PROTOTYPES:
Centers for Innovation in Health, Mental Health, and Social Services
Project STAR

Los Angeles County, California

CSAT Grant Number TI15612
Description of the Organization

- **PROTOTYPES**: Centers for Innovation in Health, Mental Health, and Social Services was founded in 1986 to serve women, children, and their family members

- 25 sites located throughout Southern California

- Project STAR located in Pomona, California (Los Angeles County)

- The STAR treatment center treats women and children in residential treatment; men, women, and adolescents in outpatient modality

- The STAR treatment center is an integrated program addressing substance abuse, mental illness, trauma, and HIV/AIDS

- Embedded in the treatment populations are specialized funded slots, including:
  - TANF (CalWORKs)
  - Proposition 36 (alternative to incarceration)
  - Community Prisoner Mother Program (inmates under the California Department of Corrections)

- The residential treatment program typically lasts 6 to 18 months; outpatient treatment is typically 6-12 months

- In the overall organization, in addition to the Substance Abuse Treatment division (under which Project STAR resides), there are six other divisions, including Mental Health, Outreach and HIV/AIDS Prevention, HIV/AIDS Psychosocial Interventions, Domestic Violence Services, PROTOTYPES Systems Change Center (changing systems of care locally and nationally through research and knowledge dissemination), and Training and Technical Assistance
PROTOTYPES STAR Team Members

- Vivian B. Brown, PhD [President & CEO/Executive Champion]
- Maryann Fraser, LCSW, MBA [Executive Vice President]
- Elke Rechberger, PhD [Director/Change Leader]
- April Wilson [Deputy Director, Residential Program]
- Lori Pendroff [Director, Outpatient Program]
- Eva Ramirez Fogg, MSW [Director, Community Assessment & Services Center]
- Lee Bertha Pickett-Allen [Director of Intake & Continuum of Care]
- Avis Muse [Deputy Director of Administration]
- Sharon Gassett [Assistant Director – Outpatient Program]
- Nancy Tamburo-Trevino, MFT [Mental Health Specialist]
- Halston Brown [Intake Coordinator]
- Retha Hodge [Intake Specialist]
- Dianne Arcadipane [Lead Counselor]
- Anita Dunlap [Data Coordinator, Residential Program]
- Lou Campbell [Vocational Rehabilitation Counselor]
- Shelly Baesler [Data Coordinator, Outpatient Program]
- Jill McKenzie [Intake Specialist]
- Local Evaluators: The Measurement Group LLC
  - [Lisa A. Melchior, PhD & G. J. Huba, PhD, co-lead evaluators]
Description of Change Exercise

- Aim or purpose: Increase continuation rate

- Measure used: Percentage of clients remaining in residential treatment for at least four weeks

- Changes made: The following describe some of the changes made during the first three months of the project to potentially improve continuation rates:
  
  - **Changes to the phone screening process.** PROTOTYPES has considered a number of ways to improve the initial phone contact with prospective clients, including providing a script for volunteers to use while handling inquiries about admission; cross-training additional staff on conducting telephone screenings of potential clients; and revising the phone-screening protocol to make the assessment as efficient as possible.
  
  - **Changes to the intake process.** PROTOTYPES has a centralized intake department that conducts intakes for both its residential and outpatient treatment modalities (which are on adjacent physical sites). We are pilot testing a decentralized intake system where outpatient clients receive their intake on-site at the outpatient site and residential clients receive their intake on-site at the residential site. This is intended to reduce barriers and promote bonding during the intake process.

- Unexpected challenges and/or unanticipated results: Rapid cycle change is difficult to implement in this complex environment with multiple treatment modalities.

- Impact of project: Compared to the three-month period prior to starting the STAR project, 4-week continuation rates are significantly improved. PROTOTYPES staff are very enthusiastic and excited about exploring further program enhancements to improve access and retention.
Improvement in Continuation Rates

Stayed 1 week or more
- July 2003 - September 2003/Pre-STAR (n=30): 83.3%
- October 2003 - December 2003/STAR (n=45): 84.4%

Stayed 2 weeks or more
- July 2003 - September 2003/Pre-STAR (n=30): 73.3%
- October 2003 - December 2003/STAR (n=45): 82.2%

Stayed 3 weeks or more
- July 2003 - September 2003/Pre-STAR (n=30): 66.7%
- October 2003 - December 2003/STAR (n=45): 80.0%

Stayed 4 weeks or more*
- July 2003 - September 2003/Pre-STAR (n=30): 56.7%
- October 2003 - December 2003/STAR (n=45): 75.6%

* Significant change at $p < .05$, one-tailed
Key Activities at PROTOTYPES in Support of Implementing STAR Changes

- Developed flow chart of paths into treatment program to permit identification of various ways to impact timeliness to treatment

- Developed and implemented computerized tracking mechanism for individuals from the first contact/request for treatment
  - Prior to STAR, this information was not systematically documented
  - Needed in order to track changes in timeliness to treatment as well as to meet STAR monthly data reporting requirements

- Developed and implemented internal work groups to address various issues related to the four major STAR aims and to PROTOTYPES local goals for improving long-term retention
Future Goals for PROTOTYPES STAR Project

- By the end of Year 1 there will be a redesign of client intake and placement systems and procedures
- Reduce time between first contact and program intake
- Streamline integration of assessment information from Community Assessment and Service Centers (CASCs) to PROTOTYPES
- Reduce assessment burden on clients
- Increase access to treatment
- Develop models for specialized intake unit, “cottages” or other smaller program units to promote increased retention and completion
- Develop specialized treatment engagement model, which would include practices such as motivational interviewing and Seeking Safety groups
- Address long-term program retention and completion rates
- Disseminate promising practices to the local Los Angeles County treatment community