

NIATx: The Network for Improvement of Addiction Treatment Establishes Itself

A national resource center on quality in addiction treatment

SUMMARY

From 2007 to 2011, the [Network for the Improvement of Addiction Treatment \(NIATx\)](#), based at the University of Wisconsin–Madison, used funding from the Robert Wood Johnson Foundation (RWJF) to establish itself as a national resource center for improving the quality of addiction treatment. NIATx sustained the efforts of earlier work, including two RWJF national programs (*Paths for Recovery* and *Advancing Recovery*), by making the quality improvement tools produced under those programs available to addiction treatment providers nationwide. See Program Results for [Paths to Recovery](#) and [Advancing Recovery](#) for more information on NIATx's work on those programs.

Key Results

According to project staff:

- **NIATx created the first national resource center designed to help community-based addiction treatment providers improve their organizational performance.**
- **NIATx developed a strategy for sustaining itself without RWJF funds.** In 2011, it had an operating budget of approximately \$2.4 million, with support from a diverse set of public and private funders.
- **NIATx resources were being widely used by treatment providers nationwide.** Some 3,000 addiction treatment centers around the country used materials available from an updated NIATx website, including centers in all 50 states, Puerto Rico, and the District of Columbia. The [Resource Center](#) section of the website gives treatment providers access to toolkits, training videos, and other material to help them apply process-improvement strategies.
- **Training and networking programs developed under *Paths to Recovery*, *Advancing Recovery*, and other RWJF-funded initiatives have been sustained.** These include the NIATx Change Leaders Academy, annual summits, and coaching services.

Funding

RWJF provided a grant of \$1.8 million¹ to help NIATx sustain itself as a national resource center.

CONTEXT

Limited Access to Substance Abuse Treatment

The United States entered the 21st century with an unresolved health care dilemma—how to make addiction treatment more available to the millions of American who need it. In 2002, the federal Substance Abuse and Mental Health Services Administration (SAMHSA) estimated that 22 million Americans had a substance dependence or abuse problem (9.4% of the total population aged 12 or older). Only about 3.5 million people (15.9% of the population needing treatment) received treatment for their problem.²

Patients' lack of readiness to enter treatment, limited funding, and other factors beyond the control of treatment agencies all helped explain, in part, why so few people got the care they needed. Still, there were also systemic and programmatic reasons that treatment agencies could control.

RWJF's Interest in This Area

In 2000, a staff report recommended that RWJF give priority to increasing access to quality addiction treatment as well as to prevention. The report pointed to a “reservoir of scientific understanding of neurology, biology, and the psychosocial dimensions of addiction” that positioned addiction as a chronic medical condition. It also noted the availability of medications and proven clinical interventions to treat addiction, and the significant gap between treatment need and resources.

Following the staff report, the RWJF Board of Trustees in 2001 authorized the first of a series of national programs to increase the availability and quality of addiction treatment in the United States. NIATx, at the University of Wisconsin–Madison, was the national program office for two of these programs:

- ***Paths to Recovery: Changing the Process of Care for Substance Abuse Programs***³ (2002–08) was a national program designed to improve the quality and efficiency of substance abuse treatment. Participating agencies used process-improvement

¹ ID# 59714 (\$1,844,966, February 15, 2007–August 31, 2011)

² Substance Abuse and Mental Health Services Administration (2003). Overview of Findings from the 2002 National Survey on Drug Use and Health (Office of Applied Studies, NHSDA Series H-21, DHHS Publication No. SMA 03–3774). Rockville, MD. Available [online](#).

³ The University of Wisconsin–Madison [Center for Health Enhancement Systems Studies \(CHESS\)](#) served as the national program office for *Paths to Recovery* from 2002 to 2003, before it started NIATx.

strategies originally developed by private industry to increase the number of people who entered and remained in treatment. See [Program Results](#) for more information.

- ***Advancing Recovery: State and Provider Partnerships for Quality Addiction Care*** (2006–10) was a national program that supported 12 state/provider partnerships in selecting and implementing evidence-based practices known to be effective in treating substance abuse. These included medication-assisted treatment, continuing care management, psychosocial interventions (motivational interviewing), and case management or wraparound support services. See [Program Results](#) for more information.

THE PROJECT

When this grant began, NIATx initiatives were primarily designed to promote access to and retention in services, and advance the use of clinical, evidence-based practices—the core activities of *Paths to Recovery* and *Advancing Recovery*. Over the next four years, NIATx established itself as a financially viable national resource center to promote quality in addiction treatment, and added new programs and services.

About NIATx

NIATx had been founded in 2003 as a center within the University of Wisconsin–Madison Center for Health Enhancement Systems Studies. Its purpose was to serve as a learning collaborative that could sustain and spread the process-improvement model piloted under *Paths to Recovery* and subsequent programs to the nation's 13,000 addiction treatment providers.

David H. Gustafson, PhD, research professor of Industrial and Systems Engineering at the University of Wisconsin–Madison, served as project director of this grant and remains director of NIATx. Gustafson had been the national program director for *Paths to Recovery*, *Advancing Recovery*, and other RWJF-funded programs. Todd Molfenter, PhD, was co-director of this grant, and remains co-deputy director of NIATx.

RESULTS

According to NIATx reports and an interview with the writer of this report, the project:

- **Created a national resource center designed to help community-based addiction treatment providers improve their organizational performance.** No such entity existed before. “Other organizations provide information on addiction, but NIATx is unique in its focus on process improvement,” said Project Director Molfenter. Resources on the NIATx website are designed to help agencies improve services, reduce costs, increase revenue, and prepare for health care reform.

- **By 2011, NIATx resources were being widely used by treatment providers nationwide.** Based on a survey distributed to more than 5,000 subscribers on the NIATx electronic mailing list:
 - Some 3,000 addiction treatment centers around the country used materials available from the NIATx website to adopt its model of process improvement, as originally crafted in the *Paths to Recovery* and *Advancing Recovery* programs. (For more on the NIATx website, see [Communications](#).)
 - Treatment centers using the model were located in all 50 states, Puerto Rico, and the District of Columbia.
- **Developed a strategy for sustaining itself without RWJF funds.** RWJF's grant covered nearly 100 percent of NIATx operations in 2008, decreasing to 50 percent in 2009, and 40 percent in 2010. After the RWJF grant ended in August 2011, NIATx covered its annual operating budget of approximately \$2.4 million with other funders including:
 - SAMHSA: \$1.2 million
 - National Institute on Drug Abuse: \$900,000
 - Other public and private sources, including the Open Society Foundation, Veterans Affairs Administration, several state governments, and community-based organizations: \$300,000
- **NIATx mounted the ACTION (Adopting Changes to Improve Outcomes Now) Campaign to highlight the availability of resources for the treatment community.**⁴ The campaign focused on three actions that providers can take to improve addiction treatment: rapid access to services; improving client engagement; and creating a seamless transition between levels of care.
 - The first phase of the ACTION Campaign (2007–09) encouraged treatment providers around the country to adopt evidence-based practices and highlighted the materials and technical assistance available on the NIATx website.
 - The ACTION Campaign II (2009–11) emphasized social marketing strategies to reach the treatment community, placing articles in trade publications, hiring a staff member to attend conferences and staff exhibits, and hosting a series of 43 free online webinars.
 - ACTION resources have been incorporated into the NIATx website. For more information on the campaigns (including free downloadable tools and workbooks), see project descriptions for the [ACTION Campaign](#) and the [ACTION Campaign II](#).

⁴ Additional funders of the ACTION Campaign were SAMHSA, Magellan Health Services, and the California Endowment (Action Campaign II only).

- **Training and networking programs developed under *Paths to Recovery*, *Advancing Recovery*, and other RWJF-funded initiatives have been sustained.**

These include:

- The [NIATx Change Leader Academy](#). This training program was developed to spread the NIATx model of process improvement nationwide. From October 2008 through May 2011, 42 NIATx Change Leader Academies were conducted in 22 states, training more than 1,300 professionals.
- The NIATx Coach Academy. Under *Paths to Recovery* and *Advancing Recovery*, NIATx contracted with coaches who were experts in process improvement, addiction, or both and paired them with treatment providers. NIATx has maintained and expanded this service by developing the NIATx Coach Academy, which trained more than 60 coaches by 2011.
- An annual conference hosted by NIATx and State Associations of Addiction Services. More than 700 individuals attend these meetings, which give treatment providers the opportunity to network with leaders in addiction treatment, business, technology, and other fields. For more on this collaboration, which began in 2008, see [Program Results](#).

- **NIATx created an array of tools that community-based safety-net providers can use to prepare for health reform and develop sustainable business practices.**

- [Accelerating Reform](#), a NIATx initiative that ran from 2009 to 2010 with support from RWJF and SAMHSA, helped 22 providers of substance abuse, mental health, and primary care services work together to prepare for health care reform by:

- Increasing billing capacity and flexibility to adjust to new payment methods.
- Co-locating and integrating with local primary care clinics.
- Increasing the number of credentialed professionals to meet payer requirements.
- Acquiring new technology, including electronic resources to provide treatment.

Participants developed health care reform “readiness inventories,” attended online and face-to-face meetings to exchange ideas with experts and peers, and received coaching to implement an action plan for thriving under health reform.

- When the project ended, NIATx placed the tools on its website, including a searchable database on health care reform and archives of webinars and presentations conducted by project participants, NIATx staff and coaches, and outside experts from 2009 to 2010.

A key resource is the [NIATx Third Party Billing Guide](#), a step-by-step guide to creating or improving a billing system, with sample forms and case studies to help agencies make the transition to billing for services.

- **Innovative new programs added to the visibility of NIATx, expanded its user base, and attracted financial support.** For example, project staff provided technical assistance to:
 - Drug courts and reentry programs for former prisoners to help increase their access to treatment programs
 - Treatment agencies helping pregnant and post-partum women increase the involvement of family members in their recovery.

For more on these and other projects, see the [Initiatives](#) section of the NIATx website.

- **NIATx forged new partnerships with diverse stakeholders, including those in primary care and behavioral health.** NIATx offers jointly sponsored programs with the National Association of Community Health Centers, National Council of Behavioral Health Providers, Addiction Technology Transfer Center, American Association for the Treatment of Opioid Dependence, and other organizations.

Communications

NIATx updated its website in 2010 to disseminate process-improvement tools and resources. The revamped website includes a dedicated [Resource Center](#) page and links to social networking sites (Facebook, Twitter, blogs, and a NIATx YouTube Channel).

Among the resources:

- [Process Improvement 101](#), a 60-minute e-learning course that presents an overview of the NIATx model and prepares users to conduct a walk-through (an exercise where staff members walk through the treatment processes just as a 'customer' does).
- The [NIATx Workbook](#), a guide featuring research-based strategies that have proven effective in real-world settings, and toolkits to help [individual treatment agencies](#) or [large systems](#) implement process improvement.
- [Getting Started with Medication-Assisted Treatment](#), a toolkit with lessons from *Advancing Recovery*, for agencies interested in using medications, combined with therapy, to treat substance abuse disorders.
- A two-volume [Business Case](#) series, a collection of case studies, tools, and best practices for building an organization's financial strength.
- [Forms and templates](#) to help users record a walk through, conduct a process-improvement project, measure its impact, and complete other process improvement tasks.

In August 2011, staff reported an average of 4,500 monthly visits.

See the [Bibliography](#) for additional resources produced during the project period, including articles published in peer-reviewed journals.

RECOMMENDATIONS

Providing a national program office with a “capstone” grant to establish a national resource center is a good model for sustaining and disseminating RWJF-funded work, according to NIATx’s Molfenter. However, the ingredients for sustainability—strong programs, solid funding base, and partnerships with diverse stakeholders—must be in place for the transition to work.

LESSONS LEARNED

- 1. During times of rapid growth, invest in quality staff.** Faster than anticipated growth resulted in significant turnover among both internal staff and the external coaching team. A commitment to hiring high-quality staff and coaches was critical for maintaining stability during this period. NIATx was willing to repost positions and conduct further interviews in order to find qualified individuals. (Todd Molfenter, Co-Deputy Director, NIATx)
- 2. Be willing to amend a strategic plan based on customer input, environmental trends, and growth opportunities.** A strategic plan is an important guide, but flexibility is equally important. When a leader of a state agency in Wisconsin pointed out process errors in county-run aging centers, says Molfenter, “and approached NIATx with a vision of how process improvement could help the lives of those impacted by aging or a physical or cognitive disability, NIATx responded by applying its process-improvement model to help the elderly and those with physical or cognitive disabilities.” Services in county aging centers have since become a focus of NIATx activities, and “represent a considerable amount of work occurring through the resource center,” says Molfenter.
- 3. Form partnerships to increase your credibility and your reach.** Partnering gave NIATx access to fields where its expertise was limited, such as marketing and business operations. NIATx was also able to reach much larger audiences by sponsoring joint activities with organizations such as the State Associations of Addiction Services. (Molfenter)

AFTERWARD

NIATx continues as a resource center for addiction treatment providers around the country, offering core services developed under *Paths to Recovery* and *Advancing Recovery* while expanding into new areas and technologies.

One growth field is mobile technology. “The whole area of integrating mobile technology in recovery has taken off and is a leading-edge activity for NIATx,” said Molfenter. “Smart phone technology is expected to be the future of addiction treatment.”

With a National Institutes of Health (NIH) grant, NIATx is looking at how best to reengineer addiction treatment services using smart technology for patients in primary care centers. “These centers identify people with addiction disorders, but have trouble treating them, or don’t want to treat them,” Molfenter explained. “Mobile technology is a low-cost, easy way to encourage primary care centers to take on patients who need addiction treatment and recovery supports.”

NIATx is also helping a consortium of 15 treatment providers implement smart phone technology to help consumers with addiction issues. Each organization pays NIATx \$7,000–\$12,000 annually to support implementation and share research related to effective health communications.

Other new initiatives include:

- An NIH-funded project to give elderly residents of Wisconsin better access to aging services.
- A project funded by the Open Society Foundation to promote collaboration between community-based primary care and behavioral health, also in Wisconsin.

In 2012, SAMHSA selected NIATx to serve for five years as the national coordinating center for the Addiction Technology Transfer Center Network, composed of 14 regional centers. Established in 1993, the network facilitates alliances among front-line counselors, agency administrators, faith-based organizations, policy-makers, the health and mental health communities, consumers, and other stakeholders.

NIATx’s role is to connect participants to the latest research and information by organizing classroom-based and online training. This assignment “would not have happened without RWJF’s support for NIATx as a national resource center,” Molfenter said.

Core activities at NIATx are also continuing, including the annual conference with the State Associations of Addiction Services, the Change Leader Academies, and coaching services. To help its team of some 50 coaches upgrade their skills, NIATx will continue to offer three coaching webinars a year and host a networking meeting at the annual conference.

NIATx’s 2013 operating budget is approximately \$2.4 million. SAMHSA is the major funder, with a commitment of \$1 million annually through 2014. Additional funds come from the NIH (\$800,000), a mix of private foundations (\$200,000), and fee-for-service contracts (\$400,000).

NIATx is now the coordinating center for SAMHSA's Addiction Treatment Technology Centers (ATTCs). This activity, along with Molfenter's *Advancing Recovery* National Institute on Drug Abuse grant, has led to an emphasis on evidenced-based-practices adoption within the NIATx Resource Center.

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Toolkits

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Communication or Promotion

www.niatx.net. The NIATx website provides information about the NIATx model of process improvement, news, case studies, and stories from effective programs, and education and training resources.

www.niatx.net/Content/ContentPage.aspx?NID=2. The Resource Center section was created in 2010 to provide addiction and mental health treatment providers and other stakeholders around the country with access to free, downloadable resources for improving the quality of addiction treatment. The website is designed to serve those who are new to process improvement as well as more experienced users.

www.niatx.net/Content/ContentPage.aspx?NID=26. This Web page on the NIATx website (accessed under Initiatives section) contains information about the *Accelerating Reform* initiative. Users of the site can access tools and resources generated under the initiative, including an archive of webinars and presentations on technology, billing, electronic health records, and other issues key to survival under health care reform.

www.niatx.net/Action/overview.aspx. The Web page on the NIATx website contains information and downloadable resources from the ACTION Campaign II offered from August 2009 through June 2011.