



Project Leadership SSA Director W. Lee Catoe; Change Leader George Crosland; Program Coordinator Carl Kraeff; SSA Change Team members Carol Hammond, Frankie Long, Jim Maxwell, Harry Prim, James Wilson, Julie Grubbs, Daniel Walker, Lachelle Frederick; Peer Mentors Cheryl Long, Amy Coto, Kathleen Padgett, Martha Critchley; NIATx Coaches Lynn Madden and Scott Farnum.

Provider Sites Cohort One:

- ❖ Aiken Center for Alcohol and Other Drug Services
- ❖ Axis I Center of Barnwell
- ❖ Colleton County Commission on Alcohol and Drug Abuse
- ❖ Georgetown County Alcohol and Drug Abuse Commission
- ❖ Keystone Substance Abuse Services (York County)
- ❖ LRADAC: The Behavioral Health Center of the Midlands (Lexington and Richland Counties)
- ❖ The Phoenix Center (Greenville County)
- ❖ Spartanburg Alcohol and Drug Abuse Commission

Cohort Two:

- ❖ Alpha Center
- ❖ Anderson/Oconee Behavioral Health Services
- ❖ Behavioral Health Services of Pickens County
- ❖ Charleston Center
- ❖ Cherokee County Commission on Alcohol and Drug Abuse
- ❖ Circle Park Behavioral Health Services
- ❖ Cornerstone
- ❖ Dawn Center
- ❖ Ernest E. Kennedy Center
- ❖ Fairfield Behavioral Health Services
- ❖ Hazel Pittman Center
- ❖ Rubicon, Inc.
- ❖ Shoreline Behavioral Health Services
- ❖ Trinity Behavioral Care

PROJECT DESCRIPTION

To use the NIATx model of process improvement to improve access and, through increased retention, produce better outcomes for clients, whose quality of life has improved, making them more productive at school or at work.

PRIMARY AIM(S) OF THE STATE AND PROVIDER PARTNERSHIP

By gradually expanding the NIATx model to its statewide network of substance providers, DAODAS expects to attain better client outcomes as a result of systematic process improvements that are aimed at reducing the wait time for service and the time spent on paperwork; improving the transfer procedures between departments (between assessment and other services) and communication with the clients; reducing the number of clients who do not keep appointments; and increasing the number of people admitted to treatment and those that stay in treatment.

STATE/PAYER ACTIVITIES TO IMPROVE ACCESS AND RETENTION

To achieve its aims, DAODAS and participating providers have implemented change projects that aim to reduce the amount of intake paperwork, and increase access and retention

RESULTS

The changes implemented by the state led to the following improvements

- 85% reduction in the amount of intake paperwork
- 41% reduction in the length of the intake process
- \$111,000 realized in increased intake efficiency

The most significant change projects were:

- Increase in percentage of clients who receive 1st treatment service within 6 days of assessment: Spartanburg (223%), Cornerstone (105%), and Kennedy Center (63%)
- Reduction in days from 1st contact to 1st treatment service: Keystone (77%), Cherokee (73%), and Colleton (65%)
- Reduction in days from 1st contact to intake and/or assessment: LRADAC (100%), Pickens (100%), Rubicon (86%), Anderson/Oconee (75%), Dawn Center (62%), Trinity (67%), Hazel Pittman Center (54%), Fairfield 53%, and Phoenix Center (50%)
- Reduction in no-shows to group treatment: Georgetown (74%)
- Increased admissions: LRADAC (73% to Women's IOP)
- Reduced broken appointment rate: Aiken (48%)

The top Cohort One agency-level improvements were:

- Objective: Increase admissions by 5% by Dec 2008.
 - Colleton (37%), Phoenix Center (8%), LRADAC (6%)
- Objective: Reduce wait from 1st contact to 1st treatment service by 16% by Dec 2008
 - Axis I (39%), Phoenix Center (37%), Georgetown 26%, Colleton (15%)
- Objective: Increase services within 30 days of admission by 16% by Dec 2008
 - Keystone (20%), Axis I (18%)

The change projects contributed to the following results for Cohort One by the end of the data reporting period of January 31, 2007:

- Admissions increased by 4.36%
- The wait time from first contact to first treatment service decreased by 19.16%

STAR-SI State Change Bulletin: October 2006 – April 2008

KEY EVENTS AND LESSONS

October 2006	SSA paperwork reduction change projects started (implemented statewide by October 2007)
January 2007	First Orientation/Learning Collaborative held in Columbia
February 2007	South Carolina delegation attended the first NIATx national meeting
March 2007	Eight South Carolinians attended the NIATx Change Leader Academy in Madison, Wisconsin
April 2007	<ul style="list-style-type: none">• Colleton joined the first cohort, bringing its number to eight.• A robust South Carolina delegation attended the First Annual Summit in San Antonio
June 2007	Second Learning Collaborative was held in Columbia
July-August 2007	Recruited additional 13 providers and coaches for the second cohort
September 2007	Orientation of the second cohort was held in conjunction with the Third Learning Collaborative for the first cohort. Members of the third cohort, who are scheduled to join in FY 009, also attended for one day.
October 2007	Both cohorts started to emphasize a single statewide aim: to reduce the average number of days from first contact to first treatment service
November 2007	DAODAS Change Team joined Communities of Commitment. Two state-level projects started
January 2008	<ul style="list-style-type: none">• Shoreline Behavioral Health Services joined the second cohort, bringing its number to 14 (total 22)• Fourth Learning Collaborative held in Columbia
February 2008	A large delegation of change agents from the SSA, providers and the Behavioral Health Services Association of South Carolina attended the second national meeting
March 2008	<ul style="list-style-type: none">• Refined statewide aims• First South Carolina NIATx Change Leader Academy held in Columbia, with 42 students
April 2008	<ul style="list-style-type: none">• Fifth Learning Collaborative in Columbia• Refined data calculations by not averaging averages but using raw numbers

SUSTAINABILITY AND SPREAD

To sustain and spread its improvements DAODAS plans to expand the project to the entire statewide provider network, which is comprised of 33 county authorities that serve all 46 of South Carolina counties.