

Implementing Wellness into Mental Health & Addiction Recovery: The Addressing Wellness Through Organization Change (AWTOC) Approach

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Research has found that proper nutrition, regular physical activity, smoking cessation and stress management can all have a positive impact on an individual's physical and mental health. There is still a need, however, to help clinicians and staff working with clients with co-morbid mental illness and substance abuse issues to better integrate wellness in their work. In addition to training, there are ways that teams and organizations can change their normative culture to promote wellness and support recovery.

Helping everyone understand the benefits of promoting wellness is a first step. Addressing wellness provides an opportunity to:

1. **Address health disparities** – People with mental illness and/or substance use disorders are disproportionately affected by preventable health conditions such as cardiovascular disease and cancer, which are directly influenced by tobacco/drug use, poor nutrition, lack of physical activity, stress, and lack of preventive healthcare (Colton & Manderscheid, 2006; National Institute on Drug Abuse, 2015).
2. **Lengthen lifespan and improve quality of life** - People living with addiction or mental illness are dying decades sooner than the general population due to tobacco use and other changeable problems (Bandiera et al., 2015).
3. **Promote recovery** – Recovery is an inclusive concept that emphasizes individuals caring for themselves as a whole person (SAMHSA, 2012). Wellness discussions support recovery by empowering individuals to take action that will enhance their overall physical and mental



health. Wellness discussions broadens the conversation between patient and provider from simply mental illness symptom management to promoting overall health, engaging relationships, increasing hope and being present in the moment.

4. **Support lifestyle changes** - Most people interested in making lifestyle changes can be successful. For example, when looking at tobacco cessation, research has shown that, like other smokers, adults with mental illness who smoke want to quit, can quit, and benefit from smoking cessation treatment (CDC, 2013).

Addressing Wellness Through Organizational Change (AWTOC)

There are many opportunities for clinicians and leaders in mental health and addiction treatment programs to champion more discussion about wellness and integrate evidence-based treatments that can decrease patient morbidity and mortality. However, many clinicians and staff may not feel trained and prepared to help individuals adequately address wellness goals, to integrate wellness into their routine clinical practice, or to make appropriate referrals to community resources.

To address this service and training gap, the UMass Department of Psychiatry developed the Addressing Wellness Through Organization Change (AWTOC) approach, based upon the

Addressing Problems Through Organizational Change (APTOC) model developed by Douglas Ziedonis, M.D., M.P.H. which has been used previously to address tobacco cessation (Ziedonis et al., 2007).

The goal of AWTOC is to strengthen an organization's capacity to change their culture, make a commitment to change, and implement and sustain new goals and strategies to promote wellness at their agency for everyone. The AWTOC approach provides a way for champions to engage top leaders, create a team that helps develop a change plan, including how to communicate and engage others, train staff, help promote activities for all, and many other practical small steps for changing a culture to promote wellness and recovery.

The 10 Steps of AWTOC

AWTOC is a 3-Phase process consisting of 10 steps. With thoughtfulness and dedication, this intervention can be implemented to allow clinicians and staff to feel better prepared to address their patients' wellness needs and goals.

Phase I: Preparing for the AWTOC Intervention:

1. Establish a sense of urgency
 - Leadership support
 - Select a champion(s)
 - Make clear why this problem should be addressed/acknowledge the challenge
 - Identify broad goals for enhancing patient care, staff training and wellness, and improving the physical environment to promote wellness
2. Establish a leadership group and prepare for change
3. Assess program readiness via an environmental scan
4. Develop a written change plan with realistic time line
 - Formation of work groups
 - Start with easier system changes
5. Develop a communication plan

Phase II: Implementing the AWTOC Intervention:

6. Implement patient goals
 - Assessment, treatment planning and treatment/referral to enhance wellness
 - Education/empowerment
7. Implement staff goals
 - Education and training to develop on site resources and expertise
 - Staff wellness
8. Implement environmental goals
 - Making changes that promote a culture of wellness

Phase III: Sustaining Efforts:

9. Document changes in policies and Standard Operation Procedures – develop policies supporting wellness
10. Support, encourage and sustain change

Promising Results from Initial Pilot Projects

The UMass Department of Psychiatry has recently led two AWTOC pilot projects, with a focus on developing patient, staff and environmental goals to strengthen the wellness supports already in place, and to help the programs to better integrate wellness into their routine work. The UMass Ambulatory Psychiatry Program piloted the AWTOC intervention in July, 2013. Phase I included a needs assessment survey, which determined that most patients, providers, and support staff were in agreement that wellness is an important aspect of mental health treatment. Phase II focused on developing patient brochures to encourage a dialogue between patients and providers about wellness; staff training; and creating a 6-week wellness group curriculum. Preliminary outcomes were measured by a follow-up survey, which showed an increase in patient initiation of wellness conversations with their clinician, and in staff documentation of patients' wellness concerns. A November 2010 AWTOC intervention pilot at the UMass Adult Inpatient Psychiatric Program yielded outcomes including: healthier menu options for patients; increases in patient physical activity; increases in wellness posters, signage and artwork on the unit; and staff training on how to address patient health concerns.

Next Steps

The time is now for agencies to focus on wellness and health promotion for everyone – patients, providers, and staff. System change is critical to the broad-based success of any wellness initiative. This includes having the necessary tools, education, training and resources needed to make these changes. The 10 steps of the AWTOC approach provide a comprehensive methodology to help organizations and programs to change so that they can support patient and staff wellness.

For more information on the Addressing Wellness Through Organization Change approach, and how it could help your agency to address staff and patients' wellness goals, to integrate wellness into your routine clinical practice, or to make appropriate referrals to community resources, please visit the UMass Psychiatry Wellness Initiative website at www.umassmed.edu/psychiatry/resources/wellness/

References

- Bandiera, F. C., Anteneh, B., Le, T., Delucchi, K., & Guydish, J. (2015). Tobacco-related mortality among persons with mental health and substance abuse problems. *PLoS ONE*, *10*(3). doi: 10.1371/journal.pone.0120581
- Centers for Disease Control and Prevention Vital Signs. (2013, February). *Adult Smoking: Focusing on People with Mental Illnesses*. Retrieved from <http://www.cdc.gov/vitalsigns/SmokingAndMentalIllness/index.html>
- Colton, C. W., & Manderscheid, R.W. (2006). Congruencies in increased mortality rates, years of potential life lost, and causes of death among public mental health clients in eight states. *Preventing Chronic Disease*, *3*(2), 1-14.
- National Institute on Drug Abuse. (2012, December). *Medical Consequences of Drug Abuse*. Retrieved from <http://www.drugabuse.gov/related-topics/medical-consequences-drug-abuse>
- Substance Abuse and Mental Health Services Administration. (2012). *SAMHSA's Working Definition of Recovery: 10 Guiding Principles of Recovery*. Retrieved from <http://store.samhsa.gov/shin/content//PEP12-RECDEF/PEP12-RECDEF.pdf>
- Ziedonis, D., Zammarelli, L., Seward, G., Oliver, K., Guydish, J., Hobart, M., & Meltzer, B. (2007). Addressing tobacco use through organizational change: A case study of an addiction treatment organization. *Journal of Psychoactive Drugs*, *39*(4), 451-4.