Improving the Quality of Care for Persons in Need of Substance Abuse Treatment: CSAT's Vision

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Key Factors for Improving the Quality of Care

- Adoption of Evidence-based Practices
- Strengthening quality measurements and reporting infrastructure
- Applying quality improvement methods

** These priorities have been suggested in
Improving the Quality of Health Care for Mental and Substance-Use Conditions

CSAT's Quality of Care Vision

- Persons in need of treatment deserve services that are:
  - Evidence based
  - Client-centered
  - Performance based

CSAT's Quality of Care Initiatives

- Identify and disseminate evidence based practices
  - National Registry of Evidence Based Programs and Practices (NREPP)
  - Treatment Improvement Protocols (TIPS)
  - Addiction Technology Transfer Centers (ATTCs)
  - CSAT/NIDA Blending Initiative

National Registry for Evidence-Based Programs and Practices (NREPP)

- SAMHSA's voluntary registry is a resource to state and community based organizations on the scientific basis and practicality of interventions to prevent and/or treat mental and substance use disorders

- A decision support tool that treatment providers can use to determine what programs and practices meet the needs of their clients
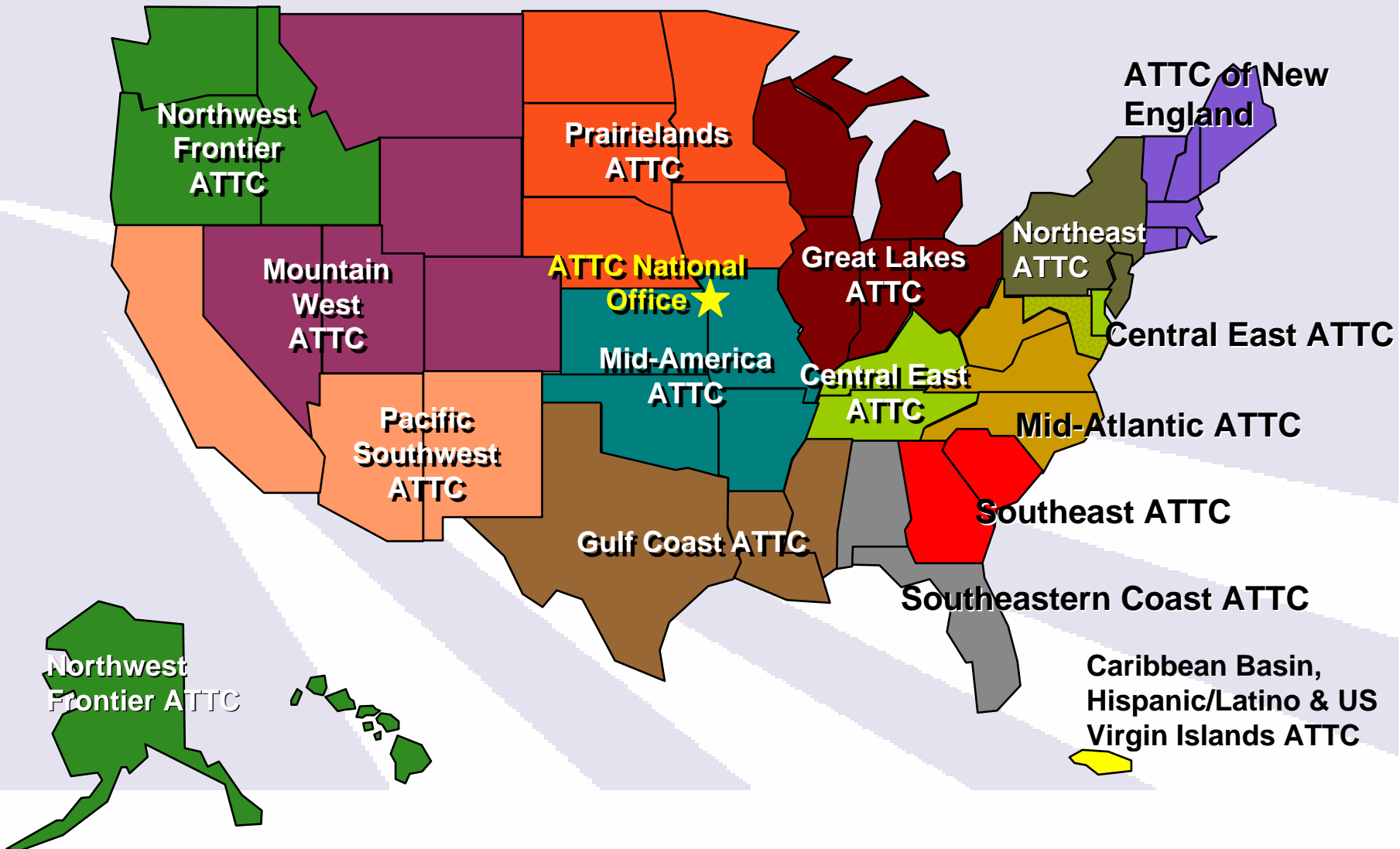
NREPP

- Outside experts rate interventions on two dimensions:
  - Strength of evidence, e.g. reliability, validity, intervention fidelity
  - Readiness for dissemination, e.g. quality of implementation materials
- Ratings and descriptive summaries of interventions are posted on the NREPP website: www.nrepp.samhsa.gov

Addiction Technology Transfer Center (ATTC) Network

- The ATTC Network transmits the latest knowledge, skills, and attitudes of professional addiction treatment practice to improve addiction treatment

- ATTCs create a multitude of products and services that are timely and relevant to the many disciplines represented by the addiction treatment workforce

The ATTC Network

Northwest Frontier ATTC

Prairielands ATTC

ATTC of New England

Mountain West ATTC

ATTC National Office

Great Lakes ATTC

Northeast ATTC

Central East ATTC

Mid-America ATTC

Central East ATTC

Mid-Atlantic ATTC

Pacific Southwest ATTC

Gulf Coast ATTC

Southeast ATTC

Southeastern Coast ATTC

Northwest Frontier ATTC

Caribbean Basin, Hispanic/Latino & US Virgin Islands ATTC

Examples of ATTC Resources

- ATTC Publications Catalog—a directory of ATTC Network products and resources, including curricula, videos, presenter materials, trainings and more

- Certification Information

- *The ATTC Networker*—a newsletter designed to deliver timely and relevant information about ATTC projects and SA treatment field

Available on the ATTC website at: www.nattc.org

CSAT/NIDA Blending Products

- Jointly developed by NIDA researchers and ATTC experts:
  - Motivational Interviewing
  - Motivational Incentives
  - Treatment Planning Using the Addiction Severity Index (ASI)
  - Buprenorphine Treatment
  - Short Term Opioid Withdrawal Using Bupernorphine

Available on the ATTC website at: www.nattc.org

Treatment Improvement Protocols (TIPS)

- Manuals

- Consensus Based

CSAT's Quality of Care Initiatives

- Promote client centered services

  – Increase access (e. g. SBIRT/NIATx)
  – Support client decision making (e.g. ATR)
  – Support clients throughout the recovery process (e.g. RSCP)

SBIRT

- The SBIRT Initiative targets those with nondependent substance use and provides effective strategies for intervention prior to the need for more extensive or specialized treatment.

- The Initiative involves implementation of a system within community and/or medical settings—including physician offices, hospitals, educational institutions, and mental health centers—that screens for and identifies individuals with or at-risk for substance use-related problems.

ATR

- The Access to Recovery (ATR) Program is part of a Presidential initiative to provide client choice among substance abuse clinical treatment and recovery support service providers, expand access to a comprehensive array of clinical treatment and recovery support options (including faith-based programmatic options), and increase substance abuse treatment capacity.

- Through the ATR grants, States, Territories, the District of Columbia, Tribes, and Tribal Organizations (hereinafter collectively referred to as "States") have flexibility in designing and implementing voucher programs, consistent with proven models, to meet the needs of clients in the State.

RCSP

- This is a grant program of the Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Treatment (SAMHSA-CSAT).

- In RCSP grant projects, peer-to-peer recovery support services are provided to help people initiate and/or sustain recovery from alcohol and drug use disorders.

- Some RCSP grant projects also offer support to family members of people needing, seeking, or in recovery

CSAT's Quality of Care Initiatives

- Performance Management
  - Quality Measures
    - National Outcome Measures (NOMS)
    - Field Generated Measures, e.g. WCG, NIATx
  - Process Improvement, e.g. NIATx

Purpose of the NOMS

- The goal is to achieve a performance improvement environment with true accountability.

- SAMHSA is collecting data, analyzing it, and asking how it can be used to manage and measure performance.

- SAMHSA is partnering with colleagues in single State agencies for mental health and substance abuse services and the providers of care.

- NOMs presumes data collection at admission and discharge, with the use of a unique client identifier.

National Outcome Measures: 10 Domains

- Abstinence
- Employment/Education
- Crime and Criminal Justice
- Stability in Housing
- Access/Capacity
- Retention
- Social Connectedness
- Perception of Care
- Cost Effectiveness
- Use of Evidence-Based Practices

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NOMS Implementation

- States report National Outcome Data voluntarily through the Block Grant Application;

- TEDS is currently being modified to accept all admission and discharge data required through NOMS

Washington Circle
www.washingtoncircle.org

- A policy group on performance measurement for care of substance abuse dependence

- 4 domains of care

- 7 core performance measures

- 3 adopted by National Committee for Quality Assurance's (NCQA) Health Plan Employer Data and Information Set (HEDIS)

Washington Circle Performance Measures

Domain	Measure
Prevention/Education	Educating patient about AOD disorders
Recognition	*Identification rates
Treatment	*Initiation of AOD plan services Linkage of detox and services *Treatment engagement Interventions for family/significant others
Maintenance	Maintenance of treatment effects

* HEDIS measure

Applying Quality Improvement Methods

The Network for the Improvement of Addiction Treatment (NIATx) is a partnership of

The Center for Substance Abuse Treatment (CSAT) *Strengthening Treatment Access and Retention (STAR)* & STAR-State Implementation STAR-SI)

The Robert Wood Johnson Foundation (RWJF) *Paths to Recovery (P2R) and Advancing Recovery (AR)*

Affiliated States and Treatment Organizations

NIATx 's Mission

To help providers learn approaches that make more efficient use of their treatment capability and produce improvements in care delivery that affect access to and retention in addiction treatment.

Five Key Principles

➤ Understand & Involve the Customer

➤ Fix Key Problems that Keep the CEO Awake

➤ Select the Right Change Agent

➤ Get Ideas from Outside the Agency

➤ Do Rapid Cycle Testing Before Roll-Out

Four NIATx Aims
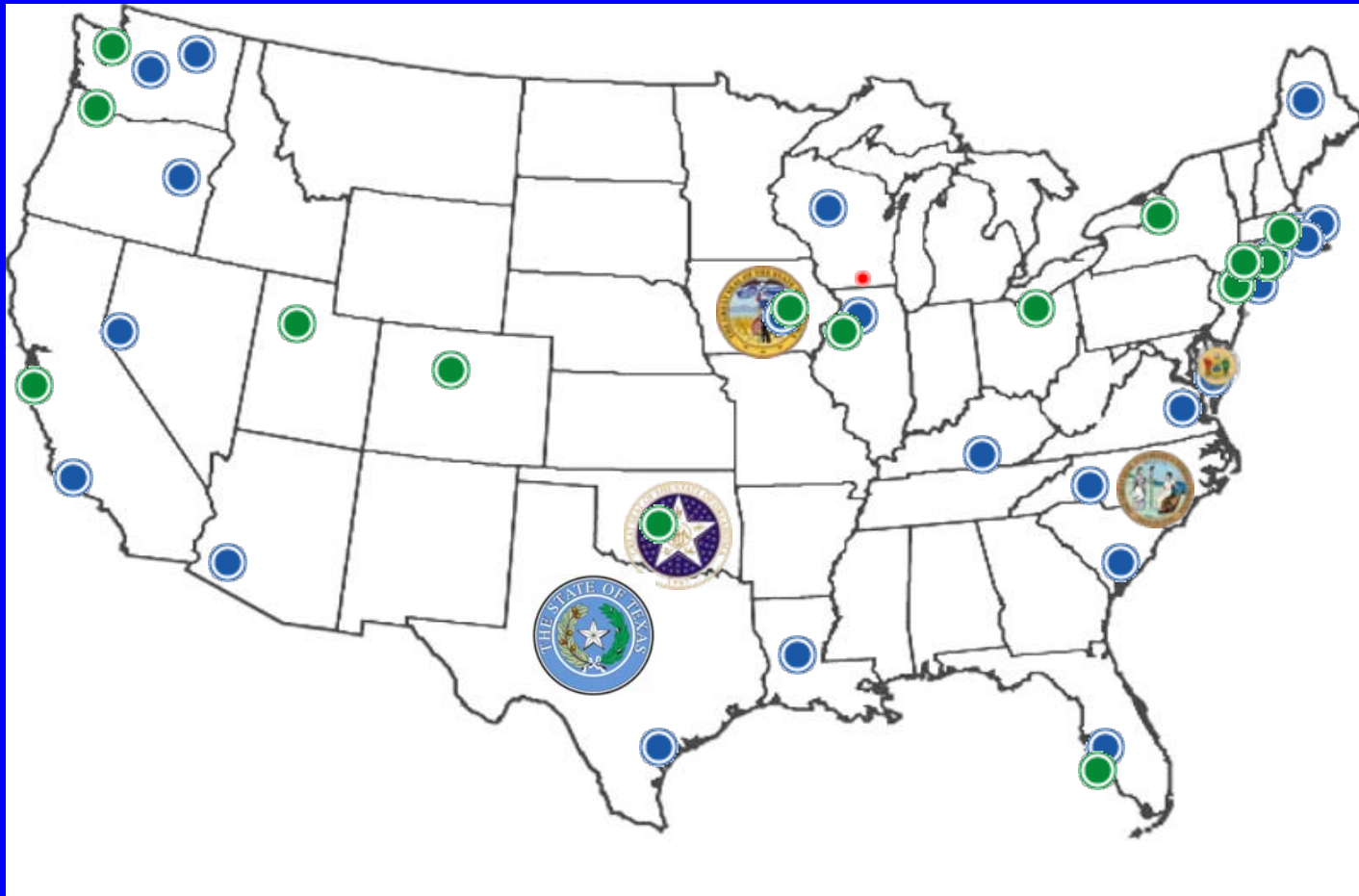
Reduce Waiting Times

Reduce No-Shows

Increase Admissions

Increase Continuation Rates

NIATx National Presence

NIATx Accomplishments

- NIATx members have demonstrated that work processes can be improved, which in turn improves the quality of care clients receive, as well as the fiscal health of treatment agencies.

- NIATx members -- payers and providers working together -- are building a culture of improvement;

SAMHSA/CSAT Information

- www.samhsa.gov
- SHIN 1-800-729-6686 for publication ordering or information on funding opportunities
  - 800-487-4889 – TDD line
- 1-800-662-HELP – SAMHSA's National Helpline (average # of tx calls per mo.- 24,000)