



City of Lawrence

## 2011 Outside Agency Funding – Special Alcohol Funds

### APPLICATION

#### SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: **DCCCA, Inc.**

Name of Program for Which Funding is Requested: **Lawrence Outpatient Treatment Program**

Primary Contact Person: **Lisa Carter, Program Coordinator**

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#### SECTION 2. REQUEST INFORMATION

The criteria for each application questions are explained below.

##### Amount of funds requested from the City for calendar year 2011.

Prevention	\$
Treatment	\$ 43,264
Intervention	\$
Coordination	\$
Other	\$

##### Provide a brief description of the program.

DCCCA has been providing outpatient alcohol and drug abuse treatment services in Lawrence since 1974. While there are other organizations and practitioners in the city and surrounding area providing substance abuse treatment, our Lawrence Outpatient Treatment Program has maintained a commitment to serve citizens who are often the most disadvantaged. Individuals who are homeless, impoverished, struggling with mental illness in addition to their substance addiction, or who are experiencing legal consequences as a result of their addictive lifestyles are referred to, and successful in our treatment program. The majority of participants have no insurance or other financial resources to pay for their treatment.

The treatment interventions at Lawrence Outpatient are based on the National Institute on Drug Abuse (NIDA) best practices. Services are complimented by individual counseling, 12 Step support group attendance, service referrals for mental and physical health, and case management for housing, employment, parenting, and other assessed needs. Families, especially parents of adolescents, are offered education and counseling to help them understand the impact of their loved ones' substance use on their lives.

Drug and Alcohol Evaluations – All service options begin with a comprehensive assessment of a potential client's strengths and needs. The assessment results in a diagnosis (when indicated) using criteria established by the Diagnostic

and Statistical Manual, Fourth Edition (DSM-IV), and a recommended treatment level based on the American Society of Addiction Medicine (ASAM) criteria. Lawrence Outpatient also provides court ordered evaluations for individuals who have been charged with Driving Under the Influence, Minor in Possession, or other criminal charges.

Alcohol and Drug Information School – Individuals who have obtained their first DUI or Minor in Possession charge attend this eight hour course.

Challenge Group – This co-educational group is intended for those adults who are abusing substances but do not meet DSM-IV criteria for being substance dependent. Morning, evening and weekend group times are offered

Intensive Outpatient Treatment – Intended as an alternative to residential treatment, IOT is designed for individuals who are assessed as chemically dependent. Groups for both men, women and adolescents meet three hours a day, three days a week.

Aftercare – Aftercare groups offer a relapse prevention focus and support for individuals who have completed intensive outpatient or residential treatment. Adolescent groups meet two hours a week for six to eight months. Gender specific adult groups meet two hours a week for up to one year.

### **Provide a brief description of how the need for this program was determined.**

Data from multiple sources suggests a continuing need for alcohol and drug abuse education, prevention and treatment. Research indicates that adults who abuse substances have a higher likelihood than non-substance abusing adults of experiencing poverty and unemployment. Children of substance abusing parents experience higher rates of developmental delays, child maltreatment and removal to foster care. (National Center on Substance Abuse and Child Welfare). Tax payer and community costs for law enforcement and foster care, alone, significantly exceed the minimal cost associated with alcohol and drug treatment.

Data about Lawrence and Douglas County offers a clear picture that services like those offered at Lawrence Outpatient Treatment Program continue to be needed.

- Lawrence Memorial Hospital's emergency room treated 2768 individuals in 2009 whose primary or secondary diagnosis at the time of treatment was alcohol or drug abuse/dependence. These numbers represent a 51% increase from 2006<sup>1</sup>.
- An estimated 11,113 adults in Douglas County have an alcohol and/or drug abuse or dependence problem, and 9,300 need treatment<sup>2</sup>.
- 96 adolescents from the Lawrence Public Schools were referred for alcohol and drug treatment, but only 13 received an evaluation<sup>3</sup>.
- Bookings into the Douglas County Jail for alcohol and drug related offenses increased 20% from 2008 to 2009<sup>4</sup>.
- The University of Kansas reported 16 DUI's, 48 drug and narcotics violations, and 28 liquor law violations among students in 2009, a ten year high.

The 2009 Kansas Communities that Care survey provided the following facts about Douglas County adolescents:

- 26% drank alcohol in the past 30 days
- 12% smoked marijuana in the past 30 days.
- 11% acknowledged being drunk or high while in school.
- 14% engaged in binge drinking (2008 Kids Count, Kansas Action for Children)
- 28% reported a family member with a serious alcohol or drug problem.
- 47% reported a close personal friend drank alcohol regularly
- 32% reported a close personal friend used marijuana regularly

The self reporting in the 2009 survey indicates that marijuana use, attending school drunk, identifying family members and friends who use alcohol and marijuana regularly have all increased since 2008.

Lawrence Outpatient provided treatment services to 439 adults, 40 adolescents, 102 KU students, and 6 homeless individuals between July 1, 2009 and April 30, 2010. As the local and state economies decline, those referred for

<sup>1</sup> Lawrence Memorial Hospital

<sup>2</sup> Kansas Comprehensive Treatment Needs Assessment

<sup>3</sup> USD 497

<sup>4</sup> Douglas County Sheriff's Office, Corrections Division, Re-Entry Program

treatment have limited resources to pay for services. State dollars dedicated to pay for indigent care have been reduced each of the past three years. Lawrence Outpatient Treatment Services will continue its practice of using Alcohol Tax Funds to provide services for those who would otherwise be unable to access them.

**Describe the desired outcomes of this program (see Logic Model).**

The primary goal of Lawrence Outpatient Treatment Program is to reduce the personal, familial, and social cost of addiction by intervening with the most appropriate intervention necessary at the time. The investment of Alcohol Tax Funds will result in lower tax dollar expenditures in the criminal justice system, public assistance, and removals to foster care when parents cannot adequately care for their children. The following outcomes, based on national standards for successful treatment programs, measure improvement in lifestyles of clients who complete treatment.

1. By the end of the program, 90% of participants will report a decrease in alcohol use at discharge (compared to 30 days before admission to treatment).
2. By the end of the program, 90% of participants will report a decrease in drug use at discharge (compared to 30 days before admission to treatment).
3. By the end of the program, 85% of adult participants will have safe, supportive living conditions.
4. By the end of the program, adult participants will report a 75% increase in employment at discharge, compared to 30 days before admission to treatment.
5. 50% of participants in outpatient treatment will remain actively involved until completion of treatment plan.

Outcome data is gathered and reported using the Kansas Client Placement Criteria, an electronic data system required by the State of Kansas, Addiction and Prevention Services.

Data for calendar year 2009 suggests Lawrence Outpatient's treatment approach has a positive impact.

- 100% of individuals who completed the program no longer drank alcohol.
- 100% of individuals who completed the program no longer used drugs.
- 80% of individuals who completed the program were employed at the time of discharge.
- 98% of individuals who completed the program had safe and stable housing at the time of discharge.
- 50% of individuals who discharged from Lawrence Outpatient completed treatment.

**Describe any coordination efforts your agency has made.**

Lawrence Outpatient's successful treatment intervention with adults and adolescents is contingent on our ability to effectively address their holistic needs through effective community collaboration. Program staff link treatment clients with Health Care Access, Douglas County Health Department, local primary care physicians, Douglas County Aids Project and Douglas County Dental Clinic for physical health care needs. The Lawrence/Douglas County Housing Authority and Lawrence Workforce Center provide access to affordable housing and employment opportunities. Clients with co-occurring mental health needs are seen at Bert Nash Mental Health Center. The Willow Domestic Violence Center is a resource for female clients who are victims of domestic violence. Staff providing adolescent services collaborate closely with The Shelter, Inc., O'Connell Youth Ranch, and KVC Behavioral Health Care. Women who participated in residential substance abuse treatment at DCCCA's First Step at Lake View may continue their treatment at Lawrence Outpatient upon re-entry into the community.

Lawrence Outpatient Treatment Services staff actively participate in community collaboration initiatives designed to identify and seek resolution to service gaps. We are engaged in a formal partnership with the Lawrence Housing Authority, facilitating evaluations and providing treatment services for homeless individuals. One of our substance abuse counselors offers assessment, evaluation and counseling on the University of Kansas campus weekly. Child and adolescent needs are the focus of our participation in the monthly Family Centered Systems of Care planning group. Finally, we meet monthly with Douglas County courts and criminal justice staff to address treatment needs of individuals involved with the court system, and partner with others to facilitate a continuum of services for jail inmates or re-entering the community.

**Describe how your agency is capable of implanting the proposed program.**

DCCCA is a Lawrence based non-profit organization that has provided substance abuse treatment services for adults and adolescents for over 30 years. Our active, entrepreneurial Board of Directors and leadership staff have created an array of human services that focus on quality, efficiency, and positive outcomes for customers. DCCCA's management

practices and proactive planning have given confidence to various funders that we are good financial stewards and can withstand changing economic conditions.

Lawrence Outpatient Treatment Services is licensed by the Department of Social and Rehabilitation Services, and is a contracted provider with SRS Addiction and Prevention Services, Value Options of Kansas (Medicaid), the Kansas Sentencing Commission, Blue Cross Blue Shield of Kansas, and Cenpatico (Healthwave). Program staff are state certified as alcohol and drug abuse counselors, and many hold professional licenses as social workers or counselors, issued by the Behavioral Sciences Regulatory Board.

**Provide a detailed budget for the proposed program using the categories provided.**

Lawrence Outpatient Treatment Services has multiple funding streams, most with strict eligibility requirements for client admission in order to access those funds. Supplemental funding is received through contributions, the Lawrence Housing Authority, client fees and insurance reimbursement. In addition to paid staff, Lawrence Outpatient is a training site for The University of Kansas and substance abuse counselor interns.

The following data reflects revenue from each primary funding source July 1, 2009 through March 31, 2010, and their eligibility requirements:

Addiction/Prevention Services (client income must be 200% of poverty)	\$132,198
Medicaid (client has Medicaid 19 insurance coverage)	\$ 94,898
Senate Bill 123 (client is referred by the Kansas Sentencing Commission)	\$ 19,000
Supplemental funding	\$ 370
Alcohol Tax Fund (City of Lawrence)	\$ 30,750
Private Pay/Insurance	\$ 66,994
Lawrence Housing Authority	\$ 3,222

DCCCA's Lawrence Outpatient program is an annual recipient of Alcohol Tax Funds, with dollars focused on increasing our ability to serve low income adults and adolescents who do not meet the criteria of our primary funding sources. Without Alcohol Tax Funds, these individuals would be unable to access substance abuse treatment services. For 2011, Alcohol Tax Funds will continue to fund a full time, masters level substance abuse counselor, based on the following budget figures. Costs related to travel, office space, supplies and equipment will be reimbursed through other funding streams.

Personnel	\$33,280
1 full time Substance Abuse Counselor (existing)	
Fringe Benefits	\$ 9,984
30% of salary	
<b>Total Request</b>	<b>\$43,264</b>

**Impact of potential 2.5% funding reduction**

DCCCA received a letter from the City Manager, requesting supplemental information regarding the impact of a potential 2.5% revenue reduction. As an organization, DCCCA has experienced significant reductions in the revenue targeted to serve those most in need of substance abuse treatment. Our allocation of state dollars distributed for indigent care was cut 10%, beginning July 1, 2009. Medicaid rates were cut 10% beginning January 1, 2010. Funding to serve individuals involved in the corrections systems was decreased. As funding decreased, the request for services increased. Individuals who previously may have had the insurance or financial means to pay for treatment became unemployed.

DCCCA responded to these revenue reductions by identifying strategies that maximized revenue, eliminated redundancies and created efficiencies in our management and treatment processes. For example, Lawrence Outpatient and First Step at Lake View now share program management, billing, and administrative support staff. The facilities are beginning to share counseling staff in response to a financially based decision to not fill vacant positions. The changes made in our facilities were those that would not negatively impact customer service and treatment effectiveness.

While a 2.5% reduction in City funding does not appear to be a large portion of our budget (\$1025 for Lawrence Outpatient and \$730 for First Step at Lake View, based on 2010 funding), it will begin to impact direct services to our customers. We have reached our maximum ability to find savings in non-client related expenses. A smaller percentage of staff time will be dedicated to treating low income individuals, thus reducing the number of Lawrence residents who can have their treatment funded through the City dollars.

### **SECTION 3. LOGIC MODEL**

Logic Model for this proposal is below.

ASSESSMENT DATA	GOALS/ OBJECTIVES	TARGET GROUP	STRATEGIES	PROCESS OUTCOMES	BEHAVIORAL OUTCOMES	IMPACT OUTCOMES
<p>An estimated 9300 adults in Douglas County are in need of substance abuse treatment.</p> <p>26% of Douglas county adolescents typically drink alcohol in a 30 day period, 12% smoke marijuana, 14% engage in binge drinking, and 28% report having a family member with a serious substance use problem.</p> <p>Alcohol and drug violations among KU students reached a 10 year high in 2009.</p> <p>Adults who abuse substances are at high risk to experience poverty and unemployment. Their children experience higher rates of developmental delays.</p>	<p>Treatment at Lawrence Outpatient will reduce the personal, familial and social cost of addiction by interceding with the most appropriate intervention necessary.</p> <p>Funds provided by the Alcohol Tax Fund will increase the number of low income adults and adolescents who can access treatment.</p>	<p>Adults and adolescents in Lawrence and Douglas County who abuse alcohol or other drugs, or are chemically addicted.</p>	<p>Drug and Alcohol Evaluations</p> <p><u>Level I Outpatient</u></p> <ul style="list-style-type: none"> <li>-Education</li> <li>-Individual, Group or Family Counseling</li> <li>-Relapse Prevention</li> <li>-Case Management</li> <li>-Continuing Care</li> </ul> <p><u>Level II Outpatient</u></p> <ul style="list-style-type: none"> <li>-Intensive Treatment</li> </ul>	<p>DCCCA will provide services to approximately 600 individuals during CY2011.</p>	<p>By the end of the program, as documented by the established program outcome reports:</p> <p>90% of participants will report a decrease in alcohol use.</p> <p>90% of participants will report a decrease in drug use.</p> <p>75% of adult participants will be employed.</p> <p>85% of adult participants will have acquired safe and stable housing.</p> <p>60% of participants will remain actively involved until completion of their treatment plan.</p>	<p>By the end of the program, 100% of participants will have decreased alcohol and/or drug use, adults will have attained meaningful employment and/or increased their education level when appropriate, adolescents will have increased their educational level, and adults will have secured, and adolescents will live in safe and stable housing that protects their recovery.</p>