


Behavioral health integration with renal patients

ADC Conference, 2017

Agenda

1. What is STI?
2. Emotional distress
3. Interpretation of symptoms
4. Different engagement styles

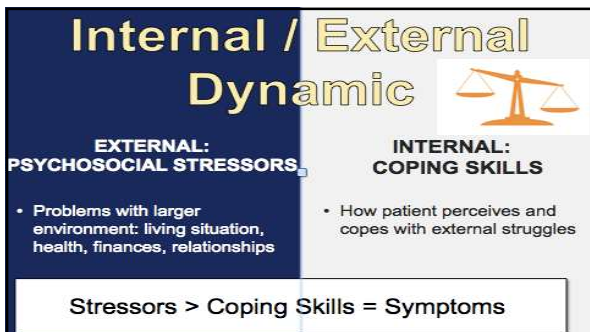
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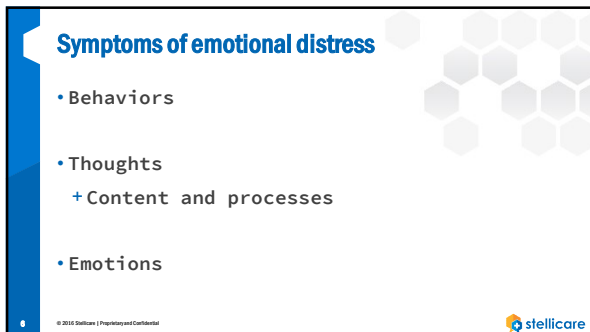


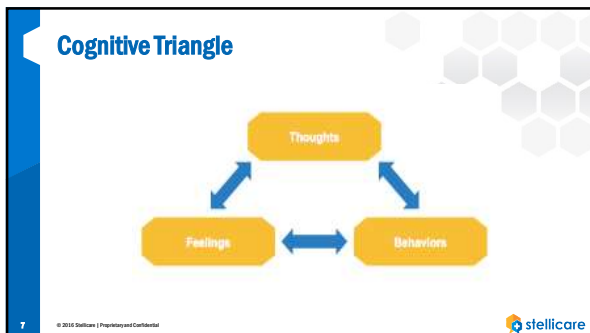
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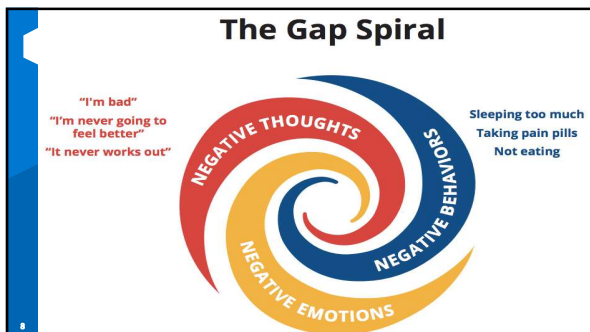
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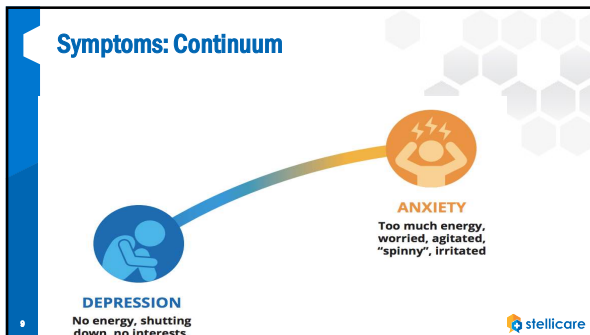












It works with all emotions

EMOTION	THOUGHT	BEHAVIOR
Sadness	"What's the point?"	Isolation
Anxiety	"I can't do this."	Avoidance
Anger	"This isn't fair."	Distance/lashing out
Shame	"I am bad."	Hide/conceal
Guilt	"I did something bad."	Hide/conceal

Grief

- loss of any kind
- Expectations versus reality

Messy process. Not linear

- sadness, anger, acceptance, shock, bargaining
- ebbs and flows. Triggers=reminders of loss

***To "resolve" grief, loss must be experienced emotionally ***

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STI Interventions

Goal = Improve coping skills

- Education
- Strategies

Not diagnosing

SW, dietitians, case managers, RNs

Printed, emailed, texted patient materials

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VBC and improving outcomes

- Must work with outlier patients
- Staff has their own reactions and beliefs
- We discovered four distinct patient engagement styles
- Need to train staff how to help all engagement styles
- We created clinical roundabouts for each engagement style

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Four engagement styles STI Matrix

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To get trained on STI....

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