

# The Strengthening Treatment Access and Retention-Quality Improvement (STAR-QI) Program: Successes and Key Learnings



Mary Henningfield, PhD; Meagan Sulikowski, MSW  
University of Wisconsin–Madison Department of Family Medicine and Community Health, Madison, WI  
Wisconsin Research and Education Network (WREN), Madison, WI



## Objectives

- Understand the impact of application of the NIATx model by behavioral health organizations on quality improvement (QI) projects to enhance services for clients with substance use disorders
- Explain the challenges and solutions implemented by behavioral health organizations to reduce wait times and improve treatment retention

## Background

- The STAR-QI Program operated from October of 2006 to September 2024.
- Staff of behavioral health agencies were trained in the NIATx model to help them implement QI projects.

## Aims

- Reduce the wait time between a client's first request for service and their first treatment session
- Increase client treatment continuation rate between the first and fourth treatment sessions

## Participants and Setting

- Eligible organizations were Wisconsin behavioral health organizations who provide substance use services and agreed to:
  - Attend monthly remote meetings
  - Develop, implement and track QI project progress
  - Report wait time and retention data
- Meetings were held remotely, first by phone and then by Zoom during the pandemic.

## Methods

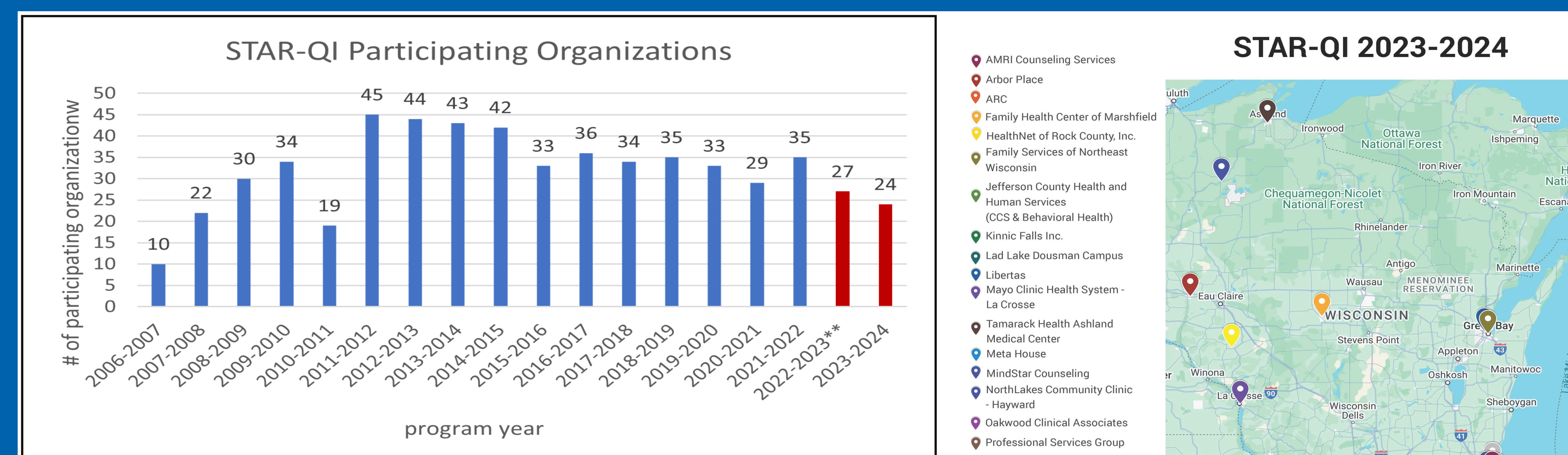
- Projects were reviewed at monthly group check-in meetings.
- Participating organizations supported each other through sharing best practices.
- STAR-QI staff supported implementation of NIATx methods.
- Organizations conducted self-determined SMART QI projects that fit annual focus areas.
- Self-reported wait times and % of patients completing their 4th treatment session were collected at 6 and 12 months.
- Data were compiled and reported with averages calculated by program staff.
- Small stipends were provided for organizations at end of each program year.
- Department of Health Services (DHS)-75 variances were granted for some program years Oct 2009– Sept 2022.

## Results

- STAR-QI supported 105 unique agencies over the life of the program, with an average of 32 organizations participating annually.

- Common focus areas included:

- Staff recruitment and retention
- Regulatory compliance
- Implementing telehealth services
- Reducing patient overdoses
- Improving billing processes



- Participation increased when DHS75 variances were offered and decreased when the opportunity was withdrawn for the 2022-2023 program year.

### Participating organization:

"This was a very nice way to come together and share our challenges and wins while keeping the purpose of gaining knowledge of how to best serve our patients."

### Participating organization:

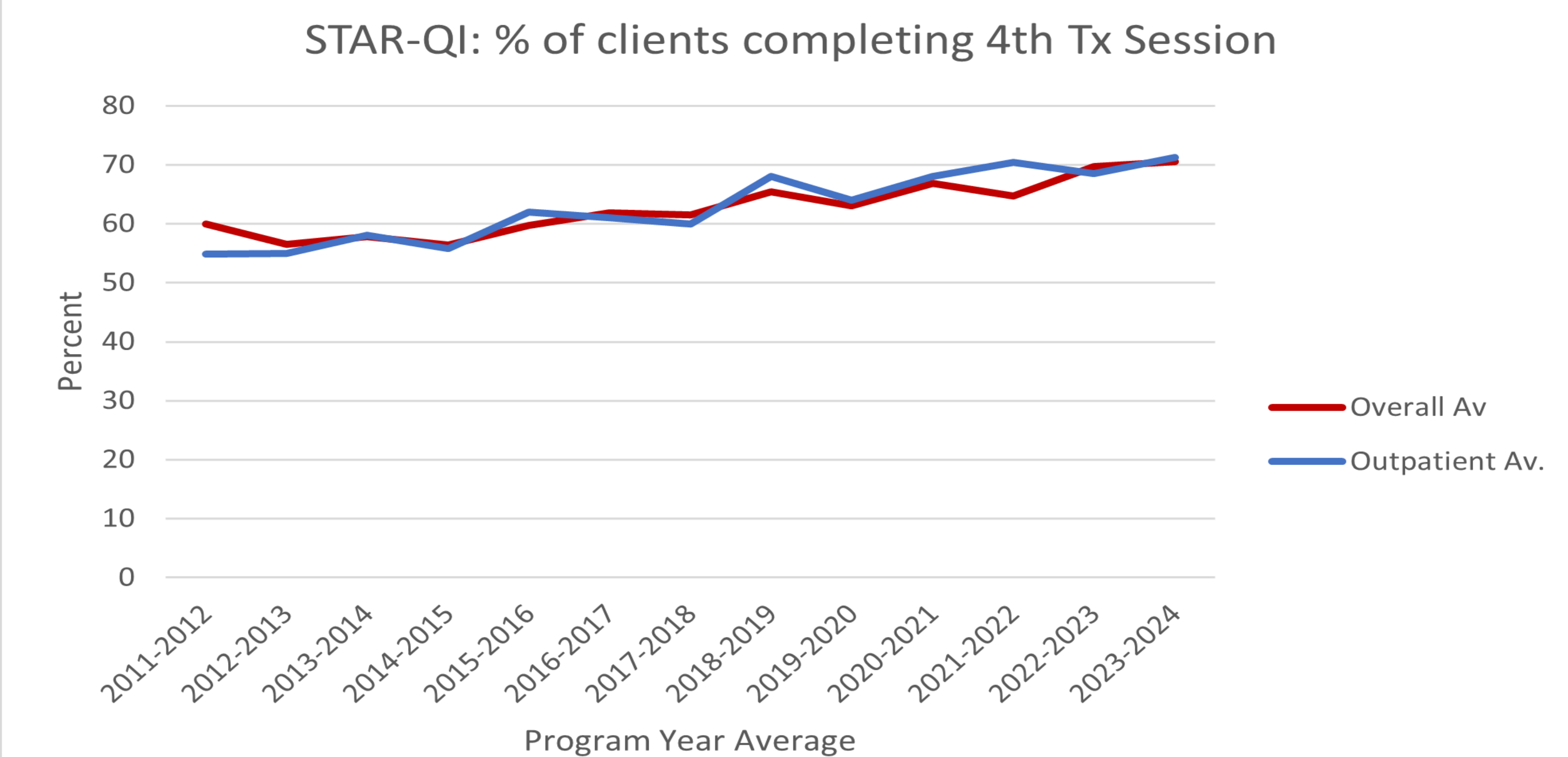
"I am sad that this beneficial project has come to an end. The STAR QI project has been invaluable to my career and to the success of agency programming. It will be difficult to find a platform that facilitates collaboration with other providers and brainstorming for ways to make change in areas of common challenge."

## Conclusions

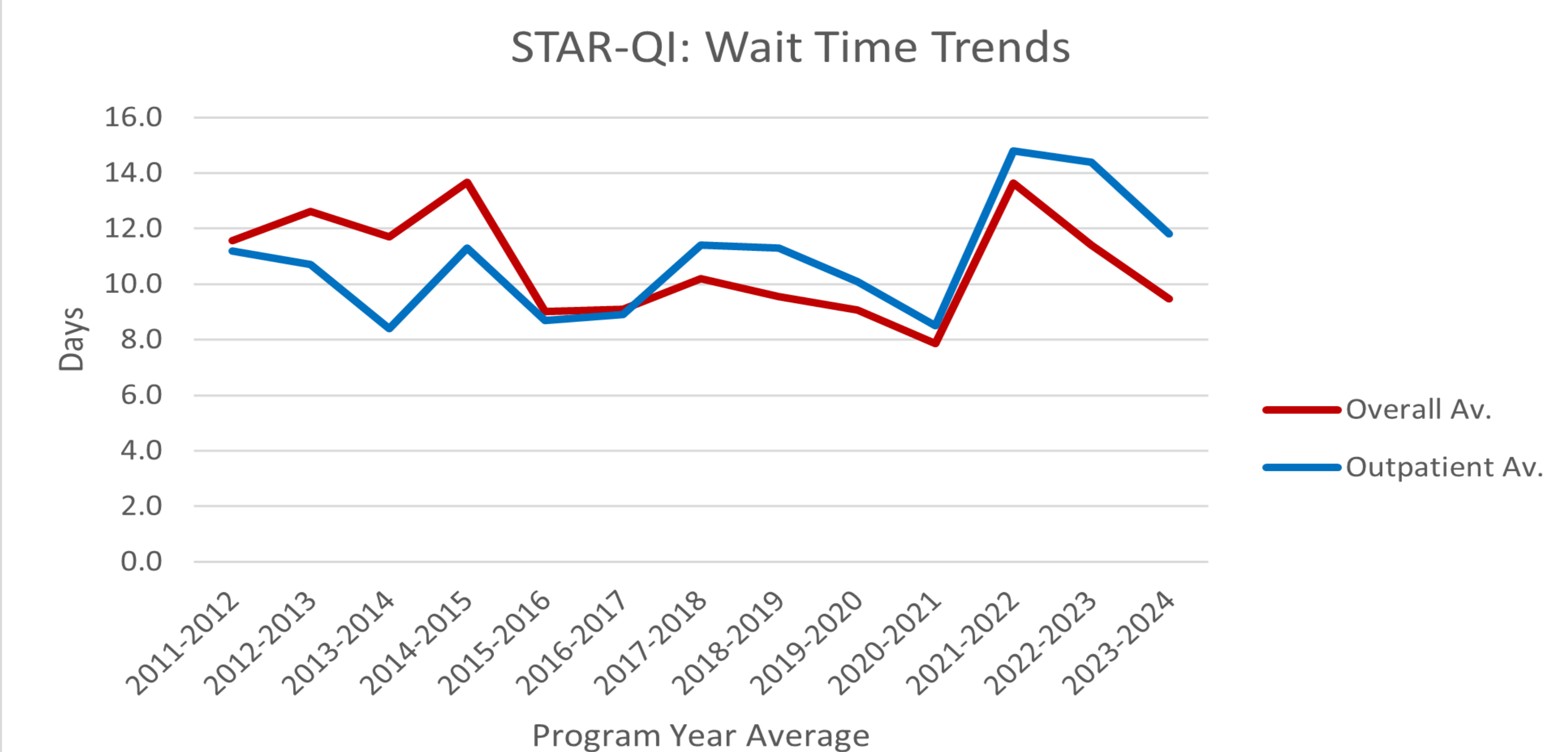
- STAR-QI was a long-standing, beneficial program that changed how behavioral health agencies addressed data collection and managed QI projects.
- Through collaboration, sharing best practices and brainstorming to overcome challenges, STAR-QI successfully supported organizations to serve people with substance use disorders.

## Acknowledgments

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- The % of clients completing their 4th treatment session increased for both the overall average and outpatient only averages from 59.9% to 70.5% and 54.9% to 71.29%, respectively
- The wait time average fluctuated throughout the life of the project, with increases during the pandemic
- Anecdotally, changes to regulations, licensing delays, clinician shortages and an increase in service requests could have impacted wait time averages



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