

**CHAMP**  
Concurrent and Collaborative  
Documentation

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Land Acknowledgment





*The University of Washington acknowledges the Coast Salish people of this land, the land which touches the shared waters of all Tribes and bands within the Suquamish, Tulalip and Muckleshoot nations.*

<https://native-land.ca/>

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• CHECK IN

- Review of CMTS
- FY 2023 Omnibus bill (Mainstreaming Addiction Treatment Act items)
- New Clinics
- Concurrent Documentation
- Anything else on your mind?

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FY 2023 Omnibus bill


- Includes Elements from the proposed *Mainstreaming Addiction Treatment Act (MAT Act)* <https://www.endsud.org/mat-act>
- Eliminates the DATA Waiver-all unique requirements for prescribing Buprenorphine
  - All providers who have a current DEA registration with Schedule III authority may now prescribe Bupe
    - <https://www.samhsa.gov/medication-assisted-treatment/removal-data-waiver-requirement>
    - <https://www.deadiversion.usdoj.gov/pubs/docs/index.html>
- CHAMP Bupe trainings on Feb 17<sup>th</sup> and March 17<sup>th</sup>

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**Concurrent Documentation:  
Common NEGATIVE Reactions**

- The computer is an “intrusion” into the therapeutic process
- Documentation “takes up the patient’s time” in the session
- I am afraid of what the patient will think if they know that I write notes about them



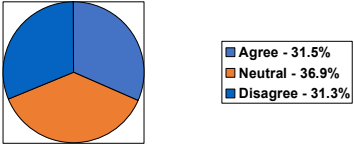
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**Patient Satisfaction**

Case Study: Health Center in Massachusetts

Of 284 respondents whose clinician *did not use* the concurrent documentation process... Did they think the practice would be helpful?



Agree	- 31.5%
Neutral	- 36.9%
Disagree	- 31.3%



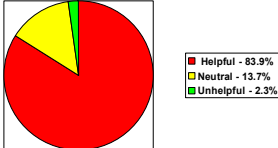
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**Patient Satisfaction**

Case Study: Health Center in Massachusetts

Of 927 respondents whose clinician used the concurrent documentation process...



Helpful	- 83.9%
Neutral	- 13.7%
Unhelpful	- 2.3%




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**Time Management Benefits**

*Concurrent documentation supports...*

- Improved timeliness of billing and supporting clinical documentation
- Improved clinician quality of life
  - Less time spent documenting
  - Avoid the chronic, “never caught up” model
  - Leave work at work!
  - Less “burnout” and clinicians feeling overwhelmed/anxious



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## Clinical Benefits



### *Concurrent and collaborative documentation:*

- Focuses both clinician and patient on treatment outcomes
  - Goals are addressed in each session
- **Incorporates the computer efficiently as a tool**
  - Show changes in scores over time
- Complements use of brief behavioral interventions
- Creates improved quality and usefulness of clinical documentation
- Empowers patients to be more proactive in their own care

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## Concurrent Documentation Setup



- Scripts – know how you are going to introduce to clients before the session
- Technology – what is needed/available?
- Office Setup – do computers or furniture need to be re-arranged?
- Time – progress notes in last 10 minutes; everything else in real time
- HIPAA – be careful other information on the computer is not seen by the patient
- Clinical judgment – will not work in every situation

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## Sample Script



“We are going to utilize a new note taking strategy during our session today. Instead of taking notes after the session, we will take notes during the session which will allow us to better focus on and help us to agree on what is being expressed. In doing so, I will allow you to read the notes I take to actively participate in the reflection process. How does that sound?”

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## Suggestion: Dictation Approach



Say out loud what you are typing, especially if you think the patient is worried about what you are writing:

“The anxiety symptoms have increased recently, especially at night, do I have that right?”

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## Strategies to Increase Efficiency



- Create templates for different visit types
  - Initial Assessment
  - Follow-Up Visits
- Incorporate agenda into documentation template
- Less is more! You do not have to document in a narrative style – use bullet points and brief statements
  - Accessible to PCPs and other members of the treatment team
- Complete BH measure before appointment

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## Align Visit Agenda with Documentation



- Sample Documentation Format
  - Symptom Check
    - Presenting Concerns
    - Behavioral Health Measures
  - Treatment Review
    - Medications
    - Behavioral Interventions
  - Assessment/Diagnosis
    - Progress toward goal
  - Treatment Plan
    - Consultation needed?
    - Goal and action plan
    - Next appt
- Agenda Template
  - Greeting and agenda setting
  - Review and provide intervention
    - Review PHQ/GAD and homework
    - Review medications (if applicable)
    - Brief Behavioral Intervention (BA, CBT, Distress Tolerance, etc.)
  - Next Steps
    - Homework: confirm plan and assess for barriers
    - Schedule follow-up visit

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## Questions & Discussion



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THANK YOU FOR  
JOINING US TODAY!

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Please complete  
evaluation in chatbox



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