

# **Blooming in the Dark: An Online Journaling Workshop to Transform Through Adversity**

## **Proposal Information**

### **Format**

Experiential Workshop (30 minutes)

### **Content Area\***

Clinical

### **Topic**

#### **Resilience & Well-Being**

Innovations in integrative medicine to enhance resilience and well-being for patients, providers, communities, and organizations. These innovations can be in the realm of research, education, clinical care, community, policy, or advocacy.

## **Proposal Details**

### **Title**

Blooming in the Dark: An Online Journaling Workshop to Transform Through Adversity

### **Overview**

Just as some flowers require the dark to bloom, some people do their best growing and transforming during the dark and difficult times in life. I call us Night Bloomers. I think there are a lot of us Night Bloomers out there. When we adopt the perspective of a Night Bloomer, we set ourselves up not only to become resilient (i.e., adapting well to adversity), but also to transform. And, we when we bloom in the dark, we do so not in spite of the adversities we experience, but because of them. This workshop will introduce participants to the concept of blooming in the dark and will provide tailored writing prompts, so that they can experience the first blooming principle themselves. Participants will have a chance to reflect on the events in their life, particularly over the last year, and to use their journaling to make meaning, find benefits, and learn lessons as a result of challenges they have experienced. The goal is to teach participants how to bloom in the dark and to experience how journaling can assist them in this process.

### **Rationale**

2020 has been a very dark year for many of us; 2021 will likely hold many of the same

challenges. It is more important than ever that people have an adaptive framework for suffering and adversity, as well as empirically-based tools to help them build their resilience. Night Bloomers takes the concept of resilience one step further in that it suggests that people don't need to just "bounce back" or "adapt well to adversity." Rather, there are certain principles and tools that can help people to become "more" than they were as a result of the dark and difficult life experiences.

Blooming in the dark is the message of my newest book, "Night Bloomers: 12 Principles for Thriving in Adversity" (2020, Xia/Dover Press). This book provides scientifically supported tools and wisdom for transforming and thriving through adversity and loss. It uses carefully crafted journaling prompts as the primary tool to help people experience the blooming in the dark principles.

Journaling has 30 plus years of research supporting its effectiveness for mental and physical health. More recent research supports its use for building resilience and for adapting to loss, particularly when tailored writing prompts are used. I will use this knowledge in the crafting of the journaling prompts.

**Objective 1:\***

Define what it means to be a "Night Bloomer" and how to "bloom in the dark."

**Objective 2:\***

Contrast blooming in the dark with resilience.

**Objective 3:**

Journal using specific writing prompts to experience the first principle of blooming in the dark.

**Objective 4:**

Receive tips for a night blooming journaling practice

**Outline**

1. Brief discussion about the benefits of journaling
2. Brief explanation of the concept of "Night Bloomer" and "blooming in the dark?"
3. Several timed journaling prompts for participants to try on the theme of blooming in the dark
4. Provide tips for a night blooming journaling home practice

**Methods/Session Format**

A live Zoom session where I will share PowerPoint slides to introduce the topic and share the writing prompts. Participants will have paper and a pen to complete the journaling prompts. Their writing will be private and for their eyes only. I have used this session format in other Zoom journaling events and have received very positive feedback.

**Submission Criteria\***

**Equipment**

Paper and pen

**Clinical Submission Details - For CME Purposes**

**Will you be making clinical recommendations during your presentation?\***

No

# Yoga for spinal and mind/body health in the time of covid and telehealth

## Proposal Information

### Format

Experiential Workshop (30 minutes)

### Content Area\*

Clinical

### Topic

#### Resilience & Well-Being

Innovations in integrative medicine to enhance resilience and well-being for patients, providers, communities, and organizations. These innovations can be in the realm of research, education, clinical care, community, policy, or advocacy.

## Proposal Details

### Title

Yoga for spinal and mind/body health in the time of covid and telehealth

### Overview

Covid and increased tele-health are challenging our bodies, mind and spirit. Sitting hunched over a computer for long periods of time are taking a toll on clinician health and well-being. A short (10-15 minute) yoga spinal series combined with breath work and mantra repetition can help us attain a parasympathetic dominant state of relaxation and improved focus. It has worked for thousands of years. Clinicians need practices that can be done in a chair, are practical, give immediate benefit and are brief yet powerful. In this workshop, participants will be introduced to a short yoga set based on Kundalini yoga, with modifications, that can easily be taught to others including patients in a chair or bed. The benefits of breath work, yoga, and mindfulness are well researched. Participants will gain a simple set of skills that are powerful in this time of covid and for their future well-being.

### Rationale

This simple spinal series combined with breath work and mindfulness can have powerful effects on posture, breathing, relaxation, focus, spinal flexibility and health to combat back and neck

pain, and increase well being with practices that increase the dominance of the parasympathetic nervous system for immediate and long term health and wellness. This simple and brief spinal series and breath can be used alone, with a clinical team, as a break in a day of virtual teaching, modified for ill patients and those suffering from physical limitations. The applications for this simple and brief set of yoga postures are limitless, and the participants will add their own ideas to other ways this set can be used.

**Objective 1:\***

Demonstrate a short spinal series with breathwork for your own wellbeing with improved focus and physical, mental and spiritual ease

**Objective 2:\***

Apply the skills you learn to other settings such as clinical care with patients, teaching to learners and colleagues, and in inter-professional teams

**Objective 3:**

Adapt this practice in your daily work routines for improved well being and resilience.

**Outline**

1. Welcome and introduction to benefits of yoga and breath work
2. 10-15 minute yoga spinal series in chair combined with breath work and optional mantra; modifications to postures for those with any physical limitations will also be included.
3. Interactive Q&A about practice itself, immediate benefits realized, and how this can be adapted to person routines, and how it can be applied in professional and clinical settings.

**Methods/Session Format**

1. REview briefly tthe research and benefits of mind/body/spirit practices such as yoga, and why now with more sitting of clinicians due to covid and telehealth.
2. Experiential component: Demonstation and instructions for practice, while participants join me in doing them in their chair. Modifications are also included to provide a safe experience.
3. Interactive learnings from experiential practice with participants, and discussion of applications of practice for self and others.

**Submission Criteria\***

**Equipment**

I can provide an electronic copy of my presentation/yoga series.

Participants will sit and do yoga from chair they are sitting in.

They will see me virtually explaining and doing postures on virtual platform for conference.

**Clinical Submission Details - For CME Purposes**

**Will you be making clinical recommendations during your presentation?\***

No

# Follow an Ancient Way, or Path, to Resiliency & Wellbeing

## Proposal Information

### Format

TED-style Talk (10 minutes + 5 minutes Q&A)

### Content Area\*

Education

### Topic

#### Resilience & Well-Being

Innovations in integrative medicine to enhance resilience and well-being for patients, providers, communities, and organizations. These innovations can be in the realm of research, education, clinical care, community, policy, or advocacy.

## Proposal Details

### Title

Follow an Ancient Way, or Path, to Resiliency & Wellbeing

### Overview

It is well known that fostering resilience can help people confront and overcome all types of adversity and improve their sense of well-being. As health care is looking for innovations in integrative medicine to enhance resilience and well-being for patients, providers, communities, and organizations this presentation will take you on an ancient journey, or path, that provides the empowering way, or instructions, on how to achieve this goal. In this Ted-style talk the presenter will reveal to you how the journey he has taken through his education in Traditional Chinese Medicine, his understanding of the literal meanings of ancient Chinese calligraphy, and his pursuits in martial arts has provided him the skills that he teaches in behavioral health settings to help patients improve their sense of resiliency and well-being as they are struggling with anxiety, depression, suicidal ideation, and addiction.

### Rationale

According to Harvard University: The worldwide outbreak of the coronavirus disease (COVID-19) is a source of unexpected stress and adversity for many people. Resilience can help us get through and overcome hardship. But resilience is not something we're born with?it's built over time as the experiences we have interact with our unique, individual genetic makeup.[1] In

addition, ?The COVID-19 pandemic and the resulting economic recession have negatively affected many people's mental health and created new barriers for people already suffering from mental illness and substance use disorders?.[2] It is because of these unprecedented times in modern history that it is time to learn innovated ways to help people improve their sense of resiliency in order to help them develop the skills that are required to cope, confront, and overcome their life challenges. Qigong is an evidence-based intervention that can be used to promote resiliency and improve well-being.[3]

#### References:

1. Harvard University. How to help families and staff build resilience during the COVID-19 outbreak. <https://developingchild.harvard.edu/resources/how-to-help-families-and-staff-build-resilience-during-the-covid-19-outbreak/>
2. The implications of COVID-19 for Mental Health and Substance Abuse. <https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/>
3. Abbott R, Lavretsky H. Tai Chi and Qigong for the treatment and prevention of mental disorders. *Psychiatr Clin North Am.* 2013;36(1):109-119. doi:10.1016/j.psc.2013.01.011

#### **Objective 1:\***

Discuss an innovative way to improving resiliency and well-being.

#### **Objective 2:\***

Describe an empowering method to increase an individual's sense of resiliency and well-being.

#### **Objective 3:**

Apply the information provided to enhance your personal sense of resiliency and well-being.

#### **Objective 4:**

Recognize how to utilize this information for patients, providers, communities, and/or organizations.

#### **Outline**

1. Resiliency and Well-Being
2. Innovations in Integrative Medicine
3. Ancient methods for modern times

#### **Methods/Session Format**

Virtual presentation utilizing power point and discussion

# Using Integrative Medicine Approaches to Improve Workplace Wellbeing of Individuals and Groups in Healthcare: Lessons from Institutions in the U.S.

## Proposal Information

### Format

Panel Discussion (30 minutes + 15 minutes Q&A)

### Content Area\*

Clinical

### Topic

#### Resilience & Well-Being

Innovations in integrative medicine to enhance resilience and well-being for patients, providers, communities, and organizations. These innovations can be in the realm of research, education, clinical care, community, policy, or advocacy.

## Proposal Details

### Title

Using Integrative Medicine Approaches to Improve Workplace Wellbeing of Individuals and Groups in Healthcare: Lessons from Institutions in the U.S.

### Overview

Healthcare struggles to address the rise in burnout and declining professional fulfillment. Despite knowledge of the downstream effects on patient satisfaction, quality, and cost of turnover, implementation of a comprehensive approach eludes the grasp of most centers. An understanding of Integrative Health approaches can bring needed expertise to this developing field but must be combined with an understanding of administrative structures, clinical operations, and collaboration with diverse groups. COVID has brought a new intensity to these discussions, leading institutions to rapidly scale up their attention to professional well-being. This session will explore how four institutions used elements of Integrative Health to develop interventions that address workplace well-being of health professionals and how they adjusted during COVID. As systems approach clinician well-being, designing a system level structure that meets the needs of individuals can be challenging. Local issues vary between clinics, departments, and specific roles. A high-level approach to policies must be met with an ability to

customize services to meet the needs of a wide range of groups. Although each institution's needs are unique and require an in-depth understanding of specific drivers and needs, examining what works at high functioning institutions can drive innovation. Our group will share models, successes, and struggles at 4 institutions. The University of Utah Resiliency Center and Chief Wellness Officer leads well-being strategy for the health system, provides personal resilience and support programs, as well as contribute to the national dialog through research. Georgetown University Medical Center and MedStar Health have expanded the mind-body medicine program in place for medical students to a broader audience including residents, faculty and staff. The University of Minnesota develops leaders who have the knowledge and skills to create cultures of well-being within their academic units or residency programs, can address system issues and tap into institutional resources. The Ohio State University Gabbe Health and Wellness Initiative has created the Mindful Medical Center uniting nursing, physician and administrative leaders in forging a well-coordinated and collaborative path forward to wellness.

### **Rationale**

Those trained in Integrative Health can bring an important lens and experience to considering the wellbeing of those that work in healthcare. Implementation of the quadruple aim has the potential to transform healthcare into a more human centered compassionate workplace that dramatically improves patient care.

### **Objective 1:\***

Identify the variability in needs in and between institutions

### **Objective 2:\***

Describe how four institutions used data to identify and address core themes impacting wellbeing

### **Objective 3:**

Explore how system and local initiatives can interface to provide broad support

### **Objective 4:**

Consider the role of Integrative Medicine in shaping COVID recovery towards post traumatic growth

### **Outline**

- ? Professional wellbeing has become a buzz topic nationwide
- ? The ultimate goal is excellent financially sound patient care, success in research, education, community service
- ? Models that address personal resilience, system issues and culture
- ? Connection and relationships are key to success
- ? Solution focused approach
- ? Measurement and tailored approach is required
- ? Considers the needs of individuals and groups will have a wider reach
- ? Self-care and personal resilience strategies have good evidence
- ? Better received when implemented alongside a close look at workload, sense of control and support
- ? Examples from programs:

- o How to address system issues alongside personal factors
- o Implementation
- o COVID pivots and growth
- o System strategy
- o Pitfalls

**Methods/Session Format**

Overview Paradigm Drivers Examination of successful programs (each program will present)  
Discussion with participants

**Submission Criteria\***

**Question/Issue 1:\***

How can we support our members in professional well-being work?

**Question/Issue 2:\***

How can Integrative Medicine transform the way we look at professional well-being?

**Question/Issue 3:\***

How can the consortium support individuals in considering their own well-being?

**Clinical Submission Details - For CME Purposes**

**Will you be making clinical recommendations during your presentation?\***

No

# Whole Health 4 You: A whole health learning campaign for educators, parents and children

## Proposal Information

### Format

Panel Discussion (30 minutes + 15 minutes Q&A)

### Content Area\*

Education

### Topic

#### Resilience & Well-Being

Innovations in integrative medicine to enhance resilience and well-being for patients, providers, communities, and organizations. These innovations can be in the realm of research, education, clinical care, community, policy, or advocacy.

## Proposal Details

### Title

Whole Health 4 You: A whole health learning campaign for educators, parents and children

### Overview

Whole Health empowers and equips people to take charge of their physical, mental and spiritual health and live a full and meaningful life. It starts with your purpose, what really matters to you, and focuses on self-care together with your community and care team. Whole Health is deeply relevant across the board in the Covid-19 era and especially important to support resiliency and well-being within school and family settings. Educators, students, and parents have been thrust into difficult scenarios in 2020 and finding ways to address all aspects of health and well-being within family and educational systems has become increasingly important. In order to support this pressing need, the Whole Health Institute in partnership with WholeHealthEd created a whole health learning hub called: 'Whole Health 4 You' (WH4U).

### Rationale

The vision of this initiative is to create an online forum for children, parents, and educators to learn about whole health and incorporate whole health concepts into their life and their educational activities. The forum includes video series with playlists that focus on connecting

kids with purpose through telling your story and ways to activate around eight areas of self-care. Additionally, each playlist includes downloadable resources, learning objectives, and more for educators and parents. The goal of these videos is twofold 1) kids will seek them out on their own via YouTube and engage organically with the content and 2) teachers will use them to support social and emotional learning in school settings with a focus on resilience, well-being, connection, and mental health. We launched this campaign on September 14, 2020 through a microsite for parents and educators, a YouTube channel, and a video distribution strategy on social media. In 2020, we created 2 videos per week and, in 2021, we plan to deploy 1 video/week January-June 2021 with a focus on creating a playlist for educators/parents on application as well as with a plan to assess impact. Within the first 6 weeks, the campaign had 112,086 views (exceeded our expectations; 2020 target was 100,000 views) and 302,332 engagements (76% of the way to 2020 target of 400,000 engagements). The video series caught attention in a number of schools and districts across the country and are being used in both online and in school formats; we will be measuring the impact within these settings in 2021.

**Objective 1:\***

Review the Whole Health vision

**Objective 2:\***

Discuss relevancy of whole health for educators, parents and children

**Objective 3:**

Describe and show examples the Whole Health 4 You Campaign, which focuses on purpose and 8 areas of self-care

**Objective 4:**

Highlight application of the concepts in school settings and beyond

**Outline**

During the panel session, we will:

- Discuss the concepts of whole health
- Describe the relevancy of whole Health relevancy for educators, parents, and children in the Covid-19 era for supporting well-being, mental health, and resiliency
- Discuss how the Whole Health 4 You campaign is poised to support whole health deployment within schools and families
- Feature a teacher and principal that has incorporated these tools into school settings
- Facilitate discussion, questions, and answers among attendees.

**Methods/Session Format**

The format of this session will be a panel discussion with three presenters from three different organizations.

**Submission Criteria\***

**Question/Issue 1:\***

The importance of focusing on resiliency and well-being within school and family settings in

2021.

**Question/Issue 2:\***

How can whole health framework support resiliency and well-being within school curriculums?

**Question/Issue 3:\***

How can whole health concepts work within the current focus of social emotional learning within school settings?

# **The Mindful Mental Health Service: Innovations in Integration of Mindfulness-Based Services into a Safety Net Healthcare System**

## **Proposal Information**

### **Format**

Panel Discussion (30 minutes + 15 minutes Q&A)

### **Content Area\***

Clinical

### **Topic**

#### **Resilience & Well-Being**

Innovations in integrative medicine to enhance resilience and well-being for patients, providers, communities, and organizations. These innovations can be in the realm of research, education, clinical care, community, policy, or advocacy.

## **Proposal Details**

### **Title**

The Mindful Mental Health Service: Innovations in Integration of Mindfulness-Based Services into a Safety Net Healthcare System

### **Overview**

The Mindful Mental Health Service (MMHS) is a growing clinical and teaching service within the CHA CMC. The MMHS builds on a referral system developed for the NIH-funded MINDFUL-PC study, which offered more than 40 primary care mindfulness-based intervention (MBI) groups and received more than 2,000 referrals. Since its inception in 2017, MMHS has processed nearly 1,000 clinical patient referrals and run 19 groups with nearly 200 patients. The insurance-reimbursable service emerged as a collaboration between CMC and the CHA Outpatient Psychiatry Department (OPD) to integrate accessible, evidence-based MBIs into healthcare for all CHA patients. With support from department leadership, MMHS successfully integrated into the safety-net healthcare system, which serves approximately 140,000 primary care patients across 5 Metro-North Boston cities. MMHS offers various mindfulness-based clinical services, serving as one of the first examples of system-wide implementation of MBIs into standard clinical care. MMHS has built a referral order into Epic, and clinically reviews each referral and

invites eligible patients to groups or short-term individual treatment based on patients' unique needs. The 8-week Mindfulness-Based Cognitive Therapy model is central to MMHS, but it also offers general and trauma-focused 6-week introduction groups, and Mindfulness Training for Primary Care (MTPC), which has been shown to promote health behavior change among those with chronic illness. Alumni with chronic psychiatric diagnoses can repeatedly participate in 12-week group psychotherapy to continue mindfulness practice and promote well-being. MMHS recruits and refers people with specific mental health symptoms to diagnosis-specific mindfulness groups for people with trauma, addiction or severe mental illness. As a teaching service, MMHS offers training and supervision to Advanced Clinical Mindfulness Fellows (e.g., social work, psychology, psychiatry trainees).

## **Rationale**

Mindfulness-based interventions (MBI) are evidence-based for improving emotional and behavioral problems, but implementation into clinical practice is lacking. There are few models to guide the integration of mindfulness interventions into healthcare settings.

### **Objective 1:\***

To describe the development and implementation of the Mindful Mental Health Service (MMHS) at Cambridge Health Alliance (CHA), in partnership with the Center for Mindfulness and Compassion (CMC)

### **Objective 2:\***

To share insights and lessons learned regarding the integration of mindfulness interventions into a healthcare setting to promote patient well-being and resiliency

### **Objective 3:**

To facilitate discussion about innovative solutions to common implementation barriers, including the COVID-19 pivot to online groups

## **Outline**

- MBIs are evidence-based for promoting resilience and well-being.
- Models for implementation of these practices into healthcare settings are needed.
- The MMHS is one model of successful, sustainable integration of MBIs into a healthcare system.
- This is an area of active discovery and innovation, ripe for active audience participation and engagement.

## **Methods/Session Format**

Part 1: Using a brief interactive powerpoint presentation (e.g., live polling, group chat), we hope to share our experiences with program development, integration, referrals, screening, intervention implementation, COVID-19 telehealth adjustment, and quality improvement assessments to inform future efforts by others to integrate mindfulness into clinical practice. Dr. Schuman-Olivier will review the process of organizational change needed for program development and implementation. Drs. Griswold and Cohen will discuss the referral and clinical review processes, insurance billing, clinical adaptations (e.g. to address trauma), and group implementation. Dr. Luberto will discuss clinical implementation and quality improvement

processes. Mr. Concannon will provide perspective on administrative coordination. Part 2: We will have 15 minutes for Q&A to engage the audience around their own questions, learning objectives, and experiences. We hope to facilitate discussion, shared insights, and group learning.

## **Submission Criteria\***

### **Question/Issue 1:\***

What are the first steps to developing reimbursable services in our own healthcare setting, particularly in the context of COVID-19?

### **Question/Issue 2:\***

How can you tell which patients are suitable for mindfulness groups?

### **Question/Issue 3:\***

How do you engage other mental health providers around leading groups, and how do you train group leaders?

## **Clinical Submission Details - For CME Purposes**

### **Will you be making clinical recommendations during your presentation?\***

Yes

**Clinical Recommendations: Please list any clinical recommendations for diagnosis, management, or treatment of patients that you will make in your presentation, including the therapeutic tests, agents, or techniques you recommend.\***

We will describe our process of screening and clinically reviewing each patient referred to a mindfulness group. Based on a patient's symptoms and functioning (e.g. trauma history and PTSD symptoms, substance use, risk of harm, psychosis, mood disorder, etc.), we recommend differing types of mindfulness-based intervention groups.

**Scientific Evidence: List 1-3 references from medical literature for any recommendations involving clinical medicine that you will make in this presentation. You must base all recommendations involving clinical medicine on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications in the care of patients.\***

Britton, W.B. (2019). Can mindfulness be too much of a good thing? The value of a middle way. *Current Opinions in Psychology: Special Issue on Mindfulness.*, 28, 159-165.

Goldberg SB, Tucker RP, Greene PA, Davidson RJ, Wampold BE, Kearney DJ, Simpson TL. Mindfulness-based interventions for psychiatric disorders: A systematic review and meta-analysis. *Clin Psychol Rev.* 2018 Feb;59:52-60. doi: 10.1016/j.cpr.2017.10.011. Epub 2017 Nov 8. PMID: 29126747; PMCID: PMC5741505.

Treleaven, D. A. (2018). Trauma-sensitive mindfulness: Practices for safe and transformative

healing. W W Norton & Co.

# Empowering and Uniting Acupuncturists Through a Global Pandemic

## Proposal Information

### Format

TED-style Talk (10 minutes + 5 minutes Q&A)

### Content Area\*

Education

### Topic

#### Resilience & Well-Being

Innovations in integrative medicine to enhance resilience and well-being for patients, providers, communities, and organizations. These innovations can be in the realm of research, education, clinical care, community, policy, or advocacy.

## Proposal Details

### Title

Empowering and Uniting Acupuncturists Through a Global Pandemic

### Overview

Stepping up during a global pandemic and crisis to educate and unite acupuncturists to become informed about current events affecting their practice, how to promote their medicine during uncertain times and a unique opportunity to connect with each other, the National Certification Commission for Acupuncture and Oriental Medicine partnered with American Society of Acupuncturists to provide updates and resources through weekly townhall meetings and other resources.

### Rationale

As a certification Board, the National Certification Commission for Acupuncture and Oriental Medicine partnered with the American Society of Acupuncturists to educate and inform the Acupuncture Medicine community through weekly townhall meetings to provide them with the latest information on news related to the pandemic affecting their practice. Throughout the period from April 1 to July 31, the NCCAOM and ASA customized these meetings to focus on areas such as CARES Act/Economic Stimulus overview for practitioners and small business

owners, guidelines for practicing safely, treatment of COVID symptoms safely, telemedicine, insurance and billing, liability, progress on Medicare initiative, and the topic of diversity, inclusion and equity affecting the acupuncture medicine profession. These timely updates were pertinent to the current events affecting practitioners and also served as a way for practitioners to connect during a very isolated and concerning period of time for healthcare practitioners, especially for those not serving on the frontlines. Attendance of these meetings were record breaking reaching 3,000 attendees who used the customized information to assist with keeping their practices open or enhancing their practices during the pandemic. The results showed greater synergy with NCCAOM and other national and state associations and building value for our certification with NCCAOM Diplomates.

**Objective 1:\***

Inform and educate acupuncturists about the latest news affecting their practice related to COVID-19 or other current events

**Objective 2:\***

Mobilize the acupuncture medicine community to reach out to patients and others about the effectiveness of acupuncture medicine for COVID symptoms

**Objective 3:**

Create resources to help acupuncturists through this difficult period on website and in all communication to each stakeholder group

**Objective 4:**

Continue to advocate on behalf of the acupuncture medicine profession about the safe and effectiveness of medicine

**Outline**

Planning Phase - NCCAOM and ASA working closely with volunteers, staff and lobbyists to create procedures for weekly townhall meetings with Q&A and resource center

Consistent and Customized Townhall Meetings - Creating content that is relevant to weekly current events affecting acupuncturists with a diversity of speakers representing that topic.

Educational value includes offering continuing education credit for every town hall meeting for free.

Resource Center - posting factsheets, information and news related from federal and state sources on COVID such as economic stimulus breakdown, state mandates affecting acupuncturists and CDC or state practice guidelines. This information was posted and updated on both organizational websites.

Adapting to Crisis - Empowering practitioners with tools to stay open safely such as telemedicine information, guidelines for safely staying open, applying for PPP and other loans, communicating with patients, etc.

Communications Consistency Regular communications sent to each stakeholder groups (certified practitioners, candidates, state regulatory staff, and others) by the NCCAOM with information on policy updates and other news that would affect each group.

Networking - Creating opportunities for practitioners to connect with each other through townhall meetings and webinar, Q&As, and using advocacy to promote medicine during pandemic

Advocacy - Working with federal lobbyists to promote government recognition initiatives such as Medicare recognition and expansion during pandemic

**Methods/Session Format**

Experiential Workshop (30 min) and/or TedTalk (10 min)

# Integrative Approaches for Lyme

## Proposal Information

### Format

Symposia (30 minutes + 15 minutes Q&A)

### Content Area\*

Clinical

### Topic

#### Lifestyle Medicine & Nutrition

Innovations in nutrition and lifestyle approaches in patient care, healthcare education, research, community health and systems.

## Proposal Details

### Title

Integrative Approaches for Lyme

### Overview

Lyme disease is a tick-borne illness caused primarily by *B. burgdorferi* with approximately 300,000 new cases reported annually. Most patients with Lyme Disease recover completely with appropriate antibiotic treatment. Approximately 10-20% of patients may have persistent symptoms after appropriate antibiotic therapy. Typical symptoms include fatigue, musculoskeletal pain and complaints of cognitive difficulties. Quality of life in this population has been reported to be below general US population. Several randomized clinical trials have shown that prolonged antibiotic therapy is not useful in treating PTLDS symptoms. The etiology and optimal treatment of this disorder is unknown. There is a significant amount of confusion, controversy and unanswered questions with respect to Lyme diagnosis and treatment of patients with persistent symptoms. Patients are often treated with various types and durations of courses of antibiotics as well as unvalidated treatments such as hydrogen peroxide infusion, immunoglobulin therapy, hyperbaric oxygen therapy. This information highlights the lack of treatment options in this patient population. There is limited research on the use of Integrative Medicine modalities in patients diagnosed with Lyme disease with persistent symptoms. However, many patient with chronic Lyme symptoms seek Integrative Medicine care. The Integrated Lyme Program at University of Maryland offers integrated approach using both

conventional and integrated therapies.

### **Rationale**

There is significant confusion, misinformation and controversy surrounding Lyme disease - diagnosis, treatment and terminology. The rationale for this session is to

- 1) clarify issues in current terminology, diagnosis and treatment
- 2) Explore Integrative Medicine options for Lyme patients

### **Objective 1:\***

Learn about the controversies around Lyme diagnosis and treatment

### **Objective 2:\***

Become familiar with current treatment options for Lyme

### **Objective 3:**

Learn about Lyme patient preferences and demographics wrt Integrative Medicine

### **Objective 4:**

Describe the Integrated approach at the Integrated Lyme Program

### **Outline**

1. Lyme diagnosis, terminology - why the confusion and controversy
2. Lyme treatment - currently available options
3. Lyme treatment - Integrative Medicine options

### **Methods/Session Format**

Talk with Q&A at the end

## **Clinical Submission Details - For CME Purposes**

**Will you be making clinical recommendations during your presentation?\***

No

# Eliciting Motivation in Clinical Encounters in 5 Minutes: A Conversation Roadmap and Skills Workshop

## Proposal Information

### Format

Experiential Workshop (30 minutes)

### Content Area\*

Clinical

### Topic

#### Lifestyle Medicine & Nutrition

Innovations in nutrition and lifestyle approaches in patient care, healthcare education, research, community health and systems.

## Proposal Details

### Title

Eliciting Motivation in Clinical Encounters in 5 Minutes: A Conversation Roadmap and Skills Workshop

### Overview

To help manage chronic disease, clinicians need tools to support their patients in behavior change. This experiential workshop will teach a simple yet powerful communication sequence that can be used in under 5 minutes in clinical encounters, to link behavior changes to patients' intrinsic motivation. This innovative workshop involves 1) helping participants understand the rationale, 2) observing a demonstration, and 3) practicing skills with a partner in a breakout room, while receiving personalized feedback from trained mentors.

### Rationale

Six in 10 adults in the US have a chronic disease, and 4 in 10 have at least two. Lifestyle behaviors are the major drivers of these diseases, yet 97% of adults do not engage in the top 4 health behaviors. Helping patients to sustainably shift health behavior requires continual focus and access to intrinsic motivation; however, most providers are not trained to link patients' intrinsic motivation to these behaviors.

### Objective 1:\*

For participants: Understand one of the two main components of eliciting intrinsic motivation for behavior change

**Objective 2:\***

For participants: Practice a defined communication sequence using key skills to elicit patients' intrinsic motivation and support behavior change

**Objective 3:**

For HBCU medical student and coaching faculty mentors: Gain exposure to diverse integrative practitioners through the breakouts, and attend other presentations at the ACIMH conference

**Objective 4:**

For ACIMH: Twenty HBCU medical student and coaching mentors have agreed to register for the conference (if accepted)

**Outline**

- ? Brief overview of intrinsic motivation, focusing on relevance for sustainable behavior change
- ? Conversation roadmap that can be inserted in clinical encounters in fewer than 5 minutes
- ? Demonstration of the skills sequence
- ? Practice in dyads with feedback from a mentor

**Methods/Session Format**

Session/Methods Format 8 min: Introduction and overview o Brief overview of intrinsic motivation, with focus on relevance for sustainable behavior change o Example questions to utilize in clinical encounters to explore and elicit intrinsic motivation from patients 10 min: Demonstration o Explain logistics and select volunteer for demo o Demonstration of conversation within a clinical encounter 12 min: Experiential practice o Break participants into dyads on Zoom with each breakout room led by a mentor who has completed either the Vanderbilt Health Coaching Program or the Meharry-Vanderbilt Health Coaching Program. The breakout mentors will include 12 faculty and 8 medical students, all fully trained. Dyad practice with mentor providing feedback (4 min practice + 1 min feedback). Mentors will utilize a "bottom-line" feedback format, emphasizing a well-executed skill (e.g., active listening, reflection, open-ended questions or acknowledgments) and one opportunity to improve. Please note: Based on the 20 mentors who have agreed to register and participate, we can accept 40 participants to this workshop.

**Submission Criteria\***

**Equipment**

Zoom room with 20 breakout rooms (we can use mine if needed), ability to be the host for the session and run the breakout rooms.

**Clinical Submission Details - For CME Purposes**

**Will you be making clinical recommendations during your presentation?\***

No