

NPS LEADING THE WAY IN NORTH CAROLINA

**BEHAVIORAL HEALTH INTEGRATION
SPRING/SUMMER 2020 NEWSLETTER**



Behavioral Health Integration Student [ZOOM-Posium](#): Capstone project details on page 5

“When I applied to the BHI program, I knew it would be a great learning opportunity; I did not envision how this program would shape me personally or professionally.” *Sophie Marian Draffin, BHI Scholar 2020*



“I can now say with confidence that my behavioral health competency will afford me the opportunity to provide holistic care for patients as a future APRN. In turn, I feel my patients will reap the benefit of better patient outcomes.” *Pamela Bohannon Duncan, BHI Scholar 2020*



“Somewhat surprisingly, the transition to all-online instruction in the COVID days has only deepened a sense of community, particularly among the BHI cohort.” *Leonora Tisdale, BHI Scholar 2020*



“I am proud of our group of graduates, and while this is a time of uncertainty and struggle, I find many moments of happiness knowing all that we have accomplished and looking forward to the future as nurse practitioners.” *Kathryn Watson, BHI Scholar 2020*



A LETTER FROM VICTORIA SOLTIS-JARRETT PRINCIPAL INVESTIGATOR AND PROJECT DIRECTOR

"THE ONLY TIME WE EVER KNOW WHAT'S REALLY GOING ON IS WHEN THE RUG'S BEEN PULLED OUT AND WE CAN'T FIND ANYWHERE TO LAND. WE USE THESE SITUATIONS EITHER TO WAKE OURSELVES UP OR TO PUT OURSELVES TO SLEEP. RIGHT NOW — IN THE VERY INSTANT OF GROUNDLESSNESS — IS THE SEED OF TAKING CARE OF THOSE WHO NEED OUR CARE AND OF DISCOVERING OUR GOODNESS." — PEMA CHÖDRÖN

Happy Summer

Teaching, facilitating grant projects and mentoring new graduates in the time of COVID-19 has been a challenge for most, if not many, faculty, grant staff and students here at Carolina. In March 2020, we were mandated in North Carolina to shelter in place. Subsequently, NP students were pulled from their clinical sites and those who were classified 'essential workers' (e.g., RNs) continued to navigate their jobs with a shortage of PPE and lack of the unknown to try to manage the transmission of this novel virus. Reframing this unprecedented moment in time required grace, patience and benevolence to counter the fear, uncertainty and loss of control that many of us felt and experienced. The grant teams have shown resilience (albeit sleepless nights) and were able to continue to provide the BHI and SUD seminars as well as prepare the Year 2 Behavioral Health Integration Scholars for graduation. No parties and no fanfare but definitely a need to pause and prepare for what would be the next stage of an uncertain time.

Through out this summer, we continue to experience the rug being pulled from under us and with that, all of the groundlessness that Pema Chödrön identifies in her words above. The dismantling of what was once normal is the reality while familiarity of the past is like a dream. To this end, we have also struggled to initiate the first HRSA funded NP Residency in North Carolina focusing on Behavioral Health Integration (BHI) and including the notion of increasing awareness, assessment and treatment of substance use disorders in primary care. Despite all this, we were able to start our NP Residency on July 1, 2020 in 7 primary care sites in rural NC where not only COVID-19 is increasing among the most vulnerable, but the proliferation of depression, anxiety and substance use disorders is being illuminated. The notion of a perfect storm does not even begin to describe the constant barrage of factors that have led to the mounting disparities among those with whom we serve in our rural communities.

The global pandemic, coupled with the BLM movement, will continue to challenge us to also identify strategies to explore our core values, biases and to confront the health disparities amongst people of color. As nurses, we have witnessed many of these injustices and some, have experienced them firsthand. It is now time to act (rather than reflect) and to this end, we shall continue to incorporate discussions and actions into our program of excellence.

As we all navigate towards a "new normal", it is essential to pause and reflect as well as to practice benevolence. I am grateful for our entire team who work tirelessly to care of those who need our care and to discover our goodness. We have established a strong and vibrant team that is adaptable in these uncertain times. May you seek and find solace in the quiet moments of your day and stay safe as you navigate this storm.

Warm regards,
Victoria



STUDENTS VALUE WHOLE HEALTH PERSPECTIVE

Laura (Liz) Downey is a Behavioral Health Integration Scholar who worked as an RN at Duke University Hospital in the Neurosciences step-down unit prior to graduate school. She cites an interest in serving her patients' needs and evidence of behavioral health problems in primary care as motivation for her interest in behavioral health integration. "I think strong communication skills are most important when integrating behavioral health into primary care." The additional education as a BHI Scholar has helped increase her confidence when having sensitive conversations with patients. She values learning the best approach to earning patient trust and how to ask questions in ways that are more likely to engage patients.

Liz cites weekly educational sessions in year one of the BHI program as most valuable. The sessions allowed her to gain a deeper understanding of assessing and treating behavioral health disorders in primary care. The educational sessions provided an opportunity for her and her classmates to bring real patient examples from their clinicals and receive feedback from BHI instructors. Close friendships she made among a small cohort of students are an added bonus to the BHI program. She also had the opportunity to attend two conferences as a BHI Scholar. The first was in Philadelphia on integrating behavioral health in primary care and the other was in Chapel Hill on assessing and managing substance abuse disorders. In addition to topics on suicide and motivational interviewing, the conferences allowed her to network and learn about others who are doing work related to BHI.



"Whole Health Care means treating the whole patient and not just a single diagnosis." This holistic care means addressing patients' physical and mental health, as well as their social and spiritual needs."

Liz worked with Elisabeth Johnson, PhD, FNP-BC (a member of our grant team highlighted below) during a Sexual and Reproductive Health clinical rotation at UNC Horizons Program. This clinic is a substance use disorder treatment program for pregnant and/or parenting women and their children. During the rotation, she saw patients for prenatal and postpartum care at the weekly clinic with Dr. Johnson, a peer support specialist, and/or a social worker. She also participated in weekly Women's Health group meetings that Elisabeth Johnson runs as part of the outpatient treatment program. She valued seeing how behavioral health providers and the nurse practitioner see patients at each visit and the profound effect of Medication Assisted Therapy (MAT) for individuals with substance use disorder.

Liz feels that being a BHI Scholar will influence her primary care practice in multiple ways. She plans to screen patients for depression, anxiety, and substance use disorder. She also plans to complete MAT waiver training in order to prescribe MAT in primary care.



DR. ELISABETH JOHNSON SHARES HER EXPERIENCE

Dr. Elisabeth Johnson, PhD, FNP-BC, is a member of our grant team and the Director of Health Services for UNC Horizons, a substance use treatment program for women and children. They provide integrated care including prenatal care, well-woman care, medication assisted treatment, psychiatry and behavioral health with group treatment, individual therapy, case management and child therapy. She has been a member of multidisciplinary teams providing behavioral health care throughout her career. She values input from all clinicians to provide a more complete picture of the individual. In her current work at Horizons, she expresses gratitude for her behavioral health colleagues and their integrated team approach.

“I am in awe of the women that I care for. Society portrays those with substance use disorders as a bit of a lost cause. They are some of the strongest people I know for they have overcome tremendous obstacles. When a woman achieves recovery, it changes not only her life but that of her children and all of the people who care for her. It is an amazing thing to witness the journey.”



To Dr. Johnson, Whole Health Care is caring for the whole person: mind, body and soul. All of these aspects are important and while she may not be able to address each domain for every patient, she knows that with a team, the chances are improved. Being a part of this grant team has helped reconnect her with all of the reasons that she chose to be a nurse practitioner. She finds it refreshing to be in a group of health professionals who understand the importance of integrated/whole person care. Dr. Johnson is working on our team as the MAT Coordinator for the ANEW grant and the Maternal Health Content Expert on the NP-R. She advises prospective students of the need to take a moment to think about their own perceptions of substance use.....we all have them....we cannot escape the society in which we live. She encourages honesty with ourselves about preconceptions to better care for our patients. She says it is also really important to be aware of your own triggers and to learn to take good care of ourselves. She finds this work extremely rewarding and some days it is really difficult. She urges prospective students to have a network of people to talk to and process their thoughts. She also finds it really important to have a self-care routine. She loves this work and feels fortunate to have a job that she looks forward to every day. She has learned the value of gratitude and begins and ends each day by naming something for which she is thankful. She has taught this to her children and feels it really helps keep everyone well grounded.



FOURTEEN BHI SCHOLARS WILL GO INTO THE WORLD AND DO AMAZING THINGS

The BHI program is so popular we expanded capacity beyond what we first envisioned. We are thankful for this cohort of students. We learned and grew together. They are an exceptional group who will advance the practice of nursing. You reaffirmed why nurses are critical to healthcare and what is most important about what we do. This is a tough time to launch your advanced practice career. Thank you for your commitment to this work. We are proud to call you our colleagues.

STUDENT ZOOMPOZIUM

In early April, we had our very first BHI Student Symposium to spotlight capstone projects. We planned a big, face to face, event where students would present their master's project followed by poster presentations. Due to the COVID-19 pandemic, the event turned into a virtual ZOOMPOSIUM! While we scrambled to modify the format, student flexibility and dedication never wavered.

BHI Student Masters Topics

Matt Marvell	Behavioral Health Needs Assessment for Primary Care NP Students
Pamela Duncan	Depression Screening in Primary Care
Elizabeth Zia Ward	Clinical Pathway for Suicidal Behaviors in Primary Care
Lydia Teague	Pre Hospital Symptoms of Acute Coronary Syndrome
Amy Dougherty	Outline: Correctional Health Curriculum for Primary Care Providers
Danielle Battle	Human Trafficking in North Carolina: Health Care Provider Education
Emily Morgan Brown	Trauma Informed Care in the Primary Care Setting
Charles Sayre	Chronic Low Back Pain: Opioid Alternatives
Kathryn Watson	NP Training Guide for Utilization of MAT in Primary Care
Rachel Jones	Safe and Effective use of Benzodiazepines in Primary Care
Liz Downey	"Eat, Sleep, Console": Treatment for Neonatal Abstinence Syndrome
Karley Bastien	Screening for Postpartum Depression in the Partner
Natasha Kenan & Shy'Kiya Tillman	Exploring Maternal Health Disparities in African American Women: Utilizing Digital Storytelling to Educate Nursing Students

In my professional role as an RN in the Emergency Department at UNC, I am learning from this pandemic experience that everything is unpredictable, and most things are not equitable. Through the BHI program I have developed the intuitive response to assess mental health as I triage every patient that presents to the ED regardless of the reason for their visit. Not simply with the essential questions we ask every patient, but rather by utilizing the critical thinking skills related to behavioral health that I advanced through my time in the BHI program. *Kathryn Watson, BHI Scholar 2020*



FORMER BHI STUDENT SERVES ON FRONT LINES DURING COVID CRISIS



After five short months into my journey as a new NP, I found myself hurled into a foreign concept – providing primary care in a parking lot. This time of uncertainty has only made me more thankful for my extra preparation in handling behavioral health needs!

Candace Beddard, MSN, AGPCNP is a 2019 Adult-Gero NP graduate of UNC-Chapel Hill School of Nursing and former Behavioral Health Integration Scholar. I am working at Goshen Community Health Services in Mount Olive, NC, a primary care FQHC in a rural area where resources are scarce. The ANEW BHI program prepared me to recognize and treat behavioral health issues in primary care with confidence. Many of my patients cannot afford or find transportation to mental health professionals – but I can help them while I take care of their primary care needs. Perhaps the greatest advantage of the ANEW BHI program is my ongoing relationship with Dr. Soltis-Jarrett (ANEW PI) and Dr. Sharpe (ANEW Educational Lead). Their unwavering support and mentorship has been invaluable to me as a new nurse practitioner!

Conceivably the biggest issue in my practice currently is COVID-19 and its impact on my delivery of care. After five short months into my journey as a new NP, I found myself hurled into a foreign concept – providing primary care in a parking lot. I now spend my days outside assessing patients in their cars and have adjusted to a model more akin to urgent care but still with a focus on chronic illnesses. This time of uncertainty has only made me more thankful for my extra preparation in handling behavioral health needs!

ANEW & NPR CORE TEAM MEMBERS



Principal Investigator and Project Director:

Victoria Soltis-Jarrett, PhD, PMHCNS/NP-BC, FAANP

Dr. Soltis-Jarrett is the Carol Morde Ross Distinguished Professor at UNC-Chapel Hill and has over 30 years of advanced clinical practice, academic teaching, and research grants totaling over 13.5 million dollars in the past decade focusing on education, practice and outcomes of Nurse Practitioners, and implementation of models of behavioral health integration into acute, extended, and primary care settings.

**Team Lead Education: Leslie Sharpe, DNP, RN, FNP-BC**

Dr. Sharpe is an assistant professor at UNC-Chapel Hill School of Nursing and has practiced for 20 years as a family nurse practitioner in rural communities in NC. Her practice focus is in the integration of behavioral health into primary care. With over 20 years of experience in primary care specializing in the care of patients with complex, co-morbid physical and mental health illnesses, Dr. Sharpe is committed to educating NP's to be able to apply behavioral health concepts in primary care.

**Project Manager: Shannon Gallagher, MPH**

Ms. Gallagher has a Master's in Public Health with a concentration in Health Education and Promotion. She has extensive experience in project and grant management including: USDA, the NC Rural Center, Golden Leaf, and HRSA. Her interests include in stigma associated with mental health and mental health diagnoses; cultural competence; behavioral health integration; and including the family as a member of the health care team. She currently manages several HRSA grants around behavioral health integration.

**Team Lead Pain Management: Tom Bush, DNP, FNP-BC, FAANP**

Dr. Bush is an associate professor at UNC-Chapel Hill School of Medicine. His clinical experience ranges from critical care to primary care and he maintains a clinical practice in the Department of Orthopedic Surgery at UNC where he serves as program director of the Orthopedic NP fellowship program. Dr. Bush is committed to postgraduate NP education and is developing strategies for multimodal pain management and safe opioid prescribing in primary care.

**Pediatric, Child and Adolescent Consultant:****Diane Hudson-Barr, PhD, CNS, PNP-BC**

Dr. Hudson-Barr has been in practice for 37 years in neonatal/pediatric nursing as a bedside nurse, educator, researcher, Director of Nursing Research, and most recently, as a CNS in several neonatal ICU's. Her passions include pain management, developmentally appropriate care, quality improvement, and inter-professional practices

**Team Lead Medication Assisted Treatment:****Elisabeth Johnson, PhD, FNP-BC**

Dr. Johnson is Clinical Director of UNC Horizons Program, a substance use disorder treatment program for pregnant and parenting women and their children, including those whose lives have been touched by abuse and violence. Dr. Johnson has a wealth of experience and expertise working with patients struggling with substance use disorders and will work with the team on curriculum and site development for ANEW and NPR projects.

**Team Lead Evaluation: Mary Lynn, PhD**

Dr. Lynn Mary Lynn began her nursing career at Orange Memorial Hospital School of Nursing in Orlando, Florida, graduating the same year Disneyworld opened. Her research interests include measuring quality of care, patient expectations for care, work satisfaction, instrument development and testing, and the employment of doctorally-prepared nurses. Her role on these projects is focused on evaluation, that is what data need to be collected, how often to collect them and what to do with all the information. She has been to Disneyworld 15 times and is 100% a Tar Heel fan.

**Candace Beddard, MSN, AGNP-C**

Ms. Beddard is an adult-gerontology nurse practitioner practicing at Goshen Community Health Services and was a BHI scholar in the UNC SON class of 2019. Prior to graduate school, she spent 15 years as a critical care RN. Her practice focus is primary care in rural areas with underserved populations. She is eager to continue working to integrate behavioral health into primary care and support new NP's as they transition to practice.

**Team Lead Resilience and Wellness for Interprofessional Health Care Teams: Mimi Alvarez, MSN, PMHCNS-BC**

Ms. Alvarez has been in practice for 32 years in the fields of oncology and psychiatry. Her roles have included educator, clinical nurse specialist, consult liaison for clinical services and most recently consultant. Her passions include understanding the lived experiences of patients, caregivers and healthcare providers and exploring interventions that promote the wellness of others.

**Mary Surya, MN, MPH, PMHNP-BC**

Ms. Surya is a recent graduate from the UNC PMHNP program. She studied Community Health Systems Nursing and Public Health at the University of Washington. She has domestic and international clinical experience ranging from primary care to critical care. Her interests include social justice; cultural humility; mental health & resilience of the healthcare workforce; and the integration of behavioral health into primary care.

NPs are Leading the Way in NC. We are focused on integrating behavioral health into primary care with attention to substance abuse disorders in rural and underserved populations across North Carolina. We look forward to connecting with you and welcome your feedback.



**SCHOOL OF
NURSING**

CONTACT US

General questions: Shannon Gallagher | smgallag@ad.unc.edu

PI/PD specific questions: Dr. Victoria Soltis-Jarrett | vsoltis@email.unc.edu

The University of North Carolina at Chapel Hill School of Nursing
Carrington Hall | 120 North Medical Drive | Chapel Hill, NC 27599
(919) 966-9787