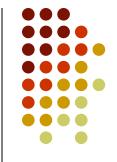
Creating an Effective & Financially Viable Group Schedule

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The only thing stopping us...



Assessments

Reviews



Medical Necessity

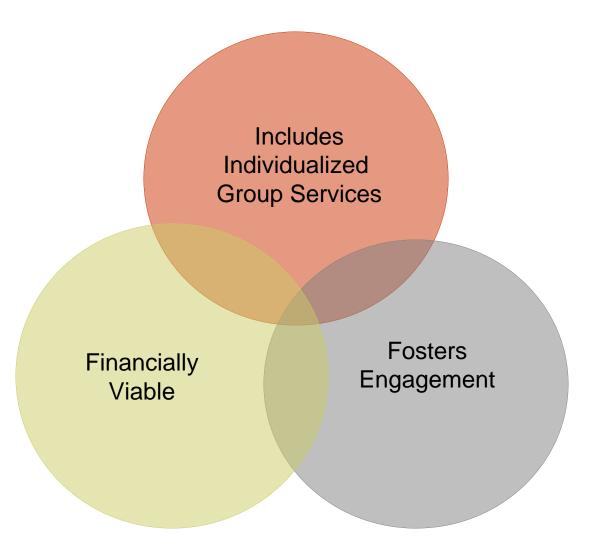
Intakes
Staff Meetings

Crisis Situations

Monthly Progress Notes...again?!

Elements of an Effective Group Schedule





Overview of ARA PROS



- Rural Location: Limited public transportation
- Average Census: 80 participants
- Average Daily Attendance: 32
- Participants are scheduled an average of 2-3 days per week
- 10-15% of census enrolled 4+ days per week on a short term basis (IR Relapse Prevention)
- Approximately 70 group services offered weekly
- In operation for almost 2.5 years

Do Your Homework First



- SWOT Analysis
 - Public Transportation Routes & Times
 - Average daily attendance
 - Attendance trends in current group schedule
 - Quarterly Surveys
 - Monthly progress note data and feedback
 - Seasonal Trends
 - Summer
 - Holidays

Laying the Foundation



- 12-15 Week Rotation with built in reviews
- Team Project
 - Weekly Team Meetings
 - Rolling with resistance
 - Staff competencies
 - Person centered supervision
 - Motivational interviewing
- Stages of Treatment

Integrating the IRP



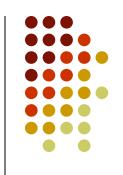
- Know your PROS participant's goals, strengths & barriers (even if they aren't on your caseload)
- Weekly Team Meetings
- IRP Planning Sessions
- Monthly progress note meetings
- Build a solid curriculum base with a golden thread
- Daily Peer Support Group/Activities

Financial Viability

- Provide at least 3-4 choices per block
- Provide all stages of treatment per block
- IR Relapse Prevention Groups (5x per week)
- IR IDDT Groups (7x per week)
- Track service utilization weekly
- Overbook your groups and re-evaluate often
- Staffing Plan-Are you overstaffed or underutilizing resources?
- Communication with billing office

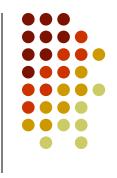


Does the Schedule Support Component Enrollment?



Component	Average Enrollment Rate
CRS	98%
Clinic	90%
IR	46%
ORS	12%

Engagement



- Staffing Plan
 - Creating your "dream team"
 - Performance based interviewing
 - Person centered supervision
- Barriers to Treatment Group (Engagement)
 - Pay attention to no show rates and cancels
 - Phone outreach mid-morning
- Individual Sessions