# Sample ATSH Track 1 Driver Diagram

**Leadership and Culture** 

Program Performance Monitoring

Patient Identification and Initiating Care

MAT Care Delivery and Monitoring Treatment Response

**Care Coordination** 

Organizational Management Structures that Support MAT

Leadership support the work, share vision for the program structure and staffing model, and all staff training on terminology and reducing stigma.

MAT measures collected/reviewed monthly, (submit to ATSH quaterly). Also collect/monitor patient level outcomes

Review barriers and facilitators to MAT success in weekly or biweekly meetings with MAT team

Criteria & procedures in place to identify patient eligible for office-based MAT (screening, exams, reviewing clinical data)

Motivational interviewing employed to engage patients in MAT program

Protocols in place for starting, stabilizing, and maintining care

Processes for physical exams, lab draws, conducting toxicology and other lab tests, refill and stabilization appointments (or groups), etc.

MAT care is coordinated; protocols and processees are defined and optimized; registry is used to monitor MAT initiation and response

Referral processes are in place (specialty care, recovery services, social services)

Team identified with clear roles and responsibilities agreed to by entire MAT team, and collaborates regularly (weekly or biweekly)

Coordinate identification, recruitment, and training for more providers to get x-waivered

### **Aim Statement**

"By September 2020, Main Street Clinic will build a MAT program that will include 3 x-waivered clinician and 50 patients enrolled in MAT"

## Sample ATSH Track 2 Driver Diagram

## Aim Statement

"By September 2020, Main Street Clinic will expand our MAT program by offering services at 2 additional sites, adding 3 x-waivered clinicians, and enrolling an additional 100 patients in MAT"

## **Leadership and Culture**

Program Performance Monitoring

Patient Identification and Initiating Care

MAT Care Delivery and Monitoring Treatment Response

**Care Coordination** 

Organizational Management Structures that Support MAT

Leadership support the work, share vision for the program structure and staffing model, and all staff training on terminology and reducing stigma (newhire training and reinforced regularly w/ staff)

Identify and optimize financial sustainability of MAT/OUD services

Team meetings - no less frequently than monthly

MAT measures collected/reviewed monthly, (submit to ATSH quaterly). Also collect/monitor patient level outcomes

Hub sites trained on estbalished screening and assessment protocols

Standardized Trainings: non-stigmatizing terminology, motiviational interviewing, harm reduction and patient centered care

Train new MAT team members on protocols for starting, stabilizing, and maintining care

Optimize processes to handle higher patient volumes (physical exams, lab draws, conducting lab tests, refill and stabilization visits, etc.)

IT Systems and MAT Registry is optimized for data collection, monitoring, report generation

Expanded and optimized partnerships with external organizations (ED, recovery services)

Creation of committee with authority to monitor, oversee, and promote expanded MAT services

Coordinate identification, recruitment, and training for more providers to get x-waivered