

ClearPath Clinic

Medically Assisted Treatment & Recovery
A Program of the Center for Alcohol & Drug Treatment

Purpose

The purpose of the Accessibility Plan is to promote accessibility and remove barriers. The ClearPath Clinic addresses accessibility concerns to enhance the quality of life for those served by the Clinic; implement nondiscriminatory employment practices and meet legal and regulatory requirements; and to meet the expectations of stakeholders in the area of accessibility. This report and improvement plan is meant to enhance access to programs, services, facilities, and the community.

Assessment and Practices

In order to assess accessibility, the ClearPath Clinic examined its identification of barriers in the following areas:

- Architecture (physical)
- Environment
- Attitudes
- Finances
- Employment
- Communication
- Technology
- Transportation
- Community integration

Any identified barriers to service are addressed through one of the following internal committees:

- Safety Committee
- Quality Improvement Committee

ARCHITECTURAL BARRIERS

The ClearPath Clinic was built out to be compliant with the Americans with Disabilities Act (ADA). Patients park in the parking lot that has an accessible entrance to the facility. The clinic is located in the lower level of the facility and there are stairs to access the clinic. If a patient is not able to use the stairs, there is an elevator available for use in the main lobby. There is an accessible window at the front desk in the Clinic for those individuals in wheelchairs.

Architectural barriers are identified through the incident reporting process or through inspections conducted by the Safety Committee representatives. Alterations are made when possible or referral sources are identified. The stairway gets dirty during winter months due to sand, salt and snow being tracked in on patients' shoes. The stairway is monitored more closely and cleaned multiple times daily when reported to be dirty. When areas are wet or dirty safety signs/cones are posted in the area until it can be properly cleared/cleaned. In 2018, the goal was to have no accidents in the stairway area and this goal was met.

In 2018, as the ClearPath Clinic took on more patients. Not only did the total population of patients increase, but the Clinic also continues to have more patients being prescribed buprenorphine than the average MAT clinic. In 2018, the Clinic had over 50 patients who were prescribed buprenorphine, out of a total of 430 active patients. This is important as it takes longer to dose these patients, which in turn increases wait times to dose. The ClearPath Clinic has 5 dosing

stations. ClearPath is working with area doctors as well as CADT programs so patients can be prescribed Suboxone outside of the clinic setting.

ENVIRONMENTAL BARRIERS

Environmental barriers can be interpreted as any location or characteristic of the setting that compromises, hinders, or impedes service delivery and the benefits to be gained. Some service sites may be located in areas where the person served and/or personnel do not feel safe or feel that confidentiality may be risks. In addition to such external environmental barriers, internal barriers may include noise level, lack of soundproof counseling rooms, and highly trafficked areas used for service delivery. The Program Director will monitor and address these barriers throughout the year.

ClearPath Clinic is located in an area of the city that is accessible to the patients. The Clinic is located in the same building as CADT's Detoxification Unit and Men's Residential Program; an area in the community already familiar to many of the patients. The ClearPath Clinic is located on the bus line. There is a small parking lot available for patients in the upper lot of the building. There is a staff parking lot behind the building and there is parking for both staff and patients on the street. A parking space is left open by the back door entrance to the Clinic for patients with disabilities in need of quick access to services. The security guard monitors patients entering through the back door entrance.

Client confidentiality is a priority at the ClearPath Clinic. There are separate reception areas and locked medical records office for the Clinic. If a patient needs to use the elevator to access the Clinic, he/she needs to go through the lobby area that serves the Detoxification unit and Men's Residential Program. The reception area is secure and staffed at all times. In 2018, doors were added to the two newer dosing windows to help ensure patient confidentiality.

Most counselors have a private office. There are a few shared counselor offices and counselors ensure and arrange for confidentiality of patients by scheduling alternating client appointments. Counselors can utilize group rooms or other private office areas to meet with patients during times when clinical sessions are occurring with patients. Due to limited space and increasing client population, the Clinic will continue to evaluate and make adjustments to the space as needed throughout 2019, and further evaluate what an effective patient capacity level is given space and staffing limitations.

In 2018 ClearPath Clinic employed their own trained security guards. Having guards as part of the staff, rather than contracted through another agency, helped improve communication amongst staff. The security guards monitor both the internal areas of the facility and the grounds surrounding the facility during hours of operation.

ATTITUDINAL BARRIERS

Attitudinal barriers may include the terminology and language that the Clinic uses in its literature or when communicating with patients, other stakeholders, and the public; how patients are viewed and treated by the Clinic, their families and the community; whether or not patient input is solicited and used; and whether or not the eligibility criteria of the Clinic screens out specific individuals or groups of people.

All promotional material and/or policies and procedures are reviewed on an ongoing basis by management staff to ensure that bias or potentially offensive language is not present. Additionally, management staff are involved in community initiatives and help to educate other professionals and community members.

Mandatory annual training is provided to all staff members that addresses sensitivity to cultural differences. Medication Assisted Treatment trainings will continue to be offered during 2019. The

Program Director, COO and CEO complete community outreach contact on a monthly basis and this will continue on at least a monthly basis throughout 2019. In 2018, the CEO continued to attend meetings with Essentia Health system to develop principles and a care model for patients on long-term opioid medication who are showing signs or symptoms of an opioid use disorder. The CEO also sits on the system-wide Opioid Oversight Committee to work on implementing a consistent policy for primary care physicians which include access to Suboxone. The ClearPath Clinic is proposed as the hub in a hub-and-spoke model to provide primary care physicians with consultation and problem-solving with their patients. In addition, CADT/ClearPath is involved in a collaborative grants with St. Louis County through SAMHSA. This proposal helped to fund programs to expand MAT services within the community. Numerous community presentations were made by CADT staff in 2018.

The ClearPath Clinic conducts patient satisfaction surveys with each patient upon admission and then every 6 months following admission to the program. Responses to the survey are reviewed by the Quality Improvement Committee on a quarterly basis. Goals and data regarding the Patient Satisfaction Surveys are included in the performance improvement plan. ClearPath's goal remains to maintain a 90% favorable level of patient satisfaction and complaint resolution.

FINANCIAL BARRIERS

The ClearPath Clinic will strive to maintain sufficient funding for the program. Staff and board members of the ClearPath Clinic understand the importance of finances and the direct impact that these finances have on agency personnel, individuals being served, and the community at large. Leadership at the ClearPath Clinic is active in advocating not only at local levels but also at legislative levels for funding increases. ClearPath has a goal to be at a census of 500 patients; however staffing needs in the area over the past few years have made it difficult to reach that goal. ClearPath has a goal to reach and maintain a "break even" point financially in 2018. This requires retaining qualified staff in all job roles which has been very challenging in 2018. Before allocated expenses, ClearPath achieved the break-even point YTD through October 2018 for all months except March and October. After allocated expenses, ClearPath achieved the break-even point YTD through October 2018 in only three (3) of ten months: February, May and July.

The ClearPath Clinic is funded through a per diem rate established by the state of Minnesota and adopted by most health plans for both state sponsored (Medicaid) and commercial products. This rate has been below our "break even" cost at the original design capacity (400 patients). CADT has utilized margins generated by the other programs and services it offers to maintain the operation of the Clinic, while simultaneously working to recruit staff and remodel the Clinic. Demand for services continues to exceed the design capacity, so the market can support this expansion.

A current proposal by the Minnesota Department of Human Services would "unbundle" the per diem rate to allow for separate billing of psychosocial counseling services, depending on the individual level of care. This still remains under consideration at the state level in 2019. This would enhance the revenue stream and result in a sustainable clinic operation.

The ClearPath Clinic seeks to reduce and/or eliminate financial constraints that may restrict the ability of all eligible patients to access any services consistent with their needs and preferences.

Intake staff works closely with financial staff to determine a patient's funding source prior to the start of treatment. Additionally, intake staff works with potential patients offering possible alternative solutions to explore when a patient is having difficulty obtaining funding for treatment.

EMPLOYMENT BARRIERS

The ClearPath Clinic recognizes that the Americans with Disabilities Act (ADA) and its policies prohibit discrimination in all employment practices, including job application procedures, hiring, firing, advancement, compensation, training, and other terms, conditions and privileges of employment. It applies to recruitment, advertising, tenure, layoff, leave, fringe benefits, and all other employment-related activities. The Management Team reviews policies at least annually and updates policies as needed.

The employee's direct supervisor may accommodate a request from an employee for reasonable accommodations to address any disability issues the employee may have. All requests for reasonable accommodations are handled on a case-by-case basis.

All open positions are posted at each CADT facility and on several websites on the Internet, including online employment websites. In 2018, Center for Alcohol and Drug Treatment implemented a recruitment referral program as well as a sign on bonus which helped to attract potential recruits. Job applications have been modified to ensure they are culturally appropriate and easy to complete. Staff retention rates decreased from the previous year, likely due to continued workforce issues.

There is competition in the area for medical staff, as there are large hospitals that are able to offer higher wages. The clinic hires LPN's as well as RN's as needed to help keep staffing at functional levels. Additionally, there is a shortage of qualified clinical staff in the geographical area and the agency is looking at creative ways to fill this need while at the same time meeting regulatory requirements. In 2019, the ClearPath Clinic will continue to explore additional recruiting options as the clinic capacity expands and plans to be fully staffed throughout 2019.

COMMUNICATION BARRIERS

Communication barriers include the absence of telecommunication devices for the deaf (TDD) and the absence of materials in a language or format that is understood by the patient. The ClearPath Clinic currently does not have a TDD. ASL interpreters are available through subcontract. The ClearPath Clinic offers an accessible, user-friendly website that makes it possible to share information about the agency and its programs and services.

Arrangements for foreign language translators are made on an as needed basis.

Any patient that displays learning disabilities will be further evaluated and accommodations will be made to meet the needs of the patient on a case-by-case basis, as need arises.

Staff communication is facilitated through regular meetings, email and in person. A staff meeting schedule was in place for 2018 and minutes are kept for each meeting and shared with all staff. A required reading program to better help educate staff on policies and procedures and this will continue in 2019. Additional Executive and clinic management meetings are held on an as needed basis to help clarify policy and procedure as well as to develop better communication between disciplines as well as improve teamwork.

TECHNOLOGY BARRIERS

Technology barriers include the evolving technology, the upkeep of equipment, assistive technology, and issues more specific to the populations served. CADT/ClearPath has implemented monthly meetings with the agency subcontracted for IT services, CW Technology, in an effort to address any technology barriers as quickly as possible. An IT staff member from CW technology is on site at one of the CADT programs every other week to address any technology issues in person. In addition, CW Technology IT remote support and Methasoft remote support is available to all staff by phone.

TRANSPORTATION BARRIERS

Transportation barriers include persons being unable to reach service locations or being able to participate in the full range of services, supports, or activities offered. The ClearPath Clinic staff attempts to promote natural supports in meeting transportation needs as well. The Clinic maintains vehicles that are shared with CADT. Counselors work with patients on solutions to any transportation barriers. In cases where solutions to transportation outside of the clinic cannot be arranged for important appointments, patients may request to see if transportation is able to be arranged through ClearPath. The Clinic is located on an established bus line.

Patient Input

Patent satisfaction surveys are given to patients to fill out at time of intake and again at 6 month intervals of their treatment. Patients consistently complete the surveys and often times offer comments and feedback. The survey results are reviewed on a quarterly basis and patient comments and feedback are addressed.

Patients are advised at the time of intake of the process of filing complaints/grievances. All documented complaints/grievances will be handled and resolved as expediently and efficiently as possible to guarantee the patient is satisfied with the resolution and to correct any possible issues in accordance with the ClearPath Clinic's Grievance Policy (112). Any trends are noted, reviewed by the Quality Improvement Committee, and steps are taken to rectify any problems. Material is also available for patients to submit confidential comments.

A Patient Advisory group meeting is offered monthly and more patients have been attending this group over the past year. This is an opportunity for patients to share their concerns and ideas with staff. Feedback from patients will be provided to the Quality Improvement Committee and ClearPath staff to address the legitimate concerns of patients. ClearPath will continue to work on solutions to encourage patients to sign up, attend and actively participate in this group during 2019. This goal is also included in the performance improvement plan.

Reasonable Accommodation

The ClearPath Clinic subcontracts with agencies and/or individuals to provide necessary specialized services for persons who cannot be accommodated at internal facilities (i.e. dually diagnosed patients – mental illness & developmental disability; patients who need “specialty services – sexual problems or eating disorders; or deaf adults and children in need of psychiatric services).

Leadership and Responsibilities

The Executive Team at the ClearPath Clinic will be the entity responsible for the review of the Accessibility Plan. The Program Director will be in charge of the oversight of the Accessibility Plan and task management. The status of the plan will be reviewed annually. The Executive Team is responsible for prioritizing and reviewing the accessibility plan as well as the requests for reasonable accommodations. The Executive Team will evaluate and carefully consider the merits of all requests for accommodation to determine whether any remedial actions are appropriate. All requests will be identified, reviewed, decided upon, and documented. When an agreement has been reached to provide the accommodation, the steps to accommodation may be part of the person's plan. When an accommodation cannot be made, the ClearPath Clinic will demonstrate a referral system that assists the person served, personnel or other stakeholders in the use of other resources that are accessible. Processes can be different for requests from persons served versus those made by staff personnel.

Communication of the Accessibility Plan

The ClearPath Clinic will create an annual report in writing. This report will include progress made in the removal of identified barriers and areas needing improvement. Copies of the Accessibility Plan

will be made available upon request to patients, employees, stakeholders, and the public. Alternative formats will be available upon request. The Accessibility Plan will be posted to the ClearPath Clinic website, the plan will be reviewed with staff and copies provided to patients and stakeholders via posting in the Clinic and website by February 2019.

Summary

The ClearPath Clinic is active in its attempts to ensure that barriers to service are either nonexistent or minimal through continued self-inspection of facilities, monitoring of annual work plans, and attention to complaints, potential or real barriers can be identified and avoided or mitigated. All barriers noted above are evaluated throughout the year and barriers are responded to as they arise. This plan will be reviewed by the Executive Team in January 2019, and will be updated at that time.

Reviewed & Revised

July 2016

January 2017

January 2018

January 2019