**Capacity Building 2E** is designed to outline the service design changes to organizational process your agency commits to implementing that increase access and engagement for the 95% of individuals who need SUD treatment but who are not accessing it.

As part of your participation in **R95 Capacity Building Deliverable 2E-3**, you are required to complete an implementation/investment plan and submit the results by **June 30, 2024**.

1. ***Process for Assessment of Your Agency’s Current State:*** 
   1. Describe the process you used to gain insight into the customer experience at your agency currently (e.g., customer walk-through, customer surveys, etc.)?

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| [Enter your response here] |

* 1. Describe the process you used to identify Service Design changes in your current state that could increase access, engagement, and retention in SUD treatment (e.g., describe your process improvement or other activity)?

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| [Enter your response here] |

1. **Actions to Take**: Use the table below to **select areas of improvement** identified during your customer walk-through or other customer experience feedback that **could** be addressed as part of your Service Design improvement/investment.

You can select as many of the items as you feel address the findings from your customer feedback but MUST include not fewer than three changes (at minimum) your agency commits to investing in and/or implementing in the next two years. If there are changes listed below that you would like to address in the future but are not being prioritized in the next two years, you can select these as well.

Description of the four (4) Key Service Design changes in table below:

* **Modification of Workflows to Reduce Barriers to Services**: Making changes to existing agencywide or site-specific workflows or processes, based on customer input or walk-through, that allow you to implement the changes that reduce barriers to services including intake, screening, and/or admission, treatment services/care coordination, and discharge workflows.
* **Language Access**: Service Design changes that improves agencywide or site-specific ability to offer equitable treatment service benefits by leveraging the language access rate (new to FY 23-24 rates), increasing bilingual staff or assessing language access needs based on surrounding community.
* **Implementing Policy/Protocol Revision:** Service Design changes that will assist in implementing policy or protocol to lower the bar for admission (e.g. admission policy, engagement policy and bidirectional referrals) and increase the bar for discharges (discharge policy and flexible readmissions).
* **Physical Environment:** Service Design changes that update or change the physical environment of a site to reduce barriers to care.

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| **R95 Service Design Changes in Operational Processes** | **Select all that apply** | |
| FY 24/25  (1st year) | FY 25/26  (2nd year) |
| **Modification of Workflows to Reduce Barriers to Accessing Services:** |  |  |
| * Update **intake, screening, and/or admission** process to better engage patients (e.g., increase same day intake admission appointment, focus on functional status not disability, language, or MH diagnosis, toxicology testing, etc.). | ☐ | ☐ |
| * Update staffing/service workflows for **treatment services** that are more flexible and promote retention of patients. | ☐ | ☐ |
| * Update workflows to further R95 **discharge policy** (e.g., addressing lapses, bolstering transitions in care and warm hand-off, improved coordination with managed care plan, etc.). | ☐ | ☐ |
| * Assignment of patients to services aligned with stage of change. | ☐ | ☐ |
| * Other, please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ☐ | ☐ |
| **Language Access:** |  |  |
| * Increase the bilingual workforces at your agency: * Specify language (s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| * Conduct a language needs assessment |  |  |
| * Contract with a language assistance vendor |  |  |
| * Translate written materials | ☐ | ☐ |
| **Implementing Policy/Protocol Revision** |  |  |
| * ADA requirements to allow service animals in residential settings and that prohibit denying services to people who are blind/visually impaired, deaf/ hard of hearing, or have mobility challenges. |  |  |
| * Offer 30- & 60- day flexibility on ASAM assessment completion |  |  |
| * Incorporating harm reduction strategies into programming |  |  |
| * Attendance and readmission policies for patients motivated to continue their recovery. |  |  |
| * Other, please describe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| **Physical Environment** |  |  |
| * Make modifications to existing physical environments more welcoming for patients (e.g., paint, furniture, signage) |  |  |
| * Implement processes that allow patients to have service animals with them, as required by law. |  |  |
| * Other, please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |

1. ***Implementation Plan***: Based on your selection(s) above, **prioritize two (2) areas** you will address in FYs 24/25, and 25/26.

For each area provide the following:

1. The priority area outlined in the above table.
2. Summarize why this area was select and the intent to resolve a challenge.
3. Write a SMART goal for each priority area.

* SMART Goals should be *Specific*, *Measurable*, *Achievable*, *Relevant*, and *Time-bound*)

1. Identify if this is a site-specific effort or agencywide.

Examples:

1. ***Priority Area*** *Language Access:*

***Summary****: When a customer calls or walks into our facility, if they speak another language, there is no one available to assist them. A review of our community indicates that we would see increased participation in the number of people who speak Tagalog, if we had signs outside in Tagalog and someone who spoke Tagalog (some prefer to receive services in English even though their primary language is Tagalog).*

***SMART goal****: Translate written materials into Tagalog (including exterior signs) and increase the number of bilingual Tagalog SUD and LPHA staff from 0 to 1 by June 2025.*

1. ***Priority Area:*** *Modification of Workflows to reduce barriers:*

***Summary*** *The customer walk-through clearly demonstrated how unwelcoming the space was particularly for people experiencing homelessness who had a pet. After engaging in a process improvement activity, we identified two ways to improve this: 1. We should modify our intake process to ask whether the individual has a pet and 2. We should connect with animal boarding facilities located within a 2-mile radius to develop relationships that allow boarding animals for 30+ days.*

***SMART Goal****: Modify existing processes to allows patients who are unhoused and seeking treatment to keep their pet while they are receiving residential treatment services by December 2024.*

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| **FY 24/25**  **(Year 1)** |
| **Priority Area 1:** [Enter your response here]  **Summary:** [Enter your response here]  **SMART Goal 1:** [Enter your response here]  **Applicable to**:  £ Entire Agency OR £ Site Specific, specify which: |
| **Priority Area 2:** [Enter your response here]  **Summary:** [Enter your response here]  **SMART Goal 2:** [Enter your response here]  **Applicable to**:  £ Entire Agency OR £ Site Specific, specify which: |

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| **FY 25/26**  **(Year 2)** |
| **Priority Area 1:** [Enter your response here]  **Summary:** [Enter your response here]  **SMART Goal 1:** [Enter your response here]  **Applicable to**:  £ Entire Agency OR £ Site Specific, specify which: |
| **Priority Area 2:** [Enter your response here]  **Summary:** [Enter your response here]  **SMART Goal 2:** [Enter your response here]  **Applicable to**:  £ Entire Agency OR £ Site Specific, specify which: |

1. Enforcing sustained adoption of organizational changes requires consistent oversight and monitoring. Identify areas where you will ensure sustained service design efforts.

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| **Sustainability Efforts** |
| How will you ensure your plan is sustainable?  [Enter your response here] |

By signing, I confirm that the information reported is accurate, and acknowledge that we must adhere and are subject to all reporting, tracking, audits, and recoupment requirements described in SAPC Bulletin 23-07 – Fiscal Year 2023-2024 Rates and Payment Policy Updates.

Agency Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Agency Tier:  Tier 1  Tier 2  Tier 3

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| \*\*\*\* For CIBHS Use Only \*\*\*\*   |  |  |  | | --- | --- | --- | | CIBHS | Approved: | Comments: | | | | | | |
| \*\*\*For SAPC Use Only\*\*\* | | | | | |
| PSI Team | Approved: | Comments: |  | | |
| Finance Services Division | Approved: | Provider Tier:  Tier 1  Tier 2  Tier 3 | | Date of Start Funds Invoice #1 |  |
| Comments |  | | | |