes and opiates compared to waitlist controls, non-specific educational support groups, and some specific control groups.
- Some evidence also suggests reduction in cravings.

Mindfulness-Based Stress Reduction vs. Pharmacotherapy for Primary Chronic Insomnia: A Pilot Randomized Controlled Clinical Trial

Cynthia R. Gross, PhD, Mary Jo Kreitzer, PhD, RN, Maryanne Reilly-Spong, PhD, Melanie Wall, PhD, Nicole Y. Winbush, MD, Robert Patterson, PhD, Mark Mahowald, MD, and Michel Cramer-Bornemann, MD

- Significant and large improvements were found on the Insomnia Severity Index (ISI), Pittsburgh Sleep Quality Index (PSQI), and diary measured total sleep time, sleep onset latency and sleep efficiency from baseline to 5 month follow up in the Mindfulness-Based Stress Reduction arm.

Body Scan Mindfulness Exercise as an Alternative

BODY SCAN FOR SLEEP

- Begin by bringing your attention into your body, close your eyes.
- Notice your body wherever you're lying down, feeling the weight of your body on the floor.
- Take a few deep breaths.
- And as you take a deep breath, bring in more oxygen enlivening the body. And as you exhale, have a sense of relaxing more deeply.
- You can notice your feet on the bed, notice the sensations of your feet touching the bed. The weight and pressure, vibration, heat.
- You can notice your legs against the bed, pressure, pulsing, heaviness, lightness.
- Notice your back against the bed.
- Bring your attention into your stomach area. If your stomach is tense or tight, let it soften. Take a breath.
- Notice your hands. Are your hands tense or tight. See if you can allow them to soften.
- Notice your arms. Feel any sensation in your arms. Let your shoulders be soft.
- Notice your neck and throat. Let them be soft. Relax.
- Soften your jaw. Let your face and facial muscles be soft.
- Then notice your whole body present.
- Repeat.

Modified from https://ggia.berkeley.edu/practice/body_scan_meditation
(audio included in above link)

Questions?

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References

Thank you!

Please go to our website to find this slidedeck and relevant links:

https://ajaxharwoodclinicblog.wordpress.com/