In recent years, health centers have been called upon to care for greater numbers of patients and families impacted by substance use disorder (SUD). Health centers are responding to this call by building and strengthening integrated systems to provide the comprehensive medical, behavioral, and social services their patients with SUD need to achieve and sustain recovery. NACHC spoke with some health center thought leaders about the pressure points in this response. Here is what they said about strain on the workforce.

There is no “I” in Team

Taking care of the team that cares for patients with substance use disorder

“In one thing when you see one patient who you know, has a high level of life trauma, and then you go to your next patient and it’s a kid that needs an immunization, and then you go to your next patient and it’s somebody refilling their hypertensive or whatever. But every single patient in this community has significant life trauma, and every single patient is hungry, and every single patient is, you know, meets the definition of homelessness and it’s just constant and there’s no break from it.”

“We are much more cognizant of the value of the team because this is such a demanding type of work. People come in with really horrific trauma… We really recognized the value of number one, just the psychological value of feeling like you’re not alone in this. That you’re relying on each other....”

“If you’re part of a team, even if it’s a bad day, you at least get somebody to share it with so the burden isn’t quite as heavy.”

“To do this work, it really requires a team. You’re not gonna get one provider and one MA who’s gonna be able to do this work in SUD. It really requires this concept that it takes a village or it takes a team to improve the health outcomes for individuals with SUD because they’re so complex, vulnerable. There’s a myriad of issues and things to deal with so this concept of team care is critical...”

“....opioid addiction, it’s just such a ravaging epidemic that it doesn’t just impact one or two aspects of your life. It’s across the board.”

“Health centers have a unique ability to meet the needs of the community in which they serve because the health center recruits staff from this community. However, this also means that staff members who have been impacted by SUD in their personal lives may find it challenging to engage in this aspect of patient care. This impacts the team and must be tended to.”

“...If you’re part of a team, even if it’s a bad day, you at least get somebody to share it with so the burden isn’t quite as heavy.”

To have people with different areas of expertise and different areas of responsibility within that team doesn’t place it all just on one person. I think that’s one of the things that has been challenging for a lot of health centers, where the provider feels like, “I have to do everything.”

Health centers have a unique ability to meet the needs of the community in which they serve because the health center recruits staff from this community. However, this also means that staff members who have been impacted by SUD in their personal lives may find it challenging to engage in this aspect of patient care. This impacts the team and must be tended to.”

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**APPROACH FOR TEAM WELLNESS**

How to Prevent Burnout, Build Resiliency, and Foster Joy in Work

**HIRING**

Have recruitment and orientation plans for a team not just one individual. Have the potential hire shadow a team to better understand what the work will look like. This also gives the team an opportunity to assess the potential hire.

**ONBOARDING**

Center onboarding activities around the team.

**THE RIGHT TRAINING**

Provide protected team time for skills training to help team members feel better equipped and more confident.

**TIME FOR REFLECTION**

Provide protected time at work for team members to gather to reflect about the work and the impact it has on them.

**INDIVIDUAL SELF-CARE**

Provide non-scheduled time for staff to spend how they want – e.g., physical exercise and mindfulness.

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