Guide to Creating Your Program's Implementation Plan to Increase Co-Occurring Capability

Please find attached a template for your co-occurring implementation plans. This can be modified, but it is important to, in some way, designate the specific goals and tasks, lead persons, and target dates.

The plan should:

- Identify which programs your facility will be focusing on over this next year.

- Identify the co-occurring program leader(s) for your facility or program. Some programs identify an administrative implementation leader to track and update progress made on implementation plan activities and identify a clinical supervision leader to oversee the implementation of clinically oriented goals in the plan. Some programs identify one leader to oversee both of these aspects.

- Identify the members of your steering committee.

- Include a brief narrative giving the historical context of the co-occurring work you may have already done.

- The goals in the plan should be related to these areas:

  1) Fidelity Scales. Results of the most recent IDDT or DDCAT fidelity scale completed on your program (items at 3 or less should be included as areas to improve). The goals should line up with the identified DDCAT or IDDT dimensions, specific objectives need to be included, and the toolkits should guide specific actions.

  2) Clinical Supervision. There may be areas of clinical supervision that you need to enhance (e.g., frequency, type) to ensure that your staff are supported in implementing the clinical changes included in your implementation plan.

  3) Quality Assurance Processes. Please include at least one activity that incorporates co-occurring disorders (COD) into your quality assurance processes (e.g., identifying people with COD in your management information system (MIS); comparing outcomes/data of people with COD to others you serve; a performance improvement project such as a chart review that examines the extent to which screening results are used in the assessment and treatment planning process or the extent to which stage-wise treatment is being used and documented). This is not an all inclusive list of possible quality assurance examples.

  4) Organizational Readiness for Change (ORC). Please include one goal related to the ORC feedback summary you received on your program.

  5) Orienting new staff. Please include at least one strategy to initiate (or enhance and sustain) your internal IDDT/DDCAT orientation for new staff.

Facility:_____
Programs Focusing on During 2007:_____
Co-Occurring Program Leader(s): _____
Members of the Steering Committee (Names, Titles): _____

Goal	Strategy	Lead Person	Target Date	Review/ Status