

Increasing Continuation in Aftercare

The Jackie Nitschke Center

Abstract

This case study describes the changes that The Jackie Nitschke Center (JNC) of Green Bay, Wisconsin implemented to increase the percentage of people who complete the first five sessions of the Aftercare program. JNC instituted new requirements for participating in the Aftercare program and also initiated the use of cognitive mapping to achieve a significant increase in the percentage of clients staying through the first five sessions (from 38% to 83%) and also completing all sixteen Aftercare sessions (from 46% to 65%).

Aim

Increase the percentage of people completing the first five sessions of Aftercare to 85% and the number of people finishing Aftercare to 70%.

Paths

Levels of Care, Therapeutic Engagement, Social Support

Key Words

executive sponsor, timeliness, continuation, change team, aim, change leader



Jeff's story

Things were definitely looking up for 26-year-old Jeff. The year before, he had been drinking a twelve-pack of beer a day and had strained relationships with his family, friends, and employer. At a point when his wife and boss were both ready to give up on him, Jeff got a ticket for driving under the influence and had to seek treatment to get his license back. In doing so, Jeff discovered that he did have a problem and began to take outpatient treatment seriously. He recognized how damaging his drinking was to himself and others in his life. By the time he was ready to “graduate” from outpatient treatment, Jeff had made significant progress in understanding himself and his drinking. He had also gone for two months without a drink.

Jeff assumed he had finished treatment. His outpatient counselor had mentioned Aftercare, but Jeff had decided that he was fine and did not need further treatment. He barely paid attention to the instructions to sign up for the Aftercare group and did not catch the day and time for the sessions. The counselor had given him written information about the program, which Jeff eventually read and attended one session a couple of weeks later. He thought about going again, but never did. Unfortunately for Jeff, his life got a little stressful shortly after he stopped attending treatment and he started drinking again. He was too embarrassed to go back into outpatient treatment again, and wound up on the same destructive path where he had started.

The background for change

The Jackie Nitschke Center (JNC) considers the Aftercare program a critical step in recovery for those who complete the Center's Intensive Outpatient Program (IOP). Aftercare is a program following treatment for alcohol or drug abuse that encourages the development of social networks and activities to address emotional needs of recovering alcoholics and substance abusers. The Aftercare treatment program at JNC consists of 16 weekly one and one half-hour sessions.

As a member of the Network for the Improvement of Addiction treatment (NIATx), JNC had already tackled the issues of getting patients into treatment more quickly ([timeliness](#)) and keeping patients in residential treatment once they start ([continuation](#)). In February of 2004, the then [Executive Sponsor](#), Judy Glenz, worked with the change team to determine the completion rate for the Aftercare program. The team found that out of 150 people who began the Aftercare program annually, only about 38% attended all of the first five treatment sessions, and only 46% completed all 16 sessions. After further reviewing the data available, JNC found a high correlation between attending all of the first five sessions and completing the Aftercare program

Setting a change aim

JNC began the Aftercare continuation change process by meeting to decide on the goal. The goal of the [change team](#) at JNC was twofold. First, JNC wanted to increase both the percentage of people attending all of the first five Aftercare treatment sessions. Second, and more critically, JNC wanted to increase the percentage of people completing the Aftercare program. The [aim](#) developed was to:

Increase the percentage of people attending all of the first five Aftercare sessions to 85 and the percentage of people completing the Aftercare program to 70.

Meeting both aims would mean an overall increase in Aftercare completion rate of almost 25%. That would translate to 37 more people better prepared to remain in recovery from drug and alcohol addictions each year.

Making change happen

Prior to beginning the Aftercare change process, counselors had offered Aftercare to everyone graduating from the JNC Intensive Outpatient Program (IOP). The Aftercare program consists of 16 one and a half-hour sessions. JNC's former policy allowed patients to miss up to 3 sessions (any session after the initial Aftercare treatment session) and still graduate from the program. The change team decided that due to the high correlation of dropout rates with the failure to attend any of the first five sessions, people participating in the Aftercare program would be required to attend each of the first five sessions before any misses. The change team also decided that any participant who began the Aftercare program and then missed one of the first five sessions would need to attend a JNC staff meeting to discuss their absence before being allowed to return to the program.

By March 2004, the change team outlined the new criteria and presented it to all of the treatment counselors. From that point forward, counselors explained that Aftercare was a critical part of the recovery process. They also made it clear that attendance at each of the first five sessions was mandatory. Counselors advised participants that missing any of the first five sessions would mean attending a JNC staff meeting to explain the reason for their absence before being allowed to return to Aftercare.

Initial results

With the new policy in place, the Executive Sponsor and [change leader](#) tracked a group of 24 Aftercare treatment participants. The data they collected showed that the new policy improved attendance during the first five sessions, but not the overall completion rate. Over 80% attended all of the first five sessions, but slightly less than 46% of those participants went on to complete the Aftercare program. The change team then decided to follow a second group of 24 *different* Aftercare treatment participants using the same attendance policy as with the first group of 24. In addition, 12 participants in this second group also received a newly added intervention called Cognitive Mapping.

Supplemental programming: cognitive mapping

During the course of implementing change strategies to increase Aftercare completion rates, the JNC change leader and Aftercare counselor, Bill Labine, received training by a professor at Texas Christian University in cognitive mapping, a treatment intervention process. Cognitive mapping uses different types of associations to facilitate group discussions and individual thought process development. “Mapping New Roads to Recovery,” features an on-line course about the use of cognitive mapping for addiction treatment, and the Texas Christian University Web site offers information about the technique.

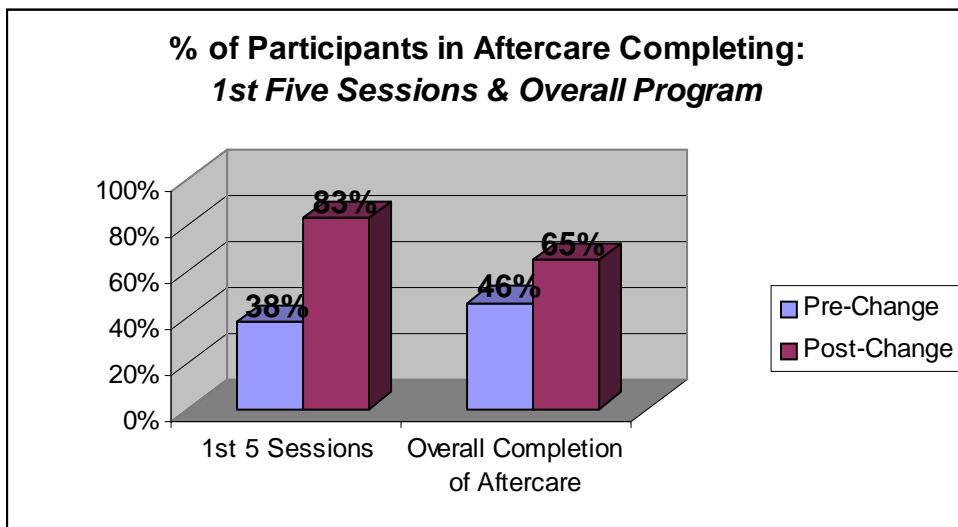
The change team decided that Bill should begin using cognitive mapping with his Aftercare group, which was half of the total number of people in the Aftercare program at that point in time (12 out of 24). The use of cognitive mapping did have a positive impact on the Aftercare completion rates.

The results for the second set of 24 people in total were much better. The percentage of people completing each of the first five sessions remained over 80 % and almost 80% went on to complete the Aftercare program.

With this significant improvement, the team decided to track a third group of 24 treatment recipients entering the Aftercare program using the new attendance policy and cognitive mapping. Again, over 80% attended all of the first five sessions and 65% completed the entire Aftercare program.

Overall Aftercare change results

The overall results for the first 72 people entering the Aftercare program post-change saw a 45% increase in attendance of all of the first five Aftercare sessions and a 14% increase in the number of people completing the Aftercare program.





The new Aftercare program attendance policy at JNC combined with the use of cognitive mapping have helped people like Jeff complete Aftercare treatment and maintain recovery.

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