



City of Lawrence

2013 Social Service Funding Application - Special Alcohol Funds

Applications for 2013 funding must be complete and submitted electronically to the City Manager's Office at ctoomay@lawrenceks.org by 5:00 pm on Friday, May 4, 2012.

General Information: Each year, the City Commission considers requests for the allocation of dollars to a number of agencies that provide services benefiting the Lawrence community. These funds are to be used pursuant to the goals of the City Commission, which can be found below:

- **ECONOMIC DEVELOPMENT:** Promoting the economic development of Lawrence to provide varied work and business opportunities.
- **PLANNED GROWTH:** Encouraging growth that protects our environment, neighborhoods, and cultural features while benefiting all of our citizens.
- **COMMUNITY BUILDING:** Creating social capital and celebrating our heritage.
- **ENVIRONMENT ISSUES:** Integrating the environment into our decisions as we work towards a sustainable city.
- **NEIGHBORHOOD QUALITY:** Improving the livability of all Lawrence neighborhoods.
- **TRANSPORTATION:** Improving access for all citizens.
- **DOWNTOWN DEVELOPMENT:** Enhance the vitality of downtown while maintaining it as a unique community treasure.
- **SERVICE DELIVERY:** Provide excellent city services consistent with resources available.

Applications will be reviewed by the Social Service Funding Advisory Board at meetings held from 2:00 to 6:00 p.m. on May 16 and May 23. Applicants are asked to make a contact person available by phone in case questions arise. Following their review, the Advisory Board will forward recommendations for funding to the City Commission.

Recommendations will be based upon the following criteria:

- availability of city funds
- the need demonstrated through the agency's application
- the stated objectives of the applicant's program
- alignment of the program with the City Commission Goals
- the efforts to collaborate and avoid duplication of service demonstrated through the application
- outcomes that move program participants from total dependency toward measurable levels of independence
- ability to measure progress toward the program objectives and the City Commission Goals
- past performance by the agency in adhering to funding guidelines (as appropriate)

The final decision regarding funding will be made by the City Commission when they adopt the Annual Operating and Capital Improvement Budget in August.

Special Alcohol Tax Information. Below are descriptions of descriptions of the categories of programs that may be funded with Special Alcohol Tax. An organization may apply in as many categories as it chooses.

Prevention. Activities related to prevention are described below.

- *Universal Prevention:* A universal prevention strategy is one that is desirable for all members of a given population. The goal of the universal prevention is to deter the onset of substance abuse by providing all individuals with information and skills needed to prevent the problem.
- *Selective Prevention:* Selective prevention strategies target subgroups that are believed to be at greater risk than others. Risk groups may be identified on the basis of biological, psychological, social or environment risk factors known to be associated with substance abuse.

- *Indicated Prevention:* The purpose of indicated prevention is to identify individuals who exhibit early signs of substance abuse and associated behavior and to target them with special programs. In the field of substance abuse, an example of an indicated prevention strategy might be for high school students who experience truancy, failing grades and depression.

Treatment & Recovery. Treatment and recovery related activities are described below:

- *Assessment/Evaluations:* Assessment and Evaluation is the process of identifying the extent of a substance abuse problem through the process of background assessments and interviews. The assessment and evaluation stage allows a clinician to make an appropriate diagnosis and treatment placement.
- *Therapy:* This section of the continuum includes inpatient, outpatient or educational processes to assist the client in addressing substance abuse issues.
- *Aftercare:* Aftercare includes efforts to reintegrate clients into a normal living situation and support a substance free existence. Aftercare may also include on-going therapy with clinical, family support and self-help programs.

Intervention. Activities related to intervention include initial assessment of individuals who have problems with substances and making appropriate referrals. Intervention also includes efforts to interrupt the use of substances in order to connect the client with proper treatment resources.

Coordination. Comprehensive and coordinated efforts provide multiple benefits when communities address alcohol and other drug problems. A community-wide approach is effective because:

- 1) It affects the entire social environment, which allows communities to have strategic approach to addressing norms, values, and policies as well as changing conditions that place children at risk.
- 2) It develops broad base of support and teamwork which allows all agencies involved to fully understand their contribution to the overall single strategy to address issues.
- 3) It brings results that are long lasting by integrating programs, services, and activities through existing organizations and extends the influence of all programs.

Other. Programs, policies or practices deemed appropriate according to Charter Ordinance 33.

Other Information. Collaboration and/or coordination between organizations is highly recommended and multi-agency proposals to address an identified community problem are encouraged. Programs should have research based effective strategies or “promising approaches.” All programs must have goals with measurable outcomes.

PLEASE NOTE THAT FUNDS WILL BE DISBURSED ACCORDING TO THE FOLLOWING SCHEDULE UNLESS OTHERWISE AGREED TO IN WRITING:

- **FIRST HALF OF FUNDS WILL NOT BE DISBURSED BEFORE APRIL 1**
- **SECOND HALF OF FUNDS WILL NOT BE DISBURSED BEFORE OCTOBER 1**

The budget picture from the Kansas Legislature creates uncertainty as to the status of the local portion of the alcohol liquor tax. If the Legislature decides to eliminate or reduce the local portion of this tax, it will impact the City’s ability to fund programs. The City of Lawrence is proceeding with the Request for Proposal process and accepting applications for the alcohol tax revenues, with the understanding that funding levels, if any, are unknown and potentially subject to reductions by the State Legislature.

Questions? Contact Casey Toomay, Budget Manager at ctoomay@ci.lawrence.ks.us or 785.832.3409.



City of Lawrence

2013 SOCIAL SERVICE FUNDING APPLICATION – SPECIAL ALCOHOL

SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: DCCCA, Inc.

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

Primary Contact Information (must be available by phone 5/16 and 5/23 from 2 p.m. to 6 p.m.)

Contact Name and Title:Lisa Carter, Program Coordinator

Address: 1739 E 23rd St Lawrence, KS 66046

Telephone: 785 830 8238 Fax: 785 830 8246

Email: lcarter@dccca.org

SECTION 2. REQUEST INFORMATION

The criteria for each application questions are explained below.

A. Amount of funds requested from the City for calendar year 2013.

Program should fit within one of the established categories.

Prevention \$
 Treatment \$41,004
 Intervention \$
 Coordination \$
 Other \$

B. 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. Evening groups 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 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. Adult groups meet two hours week.

C. 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 2006¹.
- An estimated 11,113 adults in Douglas County have an alcohol and/or drug abuse or dependence problem, and 9,300 need treatment².
- 96 adolescents from the Lawrence Public Schools were referred for alcohol and drug treatment, but only 13 received an evaluation³.
- Bookings into the Douglas County Jail for alcohol and drug related offenses increased 20% from 2008 to 2009⁴.
- 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 2011 Kansas Communities that Care survey provided the following facts about Douglas County youth in grades 6, 8, 10 & 12:

- 21% drank alcohol in the past 30 days
- 10% smoked marijuana in the past 30 days.
- 8% acknowledged being drunk or high while in school at least once in the last year.
- 10% engaged in binge drinking in the last two weeks
- 25% reported having a family member with a serious alcohol or drug problem.
- 40% reported a close personal friend drank alcohol
- 30% reported a close personal friend had used marijuana

The 2011 Kansas Communities that Care survey provided the following facts about Lawrence youth in grades 6, 8, 10 & 12:

- 20% drank alcohol in the past 30 days
- 11% smoked marijuana in the past 30 days.
- 9% acknowledged being drunk or high while in school at least once in the last year
- 10% engaged in binge drinking in the last two weeks
- 24% reported a family member with a serious alcohol or drug problem.
- 40% reported a close personal friend drank alcohol
- 32% reported a close personal friend had used marijuana

Lawrence Outpatient provided treatment services to approximately 550 adolescents, adults, and KU students in FY2011. As the local and state economies decline, those referred for 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

¹ Lawrence Memorial Hospital

² Kansas Comprehensive Treatment Needs Assessment

³ USD 497

⁴ Douglas County Sheriff's Office, Corrections Division, Re-Entry Program

Treatment Services will continue its practice of using Alcohol Tax Funds to provide services for those who would otherwise be unable to access them.

D. 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 FY2011 suggests Lawrence Outpatient's treatment approach has a positive impact.

- 95% of individuals who completed the program no longer drank alcohol.
- 91% of individuals who completed the program no longer used drugs.
- 43% of individuals who completed the program were employed at the time of discharge.
- 99% of individuals who completed the program had safe and stable housing at the time of discharge.

E. 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 participates 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

F. Describe how your agency is capable of implementing 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, nationally accredited by the Council on Accreditation, 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 Cenpatco (Healthwave). Program staff are state licensed as alcohol and drug abuse counselors, and many hold additional professional licenses as social workers or counselors, issued by the Behavioral Sciences Regulatory Board.

DCCCA has been strategic in its efforts to expand our historical revenue streams (public dollars) and client population. Building a staff team that can receive third party insurance reimbursement, achieving national accreditation, and reducing wait times for treatment were intended to make our Lawrence treatment programs more attractive to managed care companies. Outreach has historically focused on a client base that is low income, indigent, involved with the corrections system, or otherwise linked to state adult and child welfare systems. During the past year, marketing and collaboration initiatives have shifted to the business community, primary medical care practices, and local schools to increase the percentage of clients who have third party insurance coverage and/or Medicaid. We have been successful in joining managed care provider panels, and continue efforts to expand the list of payers who will purchase our services. While we are confident that our revenue will diversify through these efforts over time, DCCCA will not lose sight of our mission to help those who otherwise could not receive needed treatment. Public dollars from federal, state, county and city partners are necessary to ensure these vulnerable community residents are served

G. 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 program has a long history of serving indigent and low income residents, resulting in revenues that are less than expenses and negative ending balances. On a consolidated basis, DCCCA has historically supplemented this program's deficit with excess revenues from other service lines

The following data reflects revenue from each primary funding source July 1, 2011 through March 31, 2012, and their eligibility requirements:

Addiction/Prevention Services (client income must be 200% of poverty)	\$145,794
Private Pay/Insurance	\$61,105
Medicaid (client has Medicaid 19 insurance coverage)	\$91,136
Alcohol Tax Fund (City of Lawrence)	\$41,000
Senate Bill 123 (client is referred by the Kansas Sentencing Commission)	\$1,250
Federal Parole and Probation	\$2,814
SB (67) DUI	\$4,360
Lawrence Housing Authority	\$4,296
Contributions and miscellaneous	\$75

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 2013, 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	\$31,542
1 full time Substance Abuse Counselor (existing)	
Fringe Benefits	\$ 9,462
30% of salary	
Total Request	\$41,004

SECTION 3. LOGIC MODEL

Please complete the Logic Model below.

ASSESSMENT DATA	CITY COMMISSION GOAL(S)	PROGRAM GOALS/ OBJECTIVES	TARGET GROUP	STRATEGIES	PROCESS OUTCOMES	BEHAVIORAL OUTCOMES	IMPACT OUTCOMES
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<p>An estimated 9300 adults in Douglas County are in need of substance abuse treatment.</p> <p>Lawrence youth in grades 6, 8, 10 & 12:</p> <ul style="list-style-type: none"> • 20% drank alcohol in the past 30 days • 11% smoked marijuana in the past 30 days. <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>The City Commission Goal(s) related to the program.</p> <ul style="list-style-type: none"> • economic development • planned growth • community building • environment issues • neighborhood quality • transportation • downtown development • service delivery 	<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"> -Education -Individual, Group or Family Counseling -Relapse Prevention -Case Management -Continuing Care <p><u>Level II Outpatient</u></p> <ul style="list-style-type: none"> -Intensive Treatment 	<p>DCCCA will provide services to approximately 600 individuals during CY2013.</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>
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