

Case Study

Spectrum Youth and Family Services wins recognition for rapid assessment and referral services

Agency uses Comprehensive Health Assessment for Teens (CHAT™) to streamline assessment procedures and increase quality of care

About Spectrum Youth and Family Services

Located in Burlington, Vermont, Spectrum Youth and Family Services is a private, non-profit organization that offers shelter and community to at-risk and homeless youth ages 14-21. Spectrum has won numerous awards recognizing the quality of its services. The Vermont Agency of Human Services Alcohol and Drug Abuse Programs has cited in particular the agency's "stellar" provision of services and "thorough and comprehensive" planning, from "referral to assessment to treatment to discharge."

Challenge

Spectrum continually seeks to increase the quality of its services, and in 2009, the organization embarked on a thorough analysis of its intake procedures to determine whether it could make any changes that would enhance access to treatment and increase client retention.

Following the process-change principles outlined by NIATx, the pioneering process improvement collaborative, Spectrum conducted a "walkthrough" to determine how long it was taking for clients to go from the first request of service to the initial treatment session. "We concluded that we could make the intake process more efficient," explains Andrea Meier, MS, LADC, LCMHC, Counseling Supervisor at Spectrum. "Clients were waiting too long before beginning treatment, and at the same time, our clinicians were overextended."

Spectrum provides assessments for all youth as part of the initial phase of treatment, to assist in planning for meeting each client's unique needs. The agency has determined that these assessments should be conducted using a standardized, evidence-based assessment instrument.

"We're committed to implementing evidence-based practices in our services, from screening to assessment to treatment," explains Ms. Meier.

Solution

To streamline and simplify the assessment and referral process, Spectrum chose to replace the GAIN, or the Global Assessment for Individual Needs, with the CHAT, the Comprehensive Health Assessment for Teens. The agency had been using the GAIN for seven years prior to switching to the CHAT.

Developed with grant support from the National Institute on Drug Abuse (NIDA), the CHAT is a computer-based, multimedia behavioral health assessment tool that clients self-administer on a computer. Integrated in the ASI-MV Connect system, the CHAT provides clinicians with immediate access to reports designed to assist with treatment planning. It is a standardized, evidence-based assessment instrument, and is approved for use by the Vermont Department of Health's Division of Alcohol and Drug Abuse Programs.

According to Ms. Meier, who is a Certified Local Trainer of the GAIN, the CHAT has important practical advantages when compared to the GAIN. Key among these: the CHAT saves time in both training and use of the assessment.

"Training clinicians to administer the GAIN is incredibly labor-intensive, as it's a 100-page assessment," explains Ms. Meier. "We've found that with the CHAT, the assessment is comprehensive, but the training has been minimal. And both the CHAT and the ASI-MV Connect system are very user-friendly, so we don't spend a lot of time troubleshooting."

It also has benefits from a clinical perspective. The interactive, multimedia presentation of the interview has drawn positive responses from Spectrum's adolescent clients. "We appreciate that the presentation of the CHAT is youth-oriented, and we've had great feedback from our clients," says Ms. Meier. "Because the format is engaging and youth-friendly, it keeps clients interested through the 45 minutes of the interview."

Results

Adopting the CHAT has allowed Spectrum to reduce client waiting time from request of service to treatment, save time and resources, and deliver services that are more "consumer-oriented," according to Ms. Meier.

"Before implementing the CHAT, a client might have two-to-three steps to complete before beginning treatment; now, the intake and assessment process is one step," says Ms. Meier. "Self-administration is new to us as an agency, and it has made our intake process much faster."

In addition to the time Spectrum has saved through self-administration of the interview, the organization has saved clinician time in the treatment planning process. "The writing process for assessments is a lot quicker. Our clinicians are able to generate reports immediately and review useful clinical information, such as information to help guide treatment planning according to the ASAM (American Society of Addiction Medicine) criteria. They can easily edit these reports to document their clinical impressions," reports Ms. Meier.

After implementing the CHAT, Spectrum was recognized for its model rapid referral/assessment program with a 2010 Innovation Award (iAward) by NIATx, presented at the NIATx Summit and SAAS National Conference in Cincinnati, Ohio.

Ms. Meier believes that using the CHAT may ultimately have additional benefits for Spectrum. "By becoming more consumer-oriented, we can better meet the needs of our clients, which may lead to increased retention and referrals," she says.

About the ASI-MV Connect

The Addiction Severity Index-Multimedia Version (ASI-MV) Connect system is a powerful web-enabled solution for behavioral health assessment, treatment planning, and data management. The system includes clinically validated assessment tools: the ASI-MV, a client self-administered version of the Addiction Severity Index (ASI) for adults, and the Comprehensive Health Assessment for Teens (CHAT) for adolescents. It also provides access to clinical reports and an online data center. These tools help you streamline your assessment procedures, expedite treatment planning, and simplify data gathering and analysis of population needs outcomes. Learn more and download a free 30-day trial at www.asi-mvconnect.com.