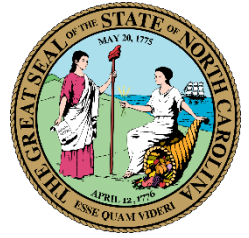


Transformation Transfer Initiative Final Report: North Carolina



Interview conducted on: June 8, 2021

Interviewee: Lisa DeCiantis, Human Services Consultant; Division of Mental Health, Developmental Disabilities and Substance Abuse Services; North Carolina Department of Health and Human Services

1. When did you launch your 2020 TTI, and how long has it been operational?

We did not get the money allocated out until after July because our fiscal year runs from July 1 through June 30. The project became operational, in terms of seeing the first individuals, in October. Before that, we worked with our two sites from April through August on preparing for data collection. During this time period, we focused on collecting data on who was enrolled and tried to make sure we did not have duplicates as far as people who were coming into the program.

2. How has COVID-19 impacted your project? What adaptive practices or efforts have aided you in overcoming these challenges?

COVID significantly impacted our project at the beginning of the pandemic. Especially in the summer months, we saw very few face-to-face appointments and many virtual appointments. The virtual appointments were challenging for much of the population because the technology was not available for them to follow up in some areas. We experienced difficulties in getting people enrolled, and there was a slower roll-out process than anticipated. At the beginning of the pandemic, besides the significant decrease in numbers of people being seen in our sites' facilities, there were also lower bed capacities, and people were afraid to go into the facilities.

We had anticipated that we would begin seeing people in July. However, with everyone trying to do as little as possible in person due to COVID, our roll-out slowed down significantly. As noted above, we did not start seeing people until October. In terms of incentives, we discussed different ways to provide these with virtual appointments, but our sites found it difficult to make the incentives happen.

3. How many individuals have participated in your TTI at time of this interview?

As of April 30, 89 participants were enrolled.

4. How much has been paid in incentives at time of this interview?

\$458.00 as of April 30.

5. *Have there been changes to your key partners and/or target population?*

There have been no changes.

6. *Do you plan to make incentives a part of your behavioral health system moving forward? If so, how will you achieve sustainability?*

Our state does not have that capability, but we would support our providers in doing so. One of our providers will not offer incentives at this time, but our other provider is looking into including incentives in its annual budget moving forward.

7. *Do you have any meaningful anecdotes regarding your programs that you can relay to us? (I.e., testimonials from participants, creative solutions)*

Our providers are offering incentives that their clients can choose from such as gift cards for book stores, movie tickets, Uber and lift rides, Walmart gift cards, pharmacy cards, gas cards, haircuts, crafting, phone card, movie rentals, sporting goods equipment, yoga classes, and Zumba classes.

One of our partners, Recovery International, has shared that they had one guest who expressed that these incentives have been most helpful. This particular individual does not drive, and she has limited resources. She also remarked that both the incentives and the ongoing conversations she has had with the peer staff have helped her with the continued motivation to work on her goals and move forward in her recovery process. The provider felt that this was a wonderful reminder that every interaction, however small, may be the highlight of a guest's week.

8. *Do you see the incentives working to help individuals make follow-up appointments?*

Both sites have seen increased motivation, especially with some of their clients who have not been historically engaged in follow up. They have heard that people enjoy the gift cards and that the incentives do give them motivation to continue with services.

9. *What has this federal investment given your state system that would not have happened without it?*

Our partner, RHA Health Services, has shared with us that this grant has allowed individuals who routinely miss aftercare to use appropriate services such as outpatient care and medication management. They are finding that their patients are using these more appropriate services instead of going to the emergency room.

Our other partner, Recovery International, has expressed to us that participating individuals have most definitely benefitted from this grant. Often, individuals facing substance abuse and other challenges who are desperate to make positive changes in their lives can feel overwhelmed. Peer support and incentives, respectively, have provided clarity for life planning and tangible rewards that motivate patients to take their self-care steps.

10. What will you do with any residual funding?

We will continue drawing down on the remaining funding to work with both of our sites to pay for peer support specialists and to pay for incentives.