

**Ohio Department of Alcohol and Drug Addiction Services
Linkage of STAR-SI with the ODADAS Outcome Framework
April to September 2008**

Background

The Department continues to use the Outcome Framework to compliment the STAR-SI project. The following are summaries of how providers are using Performance Target Outline (PTO) results with their process improvement efforts.

Current Findings

Ashtabula County – Lake Area Recovery Center

The PTO is for the agency's intensive outpatient program serving predominantly customers referred through the court system for DUI or related offenses. Tracking began 3rd quarter since the provider started implementing STAR-SI later in Year 2. Based on the 3rd and 4th quarter (SFY) results, it appears that the change project had an impact upon increasing retention since the continuation rate increased from 73 percent to 84 percent.

Columbiana County – Family Recovery Center

Though the program has aligned change projects with PTO results in the past, this program's customers changed from court or employers referred to customers eligible for Suboxone treatment. As a result the PTO for SFY 2009 has changed to reflect the population being served. The first quarter PTO results are not available at this time to begin to see the linkage with change project data and future direction.

Cuyahoga County – Catholic Charities Services

This provider began STAR-SI later in Year 2 and has maintained a focus on the front-end of treatment, i.e. initial engagement, where as the first milestone for the PTO begins at treatment. Generally customers are referred through the criminal justice system and Department of Children and Family Services. At first contact, customers have completed an assessment with another agency; therefore, first contact with this provider is to process the intake information. There had been approximately 46 percent show rate from contact to intake, and the program wanted to increase this rate to 70 percent or better. Through multiple contacts via telephone during the wait time for intake, and other methods to maintain contact, staff have indicated that the client no-show rate is above 70 percent. As like other programs, customers have changed over time; therefore, the program is modifying its milestones to be more behavioral oriented rather than cognitive. The program plans to aim to reduce the wait time to intake since the no-show rate has remained constant. Also the program plans to explore options to retain clients in treatment.

Cuyahoga County – Fresh Start

At this time the PTO is only for the women's outpatient/intensive outpatient program. The first change project at Fresh Start focuses on reducing the wait time from 15.1 days to 3 days from a higher level of care, including IOP to aftercare services; therefore the PTO results are not directly linked with this change project. The PTO results for this program have been relatively on target; however, staff would like to focus the next change project(s) on retention. One of the ideas is to create an enhanced waiting area to provide a more welcoming environment that would also be enriched with supplemental educational materials. Staff members believe that improving the environment to make it more inviting and providing a safe space feeling would improve retention in the program.

Cuyahoga County – New Directions

The PTO results to date indicate that clients are dropping off between the second and third milestone and/or they are not moving through the milestones on a timely basis. These results indicate that not as many clients reach the performance target as expected; thereby not completing the program successfully. Contacts for weekend hours were established to provide additional support during less structured times as a means to facilitate youth engagement and retention in treatment. Though most clients did not use this service, many requested that the service hours be expanded during the weekdays as well. This possibility continues to be explored. Motivational incentive program (gas and food gift cards) was established for parents, though the results indicated that parental/caregiver attendance remained relatively the same between 38 and 40% over a four month period. Staff have explored other reasons for this drop off and have concluded that there seems to be a need to modify the curriculum to better address needs, and in turn encourage completion of treatment. Staff perceptions have been that there is a difference in results between clients who have previously been in residential treatment vs. clients who are from the community, which could be playing a critical role in the patterns being seen through the PTO results. Completion rates and movement through milestones based on prior treatment experience will be examined.

Lake County – Lake-Geauga Recovery Center

The PTO is for the intensive outpatient program at the agency. Like the Ashtabula County provider, this provider also began tracking results in the 3rd quarter of the SFY. Change projects during this reporting period focused on improving reception, reception area and intake process, as well as no-shows for assessment and individual counseling. It appears either one or the combination of these change projects have impacted client outcome since the 3rd and 4th quarter actual results for the Milestone

#1, treatment engagement, exceeded the projection by approximately 55 percent. Data also indicate there is a drop-off between Milestone #1 and Milestone #2, increasing awareness and knowledge. The provider plans to focus the next change project(s) to impact this milestone.

Lorain County – Lorain County Alcohol and Drug Abuse Services

This program is focusing on clients referred to the intensive outpatient program (IOP). The program's first change project addressed the wait time from initial contact to assessment, which might have some impact on results for the first and second milestones. However, based on the past two quarter results, there is an indication to monitor the next quarter results for milestone #3 and #4 since there appears to be a drop-off between these two milestones. Capacity issues may be affecting these numbers, especially since the closing of another agency within the board area, though it appears that the program's pre-treatment services has demonstrated success in engaging clients until they can be "admitted" to the IOP.

Mahoning County – Meridian Services

The PTO is for the Medically Assisted Treatment outpatient program for Methodone. The program's first change project is focusing on decreasing the time for intake and assessment. The program has seen a tremendous increase in the number of clients admitted to the program, which has created some logistics and security issues. The program has begun implementing rapid change projects regarding these concern, which may impact the first milestone: clients accept the need for treatment and actively participates. The first quarter results due in November will indicate if the change project might have had an impact.

Medina County – Solutions Behavioral Healthcare

The PTO is for the agency's indigent detoxification (detox) program with clients who have been referred to outpatient treatment. A change project was initiated in February 2007 to increase the number of clients who engage and complete treatment post detox. The agency was able to secure a grant through the Medina County Drug Abuse Commission for a "Recidivism Prevention Specialist" which was a part-time position in FY08. Though there was an increase in clients engaging and completing treatment following detox, program staff had not anticipated:

- The significant increase in demand for detox services;
- The number of clients moving out of county or being incarcerated after detox (though many returned for services after their release from jail or prison); and

- The long waiting time to secure adequate housing and medications, which plays a major role in clients' ability to fully and actively participate treatment and their recovery.

The agency attempted to reach out to the community in an effort to self-sustain the program to successfully move detox clients through treatment by initiating a fundraising activity. The agency worked with the community to hold a sober New Year's Eve celebration in which they received donations from 60 local businesses. The agency has been working with the Medina County Alcohol, Drug and Mental Health Board to address the increase in demand for indigent detoxification services. Due to the positive impact that the Recidivism Prevention Specialist has had, the Medina County Drug Abuse Commission increased funding to full-time for FY09. Solutions has made significant changes to the Indigent Detox Program for FY09. As illustrated, system change projects are more appropriate for this PTO rather than rapid change projects, though the agency will continue to monitor the program for opportunities for rapid change.

Portage County – Townhall II

The PTO is for the adult, male clientele referred from the criminal justice system to the agency's outpatient program. The program's first change project in STAR-SI was to "reduce wait time from 23 days to 7 days." The PTO milestones begin at the completion of assessment; therefore, there is no linkage of PTO results with this change project. However, staff report having seen a correlation between improvement of wait time and reduction of no-shows.

The first two quarters of PTO results indicated a "drop off" in the number of clients achieving the first milestones and completing the second milestone, i.e. completing assessment and beginning clinical services. Given this finding, the program next change project is focusing on increasing retention from assessment to the first clinical service, which is the state-specific measure #5—the STAR-SI program-wide required measure. Observations over the past few months indicate that clients are more content and are bringing family with them, and the front desk reception workers have received fewer complaints. The PTO results also indicate clients are moving through the milestones at a higher rate than projected.

Stark County – Quest Recovery and Prevention Services

The PTO is for an adolescent outpatient program at one site, Canton. Based on the 2nd quarter results and lessons learned, adolescents appear to be dropping out or not progressing as quickly as expected after the second or third milestone. The program indicated erratic attendance and lack of linkage with positive peer/support as

possible reasons for clients dropping out or being stalled at these points in treatment. Staff indicated a reason why clients do not come back is because clients believe they are okay. Though the program first started and continues to address access (no-show rates), the current focus is on retention. The following are change projects that are being considered to increase attendance and retention, which will facilitate client movement through milestone #3 and milestone #4 to program completion:

- Include a discussion about “feeling ok” during an initial group session and encourage adolescents to let their counselor know their thoughts and feelings in person;
- Facilitate peer relationships among group participants by offering field trips and allowing non-facilitation time during group sessions for adolescents to share among themselves; and
- Facilitate clients’ involvement in extra-curricula activities where use is not a norm at school or in the community.

The two most recent change projects beginning in January 2008 may also have an impact: • assessing customer satisfaction, and • naming the program contest.