

# Substance Use Disorder ECHO

RUTGERS



State of New Jersey



MEDICATION-ASSISTED TREATMENT  
CENTERS OF EXCELLENCE



RUTGERS  
New Jersey Medical School

# Hub Team Introductions



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Master Black Belt,  
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Cooper University Healthcare



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NeuroMusculoskeletal Institute  
Rehabilitation Medicine  
Rowan University



**Clement Chen, PharmD**  
Clinical Pharmacist/Academic Detailer  
Rutgers New Jersey Medical School

# Our Goal

- Combat the substance use crisis through education on best practices in a safe space for peer-to-peer learning
- Engage healthcare providers in the primary care setting to increase skills to safely and compassionately manage, treat, and support their clients with a substance use disorder
- Recognize the importance of reducing stigma to advance equity and improve access to care for patients with substance use disorders



Mar 10, 2023

## Quality Improvement Applications: Case Study

Presented by:

**Mohammad Addar, LSSMBB**

Master Black Belt, Cooper University Health Care  
Adjunct Assistant Professor at Cooper Medical School of Rowan

# Financial Disclosures

- The following sessions leader(s) have no relevant Financial relationships with ineligible companies to disclose:
  - Mohammad Addar
  - James Bailey
  - Clement Chen

# Learning Objectives

- Review the Model for Improvement – PDSA Cycle
- Understand How to Create an AIM Statement
- Understand How to Use a Driver Diagram to Identify Change Ideas

# \*Model For Improvement – PDSA Cycle

## Part 1: Three Fundamental Questions

• What are we trying to accomplish?



### AIM

- Where?
- Who?
- How Good?
- By When?

• How will we know that a change is an improvement?



### Measurement of Success

- Process Measures
- Outcome Measures
- Balancing Measures

• What change can we make that will result in improvement?



### Changes

- What Improvement will be put in place?

## Part 2: Test Changes

### Make a plans for your next step.

- **Adapt** (make modifications and run another test)
- **Adopt** (test the change on a larger scale), or
- **Discard** (don't test on this change idea again).
- Prepare a plan for the next PDSA.

### Plan the Test

- Team Formation
- AIM Statement
- Data Collection Plan



### Analyze the results

- Analysis of the data
- Compare the data to your expectation
- Summarize what your findings

### Run the test on a small scale

- Document problems and unexpected observations.
- Collect and begin to analyze the data

## Part 3: Implement & Spread

### Implementation:

Permanent change to the way work is done

- Standard Work
- Policy Creation
- Competency Creation
- Staffing Plans
- Process Control Plans

### Spread:

Taking a successful implementation from initial area and replicating that change or package of changes in other parts of the same organization or other organizations.

The Model for Improvement,\* developed by Associates in Process Improvement

# Quality Gap and Aim Statement

## Primary Areas of Concern:

- Have you seen many cases where clients are coming to OBAT on scheduled medications (Benzodiazepine, stimulants, opiate's) from primary providers and how to best manage mental illness while treating substance use disorders.

## Identified Quality Gap

- *What is the practice that you are trying to change*
- *What is the evidence that achieving AIM closes the gap?*

## Aim Statement

- *Specific*
- *Measurable*
- *Achievable*
- *Relevant/Realistic*
- *Time bound*



# Creating The Aim Statement

- An aim statement is a clear, explicit summary of what your team hopes to achieve over a specific amount of time including the magnitude of change you will achieve. The aim statement guides your work by establishing what success looks like

## Part 1: Three Fundamental Questions

1. What are we trying to accomplish?



### AIM

- Where?
- Who?
- How Good?
- By When?

2. How will we know that a change is an improvement?



### Measurement of Success

- Process Measures
- **Outcome Measures**
- Balancing Measures

3. What change can we make that will result in improvement?



### Changes

- What Improvement will be put in place?

- What's the issue or opportunity? Make sure it relates to a fundamental need.
- Where is the problem occurring? What is the starting and ending point of the process or system you're trying to improve?
- Who is going to benefit from the improvement?
- By how much to you want to improve? Or "how good" do you want to get?
- In what timeframe do you expect to make this improvement?

# Creating The Aim Statement

## Primary Areas of Concern:

- Have you seen many cases where clients are coming to OBAT on scheduled medications (Benzodiazepine, stimulants, opiate's) from primary providers and how to best manage mental illness while treating substance use disorders.

- What's the issue or opportunity? – Reference the Quality GAP
- Where is the problem occurring?
- Who is going to benefit from the improvement?
- By how much to you want to improve? Or "how good" do you want to get?
- In what timeframe do you expect to make this improvement?

# Identifying Improvements

## Part 1: Three Fundamental Questions

1. What are we trying to accomplish?



### AIM

- Where?
- Who?
- How Good?
- By When?

2. How will we know that a change is an improvement?



### Measurement of Success

- Process Measures
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3. What change can we make that will result in improvement?



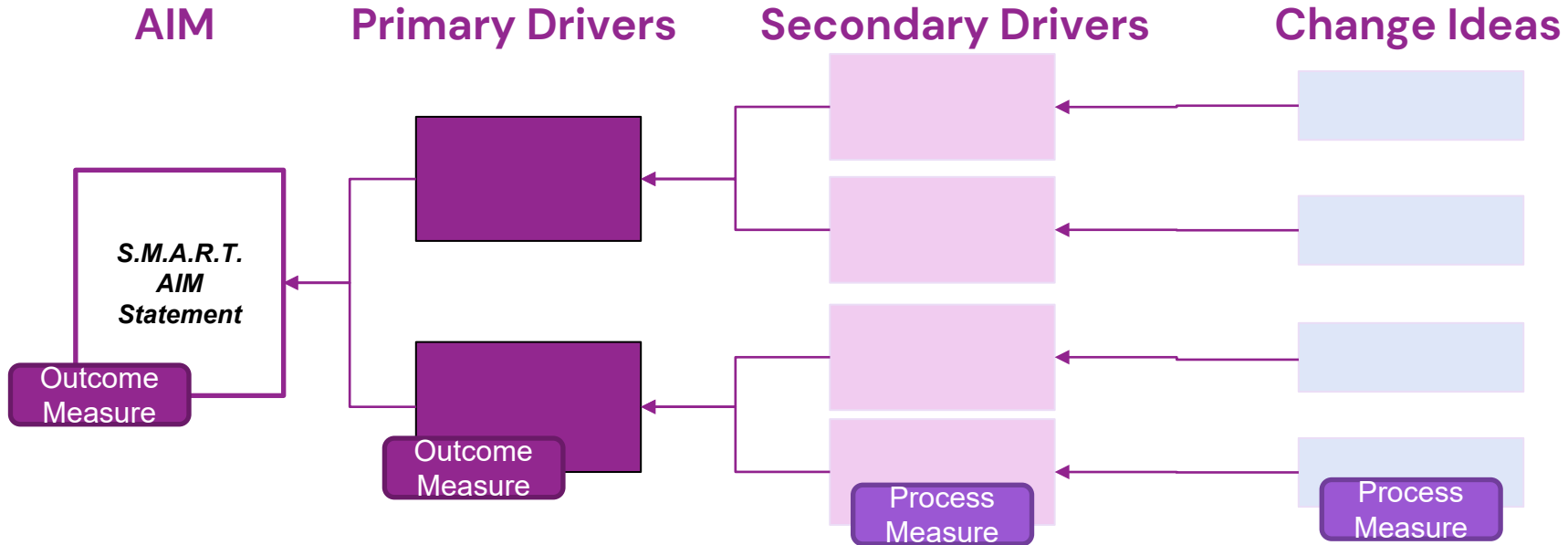
### Changes

- What Improvement will be put in place?

- Literature Reviews
- Evidence Best Practices
- Lean Six Sigma (DMAIC)
- Brainstorming

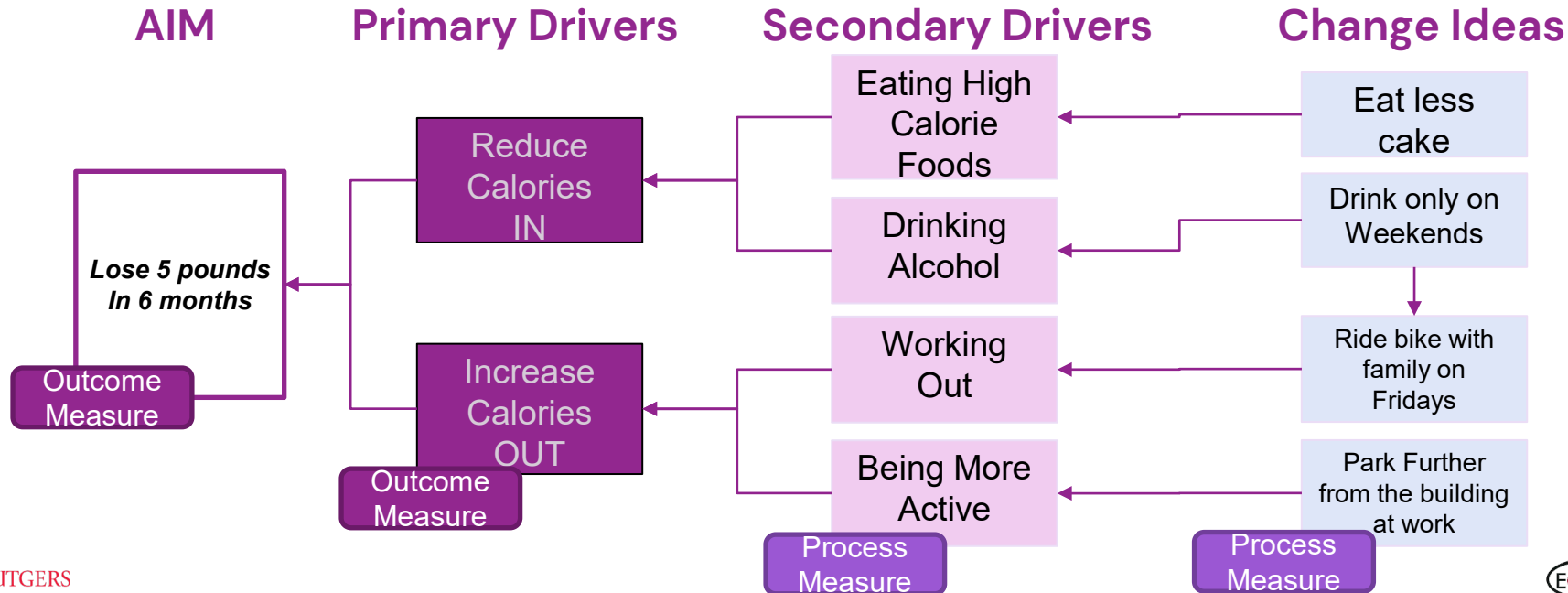
# Driver Diagrams

- A driver diagram is a visual display of a team's theory of what "drives," or contributes to, the achievement of a project aim
- It shows the relationship between the overall aim of the project, the primary drivers that contribute directly to achieving the aim, the secondary drivers that are components of the primary drivers, and specific change ideas to test for each secondary driver



# Driver Diagrams - Example

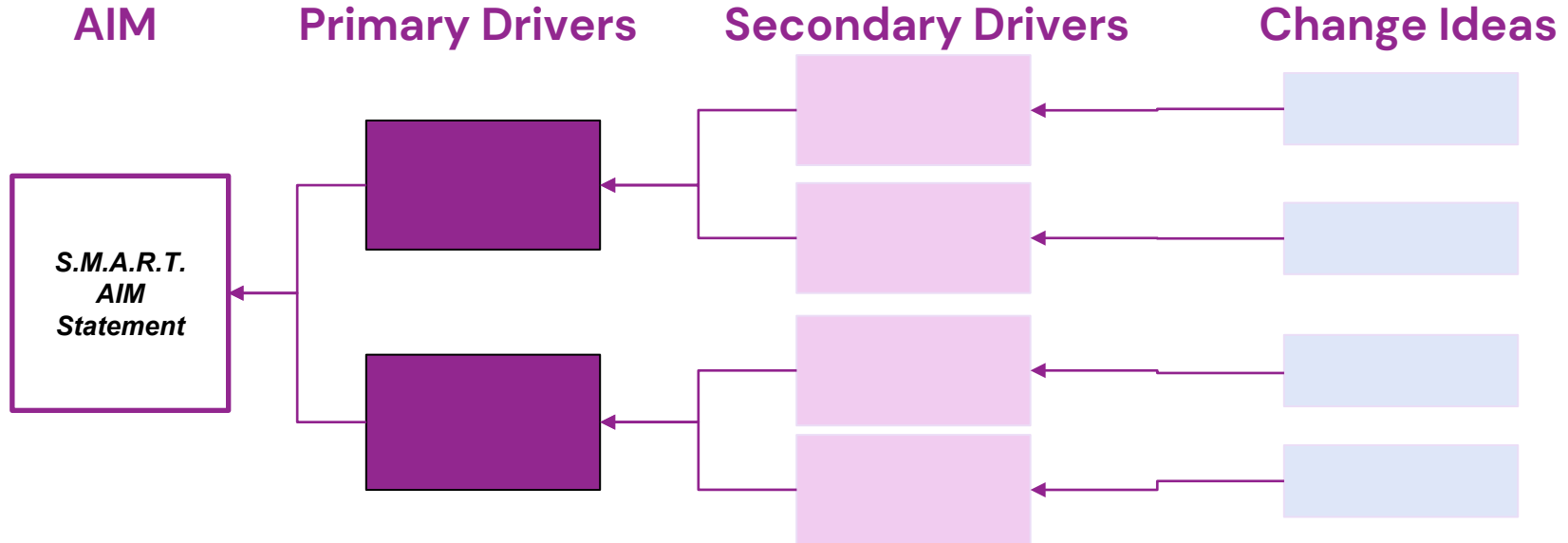
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# Driver Diagram Brainstorming

## Primary Areas of Concern:

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# \*Model For Improvement – PDSA Cycle

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# REFERENCES

1. Langley GL, Moen R, Nolan KM, Nolan TW, Norman CL, Provost LP. [\*The Improvement Guide: A Practical Approach to Enhancing Organizational Performance\*](#) (2nd edition). San Francisco: Jossey-Bass Publishers; 2009.
2. IHI - Institute for Healthcare, How to Improve.  
<http://www.ihl.org/resources/Pages/HowtoImprove/default.aspx>
3. IHI - Driver Diagram How to Improve.  
<https://www.ihl.org/resources/Pages/Tools/Driver-Diagram.aspx>
4. IHI - Aim Statement Worksheet  
<https://www.ihl.org/resources/Pages/Tools/Aim-Statement-Worksheet.aspx>





# Thank you!

## Any questions?

# Drivers & Change Ideas

## Exhibit 2.1. Six Guiding Principles in Treating Clients With CODs

1. Use a recovery perspective.
2. Adopt a multiproblem viewpoint.
3. Develop a phased approach to treatment.
4. Address specific real-life problems early in treatment.
5. Plan for the client's cognitive and functional impairments.
6. Use support systems to maintain and extend treatment effectiveness.

## ADVICE TO ADMINISTRATORS: RECOMMENDATIONS FOR PROVIDING ESSENTIAL SERVICES FOR PEOPLE WITH CODs

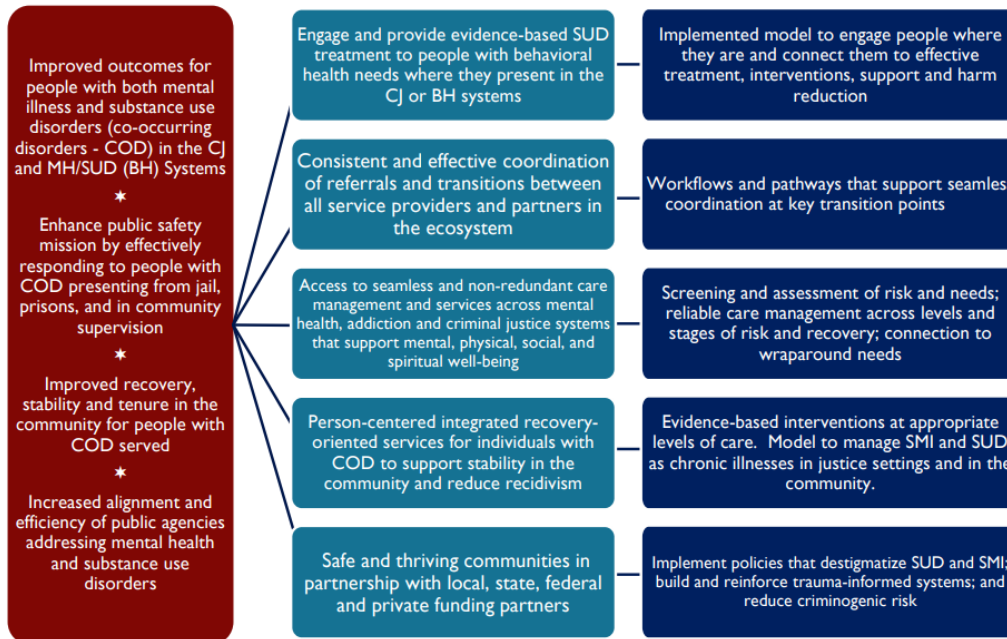
Develop a COD program with these components:

1. Screening, assessment, and referral for people with CODs
2. Physical and mental health consultation
3. Prescribing onsite psychiatrist
4. Psychoeducational classes
5. Relapse prevention
6. Case management
7. COD-specific treatment components
8. Continuing care services
9. Double Trouble groups (onsite)
10. Dual recovery mutual-help groups (offsite)

- [https://store.samhsa.gov/sites/default/files/SAMHSA\\_Digital\\_Download/PEP20-02-01-004\\_Final\\_508.pdf](https://store.samhsa.gov/sites/default/files/SAMHSA_Digital_Download/PEP20-02-01-004_Final_508.pdf)

# Driver Example

## Co-Occurring Disorders Response for People in the California CJ System



- [LEARNING COLLABORATIVE: Optimizing Community Approaches to Challenging Populations with Opioid and Stimulant Use in the Justice System](#) ([caduimat.com](http://caduimat.com))