



CALL FOR PROPOSALS



Paths
to Recovery

Changing the Process of Care
for Substance Abuse Programs

THE ROBERT WOOD JOHNSON FOUNDATION

Summary

Paths to Recovery is a \$9.5-million initiative of The Robert Wood Johnson Foundation® (RWJF), designed to strengthen the substance abuse field's ability to improve the process of care that facilitates patient access to and retention in substance abuse treatment programs.

Despite a rapidly changing environment, the substance abuse field has continued to supply needed services to local communities. This initiative is intended to build on those skills that already exist by significantly enhancing the use of improvement techniques that have been applied successfully in other health care settings. These techniques encourage a deeper understanding of client needs; a restructuring of work flow to better respond to those needs and make the most efficient use of available resources; and the institution of measurements that allow continuous monitoring and improvement of these care processes. It is envisioned that the process improvement techniques introduced in the *Paths to Recovery* program, and the lessons learned from it, will act as a critical support to the field's long-term health and will narrow the treatment gap between those who need and those who receive care.

Paths to Recovery will improve client services by:

1. *Increasing admissions*, by reducing the time between request for alcohol and drug treatment and the initiation of treatment at the appropriate care level.
2. *Increasing retention rates*, with fewer individuals prematurely discontinuing treatment.

The initiative has four components:

- A communication campaign to inform the substance abuse field about the benefits of process improvement techniques, how these approaches can be applied, and where additional information and resources can be found.
- Major grants and technical assistance provided over an 18-month period for selected substance abuse providers to learn process improvement techniques and apply them to improve their access and retention systems.
- A Web site and other educational opportunities offering process improvement resources targeted to the alcohol and substance abuse field.
- An evaluation of the *Paths to Recovery* program in order to gain a better understanding of how to apply process improvement techniques and improve access and retention systems within the substance abuse field.

Background

Addiction to or misuse of alcohol or other drugs has been estimated to cost our society approximately \$276 billion annually. Additionally, the Substance Abuse and Mental Health Services Administration reports that, every year, between 13 and 16 million Americans are in need of substance abuse treatment. Yet only around 20 percent of those individuals actually access treatment and as many as half of those who do gain access abandon treatment before its full benefits can be realized.

There are many reasons for this discrepancy, some of which are unique to individual treatment programs. One reason, of course, is patients' lack of readiness to commit to treatment. Others have to do with how a program's treatment services are structured and delivered as well as the financial environment in which it operates.

Global financial issues such as government funding are beyond the direct control of individual treatment programs. However, it is possible to improve organizational processes to serve clients more effectively within a program's existing financial environment. Indeed, such organizational improvements, by reducing duplications of work, eliminating steps no longer needed, and increasing the chances that systems work right the first time, can actually remove some of the barriers to treatment. Thus, a substance abuse organization should be able to reduce, from weeks to days, the time between an individual's request for and initiation of alcohol or drug treatment, and to increase admissions by fully using capacity at all levels of care. Improvements to administrative processes can reduce frustration, not only for patients who need care, but also for the administrators, clinicians and staff who are trying to help them receive the care they need—when they need it, and for as long as they need it.

The Program

For the initiative, two groups of 8 to 10 treatment programs each will be selected to receive direct grant support in implementing process improvement techniques to help strengthen their access and retention procedures. Each grantee organization will, in turn, form its own team to participate in a collaborative learning network consisting of grantees, *Paths to Recovery* consultants, and other experts from the substance abuse field. The learning network includes three 2-day meetings (attended by project team members) during the 18-month grant cycle, monthly teleconferences, and a virtual community supported by Internet technology. Each grantee team should include the executive director or chief executive officer (CEO) as well as other individuals who have responsibility for and an understanding of the organization's access and retention systems.

For those organizations that do not receive direct grant support, the *Paths to Recovery* Web-based resource center and the *Paths to Recovery* monthly teleconferences will be available to assist them in improving their access and retention processes, so that they can benefit from the lessons learned and knowledge created within the grant-funded projects. A set of successful practices resulting from the grants will be disseminated to the field through the Web site and other media outlets.

At the end of the grant period, successful organizations will have:

- Streamlined their intake process so that it takes less time, results in fewer no-shows and better meets the needs of clients.
- Increased their productivity, evidenced by more clients served within the existing funding levels.
- Eliminated many of the organizational barriers to accessing care.
- Demonstrated substantial quantitative performance improvements to their access and retention systems.
- Become skilled at using process improvement techniques to rapidly, efficiently and successfully improve all organizational processes.
- Used information technology to better coordinate the intake process, to facilitate greater client involvement in treatment and to improve organizational access to all process improvement tools and resources.
- Trained their staff in the skills needed to improve organizational processes.
- Increased retention by having fewer individuals leave treatment prematurely.

Grants will be awarded in two rounds. The first 8 to 10 grant awards of up to \$250,000 each will be awarded September 1, 2003, and will last for 18 months. The second round of funding will be announced during the last quarter of 2004.

The *Paths to Recovery* National Program Office (NPO) will make every effort to ensure that the funded projects are beneficial and educational experiences for the grantees. Significant process consultation and content assistance will be available, as will a virtual learning network to facilitate learning and provide support.

Examples of process consultation:

- Uncovering unmet client needs.
- Team building for organizational problem-solving.
- Using creativity to stimulate innovation.
- Preparing the organization for change.
- Applying a systematic problem-solving model.
- Using measurement to identify and remedy problems.
- Process mapping and flow analysis.
- Managing and leading process improvement.
- Spreading process improvement techniques throughout the organization.
- Sustaining change.

Examples of content assistance:

- Increasing counselor availability by decreasing the time needed for administrative tasks.
- Facilitating just-in-time access to care.
- Implementing staffing models to optimally meet client demand for services.
- Streamlining the collection of intake data to minimize the time required to obtain needed information.
- Better linking between care levels along the continuum.
- Identifying trigger signals for early withdrawal from treatment.
- Implementing ways to bring about greater client-provider rapport.

Eligibility and Selection Criteria

The virtual learning network will offer:

- National face-to-face meetings with other NPO grantees, NPO consultants and invited experts from the field.
- A Web-based discussion group and mailing list.
- Monthly educational events.
- Tools, models, etc.

RWJF wants to attract a diverse group of public-oriented grantees from nonprofit substance abuse agencies based on the following eligibility and selection criteria.

Eligibility Criteria

- Nonprofit or public organization whose funding primarily comes from public sources such as block grants, Medicare, Medicaid, local governments, grants, or private philanthropy.
- 100+ admissions per annum.
- Evidence of being in control of several levels of care as defined by the American Society of Addiction Medicine (ASAM) so that clients can be moved, without barriers, between outpatient treatment, intensive outpatient/partial hospitalization, residential/inpatient treatment, and medically managed intensive inpatient treatment levels. This can be achieved in one of two ways: an organization can own these services outright or can build them through a virtual network. A virtual network is one where written agreements exist between the organization and members of its network that formalizes the ability to move clients among them, without barriers, between levels of care.

Selection Criteria

Organizations will be assessed and selected based on:

1. Community Impact

- The potential impact that improvements to their access and retention processes will have on the local community, as demonstrated by increasing admissions and improving retention rates.

2. Leadership Commitment

- The strength of dedication of the organization's leadership to making improvement of access and retention systems a priority.
- How the improvement methods used in and results from *Paths to Recovery* will be spread to other processes and/or parts of the organization and its network to become a long-term strategy.
- A commitment by the governing body to support process improvement initiatives.

3. Organizational Capacity to Improve Client Services

- The ability to move clients, without barriers, between levels of care.
- The existence of data systems, paper or electronic, capable of reporting admissions data and retention rates.
- The understanding of the current strengths and weaknesses of the organization's access and retention systems.
- How the improvements made to the access and retention systems will be sustained once the *Paths to Recovery* grant support ceases.
- Suitable financial health.

4. Grantee Project Structure and Participation Commitment

- The strength of the project team(s) assigned to the access and retention improvement project.

- The strength of the plan to communicate the ongoing progress made by the *Paths to Recovery* improvement team to the entire organization.
- The commitment to fully participate in the virtual learning network associated with the *Paths to Recovery* program.

Use of Grant Funds

The total grant award may be used for project staff salaries, cost of staff meeting time related to the project, supplies, travel to *Paths to Recovery* meetings, use of process improvement consultants, computer equipment purchases and Internet service provider services and other direct expenses.

In keeping with RWJF policy, grant funds may *not* be used to subsidize individuals for the costs of their health care, to support clinical trials of unapproved drugs and devices, to construct or renovate facilities, as a substitute for funds currently being used to support similar activities, or for lobbying purposes. Thus, in the *Paths to Recovery* program, access will be improved by more effective use of current resources, not by increasing the number of treatment slots.

Grantees will be expected to meet RWJF requirements and deadlines for the submission of narrative and financial reports. Project directors may be asked to attend periodic meetings and give progress reports on their grants. At the close of each grant, the grantee is expected to provide a written report on the project and its findings, suitable for wide dissemination.

Evaluation & Monitoring

An independent research group selected and funded by RWJF will conduct an evaluation of the program. As a condition of accepting RWJF funds, grantees will be required to participate in the evaluation. Grantees also will be required to submit periodic information needed for overall program management and monitoring.

Program Direction

Direction and technical assistance for *Paths to Recovery* is provided by the University of Wisconsin–Madison, which serves as the NPO. David H. Gustafson, Ph.D., Professor of Industrial Engineering and Preventive Medicine at the University of Wisconsin–Madison, is the program director. Betta Owens, M.S., is the deputy director; LeeAnn Kahlor, M.A., is the communications officer; Jay Ford, M.S.I.E., is the Web director; and Nora McGann is the program assistant.

Additional program direction and technical assistance is provided by John Bartlett, M.D.; Don Hollway, Ph.D.; and Todd Molfenter, M.H.A.

This program addresses a grantmaking priority of the Alcohol and Illegal Drugs team at The Robert Wood Johnson Foundation. Responsible staff is Victor Capoccia, Ph.D., senior program officer; Dwayne Proctor, Ph.D., senior communications officer; Cynthia Kiely Isaacson, program assistant; and Megha Sanghavi, financial analyst.

A National Advisory Committee of experts in the field will assist with NPO strategic direction, proposal review and site selection.

How to Apply

The application process has three stages: (1) the submission of a brief proposal describing the project, and, if invited, (2) the submission of a full proposal and line-item budget, and, if invited, (3) a site visit. Not all organizations selected for site visits will be selected for funding.

Organizations wishing to apply for funds under this initiative should prepare a brief proposal online at the program's Web site, www.pathstorecovery.org. The brief proposal should not exceed six (6) double-spaced pages.

Applications will be accepted online exclusively.

Brief Proposals

The brief proposal should contain a description of:

- How the planned process improvement approaches will benefit the applicant's organization and, in turn, the community it serves.
- The actions leadership will take to facilitate adoption and to sustain the process improvement techniques of their treatment system.
- How the governing body will learn about and stay informed on the *Paths to Recovery* initiative.
- Who will provide day-to-day leadership or project direction to ensure that the project maintains momentum and all operational details are being addressed (including a description of that individual's background; for example, this person could be a manager, a counselor or even the CEO, if time allows).
- How a team consisting of the project director and key personnel involved in the daily management and operations of the applicant's access and retention systems will be able to attend three 2-day meetings without negatively affecting client services.
- How the "walk-through exercise" was conducted and the two most salient observations. (The "walk-through exercise," requested in the online form, is an essential component of the application. In it, a member of the applicant's organization acts as client, makes a contact for service, and then goes through the intake and admission process. The exercise's purpose is to generate better understanding of how a consumer experiences the applicant's organizational processes. This required exercise is just one of many simple techniques to analyze and improve processes of care; others will be used throughout the project.)
- The perceived strengths and weaknesses of the applicant's access and retention systems.

Also, using the Operational & Financial Data worksheet in the online submission template, describe:

- The network that allows the movement of patients, without barriers, between the levels of care.
- The organization's financial health.
- The existence of data systems capable of reporting admissions data and retention rates.

Full Proposals

Full proposals will be requested from those applicants whose brief proposals best meet program criteria. Full proposals will not exceed 20 pages and will build upon the information requested in the brief proposal. Specifically, they will require a description of:

- The tentative composition of the applicant's improvement team(s).
- How the applicant's entire organization will be made aware of the *Paths to Recovery* project and the ongoing progress made by the improvement team.
- How the improvement methods used in the *Paths to Recovery* will be spread to other processes and/or parts of the organization.
- How the improvements made in the applicant's access and retention systems will be sustained following cessation of the *Paths to Recovery* grant support.

For those selected to submit a full proposal, a letter of invitation and a formal application package will be provided by March 20, 2003. RWJF does not provide individual critiques of proposals submitted.

Selection Process

Both brief and full proposals will be assessed according to eligibility and the selection criteria outlined on pages 9 and 10. A selection team composed of RWJF staff, NPO staff and members of the National Advisory Committee will review all brief proposals and determine those applicants eligible for full proposal submission; they will then review the full proposals and determine applicants eligible for site visit review; following the site visits, they will make the final selection of grantees. Final funding decisions are made by the Foundation.

Inquiries

Please visit the program Web site at www.pathstorecovery.org for answers to your questions about the program, selection criteria or application requirements. Other inquiries may be directed to:

Paths to Recovery
National Program Office
Attn: Nora McGann
University of Wisconsin
610 Walnut Street, Room 1109
Madison, WI 53726
Phone: 608-265-0063
Fax: 608-262-8454
E-mail: info@pathstorecovery.org

Timetable

January 3-February 10, 2003

Brief proposal submission accepted online.

January 14, 2003 (11 a.m.–12 p.m. CST)

Informational conference call for potential applicants

Call number: (888) 677-9189

PIN number: 1708#

Participants must preregister by 5 p.m. CST on January 6th by calling (608) 265-0063.

January 24, 2003

Chicago, Illinois

Midwest Access and Retention Improvement Workshop:

An opportunity to learn about process improvement strategies, open to the field—see announcement on

www.pathstorecovery.org.

January 31, 2003

Portland, Oregon

West Coast Access and Retention Improvement Workshop:

An opportunity to learn about process improvement strategies, open to the field—see announcement on

www.pathstorecovery.org.

February 3, 2003 (3 p.m.–4 p.m. CST)

Informational conference call for potential applicants

Call number: (888) 677-9189

PIN number: 1708#

Participants must preregister by 5 p.m. CST on January 27th by calling (608) 265-0063.

February 10, 2003 (3 p.m. CST)

Deadline for receipt of brief proposals (must be submitted online).

March 20, 2003

Applicants will be notified whether they have been selected to submit a full proposal.

April 14, 2003

Informational conference calls to be scheduled for additional information about proposals.

April 25, 2003 (3 p.m. CDT)

Deadline for receipt of full proposals (must be submitted online).

May–July, 2003

Site visits.

August 2003

Notification of grant awards.

September 1, 2003

Grants begin.

To learn more on how to increase admission and retention rates and to register for workshops, please visit the program Web site at www.pathstorecovery.org.

About RWJF

The Robert Wood Johnson Foundation® is the nation's largest philanthropy devoted exclusively to health and health care. It concentrates its grantmaking in four goal areas:

- To assure that all Americans have access to basic health care at reasonable cost.
- To improve care and support for people with chronic health conditions.
- To promote healthy communities and lifestyles.
- To reduce the personal, social and economic harm caused by substance abuse—tobacco, alcohol and illicit drugs.

This document, as well as many other Foundation publications and resources, is available on the Foundation's Web site:

www.rwjf.org

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