

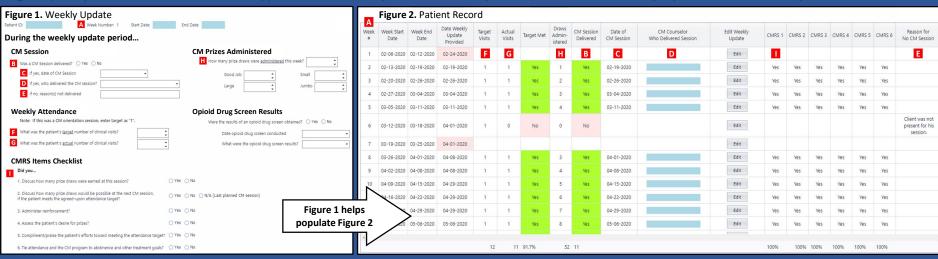
Using the Contingency Management Tracker as both an implementation strategy and an implementation research tool



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Background and objective: The implementation of contingency management (CM) in opioid treatment programs (OTPs) is low. Research suggests when CM is implemented, it is implemented with poor adherence. This poster describes the CM Tracker, which was developed to serve the <u>dual purpose</u> of a research tool for standardizing assessment of CM implementation and a strategy to improve adherence.

Methods: Project MIMIC is a type 3 hybrid trial testing strategies to help OTPs and their staff implement CM. CM Tracker was designed to collect and manage data specific to the escalating prize-based CM protocol being implemented. By providing simple inputs about CM sessions (see Figure 1), staff receive a user-friendly dashboard (see Figure 2) that provides visual information to support adherent CM implementation with patients. Data can also be easily exported to assess CM implementation.



Results and conclusion: As of May 17, 2021, 48 CM staff across 17 OTPs have used the project's CM Tracker for documenting CM implementation. Of the project's 345 patient participants, 268 (78%) initiated CM and there have been 1,736 CM sessions implemented. Among patients who initiated CM, the median number of CM sessions implemented per patient was 6 (out of 12 possible sessions). Across OTPs with at least one initiated patient, the average number of CM prize draws per patient was 23.8 and ranged from 3.0 to 44.2. The CM Tracker is an innovative tool that can support adherent implementation while streamlining data collection.



