



Connections Counseling:

Narrowing the Focus Leads to Successful Change



Connections Counseling of Madison, Wisconsin, is among the more than 30 opioid treatment providers participating in the NIATx Opioid Treatment Provider (OTP) Pilot project. This SAMHSA-funded project began in September 2009 and aims to help participants increase access to and retention in treatment for opiate dependence.

The participants have been grouped by region and participate in one of four regional learning collaboratives. All programs have received site visits and individual coaching. A monthly learning collaborative call allows for peer networking and problem solving. The pilot project will conclude at the AATOD conference in October 2010 in Chicago, where participants will share their work as a large group and develop sustainability plans.

Director Shelly Dutch founded Connections Counseling with a mission to create a strength-based recovery community conducive to hope and healing. With a staff of 16 therapists along with administrative staff and two psychiatrists, Connections Counseling serves approximately 500 clients per year, mainly from the Madison area and communities in surrounding counties. She also founded Horizon High School, Madison's only sober high school, as well as the non-profit Recovery Foundation that supports recovery from substance use disorders through financial assistance, public outreach and education, and advocacy for research and evidence-based treatment and recovery services.

Says Assistant Director Tami Bahr, "Connections Counseling has a client-centered approach that includes a lot of peer support, which we've found to be especially important for the teens and young adults we serve. Our main population is in the 18-25 age group, though we serve people of all ages."

Tami wears many hats at Connections. She's responsible for clinical supervision of all the counseling staff and administrative oversight, while also maintaining a caseload—both individuals and groups.

Connections offers medication-assisted treatment, including Suboxone for opiate dependence. "Opiate dependence is growing at an alarming rate in our community, especially in the teen population," adds Tami.



She says that the Connections Counseling team was aware of NIATx process improvement before joining the Opioid Treatment Provider pilot. “We used some of the principles in our family and parent program but had difficulty with implementing and sustaining changes.”

Being part of the OTP pilot is changing that, reports Tami, starting with the kick-off conference. “That really helped clarify the key responsibilities for the Executive Sponsor, the Change Team Leader, and the Change Team members.”

The Connections team’s initial walk-through focused on clients’ first contact with the agency. As a result, they shortened their automatic voice mail message and improved signage directing clients to the clinic offices.

Next the team set out to address the Executive Sponsor’s concern about spotty attendance in the outpatient groups.

“To get our baseline data, we tracked attendance for one month,” says Tami. Figuring out how to track attendance was a project in itself. “Each counselor was using a different way to track attendance—using a roster, a sign-in sheet, or even logging on the daily charge sheet. When we started to use a spread sheet to formalize attendance tracking, our billing department was very happy.”

Promising Practice: Remind Clients about Appointments

Baseline data showed that attendance averaged 55 percent. For the first change project, the team decided to test giving out reminder cards. As a result, attendance increased by 5 percent. But since regular attendees questioned why they were getting reminder cards, the change team decided to run a second rapid-cycle and focus on just new intakes.

“Our coach Tom Zastowney advised us to narrow our focus,” adds Tami. We were trying to increase attendance for all 18 groups we run weekly. He suggested that we be more specific, so we decided to target our two opiate-specific groups.”

Again, the Connections team used the first NIATx principal—to understand and involve the customer—and asked clients in the opiate groups for feedback on barriers to attending the session. Primary counselors also made a point to contact those who did not attend to help problem solve ways to make it easier to get to group.

“We continue to adjust our strategy and narrow our focus,” says Tami. “Process improvement is becoming part of our organizational culture.”



Participating in the NIATx Opioid Treatment Provider Pilot program has helped Tami analyze issues with the team to come up with solutions that can work clinic wide. “For us, focusing on small changes for a short period of time really works.”

Tami adds that involving staff from different departments in change projects has helped everyone feel valued and supported. “It helped counselors to understand the concerns that our billing staff has, and vice versa.”

In conclusion, Tami notes that Connections Counseling has always been an agency that has focused on improvement, “but we have not always been able to follow through. The NIATx OTP pilot has given us the tools to follow through and see what changes really work.”

For more information, visit the [Connections Counseling](#) and [The Recovery Foundation](#) web sites.