

IDDT Implementation for Program Leaders

Application Guide

INTRODUCTION/OVERVIEW

1. What stage of change am I in with respect to implementing IDDT?

2. What stage of change is my organization in with respect to implementing IDDT?

3. What stage of change is the State MH/AOD Authority in with respect to implementing IDDT?

SETTING UP AN IDDT TEAM

- **Eligibility**

1. What mechanism has your organization used to determine which consumers will be served using IDDT (Standardized utilization review [inpatient, outpatient, etc]? Diagnostic profile? MH/SA recommendation? Administrative decision? Arbitrary?)?

▪ **Structure**

2. How have team members been selected (volunteer, “volunteered”, or otherwise drafted?)

3. Is this an existing team or a newly formed team? Advantages/Disadvantages?

▪ **Comprehensive Services**

1. What ancillary services will we provide from this list?

- | | | | | |
|----------------------------------|-----|----|----|----|
| a. Medical Services | yes | __ | no | __ |
| b. Housing/Residential | yes | __ | no | __ |
| c. Counseling | yes | __ | no | __ |
| d. Supported Employment | yes | __ | no | __ |
| e. Family Services | yes | __ | no | __ |
| f. Illness Management & Recovery | yes | __ | no | __ |

For any of the above for which you answered no, what plans are necessary to begin to address these essential services?

TEAM LEADER

What aspects of the enclosed SAMI Program Progress Summaries need to be incorporated into your current supervisory process to facilitate IDDT focused supervision?

SUPERVISING MOTIVATIONAL INTERVIEWING

1. Review the Eight Tasks in Learning Motivational Interviewing
 - Which Tasks would you prioritize in your own professional development, currently?

 - What next step is necessary for you as a supervisor to advance your practice of MI?

 - What do you need to do to better evaluate staff competencies in these Eight Task areas?

 - What next step(s) are necessary for you as a supervisor to advance your supervisee’s practice of MI?

 - How will you incorporate MI into a routine supervisory process, such that staff are developing and sustaining MI skill sets? (How are you modeling and teaching? Doing live observation and monitoring? Offering written feedback?)

CORE IDDT CLINICAL SERVICES & OUTCOMES

- **Family Services**
1. List ten (10) advantages to engaging families in your service delivery.
 - a.
 - b.
 - c.
 - d.
 - e.
 - f.
 - g.
 - h.
 - i.
 - j.
 2. List five (5) strategies to successfully engage families in your program
 - a.
 - b.
 - c.
 - d.
 - e.

▪ **Group Services**

1. Identify what stage and skill groups are available for SAMI consumers.
 - a.
 - b.
 - c.
 - d.
 - e.

2. Identify three steps necessary to implement a full range of IDDT groups
 - a.
 - b.
 - c.

▪ **Medical Integration**

1. List five (5) recommendations that agency administration could implement that would facilitate improved medical services to IDDT consumers.
 - a.
 - b.
 - c.
 - d.

▪ **Non-Response to Treatment**

1. Draft a definition of what constitutes “non-response” for a consumer served on the IDDT team.

2. How might “non-response” be evaluated and responded to on your team?

▪ **OUTCOMES**

1. List three (3) additional ways that you could use outcome data to enhance your current service delivery.

a.

b.

c.

2. What next steps will be required to implement outcome monitoring?
