



Serving teens and families
troubled by alcohol and other drug use

Adolescent Chemical
Dependency Treatment

Outpatient

- Services at two locations in Spokane, WA
- 500 Admissions per year
- 65% government fee for service contracts including Medicaid
- 35% private insurance and client fees

Inpatient

- Inpatient services in Spokane and Vancouver, WA
- 450 Admissions per year
- Public/private case-mix moving toward 50/50
- Annual agency operating budget \$4.2 million

The Aims

Decrease time between first call and assessment while, at the same time, increasing the profitability of the assessment process.

- WHY?** The number of 2-hour assessment slots were becoming less available, which was delaying assessments.
- WHY?** When customers no showed for assessments, 25% of a counselor's working day was lost.
- WHY?** One major insurance carrier (responsible for 25% of insurance referrals) would only pay for 1-hour assessments.
- WHY?** Customers reported that they felt the process was too long.

THE CHANGE

Reduce the time of the initial (assessment) session from 2 hours to 1 hour.

THE PROCESS

- 1 → The assessment process was analyzed and mapped.
- 2 → The key elements of the initial assessment session were isolated.
- 3 → A protocol was developed which divided the assessment process into 5 timed segments.
- 4 → 3 PDSA cycles of the first segment (having the teen client and parent arrive 15 minutes early to supply historical information). In the end, preliminary paperwork was drastically simplified and customers were subsequently asked to arrive 5 minutes before the assessment time.
- 5 → 2 counselors piloted the 4 clinical segments. A counselor checklist was kept to measure whether the protocol time-frames were accurate and the goals of the process were accomplished. No major problems were reported.
- 6 → The remaining 3 counselors were oriented to the process and checklist and asked to limit their assessments to 1 hour.

THE MEASURES

- 1 → The "counselor checklist" (Used to cue and measure adherence to the new process and to identify problems.)
- 2 → Time between initial contact and first session.
- 3 → Does the office manager have more flexibility in scheduling client appointments?

THE RESULTS

- Initial adherence appeared satisfactory and the use of the "counselor checklist" was discontinued fairly quickly.
- The process has become routine and is seen to be effective by the first 3 counselors.
- The remaining 3 counselors have had more difficulty. One manages the process with some difficulty; another ceased the process when she became concerned about billable hours; and a third is able to accomplish the task only 50% of the time.

1 →

First Contact to Assessment		Overall (days)	Private (days)	Public (days)
The general trend in terms of timeliness is in the right direction.	April	5.9	3.8	7.9
	May	7.2	6.3	8.1
	June	6.3	5.8	6.8
	July	7.4	8.7	6.0
	August	8.2	7.0	9.3
	September	4.8	1.8	7.7
	AVERAGE	6.7	3.8	7.5

2 →

Note: July and August numbers were adversely affected by planned counselor vacations and the unexpected month-long absence of one of the counselors during August.

3 →

The office manager reports much increased flexibility (greater availability) in scheduling client assessment appointments. She is able to accommodate the needs of the customer most of the time with less difficulty.

THE LEARNING

1 → Careful mapping and definition of treatment processes has a positive effect on clarifying and implementing improvements.

2 → Perhaps because the pilot went so smoothly, the change team went too quickly on to other things without a clear plan to nurture and sustain the change.

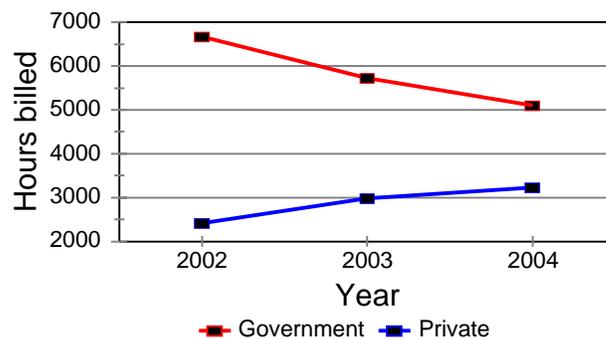
Several of the counselors that were having problems reported:

- That there was not a consistent and persistent feedback loop about how the change was working.
- The sense of "push" was quickly lost...there was no deadline or ongoing imperative.

THE BUSINESS IMPACT

DAYBREAK OUTPATIENT

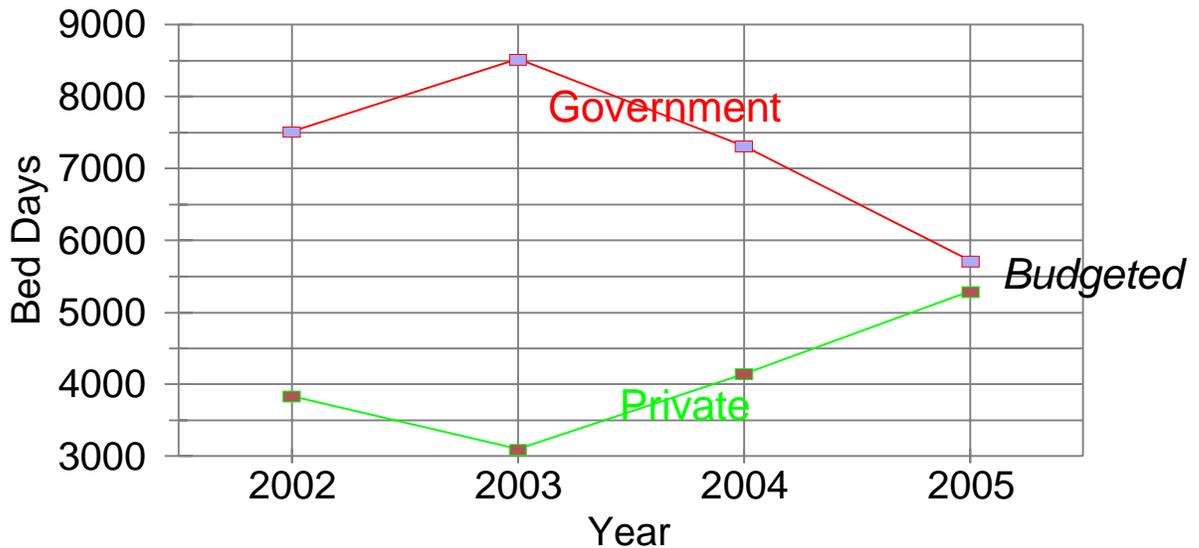
Government vs. Private



Faced government funding shortfalls, the Outpatient program hoped (in addition to NIATx aims) to take actions that would more effectively utilize the limited public monies and increase the volume of services to privately funded clients. This change is one step in that direction.

DAYBREAK SPOKANE INPT

Government vs. Private Bed Days



Facing a reduction of nearly \$600,000 in government funding over a two year period, we hoped that (in addition to the NIATx aims) our efforts would have an effect on the mix funding by increasing the volume of services to privately funded clients.

FUTURE PLANS

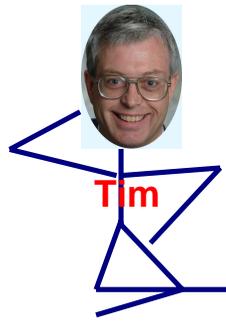
➔ Increase ratio of group therapy to individual therapy sessions.

➔ Further contact with pediatricians and clinics with an aim to partnering toward increased admissions.

➔ Partnering with defense attorneys with aim to increasing deferred prosecution referrals.

➔ Develop a short-term program for early stage and experimental users.

➔ Continue to map and analyze clinical processes and implement relevant improvements.



ORIGINAL NIATX CHANGE TEAM

(Oversight & Sustaining Changes)



Outpatient Change Team
(Timeliness, Continuation, No Shows)

A group of seven stick figures in various colors (red, green, blue, orange) with heads of team members, arranged in a loose circle.

Outpatient Billing Improvements
(↑ Revenue by Improving Financial Processes)

A group of five stick figures in various colors with heads of team members, arranged in a loose circle.

Outpatient Administrative Team
(Map & Improve Office Processes)

A group of four stick figures in various colors with heads of team members, arranged in a loose circle.

Inpatient Milieu Team
(Continuation)

A group of seven stick figures in various colors with heads of team members, arranged in a loose circle.

Inpatient Admissions
(Increase Admissions/Regulate Case Mix)

A group of seven stick figures in various colors with heads of team members, arranged in a loose circle.

Inpatient Reorganization
(Map & Restructure Inpatient)

A group of seven stick figures in various colors with heads of team members, arranged in a loose circle.