

1	General Questions	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Rating	N/A
a)	The objectives for the DUI MAT project were clear and communicated effectively.	1	1	9	43	48	4.3	0
b)	The CADTP DUI MAT project leaders provided the training, resources, and support we needed to implement DUI MAT at our location.	1	1	8	29	62	4.5	1
c)	The CADTP DUI MAT project leaders were easily accessible and available when I needed help.	0	0	11	26	63	4.5	2
d)	I am clear on my role in the project.	0	2	9	34	57	4.4	0
e)	DUI MAT is a good addition to the services we offer at our DUI Program.	1	1	7	26	66	4.5	1
f)	I feel that all of our DUI Program clients benefited from the DUI MAT project.	1	8	15	27	49	4.2	4
g)	I feel that the clients who enrolled in the DUI MAT project benefited from the project.	0	1	16	22	55	4.4	8
h)	I think the DUI MAT project is a good use of DHCS and SAMHSA resources in the effort to fight the Opioid crisis.	1	0	8	31	54	4.5	2
i)	If possible, I would participate in another project like this.	0	0	17	29	53	4.4	3
Category Totals		5	14	100	267	507	4.4	21

**Comments:**

- 1 it is a great structure to ensure program compliance with title 9 regarding referral and provides real format for DUI counselors who may not be fully aware of Tx or other services available.
- 2 WE did not have a local AGIS office which left us handicapped. Most of our county was gearing up to provide services in 2020 while we were seeking services in 2019.
- 3 This was a missing link for us and we have a strong MAT program within our treatment system. It also provided the necessary stigma reduction for the DUI counseling staff and clients.
- 4 I think that the county and other treatment providers may have originally been supportive until they realized the effort and expense to participate were more than they had anticipated. COVID has had such a negative impact on client's ability to be actively engaged, I would not take on another project like this in the current pandemic environment.
- 5 Not every person exposed to the information and/or services availed themselves of DUI MAT info/services, but those that DID benefited GREATLY! And the 'planting of seeds' will likely benefit countless others down the road.
- 6 I think the clients that have benefited the most from DUI MAT are the clients who have had a history of treatment exposure or recovery and have a taste for sobriety.
- 7 The DUI MAT project has help us look at Poly-substance use and how to address it with the participants.
- 8 We received 2 grants for DUI MAT services. We were proud to be a part of this pilot project.
- 9 While the goals are clear, the name appears to be unclear, scary and a deterrent for potential clients.
- 10 Most of my client have problems with alcohol and no with alcohol so when I we mentioned either client is participating in different rehab project of they said no having problems with drugs.
- 11 I ONLY WISH THAT THERE WAS MORE RESOURCES FOR THOSE WHO ARE UNINSURED AND DO NOT QUALIFY FOR MEDI-CAL.
- 12 Train staff on how to implement the Dui Mat questioner and what entails program participation. It is a positive program with many benefits. That with proper communication in regards to giving clients full information on what the program is for then more clients would probably participate. Overall the program was beyond helpful and with great intentions. Very well organized. Just would have liked to have the case managers trained on how to relay that information over to clients.
- 13 HAVING ADDITIONAL INFORMATION AND PROGRAMS FOR PEOPLE IN NEED IS ALWAYS A GREAT THING, PEOPLE JUST NEED TO "WANT TO BE HELPED".
- 14 I believe this has been a very good start to something that can potentially save thousands of lives.
- 15 Out of the 4 clients who showed an initial interest none followed through and 1 or 2 indicated they already had so much they were trying to accomplish with the DUI program and having no license that they felt like it was more than they could do at the time.
- 16 I enjoyed working with the at risk clients who were open to addressing their opioid or polysub addiction. To see the hope in their eyes and to witness the change in their lives makes what I do productive because I can see the rewards!
- 17 I have enjoyed working in our DUI MAT program. Working with people with substance use disorder for some time now you don't see too many people get together to help this population. I feel good for the opportunity and for being able to belong in such program. I will continue to reach out and do my part.
- 18 The DUI MAT Project has been a god send for our clients that needed this service, and will be for future clients. These additional service has not on helped the clients that participated, it also help educate our other client. I have had clients call me and ask for help for others that are not in our program. I was able to link them to services in our community.

- 19 Most definitely would participate in the next DUI MAT project.
- 20 I think this information was valuable to all DUI clients. Even if they do not have opioid experience or addiction, they may know someone who can benefit from the information and resources supplied.
- 21 Very good project for DUI Clients to help identify other areas of need besides alcohol abuse. This gave our program more visibility in our community to different programs and meetings we had not previously been invited to meet with.
- 22 This has been a nice opportunity to work with those that need more than just dui services. The Mat project is a nice addition to our services.
- 23 While I was uncertain of the value of this project at first, I am now a strong supporter. I think the timing with virus sheltering was a stroke of luck, RE: being able to connect with clients via Zoom.
- 24 While we had a limited number of participants enroll in the MAT project, more than 1300 participants have been screened and educated regarding MAT since the grant's inception. The MAT project integration sends a strong message to providers and participants alike that MAT may be a necessary treatment component and that treatment coordination along the continuum is a best practice.

2	Case Management Framework	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Rating	N/A
a)	I received adequate training on the case management framework.	0	1	12	32	47	4.4	10
b)	The case management framework helped keep client information organized and accessible.	0	0	9	37	46	4.4	10
c)	The case management forms provided a good system for DUI MAT client documentation.	0	0	13	33	46	4.4	10
d)	The case management forms were easily accessible through the project portal.	0	1	14	24	49	4.4	14
Category Totals		0	2	48	126	188	4.4	68

Comments:

- 1 With a lengthy background with DHCS, MediCal, I loved how these were considerably more usable and not made unnecessarily complicated/difficult.
- 2 It was hard to get other agencies to work with us and return phone calls. AEGIS who was to be our hub was hard to connect with.
- 3 The entire 'case management framework' was a brilliant idea, and showed the power of Case Management when it comes to helping ANY person affected by SUD to achieve goals. The forms were accessible and of good quality, the "portal 2.0" made them MUCH EASIER to find and utilize.
- 4 I personally had trouble accessing the case management forms through the project portal. Receiving these through email was more accessible.
- 5 It was put together very well. Easy to follow.
- 6 I felt the guide was clear on the order of documents.
- 7 Training was excellent. All the forms made sense and are helpful while managing the case.
- 8 Working with this population is always a challenge but I feel good about all the things we achieved as a group.
- 9 Having to do two progress notes, one electronic for our internal system and one by hand for project for time consuming.
- 10 The portal has been a great benefit.
- 11 Information was clear and concise. Process to follow was detailed with good documentation.
- 12 Everything is easily accessible and support is just a phone call away.
- 13 One concern is that our program already uses an electronic documentation system, and unfortunately because of COVID-19, we were unable to program the forms into our electronic system, so we duplicated efforts by hand writing forms.
- 14 Need better training and the same forms altogether.

3	Identification of Unmet/Undiagnosed Polysubstance Abuse	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Rating	N/A
a)	I received adequate training on using screening and assessments as a tool to help clients receive services through the DUI MAT project.	0	3	7	37	44	4.3	11
b)	The DAST prescreen was the right tool to determine if someone should move to a 2nd level assessment.	0	1	11	44	38	4.3	8
c)	The ASAM based assessment is the right tool for a 2nd level assessment.	0	0	19	31	39	4.2	13
d)	We had access to the ASAM based assessment and the results for all of our DUI MAT clients.	0	2	19	26	36	4.2	19
Category Totals		0	6	56	138	157	4.2	51

Comments:

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- 1 DAST may have been the best for simplicity and having multiple agencies using same tool, feel almost all others better. ASAM is the most common tool we use, and we are very comfortable with it. Recently we use a DHCS approved version that also satisfies BioPsychPhysical criteria to determine medical necessity as well. Great tool, but real experience and training a must for accurate/valid interpretation.
- 2 This was another strength of this project to standardize the DAST as the screening tool across DUI programs.
- 3 We live in a County that was changing SUD assessments to ASAM based RIGHT when this project started, and we were involved in the development of a specific version for this project. The Multidimensional risk based assessment seems to dovetail nicely with the relatively 'harm reduction'/in the spirit of Motivational Interviewing' based approach of this project.
- 4 The training provided by the DUI MAT team & LAC SAPC was excellent.
- 5 SOME OF THE ASAM ASSESSMENTS WERE DIFFICULT TO RETRIEVE FROM SOME PROVIDERS.
- 6 Gaining access to the 2nd level assessments (most done through the County and one at a pain management clinic) was a challenge.
- 7 I am unaware if our clients ever actually took the ASAM because I could not get legitimate confirmation.
- 8 All information given to me and others was very helpful and easy to understand.
- 9 These are great assessment tools. The ASAM helped clients identify other areas of their lives that they needed help with.
- 10 DAST prescreen was very easy to use. The ASAM was thorough.
- 11 Our program utilizes the DAST-10 in our own assessment, which incorporates recommendations based on ASAM guidelines.

4	Where did DUI MAT Client receive the 2nd Level Assessment, the ASAM?	
a)	In house	50
b)	The County of another government agency	16
c)	A private provider	24
d)	Other	5
e)	N/A	23

Comments

- 1 County not available Hub opened up 7/1/2020
- 2 Doing the ASAM triage took in house helped identify the level of care needed to meet the clients specific needs.
- 3 I am aware of 2nd level assessments despite not being involved and know that our point person has worked very hard to develop the resources and referrals.
- 4 I am fortunate to work here and be able to work with people and do the ASAM at this facility.

5	Does your County have a Hub & Spoke	
a)	Yes	66.6%
b)	No	33.3%

6	Treatment Providers	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Rating	N/A
a)	It was easy to make connections with treatment providers for the purpose of this project.	1	9	27	28	21	3.7	16
b)	DUI MAT clients are able to access appropriate treatment through the DUI MAT program with the resources available in our community.	0	5	21	38	29	4.0	9
c)	We have the right resources and variety of treatment providers in the community.	1	5	19	39	31	4.0	7
d)	were provided additional support in making connections with treatment providers when we needed it.	0	1	18	30	36	4.2	17
Category Totals		2	20	85	135	117	4.0	49

Comments:

- 1 Our agency provides services for SUDs and most associated issues in house.
- 2 It has been very hard to get clients hooked up in other services.
- 3 It will take a while for the DUI clients to trust the referral system and to realize what a benefit this is to their available services at such an early intervention time point.
- 4 This was a weak area in both of our counties. Staff spent an inordinate amount of time trying to get clients connected with treatment.
- 5 If another round of funding was available, it would be good to see a portion set aside to secure contracts with residential treatment providers to ensure bed availability for DUI MAT clients who may need them.
- 6 Accessing the treatment providers was the hardest part of the project. But both the DUI MAT team & LAC SAP provided excellent support.
- 7 Referrals and resources are always low and in demand when a client needs same day services. The process of waiting for addiction services is real and necessary, but an open "go to" would be so incredibly beneficial.

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- 8 When clients come here, we always remind them if anybody wants any additional help we are willing to help also group leader offered them at the group time session but no results.
- 9 Services through Butte County Behavioral Health are available and very good, and we have 2 MAT clinics. In patient services are scarce, for those who need it.
- 10 ORANGE COUNTY DIDN'T HAVE A LOT OF RESOURCES THAT TOOK MEDI-CAL.
- 11 I had some difficulty getting info from the county but finally did receive their ROI. Since none of my clients followed up with me in the MAT Project it is difficult to say if we have the right resources.
- 12 We were able to connect with other providers in our Valley and we all had a common goal. (assist people with an Opioid disorder)
- 13 My calls were not returned from HUB after program closures. A MAT participant expressed frustration with HUB regarding not returning calls and hearing different information from different people at HUB.
- 14 Sometimes there were problems with providers requiring client to change them to their medical provider. Clients were not happy with this because they had been with the doctors for a long time. We were able to overcome this.
- 15 Limited treatment resources available in the county where MAT was approved.
- 16 The county IMAT meetings made it easier to work with MAT Program resources.
- 17 Initially Aegis was easier than the County.
- 18 Despite attempts to facilitate coordination of care, some MAT participants indicated that they continued having difficulty accessing services (i.e. HUB).
- 19 Aegis just opened up mid-July 2020. It was difficult to get resources because of this.
- 20 Per our program's experience, some treatment providers were easy to connect with, and follow up with others was more challenging.

7	Select the types of treatment providers readily available for DUI MAT clients in your area.	
a)	Outpatient	95.0%
b)	Intensive Outpatient	72.5%
c)	Residential	80.3%
d)	OTP/MAT	68.6%
e)	Withdrawl Management	53.9%
f)	Urgent/Crisis	53.9%

8	Touch Base Program	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Rating	N/A
a)	The Touch Base Program was a valuable resource throughout the project.	0	0	15	32	38	4.3	17
b)	I was able to get support from the Project Liaison when I needed it.	0	0	17	16	50	4.4	19
c)	The Site Visits were helpful and informative.	0	0	15	21	46	4.4	20
d)	The onsite CEU trainings were a valuable addition to the Site Visit.	0	0	12	31	40	4.3	19
Category Totals		0	0	59	100	174	4.3	75

Comments:

- 1 Motivational Interviewing is mainstay within our agency, and training provided good support to this.
- 2 Michealine is wonderful!
- 3 I'm just not sure what the Touch Base Program all encompasses. Michealine Flower and the other DUITP staff were excellent, responsive, and
- 4 Michealine was AMAZING and the site visit was VERY positive and helpful. One of the best parts of a program that had many good parts.
- 5 The Project Liaison was extremely helpful and was always available for any question I or any other staff had. Site visits helped to establish best practices and
- 6 The Touch Base program & its implementation were outstanding.
- 7 I love the trainings I learned a lot in the webinar and all they are very explanatory and clear also they answer all the questions anybody had it.
- 8 Very thankful and loved the onsite CEU trainings! I think next round of DUI MAT 2.0 would be a great idea to do more trainings across the board with all providers.
- 9 COVID-19 closures prevented our on-site visit and CEU training. A virtual site visit has been scheduled at the time of this survey, and Michealine was a huge support and always available.
- 10 Continuous support through out the program!
- 11 Michealine was very helpful when I contacted her.
- 12 Appreciated the commitment of the Project Liaison for MAT, she was very helpful, informative and has a great work ethic.
- 13 Individualized visits and training were a great help. The webinars were helpful training tools as well but the individualized site visits helped tailor the training to our agency.
- 14 Since becoming part of this team I feel more confident and knowledgeable regarding opiates use and other substances.
- 15 This has been great to have someone come and help us make sure we were on track.
- 16 CADTP was very helpful, always available and very informative.
- 17 Awesome program with wonderful support.

9	Communication and Materials	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Rating	N/A
a)	The monthly training webinars were a good use of my time and provided information and resources to help deliver the DUI MAT program at my location.	0	0	9	34	51	4.4	8
b)	The client handouts were useful tools in communicating project information.	0	1	7	33	56	4.5	5
c)	The MAT Toolkits are a valuable resource for COUNSELORS.	0	2	8	30	57	4.5	5
4)	The MAT Toolkits are a valuable resource for CLIENTS.	0	1	10	30	53	4.4	8
5)	The monthly DUI MAT newsletter is a good project communication tool.	0	0	11	32	47	4.4	12
6)	Overall, the materials and resources provided helped to communicate and educate our clients on DUI MAT.	1	0	12	28	59	4.4	2
7)	When I need a document or resource, I am able to easily access it on the project portal.	0	1	12	31	42	4.3	16
8)	The DUI MAT website provided a professional representation of the project for the public.	0	1	10	29	53	4.4	9
9)	The DUI MAT secure project portal was a valuable resource tool throughout the project.	0	1	17	29	45	4.3	10
Category Total		1	7	96	276	463	4.4	75

Comments:

- 1 I had the weirdest challenges with the portal. Pretty sure it was me.
- 2 It would have been nice to have a different time slot as the counselors were not able to attend the live events.
- 3 Lots of excellent resources, especially in the beginning. We loved the Tool Kits! And all of the other graphics and educational materials. The project was always presented to the public and other stakeholders positively and with enthusiasm.
- 4 The flyers were top notch. Considering we were all figuring this thing out for the first time, the trainings were great- the trainers
- 5 Having access to all the materials in one place was a great and convenient tool to have during this project.
- 6 I had trouble personally accessing the project portal.
- 7 I receive beneficial information from our assigned point person.
- 8 Our corporate Office always they are update in any changes or if we need any documentation Sandy and Gloria are helping us anytime we have any questions.
- 9 Well organized project. More training for how to relay the message on to the clients that could be potential mat recipients.
- 10 Loved the guest speakers.
- 11 The MAT program allowed for us to be able to create a toolkit for each of our counselors that has valuable information, without the extra funding we would not have the resources to do this.
- 12 I did not use the project portal very much. I didn't find it very useful to my day to day work on the project and it seemed like another website to have to log into and poke around. I have to do that for my other duties so adding another one on top of that didn't seem beneficial to me even though the site was well organized. I prefer to have important documents emailed to me. It is nice to know they are easily accessible though should I not be able to find an email.
- 13 Yes indeed I found the materials very useful and helpful in working with OUD population.
- 14 The MAT Toolkits, and the project portal are invaluable.
- 15 The MAT material was very professional, valuable for the clients and the staff. Project staff were readily available to help with whatever was needed or requested.

10	Data Collection and Reporting	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Rating	N/A
a)	The procedures for data collection and reporting were clear and easy to understand.	0	1	14	37	33	4.2	17
b)	The data elements are good measurements for this project.	0	1	19	35	31	4.1	16
c)	The data collection portal was easy to access and use.	0	0	15	28	28	4.2	31
d)	I was able to easily resolve data issues, if necessary.	0	0	15	28	26	4.2	33
e)	I regularly saw the compiled data in graphs and presentations.	1	0	14	29	31	4.2	27
Category Total		1	2	77	157	149	4.2	124

Comments:

- 1 Again, i had difficulty accessing portal for data entry almost every month, and again, pretty sure it was me. Always got helpful and cheerful support.
- 2 AT times it got confusing.
- 3 In the beginning of grants, there are always data refinements that are needed, so this was not unexpected. Each of the revisions seemed to make the data
- 4 I really liked the revised main datasheet Janice came up with.

- 5 Janice was a huge support and always available for questions.
- 6 After the first couple of times, I was able to get the process for data collection and reporting. Very easy.
- 7 Data presentations during meetings were helpful.
- 8 Procedures were clearly defined.
- 9 Data report portal was not easily accessible, had to log out and log back in to access it each time.
- 10 I became part of the MAT program months after it started so I was a little lost at times on how to send the data.

11	Quarterly Report	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Rating	N/A
a)	The instructions for the quarterly report were clear and the template was easy to use.	0	0	17	17	27	4.2	41
b)	I had adequate time to complete the report.	0	0	16	13	32	4.3	41
Category Total		0	0	33	30	59	4.2	

Comments:

- 1 Once I figured the parameters I got it.
- 2 The template was very helpful with some standard language. I think it could have been explained more in the beginning that you really wanted us to customize the language, rather than sticking solely to the template language.
- 3 The 'deiverables' schedule and the "Scope of Work" documents provided pretty clear expectations of exactly what we would be asked to provide on the Quarterly Reports. The only improvement i think i would make is that I would have the box where we type the answers to the questions on the Quarterly report EXPAND to fit the type in (with a limit of characters you can enter maybe?) instead of SHRINKING the type to fit the box. OTHER than that, it was a great system.
- 4 I had full responsibility for the quarterly report for our 2 grants. Preparing this report was a good review of activity & accomplishments of the preceding quarter.
- 5 Well organized.

12	Grant Funds	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Rating	N/A
a)	The budgeting process was easy to understand.	0	0	15	18	13	4.0	56
b)	We were able to closely follow the budget developed at the start of the project.	1	1	16	18	11	3.8	55
c)	I am clear on what expenses are chargeable to grant funds.	0	1	17	17	16	3.9	51
d)	The invoicing process was clear and easy to follow.	0	0	14	15	17	4.1	56
e)	The invoicing process was clear and We received our quarterly payments within 60-days of submitting the invoice.easy to follow.	0	0	14	10	22	4.2	56
Category Total		1	2	76	78	79	4.0	

Comments:

- 1 We had several adjustments that were needed.
- 2 Of course, the COVID changed items that the budget could be used for, since in-person services were more difficult. I think some more creativity could have been helpful once the COVID was a real long-term issue. For example, rather than paper posters, how about some electronic materials to be used in Zoom presentations -- e.g. power point slides, backgrounds highlight MAT, etc.

13	The amount of grant funds for the DUI MAT project were		
a)	About right. We were able to follow the budget developed at the start of the project.	22	21.5%
b)	Too much. We had difficulty spending all the money.	6	5.8%
c)	Too little. We project that we will spend more than the allotted funds.	1	<1%
d)	N/A	73	71.5%

14	Is your DUI Program planning to continue the DUI MAT outreach and identification of OUD/Poly SUD including the case management framework for screening, referral and monitoring after the grant ends?		
a)	Yes	53	51.9%
b)	No	3	2.9%
c)	Maybe	46	45.0%

**Is your DUI Program planning to continue the DUI MAT project including the case management framework for screening referral and monitoring after the grant ends?**

I don't foresee any challenges other than the need to continue learning on our end and keeping the connections that this program has allowed us to make. I think we are in a much better place as a DUI Provider to make these identifications and

I at this i don't anticipate any challenges since the foundation has already be given to us.

The only challenges I anticipate is clients not being ready to get the help that they need.

The only thing that i think would be a challenge would be to fund any of the additional services or resources that were

The only challenge I think we would have would be making sure clients stay on track with treatment.

I believe everything could be a challenge but having the resources like we have in place now will make it easier.

I don't believe we would have any challenges this we have all the resource in place already.

I don't anticipate having any challenges since the framework has been laid out for us.

CADTP has laid out a good frame work/foundation for us to follow I don't anticipate any challenges

I don't anticipate any challenges coming up but if they do I know the resources and support team I need to get thru it.

At this time I would have any challenges.

Now that we have established this framework, we hope to continue using our training to help clients with possible OUD identification. Moreover, as we now understand the barriers in our county for OUD treatment, it is something we want to continue to do our part in finding and making those connections and exploring avenues to network these services

Challenges i anticipate would be clients signing up for project during this covid time.

Challenges will be keeping myself and staff engaged in the process without the additional training and reminders from the project staff. Being part of the project has made our agency accountable to meeting the deliverables. Without funding we will also not be able to focus on training as much due to the expense involved.

Funding to perform the extra extra steps for those participants who require additional assistance. Otherwise should be easy

Funding! We will continue to provide support, but without additional funding, we would not be able to keep a DUI MAT

Maybe indicates that we felt we already were in a large degree. We are especially close to our Tx, Therapy, and MAT teams.

We will likely adapt to degree of monitoring DUI Counselor referral.

Dedicated staffing without funding would be a challenge, especially at this time. I would like to see some of the same data collection over longitudinal time to see if the referrals really made a difference in the clients' lives. For example, preventing DUI recidivism. So I would like funding to continue evaluation efforts.

Having staffing available for the case manager piece of the program if there is no more grant funding.

We will still be able to use the resources that have been provided to us when we identify clients that are Opioid and

The challenge has always been getting clients connected in the community but even more so after the COVID-19 pandemic which made that challenge more difficult than it already was.

We are hoping to apply for the second round of funding for this project. COVID has really put a financial strain on the entire DUI program and we are having to be very mindful about how we are utilizing our resources.

We love to offer outside resources to all of our clients. I am hoping that we can implement an organization and effective way to continue MAT services with all staff on board.

We will continue with the ID and referral process but won't provide the ASAM or tracking

Challenge of getting clients to accept help.

Client need continued reminders and as providers we need more readily available resources.

The monitoring

Client need for services

It really depends on the DUI program manager and the CEO of our agency. I know I will be personally moving on from the MAT Grant to pursue other career aspirations.

I do not anticipate any new challenges.

We will discuss with the team and decide from there.

We will continue to identify OUD/Poly SUD use and provide referrals.

if we had it in some of the areas where we would get more clients, areas with wider resources

We may continue with the DAST pre-screen and provide MAT referrals to appropriate clients

Now that we have the feel of how it works it will be easier to run the DUI MAT Program. Some challenges will be the COVID-19. Clients are hesitant to come to the DUI Program.

None I think we have learned from the first project and the correct additions will be added or subtracted.

I am part of the decision, but hopefully will continue

Creating a budget that aligns better with spending the grant funds

We continue to provide outreach to our participants, to ensure all participants have the appropriate referrals. However, with regard to the ability to provide case management for those who may be in need of additional intensive case management, would be financially difficult without additional funding.

Time and budgetary constraints are a factor in how staff uses it's time. The grant allowed us the time to have staff outreach and present the program and options to clients.

It is all part of the work we do in identifying these issues.

I am curious if, in the future, the DUIP analysts will keep a hands off approach to DUIMAT records

I do intakes, Clients do not wish to talk yet. They call back later and talk to my co worker.

Hopefully have clients to participate.

The continuance of DUI MAT is decided by our corporate staff members.

its a decision made by corporate.

the challenges with covid 19.

It would be a great help for clients. Training required for personnel giving the questioner form.

This particular question, is the deciding factor of the Corporate office.

Some of the participants were not willing to participate. Information provided to them appeared to be unnecessary. It was often found that if the client is being told that a DAST questionnaire was voluntary, they'd show no interest in participating.

Yes, we will continue with the outreach activity but need more clarification from the DUI MAT team about this. I will follow

Im not sure if my company will continue with the DUI MAT after the grant ends.

We have not had the discussion on the possibility as of yet.

Resources

Overall program performance and participation.

Resources

How to convince client a bring them better opportunities to live clean and having better life style

The decision is not up to me, our corporate office will be making that call.

Client's participation.

I anticipate that everything will be better.

Getting clients to participate.

working with limited staff during closure of in person services and implementing Telehealth

The only foreseen challenges stem from service delivery changes secondary to COVID-19. We have moved to Telehealth and the transition has been a slower process than anticipated. However, many participants are expressing appreciation for Telehealth and are presenting as more openly communicative. Telehealth may be of benefit to those with severe SUDs

We will continue using our assessment at program orientation to identify this is need of referrals/follow-up services.

better training

We have clients that continue to need services and support and will be in our program after the official MAT program ends.

We plan to continue with those services

July 2020

I don't anticipate any roadblocks to continuing with the process' already in place.

Finding the missing link to getting participants engaged and interested in the project would move my decision to a yes.

Providing services remotely may interfere with consistent referral and support.

The amount of time spent to support this effort would exceed out fiscal resources. The counties and treatment providers do not seem motivated to work with clients.

We will continue to assess and monitor clients who present with a high risk for OUD/Poly SUD and refer them to local resources and treatment centers, potential challenges, like always, is withdrawal management or residential treatment

Getting staff to continue Monitoring, because it will no longer be a requirement.

THE USUAL CHALLENGES, INSURANCE.

Funds to support ongoing work needed for outreach, identification and monitoring.

Placement during Covid 19.

the severity of opioid crisis in our community.

Whether or not we receive a grant extension.

Not having the funding to continue.

My supervisor would make the final decision.

**What area of the project was the most challenging?**

**Comment**

The most challenging area, was the beginning implementation of the entire project and trying to figure out what regulations we had to abide by, understanding our role of being a Federal subcontractor. The early stages of just getting everything in place was a challenge but the assistance of Janice, Barbara and Michealine was so helpful!

for me the most challenging part was at the beginning of the project, just trying to figure out the steps, where to refer clients for ASAM and finding out the we didn't have a Hub & Spoke.

The most challenging part of the project for me was getting the clients to agree to participate in project.

Just to make sure that we have all the resources available to clients.

Getting clients to follow through with project.

The assessment at times was a bit challenging trying to determine what placement, if any, is needed for clients.

The most challenging area of the project that I dealt with was to get clients that needed the assistance to enroll into the

The only challenge is not having a HuB & Spoke in this county.

Having clients that needed the help not want it.

Trying to get clients involved

Clients that scored high on the dast screening did not want to do addition services.

Client participation.

Finding ways to improve our client engagement, and communicating to them in approachable ways to allow them to identify their readiness for further service was probably the most challenging, but it was a good challenge. Finding that our county was severely lacking in resources, and had almost zero knowledge of OUD treatment options, was the most disheartening and frustrating.

Introducing project to clients.

Making referrals for those uninsured or underinsured but did not qualify for medi-cal for some reason

Connecting PT to the right providers for MAT treatment

The initial start up was challenging. But once we got the hang if it, things ran smoothly.

Is always challenging getting people to open up and to trust others. I will say that in my team we made a lot of progress and we touched people with this program that otherwise most likely would of not receive the information and help for

Finding ways in the beginning to convince Clients to take the DAST and be honest with it. We figured out it was better to "plant seeds" and save the DASTS for 'teachable moments' ... at least outside of the intake process.

Internal. gathering data from multiple sites. The project itself was set up beautifully.

Duplicative paper records. Maybe the development of a simple access database would have helped or maybe fillable PDF forms. COVID, of course, has been challenging all along. However, I must say without the CADTP Project, we would have struggled during the COVID -- without CADTP and their picking up the banner for Zoom and leading out on the training for DUI staff. This was so helpful and supportive. CADTP really had the provider's backs, in terms of training and resources (ToolKits, maps, posters, etc) that were specific to DUI Program services.

The COVID crisis in the last 6 months of the project was challenging.

Data for me.

The most challenging area of the project was getting the clients to buy into getting involved. I would call them once a week even if they did not have a second level assessment. I did this because they identified as an Opioid and or a Poly substance

Getting the client into detox or treatment was the most challenging. Another challenge was the road blocks and dead ends we would run into with clients who had private insurance and their co pay or out of pocket expense was way more than they

Managing the program staff and ensuring that they were following correct procedures. Trying to motivate and engage clients who were good candidates for the program. Having treatment beds available in the county (has only worsened with COVID)

Hub was not open till July 2020. I joined months after this program was implemented. And the coronavirus.

Getting those in need to agree they need/want to get clean.

Not having a methadone/bupe/viv clinic until a month ago or less.

Outreach. Getting clients who don't want to be in DUI program in the first place into a treatment program.

Engaging clients.

Data tracking.

Having to assist with developing the Hub and Spoke. There were no MAT programs in Hanford. The only MAT programs were 15-20 minutes away. Having zero MAT participants in the DUI MAT Program.

trying to get clients to want the project, clients were resistant.

Some clients appeared to be somewhat resistant, possibility skeptical of the process. We did explain everything in detail to

The most challenging was to have clients admit they have a problem. Most say they never used drugs however, being in the field for over 30 years, we know they do have an issue.

The project goal was to integrate the MAT program into DUI, however, when full integration happens it becomes difficult to separate the billing aspect. As an example, we added slides to our education and had all our educators discuss opioid addiction in more detail to all participants, but to get funding we would have to have a "MAT team person walk in and interrupt an education so we were not double dipping". I would like to see an integration project be allowed to actually be

The area I was involved with was getting the clients to follow through.

Having associates attend MAT webinars during work hours and finding ways to spend grant funds.

The most difficult part of this project was being able to spend the funds provided.

Gaining buy in from the clients to follow through on getting the second level assessment completed.

Getting past the stigma to talk about the program itself.

Getting people to open up.

We cover a large geographic region. There are definite regional differences in client willingness (example: Red Bluff is a small, conservative region. Before Covid 19, clients were resistant to discussing opioid use. The distancing with Zoom improved

Just getting started.

Clients in denial and don't want to make change.

identify clients who truly need additional help after they decline program.

Trying to get at risk clients to join MAT program.

Translating what the program was for to the clients.

This particular sight, did not have any participants.

Accessing the treatment providers was the most challenging area of the project.

Having clients agree to treatment. A little challenge finding a place for clients with no insurance and helping with the medical process due to Covid.

Getting clients to join the MAT project.

The second assessment, I also found the more you studied the process the easier it was to follow.

For the clients to commit.

Managing and collecting information for clients.

Having clients with all 10 questions answers yes and refusing to enrolled in DUI MAT and having as an answer no. Client always having as answer like enrolled or participating in different program or having other place to participate.

The most challenging area is reviewing the DAST survey with the client and having them acknowledge that they have a problem with opioids and accept the treatments that are available to help them.

I had no issues at all.

The most challenging was doing the ASAM.

FINDING A PROVIDER THAT MET THE NEEDS AND FINANCIALS OF THE CLIENT.

Getting clients to complete the Dast questions.

Being able to reach out to participants who went on LOAs and/or ceased attending services. Changes in contact information or no contact information.

The primary challenge was to provide service delivery in the midst of COVID-19. We initially did not have the infrastructure to immediately implement Telehealth service delivery. Developing the capacity required training, and obtaining requisite hardware and software. CADTP training and technical assistance during the transition to Telehealth was very helpful!

Sometimes follow up with clients who were on a Leave of Absence while in our MAT project was challenging (to receive phone calls back from participants).

Training

Dealing with clients with opioid use disorder and other poly substance disorders was challenging in the way that they did not follow through with services.

Limiting to polysubstance and opiates. Clients with alcohol addiction have medically assisted treatments that could be

Adjusting the budget after COVID-19 closures. While we have a good relationship with BCBH, it was challenging to actually get our hands on the 2nd level assessments.

Getting clients to accept extra help or admit if they needed extra help.

Getting clients to follow through or go to the referrals.

Getting the participants to commit to the MAT program.

Keeping participants engaged in the project.

Finding actual programs that available beds or payment of treatment. To include Detox, Outpatient, and residential.

Helping clients understand that DUI MAT is not only referring to medically assisted treatment although it is one of the components. Clients were deterred by the name, but upon further discussion understood that it is assistance.

With covid 19 meeting regular with client has it difficulty.

In my role it was difficult to budget for expenses at the beginning. We did not know how much time would be spent. As we progress, our budgeting skills improved but then COVID brought the program to a halt.

Early on there was difficulty connecting with our Hub and Spoke. I found that it was easier to reach out to local treatment providers and go that route. The only other barrier was residential treatment availability when the DUI MAT clients needed it.

I came in late so I would say set-up, just trying to catch up with everyone else. An then COVID. Just before Covid hit, we were getting into groups and Ed's to do DAST on existing clients.

OBTAINING SERVICES FOR PARTICIPANTS THAT DID NOT HAVE HEALTH INSURANCE AND DO NOT QUALIFY FOR MEDI-CAL AND CANT AFFORD HEALTH INSURANCE OR PRIVATE PAY. LONG PROCESS FOR MEDI-CAL APPROVALS. COUNTY FUNDED OUTPATIENT SERVICES WERE ALSO DIFFICULT TO OBTAIN. OUR HUB AND SPOKE RAN OUT OF FUNDING FOR MAT PRETTY EARLY

Finding out the shortage of services in our community.

Working and net-working with other providers.

Intakes

The way my supervisor explained it I had no challenges.

Trying to get clients to accept treatment.

Teaching the clients that this was a benefit to them and not another "punishment" of their DUI terms. Explaining to the clients that we were here to help guide them to the resources that we have in our community and then getting clients to accept those services without thinking there was a "catch."

I did very well with my portion of the project.

**What was most rewarding about the project?**

The most rewarding part of the project was seeing the outcome of our seeds. It took a very long time to actually have a client enter the MAT Project but when they did, the excitement and happiness in our staff was amazing. Although the entire project I would say was a success, them seeing that number being counted just helped them really see the positive outcome of the project.

Being able to help clients that really need the help, finding them services needed for them to get their life back on track.

The most rewarding part for me was seeing how the project could help a lot of people and seeing how it can change their

Seeing clients that needed the help ask for it.

Being able to give clients information to help them.

Seeing how clients received the information about the project and how they continued to ask questions even though they stated that they didn't need the help.

The most rewarding part for me was seeing that clients took in the information provided to them and continued to follow

Being able to see how many seeds were planted in clients.

Seeing how many lives are able to be helped thru a project like this.

Seeing our clients take the handouts that were provided.

Seeing clients accepting the help.

Client participation.

Seeing clients accept help and being able to provide that for them! AND working with Michealine:) She is empowering and has this chameleon-like ability to effectively connect with counselors and admins in a way that both can understand her language. I think we all learned an incredible amount from her and will carry that experience with us for a long time.

Having the resources available for clients to get the help they need.

Hearing success stories of those currently on MAT treatment. Knowing that we are saving lives in our community

Reduction of opioid use and deaths.

Learning about medication assisted treatment.

Working with the entire CADTP Team! And seeing the changes and improvements several of our DUI MAT clients made.

Client participation in the MAT program.

Really enjoyed interaction with the leads, Janet and Michaeline. The energy and commitment to really making this a realistic

Using a standardized (statewide) screening tool was so super important and more evidence-based for our DUI Program. July 2020

Seeing the numbers of clients that have been impacted by more than alcohol usage. Seeing clients actually taking advantage of the extra MAT and Treatment services available to them. Even though the clients may have stayed a short time in treatment or tried medications, it will help them in the long-term since we were planting the seed and showing them some real tools to help with the addictions, not just their DUI issue.

It was great to be able to provide clients with additional resources and support.

Helping our clients and seen a change in them.

The most rewarding part of the project is when the clients accept the additional help, and come out on the other side clean. I could really see the change in them. They learned the tools necessary for them to live with out the use of drug and alcohol. I ran into a client a few weeks back and he approached me and thanked me for helping him. This is what is about offering a little guidance in a clients life, and getting a bonus when they approach me in the community, just to tell me that they are still clean.

Seeing clients have a spark of hope in their eyes that they may be able to end their misery of addiction by getting help offered in a way that might not otherwise have been offered. Seeing clients complete their residential treatment and/or getting them connected with an outpatient treatment program to assist them with MAT services.

Watching the clients who did participate, get back on track, start the recovery process and start experiencing the many benefits of living clean. Watching my staff learn and grow through the process as well.

Educating clients and staff about the effectiveness and importance of MAT programs. Offering other resources to clients creating more ways for individuals seeking treatment to have success.

Seeing the counselors develop their screening and motivation skills

We had clients that admitted their addiction and successfully completed referred to programs. The reality is that people die from addiction and being able to help people live is huge. While Dui programs are beneficial most people treat them as mere court or DMV requirements, but being able to provide additional assistance for those that are having a questionable relationship with substances is so important. It changes lives.

Seeing clients get the help the need.

Help others to recover from disease of addiction.

I personally enjoyed delegating work and feeling like i'm in charge of something.

Engaging those that needed and wanted help.

Planting seeds of where clients can seek help for their SUD even after their DUI program ends.

Educating the DUI Program participants and Staff about the DUI MAT project. Reaching out to the County and other Treatment Providers to discuss the DUI MAT Project. Developing a thorough resource/referral binder.

Just to hear about the overall success of the project through out the areas

Seeing clients who responded positively to the information and materials provided. Some even seemed grateful.

Seeing a client complete the DUI MAT Program successfully. Seeing his progression while attending both the DUI and DUI

Getting to opportunity to enhance our entire program with a more in-depth focus on drug use-as well as alcohol. Getting to build stronger connections with local clinics for referrals. Added revenue for the work we were already doing-but this work was enhanced with more focus and purpose.

Seeing the clients follow through.

Incorporating MAT within DUI.

Being able to provide additional intensive case management to those participant, who qualify.

Ability and funds to network with other County Providers. Opportunity to move beyond DUI and allowing us to have a further impact in our community and give additional direct referral services to our clients.

Working with those who want some help.

Helping clients.

Our own grasp of and willingness to offer and deliver additional contact with the clients and their willingness to request help

All of it helping others

Is a good project for the clients and able to help clients.

Being able to offer additional help to clients in need.

Help clients understand that there is outside help.

The reward was seeing the client overcome adversity and addiction.

That programs are being developed to help with this crisis.

Knowing that at the DUI level of ones addiction there is help if one is do inclined.

The data that was given to staff in trainings was shared with participants and for them to know that this information is evidence based, it was impressive. I'm glad that we were given the opportunity to share data with them.

The most rewarding was knowing what an epidemic there is of opioid & polysubstance addiction in our communities & knowing that we were participating in a solution. I was filled with pride on being selected to participate in the effort.

CLIENTS GET HELP.

Entering a client into program, and finding out that they completed the program.

Helping people.

Physically Seeing clients get better and having a second cheerleader, if you will, for the same client.

Assist clients living in sober lifestyle.

Having the opportunity to offer a client to live better to have more opportunities or having better life style.

The most rewarding part is knowing our clients have taken a step towards recovery.

Clients that actually were interested in the DUI MAT project program.

Got good information from the webinars.

IT WAS REWARDING TO SEE THE CLIENT FINALLY ADMIT THEY NEEDED HELP AND TRY TO ENTER INTO THE MAT PROGRAM.

When clients complete program and sober up and make a change in their life style.

The participants. Being able to be a consistent support (even while not being primary counselor), working through frustrations about health care system, family issues, and their perceived lack of understanding within the community.

Watching the State-wide paradigm shift as to MAT as an important aspect of treatment that may be absolutely requisite for some participants as part of their recovery.

The appreciation from clients.

Providing additional services to clients who really needed it. Watching peoples lives get better and find freedom from

Seeing clients receive the help they need.

Working as a team to increase the identification and referral process for our at risk clients. It has provided us with the opportunity to take our referral process to the next level. The ability to provide additional counseling support and encouragement to our MAT clients. Collaborating with the CADTP team and other DUI providers on the project. Learning how to manage a grant was challenging, but very rewarding.

Getting clients the help they needed.

Helping people get the help that they need.

Giving clients that wanted the help resources to where they can get the help they needed from.

Getting a chance to meet with the clients and offer additional services.

To see some finish the program and be successful.

Clients Accepting to do the MAT project and actually getting help.

Being able to provide alternatives to participants.

Well the fact that we did touched people who maybe never would have gotten the help and information for treatment

Observing the lead counselor help clients find treatment.

Actually getting a client connected with appropriate resources. Having the funds come in when our other funding sources were reduced due to COVID. July 2020

Getting to observe clients from the first process to a successful completion; watching these clients come back to life and be able to move forward without the obstacles of substance use in their way. As well as, knowing that we have informed and educated thousands of clients about the various treatment options available to people struggling with OUD/Poly SUD.

Helping our 1 MAT Client. Knowing you planted seeds. The conversations it was able to help get started.

WITNESSING CLIENTS WHO DID NOT THINK THEY HAVE A PROBLEM WITH AOD USE, NOTICE THERE MIGHT BE A NEED TO TALK ABOUT IT WITH SOMEONE AN LOOK INTO IT.

Being able to save peoples lives.

Helping clients find other resources for their needs.

Having the client come to receive services for help.

The extra hours I received,

Educating clients about Opiate Epidemic.

Being one of a handful of DUI Programs in the State to be involved in this pilot project, helping people with SUD's and working with the staff at CADTP! Such a wonderful, caring and thoughtful group of people. It has been an honor to be a part of this.

The most rewarding aspect of the MAT project was being able to point clients in the right direction. Having valuable information in one area, toolkit and then walking our clients through the process to make sure that they would be successful.

Helping clients seek the treatment they needed.

**If you could change anything about any part of the project, what would it be?**

I would implement not just the monthly webinars, but make a monthly meeting/training with all programs more focused on counselors and letting them share their experiences, ideas, etc. The monthly meetings were excellent but I feel that something more counselor focused would be beneficial.

I don't think I have anything to change at least from the responsibilities I have.

Over all I liked the structure of the project.

I think the project was good.

Being able to have more case managing tools to assist clients with.

For it being the first time this project was introduced to DUIP it ran well.

There is nothing I would change about the program. I just think there is more that can be done, in orange county, in particular, and I think that was a barrier, because the support is minimal. I would like to have had the opportunity to participate in LA and understand the differences in treatment opportunities for OUD clients.

Have direct contact with providers.

I would like more assistance from medication reps in identifying vendors / medical providers.

Maybe make it permanent instead of temporary. On OUR end, we would change to have the DUI MAT Counselor/Screeners NOT also be a DUI Counselor responsible for groups and One on ones with DUI Clients.

DUI MAT might benefit from being separate from DUI. However be in the same location.

A short video to explain the MAT information would be helpful as another method to provide the clients with the information. Expanding the scope of the grant to allow for more options for engagement for clients that are on the fence

I would add MAT for the Alcoholics. I advise them to speak with their doctor about Vivitrol, and they come back to me stating that the doctor said no. Vivitrol is used for Opioid users, but it works for Alcoholics also.

I understand that the project was not designed for the Alcoholic. Alcohol is killing people also.

More onsite trainings about expectations or data collection would be more helpful

I cannot think of anything that I would change with the project. I think the issues we are experiencing right now are more with the DUI system as a whole.

I would of liked our Hub to have been open from the start. We lacked resources and a strong community support system. time frame. It seems we are just getting the hang of it and it's time to stop

Have me contact clients rather than another co-worker.

I would add referrals and change the name.

Longer treatment.

Allow for one SUD struggle so for instance allowing someone who just struggles with alcohol and not poly substances in the project.

We had some confusion regarding how to track data, but project staff were always available and willing to help.

I would change the location that we received the grant project in. We had zero participants in this County and I think we would have had DUI MAT participants in one of our other DUI locations.

Maybe for areas that have different locations have the option of providing the services to a particular participant in other areas.

Monthly (minimal) staff meetings to review the processes of the project in order to explore and implement any needed improvements.

There is very little to change. We now know how it works and what is expected. The first yoear is always a challenging one but now we have a clearer grasp of what is on the scope of work.

Being able to integrate the process into the DUI process and not have it separate for billing purposes. Being able to document the changes and integration as the deliverables.

The only change that I can see, is the amount of funding provided to each site.

The length of time given to spend on the project. I think 2 full years would be been a better timeframe.

To make services free for those in need.

I would have it continue beyond September 2020.

Project is organized and no change.

Participate and be more involved in this project for example having the opportunity to get more training.

I would add more tools for counselors.

Show personnel on how to potentially enroll the clients that may participate into the program.

This was a compiled project created by outstanding teamwork and dedication. I wouldn't change anything.

I think overall the project was well structured & organized. I would only recommend making the project portal most accessible to people like me who are technophobes.

It has been really helpful.

Maybe a little closer GAP between dui programs and their local treatment centers.

No changes at all just having this program for alcohol people because I consider is really good program.

I would not change anything about the project.

Nothing every thing was good.

TO MAKE IT EASILY AVAILABLE FOR ALL PEOPLE AT ALL TIMES. I HOPE THAT THIS PROGRAM WAS REFERRED OR ROLLED OUT TO INDIGENT, HOMELESS, THE ADDICTED WITH NOWHERE TO TURN TO BUT ARE NOT IN A DUI PROGRAM.

The data should also show people who come into the program already engaged in MAT treatment. Be able to utilize internal electronic progress notes vs. hand written progress notes.

Perhaps conducting a multiagency Strategic planning meeting (SWAT analysis) that includes HUB and Spoke providers that could facilitate addressing service coordination across the continuum of care.

Maybe have more outreach from Hubs to Spokes to foster collaboration/commmunication.

More resources for meth and cocaine users

I would probably try to find another platform to operate this project. A lot of Our DUI clients said they felt like they already had a lot on their plates and didn't feel like they had time to do more services while doing their DUI Program.

Make it affordable for people who don't have insurance or medi-cal.

I feel that the project was well thought out.

I don't know. I feel we made a lot of progress.

Spend more money on actual services in tretment.

More commitment from treatment providers and county to support the effort.

I would like to see the county contract with a couple residential treatment providers and secure some beds for DUI MAT clients. It's critical to be able to get a client who wants to get into treatment into a bed ASAP. Having to wait weeks for availability often causes the client to continue to go back to using substances and the desire to enter treatment wanes.

I cannot think of anything that I would change.

NOTHING I CAN THINK OF AT THIS POINT. I THINK EVERYTHING THE PROJECT DID IS WHAT WE HAVE BEEN DOING ALL ALONG. THE PROJECT WAS A GOOD WAY TO GET MORE PROVIDERS TO REALIZE HOW IMPORTANT IT IS TO REMEMBER DUIP IS TREATMENT AND HELPFUL FOR AOD TX PROVIDERS TO REALIZE THERE IS A NEED TO CONNECT WITH DUIP AS A RESOURCE FOR MEMBERS IN OUR COMMUNITY THAT STRUGGLE WITH MISUSE/ABUSE/ADDICTION AND EVEN MENTAL HEALTH.

Nothing, it is a very functional program.

Data management was easy. I have no suggestions.

Nothing. It's great the way it is.

Instead of quarterly invoicing and payments, I would recommend monthly invoicing and payments.

I believe the project is great the way it is now

**If we were to do another DUI MAT project, what are your suggestions for improving the project? (any area)**

**Comment**

Now we are ready to roll :) The learning process in the beginning took a lot of time but I feel like a 2.0 Project would now just be about perfecting any little pieces, but I have to say the CADTP team did an amazing job it is hard to say what there is to improve. I think just like my above comment- more trainings focused and geared directly to DUI Counselors would be truly beneficial. Even though we attended several trainings as did our counselors- DUI focused training would be amazing!

I would say to involve counselors more, have webinars that are made specifically for them.

Being able to have more time to introduce the project to clients.

Having more resources to share with clients

Nothing at this time i have enjoyed the project so far.

My only suggestion would be to add to the case managing framework.

I would maybe have to say the quarterly reports just not to have repeated information on it. Have enjoyed the project.

Everything has worked well. Thank you.

Having all staff more involved.

I would have liked to have had more opportunity to bring the different MAT providers (not just DUI) together within their counties. Our county wasn't helpful in that facilitation and because of the learning curve, ABC was really focused on client engagement, and I would like to dedicate more time and resources in treatment networking.

Having more time to assist clients with getting the help they need.

July 2020

It's hard to say since the project was interrupted by covid19. I think we could have had even more success with additional person trainings. Staff need constant reminders and trainings in how to present the project, overcome stigma, and overcome barriers/objects. Many participants expressed interest but when it came time to follow up on referrals they did not do so. I think additional training could help counselors overcome that.

Have direct contact person with providers.

One master flyer which is easy to read for potential consumers / participants of the project. Also maybe a more simple

Just use the experiences we all learned from THIS time to improve next time!

KEEP the same CADTP leadership team if possible! That's a huge part of why this worked.

Also, with the training and recommendations, we could have programs focus on the "planting seeds" and train them on when appropriate times to provide the DAST would be.

Also, i think with language, flyers, etc...

Make sure MAT info is INCLUDED... but make it less ABOUT MAT... let the client know HELP is available... then once we establish rapport, THEN we introduce MAT? Just a thought.

Focus on the DAST presented as an opportunity to make the first impression to all participant's. As an opportunity to use motivational interviewing an essential part of meeting a participate where there at. I would like to thank everyone that worked on the MAT Project it made a difference in my clients life and mine.

Begin to convert the project materials to electronic, that we could use and post online, use in Zoom classes, and/or help us with technical assistance, such as our own websites, newsletters, and other data that we can present to our own County stakeholders.

Continue the data collection for the long-term. See what happens to some of the client who do attend MAT -- do they do it for the long-term, or just short-term? Do they return in the future for treatment independent of DUI Program participation?

A short video to explain the MAT information would be helpful as another method to provide the clients with the information. Expanding the scope of the grant to allow for more options for engagement for clients that are on the fence about participating.

The Data part user friendly, I did like the change or update that was made.

The only thing that I can think of is having more site visits, to make sure we are in compliance.

Having the whole team or at least a selected few staff work as a team to handle and case manage getting participants connected, enrolled, and assisted with DUI/MAT services.

I cannot think of anything at this time. Michealine, Janice and Barbara have all been very accessible and excellent to work with.

Get the AGIS office open before the project not 4/5ths of the way through.

Focus on getting alcoholics to give librium a try for med assisted WD.

Further incorporate this for red flag clients through more information rather than just reminders from staff.

Longer treatment.

Possibly assess all that enroll in a DUI program, and determine eligibility.

No suggestions for improving. However, I want to thank the program staff. They were incredibly helpful, encouraging, and always available to answer any questions we had and to offer support. This was truly a great project, and I am so thankful that we were able to be a part of it and provide these invaluable services to our clients.

I thought it was a great project. I just wish once we knew we weren't having any participants in the DUI MAT Program, we could have provided the DUI MAT Program in one of our other locations.

I thought the way the Mat project was set up was fine.

Maintain consistency and follow-up with all clients to provide any additional referrals

I would have more trainings given by DUI Mat Leaders. This will make it easier for the program to refer clients. It also helps keep staff on board. Some of our Counselors have been in the business for many years so this will help them understand the need of such a valuable project. Times are tough right now so we know that our clients can always use some counseling and referrals to other community resources.

The above challenges and changes are the only aspects I would change.

Offer more MAT webinars and onsite visits.

I think the only area that might need to be revised is the amount of funding provided to each site. While the amount of funding is appreciated, it is difficult to spend within the stipulations.

Being able to integrate the program files with our DUI files to ensure proper follow up during DUI program sessions.

If new agencies contracted to DUI/MAT, take advantage of the experience in the current providers to train newbies. If possible, allow some current providers to recontract.

Have webinar meeting at evenings for staff that can attend in the morning.

I would add more tools for counselors and add more training for better understanding of the program.

on how to offer the service to the potential client and all the benefits. Sadly we did not have one person agree to participate.

I would probably have more data for Spanish speaking parents of young substance users and statistics for them to have a better understating of how MAT services help long term. Often the parents are the ones consenting drives for their teens yet without them understating the program they might not consent to services for their young adults.

Same as previous answer. Making the project portal easier to use.

More training for 2nd assessment.

Resources are always helpful.

More intensive training on MAT.

Nothing just offer for alcohol problems.

Educate staff more on how to communicate information to clients in regards to the Dast program.

Quarterly Webinars for County MAT treatment providers and DUI program MAT project programs in order to discuss possible problems/barriers/questions with regards to treatment as well as mutual support.

Maybe having all forms/information readily available on with website at the start of the project.

Rural counties to have better in person site visits. Overall I think everyone did an awesome job. Glad to part of this program.

Make alcohol addiction part of project.

Programs would propose a budget designed for their specific program and needs.

I am not sure what would make it better.

Just make it affordable.

I think it was well thought out.

I have no suggestions I think we made a lot of progress and the team delivered as was expected.

Spend the money on actual placement in treatment. Providing beds or slots verses relying on medi-cal entirely.

We were really getting the program going just before COVID hit, so I am not sure what we would want to change. COVID interrupted what was starting to look like a great opportunity.

At this time I can't think of any suggestions.

I don't know that this would make it better or change the project, but here's my story: We didn't have too many high scorers, but at least 6 of the ones we had here were already in The MAT Program or some sort of Tx to address their Substance Use. I would've felt better having that info collected in the reporting somewhere, just so it didn't look like were incompetent and

BETTER FUNDING OPTIONS FOR THOSE THAT ARE NOT ABLE TO PROVIDE FUNDING FOR THEMSELVES FOR TX.

Getting the service providers (residential, outpatient, detox, etc...) to have an MOU for DUI MAT clients.