



Conquer Addiction's June 2020 Success Rating Application
For Abstinence-Based Programs Submitting
Six Month Post-Treatment Results

Name of Treatment Program: *

On what date did your program start systematically doing outcomes research? (MM/DD/YYYY): *



Age of Patients Being Treated: *

- Adults
 Adolescents
 Both Adults & Adolescents

Type(s) of treatment being offered during 2019 (please select all that apply): *

- Detox
 Residential
 PHP/IOP
 IOP
 Outpatient
 Other:

Is your center an OMT or similar program where the goal is to keep patients in treatment for long periods of time? *

- Yes
 No

Approximate number of patients who were in treatment at your program during 2019: *

What is your recommended length of stay? (in days) *

What state is your treatment program located in? *

How does your outcomes research define treatment success? *

- Abstinence Goals (patient is successful if they are not using alcohol or any non-prescribed drugs)
- Patient-Defined Goals (patient's success is measured against the goals they defined for each substance)

When does your outcomes research "clock" start? *

- At Discharge (patients are followed up with six months and 12 months after discharge)
- At the Start of Treatment (patients are followed up with six months and 12 months after the start of treatment)

Please describe your treatment program, including anything you consider unusual about your program. For example, do you focus on a particular style of treatment or type of patient?

Please describe in specific terms how your outcomes research was conducted: *

Please submit 6 month post-treatment follow-up results for patients who discharged during the time you were conducting outcomes research between [pipe:20] and 9/30/2019.

What type of outcomes results do you want to submit? (Note: Our preference is for 12 month results, but since you only started following up with your patients relatively recently, you have the option to submit 6 month results. Your program must have attempted to contact at least 25 patients who discharged during the period you select: *

- 6 month outcomes for patients who discharged during the period you were conducting outcomes research between 10/1/2018 & 9/30/19
- 12 month outcomes for patients who discharged during the period you were conducting outcomes research between 4/1/2018 & 3/31/19

Who conducted the outcomes research? *

- An independent research company
- Members of an internal research group with no responsibilities for patient care
- Members of your alumni department
- Patients' current or former clinicians
- Other staff members with responsibilities for both outcomes research and patient outreach or care
- Non-staff peer recovery support counselors
- Data was collected directly from the patients via an app
- Other:

Which independent research company conducted your outcomes research? *

Were all patients systematically asked a series of questions via an online survey, a printed questionnaire, or a phone interview following a standardized script? *

- Yes
- No

Were all patients who entered treatment during this period eligible for outcomes research follow-up? If not, please select any reasons that made one or more of these patients ineligible: *

- Yes, every patient was eligible to be selected for the outcomes research
- No, one or more patients refused to participate or left too quickly to enroll in the research study
- No, one or more patients were deemed ineligible for the outcomes research because they left treatment in less than a certain number of days
- No, one or more patients were ineligible for other reasons

For at least how many days did the patient need to remain in treatment in order to be eligible for the outcomes research? *

Did you attempt to contact every patient who met your eligibility criteria? *

- Yes, we tried to contact 100% of the patients who met the eligibility requirements
- No, we followed a random selection process to choose which patients to contact for the research
- No, we followed something other than a random selection process to choose which patients to contact for the research

Were the patients randomly selected by computer algorithm? *

- Yes
- No

Did you have patients in your program who were doctors, pilots, nurses or other professionals who would lose their professional license and ability to perform their job unless they stayed abstinent? *

- No, not as far as I know
- Yes, but they represented less than 10% of the program's patients
- Yes, at least 10% of our patients were professionals who would lose their professional license unless they stayed abstinent

How much earlier than the survey due date could a patient submit their six month outcomes survey? (in days) *

How much later than the survey due date could a patient submit their six month outcomes survey? (in days) *

Outcomes Research Results

What is the total number of patients who left your treatment center (for any reason other than death) during the time you were conducting outcomes research between 10/1/2018 & 9/30/2019? *

During this period, how many patients refused to participate or left treatment without enrolling in the research? *

During this period, how many patients enrolled in the research but left treatment in less than [pipe:37] days? *

Press "Calculate" to see the number of patients who were eligible to be included in the outcomes research:

Press "Calculate" to see the number of patients who were eligible to be included in the outcomes research:

0

How many patients were actually selected for the outcomes research? *

Press "Calculate" to see the percentage of eligible patients who were selected for the outcomes research:

0.0

Do these two calculated totals appear correct? *

- Yes
 No

Do you have anything you need to explain about these numbers? For example, if you estimated the number of patients who left too quickly to be enrolled in the research, you should mention it here. (optional):

What was the average length of stay for the patients selected for outcomes research (in days)?: *

Your Program's Post-Treatment Abstinence Rate

Among this total of [pipe:43] patients whom you attempted to contact at six months post-treatment, please enter the number of patients who reported this abstinence success:

Abstinent continually since left treatment: *

Abstinent for at least the last 30 days, but not continually since treatment: *

Used alcohol or non-prescribed drugs in the last 30 days: *

Used alcohol or non-prescribed drugs since treatment; usage is the last 30 days is unknown: *

Press "Calculate" to determine the total number of patients who were reached at six months post-treatment and reported whether or not they were successful abstaining from the use of alcohol and all non-prescribed drugs since treatment:

0

Press "Calculate" to determine the percentage of patients who were reached at six months post-treatment and reported whether or not they were successful abstaining from the use of alcohol and all non-prescribed drugs since treatment:

0.0

Press "Calculate" to see the percentage of patients who reported being abstinent for at least the last 30 days at six months post-treatment:

0.0

Is this percentage correct? *

- Yes
 No

Optional Information & Signature

OPTIONAL INFORMATION: Of course, there are other important measures of recovery success beyond drug and alcohol usage. If you have data from both the intake and the final outcomes survey for the following metrics, please compare the pre- to post- results for only those patients submitting the outcomes survey. For example, if 110 patients submitted the outcomes survey, please report the percentage of these 110 patients who reported feeling excellent or good at intake and the percentage who reported feeling excellent or good on the outcomes survey.

No. of patients reporting additional measures of recovery success: *

Percent Feeling Excellent or Good Overall:

At Intake:

At Follow-Up:

Percent Living in Stable Housing:

At Intake:

At Follow-Up:

Percent Working or in School (including Working in the Home):

At Intake:

At Follow-Up:

Percent With Excellent or Good Relationship with Closest Family Members:

At Intake:

At Follow-Up:

Percent of Patients Reporting Being Very or Somewhat Satisfied with Treatment:

At Follow-Up:

Any additional comments you'd like to share? (optional):

Please tell us how to reach you if the judges request any additional information:

Name: *

Best Phone Number: *

Email Address: *

By signing (or typing my name) below, I testify that all of the information in this application is accurate to the best of my knowledge. I also understand that the panel of judges will be using their best judgment to choose which, if any, applicants to request further information from and/or to disqualify. I accept the decisions of the judges as final.

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