## Wisconsin Public Psychiatry Network Teleconference (WPPNT)

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# Substance Use Disorder(SUD) Clinical Supervision and Practitioner Burnout

Presented by:

Dan Bizjak, LCSW, ICS, CSAC



#### Introduction

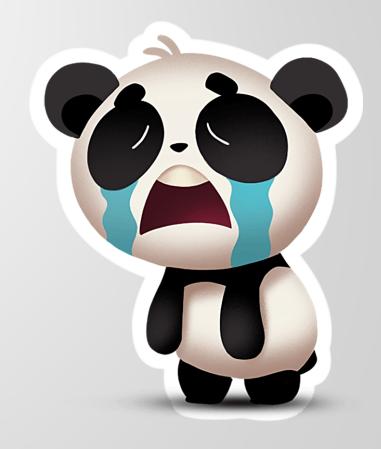
- RAP-WI President
- NAADAC Student Committee
- NBCC/NAADAC Mentor











### Addiction and Recovery The Jellinek Curve

Occasional relief drinking

Constant relief drinking commences

Increase in alcohol tolerance Onset of memory blackouts

Surreptitious drinking Increasing dependence on alcohol

Urgency of first drinks Feelings of guilt

Unable to discuss problem Memory blackouts increase

Drinking bolstered Decrease of ability to stop drinking when others do so

Persistent remorse Grandiose and aggressive behavior

Promises and resolutions fail

Loss of other interests

Work and money troubles

Neglect of food Rough Neglect Neglect

Tries geographical escapes

Loss of ordinary willpower

Tremors and early morning drinks

Decrease in alcohol tolerance

Onset of lengthy intoxications

Drinking with chronic users

Indefinable fears

Unable to initiate action Obsession with drinking

Vague spiritual desires All alibis exhausted

Complete defeat admitted

Enlightened and interesting way of life opens up with road ahead to higher levels than ever before

> Group therapy and mutual help continue

Rationalizations recognized Increasing tolerance

Care of personal appearance Contentment in sobriety

First steps towards economic stability Confidence of employers

Increase of emotional control Application of real values

Facts faced with courage Rebirth of ideals

New circle of stable friends

New interests develop

Family and friends appreciate efforts Adjustment to family needs

Natural rest and sleep Posite to escape goes

Realistic thinking

Return of self esteem

Regular nourishment taken

Appreciation of possibilities of new way of life

Diminishing fears of the unknown future

Onset of new hope Start of group therapy

Spiritual needs examined Physical overhaul by doctor

Assisted in making personal stocktaking Right thinking begins

Stops taking alcohol Meets former addicts normal and happy

Learns alcoholism Is an illness Told addiction can be arrested

Honest desire for help

Obsessive drinking continues in vicious circles

#### Psychology Today

"Burnout is a state of emotional, mental, and often physical exhaustion brought on by prolonged or repeated stress. Though it's most often caused by problems at work, it can also appear in other areas of life, such as parenting, caretaking, or romantic relationship."

#### Clinical Impacts

- Minimal to no motivation
- Mood dysregulation
- Lack of compassion (compassion fatigue)
- Calling in sick or tardy
- Cancelling appointments
- Keeping office door shut
- Isolation from team



#### Addiction and Recovery The Jellinek Curve

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Increase in Onset of memory blackouts alcohol tolerance

Surreptitious drinking Increasing dependence on alcohol

Urgency of first drinks Feelings of guilt

Memory blackouts increase Unable to discuss problem

> Decrease of ability to stop Drinking bolstered drinking when others do so with excuses

Grandiose and aggressive behavior Persistent remorse

> Efforts to control fail repeatedly Promises and resolutions fail

Tries geographical escapes

Loss of other interests Family and friends avoided

Work and money troubles Unreasonable resentments

Neglect of food

Loss of ordinary willpower

Tremors and early morning drinks Decrease in alcohol tolerance

Moral deterioration

Physical deterioration Onset of lengthy intoxications

Impaired thinking

Drinking with chronic users Indefinable fears

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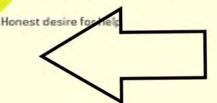
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POINT OF CHANGE

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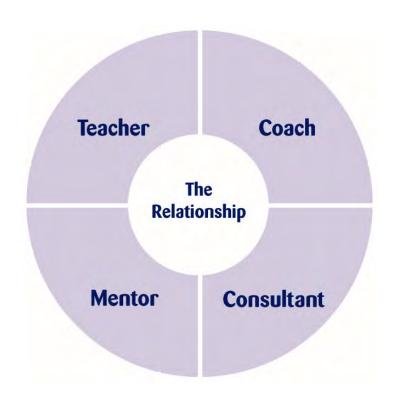
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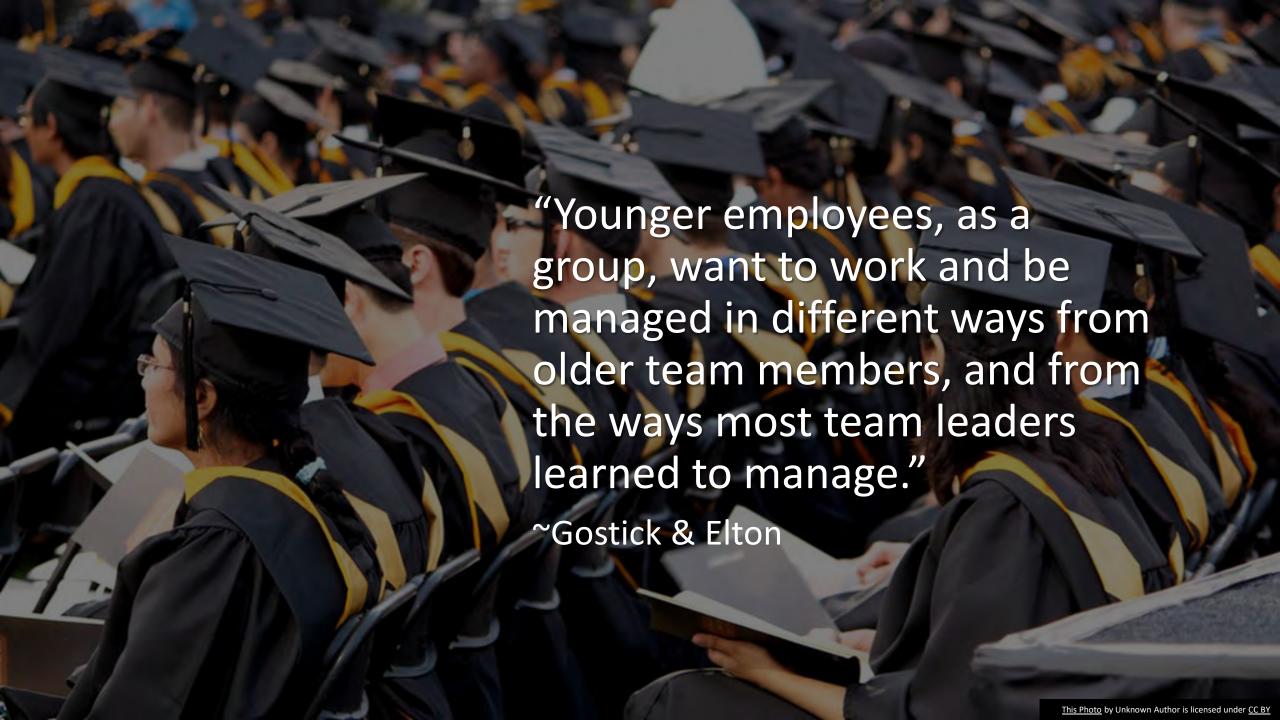
Honest desire for help

#### Role of a Clinical Supervisor

- Teacher Assist in development of skills and knowledge.
- Mentor role modeling, train, and support the professional identity.
- Coach provide morale building, assess strengths, needs areas, and cheerleader.
- Consultant monitoring performance, assessing counselor, oversight.

~TIP 52





#### Six Conversations

- 1. What's expected of me?
- 2. What and how should I develop?
- 3. How am I doing?
- 4. How did I do?
- 5. How will I be rewarded?
- 6. What's next for me?

### Qualities of Effective Clinical Supervision

- Demonstrates empathy, positive regard and genuineness
- The ability to create a safe learning environment.
- The ability to communicate effectively.
- The ability to be open, approachable, and supportive.
- Models ethical behavior.
- Decision-making and problemsolving skills.

- The exercise of judgement in understanding a situation and to execute an appropriate plan of action.
- Openness to examine one's own biases and attitudes.
- Effective time management and organizational skills
- A sense of humor, humility, and balance in life.



 "Quality clinical supervision is founded on a positive supervisor – supervisee relationship that promotes client welfare and the professional development of the supervisee"

~TIP 52

# Take time to get to know your supervisee.

# Identify the expectations together

## Identif yGoals

- SMART
- Team approach
- Supporting individuals to reaching goals
- Strength / barriers
- Personal & Professionally
- Ask what they need from you as a CS at every session.



Be Human





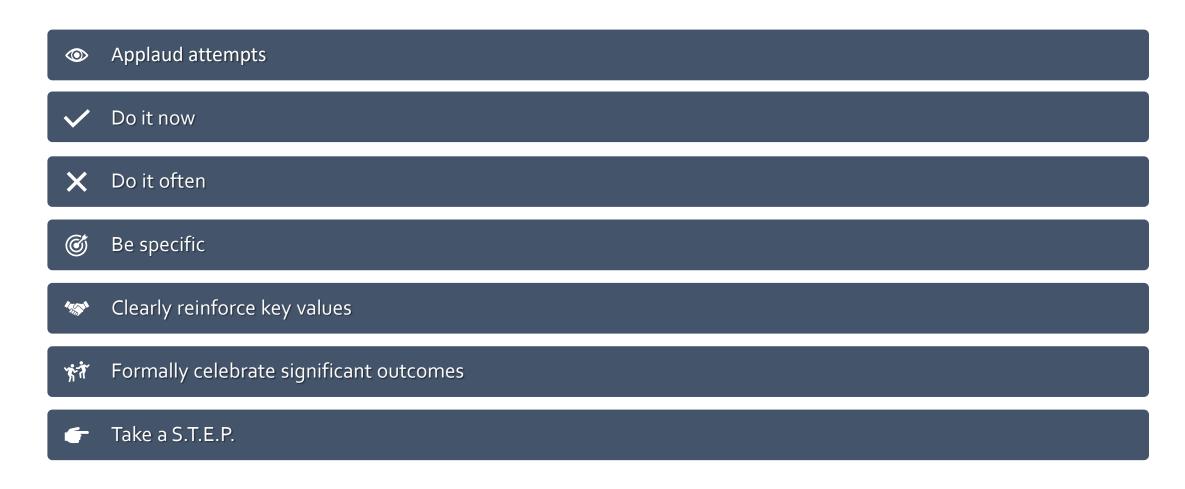
#### Key Strategies to Energize Staff

(ADMIN)

~Gostick & Elton

- Adopt simple rituals of recognition.
- Institute transparency of team challenges.
- Foster direct relevant learning.
- Clear communication to the team of the meaning of their work.

#### Adopt simple rituals of recognition



Institute transparency of team challenges

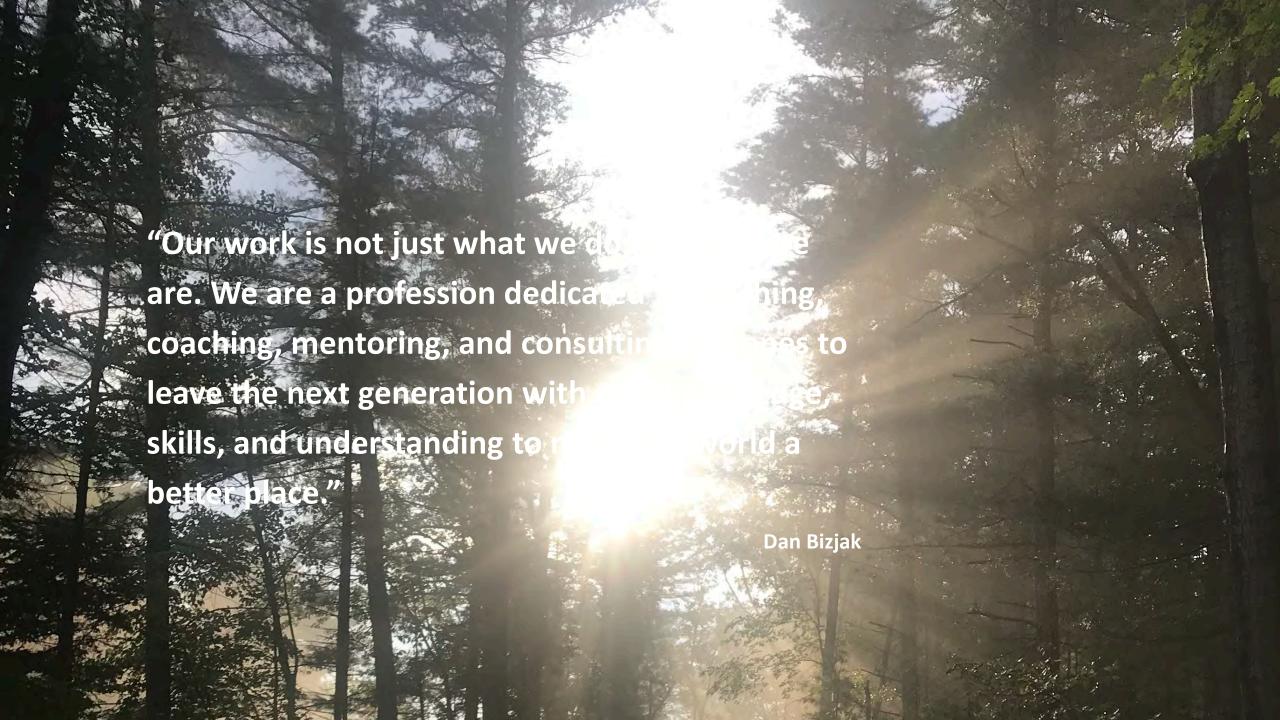
- Roll with resistance (MI)
- Active Listening
- Team approach to problem solving
- Use member strengths.

# Foster direct relevant learning

- Subject Matter Experts (SME's)
- Use of IDP's in Trainings
- Have fun with learning.

Clear communication to the team of the meaning of their work.

- How do I fit in?
- What is the bigger picture?
- Transparency is key





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