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Your Co-Presenters



Cal Beyer
Vice President
ACAP HealthWorks
& Holmes Murphy



Rich Jones
Executive Vice President
Heritage CARES

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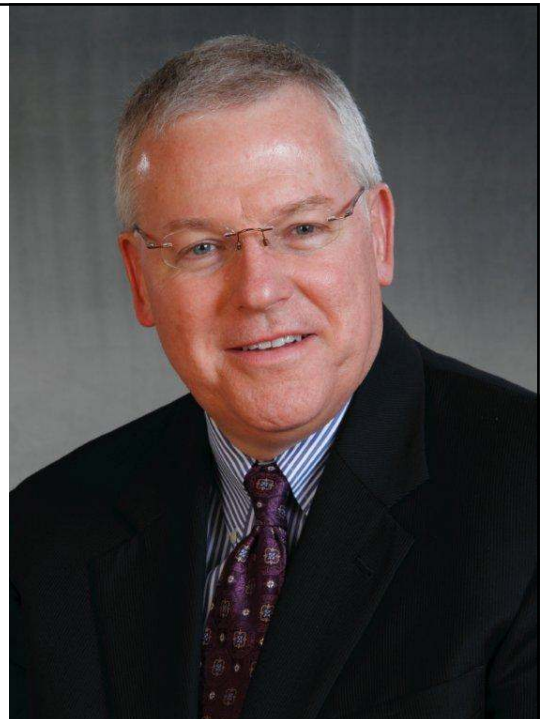


**Cal Beyer; CWP, SCTPP
Vice President; Workforce Risk & Worker Wellbeing
ACAP HealthWorks & Holmes Murphy**

Cal has over 30 years of safety, insurance, and risk management. He's been a leading voice in mental health, substance use disorders, and suicide and overdose prevention in construction safety, health, and wellness culture and practices.

Prior to joining the Holmes Murphy family of companies, Cal was the director of risk management for Lakeside Industries in Issaquah, WA. He catalyzed the construction industry mental health and suicide prevention movement that became the Construction Industry Alliance for Suicide Prevention.

He serves on the Executive Committee for the National Action Alliance for Suicide Prevention, the Expert Advisory Boards of Heritage CARES and the Center for Workplace Mental Health, and the Lived Experience Advisory Committee of the Suicide Prevention Resource Center.



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Rich Jones, MA, MBA, LCAS, CCS, CCDP, CAI
EVP and Executive Director
Heritage CARES

Richard Jones is an experienced therapist, clinician, and health care entrepreneur operating primarily in the behavioral health space. Richard has wide-ranging professional experience across nearly all behavioral health domains, including mental health, substance use disorders, co-occurring disorders, and intellectual disabilities. He has over 20 years of management experience and has been instrumental in the launch and rebuild of multiple programs nationwide. Richard is passionate about providing quality care and supporting people in need. He has been the founding CEO of 2 non-profit organizations and two for-profit business dedicated to disrupting the behavioral-health space for the betterment of people in need.

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Learning Objectives

1. Handling techniques for the “elephant in the room”
2. How substance misuse & addiction impact construction
3. Why traditional approaches are no longer sufficient solutions
4. How using lived experience education and peer support coaching promotes help seeking leading to behavioral change
5. Benefits of creating recovery-friendly workplaces on diversity/equity/inclusion and workforce development
6. Learn how digital education and peer support coaching leads to addiction treatment and recovery.

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Poll Question

#1

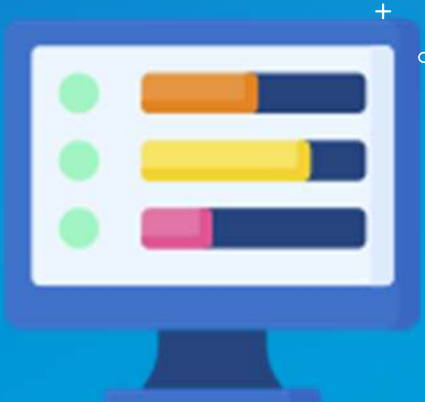


The illustration shows a computer monitor with a white screen. On the screen, there are three horizontal bars. Each bar starts with a green circle on the left. The top bar has an orange segment followed by a dark blue segment. The middle bar has a yellow segment followed by a dark blue segment. The bottom bar has a pink segment followed by a dark blue segment. In the top right corner of the screen, there is a small white plus sign and a small white circle. The monitor is on a dark blue stand.

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Poll Question

#2



The illustration shows a computer monitor with a white screen. On the screen, there are three horizontal bars. Each bar starts with a green circle on the left. The top bar has an orange segment followed by a dark blue segment. The middle bar has a yellow segment followed by a dark blue segment. The bottom bar has a pink segment followed by a dark blue segment. In the top right corner of the screen, there is a small white plus sign and a small white circle. The monitor is on a dark blue stand.

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The Problem is Already Known

- Rising rates of alcohol misuse and historically high overdose rates
- National Safety Council (2020) reported 1 in 12 workers overall has a substance use disorder (8.5%)
 - 19% of construction workers have SUD
- Employers spend an average of \$8,817 annually on each employee with an untreated SUD
- Each employee who recovers from a SUD saves a company over \$8,500 on average
- Key findings:
 - Employer-initiated treatment is more successful than treatment initiated by friends or family members.
 - Workers in recovery are strong employees: less turnover, fewer days off, and lower healthcare costs

Source: <https://www.nsc.org/newsroom/new-analysis-employers-stand-to-save-an-average-of>

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Consequences of Impairment: Organizational

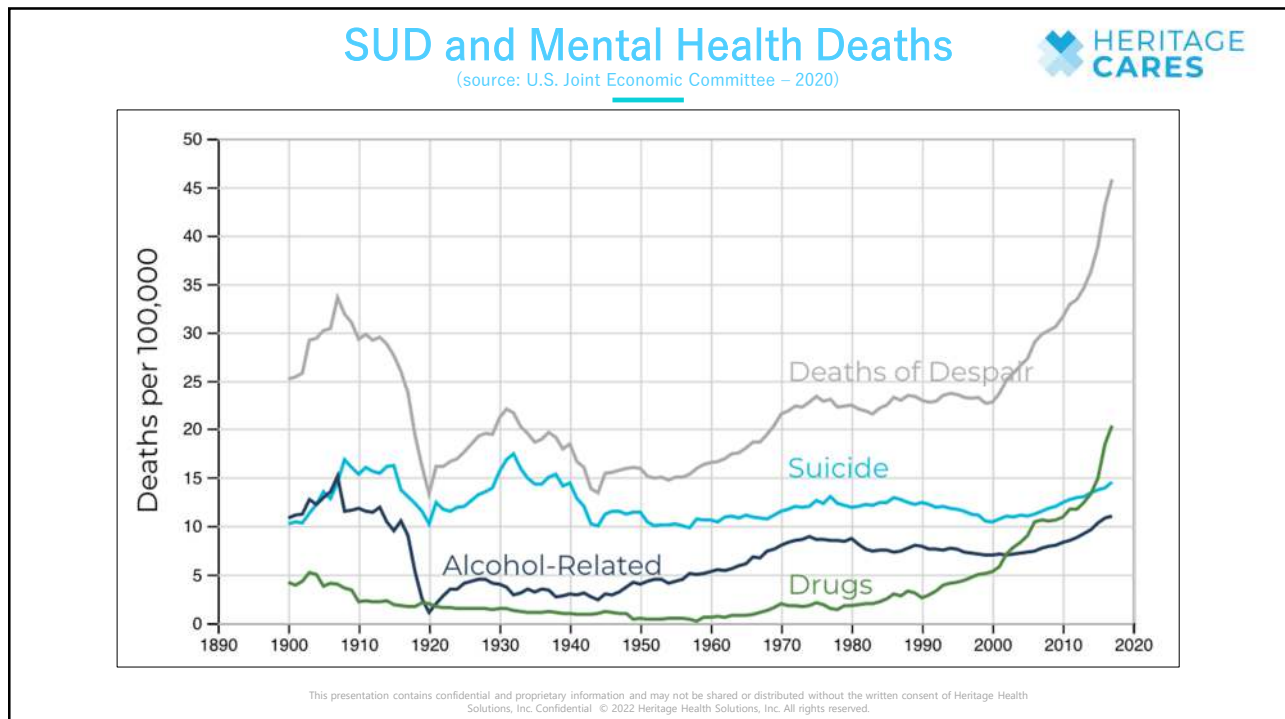
- Affects culture and workplace dynamics
 - Attracting, retaining, developing, growing employees
 - Turnover: overtime and replacement costs
 - Employer of choice or last resort
- PQRS (*productivity-quality-risk-safety*)
 - Absenteeism and tardiness
 - Presenteeism
 - Near hits and serious injuries/fatalities
 - Quality defects and rework
 - Insurance claims and costs
 - Damaged relationships and reputation risk

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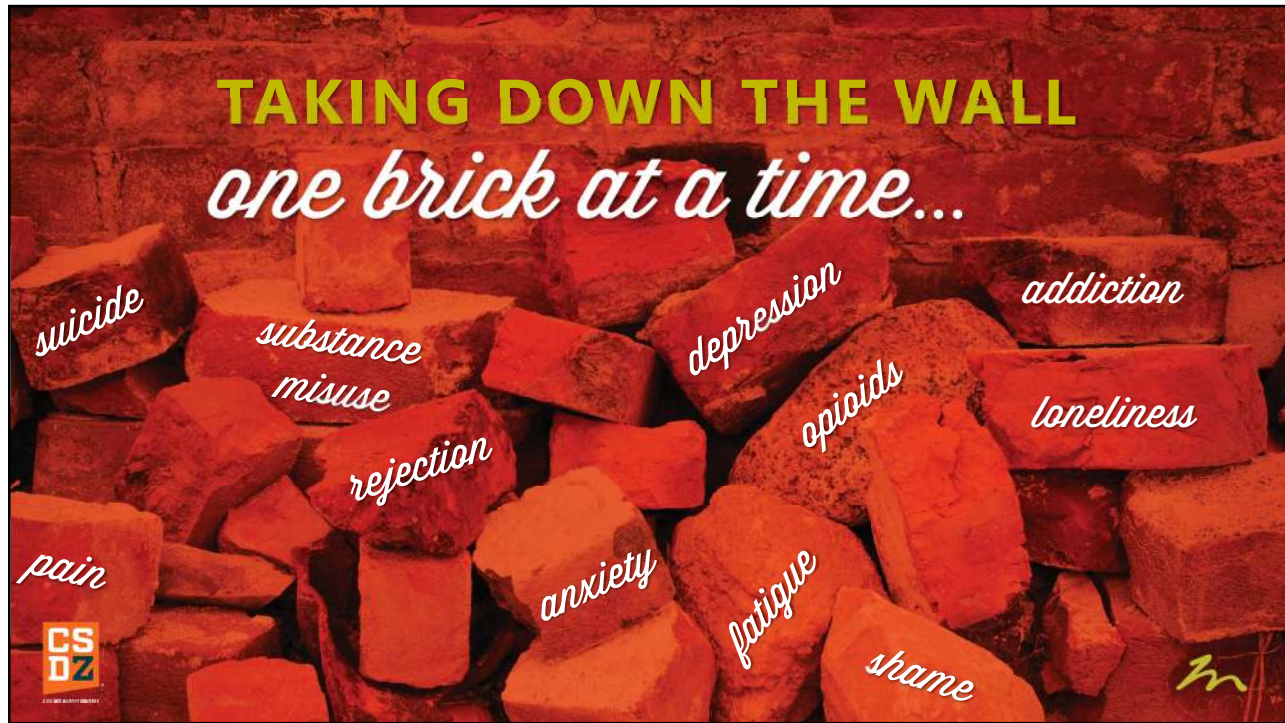
Consequences of Impairment: Human

- Self esteem
- Pain and suffering
- Poor life quality
- Job loss
- Financial stability and lack of insurance
- Legal problems
- Chronic health conditions with premature death
- Risk of relapse and potential for overdose

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**ENGINEERING NEWS-RECORD (ENR)
8/3/2021 COVER STORY**

DEPRESSION IS EVERYWHERE. SO IS HELP.
YOU ARE NOT ALONE
TOUGH ENOUGH TO TALK
YOUR FEELINGS
In Crisis? Text HELLO to 741741
SUICIDE HELPLINE
Construction Opioid Awareness Week 2021
2TUFF2TALK.COM
HARDHAT HEALTH

Associations, contractors, unions and other organizations have created a proliferation of hardhat stickers, wallet cards, posters, placards and other messaging to boost mental health awareness and suicide prevention.

CS DZ

Source: <https://www.enr.com/articles/52163-safety-advocates-see-strength-in-numbers-to-combat-suicide-and-substance-misuse>

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Poll Question

#3

The image shows a blue background with the text 'Poll Question #3' on the left. On the right, there is a stylized illustration of a computer monitor. The monitor screen displays three horizontal progress bars, each with a colored segment (green, orange, yellow, pink) and a dark blue segment. There are also small icons of a plus sign and a circle on the top right of the monitor frame.

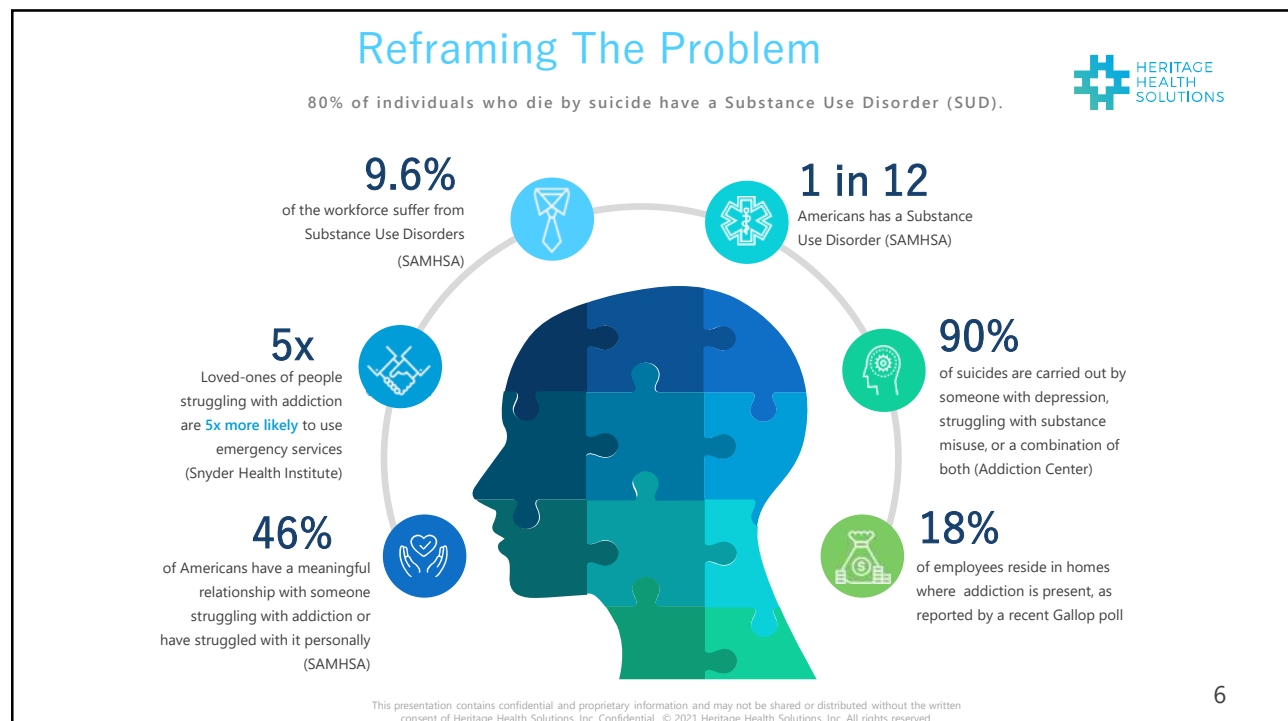
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The Case for Recovery First-Aid Training

- **What:** Mandatory annual drug and alcohol awareness training
- Curriculum-based
 - Warnings signs and symptoms
 - How to respond and offer help and support
- Similar to mandatory sexual harassment, D/E/I & safety trainings

- **Why:** Does not require someone to self identify as needing help
- Provides a pathway to recovery care seeking

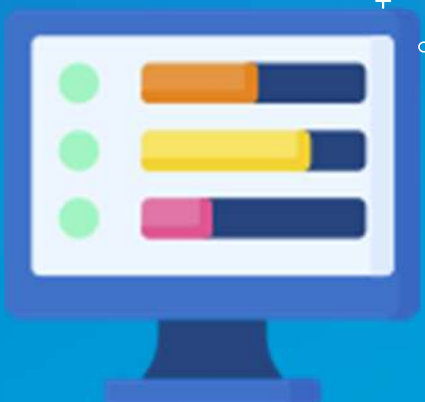
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Poll Question

#4



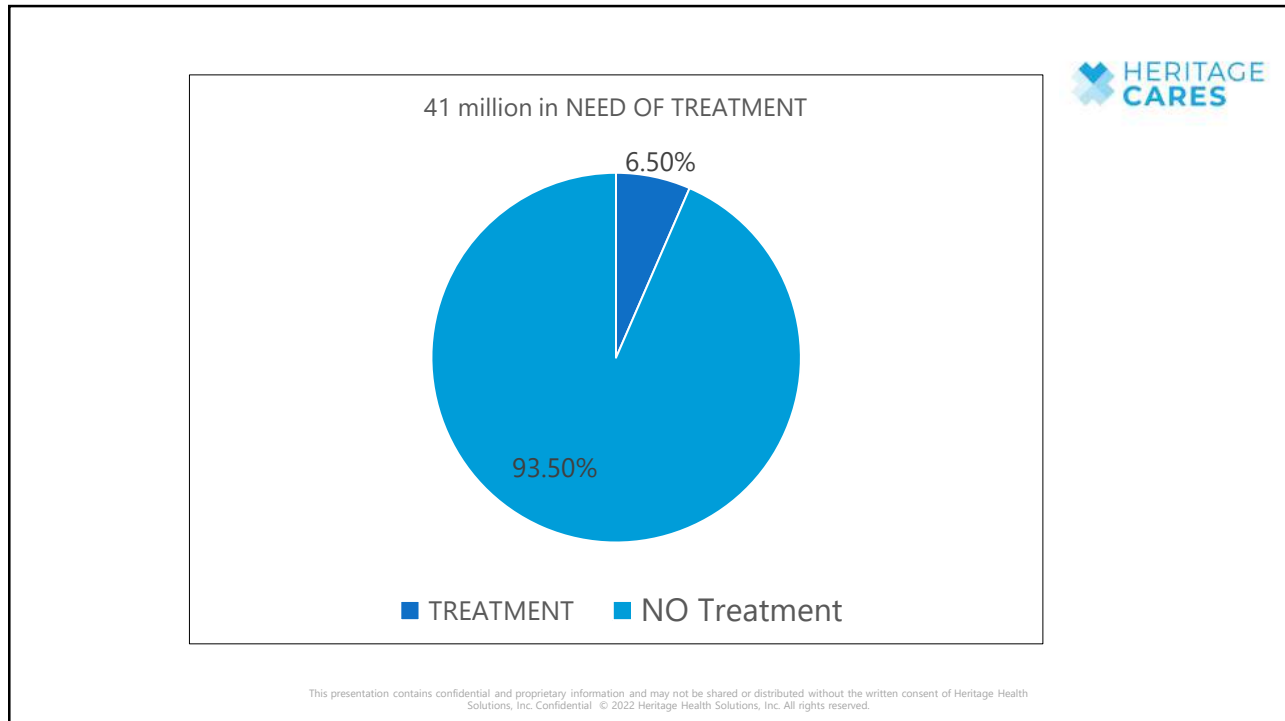
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“ Only 10% of individuals suffering with a Substance Use Disorder seek help. ”

- SAMHSA


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Closing the “Treatment” Gap



- We view the treatment gap as an “access problem”.
- Symptoms of the prevailing mindset:
 - *“We need more of the same”.*
 - More treatment, more recovery centers, increased access to medication assisted treatment etc... more people will get help.
 - And if we have the right type of treatment. People will get better.

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Aiming at the Wrong Target



While we debate best practices such as 12-step facilitation, CBT, Peer Recovery, M.A.T., inpatient, outpatient etc, >90% of those with Substance Use Disorder (SUD) don't receive help.

And of that disengaged group only 2% report that this is due to "lack of access". Yet we continue to focus mainly on increasing access.

We are focused on the wrong target.

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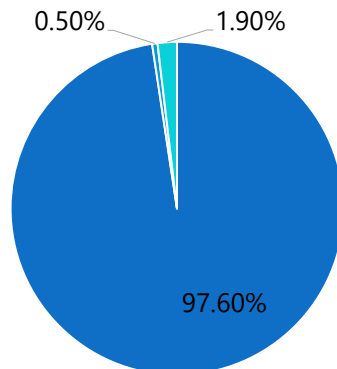
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Why Did You NOT Receive Treatment?



(SAMHSA-NHSDUH, 2020)

38.5 MILLION NEEDED Tx BUT DID NOT RECEIVE Tx



■ Needed Tx but did not think they needed tx ■ Tried But Couldn't Get Tx ■ Knew they needed Tx but didn't try

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It's an Engagement Problem, NOT an Access Problem

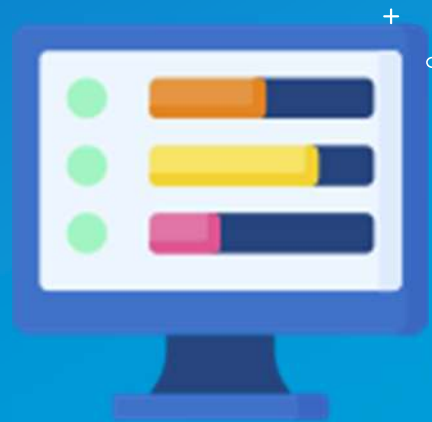
How do we engage and retain the 38.5 million people who need treatment; but think they don't need treatment?

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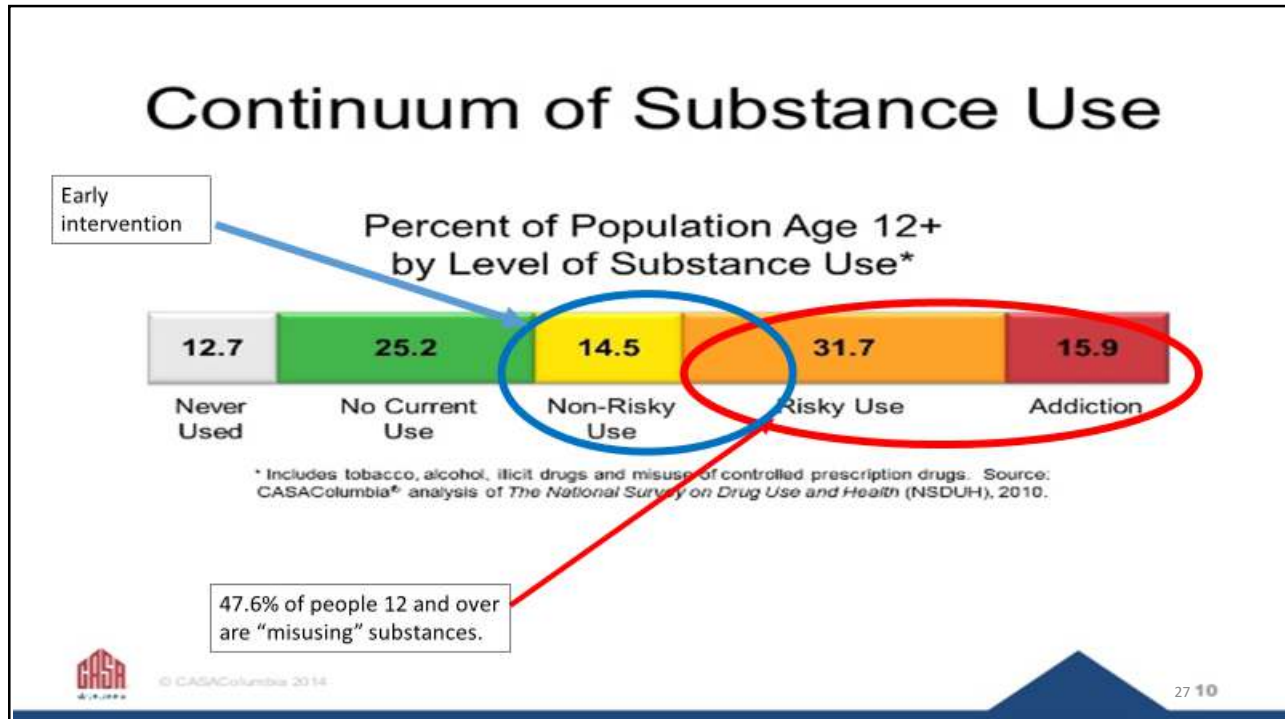
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Poll Question

#5



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Poll Question

#6

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Paradigm Shift

Willingness NOT required?

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Example of Shift in Modern Medicine

- Long process
- Even longer in healthcare
- Joseph Lister and the antiseptic method (1860's)
- Ignaz Semmelweis in the 1840's
- The antiseptic method was not widely adopted until the early 1900's

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Evolving Paradigm Shift



SHIFT FROM:

- Hit bottom and become willing.
- Participation in treatment and follow through is "on the patient". We wait for you to be sufficiently motivated.
- Focus is primarily on the individual.
- Success = sobriety


SHIFT TO:

- Intervene early and willingness not required.
- Professional assumes equal responsibility (if not more) for successful engagement. We meet you where you are.
- Family involvement is essential. Engage the entire family unit.
- Success = HEALTHY


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What About Retention and Follow Through?




People get better if they are actively engaged during treatment and recovery



Starting Treatment

From the *Journal of Alcohol and Drug Dependence*: "Sufficient time spent in treatment has been consistently associated with positive changes in drug use, psychological health, medical health, criminal activity, and employment."




During Treatment

Most people do not follow through on treatment and/or recovery plans. Regardless of substance or treatment modality, dropout is the norm.

Opioid Use Disorders Drop Out Rates

- Medication Assisted Treatment (Methadone) 60%
- Naltrexone (Vivitrol etc.) 82%
- Abstinence-based OUD programming 85%



After-Care Treatment

The solution is longer term assertive engagement and recovery support to ensure retention in community-based treatment and recovery programs.

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What is Recovery Capital?

“*The total resources that a person has available to find and maintain their personal path to recovery.*”

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Elements of Recovery Capital

- Physical safety and stability (job, food, shelter, transportation, etc)
- Self esteem, internal motivation and resiliency/hardiness
- Access to information
- Available social support (family-friends-employer/union, etc)
- Access to support services
 - EAP/MAP
 - Insurance
 - 12 Step and/or community-based programs
- Lifestyle change
- Peer support coaching
- Purpose and spirituality

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Recovery Messaging

- Purpose: Reduces stigma which helps more people seek help
- Focus:
 1. Describes what recovery means (without describing only one pathway) of not using a specific substance and for how long
 2. that you or a person you are referencing is in long-term recovery, an
 3. I'm sharing so others might have the opportunity to recover as well.
- Result: The lives of real people in long-term recovery from addiction, and the lives of their families, are better!

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Key Takeaways

- Recognize the scope of the problem
- Understand traditional approaches won't solve today's problems
- Embrace new approaches to tackling substance misuse at home and in the workplace
- Be the change you want to see in the world
- Have the tough conversation(s) you've been dreading using recovery messaging
- Commit to learning more about recovery-friendly workplaces

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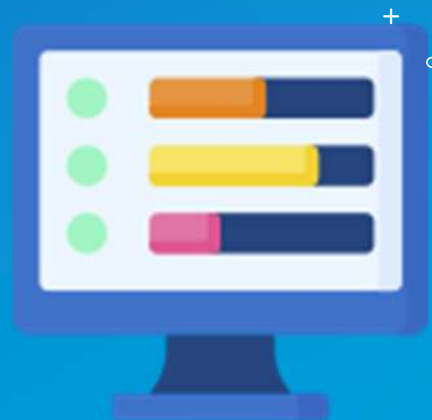
Call to Action

1. Galvanize leadership commitment to address issue
2. Provide education for leadership team and managers
3. Better understand the capabilities of your EAP
4. Better understand the coverage for behavioral health SUD treatment and recovery in the health insurance benefits program
5. Recommend providing mandatory annual training for all employees on Recovery First-Aid
6. Explore how to begin training peer support coaches
7. Consider digital platform for education of workers and families

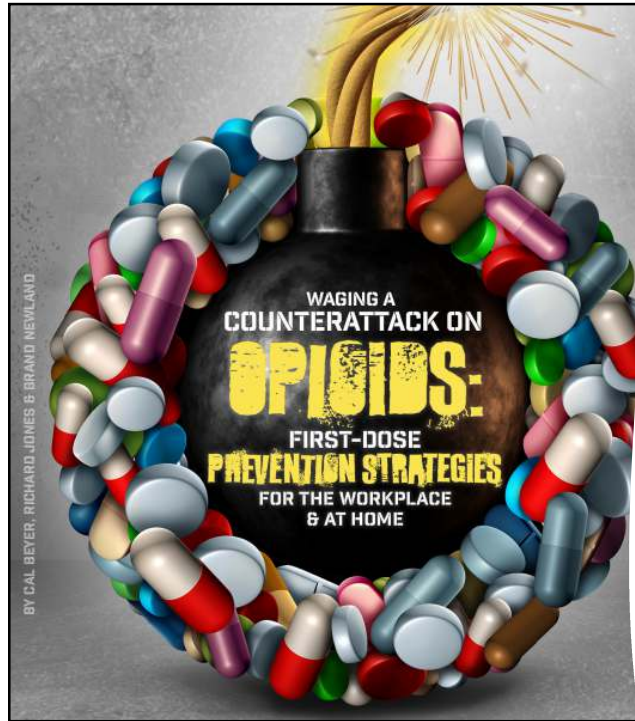
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Poll Question

#7



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Part 2 Webinar: 4/13

Registration Link:

<https://constructioncenterofexcellence.com/events/substance-misuse-addiction-series-part-2>

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Questions?

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HERITAGE
CARES

Comprehensive Program for Substance
Abuse & Suicide Prevention

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A Digital Support Solution for Suicide Prevention and Substance Misuse and Abuse





Comprehensive Addiction Recovery Education & Support Program



Contributor of
Operational
Management
Events 10/30/2022

Hamilton Baiden, President
Heritage Health Solutions

Rich Jones, EVP & Executive Director
Heritage CARES
A division of Heritage Health Solutions, Inc.



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Education

youturn is an online learning management system with the largest video library of education, inspiring stories, and insights about substance abuse and suicide prevention.



Care Management Platform

The Care Management Platform provides a quick and secure way to communicate with health professionals while streamlining suicide and substance use risk.



Peer Coaching


State-certified Assertive Community Engagement (ACE) coaches are National Institute on Drug Abuse (NIDA) trained and understand which community resources and programs best fit any situation. Available 24/7.

Heritage CARES is confidential and evidence-based. We focus on harm reduction and behavioral modification to encourage taking the first step towards recovery. We also provide supportive care for suicide risk.

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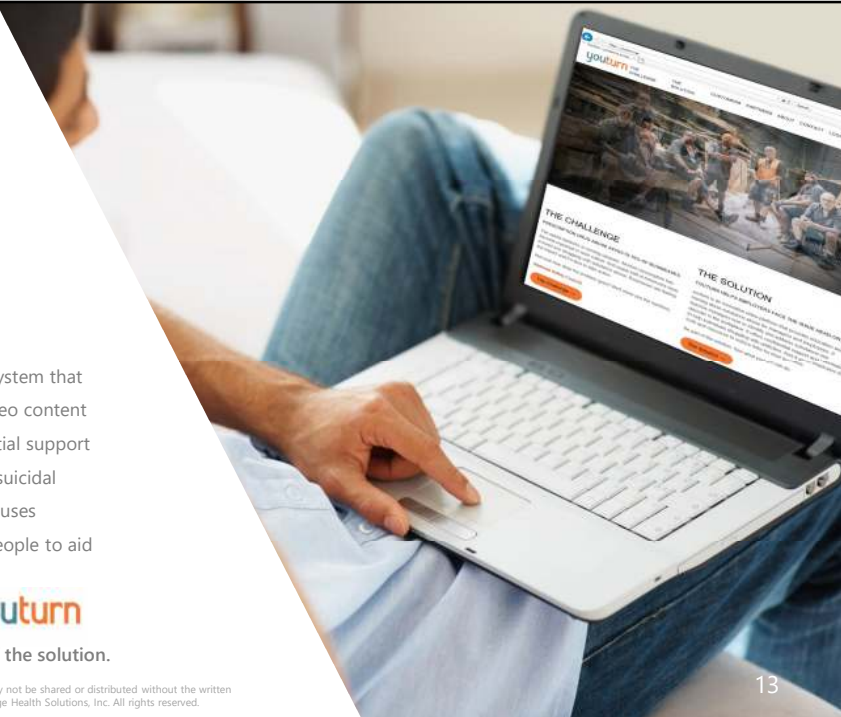
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Education

youturn is an online learning management system that contains the most extensive collection of video content about substance abuse. It provides confidential support to individuals struggling with addiction and suicidal ideations through targeted video series that uses education and live conversations with real people to aid in the journey to recovery.


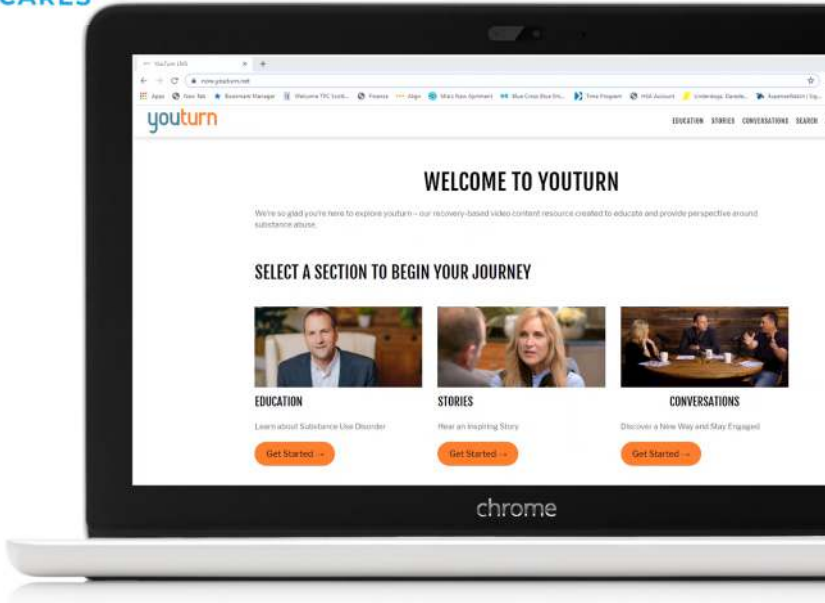



youturn
Be part of the solution.

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WELCOME TO YOUTURN

We're so glad you're here to explore youturn-- our recovery-based video content resource created to educate and provide perspective around substance abuse.

SELECT A SECTION TO BEGIN YOUR JOURNEY

EDUCATION	STORIES	CONVERSATIONS
 Learn about Substance Use Disorder	 Hear an Inspiring Story	 Discover a New Way and Stay Engaged
Get Started →	Get Started →	Get Started →


BEN'S STORY

[View Course →](#)

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Care Management


- Overview**

A digital support platform that utilizes evidence-based practices to assist individuals and their family members struggling with substance use issues and suicidal ideations reach their recovery goals.
- Purpose**

Provides confidential, 24-hour access to health professionals that are licensed and trained to help with stress, substance misuse, and suicide prevention on a secured connection.
- Value**

Rapid access to care allows individuals and their families to start their journey faster and without the fear of stigma.


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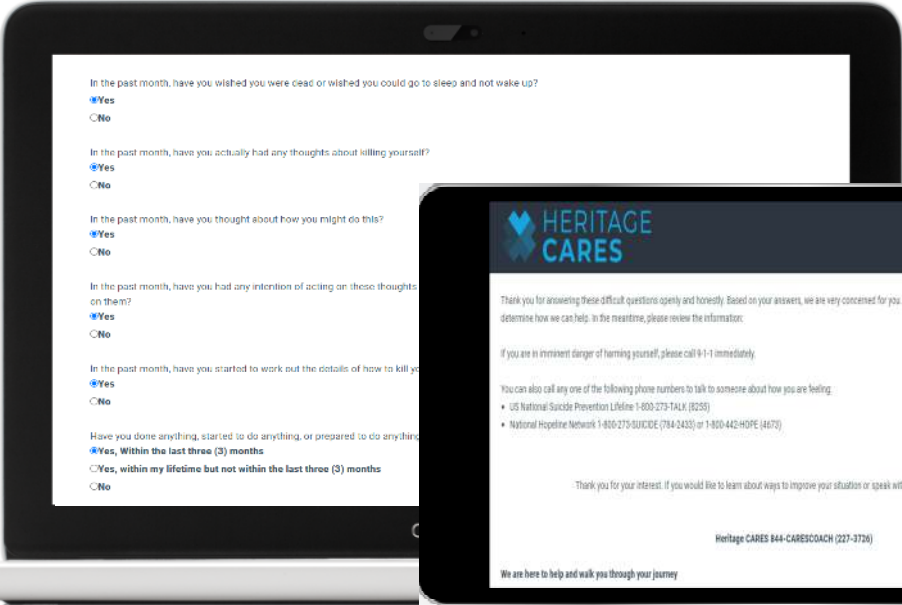


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C-SSRS Assessment





In the past month, have you wished you were dead or wished you could go to sleep and not wake up?

Yes
 No

In the past month, have you actually had any thoughts about killing yourself?

Yes
 No

In the past month, have you thought about how you might do this?

Yes
 No

In the past month, have you had any intention of acting on these thoughts on them?

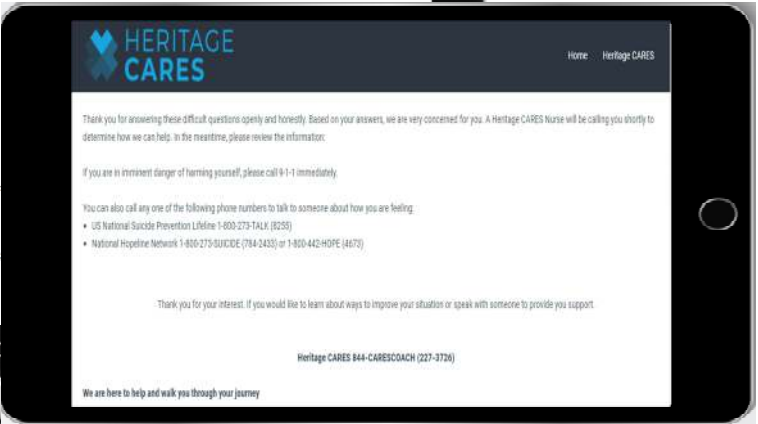
Yes
 No

In the past month, have you started to work out the details of how to kill yourself?

Yes
 No

Have you done anything, started to do anything, or prepared to do anything?

Yes, **Within the last three (3) months**
 Yes, **within my lifetime but not within the last three (3) months**
 No



HERITAGE CARES

Thank you for answering these difficult questions openly and honestly. Based on your answers, we are very concerned for you. A Heritage CARES Nurse will be calling you shortly to determine how we can help. In the meantime, please review the information:

If you are in imminent danger of harming yourself, please call 9-1-1 immediately.

You can also call any one of the following phone numbers to talk to someone about how you are feeling:

- US National Suicide Prevention Lifeline 1-800-273-TALK (8255)
- National Helpline Network 1-800-273-SUICIDE (784-2433) or 1-800-442-HOPE (4673)

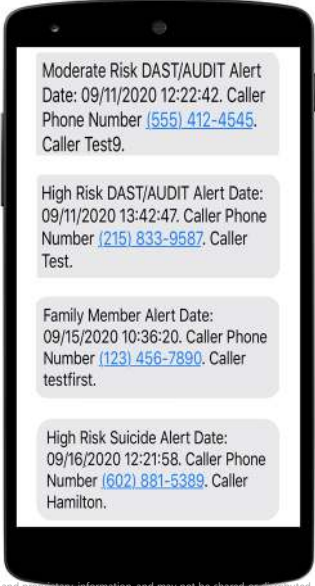

Thank you for your interest. If you would like to learn about ways to improve your situation or speak with someone to provide you support.

Heritage CARES 844-CARESCOACH (227-3724)

We are here to help and walk through your journey

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Assessment Alert



Moderate Risk DAST/AUDIT Alert
Date: 09/11/2020 12:22:42. Caller
Phone Number [\(555\) 412-4545](tel:(555)412-4545).
Caller Test9.

High Risk DAST/AUDIT Alert Date:
09/11/2020 13:42:47. Caller Phone
Number [\(215\) 833-9587](tel:(215)833-9587). Caller
Test.


Family Member Alert Date:
09/15/2020 10:36:20. Caller Phone
Number [\(123\) 456-7890](tel:(123)456-7890). Caller
testfirst.

High Risk Suicide Alert Date:
09/16/2020 12:21:58. Caller Phone
Number [\(602\) 881-5389](tel:(602)881-5389). Caller
Hamilton.

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SBIRT Approach



Screening, **B**rief Intervention, and **R**eferral to **T**reatment Approach for early detection of substance use risk.

Screening
Quickly assesses the severity of substance use and identifies the appropriate level of treatment through an online questionnaire. Platform clients also have the option of completing the screening with help from a certified health care professional via phone.

Brief Intervention
Focuses on increasing insight and awareness regarding substance use and motivation toward behavioral change.

Referral to Treatment
Provides clients with an action plan towards recovery that may include *youturn* videos and access to a certified peer coach.


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Risk Level Engagement


ACE Coaches initiate all engagement with medium and high risk platform clients.






Low Risk

A Low Risk analysis will receive targeted video series content and has the option to reach out to a Heritage CARES Nurse if behavior changes



Moderate Risk

A Moderate Risk analysis will receive a brief intervention by a Heritage CARES Nurse followed up with peer coaching and targeted video content



High Risk

A High Risk analysis will immediately receive peer coaching and targeted video content


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Validated Results

Independently Reviewed and Validated Results




Contractual Integrity Validation for Fees at Risk with Heritage CARES

- Heritage Cares will guarantee the program's success and is putting fees at risk to demonstrate their confidence in achieving a reduction in addiction specific claims.
- <https://validationinstitute.com/wpcontent/uploads/2021/03/Heritage.pdf>

Validation Institute

- Provides independent, unbiased review of healthcare point solutions to ensure that solution providers are achieving the results they say they will for employer groups.



ValidationInstitute

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Peer Coaching

Certified Professionals
State-certified ACE coaches are NAADAC trained and understand maintaining a high level of engagement will achieve recovery goals.


Accomplish Recovery Goals
Harm reduction and motivational interviewing are the foundation for all coaching activities. Integration of family and community programs into the recovery planning process is provided to clients and their families.

Develop New Behaviors
Proactive coach outreach helps maintain a positive outlook on the recovery journey by developing new behaviors and increasing social support which will sustain accountability.

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Inpatient Link to Peer Recovery Coaching: Results from a Pilot Randomized Control Trial

- Results**
 - Engagement rate over the six-month post-discharge time period was higher for participants in the recovery coaching intervention (84%, 95% CI: 78% to 91%) compared to the standard of care control condition (34%, 95% CI: 25% to 44%), log OR = 28.95, $p < .001$.
- Conclusion**
 - SUD is a chronic, relapse-prone disease, and the most important factor for predicting improvement at five years post-discharge is on-going engagement (Weisner et al, 2003). This study demonstrates that inpatient linkage to recover coaching services improves engagement rates and can feasibly be implemented in a single large hospital system. This intervention is promising for both short-term and long-term engagement in recovery support services.

Kaileigh A. Byrne, Prerana J. Roth, Krupa Merchant, Bryana Baginski, Katie Robinson, Katy Dumas, James Collie, Benjamin Ramsey, Jen Cull, Leah Cooper, Matthew Churitch, Lior Rennert, Moonseong Heo, & Richard Jones

Clemson University, Prisma Health-Upstate, University of South Carolina School of Medicine Greenville

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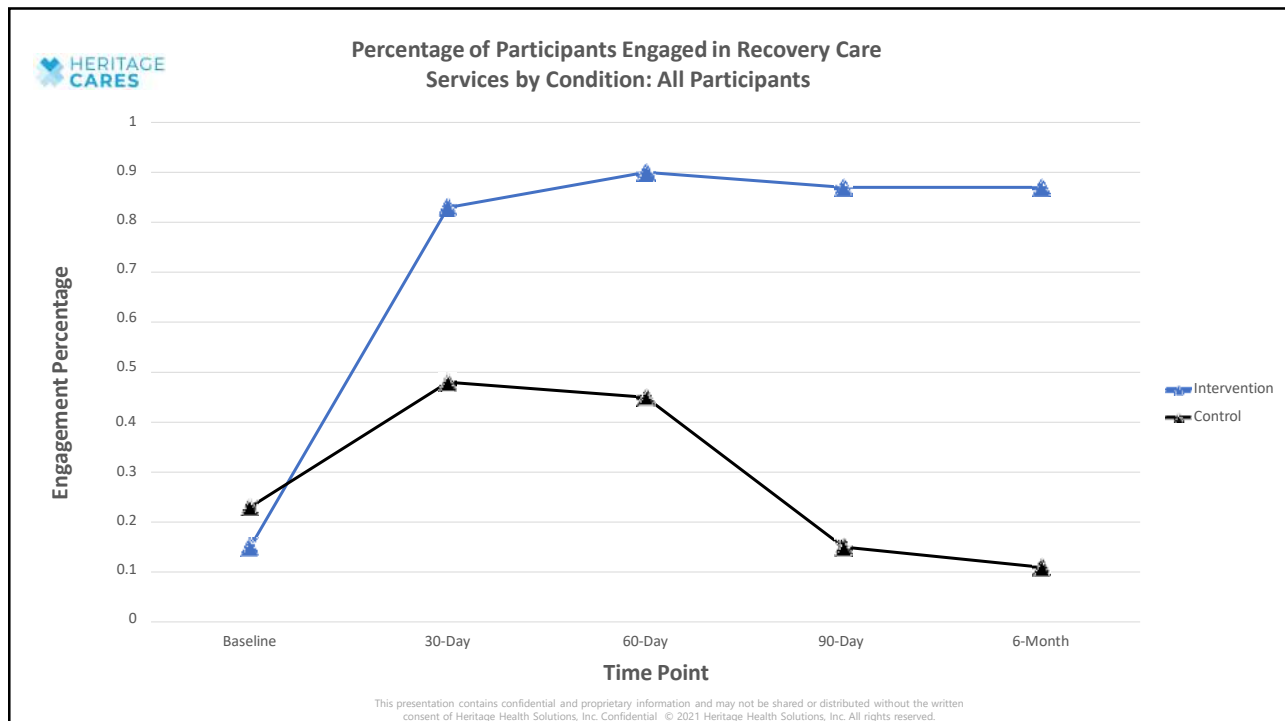
DRUG AND ALCOHOL Dependence

An International Journal on Biomedical and Psychosocial Approaches

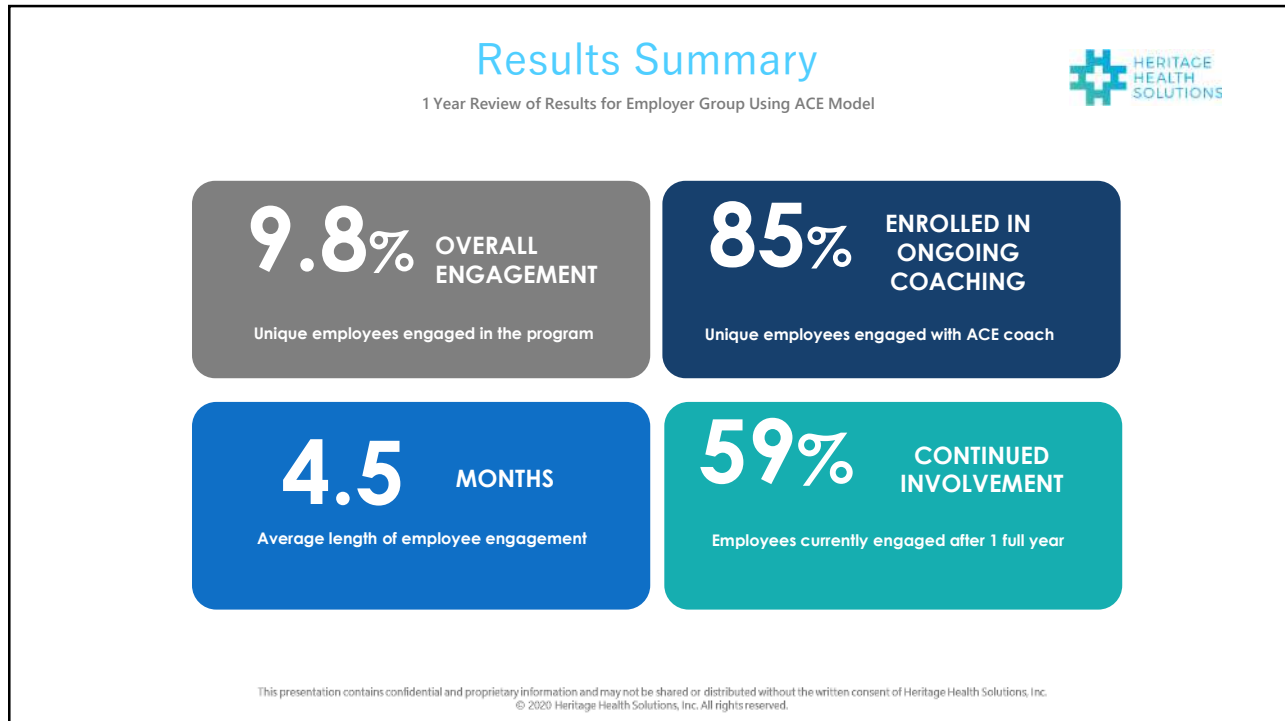
Sponsored by the COLLEGE ON PROBLEMS OF DRUG DEPENDENCE

This journal has online submission at <http://ees.elsevier.com/dad>

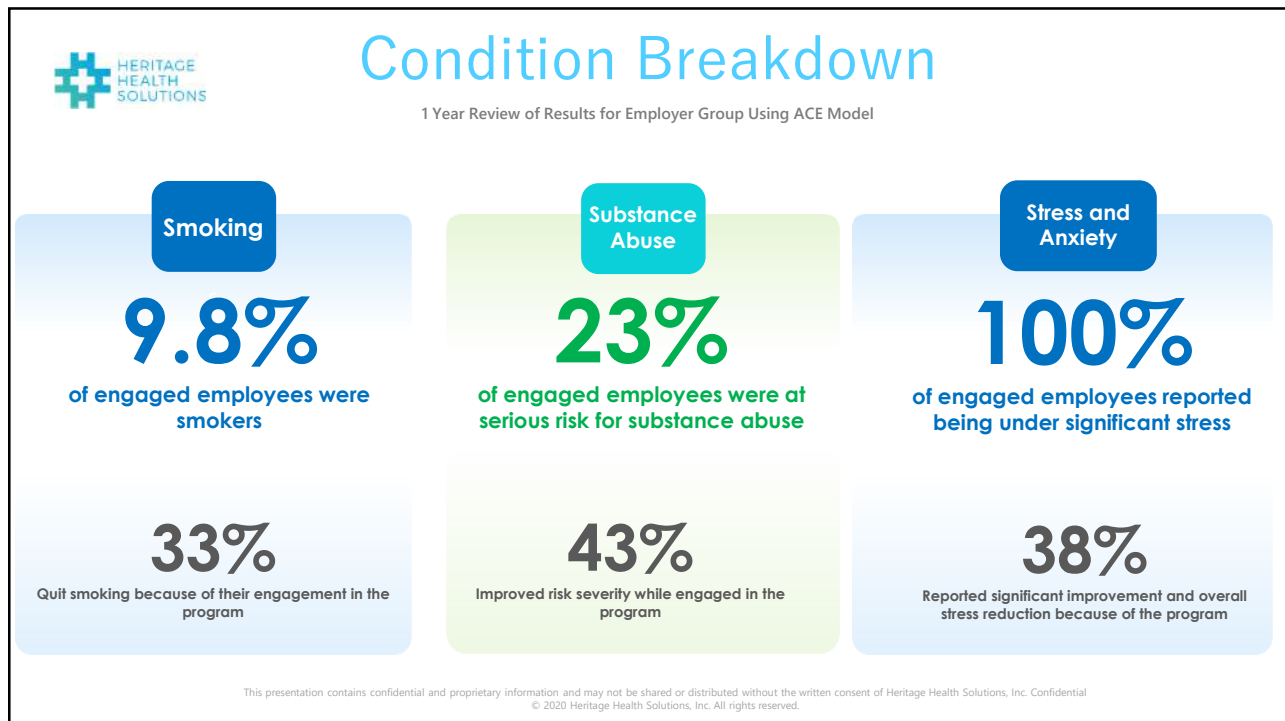
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