



Last revision 1/12/2010

Mission

Partnering to promote prevention and recovery in Kansas communities

Vision

Kansas communities thrive and support recovery

Value Statement

Addiction and Prevention Services is committed to creating a system of care that is customer/community centered focused, outcome driven and consisting of a highly competent workforce that is focused on best practices. We will accomplish our mission and realize our vision through strategic partnerships, the development of a new information technology system, targeted workforce development initiatives and being responsive to the needs of our partners and those we serve.

Strategic Plan FY 2010-2013

Substance Use Disorder Treatment and Prevention Goals and Objectives

- A. *Customers and Communities* are engaged in planning, implementation, delivery and evaluation of interventions and services, in recognition of the importance of family and all sectors of the community to successful prevention and treatment outcomes.

(Customer/Community participation refers to *any actions* that actively include customers/communities in decisions about their own care, services and program development)

1. Establish a consumer advisory council
2. Establish an advocacy network that includes community and coalition members
3. Establish a framework for cultural competency across the system
4. Adopt and promote Recovery Oriented Systems of Care
 - a. Increased emphasis on “natural supports”
 - b. Increased utilization of Peer Support services
 - c. Increased emphasis on assisting consumers “between” formal services
5. Implement “consumer satisfaction with care/services” survey

B. *Quality of care/services is measured* through outcomes to ensure effective services are being provided. These outcomes will be identified for the system and provide each participating agency the ability to align their work with these outcomes.

1. Utilize the National Quality Forum Standards of Care in planning and policy development
 - a. Establish reimbursement for Medication Assisted Treatment
 - b. Establish reimbursement for family/collateral services
 - c. Establish reimbursement for the inclusion of Nicotine cessation programs
2. Establish Provider Excellence Program
 - a. Identify performance measures and data sources
 - b. Develop reports to measure parameters
 - c. Set incentives
 - d. Monitor programs for continued excellence
 - e. Establish a recognition process for healthy initiatives and outcomes in Kansas communities
3. Increased Coordination with Primary Health Care
 - a. Set benchmarks for coordination of care meeting
 - b. Expand focus beyond pilot target of pregnant women with co-occurring substance abuse, mental health and/or severe medical conditions
4. Access to Care is improved
 - a. Development of a Capacity/Wait List system
 - b. Expand the use of telemedicine
 - c. Establish baseline measure and set separate targets for Medicaid/AAPS
 - d. Create a new Performance Improvement Project related to Access and engagement
 - e. Monitor AAPS outcome measures related to Access to care
 - f. Develop and implement effective partnership with KDOC for Reentry efforts for offenders identified as needing SUD services
5. Improve chart documentation
 - a. Develop and post tip sheets for chart documentation
 - b. Communicate the results of the data integrity PIP to individual providers

- c. Re-evaluate the data integrity PIP for the FY2011
6. **Replace KCPC** with state-of-the-art Information Technology System that aligns Kansas with the needs of the future (Health Care Reform, HIT, etc.)
- a. Technical Assistance request – SAMHSA/CSAT
 - b. Develop Project plan
 - c. Resources identified
 - d. Stakeholder input
 - e. Limitations/challenge
7. Increase the use of technology to expand the reach of prevention
- a. Participate with community members online and offline by utilizing emerging and progressive social media technologies
 - i. Identify opportunities for virtual involvement
 - ii. Develop a framework of processes and human resources to support the use of social media
 - iii. Identify technology tools and virtual spaces to best support community needs and maximize efficiency
8. Development of a Workforce Development strategy that incorporates the philosophy, values and identified outcomes for the Kansas Addiction and Prevention Service system.
- a. Adopt a training framework that incorporates the elements of content, application and reinforcement
 - b. Expand the use of technology to reach a broader spectrum of the workforce and provide real-time, on-time training
 - c. Support the profession's goal of Counselor Licensure
 - d. Succession planning and leadership development
 - e. Prepare providers for the impact of health insurance reform and parity
 - f. Establish incentives for certification of and a career path for the Prevention Workforce
 - g. Expand the Kansas Prevention Network to include:
 - i. AAPS Prevention Workforce
 - ii. Recipients of federal substance abuse prevention grants and grant coordinators

- iii. Specialized Teams to address community-based processes and emerging trends
 - iv. Community Networks and local community coordinators
 - v. A repository of expertise from among various community sectors, making resources readily accessible and available statewide
- h. Collaborate with institutions of higher education and training organizations to insure that the field's workforce is skilled in the following topics:
- i. Evidenced based policies, practices and programs
 - ii. Recovery Oriented Systems of Care
 - iii. Medication Assisted Treatment
 - iv. Screening, Brief Intervention, Referral and Treatment (SBIRT)
 - v. Environmental approaches to prevention

Problem Gambling Goals and Objectives

A. **Public Awareness** Integrate non-stigmatizing accurate and balanced problem gambling awareness and responsible gaming messaging into a variety of mediums and outlets with the objective to inform the public about the risks associated with gambling, tips to avoid becoming a problem gambler, truths and myths of gambling, signs and symptoms of problem gambling, and knowledge of where to find help if a problem is developing or has developed.

1. On a statewide level, develop and apply a consistent multi-media campaign to raise awareness of problems associated with gambling and the availability of treatment
2. Utilize news media to extend coverage to stimulate interest in problem gambling
3. Provide public awareness information in other languages
4. Disseminate problem gambling literature on a statewide basis
5. Ensure that consumer education materials are available in all gaming venues, especially advertising the availability of 800.522.4700 and www.ksgamblinghelp.com
6. Work with the Kansas Responsible Gambling Alliance and Kansas Coalition on Problem Gambling to promote both National Problem Gambling Awareness Week and National Responsible Gaming Education Week

B. **Problem Gambling Prevention** Develop comprehensive problem gambling prevention to include (a) primary prevention, i.e. services that seek to reduce the incidence of problem gambling, (b) secondary prevention, i.e., activities aimed at early detection, thereby increasing opportunities to prevent low-level problem gambling from progressing into pathological gambling, and (c) tertiary prevention, i.e., activities designed to identify and alleviate pathological gambling intensity or duration, in order to reduce gambling related harm.

1. Conduct needs assessments to establish priorities for problem gambling prevention services and develop the framework for problem gambling prevention programs

2. Develop a problem gambling training and technical assistance prevention program for both the public and private sectors
3. Develop new prevention materials and adapt existing prevention literature
4. Establish a clearinghouse distribution system for prevention publications and literature for ease in statewide dissemination with the message that problem gambling exists and that help is available
5. Formalize Problem Gambling Prevention Community Coordinator position description, hire and train new coordinator
6. Alert parents and teachers about the risks of gambling for young people
7. Update the *Urgent Challenge Training* to utilize in the development of a speakers bureau for each gaming zone
8. Integrate youth problem gambling prevention into existing prevention and health planning programs where appropriate
9. Explore relationship with Department of Education to expand opportunities for persons in secondary education and community college settings to receive information about risks, responsibilities and economics of gambling
10. Develop new avenues to promote 800.522.4700 and www.ksgamblinghelp.com as resources to assist problem gamblers and their families
11. Focus efforts on high-risk populations (youth, older adults, persons of poverty, minorities, military)
12. Continue to explore environmental prevention strategies such as pre-commitment of loss limits, mandatory breaks in play, no-smoking rules, play time-outs, etc. as harm-reduction strategies
13. Support problem gambling awareness and the development of codes of conduct for social and charitable gaming providers

C. ***Crisis Intervention and Helpline Services*** Enhance crisis intervention to aid persons experiencing high levels of emotional distress related to a gambling problem. Crisis intervention would include de-escalating situations, preventing harm to self or others, referral and placement into appropriate level of care. Design programs or systems to respond to the crisis including help lines, substance abuse providers, mental health centers, casino based interventions, employee assistance programs, and others.

1. Develop a multi-method system for helpline services, including literature and self-help tools
2. Develop state-owned casino based problem gambling intervention program by exploring collaboration with Kansas Racing and Gaming Commission and Kansas Responsible Gambling Alliance to pilot the use of I-Care
3. Expand helpline call services to include a “warm” transfer to Kansas Certified Gambling Counselors (KCGCs) and follow up with clients
4. Ensure availability of translation services for callers and multilingual materials
5. Explore feasibility of including on-line chat for helpline in addition to standard telephone based service

D. ***Research and Evaluation*** Develop program evaluation focused on service level processes and/or outcomes, system level processes and/or outcome or some combination.

1. Collaborate with existing systems for problem gambling data collection and service monitoring system that integrates the outcome monitoring function through a state-of-the-art information

technology system

2. Identify performance measures for evaluation and analyze data to improve service delivery
3. Implement standard problem gambling screening and assessment tools and incorporate into existing data-collection systems
4. Distribute prevalence data from the results of the 2009 BRFSS problem gambling questions
5. Distribute youth CTC data regarding problem gambling prevalence among youth
6. Research, develop and evaluate cost-effective interventions that can be replicated, such as the West Virginia intervention model

E. ***Problem Gambling Treatment*** Develop an infrastructure for treatment services, professionally delivered, and aimed at improving health, functioning, and quality of life for problem gamblers and their concerned others. Types of treatment services may include individual counseling, couples/family counseling, group counseling, financial management counseling, and/or medication management.

1. Develop an infrastructure for problem gambling treatment services based on best available scientific research and evidence, which is client centered, individualized, and includes all levels of care
2. Monitor quality assurance to ensure effective treatment services are being provided to meet the criteria set by the state of Kansas
3. Work with vendor to explore electronically (E-therapy) delivered services for problem gamblers and their families utilizing electronic media and information technologies
4. Explore how to bridge substance abuse and mental health to discover ways to define interface and collaboration to service problem gamblers
5. Ensure that all helping professionals are trained about the benefits of early identification and about problems of co-morbidity
6. Work with a willing provider to create the first residential problem gambling treatment center in Kansas
7. Encourage screening for mental health, substance abuse, and gambling problems by all health providers
8. Require screening for co-occurring mental health, substance abuse, and gambling problems by gambling treatment providers
9. Make available case management and wrap-around services when beneficial and cost-effective
10. Work with the Department of Corrections to determine levels of need within the criminal justice settings, the most effective interventions and treatment pathways, and policy to guide primary prevention, intervention services and evaluation

F. ***Customers and Communities*** are engaged in planning, implementation, delivery and evaluation of interventions and services, in recognition of the importance of family and community to successful outcomes.

1. Maintain and strengthen relationships with existing stakeholder groups (Kansas Coalition on Problem Gambling, Kansas Responsible Gambling Alliance, Gamblers Anonymous, GamAnon, Kansas Citizens Committee, Kansas Association of Addiction Professionals, and the Mental Health Association) and informal input mechanisms
2. Solidify relationships with industry (both tribal casinos and state-owned) through regular interaction and assist gaming venues in training employees to consistently identify warning signs

related to problem gambling and educate about responsible gambling

3. Develop new relationships to further our mission by inviting other public and private sector individuals and entities to the table including professionals in health care, psychiatric services, education, legal/court services, faith-based communities
4. Establish problem gambling community task forces in each gaming zone to enhance the capacity of communities to address gambling harm
5. Establish a framework for cultural competency across the system
6. Implement “consumer satisfaction with care” survey
7. Promote inclusion of problem gambling in other health systems screening protocols

G. **Workforce Development** Develop strategies that incorporate the philosophy, values and identified outcomes for the Kansas Addiction and Prevention Service system. These strategies may include (a) development of workshops and information for professional groups that come in contact with problem gamblers; (b) development and implementation of a training program for persons in the health and social services sector to proficiently provide prevention or treatment services to address problem gambling; (c) development of programs to encourage growth in the number of professionals specializing in the field of problem gambling research, treatment, or prevention.

1. Facilitate the delivery of a range of quality training opportunities that support the provision of effective identification, intervention and treatment services
2. Formalize KCGC II application process and disseminate to appropriate KCGCs
3. Expand the use of technology to reach a broad spectrum of the workforce, especially for continuing education. Develop a KCGC e-mail list serve for dissemination of evidence based practices and current research
4. Support the delivery of quality clinical supervision for KCGCs
5. Build a cadre of Kansas-based trainers who can eventually provide clinical supervision
6. Using *Family Meeting Approach Intervention*, through Illinois Institute for Addiction Recovery, provide intervention training for selected KCGCs to formulate regional Kansas problem gambling intervention teams
7. Provide incentives for well-qualified, high performing providers to promote best practices
8. Support and encourage workforce participation from different ethnic backgrounds to ensure cultural competency and proficiency
9. Identify and implement additional training opportunities such as training for cultural competence or co-occurring disorders. Offer advanced levels of training
10. Encourage colleges and universities to provide courses for human services and criminal justice professionals that address the nature of problem gambling, its identification, prevention and treatment
11. Educate professionals (medical, legal, spiritual, law enforcement, and educational) about problem gambling through specialized workshops
12. Collaborate with institutions of higher education to insure that the field’s workforce is trained in:
 - a. Evidenced based practices
 - b. Recovery Oriented Systems of Care
 - c. The need for medication assisted treatment