



Outpatient Treatment Programs

255 Hammond St., Bangor, ME

Wellspring's outpatient clinic provides assessment, diagnosis, and treatment for adult and adolescent substance abusers, their families, and other concerned persons. It is the designated service provider for drug court in Penobscot County and for the Charleston Correctional Facility.

Services Include:

- **Individual, family and group substance abuse counseling**
- **DEEP evaluations and treatment**
- **Substance abuse information and education**
- **Drug Court and DSAT**
- **Counseling at Charleston Correctional Facility**

Our outpatient program has three counselors:

- **One counselor devotes 20 hours a week to outpatient services**
- **One counselor devotes 16 hours a week to outpatient services**
- **One counselor devotes 16-20 hours a week to outpatient services**



THREE KEY QUESTIONS:

Question #1: What are we trying to accomplish?

Overall goals:

1. Improve access to treatment
2. Improve treatment retention

To be accomplished by:

Reducing waiting times between first agency contact and first face-to-face visit.



THREE KEY QUESTIONS:

Question #2: How will we know if a change is an improvement?

Quicker access to treatment

1. Clients will get into treatment sooner
2. Quicker access will be sustained

More clients will complete treatment

Reduced waiting times between first agency contact and first face-to-face visit.

Higher ratings on client satisfaction surveys



THREE KEY QUESTIONS:

Question #3: What changes can we test that may result in an improvement?

Anticipated process changes:

1. Create intake coordinator position
2. Reduce “front end loaded” paperwork at intake
3. Increase clinician caseload capacity by developing therapy groups
4. Increase clinician caseload capacity by providing brief therapy



THE WOMEN'S GROUP PROJECT (*Our first STAR-SI Project*)

Process Change: When a woman who has recently been involved in another treatment service requests admission to the outpatient program she is assessed within the week and brought directly into a therapy group.

Goal: Speed the time up from initial call to first treatment session.

Results: (The good news) Average wait time from initial contact to intake decreased from 16 to 10 days. (The bad news) Only 3 of 6 clients attended the initial group session. None attended week 2 and 3.



THE WOMEN'S GROUP PROJECT

What we learned:

Transitioning into treatment involves more than the transition from initial call to intake session.

Clients need a good understanding of the specific purpose and goals of their treatment.

Reducing wait times between initial call and intake does not automatically improve retention in treatment.

A single point of contact (one to one relationship) is important to clients entering treatment.



CURRENT INTAKE PROCESS:

- **Client calls Wellspring for services. Speaks with the office manager.**
- **Office manager takes screening information to determine client eligibility.**
- **Counselors check in with office manager when they have openings in their caseload.**
- **Clients who have not been scheduled for an initial appointment are reviewed during weekly staff meeting.**
- **Counselor calls client to schedule an initial appointment.**
- **At the initial appointment, counselor reviews client rights and responsibilities, billing information, TDS information, confidentiality information, has client sign any initial consent forms to release information, and begins the biopsychosocial summary.**
- **On the second session, the counselor completes the biopsychosocial summary if it has not been completed, and begins work on the treatment plan.**
- **The treatment plan must be completed before the fourth appointment.**

Estimated length of time before intake 7-42 days.

Estimated length of time before treatment is initiated: 21-70 days.



PROPOSED CHANGE:

- **Client calls Wellspring for services. Office manager puts the client through to the intake coordinator directly (when the coordinator is available) or gets a phone number where the client can be reached during the day.**
- **Intake coordinator speaks to the client. Finds out if the client can come in that day for the intake. If not, the intake coordinator schedules the earliest time that is convenient for the client during office hours.**
- **Arriving a half-hour before the appointment with the intake coordinator, the client is given admission forms to review.**
- **Intake coordinator meets with the client, answers questions about the admission forms, co-signs documents, completes the admission assessment and TDS form, and provides a client orientation, including information about outpatient counseling services, common goals of treatment, office hours, and emergency back-up information.**
- **Client is scheduled for an initial counseling session within the week.**
- **At the initial counseling session, the counselor reviews the assessment with the client, gathers any important additional information, and develops a treatment plan with the client. The counselor may also begin providing treatment during that session.**

Estimated length of time before intake 1-72 hours.

Estimated length of time before treatment is initiated: 2-14 days.

Our challenges are...

To avoid a “bottleneck” from
the intake session to the
first treatment session

And guide staff through the
transition process

