



# **KANSAS**

## **ADDICTION & PREVENTION SERVICES**

*Ensuring a Comprehensive System of Quality  
Services for the Prevention and Treatment of  
Addictions in Kansas*

***STRATEGIC PLAN  
2004 – 2009***

***UPDATE***

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April 2005**

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# INTRODUCTION

The Department of Social and Rehabilitation Services (SRS) has statutory responsibility for providing substance abuse, addiction and prevention services throughout the State of Kansas. SRS is authorized to provide addiction and prevention services under Kansas Statute Number 75-5375 that includes, in part, the responsibility and authority to “coordinate the total drug abuse treatment and prevention effort with the state of Kansas”.

The Addiction and Prevention Services section (AAPS) within SRS provides administrative leadership by promoting effective public policy and developing and evaluating programmatic and human resources. The AAPS mission is “Ensuring a Comprehensive System of Quality Services for the Prevention and Treatment of Addictions in Kansas”. The following vision statements support this mission:

- **Consumer and community centered philosophy utilizing a strengths-based perspective;**
- **Collaboration of agencies including dissemination of information and integrating technology and resources to the benefit of the client;**
- **Promote fiscal responsibility by leveraging resources and diversifying funding;**
- **Ensure availability and accessibility to the continuum of care in every region;**
- **Promote *continuous quality improvement* based on data, research and outcomes.**

The Governor of Kansas and SRS Secretary receive advice and guidance from a number of key stakeholder groups in planning and delivering addiction and prevention services. Through the ongoing involvement and partnerships with key stakeholder groups, SRS and AAPS plan, deliver and monitor addiction and prevention services statewide.

## Strategic Directions

AAPS adopted the framework outlined in the National Treatment Plan, ‘Changing the Conversation’, (Center for Substance Abuse Treatment, 2000), and ‘Building State Substance Abuse Prevention Capacity Through Infrastructure Development’ (Center for Substance Abuse Prevention Summit, 2000) as the strategic areas of focus. Each Strategic Direction outlines the accomplishments, barriers and future plans.

### *Treatment Strategic Directions*

#### **Closing the Treatment Gap**

The focus of this key direction is to identify ways to close the “gap” in alcohol and drug treatment defined as the difference between individuals requiring treatment and those receiving treatment. Closing the Treatment Gap includes the development of strategies to promote

effective and appropriate care for all individuals in need of treatment, regardless of demographic or other factors that may impede their access to care.

#### Accomplishments

1. AS Center for Substance Abuse Treatment (CSAT) Technical Assistance was requested and received which resulted in an overview of our current computer system and specific recommendations for future needs.
2. A Request for Proposal (RFP) has been developed to solicit bids to conduct a statewide needs assessment.
3. The Governor's BEST Team has identified performance indicators for client and system level outcomes to be compared across state agencies.
4. Waiting List and Bed Count Website project is fully operational.

#### Barriers

1. Space limitations for the current CITRIX system (on which the current KCPC system resides)
2. High speed internet not readily available to all providers
3. Sufficient funds to accommodate the changes needed to enhance existing technology
4. Current reimbursement rates not competitive with other funding streams.

#### Future Plans

1. Disseminate RFP - Needs Assessment Completed
2. Results of Needs Assessment will be evaluated by the Oversight Committee Performance Measures workgroup to determine the impact on services purchased by AAPS.
3. New AAPS consultants located in each SRS Regional Office service delivery region will identify local and regional needs and work to increase community capacity for treatment and prevention services.
4. Increase reimbursement rates for services.

#### **Reducing Stigma and Changing Attitudes**

The focus of this key direction is to reduce the stigma attached to individuals seeking treatment for alcohol and other drug addiction. Often these individuals suffer degradation and discrimination because many people in the general public do not understand that these individuals have overcome a disease. Strategies to reduce the ostracism, shame and even denial of life's necessities suffered by those suffering from addiction are included in this area.

#### Accomplishments

1. An Advocacy Group for Recovery was initiated and planning has begun for the 1st Annual Recovery Conference, which is scheduled for June, 2005.
2. The State Oxford House Association appointed a liaison to work with the KS. Department of Corrections to develop the use of tele-conferencing to facilitate inmate interviews for placement in Oxford Houses, and other related Oxford House/KDOC related activities.
3. SRS and AAPS sponsored a number of presentations by Dr. Embry on research-based,

low cost strategies to improve client outcomes to SRS Management and direct services staff, and stakeholders.

4. Dr. Embry was the keynote speaker for the Kansas Association of Addiction Professionals Annual Legislative Breakfast.
5. Increased the Oxford House revolving loan fund to support further development and availability of Oxford House beds.
6. AAPS sponsored individuals from the provider network to attend the national conference sponsored by the Center for Substance Abuse Treatment State Systems Development Program which included topics on faith based initiatives, workforce development, performance measures, and evidence based practices.
7. Enhancing workforce cultural competency in the workforce has been initiated by AAPS and formally kicked off at the KAAP Spring Conference 2005.

#### Barriers

1. Limited staff resources make it difficult to begin and follow through with new initiatives.
2. Stigma continues to permeate every facet of the service delivery system

#### Future Plans

1. Collaborate with KADSPA to develop an advocacy strategy that will target specific groups, i.e. legislators and other stakeholders.
2. Create summary data briefs that tell the story about the met and unmet demand for treatment services and can be presented by the substance abuse profession to legislators and other key stakeholders.

#### **Improving and Strengthening Treatment Systems**

This key direction addresses changes in the system charged with treating addiction. Areas of discussion include: client-centered practices which address treatment planning, consistent use of available tools and best practices, sufficient financial resources, or enhancing management skills and adoption of consistent business practices.

#### Accomplishments

1. A System Redesign workgroup has been charted to examine the screening and assessment process.
2. Screening and assessment tools for clinical and technical training will be recommended by the System Redesign Oversight Committee.
3. Due to membership turnover of the Kansas Citizens Committee for Substance Abuse and Other Drugs; the plan to review the feasibility of implementing recommendations did not occur last year.
4. Performance based outcomes were identified for the system (access, engagement, and retention).
5. AAPS continues to support the 1st Leadership Institute piloted in Kansas by Mid-America Addiction Technology Transfer Center (MAATC).
6. Case management standards are drafted for inclusion in the proposed standards for licensure.

7. Six Case Management Enhancement pilot grants produced outcomes which will be incorporated into policy and procedures for case management as a billable modality.
8. Solutions Case Management program established in each region to assist TANF recipients in need of recovery services through interagency agreement with Economic and Employment Services (EES).
9. Program Outcome development process has become institutionalized across agencies statewide.
10. A complete rewriting of Program licensing standards.

#### Barriers

1. SRS is faced with shrinking resources for staff development.
2. As the dynamics of the agency changes, leadership at the State level also changes.
3. Lack of identification due to inadequate screening and assessment in collateral systems.

#### Future Plans

1. Oversight committee will review recommendations from workgroup on performance measures.
2. AAPS case management as a billable service will be implemented in 2006.
3. In 2006, funding rates and payment structure will be evaluated and determined.
4. Explore options to be able to institutionalize Kansas Leadership Institution.
5. Convene 2nd Kansas Leadership Institution.

#### **Connecting Services and Research**

This key direction concentrates on the importance of the field use research findings to develop effective, evidence-based practices and to set standards for the purpose of improving services and better serving clients dealing with substance abuse. Strategies include methods for expanding collaborative partnerships between the drug abuse research community and the community-based practitioner.

#### Accomplishments

1. Connecting services to Research Committee identified four “best practices” to train counselors: Motivational Interviewing, 12 step Facilitation, and Relapse Prevention.
2. System and client performance measures identified.
3. AAPS website expanded and updated as a tool for information dissemination.
4. CSR produced three newsletters which identified simple “best practices” for counselors.
5. AAPS leadership has reinforced the use of electronic technology to facilitate increased and timely communication with the field.
6. Conference calls for meetings have increased in lieu of staff traveling to meeting sites.
7. AAPS worked with Children and Family Services (CFS) in developing alcohol and drug training curriculum criteria for child welfare training for staff and Foster Care parents.
8. ASI Training of Trainers, supported by CSAT, has resulted in more effective use of the ASI as a treatment planning tool and increased fidelity regarding client outcome evaluation.

9. Person centered strengths-based case management training has been offered across the state in every region - mandated for those individuals who bill for case management.
10. Motivational Enhancement training provided regionally.

#### Barriers

1. Agency turnover makes it difficult to move forward with staff training
2. State staff turnover and hiring freeze.
3. Competing training priorities for agencies as different funding streams require different skills and knowledge.

#### Future Plans

1. AAPS will evaluate the merits of pursuing 12 steps facilitation and relapse prevention as future training initiatives.

#### **Addressing Workforce Issues**

The focus of this key direction is to increase the knowledge and skill and available pool of the alcohol and drug abuse workforce to treat these issues. Topics of discussion included education and training, credentialing and supply, demand and distribution of the workforce.

#### Accomplishments

1. College/University curriculums have been standardized based on TAP 21 across the State.
2. New AAPS credentialing requirements for counselors have been fully implemented as of January 2004.
3. Clinical supervision training based on the TAP 21 was initiated statewide.
4. The Kansas Leadership Institute sponsored by MATTC initiated December 2004. Ten protégé and mentors were identified.
5. KCC has adopted the Recognition for Counselors and Providers framework.
6. One hundred individuals have chosen to pursue the “test out” option to become AAPS credentialed resulting in an influx of clinically licensed individuals who are also AAPS credentialed.
7. Results from the workforce survey results identified what training needs counselors perceived they have and what training the workforce needs to perform their work more effectively.

#### Barriers

1. Workforce is aging out quicker than younger replacements.
2. Shortage of available workforce in rural areas.

#### Future Plans

1. AAPS will continue to work closely with KADSPA regarding strategies for improving the skill level and retention of the workforce.
2. An internal workforce committee will examine the state’s workforce needs and make recommendations to AAPS leadership.
3. Future training will be developed to support TAP 21's identified core competencies.

## ***Prevention Strategic Directions***

In January 2005, the Substance Abuse and Mental Health Services Administration (SAMHSA) disseminated nationally their Strategic Prevention Framework which comprises five steps. The Kansas prevention framework is illustrative of the infrastructure and processes identified at the national level. The following steps as outlined by the SAMHSA framework are:

- Step 1 Profile population needs, resources, and readiness to address needs and gaps.
- Step 2 Mobilize and/or build capacity to address needs
- Step 3 Develop a Comprehensive Strategic Plan
- Step 4 Implement evidence-based prevention programs, policies and practices and
- Step 5 Monitor, evaluate, sustain, and improve or replace those that fail.

This framework highlights SAMHSA's intent to enable States and communities to build a prevention infrastructure. SAMHSA had indicated resources have been expanded for the States and communities beyond programs, policies, and practices to include the focus on infrastructure development and sustain-ability.

### **Enhancing State Infrastructure Through Capacity Building**

The focus of this strategic direction is on relationships and partnerships between various state agencies engaged in prevention. The discussion centered on building capacity of those state agencies to address the issues around substance abuse prevention.

#### **Accomplishments**

1. AAPS providers and the Kansas Prevention Liaison from the Southwest Center for the Application of Prevention Technology (SWCAPT) were co-trained with school-based prevention staff to deliver regional trainings throughout the state to assist school districts to expand the implementation of tested-effective programs, policies, and practices in the utilization of Safe and Drug Free Schools and Communities funding.
2. SRS and AAPS collaborated with the SWCAPT to facilitate an interagency team in the development of an interagency workforce development plan to include all state agencies engaged in prevention.
3. Prevention Infrastructure partners from Kansas Family Partnership and Regional Prevention Centers collaborated with Department of Health and Environment (KDHE), Department of Revenue/Alcoholic Beverage Control (KDOR/ABC), and Tobacco Free Kansas Coalition (TFKC) to develop retailer education packets to address youth access to tobacco and promote compliance with the Synar Amendment.
4. State agency Secretaries from SRS, KDOR/ABC, and KDHE co-signed an introductory letter to promote retailer involvement in controlling youth access to tobacco.
5. AAPS will convene a work group to address youth access to tobacco and the State's compliance with the Synar Amendment.

6. SRS, AAPS, and its data contractors have been active participants in a multi-agency survey collaboration group charged with reviewing school-based surveys administered by state agencies in Kansas.
7. An overview of the updated Communities That Care process was provided to prevention staff at the Juvenile Justice Authority to promote resource sharing across state agencies.
8. A common prevention framework was promoted through a proposal to the Substance Abuse and Mental Health Services Administration (SAMHSA) for a Strategic Prevention Framework State Incentive Grant. While multiple state agency partners supported the SRS application, the proposal was not funded.

#### Barriers

1. A reduction in prevention staff and change in prevention leadership at AAPS and other state agencies has delayed progress on specific tasks while partnerships and relationships are re-established.

#### Future Plans

1. Prevention Team Leader and Kansas Prevention Liaison will continue to strengthen relationships with other state agencies engaged in prevention.
2. Kansas Prevention Liaison will work to expand partnerships through regional training and technical assistance resources.
3. SRS/AAPS will coordinate the development of a Strategic Prevention Framework State Incentive Grant proposal for funding to support infrastructure development for the Kansas Planning Framework.

#### **Leading and Enhancing Change within the State Agency**

This strategic direction addresses strategies for the state substance abuse agency to provide leadership and change within the substance abuse infrastructure. Discussions highlight plans for the development of this infrastructure to meet the changing needs in prevention.

#### Accomplishments

1. Quarterly prevention infrastructure meetings were initiated in FY03 and continue presently.
2. Professional learning communities were outlined for the infrastructure's leadership in February 2005.
3. A Communications Committee was formed in early FY04.
4. Addiction and Prevention Services Regional Consultant positions were hired to provide substance abuse specific resources within each area SRS office.
5. Regional Prevention Centers with support and leadership from the University of Kansas Work Group on Community Development and Health Promotion (KUWG) completed a case study of one coalition's actions and accomplishments as related to achievement of prioritized outcomes.
6. KUWG and RPCs submitted a proposal to present case study findings at the National Prevention Network Prevention Research Conference.

#### Barriers

1. Reduction in prevention staff has been a barrier to new initiatives.

#### Future Plans

1. Professional development opportunities will be expanded based on the completed workforce needs assessment.
2. An implementation plan will be facilitated to ensure integration of strategies for successful learning communities into the operating practices of the prevention infrastructure.
3. Opportunities to contribute to the growing body of prevention research will be provided to Kansas prevention professionals via state and national presentations based on case study and participatory evaluation findings.
4. AAPS prevention staff will participate and assist in coordinating resources to support the needs assessment process outlined for SRS's internal prevention initiative.
5. The SWCAPT Liaison will provide technical assistance to prevention program developers in Kansas to achieve national recognition as a tested-effective program.
6. AAPS will coordinate adequate resources for implementation of professional development opportunities identified in the Workforce Development Plan.
7. AAPS will provide leadership and resources to facilitate ongoing infrastructure development through chartered work groups that will provide opportunities, skills and recognition for prevention professionals at all levels in planning, implementation, and evaluation of best practices.

#### **Outcomes and Accountability**

This strategic direction addresses the evaluation and measurement of the results of prevention efforts in the state. The identification of the strengths of state, community and program level evaluation and methods to strengthen the prevention measurement process are included.

#### Accomplishments

1. Regional Prevention Centers were provided training by the state's data contractor regarding the application of Kansas Communities That Care Student Survey data in the prevention planning process. Technical assistance is available to prevention infrastructure and communities regarding access to student survey data.
2. SRS has partnered with the Department of Education to collaborate on a grant-funded project from the Office of Safe and Drug Free Schools called "Kansas Partnership for Management and Improvement of Drug and Violence Prevention Programs."
3. Training and technical assistance on the ODSS is provided regionally on a regular basis to build capacity of RPC staff to document coalition and RPC actions and accomplishments.
4. 145 community-based coalitions were identified by RPCs through an assessment and information gathering process in January 2004.
5. Adolescent treatment data was integrated into a community assessment report to be provided online for all Kansas counties.

#### Barriers

1. Limited resources are available to expand or develop new data management systems.

2. Limited human and fiscal resources have prohibited the engagement of new research partners.
3. Program level evaluation capacity is limited due to AAPS funding priorities to develop and support the primary infrastructure that guides the application of prevention science in Kansas communities.

#### Future Plans

1. Data systems will be evaluated and modified on an ongoing basis to ensure that data collection, management, and reporting functions meet the needs of key stakeholders and community-based prevention planners.
2. AAPS and its contractors will examine prevention and treatment trends to identify emerging trends.
3. Archival data will be integrated into a more user-friendly online data reporting format and connected to risk and protective factor measures within the student survey.

#### **Evidence-based Strategies, Models and Interventions**

This strategic direction concentrates on evidence-based practices needed to strengthen the prevention programs and policies in the state. Strategies for increasing the use of evidence-based prevention practices in the state and methods for community-based providers in regard to best practice implementation are included.

#### Accomplishments

1. Prevention infrastructure partners were trained as Communities That Care process facilitators in July 2004 and March 2005 to build capacity to facilitate community plans that are outcomes-based and focused on tested-effective programs, policies, and practices.
2. Tools for selection of tested-effective programs, policies, and practices were identified through the Western CAPT and information was disseminated to the prevention infrastructure.
3. A summary of nationally recognized sources for tested-effective prevention programs was compiled by Greenbush in February 2005, which included criteria for selection and how and where to access detailed information was disseminated to the prevention infrastructure leadership.

#### Barriers

1. Clarification of the objectives outlined in the strategic plan will expand progress in this area

#### Future Plans

1. A professional development opportunity will be convened by June 30, 2005, to build the capacity of the prevention infrastructure to access and utilize existing tools to select evidence-base programs, policies, and practices.
2. The SWCAPT Liaison will provide technical assistance to prevention program developers in Kansas to achieve national recognition as a tested-effective program.

3. AAPS will engage infrastructure and state agency partners in examination of proven strategies, models, and frameworks that will further the application of prevention science in Kansas communities.
4. Ongoing professional development opportunities will be incorporated into the Workforce Development Plan to build the capacity, skills, and recognition for prevention professionals to identify and implement evidence-based programs, policies, and practices with fidelity in Kansas communities.

### **Workforce Development**

This strategic direction focuses on a process to strengthen the prevention workforce in the state. Strategies include assessing the prevention workforce, planning strategic training processing and promoting mentoring.

### **Accomplishments**

1. AAPS has incorporated a grant requirement since FY 2003 that all RPC staff will have individual staff training plans on file.
2. Skill standards for Kansas prevention professionals were completed by the Workforce Development Committee in FY 2004.
3. A workforce survey was developed by Greenbush with input from AAPS and the SWCAPT.
4. The Kansas Prevention Workforce Survey was administered online to 58 prevention professionals (81% response rate) and results have been compiled into an executive summary and detailed analysis examining responses from staff who have been in the field for 0-2 years, 3-5 years, and 6 or more years.
5. Kansas Family Partnership has assumed logistical responsibility to support the certification process for prevention professionals.
6. All infrastructure partners were engaged in a Process Facilitators Training and Communities That Care Orientation to build the capacity of the prevention workforce to serve Kansas communities.

### **Barriers**

1. Reduction in staff at AAPS has resulted in slower progress in completing a comprehensive assessment and professional development implementation plan.
2. Reduction in staff at AAPS has inhibited the State's capacity to engage university partners to integrate substance abuse-related programs into college studies or degree programs.

### **Future Plans**

1. The SWCAPT Liaison will facilitate the development of a uniform professional development plan format for all Kansas prevention professionals.
2. The Workforce Development Committee will review the results of the Kansas Prevention Workforce Survey and participate in the development of professional development strategies and an implementation plan to recruit, train, and retain a quality prevention workforce.
3. A new staff orientation and mentoring initiative will be incorporated into the overall workforce development plan.

4. Development of a multi-cultural strategic plan to ensure programs, procedures and policies are culturally sensitive.

## ACRONYMS

AAPS	Addiction and Prevention Services
ASI	Addiction Severity Index
CAPT	Center for the Application of Prevention Technology
CFS	Children and Family Services
CSAT	Center for Substance Abuse Treatment
CSR	Connecting Services to Research
EES	Economic and Employment Services
KAAP	Kansas Association of Addiction Professionals
KADSPA	Kansas Alcohol and Drug Service Provider Association
KCC	Kansas Citizens Committee on Alcohol and other Drug Abuse
KCPC	Kansas Client Placement Criteria
KDHE	Kansas Health and Environment
KDOR/ABC	Kansas Department of Revenue/Alcoholic Beverage Control
KUWG	University of Kansas Work Group on Community Department and health Promotion
MATTC	Mid America Addiction Technology Transfer Center
NTP	National Treatment Plan
RFP	Request For Proposal
RPC	Regional Prevention Centers
SAMHSA	Substance Abuse and Mental Health Services Administration
SWCAPT	Southwest Center for the Application of Prevention Technology

TAP

Technical Assistance Publication