This

Jessie O'Brien: all right. Hello! Everyone. Welcome to today's webinar, peer, recovery support series, part 5, peer support, support via telehealth platforms. This is presented by Dr. Melissa Ditt Burner. My name is Jessie O'brien. I am the director of Training and Professional development here at Nada the Association for Addiction professionals.

Jessie O'Brien: I will be the facilitator of today's training experience. And with me today, behind the scenes is our training and continuing education specialist, Alison White, who will be addressing any issues or questions you may have that are not specifically for our presenter. So, in other words, you have a lot of support here. I know most of you are familiar with Zoom Webinar. I won't spend a lot of time on it. You have a menu at the bottom of your screen. Looks like this one here on my spot. I'm not sure which way it is. But

I just want to point out 3 things for you that we use the chat box. I know Dr. Ditbner will be kind of engaging with you a bit in the chat box, so if you want to have that open to chat back and chat with each other. Please go ahead and do that. The second is the Q. A. Box. we do use that for the question, answer session. That happens. Actually, we'll be doing them kind of throughout the webinar today. So if you have any questions for

Jessie O'Brien: Dr. Did burner please go ahead and put them in there. If you have any questions that are unrelated for me or for Allison, also feel free to put those in the Q. A. Box, and we'll get to those as well. We do ask that. You keep the comments in the chat box and the questions and the question box so we can stay organized.

Jessie O'Brien: kind of helps us front things smoothly. And lastly, if you want live Transcript, we're using Zoom Webinar for close captioning. And so you just need to click on the little up arrow.

Jessie O'Brien: in the live transcript and hit show subtitles if you want subtitles. And I saw that Allison posted the link for the slides. I'll just ask that she do that again. And that is in the chat box as well. So just reminder that every native webinar has its own web page that contains everything you need to know about that particular webinar. So today's webinar also has its own web. Page

Jessie O'Brien: when you go there to register it, brought you into our Nadak Education Center. This is our learning management system, where we now house, all of our learning material, including the live and the on demand, webinars which includes the sequences and the certificates that you were now and going forward. So every webinar will continue to have its own web page on our website, like you see here.

Jessie O'Brien: but it will also have a location in our Education Center. So after this live event ends, you can navigate to the C quiz by clicking on the link in the thank you. Box shown here. That's on my screen. If it doesn't show up right away when this ends. If you just refresh your screen, it should be there, or you will also receive an email soon after this webinar ends. That also contains the link to the Ce. Quote

Jessie O'Brien: just an Fyi, that if you do not attend at least 80 of the live events. You will not receive the link, the email with the link to the C quiz. It's a system setting, so don't worry if you don't catch all the content live. We do also make them available on demand about one business day after the webinar ends.

Jessie O'Brien: So for those that take this on demand. You can also always find the C quiz and certificate within the course itself in the Education Center. Just go into the Education center, click on education in the upper left hand corner. Search for the course or webinar that you want to take, or you did take, and you'll find everything you need in that course. There, the video, the quiz, the survey evaluation, and the certificate.

All right.

Jessie O'Brien: Let's meet our presenter. So Dr. Melissa Ditt Burner, is a lecturer in the Addictions, Counseling and Prevention Department at the University of South Dakota. She has a doctoral degree in counseling and psychology and education

Jessie O'Brien: a master's degree in addiction studies, and a bachelor's degree in Health Science. Dr. Dipner is a prevention and peer specialist with the focus on research regarding the substance, use pedagogy, addiction, trauma, body brokering and harm reduction among the college population. She speaks publicly on adaptability, resiliency, sustainability, screening, prevention.

Jessie O'Brien: harm, reduction, motivation, peer support, narcan administration, and her own lived experience. And I see that she has joined me here. So I'm gonna go ahead and mute myself and turn my video off and hand this over to you.

Dr. Melissa Dittberner: Thank you very much. I'm really excited to be here. Give me just 1 s and we'll share screen, and we can get started

Dr. Melissa Dittberner: alright. Looks like we're in presenter mode. Thank you for the introduction again. I'm really excited to be here. I love talking about your support and what peer specialists can do and ways for them to stay safe and help people. And so I want this to be a really interactive presentation, because that's the way I that's the way I work, and I feel like, if we can engage together, that we all learn from each other too. So I saw that everybody, or most of everybody already posted what state they're from?

Dr. Melissa Dittberner: but I'd also like to know, are you up here, specialist? Are you a your supporter recovery support specialist, or whatever title you go by. I'd love to see in the chat box. Also, maybe what state you're working in. You can answer both of those together.

Dr. Melissa Dittberner: So are you currently your specialist. And what state are you working in as a peer specialist?

Dr. Melissa Dittberner: And I'll give just a little bit, and I'm going to pick in the chat box.

Dr. Melissa Dittberner: It looks like there people are rolling in.

Dr. Melissa Dittberner: That's like, yes, there's a lot of people in a lot of different states, too. So that gives us a great way for us to collaborate and talk about what things look like in other States, too. My next question for you as you're rolling in. Please keep answering that I'm reading them as they come in. Is is it? Are you able to work remotely

Dr. Melissa Dittberner: in the State that you currently work in

Dr. Melissa Dittberner: lots of yeses.

Dr. Melissa Dittberner: Couple of nose. Yes, in New Jersey. Yes.

Dr. Melissa Dittberner: all right. Well, that gives us. Thank you so much for for chiming in and feel free to keep posting things in the chat again. Communicate with each other. That's how we learn. It's just not like the pure support that we give others when we're working with them. This is the same, the same thing, right? We learned best from peers.

Dr. Melissa Dittberner: So again, thank you for sharing whether you can or cannot work remotely. And I'm excited to talk to you about what things look like to to work via to of platform.

Dr. Melissa Dittberner: So here's our objectives for today. we definitely want to understand the importance of being up to date on law surrounding Tele, and we'll talk about what those look like identify and tell how skills that work best.

Dr. Melissa Dittberner: It's not that there's some that work best. but there are some that work more efficiently, I would say. And how can we utilize the skills that we already have and bring them to a computer setting, whether it's little things like I was just doing like making eye contact with the computer camera or making sure that I'm still using some of the verbal queues that I can use, that you can see

Dr. Melissa Dittberner: by being interactive in that way as well. And what does it look like to work with clients via text email, chat video apps. We're going to talk even a little bit about VR today. And what that could look like to move our field of being a peer specialist to the next phase. How can we reach people with that anonymity? And what does that look like?

Dr. Melissa Dittberner: And down the road. I'm gonna ask you how you feel about that, what your thoughts are on that and then recognize the need for safety when working appears online. So we do have to have some special components, or I feel like we do have to have some special components put in place to make sure that we're reaching people where they're at, and that we have the safety protocols put into place. For when we're working via tele health to get them the tools

Dr. Melissa Dittberner: and skills and resources that they might need in a different way.

Dr. Melissa Dittberner: Oh, sorry. I'm clicking all the buttons here. So the outline of what we're going to talk about today is pretty much just hipaa importance. How? How does this apply to your specialist? What does it look like? Especially if you're being reimbursed by Medicare, which I know isn't currently across the board in the United States, but my fingers are so so cross that we see that change soon, very, very soon. I just got an email today about

Dr. Melissa Dittberner: implementing care specialists into drug courts. And what's the best way for us to be training people as they're in as they are drug court participants. And it's so great to see all these different

Dr. Melissa Dittberner: spaces where your specialists are being implemented. We know that you know, peer work has been around for probably forever as long as people have been people. But

Dr. Melissa Dittberner: really, in the 19 nineties, when we looked at what did a cancer navigator look like that was kind of our first like. Aha! Moment for oh, we can take people who have been there and done that, and we can help them, or we can utilize them to help other people navigate the same process. And so we've been seeing this for many years, and how it works. And I and I love that. It's, you know, best practices and getting put into our field. But we're also getting it put into every little space. And and I love to see that happen. So we want to understand what the rules are.

Dr. Melissa Dittberner: We're going to talk about the 3 main parts of hipaa that we should really be concerned with, or at least understand. And I'm going to throw in a caveat here to say, I am no expert in hipaa. There are people who know a lot more than me, but I know how it pertains to me and the safety protocols that I take into consideration when I'm thinking about working with other people, and then online tools and skills to work with peers online. So we want to look at

Dr. Melissa Dittberner: the best practices tools that we have. You know you, you may not know that a Google phone number or a voice over Internet phone is, is not hipaa compliance? So, being aware of those little things that we just may not know will keep us safe, and also keep our clients safe as well. And then one of those practical applications for utilizing our skills and the tools that we have readily available to us

Dr. Melissa Dittberner: via online to work with our clients. And then we'll open it up for questions. But honestly, you can ask questions throughout the whole time.

Dr. Melissa Dittberner: and I'll try and take a breath every now and then for someone to get a question in.

Dr. Melissa Dittberner: So I want to start by saying that I really feel like the opposite of addiction is not so bright but that it is support. And for those of you who are currently in this field doing this work, I really appreciate you because I know that what you're doing. And the skills that you have is helping other people in a huge way, we really can't

Dr. Melissa Dittberner: measure the impact of what prevention looks like. The impact of what support looks like and and how that ripple effect just amplifies out. So I just wanted to take a moment and say, Thank you for the work that you do, even if you're not a pure specialist. Now, even being on here and educating yourself about best practices, what it looks like and how you can help people is is a wonderful step in the right direction for us to to help other people stay safe and healthy.

Dr. Melissa Dittberner: So I'm going to do for those of you who are not for support. I just want to do a really quick overview. I I feel like this map makes me happy. So we're going to start with that. So I just if your support is a person who essentially has some sort of lived experience, and that could be an addiction, mental health, or even a loved one who helps other loved ones, navigate what it looks like to support someone who is struggling with an addiction issue or a mental health, a crises or the likes thereof. So

Dr. Melissa Dittberner: if you've been impacted in one way or another, you can really help people moving forward. And and I love that so like the minute someone knows that they want to need help. It is the the

minute that your specialists can help across across this journey. And of course this map is not completely comprehensive, right? But this is just an idea of the multitude of ways that we can help people, or that we can be on board with them as they walk through all these steps.

Dr. Melissa Dittberner: and I always put remission on there, because I feel like it's so important for us to talk about what remission looks like. And even if you're currently out in the field working with people and and being a helper, I think it's still a good reminder to look at remission and what it can be right. We think about a person with multiple sclerosis. Maybe having some sort of

Dr. Melissa Dittberner: lesion increase. Right? They have some sort of something that means that they need extra treatment. We might call that remission, and that just means that they're

Dr. Melissa Dittberner: recovery path needs to get changed. Just a smidge to help them stay healthy in the state that they're in, and that is no different in the addiction field, right? Sometimes the coping skills and the strategies that we've used have

Dr. Melissa Dittberner: have reached our limit, and it's time for us to re, look at what things look like. So do we need to go back to treatment? are there support groups that we need to be attending. Do we need medical assistant treatment? If we went into floor mission therapy, what does that look like? Do we need extended care with our peer specialists? We need extra time with them. What, what are these things look like? And so just a reminder of all the different ways that we can help? And again to kind of keep our minds open. I know all of us have walked our own journey.

Dr. Melissa Dittberner: and so we really use our lens right when we look at what our journey looks like, but everybody is so terribly different, based on their based on their lived experiences, based on their lives, their surroundings, the way they were raised, the ideas that they have, and that's great. That's what makes us amazing. But it also means that sometimes it can be a challenge to figure out what you know, what works next, what the next step is, and how to help people. And so just a reminder that those things are things we need to take into consideration when we're working with people.

Dr. Melissa Dittberner: So what is hipaa? I'm not going to read this to you because I'm presuming that all of you can read But the things that we're going to talk about is what hipaa is comprised of so privacy, security, security, and this breach of notification rules.

Dr. Melissa Dittberner: So what I really want to pick out of here is the privacy rule gives patients the right to examine a copy of their medical records, including an electronic copy or electronic records if they request right? So we want to make sure that we understand what that looks like. And then the Phi that comes with that or the personal health information. that we hold on to needs to be safe and secure. We need to make sure that we understand how we can utilize the tools online specifically

Dr. Melissa Dittberner: to make sure that there's no breach and in their information and their personal information. So it's okay to keep all that information. And we want to keep that information, especially notes for helping them move forward. What's worked in the past. And so that's kind of why I've talked about the map right? And especially remission. So we want to know what happened, what work we want to work with other care providers. We're part of the team, and so moving forward, you know, we want to make sure that we're keeping them safe in these ways as well.

Dr. Melissa Dittberner: So my next piece that I want to talk about is really that security rule and what that looks like. So the security will include security required to protected patients. Or this E. Phi, so this you know, through the Internet, confidentiality, integrity and availability. So making sure that we use the tools that we have in in a safe way and making sure that the tools are safe, right? And we're going to talk about different ways

Dr. Melissa Dittberner: to make sure that those tools are safe that we're using. But really, this, this is a must for us in our, in our confidentiality. So we need to make sure that we are aware that the things that we're using are meeting the marks in those areas.

Dr. Melissa Dittberner: And then the last piece is this, reach a notification rule. So you can

Dr. Melissa Dittberner: look at health and human services would be the first place that you contact. You would probably contact the person, or you would definitely contact the person. And then maybe even the media depending on how big the breach was. So we need to make sure that we, if something does happen and things do happen. We're human. And people that

Dr. Melissa Dittberner: try and get people's information are very crafty, right? But we need to know what the process might look like if there was a reach of information, how we would notify those people to make sure that they're safe. So that's kind of what we're looking at overall again. That cave out of. I am not a hipaa expert, but I know what parts are important, and there are other ways to get that information, and you should be looking at. You know. What does Hippa mean to you in your field? And how do you utilize that knowledge in order to keep people safe.

Dr. Melissa Dittberner: So some considerations are state certification. So making sure that you have your state certification, what does that look like? And then The boards of the State. These are places that we can look for information. Make sure that we're meeting the mark, staying in our scope of practice and keeping people safe in those ways, too.

Dr. Melissa Dittberner: So again, just

Dr. Melissa Dittberner: our diligence. Is this ongoing exercise right? Like I said, you need to make sure that you're looking at the newest rules. And we're going to talk about the newest rule change that just came out here in a few slides, but making sure that we know what the newest rules are. especially after Covid. And then how to test for compliance. What are those certifications look like? We're going to talk about a Baa or a business associate agreement, and how that can really keep us safe when we're looking at using a telehealth platform or other tools to reach our clients.

Dr. Melissa Dittberner: All right. So we're going to look at skills and tools for online work.

Dr. Melissa Dittberner: So what does it look like to work with people on this online setting? Right? We have this myriad of tools that we can choose from and pay for on the Internet. But what do we need? How can we help people? And even, what do we do to make tech easier for those who aren't? Maybe as tech savvy as as they could be? working in this online platform.

Dr. Melissa Dittberner: So

Dr. Melissa Dittberner: thinking about that we're going to move on a little bit further here. So first, what are our skills that we can utilize

Dr. Melissa Dittberner: and an online platform

Dr. Melissa Dittberner: that we already have. So I'm going to allow you to just kind of jump in the chat here. But how are tools different that we would use our skills different that we would use from online working with someone in a face-to-face setting. What skills would we use? Or how would we use these skills differently in those settings?

Dr. Melissa Dittberner: Anybody have any ideas? How do we use these skills, different body language, and be an issue? Yeah. how would you see if I was nervous and shaking my leg right? I'm shaking my leg right now. It's really hard for you to see that I'm that I'm nervous. If I was nervous, right?

Dr. Melissa Dittberner: Use the same skills. Yeah, I think there'd be ways that we would would

Dr. Melissa Dittberner: change them just a bit in certain areas, right? Are non-verbals.

Dr. Melissa Dittberner: Eye contact is important in a virtual setting. Yeah, absolutely making sure that you're looking at that camera.

Dr. Melissa Dittberner: The culture yeah, culture can make things completely different, right? Because some of the things that we're talking about might not be the same from culture to culture. And it's extremely important to be aware of the cultural differences in order to understand your client. Anyway.

Dr. Melissa Dittberner: what are the feedback do we have here?

Dr. Melissa Dittberner: Hmm, yeah. Texting being utilized? You can't tell the tone of voice. I just saw a name today that said, I wish there was a different font for sarcasm and anger, and all the different emotions. So that way, people better understood. You'd be a text. I mean, that probably says something about our society. But we'll we won't go there.

Dr. Melissa Dittberner: nonverbal over the phone affirmations because the client can't read you beautiful. What a wonderful answer! And that's my first note. There is that verbal right is

Dr. Melissa Dittberner: sometimes it's hard

Dr. Melissa Dittberner: to verbalize things that we would normally see, or we could just we could feel when we were together. And so, being able to say, you know, how.

Dr. Melissa Dittberner: How are you feeling today? Show me this. Show me that you know what it I need you to tell me things verbally, that you might have shown me in a face to face setting without even saying anything right like if I'm crossing my arms, you can't really see them. So if you're frustrated, you really have to tell me if you're frustrated so I can get that feeling of how I can, how I can work with you.

Dr. Melissa Dittberner: These are great answers. Let's see what else is on here.

Dr. Melissa Dittberner: Technical difficulties. Oh, man, that's a rough one right there, right? And we have to have a plan for that. And that is something that we're definitely going to talk about. What do technical difficulties look like? So when I said that we would have different tools that we would utilize for everyone. but for people who are maybe a little technology challenge not unlike myself. Sometimes my business partner might tell me But being able to say, Okay, here's the outline for what we're going to do. This may not?

Dr. Melissa Dittberner: You may not think that telehealth could work for you, but I would. I would want to try this, especially if they were in a remote location, or if you have a reason that you want to meet with them remotely, you know, talking to them about what that could look like and how to best utilize those skills. I think it's super important. So sending them on an email, if you're going to be via zoom, and they've never used zoom before, man, that is, when I first started teaching tele health classes on zoom.

Dr. Melissa Dittberner: and I had to walk my students through zoom before zoom was cool. It was. It was a lot. I'm not gonna lie to you. I had to really work to get them to feel comfortable with that even in the telehealth course. And so.

Dr. Melissa Dittberner: having a little write up for what? It doesn't look like to loving the zoom doing a run through first. Right? Okay, we're going to meet on Tuesday, and we're going to do 5 min. We're going to get you logged into zoom. See what it looks like. You can feel comfortable with it that way when we meet for a full session. We're good to go right. if we get dropped. Say, we're in crisis. Somebody is in crisis and the the line gets dropped. What do we do? You're not going to let them know. Okay, if Zoom gets dropped.

Dr. Melissa Dittberner: I'm gonna try and log back on right away. And if I don't see you log back on. I'm gonna I'm gonna send you a text. And if you don't answer the text I'm going to send you, I'm going to call you. And if you don't answer that phone call, I'm going to have to call someone to come and check on you to make sure that you're okay.

Dr. Melissa Dittberner: and just let them know. This is the progression of things for every client. And this is what will happen. So if something does happen during a crisis time. You have a plan for what that can look like to to reach those clients. So really planning, I think, is what I'm trying to say there in a long term is just making sure that you have the plans that you need in order to make sure that your clients are

Dr. Melissa Dittberner: safe making sure the cameras on on both ends. Yes, that keeps us feeling comfortable, right? We know that they're there. They're listening. And another reason to have our camera on is to make sure

Dr. Melissa Dittberner: that no one is also in the room with them. Right? We want to make sure that they're by themselves that we're having this one on one session with them that they don't feel like. Maybe they're intimidated by somebody else in the room, or they couldn't say something to us that they would normally

Dr. Melissa Dittberner: say, because someone else is there. And so you know, I've asked clients before. Hey, show me around your room. Take your take your phone and just give me a give me a tour. So if it was somebody who we might have, we might have a question about their abstinence. If abstinence is their

goal, you know. What does it look like for us? Checking for absence, you know. Hey? We talked about maybe no more injection. Use How is that going for you?

Dr. Melissa Dittberner: You feel comfortable, showing me your arm, you know, or something to that effect, or Hey, take me on a tour running house. I'd love to see what it looks like, making sure that things are safe. And if there's tools that you can utilize to give them to make sure that are to help them, maybe be in a safer space looking at harm. Reduction techniques. I think that's perfectly okay to say those things those are things we could not do

Dr. Melissa Dittberner: if we were in a face-to-face setting. We could never see around their personal space, or maybe even meet their family members quickly. Hey? Oh, your mom's there, that's fabulous. Let's let me see, mom, I've never met her before. This is great kind of thing, so there are different ways to to utilize that.

Dr. Melissa Dittberner: reply, to let a person know that you're actively listening, absolutely. So, making sure that there is some sort of confirmation that that you're there, that you're listening, and that you care because maybe a headshake is all you would normally need, and maybe a headache is fine via chat to. But maybe you want to say a little bit more often, hey, I'm I'm listening. This is great. Keep going, or let's keep moving in this direction. This is, this is good info, or I'm proud of you, or whatever you know affirming thing, you might say.

Dr. Melissa Dittberner: okay. So we talked about technical difficulties hang on. I'm scrolling through. You guys had a wonderful this, and I want to make sure I hit

Dr. Melissa Dittberner: encouraging earbuds absolutely. I say the same thing, too, so earbuds or your phones. What that let you know is that no one else is listening. So if there was someone else in my house, which there is I would make sure that I if I was in session, I would make sure that I had headphones on so that way. You knew that nobody else is listening to our conversation, the nature of this conversation. It's okay for me to not have headphones on today.

Dr. Melissa Dittberner: but that is definitely a skill that you would want to use and and to have them use as well. Right? So they don't have to hear you speaking as well. having a plan for disconnections. Yeah. We talked about that

Dr. Melissa Dittberner: walking them through what confidentiality might look like in working in a situation like this. Yeah, absolutely.

Dr. Melissa Dittberner: And there's a there's a comment that says, for some anxiety goes up when they leave their house. Absolutely. So. This is why I love telehealth. The most is being able to meet people where they are right. I live in South Dakota. And it's very rural there. And so I want to be able to reach someone on the other side of the State

Dr. Melissa Dittberner: who needs the skills that I have, even if it's not the way that they would truly enjoy the services, but at least knowing that they can get those services, and a lot of other States are very rural as well. I mean Hawaii. talking to their boards around here about what telehealth and peer supports can look like and how we can, you know, connect people in a walk with people in Mali, and how we can

make sure that they get the services they need, because not everybody on every island has those skills.

Dr. Melissa Dittberner: So I get so excited about being able to reach people where they're at. And and we talk about this all the time with addiction. Care is, you know.

Dr. Melissa Dittberner: client-focused, client-centered, individualized treatment.

Dr. Melissa Dittberner: But sometimes, I wonder, are we truly able to do that? Are we doing that? And I think this gives us the space to do what we need. It gives us a space to reach them. If they have anxiety about leaving the house, we can meet them without them leaving their house. We don't need to go back to the Times, where we meet in person all the time, if it's not best for our client.

Dr. Melissa Dittberner: And we talked about disconnect and what that would look like. Hey, I see some confirmations here of things I was saying, and thank you for that, because that's the way it's nice to know.

Dr. Melissa Dittberner: yeah, what confidentiality would look like. Okay, great. So I think we kind of went through your list. And I really appreciate all of you jumping in because it helps me kind of bounce off of what you say, and I know that you're listening to me, which is even cooler yet. So the active listening, we talked really about what active listening could look like our nonverbal and our verbal skills. I don't think we realize on a day to day basis unless we're super mindful how much nonverbal communication we give.

Dr. Melissa Dittberner: So I challenge you today to think about your nonverbal queues that you give other people for the rest of your day. It's early morning here, so I got a long time to do that. But for the most of you it looks like you're in Central or Eastern time. So you might have just a few hours left, which is fine. Take that time and think about your nonverbal queues that you're giving other people? Are you rolling your eyes

Dr. Melissa Dittberner: at a conversation that you don't feel comfortable with? Or maybe your child said something that you' to do a little. And you did an eye role. What? What do these things look like? Did your kid get to see that I role? If they did. What did that tell them if they didn't, what did it tell you? Right? So I I challenge you to be mindful about your nonverbals and what it looks like, and our active listening and our verbal roles right into there, right? How do you let other people know you're listening to them? And then how do you do that via tele health communication?

Dr. Melissa Dittberner: So being able to again make the eye contact with that camera, and I I'm telling you right now, sometimes it's hard. I like to look over. I have notes over here, so I want to like, look over and make sure I'm you know, communicating everything with you that I wanted to say, but at the same time I really want to make sure that you know that I am paying attention, and then I'm here and locked in and focused on our conversation and our communication through this webinar today.

Dr. Melissa Dittberner: So what is motivational interviewing look like through tele health. And I think it's exactly the same. Again we add a little bit more of that verbal. And making sure that we're we have that confirmation right that not only that we're listening. But when we, you know, stop back to someone kind of what they've already said, you know, taking their words and maybe just moving them a little bit.

Dr. Melissa Dittberner: making sure that we're we're locked in with that. And again, our body language, so are we shaking legs? Are we crossing arms? Are we looking off? Are we board? Are we doing other things that kind of are giving some signals.

Dr. Melissa Dittberner: using a headset being organized right? If you have their plan next to you that, you guys are working on, you know, maybe on another screen, or your phone, or even a piece of paper, whatever it looks like for you, whatever way works best for you being organized. With that you don't want to be like. Oh, let me share that. Let me share my screen with you really quick. You know, I know we were talking about Maslow's hierarchy of needs, and how it's so important to hit that bottom rung of needs.

Dr. Melissa Dittberner: And oh, hang on! I'm fumbling through everything, and not to say that people don't make mistakes. I'm surprised honestly, that my Powerpoint presentation hasn't done something crazy yet.

Dr. Melissa Dittberner: and I hope it stays good. But you know things happen. But be organized. Let them know that you are on target, that you know what you're talking about, that you know what you're doing, and that you can navigate the technology that you're expecting them to use.

Dr. Melissa Dittberner: there's always a learning curve at the beginning. So don't you know? Don't get shook up about any of that, but just making sure that you're consistent with what you use and what you do. You let people know when there's changes, and what those changes could look like in order to make sure that they have the comfortability, the time and and care to to walk through those things as well. And then time management.

Dr. Melissa Dittberner: So when we jumped on the zoom today on this webinar, I learned something new that I'm going to utilize. They let everyone in 3 min early that allowed you to prepare kind of get logged in, and then We could start immediately on time. Well, for the past.

Dr. Melissa Dittberner: as long as I've been using zoom, I let people in right at the minute, and then I wait 3 min. Well, that's not really being conscious of other people's time. So from today forward I will be switching that and logging on 3 min earlier, allowing people to get in 3 min early, and then making sure that I start directly on time. That sets a tone

Dr. Melissa Dittberner: not only for you all to be, you know, in the space early and on time. but to know that things are going to start on time. And that's the way it's going to be. And I really appreciate that, too. We do have to watch that we don't.

Dr. Melissa Dittberner: you know, start 5, 1015 min early, because then that let that could let a client know that. Oh, I can log on early, and they'll let me in early every time, and we'll have extended time together, or whatever that might look like. Right? So you want to stay a little strict with what that looks like. Let them know if it's via zoom that you'll be letting them in, you know, however early or right on time, or whatever you choose.

Dr. Melissa Dittberner: and then what that's gonna look like. You might be in the waiting room. And that's okay. That doesn't mean you're in the wrong place. It just means you're gonna be in the waiting

room until the meeting starts so again, walking them through what all that looks like.

Dr. Melissa Dittberner: and making sure

Dr. Melissa Dittberner: that you're keeping an eye on the clock, not only to be respectful to yourself, but to be respectful for them too. So if we say we're going to start at this time, you really need to be there at that time, and then you want to make sure that you're giving them the ample amount of time to communicate their needs and walk through the things that you would normally walk through and that you're not running out of time at the end of your session. I feel like in my experience and my experience with my students. Often we realize that sessions seem to be a little bit shorter via zoom. And I'm not

Dr. Melissa Dittberner: a hundred percent sure I should look at the research. Why, that seems to happen. But zoom sessions seems to be a little a shorter, and that's probably fine. Maybe you would meet twice a week, having a 30 min zoom session instead of an hour session, whatever, again, is best for your clients and best for you.

Dr. Melissa Dittberner: So I see there's a couple of questions. Should we tackle what? I look at those?

Dr. Melissa Dittberner: Oh, those aren't for me. Okay, good. I want to check the check or 2 before I get going too far.

Dr. Melissa Dittberner: Oh, nightmare stories! Yes, like, make sure that your hair is the way you need it before you log on right. This is not a place for you to picture hair. This is not a mirror. make sure your significant other doesn't walk behind the screen naked. Those are things I forgot to bring up also. Watch what you wear. I did this to myself in a learning space where I should have known better, but I had a tink top on because it was summer, and I was teaching a

Dr. Melissa Dittberner: I continue in educational credit, and it really looked like I was naked from the place that the screen had me. So I use that moment as a learning moment in the moment to say, Here's what you wouldn't wear while you were doing a session online. So there are those moments, you know, ask people to do the same things that you wouldn't want them to do in your office, too. Right? So if you wouldn't have them

Dr. Melissa Dittberner: smoke at E cigarette, or a cigarette, or drink a beer, or do any of those things in your office that that stays the same, for when you're on a session as well, thank you for bringing that up, because yes, and there are nightmare stories again accidents happen, but making sure, if you're working from home, that you let your family know, you know if the door is locked, we don't enter unless maybe the house is on fire, and I need to get out right, having some

Dr. Melissa Dittberner: stipulations for your family as well to let them know what's going on. Maybe a little sign of the or that says I'm in session. maybe have them send you a text if they really need something just making sure that you're safe in those ways, too. And then you keep yourself held to that same standard and accountable for all the same things that you would ask your client to to. You know you wouldn't

Dr. Melissa Dittberner: smoke a cigarette while you're talking to your client in session, so you definitely

wouldn't do it while you're on zoom as well. So yes, those were great things to bring up. I appreciate that. So how do we integrate technology into existing services. So kind of what I was speaking to earlier was making sure that, you know we have

Dr. Melissa Dittberner: the ability to use things that are hipaa compliant first of all. But what does that look like for our clients? What works best for them? Is it

Dr. Melissa Dittberner: charging people online? What does that look like? And how do we stay safe there?

Dr. Melissa Dittberner: Is it meeting with them via chat or text? How do we stay there? again? I want you to think about. How do you stay inside your scope, too? peer specialist

Dr. Melissa Dittberner: are kind of a newer profession, if you will, especially in the addiction

Dr. Melissa Dittberner: field. So what does it look like for us to stay in our scope? I know sometimes I've had to really talk to counselors in the field about the differences between peer specialists and counselors, and how it's a collaboration we work together. It's not. We're not doing the same thing. It doesn't look like the same thing. We can both support each other.

Dr. Melissa Dittberner: but we really need to know what is our scope look like, and how do we stay inside of our scope one of the tools we need in order to stay in that. And every State looks a little bit different about who care. Specialists can work with where they can work with them, how they can work with them. So stay on top of what your state regulations are, and I'm sure you know this and stay on top of any changes that come out to, you know. Sign up for

Dr. Melissa Dittberner: informational emails that would come out. Stay on your association, stay in the loop of what's going on, so you can keep yourself safe. And others think about clients who are not good candidates for technology based therapy. Again, we talked about the not so technology-friendly humans, and how this could be hard. But I didn't talk about what it could look like to not have technology. So

Dr. Melissa Dittberner: in the last few grants that we've worked on, we've added

Dr. Melissa Dittberner: purchasing tablets for people so that they could work. So not only the people who are peer specialists, but also the clients, so they can have a tablet to to communicate with as well. So kind of breaking down some of those barriers. And I feel like

Dr. Melissa Dittberner: the one thing that I really love about being a peer specialist and supporting peer specialists and doing research on peer specialists is that we break down barriers. That is essentially what we are here to do, and we want to keep breaking down barriers for our clients as well in order to get them the services that they need.

Dr. Melissa Dittberner: But what does it look like to not be a good candidate for that, you know, if they don't have those tools. What could we do? Could we suggest that they go to the counselor's office? And they maybe have a computer that they could use? is their technology that they can utilize at the library, you know, especially if it's somebody who, you know, you wouldn't be able to reach any other way. so

what are those?

Dr. Melissa Dittberner: What are those barriers look like? How can we break them down? How can we get creative and and make sure that we reach people where they're at.

Dr. Melissa Dittberner: And then what are you? Some significant barriers for teams? And I'm going to pose that question. What are some significant barriers for working with teams.

Dr. Melissa Dittberner: Privacy. Yeah.

Dr. Melissa Dittberner: parents, absolutely.

Dr. Melissa Dittberner: Oh, getting them to stop using other apps while you're talking to them. Attention span. Yeah.

Dr. Melissa Dittberner: Absolutely finding the peers to work with them that are, that are teens. If that's what we're looking for. Right here is our people who look and sound like you.

Dr. Melissa Dittberner: Some more skill that we'll work with with the technology that could be too right? This generation definitely knows how to use technology.

Dr. Melissa Dittberner: Yeah. And then making sure that they, you know we can. We can work with them that we have the okay from parents to work with them. And what does that look like

Dr. Melissa Dittberner: when we're thinking about. What if the parents are part of the reason that the

Dr. Melissa Dittberner: teams need that peer support? Right? So what does that look like? So I think it's

Dr. Melissa Dittberner: development maturity and being responsible. Yeah, absolutely making your sessions, being there on time, doing what you need to keeping them focused and engaged. Absolutely. Trust. Yeah. Oh, man it, though I can't think of anything harder than building your poor, and trust with a

Dr. Melissa Dittberner: with a teenager, especially a scorn teenager sometimes that that can be difficult, and I'll blame them teaching them how to express their feelings. Boy, I feel like that's all humans. But yeah, you're definitely right, especially if they've never been modeled, what it looks like to have feelings or what feelings can feel like.

Dr. Melissa Dittberner: can. And adult understand their language? Yeah, turns out we can. I work with college students primarily, and I have learned to speak their language. I think sometimes they laugh at me when I use things wrong, but for the most part we can do that for sure. But yeah.

Dr. Melissa Dittberner: making it not look like, you know, if it's not teen on team mentoring, then what does it look like? Which is a a hoop in itself, you know. What does it look like for them to be able to trust that an adult and be able to have those relationships boundaries absolutely on both parts. Right? Because you not only have this hierarchy, but then you're also older and have some more experiences, too. So what are those boundaries look like? And how do we keep them safe? And I think that could be with anything

that we talk about

Dr. Melissa Dittberner: with care. Specialists work as you know. What are those boundaries look like? Because we really are taking a deep dive into people's lives, and how to help them, and what they need and what it looks like. And I think

Dr. Melissa Dittberner: for a lot of us with lived experience, you know, we just want to give back and be able to help. And and it's really important that we keep our boundaries as well for ourselves and for them

Dr. Melissa Dittberner: being open enough to understand them absolutely, being able to open your lens. I know we've everybody talks about this from from every generation. All they don't understand. Their music is terrible. Blah! Blah blah! They don't work as hard, whatever we all saying, but we all have different

Dr. Melissa Dittberner: spaces in life. Right? If we look at the boomer generation to the generation now, and the difference in life that they live, the technology that they have the climate of multiple things in the in the world right now, you know, it's it's a whole different world. So it can be hard to understand what they see from their lens. But

Dr. Melissa Dittberner: we have the skills, the tools, to understand what it looks like to open our mind, to keep our ideas open and go. What works for you? It works for you. Let's navigate that and walk through it.

Dr. Melissa Dittberner: being client center of understanding.

Dr. Melissa Dittberner: you know, opening up enough to be understanding with them, especially with trauma. Yeah, being able to understand. Trauma is difficult anyways, and to be trauma informed and make sure that they get the care they need is really important. These are great. These are great jump in. So I really, I really appreciate your feedback again. This is this is the way I love to present.

Dr. Melissa Dittberner: So next we're going to move on to some differences and similarities with this in person work and tell health practices just kind of in a different look here, we're going to look at, maybe pros and cons now instead of

Dr. Melissa Dittberner: what the technologies are. So can we get a list of pros for working

Dr. Melissa Dittberner: telehealth practices. So working with people online in an E setting, what are some of the what are some of the benefits?

Dr. Melissa Dittberner: What are some of the benefits of working with people from a telehealth platform.

Dr. Melissa Dittberner: Comfort zones, convenience.

Dr. Melissa Dittberner: Huh? If someone isn't feeling well, they can still participate absolutely

Dr. Melissa Dittberner: breaking barriers such as transportation weather doesn't interrupt appointments.

Boy living in South Korea. I get that quick access, more accessibility

Dr. Melissa Dittberner: fabulous. These answers are fabulous.

Dr. Melissa Dittberner: being present. Yeah.

Dr. Melissa Dittberner: just saving time and effort. Getting somewhere can be a lot right?

Dr. Melissa Dittberner: Helping people be more comfortable. Yes, convenience and accessibility. I would say, those are the real keys. meeting outside the normal office hours. Yeah, if that works for you absolutely

Dr. Melissa Dittberner: overhead cost of an office. Bingo. absolutely. That is a great that is a great one. So what are some of the cons.

Dr. Melissa Dittberner: What are some of the not so great parts about working with someone

Dr. Melissa Dittberner: via telehealth.

Dr. Melissa Dittberner: confidentiality, absolutely

Dr. Melissa Dittberner: no hogs. Everybody loves that. Not that personal Internet access.

Dr. Melissa Dittberner: timing. interaction aggravating technical issues. Absolutely. Hmm.

Dr. Melissa Dittberner: easy to miss those appointments. It is. It does seem a bit more easy to miss those appointments. So we do need those reminders, access technology, body language easy to cancel. It is easier to cancel. You're right.

Dr. Melissa Dittberner: Distractions in the background, loss of attention during this session.

Dr. Melissa Dittberner: not being able to see their actions. No Internet.

Dr. Melissa Dittberner: Oh, harder to pick up manipulation.

Dr. Melissa Dittberner: personal connection and different feel yeah, openness. Yeah, absolutely.

Dr. Melissa Dittberner: Connection to the provider

Dr. Melissa Dittberner: during the screens. Yeah, drug screens do look a little bit different if that's in your wheelhouse.

Dr. Melissa Dittberner: No device to use absolutely. So here's kind of a list, and I'm sure everyone tackle these harder to check for different odors. Yeah.

Dr. Melissa Dittberner: absolutely.

Dr. Melissa Dittberner: So. Here's some that I made a little list of right and I think we tackled all these. You guys are a great audience. I really appreciate this.

Dr. Melissa Dittberner: So some of those other cons I'm gonna look in person here for a minute. So some of the downsides to in person is is child care, rural barriers, and, like like you had said, you know, transportation and anxiety that that comes with

Dr. Melissa Dittberner: having to go somewhere. and it. I think it exists in a lot of us. So I think it's really important. Greater control over your environment for these pros confidentiality, and does non verbal communication queues that I think are wonderful, for in person, and and I'm not sitting any other either way, saying, one is better than the other. I just want to show you a list of both of those

Dr. Melissa Dittberner: so convenience we talked about that can do it for clients with high anxiety, decrease interruption and the daily activities. And I think in this fast-paced world. First, I think we need to slow down. But in this fast-paced world, having that decrease

Dr. Melissa Dittberner: in the interruption of things that we need to do about the day does really make things a little bit more smooth. So there is that. And then for those cons for the telehealth, it's that confidentiality, you know, regulations can be confusing. Even today as I was double, triple, preparing for this, I'm like, do I have enough understanding of this? I feel like every time I

Dr. Melissa Dittberner: dig in and start to learn. I'm like, Oh, I never thought about that! Or, Oh, man, I never even I didn't take that into consideration. So there's lots of things to think about and then equipment and technology.

Dr. Melissa Dittberner: So thank you again for your for your input. And these questions, I really appreciate it.

Dr. Melissa Dittberner: So a couple of things to think about. that, I think are important, or a couple of takeaways before we finish up here is that client privacy? We really want to make sure that we understand that

Dr. Melissa Dittberner: and what it looks like. secure software, you know, what does secure software look like

Dr. Melissa Dittberner: confidentiality

Dr. Melissa Dittberner: working across state lines some places you can't. In some States we can't work in different places, right? So we want to make sure that we know if you're living in South Dakota. But you want to work in North Dakota. Is that okay for you to do that right? Is, is there?

Dr. Melissa Dittberner: Is there a regulation there? What does that look like. And then privacy during the sessions or other people are present. who's who's on today? And what does it look like?

Dr. Melissa Dittberner: So

Dr. Melissa Dittberner: the last kind of dig in here I want to do is you know, what are the tool? What are tools that are secure and not secure. So I talked about like a like a Google phone number. Or this VoIP, which is a voice over Internet phone, right? They're not. They're not secure. they might make us feel better that people don't have our real phone number, and we can still get text messages and calls in that way. But they are not a secure line. So we want to be sure that we understand that

Dr. Melissa Dittberner: the free zoom is not hipaa compliant. A lot of payment processors, or maybe all payment processes, I think I've been told, are not hipaa compliant? And then your email, unless it's encrypted, is also not secure, and your calendar sites as well. So having. Those are all the tools that I feel like I would need if I was working with someone. So those are some that aren't

Dr. Melissa Dittberner: that aren't secure that we need to take into consideration. So

Dr. Melissa Dittberner: so what is secure right software with the business associate agreement. And we talked about this and that agreement basically says that, hey, we are hipaa compliance. And if something happens that comes back to us, and then anything, any

Dr. Melissa Dittberner: technology that works on a hipaa compliance server is also complying in that way as well.

Dr. Melissa Dittberner: So I said, I talked to you about changes in hipaa regulations. So here's that, you know, in in the wake of Covid. We had

Dr. Melissa Dittberner: things regulated differently so we could reach people. We could reach them right now, and that's

Dr. Melissa Dittberner: great, because we had a crisis, and we needed to deal with it. And so I'm grateful that they did relinquish some of those regulations in order to get people that the care that they needed. But at the same time we still need to make sure that we are doing the utmost to keep people safe, and that there that things are hipaa compliant.

Dr. Melissa Dittberner: So as of August night this year they have taken the hipaa compliance back to the way it was before Covid. You probably seen in some of your doctors, offices, and different spaces that they took tele help out, which is super sad in my world. I feel like Probably for this reason, right? The extra adding costs that it takes to make sure that you have a compliant because it's not cheap. and the telehealth platforms that it takes to utilize some of that right. So

Dr. Melissa Dittberner: as of August 9, that is the last date that people can have to make sure that they're in compliance. They gave people just the small window, I think, 3 months to make sure that everything was back in working order, and the way that it needed to be in order to to reach those clients where where they're at and still make sure that they are safe.

Dr. Melissa Dittberner: I'm assuming that paid zoom software is hipaa compliant. Yes, there is a paid subscription, just making sure that you check all those marks to make sure that it is hipaa compliance. So you'd be asking them those questions before you purchase what that looks like. And I think Skype has something like that as well, too. But again, just making sure that you're safe in those ways.

Dr. Melissa Dittberner: Thank you for asking that question.

Dr. Melissa Dittberner: So as we wrap up here, I think I have one more question for you before I totally say Thank you. What are our thoughts on? VR for peer support, so as of your support? What do you think about using VR to reach people.

Dr. Melissa Dittberner: I feel like virtual reality is a wonderful space to help with anonymity. But I want to see what all of you think as well. So pop into that chat. Let me know what you think about VR.

Dr. Melissa Dittberner: For working with your support.

Dr. Melissa Dittberner: A little bit of never used it don't have any knowledge on it. A little bit scary, not familiar with how I work. Never used it. It's not my comfort zone, scary, not familiar. Good feature potential.

Dr. Melissa Dittberner: Never use it. Okay. really don't like it. Not familiar. Not sure. I would have to see what it looked like first.

Dr. Melissa Dittberner: don't have any idea.

Dr. Melissa Dittberner: So how does it work? Well, my, my vision for how it would work? I know that they're using VR for lots of things right? I think about in the Med school or in the military using. We are to really simulate what things would look like. So

Dr. Melissa Dittberner: my thought around it, or my.

Dr. Melissa Dittberner: what I'm throwing around is, how could we utilize it to meet with people for anonymity? So they would have maybe their their space that they could go to meet with you. It'd be another place for you to meet with your client.

Dr. Melissa Dittberner: And again, I'm just throwing things out there because I'm always curious about what's what's next. Right? There are definitely some things we would have to think about virtual reality, you know. What would it cost to get a headset. This type of meeting would not be for everyone. You know, people who are experiencing homelessness or houselessness, and people who are in poverty. Obviously this doesn't reach them. But there is other populations who struggle that need our services as well. And what could that look like? I think about

Dr. Melissa Dittberner: maybe the person who doesn't want to admit that anything is going on because the stigma on addiction is so high. And how could we reach that client? again. This is it for everybody? But it is definitely something to think about moving our profession forward. And how can we have more spaces and different technologies and tools to work with people in a space that they might be comfortable in. I also think about it for training, too. So

Dr. Melissa Dittberner: how can I teach you? Or how do you truly understand, maybe, what anxiety looks like? If you've never experienced an answer that before, you can definitely have empathy right, and try and understand and listen to them, and make sure that you're, you know, communicating in that way. But

what if I could take you to a virtual reality room that simulated anxiety, and you could kind of see what it felt like or feel what it felt like.

Dr. Melissa Dittberner: I don't know just something I've been I've been playing around with. And I wanted to see what everybody thought on this call. So I appreciate everybody's input on there and what it would look like, maybe to move into that space for your specialist moving forward. Someday. So

Dr. Melissa Dittberner: I want to thank you for your time. I really want to thank you for having so much communication with me in the chat. I wish that my students were not interactive, because this is probably one of the most fun presentations I've done in a long time, and I feel like I learned things from you. So I am so so grateful. And honestly, my email address is up there, and it's there for a reason, feel free. If you have any questions.

Dr. Melissa Dittberner: or you want to collaborate or communicate, I am one email away, so feel free to.

Dr. Melissa Dittberner: So you talk to me anytime that you want, and then my last slide on here is my references. So where I got all the information. So feel free to Explore that to if you need to. And again I thank you so much.

Jessie O'Brien: All right. Well, thank you. It looks like you kind of answered all the questions as you were going, so I don't know if we have any. I'll give people a second to to that. But there's lots of thank you in the chat. So if you want to, you know, chat with people in there, you can. Otherwise I'll just get to a wrap up slides.

Jessie O'Brien: let's see here.

Jessie O'Brien: Okay.

Jessie O'Brien: so just a reminder that after this live events you can navigate to the sea. Quiz by clicking on the link in the thank you. Box. So if you end this, and you still see the same screen that was like join, for if you refresh. There should be a Thank you message with the click here to access the C quiz link.

Jessie O'Brien: you should also receive an email 1 min after this ends, some of you said that you haven't received them. I would check your junk, or you can always access everything you need in the Education Center itself. The links are just there to give you like a quick access. But if you just log into the Needc Education Center and you scroll down on the homepage. You can see your activity, and you can see all the courses that you've engaged with and the links to them, and all of the content that you need for each courses in there that

Jessie O'Brien: the live event or the recorded event, the ce quiz the Survey evaluation and the certificate. So there's lots of ways to navigate there. these are just some quick links that we try to make it easier for you.

Jessie O'Brien: Also, we have launched registration for our annual conference. It's very exciting. This year. It's gonna be at the Gaylord Rockies resort and Convention center in Denver, Colorado. We do have a peer track, so you can come and just do all things here. If that's your interest, or you can choose from

one of 9 breakout sessions each breakout.

Jessie O'Brien: it's super exciting. There's 7 days a bit. There's pre conference 3 day conference. There's post conferences. it's a great in person. Event, it's nice to be back and see people's faces. There's a lot of really positive energy.

Jessie O'Brien: it's nice if you can do it. I highly recommend it. So please consider joining us. That's the web address. There you can check out and learn more. upcoming webinars. July twelfth. We have health one less and balance. coming up, as well as improving treatment outcomes for people with cognitive impairment on July 20 sixth, and then we have the next part in this series on July 20 seventh. Professional development for peers progress, not pure affection. Ha, ha!

Anyway. So if you want to join us for that, please do, we'd love to see you otherwise enjoy your fourth because we don't have anything next week.

Jessie O'Brien: reminder of all the benefits of joining Nayak. If you're not a Needac member. consider joining one of the benefits that I like is the free. Cease to come with our free Webinar series. there's lots easy to get the Se. That you need for all your licens, your requirements, if you have those.

Jessie O'Brien: yeah, so consider it. And I think that's it. Thank you so much. Thank you so much, Dr. Dipener, for this great presentation. I know everyone really enjoyed it. hopefully, I will see some of you after the fourth

Jessie O'Brien: Otherwise have a wonderful holiday week and summer, and stay safe. Take care.