

October 11, 2018



July 25, 2018

2018 Fall Quarterly Conference



Great Lakes Mental Health Technology Transfer Center (MHTTC)

A resource for Indiana Mental Health providers.



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Funded by Substance Abuse and Mental Health Services Administration



University of Wisconsin-Madison



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State Coordinator for IN, IL, OH

Great Lakes Addiction Technology Transfer Center (ATTC)



DEPARTMENT OF
**Industrial and
Systems Engineering**
UNIVERSITY OF WISCONSIN-MADISON



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Today's Presentation

1. Background
2. Mental Health Technology Transfer Center
3. *NIATx* Model of Process Improvement



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Center for Health Enhancement Systems Studies (CHESS)



David Gustafson, PhD
Industrial & Systems Engineer



Center for Health Enhancement Systems Studies (CHESS)

Systems Design & Process Improvement



Computer Technology



David Gustafson, PhD
Industrial & Systems Engineer

Improve care for patients living with a serious illness.

Center for Health Enhancement Systems Studies (CHESS)



*David Gustafson, PhD
Director*



*Todd Molfenter, PhD
Deputy-Director*

- 20M Americans needing addiction treatment
- < 10% get treatment
- Long wait times & high drop out rates
- Teach the field process improvement

2003

Robert Wood Johnson Foundation



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The birth of . . .



Formerly, the Network for the Improvement of Addiction Treatment

A Simple Process Improvement Model for Behavioral Health

- Focus on the customer
- Targeted data collection
- Engagement of front-line staff in the change process
- Easy to use



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2003 RWJF Grant

- Learning collaborative with 39 SUD treatment centers.
 - They learned the NIATx Model
 - Focused on improving one of **Four Aims** at their agency:
 - Reduce no-shows
 - Reduce wait times
 - Increase admissions
 - Increase continuations (1st thru 4th session)
- 22% to 34%
improvement
across all aims**
- 3,000+
agencies trying
the NIATx
Model by 2011**



SAMHSA takes notice

- Funded state learning collaboratives with payers & providers to improve service delivery for each
- Increased process improvement emphasis in grant applications.
- Oct-2017, CHESS awarded the Great Lakes Addiction Technology Transfer Center contract.



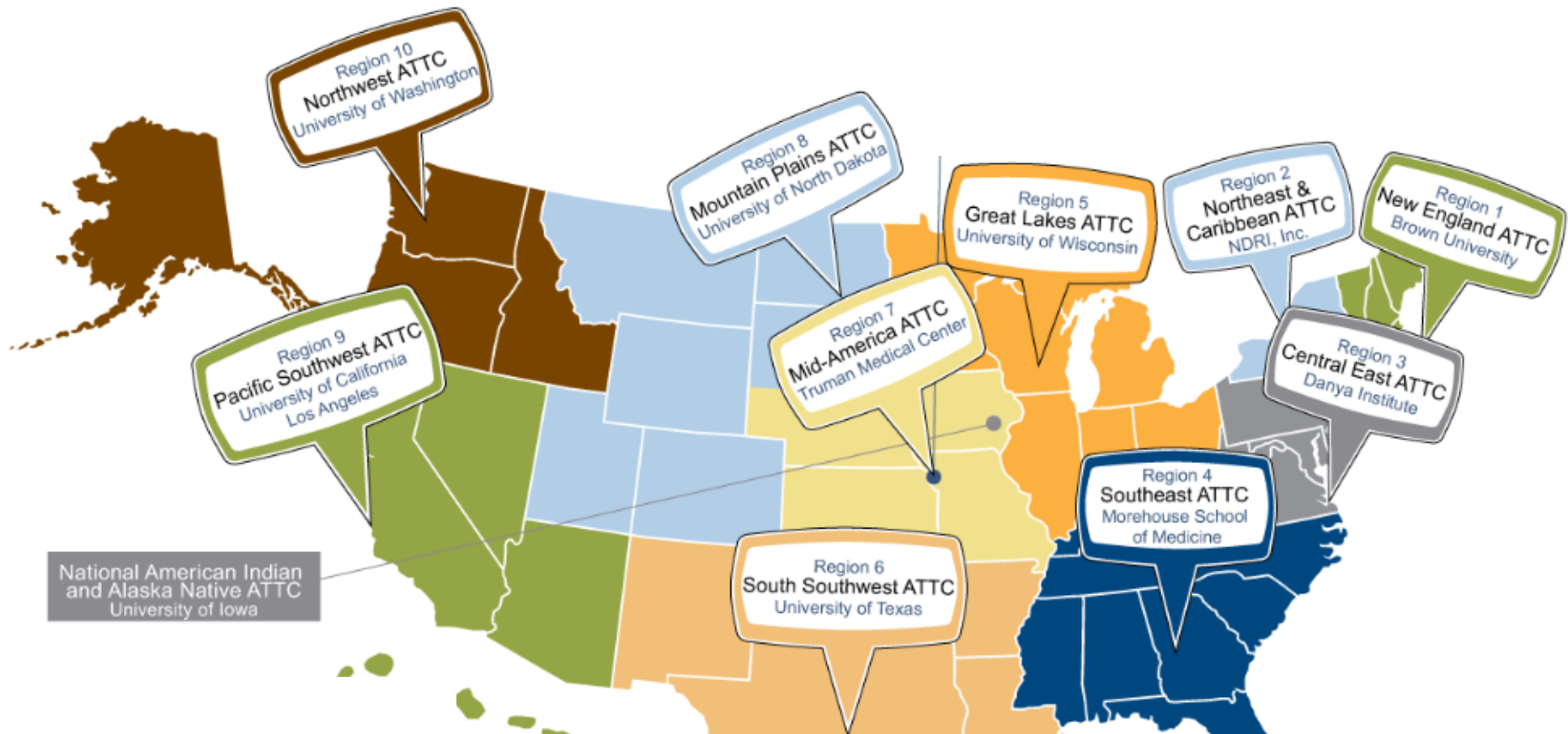
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Addiction Technology Transfer Center Network



Mission: provide training and technical assistance to the **substance use disorder** treatment and recovery services **workforce** in Indiana, Illinois, Michigan, Minnesota, Ohio, and Wisconsin



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Types of training delivered

- Trauma Informed Care
- Motivational Interviewing
- Medication-assisted Treatment
- Recovery-Oriented Systems of Care
- Culturally informed Service Delivery
- SUD treatment integration in other healthcare
- SBIRT
- Clinical Supervision
- Ethics
- Process improvement
- more

If we don't have the trainer in-house, we find one regionally or nationally.



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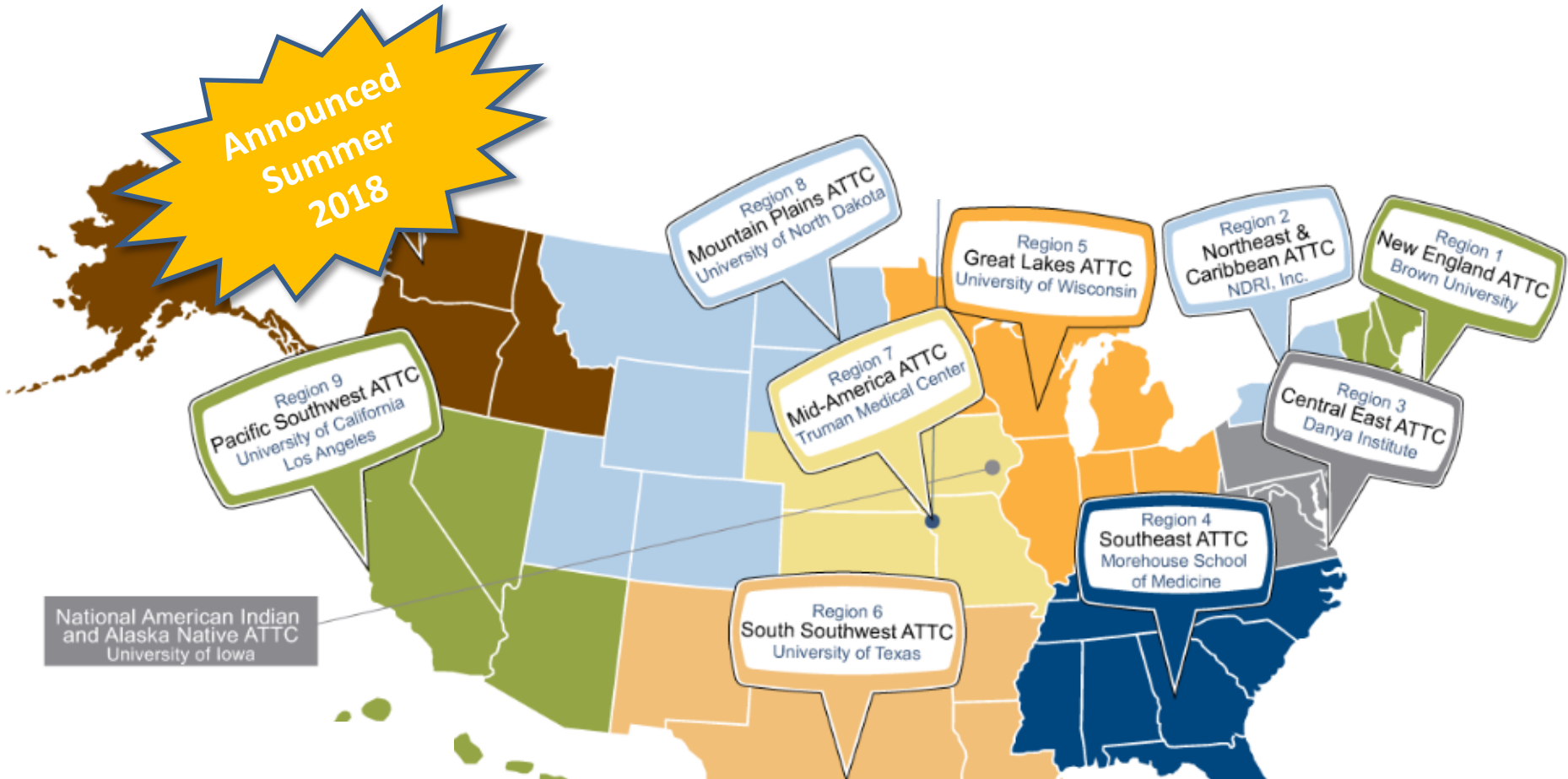
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Mental Health Technology Transfer Center (MHTTC)

Announced
Summer
2018



Mission: To support resource development, dissemination, training, technical assistance and workforce development to the mental health field.



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GOALS (see MHTTC 1-pager Handout)

- Accelerate adoption/implementation of **EBPs**
- **Workforce** knowledge & skill building
- Develop strategies for delivering **culturally-informed care** with diverse practitioners and consumers of mental health services.
- **Increase access** to publicly available, free-of-charge training and technical assistance for the mental health field.



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Examples of Technical Assistance/Training Available

- Implementing evidence-based practices for adults with serious mental illnesses (SMI)
- Process improvement for mental health care settings to improve access to and retention in treatment
- Culturally competent service delivery
- Integration of mental health treatment into other healthcare settings
- Recovery-oriented systems of care
- Technology tools for treatment and recovery
- Online training @ healtheknowledge.org



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Great Lakes MHTTC

We want to listen to you for the type of TA and training needed in your state, community or organization.



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Great Lakes Partners

Indiana Council of Community Mental Health Centers

The **State Node** partner will serve as a local point of contact and coordinate local training and technical assistance requests with support from the UW-Madison MHTTC office.



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Start-up of MHTTC

Oct. 8-9: State Node Planning Meeting (Madison, WI)

Nov. 14: Finalize TA request/delivery processes

Nov. 15: Announce and begin taking TA requests.

Questions ?



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Discussion Questions

1. When you need to **improve** something at your mental health center, what is your approach? How do you get it done?
2. What is **one barrier to change** you've experienced when trying to make improvements?



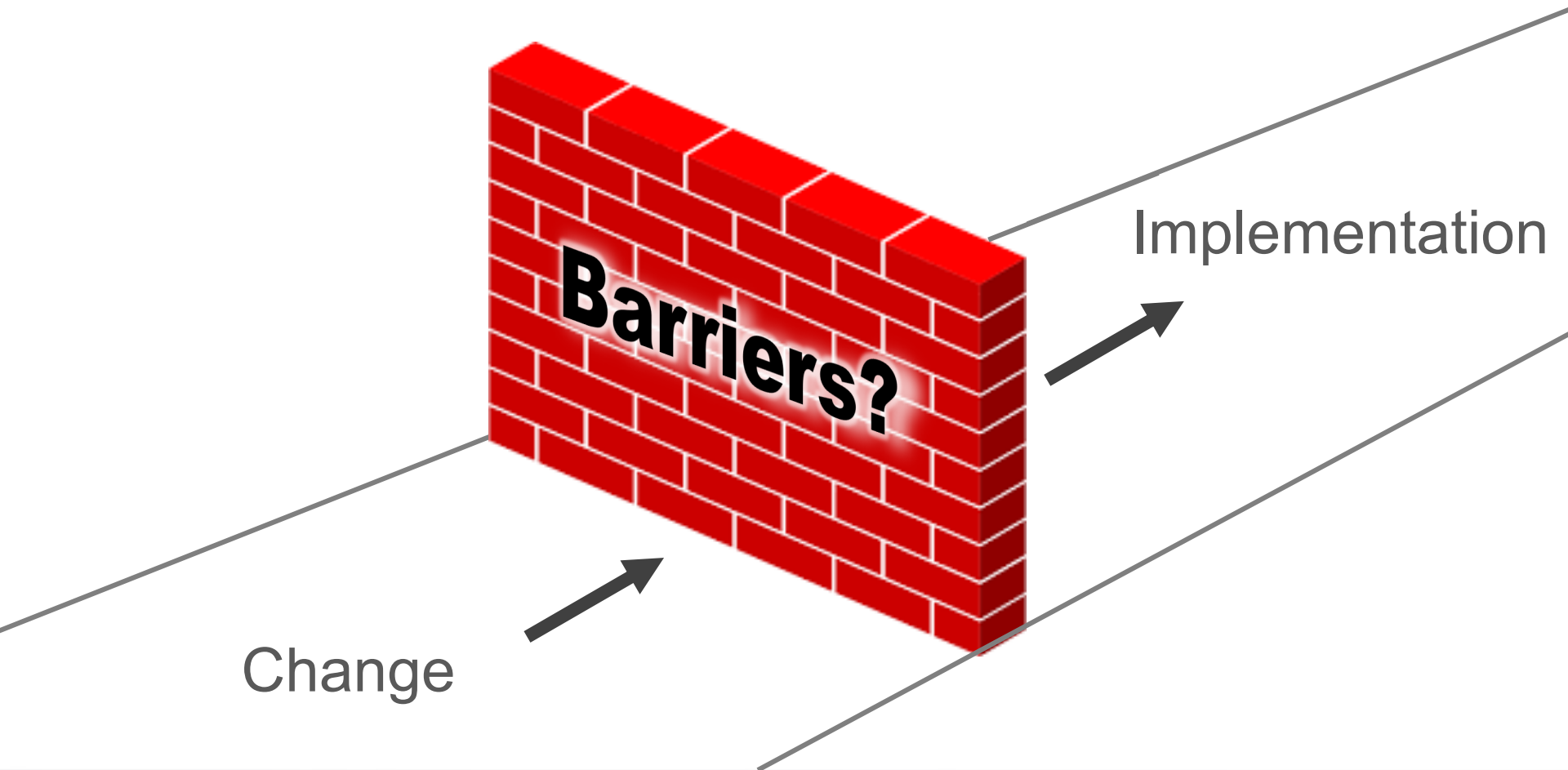
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Barriers To Change & How To Overcome Them



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Barriers To Change & How To Overcome Them

The bad news. . .

70% of change initiatives **FAIL**

. . .why?



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Barriers To Change & How To Overcome Them

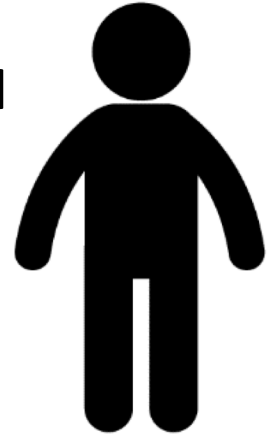
① Organizational Level



- Unclear priorities
- Conflicting messages
- Poorly defined objectives

② Individual Level

- Status quo bias
- Loss Aversion



Sources: Gallup News Article. Leong C.T. (2014 May 22). *Why Creating Organizational Change Is So Hard.*

Gallup News Article. Leonard D., Coltea C. (2013 May 24). *Most Change Initiatives Fail – But They Don't Have To.*

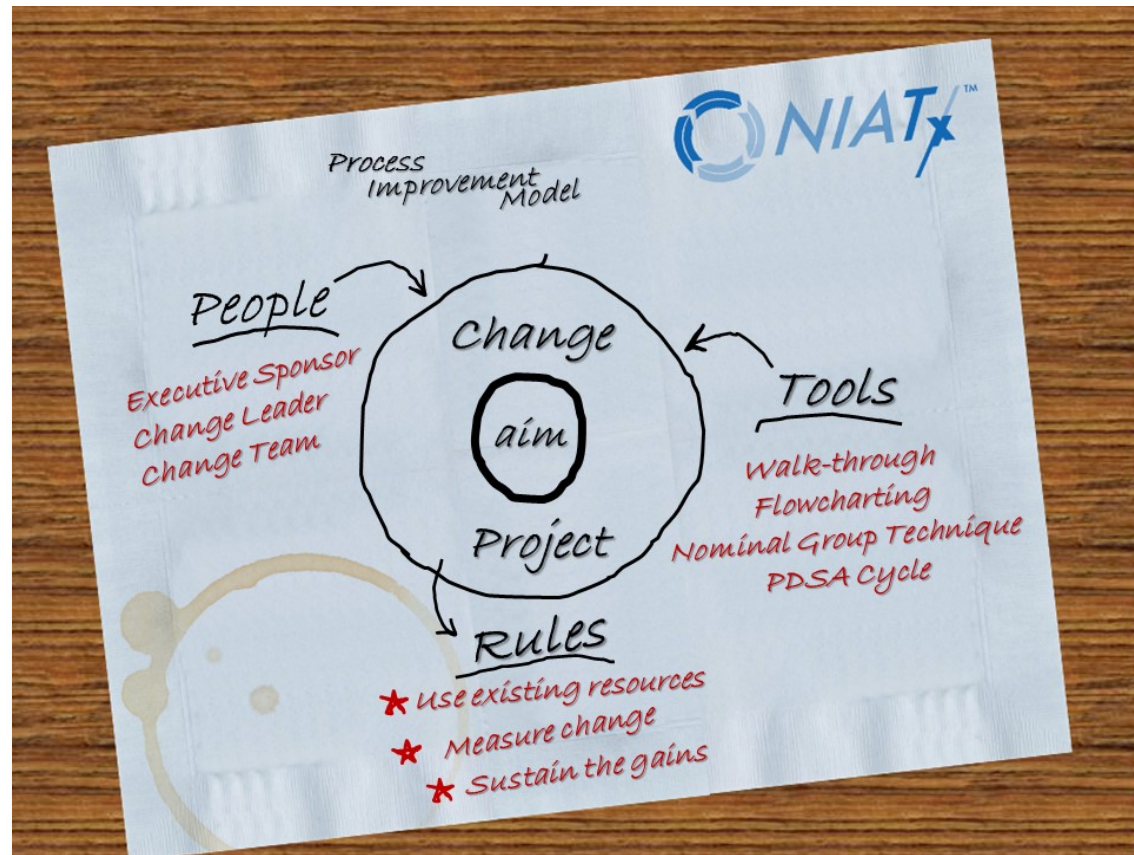
Barriers To Change & How To Overcome Them

What did Gallup find as your best chance for overcoming these barriers?

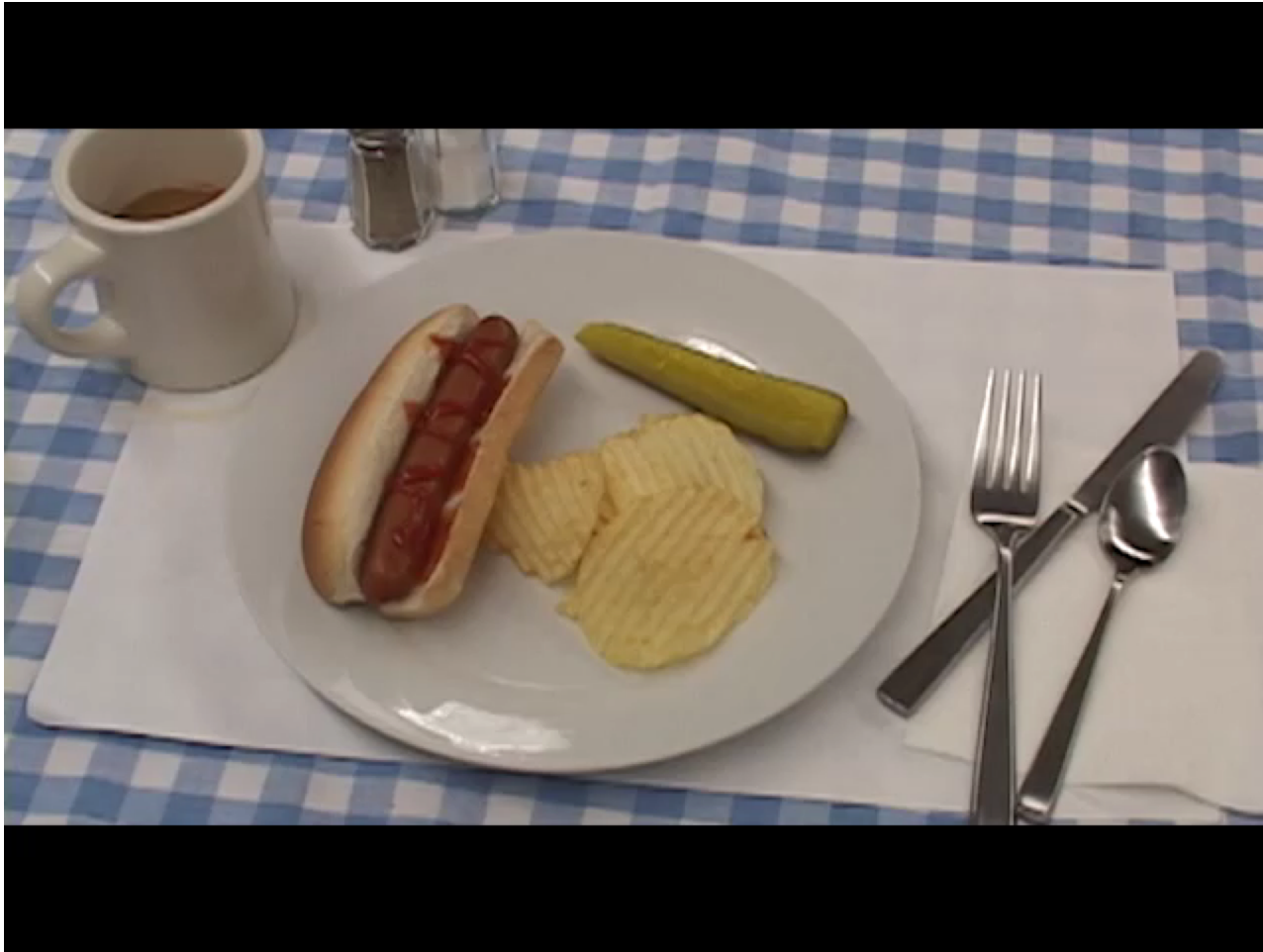


Barriers To Change & How To Overcome Them

Use an intentional, structured approach to change.



VIDEO: *NIATx on a Napkin*



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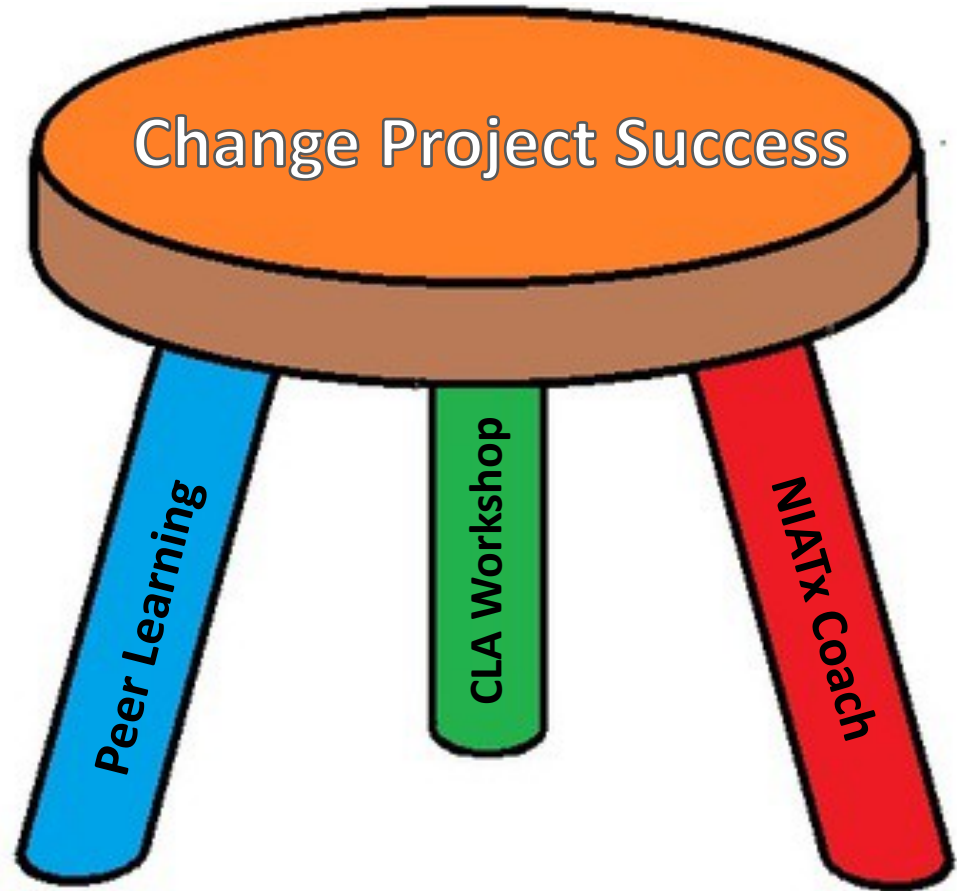
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Learning the NIATx Model

LEARN BY DOING WITH SUPPORT

- **Change Leader Academy**, 1-day, in person training
- Participants do a 3-month **change project** in their agency
- Participate in three, monthly group **follow-up calls**.
- Support from a **NIATx coach** for 1-on-1 technical assistance via email or phone call.
- Send 2-3 **staff** to start a change project – have a **senior leader** attend as well.



WI Mental Health Collaborative (9 yrs.)

Project Aim: Reduce inpatient hospital re-admissions by 50%

Brown County

AIM: Reduce no show rate for first time outpatient appointments for clients that were discharged from Nicolet Psychiatric Center

The Change: Changed 1st appoint for clients from 5 weeks post discharge to 1 week post discharge

Results for outpatient appointments:

Baseline: 100% no show rate

PDSA Cycle 1: 40% no show rate

Results for inpatient hospital re-admissions

Baseline: 60%

PDSA Cycle 1: 10%



WI Mental Health Collaborative (9 yrs.)

Project Aim: Reduce inpatient hospital re-admissions by 50%

Jefferson County

AIM: Decrease no show rate for outpatient appointments believing it will decrease overall inpatient hospital re-admissions.

The Change: Front desk staff did reminder phone calls the day before appointment

Results for outpatient appointments:

Baseline: 20.2% no show rate

PDSA Cycle 1: 14.7% no show rate

Results for inpatient hospital re-admissions

Baseline: 19%

PDSA Cycle 1: 8.0%



MHTTC - Change Leader Academy

Coming to Indiana after Jan. 1

- Open session, multiple agencies
- Can present at one large organization for staff/leadership.
- Watch for email announcement





Thank you.



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