

SPREAD AND SUSTAINABILITY

What can you get for \$16,000, the NIATx process improvement model, a couple of skilled NIATx consultants, and a handful of state, county and provider staff committed to quality improvement? Nothing less than a growing statewide initiative aimed at making addiction treatment more customer-friendly and achieving meaningful improvements in service access and retention! In August 2005, the state of Wisconsin Division of Mental Health and Substance Abuse Services began implementing NIATx process improvement with these humble beginnings and six volunteer outpatient treatment providers. Just three years later, the initiative has grown to 30 providers with support and involvement from the state provider licensing agency (Division of Quality Assurance) and three statewide addiction service associations. As State Change Leader and Bureau of Prevention Treatment and Recovery Director Joyce Allen has expressed, "We need to infuse the NIATx model of quality improvement into all of what our bureau does."



While the Wisconsin process improvement initiative had modest beginnings, the swift gains made thus far have largely been the result of a three-year federal STAR-SI grant from the Center for Substance Abuse Treatment, not to mention the hard work and commitment from participating treatment providers. Without the grant, resources would not have been sufficient to spread quality improvement so quickly. State level coordination and support staff and process improvement consultants are critical to an on-going effort. Furthermore, providers new to STAR-SI require some seed funds to defray non-billable costs associated with incorporating STAR-SI change project activities and data collection into their agency procedures. Looking to the future, the Wisconsin STAR-SI project has distributed private foundation fund-raising guidance and materials to providers.

Since the inception of STAR-SI and reflecting its acceptance among providers, Wisconsin has had just 3 of 32 providers withdraw from the project for reasons such as staff turnover, reorganization, and lack of CEO support. Still, the state STAR-SI agency puts these providers in "outreach" status and maintains contact in hopes of re-engaging them in the future.

Wisconsin promotes the NIATx ACTION Campaign as an alternative to STAR-SI, through discussions with the ACTION Campaign Director, distributing Campaign literature at training events and conferences, and promoting the Campaign as a means by which treatment agencies can meet state and payer quality improvement and service evaluation requirements.

Other Wisconsin spread and sustainability activities include:

- Implementing regulatory changes that allow selected standards to be waived if an agency is successfully implementing process improvement
- Instituting funding policies (RFPs) that reward agencies for implementing PDSA
- Replacing NIATx facilitators with peer mentors, contract administrators, and ACTION Campaign support
- Setting aside state funds to host an annual process improvement training and subsequent peer learning networks
- Integrating the STAR-SI project into Wisconsin's overall plan for use of National Outcome Measures
- Including process improvement training at various annual conferences
- Exploring ways that state addiction service organizations can help to sustain the project

A fitting story to close this section on spread and sustainability follows. Located in the area home to Wisconsin's first Governor Nelson Dewey and home to the founder of the Gideon Bible Society,

Unified Community Services, with clinics in rural Dodgeville and Lancaster, provides mental health, substance abuse, community support program, Birth to Three, developmental disabilities, family support, emergency, and Iowa County Community Options Program services. Its substance abuse services program provides prevention, intervention, education, and treatment services to residents of Grant and Iowa Counties. With offices in Lancaster and Dodgeville in southwest Wisconsin, the program aims to improve the quality of life and well-being for alcohol and other drug dependent families.

Between March and August of 2008, the Lancaster office successfully reduced clients' wait time from initial assessment to first treatment from 54 days to 26 days by switching from closed to open groups. Whenever group enrollment fell below 8 people, the next person on the wait list was invited to begin treatment. In August, the Wisconsin Division of Quality Assurance approved a variance allowing STAR-SI participants to increase their group sizes to 10 people. By maintaining open groups and increasing enrollment to 10 people, Unified Community Services was able to further reduce their clients' wait time to 17.5 days. The changes also promoted successful treatment completion. The quality improvement effort proved so successful that the approach has been implemented in the Dodgeville office as well. The NIATx model and continuous quality improvement have become part of the culture of this agency.