# **Targeted Capacity Expansion:**

**Technology-Assisted Care** 

(TCE-TAC)

**RFA # TI023819** 

# **CSAT BIANNUAL PROGRAMMATIC REPORT**

**Program Reporting Period:** 

April 1, 2014 - September 30, 2014

# **Instructions for Completing this Report**

- 1. Save the report to your computer.
- 2. Click on the darkened box next to each item to fill in your response.
- 3. Save your completed survey BEFORE returning it.
- 4. Return the completed report by email to: <a href="mailto:granteereports@jbsinternational.com">granteereports@jbsinternational.com</a>
  Copy SAMHSA Grants Management Specialist, Doug Lees (<a href="mailto:doug.lees@samhsa.hhs.gov">doug.lees@samhsa.hhs.gov</a>), and your Government Project Officer to the email
- 5. Save the confirmation receipt of your submission.

# TCE-Technology Assisted Care (TAC) SAMHSA/CSAT 1 Choke Cherry Road, Room 5·1055 Rockville, MD 20850

1. Reporting Period: April 1, 2014 – September 30, 2014

2. RFA #: TI023819

3. Grantee: Clinical & Support Options, Inc.

4. Provider Site(s):

Provider Site Name	Address	Contact Person	Phone/Email
CSO, Inc	8 Atwood Drive Northampton, MA 01060	Allison Garriss	413-582-0471 ext 5502
CSO, Inc	1 Arch Place Greenfield, MA 01301	Allison Garriss	413-582-0471 ext 5502
CSO, Inc	877 South Street Pittsfield, MA 01201	Allison Garriss	413-582-0471 ext 5502
CSO, Inc	491 Main Street Athol, MA 01331	Allison Garriss	413-582-0471 ext 5502

5. Project Director: Jane Lynch

6. Project Director Phone/Email: agarriss@csoinc.org

7. Evaluator: Gwen Gannon

8. Evaluator Phone/Email: 413-213-2158/gwen gannon@yahoo.com

9. Signature \_\_\_\_\_

Project Director Signature

Date

10. List any changes in key staff contact information here:

Staff Member	Add/Loss	Effective Date	Email	Phone
N/A				

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#### **BACKGROUND**

Provide the abstract from your grant application. Specify all technologies being used in the project and any changes from the initial application.

Project name: RECOVERe, Technology Supported Substance Abuse Treatment and Recovery

Population to be served: The population of focus is rural adult residents aged 18-64 with diagnosed substance use disorder in three counties of Western Massachusetts.

Number of people to be served annually and throughout the lifetime of the project: The program will treat 96 a year and a total of 288 over 3 years.

Summary of project: RECOVERe is a technology-supported interactive system of outreach, intake, treatment and aftercare using mobile telephony, Web site with personal portals and video conferencing for individual and group therapy and support. Technology tools will be used to support three evidence-based practices: MI, MET and SBCM

Technologies: i2i (video conferencing), Program Website, Client Portal and Text4Recovery (the use of networked mobile communications) are pathways of action of several forms of self-management interventions and contact with program staff.

## PROJECT IMPLEMENTATION

# **Project Goals and Objectives**

Provide status reports of all current project goals and objectives, including lessons learned and best practices using the technologies.

**Goal:** Expand Service Capacity

**Status:** By serving 96 adults per year, the project will substantially increase current treatment capacity of the Western Mass region's programs for substance abusers. As of 9/30/2014 RECOVERe had served 289 adults.

**Goal:** Increase Access to a greater range of substance abuse services

**Status:** RECOVERe augments face to face therapy and strengths-based case management with technology tools like mobile phone support, video conferencing supports, a portal connected to the agency's EHR, and a resource filled website.

Goal: Increase Retention in and Adherence to Treatment

**Status:** The extent to which a person's behaviors follow the advice given by clinicians may include entering a treatment program, attending appointments and group sessions, using community self-help resources maintaining and completing a treatment program or keeping aftercare appointments have all been demonstrated to lead to better psycho-social outcomes. A range of technology support can increase length of stay and will support adherence to treatment. Very specifically, Text4Recovery and the ability to set up and receive text appointment reminders have increased retention. In addition, utilizing text messages to send reminders about taking medication has increased an adherence to treatment for several clients.

**Goal:** Extend aftercare to reduce relapse potential

**Status:** Adherence to aftercare therapy in substance abuse treatment is associated with improved outcomes. To increase the likelihood of maintaining, and even enhancing treatment gains, we have incorporated the use mobile phones into aftercare and continue Web-based input to provide an ongoing link for the client once therapy has ceased. Providing motivational text messages, as well as a myriad of other supports via text messaging, has continued to support the treatment and recovery from substance abuse for individuals once they have discharged from formal levels of treatment.

#### **Status Toward Goals**

If you are falling short in meeting any project objectives, please explain and provide your plan for catching up. Include anticipated date of resolution.

N/A

If you changed any project goals or objectives (including GPRA targets) during the reporting period, state the changes, the date changes were approved and how the approval was transmitted.

N/A

If you intend to request approval of changes in any project goals or objectives during the next reporting period, state the changes and the reasons for wanting to make them. (Remember that you need prior approval from SAMHSA to make these changes.)

N/A

#### ORGANIZATION AND MANAGEMENT

#### Personnel

List all positions supported by the grant, filled and vacant.

Position Title	Incumbent Name	Percent Time
Project Director	Jane Lynch	10
Evaluator	Gwen Gannon	14
Program Director	Allison Garriss	100
Technology Cooridnator	Meg Reney	100
Clinician	Dawn Geller	50
Case Manager	Gary Lincoln	50
Case Manager	Emma Osborne	50

List staff additions or losses including contractors/consultants within the reporting period.

Staff/Contractor Position Title	FTE	Date Change Occurred	Addition or Loss
N/A			

Discuss the impact of personnel changes on project progress and strategies for minimizing negative impact.

N/A		

Discuss obstacles encountered in filling vacancies (if any); strategies for filling vacancies and anticipated timeline for having positions filled.

N/A			

# **Partnerships**

List each of the partner organizations.

# Partner

While we do not have any formal partnerships in regards to this project, we work closely with the Recovery Project in Greenfield, MA and the Franklin County Drug Court program to increase the access to treatment services for individuals involved with those organizations.

Describe significant changes in relationships and/or working arrangements and summarize the implications of the change.

N/A			

# **Training and Technical Assistance (TA)**

Describe staff development activities, including orientation and training for this reporting period.

Staff Development Activity	Date	Number of Participants	Training Provider
Ongoing data collection training/development for team members	Biweekly	5	Gwen Gannon
Motivational Interviewing	5/2014	25	John Brelsford

If you received technical assistance from a SAMHSA TA provider, describe it.

Type of TA Received	Date	Purpose of Assistance	TA Provider	Additional Assistance Planned for this Issue
N/A				

If you plan any training or TA activities for the next reporting period, describe the topic and anticipated audience.

N/A			

#### PERFORMANCE INFORMATION

## **GPRA Performance**

As close to the last day of the reporting period as possible, check your official GPRA statistics on the SAIS webpage. Complete the table below. Enter the cumulative numbers (from beginning of the grant) from the SAIS reports.

Date on which reporting quarter data was obtained: 9/30/2014

	Target	Actual	%
Intake (Baseline)	288	289	100.3%
6-Month Follow-up	287	241	84%

If your intake or follow-up percentages are below 80 percent, please explain and state your plan for reaching your targets.

If your count of the number of target or actual persons served (intakes) through your grant or your follow-up rates differ from those shown in your GPRA report, specify and account for the differences. Identify steps taken to seek assistance, if needed, to remedy the discrepancy.

N/A
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#### **Evaluation**

Describe evaluation activities, progress made/action steps, and changes during the reporting period.

Data Collection: Once the consumer was deemed eligible for the program and before data collection occurred, an Informed Consent was completed by the assigned Data Collection Specialist in the language of preference of the consumer (Spanish or English). Additionally, the GPRA was administered at intake to establish the baseline, followed by the Coping Behaviors Inventory (CBI), and the Participant Locator Form. This entire process took approximately 60 minutes.

The GPRA and CBI were administered again at 6 months post the baseline and at discharge. A Satisfaction Survey was also completed upon client discharge. Original copies of the abovementioned tools were placed by staff into the consumer's individual files and copies of the completed GPRAs, CBIs, and Satisfaction Surveys were given to the evaluation team to be entered into the appropriate database systems. All the tools were available in Spanish and English.

Outcome Evaluation: The outcome evaluation was a structured assessment of the EBP, Motivational Enhancement Therapy, using an adaptation of the Motivational Interviewing Treatment Integrity Code System or MITI 3.1.1. The MITI is a simplified coding system that is intended to be used: (1) as a treatment integrity measure for clinical trials of motivational interviewing and (2) as a means of providing structured, formal feedback about ways to improve practice in non-research settings. The MITI coding system was used to rate the fidelity of all technology-based "messages," both the Web site content and the mobile phone broadcast content.

The outcome evaluation included a panel study using repeated measurements of intended outcome indicators on the same group over time to estimate net program effects. This design helped us to tie treatment intensity to shifts in outcome measures. The evaluation looked in particular at the following questions: related to the goals discussed in Section B of the original proposal: 1) To what extent did the intervention lead to increased retention? Can specific program components or participant characteristics be linked with successful outcomes? 2) To what extent did the intervention help achieve the six goals outlined in Section B: a) expand service capacity by 96 adults per year, increasing capacity for adults by an estimated 18%; b) increase access to a greater range of substance abuse services, utilizing face-to-face therapy and SBCM with technological tools, including web-based services, video conferencing, and mobile phone support; c) increase retention in and adherence to treatment, again using technological tools that increase use of treatment programming and self-help resources; d) extend aftercare to reduce relapse potential. 3) Have linkage activities improved the delivery of services to this population? The evaluation team will document and report; (1) How many individuals have access and use the technology tools? (2) How many consumers are trained on how to effectively use the technology tools? and (3) How many expanded and enhanced

technologies are integrated into the provider infrastructure?

Note any changes to the evaluation plan for this period, and document that GPO approval was received prior to the implementation of the changes.

The SAMHSA TCE-HIT team developed an additional satisfaction survey which was intended to capture participant use and satisfaction with targeted technological service provision. The survey was part of a cross-site evaluation. The RECOVERe Program agreed to implement the additional satisfaction survey which was administered to participants upon discharge from the program. No other changes were made to the evaluation plan. Results of the additional Satisfaction Survey will be submitted in the final report.

Provide as an attachment the most recent documentation of evaluation findings outside GPRA reporting. Indicate if there are no new evaluation findings from last reporting period.

See attached

Discuss any problems encountered in conducting the evaluation, the impact of these problems on the evaluation and on the overall project, and plans for resolving the problems.

N/A

Discuss how evaluation findings were used to improve the project.

Throughout the lifetime of the grant evaluation findings were reviewed regularly during team meetings to discuss outcomes (significant and insignificant), and how the project could continue to enhance treatment opportunities for participants.

Attach any written evaluation reports received during the period. Indicate if there are no new evaluation reports from the last reporting period.

See attached

### **Interim Financial Status**

Attach an updated program budget and any budget modifications.

## **Financial Status**

Attach an updated program budget and any budget modifications.

Instructions for completing the following budget worksheet:

- Double click on the worksheet to activate the Excel function
- The spreadsheet has been pre-formulated, but you must first enter (1) your total grant award, (2) all direct costs, and (3) total indirect costs
- Once you have entered the requested fields, click outside of the spreadsheet to exit

#### Note:

- Please report total expenditures (not obligations) on the budget worksheet
- Include all expenses accrued since the last reporting period <u>and</u> cumulative expenses accrued over the course of the grant period
- In the 'Total Grant Award' cell, please enter the total amount of grant funding you have received since the initiation of the grant
- The 'Remaining Balance' cell will automatically subtract total cumulative expenditures to date from the total funding amount

Total Grant Award:	\$ 840,000.00		
	Expenditures		
	Expenditures Since the Last Reporting Period	Cumulative Expenditures To Date	
Direct Costs:			
Staff Salaries	\$ 69,767.00	\$ 439,801.00	
Fringe Benefits	\$ 15,349.00	\$ 96,765.00	
Contracts	\$ 9,417.00	\$ 85,636.00	
Equipment	\$ 14,789.00	\$ 79,353.00	
Supplies	\$ 1,000.00	\$ 10,503.00	
Travel	\$ 2,431.00	\$ 20,966.00	
Facilities	\$ -	\$ -	
Other Direct Costs: (please identify below)			
	\$ 13,478.00	\$ 138,959.00	
	\$ -		
	\$ -	\$ -	
Total Direct Costs:	\$ 126,231.00	\$ 871,983.00	
Total Indirect Costs:	\$ -	\$ -	
Total Expenditures (Sum of Direct and Indirect Costs):	\$ 126,231.00	\$ 871,983.00	
Remaining Balance (Based on Total Grant Award):		\$ (31,983.00)	

# **Other Significant Project Activities**

Discuss any notable project activities, events, or other issues that occurred during the reporting period not previously described. Describe any problems that emerged, the effect it had on the project and steps taken or planned to overcome the barrier.

N/A		
1		

Attach a copy of the project's policies and procedures.

Please see previous reports

Attach copies of any publications in professional journals or presentations about your project during the reporting period. Indicate if there have been no publications or presentations since the last reporting period.

N/A

# **LIST OF ATTACHMENTS**

List each attachment separately here and attach to the back of this report.

Attachment 1: Full Evaluation Report

Attachment 2:

Attachment 3:

Attachment 4:

Attachment 5: