Jackie Nitschke Center, Inc.

630 Cherry Street Green Bay, WI 54301 (920) 435-2093



Jackie Nitschke Center, Inc. is a non-profit organization with the mission of providing cost effective and affordable alcohol and drug treatment continuum of care in a home-like environment to adult clients and their families. We have a 14-bed residential program, two intensive outpatient programs, three aftercare groups, and an alumni group.

INCREASING CONTINUATION

Change Leader: Judy Glenz (for this Change Project); for more information, contact Bill LaBine, wlabine@bayland.net

Team Members: R. Maloney, A. Bieda, S. Anderson, and B. LaBine
Location: 630 Cherry Street
Level of Care: Aftercare
Population: Clients who have completed IOP and are starting aftercare
Aim Addressed: Increase continuation
Start Date: February 2004
Project Status: Sustained as of April 25, 2004

GOALS AND MEASURES

Following a successful change in our intensive outpatient treatment program, we noticed an increase in no-shows for aftercare and a decrease in the number of clients completing aftercare. Our aftercare program is free. The Change Leader reviewed the data, identified similarities in those who completed aftercare, and shared her findings with staff. Staff participated in a walk-through, interviewed aftercare clients, generated ideas for change, and then the Change Team selected changes from the list.

Goal: Increase the percentage of people attending all of the first five aftercare sessions to 85 and the percentage of people completing the aftercare program to 70.

We measured attendance over the first five aftercare sessions, and aftercare completion rates.

CHANGES IMPLEMENTED

We changed the aftercare paperwork to include the following instructions to clients:

- The need to start aftercare right away, with no breaks allowed between IOP and aftercare
- Attendance: clients must attend the same group the first five weeks; no misses are allowed
- Punctuality: clients late for group or clients who miss group sessions would need to attend staffing

Only two absences are allowed for the 16 week period

In addition, intensive outpatient counselors placed more emphasis on aftercare treatment. Previously, they had not spent much time talking about aftercare and did a poor job with discharge planning.

IMPACT AND LESSONS LEARNED

We tracked 24 aftercare treatment participants. The data collected for this group showed that the new policy improved attendance over the first five sessions to 83% from the baseline of 38%. Slightly less than half of these went on to complete all 16 aftercare sessions.

We decided to track another 24 clients. Eighty-three percent completed the first five sessions without a miss, and 79% of these went on to complete all 16 sessions.

In the next group of 24, 83% completed the first five sessions without a miss, and of these 63% went on to complete all 16 sessions.

We learned that when treatment participants attend the first five aftercare sessions without missing they develop the habit of attending, are able to develop a bond with the other group members, and are much more likely to complete all 16 aftercare sessions.

This has become agency policy.

