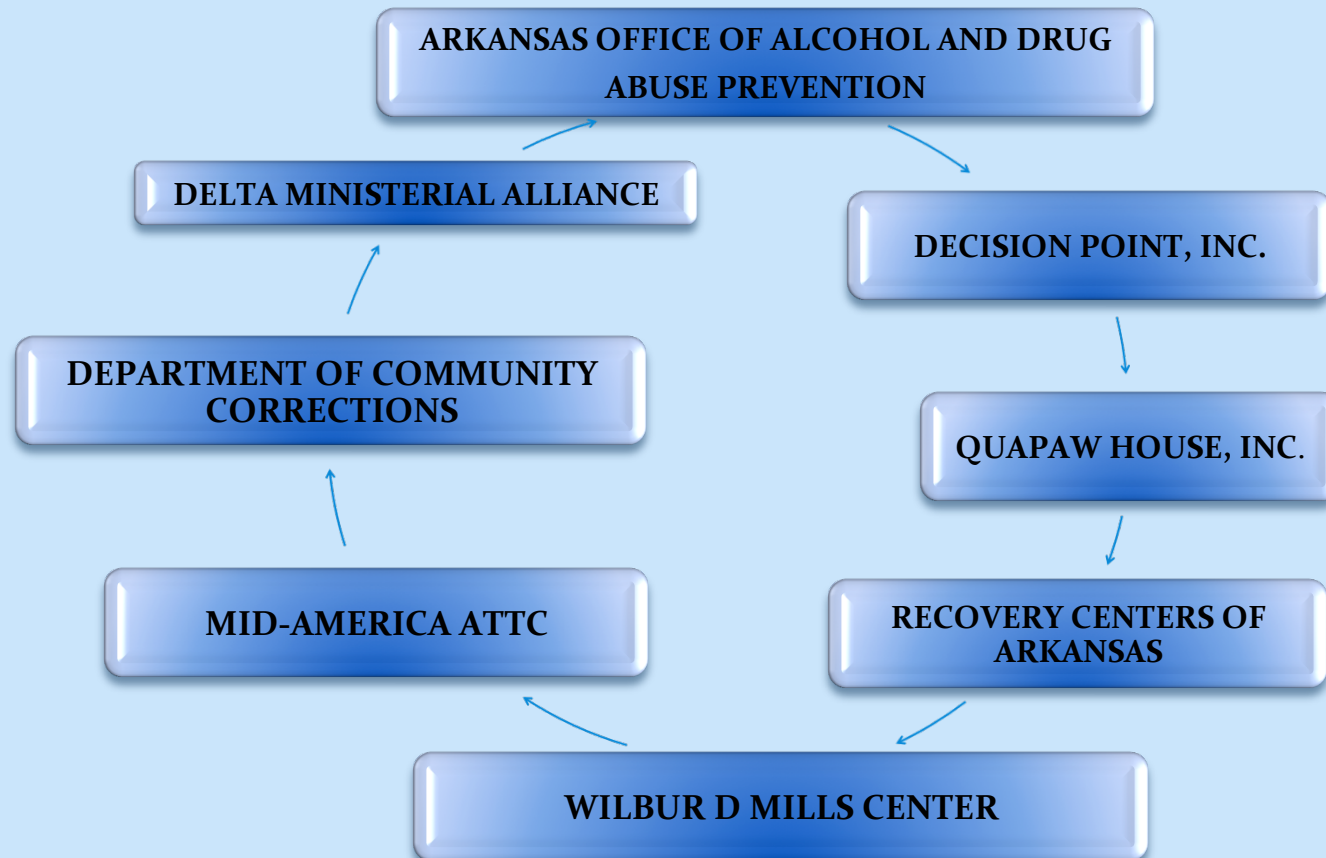


# **ARKANSAS ADVANCING RECOVERY PARTNERSHIP**

## **AIM**

**Change the state's treatment approach from an acute-care treatment model to a more comprehensive , recovery-oriented model.**

# ADVANCING RECOVERY PARTNERS



**TARGET EBC**

**CONTINUING CARE**

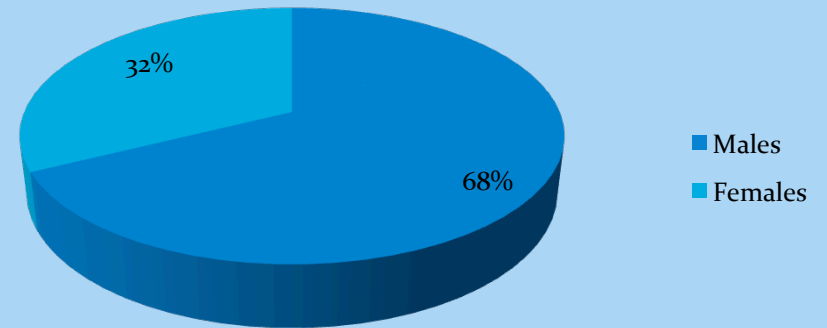
# **SYSTEM CHANGES/ACTIVITIES**

## **IMPLEMENTED**

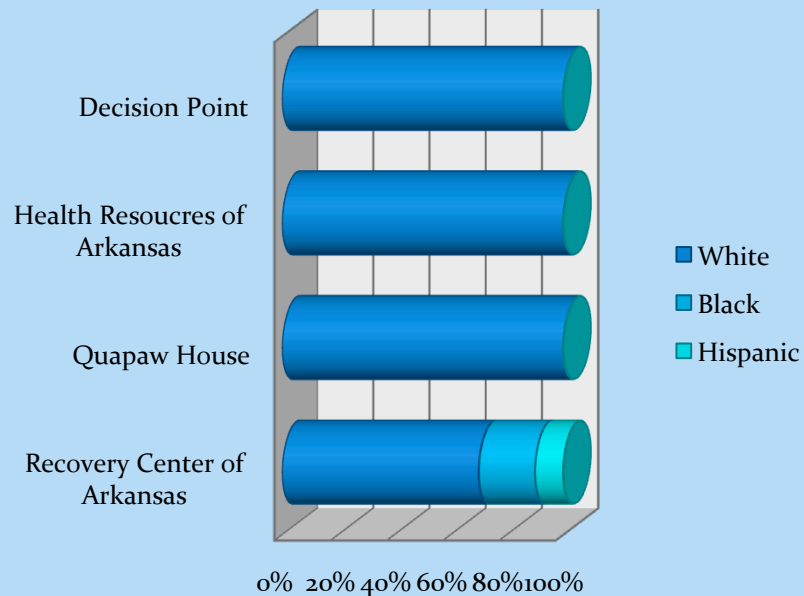
- ❑ **The Arkansas AR Partnership participated in an introduction to Continuing Care teleconference with Dr. James McKay, followed by a two-day on-site training for clinical supervisors and counselors conducted by Tyrone Thomas (Dr. McKay's clinical supervisor).**
- ❑ **Continuing Care clients receive ongoing follow-up phone calls, individual counseling/care management as needed.**
- ❑ **A billing system has been developed to reimburse programs for Continuing Care services.**
- ❑ **The four participating agencies began admitting clients into the Continuing Care Program on August 4.**
- ❑ **Clinical supervisors and counselors receive on-going coaching via biweekly conference calls conducted with Tyrone Thomas.**
- ❑ **Each agency brought together a Provider Change Team to implement Continuing Care. Monthly conference calls are conducted with the Mid-America ATTC Technical Assistant Consultant/Data Manager.**
- ❑ **The Provider Change Teams have conducted walkthroughs of their Continuing Care programs and are developing PDSA cycles based on the results of the walkthroughs.**
- ❑ **A combined data tracking, clinical record, and billing system for Continuing Care clients was developed and installed at the four provider agencies. The database developers provided on-site training.**

# DATA TRACKING MEASURES

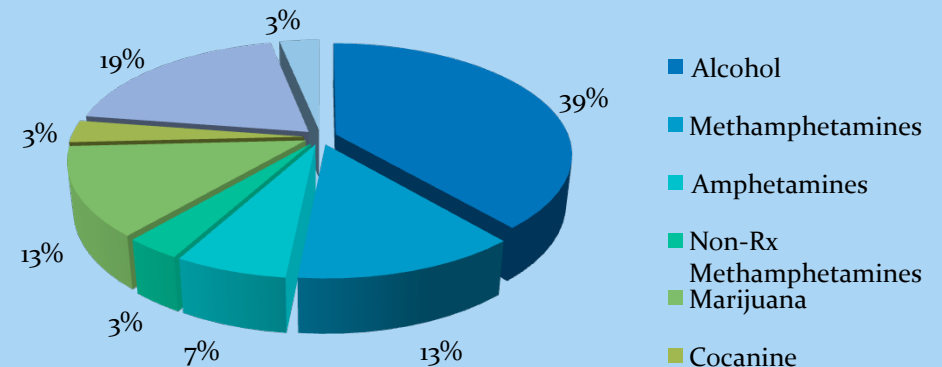
## Arkansas' Continuing Care Male/ Female



## Arkansas' Continuing Care Active Clients - Race



## Arkansas' Continuing Care - Past Drug



**Arkansas' Continuing Care Services began in August 2008. To date the Continuing Care service has 34 active clients.**

# **BUSINESS CASE**

**Arkansas historically has a high rate of utilization of residential services. This project has the potential to move the State from this current focus on an acute-care treatment model to a comprehensive, recovery-oriented model. The resulting decrease in repetitive use of detoxification and residential care will decrease the cost per person of treatment and thus allow more individuals to be treated with the current amount of funding. Given the severity of the problem in the state, it is possible that demonstrated improvement in the effectiveness of treatment such as this might prompt an increase in allocation of additional funding by the state legislative body.**

# **NEXT STEP**

**□ Provider Change Teams are beginning to conduct cycles to improve Continuing Care processes and assist in smooth implementation of the Continuing Care program.**

**□ Clinical supervisors and counselors will discuss problems/issues and successes through on-going Coaching Conference Calls**

**□ The Lead Data Specialist is beginning to review and analyze client data that will lead to outcomes reports and suggestions for program modifications.**

**□ We will transition Continuing Care into a statewide program.**



QUAPAW HOUSE, INC.



MID-AMERICA ATTC



ARKANSAS ALCOHOL DRUG  
ABUSE PREVENTION (ADAP)





WILBUR D MILLS



RECOVERY CENTER OF ARKANSAS



DECISION POINT, INC.

