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Mid-South Substance Abuse Commission Policy and Procedures		<b>History</b>	
Policy Number:	Subject/Title:	<b>Replaces:</b>	3/2005
A014	Welcoming	<b>Last Reviewed:</b>	8/2009
Issued By:	Approved By:	Scope:	<b>Effective:</b>
Executive Director	Board of Directors	All Contracted Providers	08/24/2009

## 1. **POLICY**

The Mid-South Substance Abuse Commission (Mid-South) recognizes the need for all parties to present a welcoming atmosphere to all those making contact; referral sources, providers, community members, other agencies, etc. Specifically, recognizing clients' needs from the moment they make contact via telephone or other method(s) is critical. The components of welcoming do not work in isolation. All system levels are responsible for welcoming and recognizing clients' needs at this important contact, whether or not they have co-occurring disorders. The components of welcoming are linked through contact with referral sources and networking, while at the same time, continually gaining knowledge of such resources.

2.

- 2.1. The purpose of this policy is to establish expectations for the implementation of a welcoming philosophy consistent with the Office of Drug Control Policy Treatment Technical Advisory #5 "Welcoming". It is expected that Mid-South and its contracted providers involved in the provision of substance use disorder treatment services understand and take action to operate within these welcoming principles. These actions consist of reviewing business practices, identifying areas in need of improvement, and implementing identified changes.
- 2.2. Welcoming is conceptualized as an accepting attitude and understanding of how people present for treatment. It also reflects a capacity on the part of the provider to address the clients' needs in a manner that accepts and fosters a service and treatment relationship. Welcoming is also considered best practice for programs that serve persons with co-occurring mental health and substance use disorders.

## 3. **WELCOMING FOR THE SYSTEM**

- 3.1. Welcoming is an ongoing process that will not end at the first contact. It involves access, entry, on-going services, and follow-up.
- 3.2. Welcoming needs to be identified at all system levels. It applies to all clients of an agency and their family. It also applies to the public seeking services, other providers seeking access for their clients, agency staff, referral sources, and the community in which the service is located. Welcoming is comprehensive and evidenced throughout all levels of care, all systems, and all service authorities.
- 3.3. A welcoming system provides for immediate recognition and engages clients in ongoing empathic relationships to support continuing care. When resources are limited or eligibility requirements are not met, the provider ensures a connection is made to community supports.
- 3.4. A welcoming system is capable of providing follow-up and assistance to clients as they navigate the provider and the community network(s).

## 4. **FOR THE CLIENT**

- 4.1. Welcoming includes all staff in the agency, from the first contact over the phone to a receptionist, clinical staff, or to supervisors. There is openness, acceptance, and understanding of the presenting behaviors and characteristics of persons with substance use disorders, inclusive of those with co-occurring mental health problems.

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- 4.2. Welcoming is client-based and incorporates meaningful client participation and client satisfaction that includes consideration to family members/significant others. Services are provided in a timely manner to meet the needs of clients and/or their families.
- 4.3. Staff attitude is important (should have a welcoming demeanor – example: not to call people names or be judgmental).
- 4.4. Staff must follow through on inquiries made by the clients/stakeholders, be resourceful, and have knowledge about referral opportunities. Staff should be able to help clients with information; not let clients feel that no one is able to help. Staff should be competent enough to help the clients, and be knowledgeable about co-occurring disorders and various system/provider requirements so that help may be provided.
- 4.5. Staff maintain training in strategic therapeutic intervention (example: motivational interviewing training for clinicians) and cultural competence.
- 4.6. Staff satisfaction and retention is important in maintaining a welcoming environment.

5. **FOR THE PROVIDER**

- 5.1. Mid-South and contracted providers have leadership that promotes a welcoming attitude. All staff within the agency integrates and participates in the welcoming philosophy.
- 5.2. The provider reviews staff competency tools and/or measurement tools for effectiveness and trains all levels of staff personnel relative to their position to be knowledgeable of the welcoming philosophy. Personnel that provide the initial contact with a client receive training and develop skills that improve engagement in the treatment process.
- 5.3. The provider has 24/7 access for face-to-face or phone contact with clients. Hours of operation meet the needs of the population(s) being serviced. The provider develops and implements a screening process and tool to determine whether or not further assessment is warranted. This process provides direction to staff members who greet clients.
- 5.4. The provider tailors treatment to the needs of the client through individualized (person-centered) treatment planning.
- 5.5. Each contracted provider is to have available a contact person at any/all referral sources made on a daily basis, with continual update to this list for the purpose of ensuring the most expedient referral. Contact with the referred provider must be made to assure completeness of referral and that the clients' needs are answered. Providers are to have a system for follow up with clients after referrals are made and after assuring releases are in place when making referrals. The provider is efficient in sharing and gathering authorized information between involved agencies rather than having the client repeat the same information at each provider.
- 5.6. Welcoming is incorporated into continuous quality improvement initiatives. Consideration is given to administrative details such as sharing paperwork across providers, ongoing review to streamline paperwork to essential and necessary information. All paperwork is to have purpose and represents added value. Ingredients to managing paperwork are the elimination of duplication, quality forms design, and efficient processing, transmission, and storage. The provider distributes client satisfaction surveys that incorporate questions that address the welcoming nature of the provider and its service.
- 5.7. The provider has an understanding of the local community, including community differences, local community involvement, opportunities for recovery support, and inclusion by the client receiving the services. The provider demonstrates an

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understanding and responsiveness to the variety of help-seeking behaviors related to various cultures and ages.

5.8. The provider develops substance use disorder related recovery support systems for clients, along with clients that have co-occurring disorders. As some AA/NA support groups do not allow in their groups clients who have psychiatric medications, management must promote awareness and understanding with AA/NA of the need for such medication for clients with co-occurring disorders.

## 6. WELCOMING IN THE PHYSICAL ENVIRONMENT

6.1. Clients, families, and stakeholders are comfortable in the atmosphere of the reception area and offices. All areas are neat and clean, with enough furniture, resulting in an environment that is appealing to the client. There is adequate seating to include family members or others accompanying the client, space, and consideration to privacy, a drinking fountain and/or other amenities to foster an accepting, comfortable environment. Offices are built soundly to avoid breach of confidentiality.

6.2. The service location is considered with regard to public transportation and accessibility.

6.3. Posters and other material informing clients about substance use and co-occurring disorders take into account the reading and skill levels of clients. Any/all signs, brochures, and pamphlets are to be more positively reflective; for example: "Unattended children will be ..." to "We love children, but..."

## 7. WELCOMING IN TECHNOLOGY

7.1. The phone access system is easy to access – user friendly. All calls are seamless, especially when transferring to another extension.

7.2. The computer system is accessible and resourceful (example: a mechanism is in place to reflect up-to-date information so the client does not have to start over).

## 8. PERFORMANCE INDICATORS

Providers are expected to include a provision requiring welcoming principles are implemented and maintained. Mid-South will monitor for implementation through performance indicators.

### References:

Office of Drug Control Policy (ODCP) Treatment Technical Advisory #05.