

## **Process Improvement Learning Collaborative Implementation Story**

Prior to the STAR-SI project, Iowa had been involved in one NIATx-sponsored process improvement project. Five agencies had been working in a pilot project to improve access and retention. Iowa's then-SSA director, Janet Zwick immediately saw that this project had an impact on not only client access and retention, but also on each agency's business case. Prior to the pilot project, she had attended several Robert Wood Johnson Foundation meetings and had spoken to other states involved in or planning similar projects. In her opinion, any agencies involved in Iowa's process improvement initiative would need significant support and encouragement from the state. She believed this was the case because Iowa's agencies have historically been challenged when allocating staff resources to special projects. This was especially true as agencies' staffing and funding patterns emphasized client services over unfunded special projects. Agency staff turnover was also increasing, making it difficult for agencies to sustain gains.

Following Iowa's selection as a STAR-SI grantee, Iowa selected eight of Iowa's 25 block grant funded agencies to implement STAR-SI. These agencies were invited to participate by the SSA director. The agencies participated voluntarily, a condition that Iowa's SSA saw as a positive and, indeed, a necessary condition for the project's success. The original eight agencies were chosen because of their demonstrated commitment and readiness to fully participate in the project. Two additional agencies, Prairie Ridge and Mid-Eastern Council on Chemical Abuse (MECCA), were chosen to provide coaching, mentoring and technical assistance to the eight pilot agencies. They had previously demonstrated successes in access and retention through process improvement techniques under the Robert Wood Johnson Paths to Recovery Program. The original eight providers admitted approximately 30 percent of all clients admitted to Iowa's licensed substance abuse providers in FY2007. Iowa planned to eventually include all 25 block grant-funded agencies during the life of the STAR-SI project.

State staff wondered if agencies would be able to dedicate staff to process improvement with no guarantee of an increased bottom line from their activities. When Iowa was selected for the project, each agency was awarded an \$18,000 grant to carry on process improvement activities. This grant covered the costs for dedicating a staff member to be the project change leader, providing funds for travel to NIATx and STAR-SI national activities, and allocating data coordinator time to compile and report data to the state. Funding these agencies was an important aspect of the project as it became clear early on that agencies needed more staff time than anticipated to plan and carry out change projects. Agency data coordinators also needed extra time, as Iowa's data system did not capture STAR-SI data in a way that was easily reportable. In fact, our data system (called I-SMART) was later enhanced in order to better track STAR-SI specific data.

Iowa also involved numerous stakeholders in our initiative. The SSA established partnerships with the state managed care contractor, the Iowa Behavioral Health Association (IBHA), and the Iowa Substance Abuse Supervisors Association (ISASA). These organizations were represented on the management team and were key collaborators in carrying out activities to meet project goals. This group also played a

dual role in both state and agency-level activities. At the state level, this group helped set the access and retention performance targets, provided direction and oversight in implementing the improvement activities to reach the targets, established performance management systems, and monitored outcomes.

Iowa used several methods to train providers in the NIATx model. Before agencies began to meet in change teams, Iowa's state executive sponsor, change leader, and project coordinator, along with each agency's executive sponsor conducted walkthroughs of each agency. These walkthroughs were used to determine each agency's most pressing needs as they related to initial client contact. Iowa's then state change leader, DeAnn Decker, was struck by how much each agency's executive sponsor reported learning about his/her own agency; information that was in all cases new to the executive sponsor. Ms. Decker remarked, "These executive sponsors were surprised by how different their experience posing as a client was from what they had anticipated. Most thought they knew those areas in which their agencies needed to improve. That really changed because of their walk-through experience."

On October 24, 2006, Iowa's project held its state learning collaborative and kick-off orientation meeting. This meeting served as an introductory session, allowing agency staff to meet IDPH key staff and Iowa's NIATx coach (who had also conducted her initial site visit). Each participating agency had two or three representatives present, including the executive sponsor and change leader.

This one-day learning collaborative session gave the agencies a chance to learn basic NIATx principles from the state coach, learn more about the importance of the business case, the state collaborative learning network, and how providers fit into IDPH's vision of state-wide sustainability and spread of process improvement. One of the most beneficial presentations focused on the importance of remembering that not all projects are successful. The important message was to value the process as one that will lead to improved service delivery. Learning and being part of the process impressed agency staff in many ways.

As one change leader observed, "It's been simply amazing what a little exercise like building a better paper airplane turns into!" One change project to get clients in faster for evaluations caused a waterfall effect within the outpatient facility, decreasing wait times for evaluations from 25 to 7 days, decreasing no-shows from 25 percent to under 10 percent, increasing admission conversion rate by 10 percent; increasing retention to fourth session from 61 percent to 86 percent; and increasing customer satisfaction . . . all in the matter of weeks! So much for doing the same thing over and over again expecting better outcomes!"

But the lessons learned at that first collaborative went beyond access and retention. One agency decided that NIATx principles could be used in a broader agency context. In the fall of 2006, SASC became a participant in the STAR-SI Program. SASC's Director, Diane Thomas, informed SASC's board of directors that they were participating in the

STAR-SI project and gave them periodic updates at board meetings. The concepts of data-driven decision-making and process improvement found a home at SASC. According to Ms. Thomas, “the board members were concerned about client wait times for assessments and treatment at SASC, and felt that a big part of the problem was staff retention. In the past, board members felt staff retention was solely a salary issue and therefore there was not much they could do about improving salaries given the agency’s economic status. At the request of the executive director, the board members agreed to survey the staff to see if salary was the only issue. An outside person facilitated that survey in November 2007 with results that surprised everyone. Eight topic areas were evaluated, and while salary was an issue, it was not the sole issue nor the issue that staff was most concerned about. The Board of Directors, a consultant, and the management team set out to change the ways in which the agency operated. During the next 16 months, the group used process improvement methods to identify and implement change projects in the agency. Sixteen months after the first survey, an outside person using the same survey methods once again surveyed the staff members. All eight topic areas showed improvement ranging from 7 to 90 percent. The overall change was 46 percent.”

These processes continue in Iowa as agencies meet every six months at the regularly scheduled State Learning Collaborative. Using the learning collaborative, agencies teach and support one another to use valuable methods for expanding and maintaining Iowa’s fund of process improvement knowledge.

One of Iowa’s first approaches to a statewide change project focused on paperwork reduction. In the state change team’s opinion, licensed substance abuse agencies had, over the years, built up an impressive armada of forms that they used to not only provide clinicians and support staff with valuable client information, but to also meet what they perceived to be state-required paperwork demands.

Iowa’s goal was to improve efficiency by reducing intake and assessment paperwork. We began by focusing on intake and assessment paperwork at five pilot providers’ sites in order to increase admissions and continuation. The results were telling: according to licensure surveyors who assessed agencies’ paperwork requirements, of the five providers surveyed, only one was not burdening clients and staff with excessive paperwork **not** required by licensure standards. In fact, one agency was requiring 52 percent more paperwork than licensure standards required. One agency took paperwork reduction to heart as it reduced its assessment time by nine minutes. This nine-minute reduction added 30 hours of available staff time over one year, improving its bottom line significantly.

Iowa is especially proud of our peer mentor system of agency coaching. Iowa conducted its first peer mentor training on January 11, 2007. This training gave the Iowa peer mentors the tools and foundation to train providers. It was a hands-on workshop that included role-playing and training in how to use the forms agencies would be using. This training gave the mentors experience using the NIATx tools before training with the providers/change teams. Discussions on building rapport, site visits, how to manage difficult situations, and completing tri-annual reports needed for the process evaluation were all covered. Peer mentors meet regularly with agency change teams to provide guidance for their change projects.

Iowa uses monthly conference calls including all-member calls and peer mentor calls, along with occasional data system calls when needed to update and support providers. These regularly scheduled calls have provided a solid foundation for the spread of the STAR-SI process improvement culture. We include the state coach in all calls and correspondence helping him get a better assessment of Iowa's strengths and needs.

Monthly data status reports based on the four aims along with graphic representations of each agency's data helps agencies stay attuned to how they are doing with aims. During all-member and peer mentor calls, we regularly refer providers to the NIATx website for information about project-specific items. But perhaps the best communications strategy that Iowa uses is one we could call "the old fashioned way." We are committed to providing agencies with concrete, concise, and timely support whenever they request it in the quickest fashion available.

We have recently begun to expand on the learning collaborative model. In the third project year, program coordinator Gena Hodges and state change leader Lonnie Cleland began to provide "mini-collaboratives" to agencies. These mini-collaboratives are essentially training and café-style meetings designed to focus on topics of interest or need for an individual agency's full staff. Where we once conducted "site visits" to monitor provider adherence to contractual issues, we now design these mini-collaborative meetings to meet the needs of the customer, our provider agencies. Mary O'Neill, Heartland Family Service's executive sponsor, was impressed with how her staff responded to our collaborative approach. Heartland was interested in having us provide a NIATx overview to provide the agency's full staff with a better understanding of the project. Ms. O'Neill stated that "we were really excited about how the mini-collaborative approach helped us not only improve our staff's understanding of the project, but also how it increased our staff's 'buy-in' and support for STAR-SI."

That first learning collaborative meeting got Iowa off on the right foot by letting all the providers know that we were serious about process improvement. That message continues to this day. Kathy Stone, Iowa's SSA director, has underscored Iowa's commitment to process improvement by continuing the learning collaborative approach as part of each grant application the Behavioral Health Division writes. The division's gambling treatment and substance abuse prevention offices have both begun NIATx process improvement projects. Iowa's managed care provider, Magellan Behavioral Care of Iowa, has entered into a contract with NIATx and Kim Johnson to more aggressively implement NIATx aims and principles. In addition, Iowa will include pay for performance principles focusing on access and retention in the state's next managed care contract. Ms. Stone states, "I believe these changes are concrete demonstrations of our commitment to a collaborative approach; an approach I believe supports informed policy making and positively impacts service delivery in Iowa."