

The image shows a woman, a dog, and a man running in a field at sunset. The woman is on the left, the dog is in the middle, and the man is on the right. They are all silhouetted against a bright, orange and yellow sky. The text is overlaid on this image.

Idaho Substance Use Disorder Prevention and Treatment System

A Collaborative Strategy for 2008-2012

MISSION

The Idaho Substance Use Disorder Prevention and Treatment System (System) provides state-wide, comprehensive and coordinated funding, programs and services to Idaho citizens within and outside of the criminal justice system. The System promotes prevention through education, improved quality of life through treatment, prevention of illicit substance use, manufacture and transportation, and correctional intervention and treatment.

January 2008

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INTRODUCTION

Background

The Office of Drug Policy opened for business in January 2007, with the following mission pursuant to Idaho Code Section 67-821:

“There is hereby established in the office of the governor the ‘Office of Drug Policy.’ The administrator of the office of drug policy shall be the official in the state designated to oversee and execute the coordination of all drug and substance abuse programs within the state of Idaho...The administrator shall act as chairperson of the interagency committee on substance abuse prevention and treatment, as created in Section 39-303...”

Idaho Code Section 39-303 describes the mission of the interagency committee as follows:

The purpose of the interagency committee is to focus on statewide efforts to address substance abuse by assessing statewide needs, developing a statewide plan, and coordinating and directing efforts of all state entities that use public funds for efforts to address substance abuse.

Through the course of working together in 2007, the Interagency Committee on Substance Abuse Prevention and Treatment (ICSA or Committee) determined that the multitude of pieces and parts of the substantial state-wide effort directed towards prevention and treatment can be best described as the **Idaho Substance Use Disorder Prevention and Treatment System** (System).

Using the Strategic Plan

While of primary importance to those entities that will be implementing it, the strategic plan is also intended for use by the citizens of Idaho as a means to communicate actions that are planned and underway. The plan contains seven principle components:

1. **VISION:** A description of what the System will look/feel/operate like in the future.
2. **MISSION:** A brief description of the purpose of the System; its “reason for being.”
3. **GOALS:** The overall accomplishments the System should achieve by the year 2012.
4. **OBJECTIVES:** Specific, measurable, acceptable, realistic, and timely accomplishments within each goal.
5. **ACTIONS:** How the objectives will be achieved, including responsibility and timelines.
6. **IMPLEMENTATION PLAN:** Describes the objectives and actions that will be accomplished within the three planning intervals, including responsibilities and timeframes.
7. **MONITORING PLAN:** Measurement criteria in terms of outputs and outcomes are established for each objective, and provide the basis for the strategic monitoring plan.

Entities implementing the strategic plan will incorporate their assigned action items into their own individual operating plans. ICOSA will be responsible for periodically assessing the implementation and effectiveness of the actions and objectives as they are completed.

Commitment to Implementation

The Idaho Substance Use Disorder Prevention and Treatment System is coordinated and directed by the Office of Drug Policy, in collaboration with the Interagency Committee on Substance Abuse Prevention and Treatment (ICOSA). The entities which comprise ICOSA are fully committed to a leadership role in implementing those particular actions within the scope of their respective mission, expertise and resources.

On the surface, ICOSA offers this 5-year strategic plan for the Idaho Substance Use Disorder Prevention and Treatment System in response to their statutory obligation. More importantly, however, this strategic plan reflects the spirit of collaboration and optimism at this unique point in time when such collaboration seems truly possible and urgently needed to address the escalating human and financial costs of substance use disorders throughout the State of Idaho.



VISION AND MISSION

Vision

The Idaho Substance Use Disorder Prevention and Treatment System (System) is a national model for state-wide collaboration between private and public partnerships in substance use disorder awareness, research and client and family services. The System successfully promotes prevention through education, and improved quality of life through treatment. The System also effectively disrupts illicit substance use, manufacture and transportation in Idaho, and supports adult and juvenile correction functions that promote public safety and reduce recidivism.

The System addresses individual, community and tribal needs state-wide for effective and accessible:

- Prevention¹
- Education
- Assessment
- Early intervention
- Treatment
- Recovery support services
- Post-treatment support

The System strives to maintain an uninterrupted, well-coordinated continuum of services to clients and their families within and outside of the criminal justice system. This results in:

- A meaningful improvement in *community safety*;
- *Genuine and lasting behavioral change*; and
- An *increased sense of personal responsibility*.

Services meet or exceed industry standards for excellence and cost-effectiveness. The System, coordinated and directed by the Office of Drug Policy in collaboration with the Interagency Committee on Substance Abuse Prevention and Treatment, provides accountability to local, state, federal, and tribal governments, and Idaho citizens through diligent measurements, monitoring and reporting. The System maintains its relevance and utility by responding and adapting to changing conditions over time.

Mission

The Idaho Substance Use Disorder Prevention and Treatment System (System) provides state-wide, comprehensive and coordinated funding, programs and services to Idaho citizens within and outside of the criminal justice system. The System promotes prevention through education, improved quality of life through treatment, prevention of illicit substance use, manufacture and transportation, and correctional intervention and treatment.

¹ See Appendix 1 – Glossary for a definition of these terms

GOALS AND OBJECTIVES

Goal 1: State-wide, coordinated law enforcement strategies curb the flow of illicit drugs into Idaho.

Objective 1a: Local and state law enforcement agencies will establish regionally-coordinated intelligence gathering, sharing and dissemination to local, state and federal law enforcement agencies.

Objective 1b: ICSA will collaboratively develop comprehensive education programs to increase knowledge to all criminal justice professionals, local leadership and other community partners in the interdiction, enforcement and facilitation of community resources.

Objective 1c: Local and state law enforcement agencies, in collaboration with ICSA, will identify and access stabilized funding sources for the entire law enforcement continuum from interdiction to enforcement.

Objective 1d: Local and state law enforcement agencies will develop a focused law enforcement approach to suppress organized criminal elements whose primary goal is the import and delivery of illicit drugs.

Goal 2: Regionally-cooperative initiatives broaden intervention and treatment services at adult/adolescent detention facilities.

Objective 2a: Local and state correctional agencies and detention facilities, in collaboration with ICSA, will collaboratively develop and provide early intervention and treatment programs for adult and juvenile populations.

Objective 2b: ICSA will collaboratively develop shared resource methods to ensure effective implementation and delivery of intervention and treatment services to adult and juvenile populations in correctional and detention facilities.

Goal 3: Primary and secondary education institutions, and cooperating agencies, deliver effective, coordinated and consistent substance abuse prevention education to all Idaho students K-12.

Objective 3a: The Department of Education, in collaboration with ICSA, will identify and implement core best-practice and outcome measures for prevention services in K-12 throughout the state.

Objective 3b: The Department of Education, in collaboration with ICSA, will implement cooperating agency agreements for school-based prevention education with appropriate ICSA agencies and institutions on an ongoing basis.

Goal 4: Evidence-based, substance use disorder prevention services are accessible to all incorporated Idaho communities.

Objective 4a: The Department of Health and Welfare, in collaboration with ICOSA, will identify evidence-based prevention practices for substance use disorder prevention.

Objective 4b: The Department of Health and Welfare, in collaboration with ICOSA, will assure a provider network to balance service availability and funding throughout the state.

Objective 4c: The Department of Health and Welfare, in collaboration with ICOSA, will assure training/certification programs in evidence-based prevention practices and provide opportunities for participation in each DHW region throughout the state.

Goal 5: A state-wide, standardized assessment tool for substance use disorders is available and administered by trained interviewers.

Objective 5a: The Office of Drug Policy will take the appropriate measures to identify GAIN as the approved state-wide standardized assessment tool.

Objective 5b: The Office of Drug Policy, in collaboration with ICOSA, will ensure that agencies and institutions administer GAIN to at least at the 'Q' level to 100% of their clients requiring public funding for treatment.

Goal 6: Publicly funded, outpatient treatment services are accessible within 30 minutes for 95% of clients throughout Idaho, and publicly funded inpatient services are available in every integrated service area. Substance use disorder services are also accessible at all local and state detention and correctional facilities².

Objective 6a: The Department of Health and Welfare, in collaboration with ICOSA, will identify core evidence-based practices (or best practices) by population.

Objective 6b: The Department of Health and Welfare, in collaboration with ICOSA, will develop a provider network to balance availability and funding in the state.

Objective 6c: The Department of Health and Welfare, in collaboration with ICOSA, will develop training/certification programs in evidence-based treatment programs in each region. Each year the Best Practices committee will select 2 programs to train and implement.

Objective 6d: The Department of Health and Welfare, in collaboration with the Idaho Department of Correction and Juvenile Corrections and county probation, will identify protocols to integrate treatment with probation services.

² There is a question whether this reference to substance use disorder services at detention and correctional facilities is necessary because it is addressed through Objectives 2a and 2b.

Goal 7: Clients and their families experience team case management, intervention, treatment and recovery as an uninterrupted, well-coordinated continuum of services.

Objective 7a: The Office of Drug Policy, in collaboration with ICSA, will develop statewide data protocols to enable System components to share, integrate and validate common case management data sets.

Objective 7b: The Department of Health and Welfare, in collaboration with ICSA, will develop a protocol for co-occurring treatment practices utilizing a “treatment team” approach.

Goal 8: A coordinated funding mechanism eliminating duplication exists for all System components.

Objective 8a: The Office of Drug Policy, in collaboration with ICSA, will document a protocol for coordinating and allocating substance abuse funds among receiving entities for the base budget and any new appropriations.

Objective 8b: The Office of Drug Policy, in collaboration with ICSA, will document a protocol for submitting a coordinated funding request, and for tracking fiscal obligations and payment.

Objective 8c: The Office of Drug Policy, in collaboration with ICSA and the Department of Administration, will develop contracts with consistent, standardized rates for substance use disorder services.

Goal 9: Standardized reporting protocol and system measurements provide accountability for efficient (fiscal) and effective (outcomes) use of substance use disorder services.

Objective 9a: ICSA will develop a statewide data protocol to share, integrate and validate common financial and outcome-based data.

Objective 9b: The Office of Drug Policy, in collaboration with ICSA, will define standardized tracking mechanisms and standardized reporting timelines.

Goal 10: Appropriate state-wide statutory authority and policies support the fiscal and operational needs of the System.

Objective 10a: The Office of Drug Policy will enact internal policies and procedures specific to their roles, responsibilities and statutory function.

Objective 10b: The Office of Drug Policy, in collaboration with the legislature and Governor, will annually review pertinent System-related IDAPA rules to determine relevance, barriers, and potential need for change.

Goal 11: The System promotes effective collaboration and coordination among public and private stakeholders.

Objective 11a: The Office of Drug Policy will develop and implement a System communication plan.

Objective 11b: The Office of Drug Policy will create a central clearinghouse for information related to System programs and services.

Objective 11c: The Office of Drug Policy, in collaboration with ICSA, will identify programs and practices that demonstrate effective private partnerships to address workforce job skills and employability.

IMPLEMENTATION PROCESS

Concepts

ICSA members consistently affirmed in the strategic planning process that the implementation and outcomes of the action items will be the only true measure of the success of this collaborative effort. The following concepts are critical to the success of implementation

- 1) **This document reflects a dynamic strategy. It will be assessed and updated annually as the annual action plan is implemented, or as new information affects the critical issues or action items identified in this strategy.**
- 2) Action item leads will coordinate with other agencies, organization and institutions who may already be working on similar actions so as not to duplicate effort, and to pool resources.
- 3) Detailed descriptions of what will be monitored, by whom, and by when, will be prepared prior to action item implementation.

Timing

The goals identified in this strategic plan will be accomplished by June 30, 2012. The objectives contained in this plan vary, however, in their sequence of initiation and the amount of time needed for their accomplishment. To address this, the ICSA identified the 'interval' in which the objectives would be initiated and completed.

Thus, while many objectives are initiated in year one, the accomplishment of their attendant action items may extend throughout the five-year implementation period. In addition, the initiation of some objectives is deferred until a later interval to balance workload and/or to acknowledge that certain objectives must be achieved before others are initiated. The following table displays the initiation and completion intervals for all goals and objectives:

Table 1: Timing of Goals and Objectives

Goal	Objective	Interval 1 1.1.2008 - 6.30.2009	Interval 2 7.1.2009 - 6.30.2011	Interval 3 7.1.2011- 6.30.2012	Comments
1	a	Initiated		Completed	
	b		Initiated/ Completed		
	c	Initiated		Completed	
	d	Initiated/ Completed			
2	a	Initiated	Completed		Initiate with pilot programs in intervention and treatment; complete in Interval 2
	b	Initiated	Completed		Initiate with pilot programs in intervention and treatment; complete in Interval 2
3	a	Initiated/ Completed			
	b	Initiated/ Completed			
4	a	Initiated/ Completed			
	b	Initiated/ Completed			
	c		Initiated/ Completed		
5	a	Initiated/ Completed			
	b	Initiated/ Completed			
6	a	Initiated/ Completed			Review annually for appropriateness and impact on providers
	b	Initiated/ Completed			Review annually for appropriateness and impact on providers
	c		Initiated/ Completed		
	d	Initiated/ Completed			Review annually for appropriateness and impact on system
7	a		Initiated/ Completed		
	b		Initiated/ Completed		

Table 1: Timing of Goals and Objectives (cont'd)

Goal	Objective	Interval 1 1.1.2008 - 6.30.2009	Interval 2 7.1.2009 - 6.30.2011	Interval 3 7.1.2011- 6.30.2012	Comments
8	a	Initiated/ Completed			
	b	Initiated/ Completed			
	c	Initiated/ Completed			
9	a	Initiated		Completed	Initiate, but recognize it will take time to collect long-term data
	b	Initiated		Completed	Initiate, but recognize it will take time to collect long-term data
10	a	Initiated/ Completed			
	b	Initiated/ Completed			Annual review
11	a	Initiated/ Completed			
	b	Initiated/ Completed			Make it more robust in out-years; review regularly
	c			Initiated/ Completed	

Implementation Plan

Specific action items, leads and dates of completion have been identified for each objective slated for initiation in Interval 1. Appendix 3 contains a summary of the action items, organized sequentially by objective.

Some important points:

1. Only those objectives identified in as being initiated in Interval 1 (see Table 1, Timing of Goals and Objectives) have action items associated with them. If an objective appears to be missing from the table, it is because it is scheduled for initiation in Interval 2 or 3.
2. The person identified as the “lead” serves as the coordinator of the overall action item accomplishment. It is presumed that, in most cases, other people and entities will be involved in action item accomplishment.
3. The action items are summarized statements. It is expected that the leads will work with others involved to determine a more detailed set of steps required to complete the action item.
4. ICSA will conduct quarterly status checks with leads to monitor the implementation progress of the action items, and to make adjustments to the implementation plan as needed.

Monitoring Plan

The monitoring plan identifies how objectives will be measured in terms of outputs (measurable implementation) and outcomes (measurable effectiveness). The monitoring plan also identifies who has leadership responsibility for the measurement, and when the measurement is expected to occur. In most cases, outputs will be easily measured following objective completion. Outcomes, however, measure the effectiveness of the objectives, i.e. their contribution towards long-term, positive trends. In most cases, measurements of outcomes will take place one to three years beyond objective completion.

Some important points:

1. Only those objectives identified in as being initiated in Interval 1 (see Table 1, Timing of Goals and Objectives) have monitoring measurements associated with them.
2. The person identified as the “lead” for monitoring an objective’s outputs and outcomes may not be the same entity involved in implementing actions associated with the objective. While in some cases entities other than the lead will be involved in measurements, the lead is responsible that the measurement is taken accurately and on time.
3. All monitoring measurements will ultimately be provided to ICSA through semi-annual reports.

Appendix 4 contains the monitoring plan.

APPENDICES

Appendix 1: Glossary

Appendix 2: Acronyms

Appendix 3: Interval 1 Implementation Plan

Appendix 4: Monitoring Plan

APPENDIX 1: GLOSSARY

Prevention³

Prevention pertains to activities designed to prevent the use of alcohol, tobacco and drugs by providing programs and increasing opportunities for positive and law-abiding behavior, which includes various levels and types of approaches.

Education³

Education pertains to activities designed to provide pertinent information on aspects of alcohol, tobacco or drug use and abuse.

Assessment³

Assessment is the process used to determine the nature and extent of a candidate's substance use and its impact on the individual's quality of life. Assessment results guide judgment of the suitability for placement in a specific alcohol, tobacco or drug treatment modality or setting.

Early intervention³

Intervention pertains to activities designed to intercede in and address behavior that leads to or may result from alcohol, tobacco and drug use or abuse.

Treatment⁴

Treatment pertains to the broad range of emergency, outpatient, intensive outpatient and inpatient services and care, including diagnostic evaluation, medical, psychiatric, psychological, and social service care, vocational rehabilitation and career counseling, which may be extended to alcoholics and intoxicated persons and/or drug addicts.

Recovery support services⁴

Recovery support services are those ancillary, non-clinical services needed for a client to maintain substance abuse or addiction recovery. These services may include transportation, child-care, drug testing, safe and sober housing, and care management.

Post-treatment support⁴

Post-treatment services are designed to meet the ongoing needs of the recovering individual.

Substance Use Disorders

Substance Use Disorders include Substance Dependence and Substance Abuse, according to the DSM-IV. Substance Use Disorders are one of two subgroups of the broader diagnostic category of Substance-Related Disorders,⁵ and result in the misuse or excessive use of alcohol or other drugs or substances. Substance use disorders are characterized by behaviors that include one or more of the following: impaired control over drug or alcohol use, compulsive use, continued use despite harm, and craving⁶.

³ From *Continuum of Services*, a list of definitions developed by the Governor's Interagency Substance Abuse Task Force, dated January 2001

⁴ From Idaho Code, Section 39-302

⁵ From the American Society of Addiction Medicine Patient Placement Criteria Second Edition Revised

⁶ Adapted from definitions for substance abuse and addiction from Idaho Code, Section 39-302

APPENDIX 2: ACRONYMS

The following are acronyms commonly used by those within the Idaho Substance Use Disorder Prevention and Treatment System, and that may appear in this strategic plan:

DFM = State of Idaho Division of Financial Management

FMC = Financial Management Committee (a subcommittee of ICSA)

IAC = Idaho Association of Counties

IACJJA = Idaho Association of County Juvenile Justice Administrators

ICOPA = Idaho Chiefs of Police Association

ICSA = Interagency Committee on Substance Abuse Prevention and Treatment

IDCJC = Idaho Criminal Justice Commission

IDHW = Idaho Department of Health and Welfare

IDJC = Idaho Department of Juvenile Corrections

IDJJC = Idaho Juvenile Justice Commission

IDOA = Idaho Department of Administration

IDOC = Idaho Department of Correction

ISA = Idaho Sheriffs Association

ISP = Idaho State Police

LSO = State of Idaho Legislative Services Office

ODP = State of Idaho Office of Drug Policy

OPE = State of Idaho Office of Performance Evaluation

RAC = Regional Advisory Committee

SDE = Idaho State Department of Education

SUD = Substance Use Disorder

APPENDIX 3: ACTION ITEMS *(in sequential order by objective)*

Goal	Objective	Actions	Lead	Completed By
1	1a	Attend ICOPA and ISA meetings, suggest subcommittees to look at issues, identify obstacles and develop plan.	ISP Director	6/30/2009
		Serve as central point to organize/disseminate information and develop plan.	ISP Director	6/30/2009
		Develop a liaison with IDOC Gang Coordinator.	ISP Director ICOPA President ISA President	6/30/2009
		Gather gubernatorial and legislative support for any potential legislative solutions.	ISP Director ICOPA President ISA President	9/30/2009
		Present/support any necessary legislation to address identified obstacles.	ISP Director ICOPA President ISA President	6/30/2010
		Put into place the network for regionally-coordinated intelligence gathering, sharing and dissemination.	ISP Director ICOPA President ISA President	6/30/2012
	1c	Attend ICOPA and ISA meetings, suggest subcommittees to look at issues, identify obstacles and develop plan.	ISP Director	6/30/2009
		Serve as central point to organize/disseminate information and develop plan.	ISP Director	6/30/2009
		Gather gubernatorial and legislative support for any potential legislative solutions.	ISP Director ICOPA President ISA President ODP Administrator	6/30/2010
		Present/support any necessary legislation to address identified obstacles and create stable, long-term funding.	ISP Director ICOPA President ISA President ODP Administrator	6/30/2012

	1d	ISP will spearhead a state-wide law enforcement summit to bring together all Idaho law enforcement agencies to identify and develop a focused law enforcement approach to suppress organized criminal elements whose primary goal is the import and delivery of illicit drugs.	ISP Director Executive staff	11/1/2008
2	2a	Research best practices programming.	ICSA Best Practices Sub-Committee	6/30/2008
		Pilot identified best-practice programming.	ICSA Best Practices Sub-Committee	11/30/2008
		Provide Regional best practices training.	ICSA (with state and county partnerships)	6/30/2009
		Secure funding for early intervention and treatment programs for adult and juvenile populations.	ICSA (with state and county partnerships)	6/30/2009
	2b	Develop county-based adult treatment options for local jails on a pilot basis.	IDOC ISA	6/30/2009
		Develop county-based juvenile treatment options for local detention facilities on a pilot basis.	IDJC IACJJA	6/30/2009
3	3a	Report to ICSA on current programs, expenditures and outcomes for prevention activities.	SDE	6/30/2008
		Review current best-practices and make recommendations.	ICSA Best Practices Subcommittee	6/30/2009
	3b	Identify and report to ICSA existing cooperating agency agreements for school-based prevention programs.	SDE	6/30/2008
4	4a	Prepare and present to ICSA a description of the process IDHW management services contractor goes through in selecting prevention programs to be funded in the Regions.	IDHW	3/31/2008
		Develop a working partnership between all prevention committees through quarterly meetings.	ICSA (with IDHW, ITD, ISP, SDE, IDJC, Counties)	6/30/2008

		Develop resource list on evidence-based services for communities.	ICSA	6/30/2009
		Review and recommend prevention best practices to ICSA.	ICSA Best Practices Subcommittee	6/30/2009
	4b	Establish ICSA advisory committee to meet regularly with IDHW and their management services contractor to discuss the provider network and take necessary action.	ICSA	6/30/2008
		Request, develop and refine management service contractor monthly reports on prevention activities, programs, expenditures and outcomes, and take necessary action.	ICSA	6/30/2008
5	5a	Include a statement in the report given to the 2008 Idaho Legislature that ICSA has chosen GAIN as the standard substance use disorder tool to be used for all state-funded assessments.	ODP Director	3/31/2008
	5b	Develop policy, procedure and oversight for 100% implementation of at least GAIN-Q.	ODP Director	6/30/2009
6	6a	Establish an ICSA clinical best-practices subcommittee.	ICSA	1/31/2008
		Cooperatively develop and distribute standards for adolescent (criminal and non-criminal) treatment for transitional housing and residential levels of care.	IDHW	6/30/2008
		Cooperatively develop and distribute standards for the adult criminal justice population	IDHW	6/30/2008
		Identify and prioritize populations and associated best practices.	ICSA Best Practices Subcommittee	6/30/2009
	6b	Create a communication mechanism for providers (website list serve, etc.).	IDHW (MSC)	6/30/2008
		Work with legislators on the committee to create a waiver for substance use disorder treatment in the "any willing provider" statute.	IDHW	6/30/2009
		Identify needs of provider network for sustainability in rural and urban areas, and develop services as needed.	ICSA (with managed care contractor)	6/30/2009
		Develop a payment mechanism that stabilizes the provider network.	ICSA (with IDHW)	6/30/2009
		Maintain and strengthen the contract management meetings between ICSA members and management services contractor.	ICSA	Ongoing

		Request participating partners to research pathways from arrest to incarceration to target "treatment" points and level of treatment most appropriate at each point. Work will be presented to ICSA.	ICSA	4/30/2008
	6d	Develop a protocol that will be used by each affected agency to address client access to treatment at each targeted entry point.	ICSA	6/30/2008
		Assess budget implications and develop a budget decision unit as needed.	ICSA	7/31/2008
		Present final protocol and possible decision unit to ICSA.	ICSA	8/31/2008
		Provide oversight and full implementation of IC 19-2524 and 20-520i by IDHW, IDOC, County Probation and Courts.	ICSA	6/30/2009
8	8a	Establish an on-going financial management subcommittee (FMC) to examine appropriations related to all state-funded substance use disorder services starting with the 2009 appropriation. The FMC will include representation from all ICSA member agencies as well as representatives from the Division of Financial Management and Legislative Services Office.	ICSA	1/31/2008
		Develop a process for tracking funding through the substance use disorder (SUD) services system that will allow a transparent view of the system to provide for elimination of duplication of services.	FMC	9/1/2008
	8b	Develop a clear protocol to provide guidance to all ICSA members regarding process for submitting budget requests to ICSA.	FMC	6/30/2008
		Evaluate the current SUD billing and payment system will be evaluated for effectiveness and transparency.	FMC	6/30/2008
		Recommend to ICSA any changes that may be needed in the current billing and payment system.	FMC	7/31/2008
	8c	Develop a list of all contracts with any agency for SUD services.	FMC IDOA	9/1/2008
		Review and evaluate service contracts for opportunities to standardize or combine contracts that serve more than one agency; report findings to ICSA.	FMC IDOA	9/1/2008
9	9a	Report to ODP at monthly ICSA meetings on expenditures and outcomes. These reports will be provided by each agency utilizing state funds for substance use disorder prevention, intervention, treatment and follow-up combined into one common Management Snapshot Report to integrate and validate the data and to provide a common format to share the combined data with interested parties statewide.	ICSA, via respective agencies	6/30/2009

	9b	Report to ODP monthly on expenditures and outputs, and annually on outcomes.	ICSA, via respective agencies	6/30/2009
		Develop common definitions for annual outcome reporting.	ICSA Best Practices Subcommittee	6/30/2009
10	10a	Develop an on-going process to create the necessary policies and procedures to cover those responsibilities required of the Office of Drug Policy.	ODP	12/1/2008
		Developed proposed policies to ICSA for approval.	ODP	As needed
	10b	Review IDAPA rules that pertain to substance use disorders and make recommendations to ICSA on any necessary changes.	ICSA subcommittee	1/16/2008
		Present proposed IDAPA rule changes to ICSA for approval.	ODP	11/1/2008
		Provide approved IDAPA rule changes to the Governor and legislature.	ICSA	11/1/2008
11	11a	Develop a document that can be provided to all users to clearly describe and illustrate the GAIN communication flow.	ODP	6/30/2008
		Develop a document that clearly describes and illustrates the communication flow within ICSA; present this to ICSA for approval.	ODP	6/30/2008
	11b	Publish an ODP email address for easy communication access for the public on substance use disorder issues.	ODP	1/15/2008
		Maintain and continually update its web page as part of Access Idaho, the state's official website. The page will include contact information and links for ICSA member departments, information that is important to the private provider network and information that will be helpful to the general public.	ODP	1/15/2008

APPENDIX 4: MONITORING PLAN

Objective	Output <i>Evidence that it was done</i>			Outcome <i>Evidence that it worked</i>		
	Measurement	When to Measure	By Whom/Lead	Measurement	When to Measure	By Whom/Lead
1a: Local and state law enforcement agencies will establish regionally-coordinated intelligence gathering, sharing and dissemination to local, state and federal law enforcement agencies.	Regional networks established	9/30/2008	ISP	-- Amount and trend in gang-related crime -- Breadth/depth of cases (e.g. supplier/manufacturer)	9/30/2011	ISP
1b: ICSA will collaboratively develop comprehensive education programs to increase knowledge to all criminal justice professionals, local leadership and other community partners in the interdiction, enforcement and facilitation of community resources.	Interval 2 Objective -- Measurements to be determined			Interval 2 Objective -- Measurements to be determined		
1c: Local and state law enforcement agencies, in collaboration with ICSA, will identify and access stabilized funding sources for the entire law enforcement continuum from interdiction to enforcement.	Funds/stakeholders identified/contacted	9/30/2008	ISP	Degree of increase in the non-general fund for law enforcement continuum	9/30/2011	ISP

<p>1d: Local and state law enforcement agencies will develop a focused law enforcement approach to suppress organized criminal elements whose primary goal is the import and delivery of illicit drugs.</p>	<ul style="list-style-type: none"> -- Law enforcement summit held -- Documented LE approach -- Number of community coalitions 	12/31/2008	<ul style="list-style-type: none"> -- ISP -- ISA -- Local police chiefs 	<ul style="list-style-type: none"> -- Number and trend of drug-involved arrests -- Level of engagement of coalitions -- Number and trend of convictions for manufacturing and delivery crimes 	9/30/2011	ISP
<p>2a: Local and state correctional agencies and detention facilities, in collaboration with ICSA, will collaboratively develop and provide early intervention and treatment programs for adult and juvenile populations.</p>	<ul style="list-style-type: none"> -- Number of best practices programs reviewed -- Number of best practices programs adopted by ICSA 	6/30/2008	ICSA	<ul style="list-style-type: none"> -- Intervention and treatment services paid for through state funding are deemed to be best practice -- Reduction in new misdemeanor/felony drug or alcohol convictions 	9/30/2011	ICSA
<p>2b: ICSA will collaboratively develop shared resource methods to ensure effective implementation and delivery of intervention and treatment services to adult and juvenile populations in correctional and detention facilities.</p>	<ul style="list-style-type: none"> --Number of facilities with treatment programs -- Number of shared trainings 	6/30/2009	ICSA	<ul style="list-style-type: none"> -- Number of offenders returning to facilities on drug-related charges --Reduction in new drug/alcohol convictions 	6/30/2012	ICSA
<p>3a: The Department of Education, in collaboration with ICSA, will identify and implement core best-practice and outcome measures for prevention services in K-12 throughout the state.</p>	Number of evidence based programs identified and implemented	6/30/2009	SDE	<ul style="list-style-type: none"> -- Age of first time users/abusers -- Reduction in drug-related occurrences in schools 	6/30/2012	SDE
<p>3b: The Department of Education, in collaboration with ICSA, will implement cooperating agency agreements for school-based prevention education with appropriate ICSA agencies and institutions on an ongoing basis.</p>	Number of cooperating agency agreements in place	6/30/2009	SDE	<ul style="list-style-type: none"> -- Number and age of first time users/abusers -- Reduction in drug-related occurrences in schools 	6/30/2012	SDE

4a: The Department of Health and Welfare, in collaboration with ICOSA, will identify evidence-based prevention practices for substance use disorder prevention.	Number of evidence based programs identified and implemented	6/30/2009	IDHW	Number and age of first-time users and abusers	6/30/2012	IDHW
4b: The Department of Health and Welfare, in collaboration with ICOSA, will assure a provider network to balance service availability and funding throughout the state.	Number and programs of providers available in previously underserved areas (pins on a map)	6/30/2009	IDHW	Degree of use of providers and services throughout the state	6/30/2012	IDHW
4c: The Department of Health and Welfare, in collaboration with ICOSA, will assure training/certification programs in evidence-based prevention practices and provide opportunities for participation in each DHW region throughout the state.	Interval 2 Objective -- Measurements to be determined			Interval 2 Objective -- Measurements to be determined		
5a: The Office of Drug Policy will take the appropriate measures to identify GAIN as the approved state-wide standardized assessment tool.	Gain identified as the approved state-wide assessment tool	6/30/2008	ODP	-- Cost/benefit of sustained use of GAIN -- Degree of improvement in diagnosis and appropriate treatment as a result of standardized assessment	6/30/2009	ODP
5b: The Office of Drug Policy, in collaboration with ICOSA, will ensure that agencies and institutions administer GAIN to at least at the 'Q' level to 100% of their clients requiring public funding for treatment.	County by county data generated by the BPA report "Activity for 19-2524 and 20-520(i)"	6/30/2008	ODP	-- Cost/benefit of sustained use of GAIN -- Degree of improvement in diagnosis and appropriate treatment as a result of standardized assessment	6/30/2009	ODP

6a: The Department of Health and Welfare, in collaboration with ICSA, will identify core evidence-based practices (or best practices) by population.	Core evidence-based programs by population	6/30/2009	IDHW	Patterns of substance use and abuse by population after program implementation	6/30/2012	IDHW
6b: The Department of Health and Welfare, in collaboration with ICSA, will develop a provider network to balance availability and funding in the state.	Number and programs of providers available in previously underserved areas (pins on a map)	6/30/2009	IDHW	Degree of use of providers and services throughout the state	6/30/2012	IDHW
6c: The Department of Health and Welfare, in collaboration with ICSA, will develop training/certification programs in evidence-based treatment programs in each region. Each year the Best Practices committee will select 2 programs to train and implement.	Interval 2 Objective -- Measurements to be determined			Interval 2 Objective -- Measurements to be determined		
6d: The Department of Health and Welfare, in collaboration with the Idaho Department of Correction and Juvenile Corrections and county probation, will identify protocols to integrate treatment with probation services.	* Number of counties with established protocols * Number of probation officers actively integrating treatment programs	6/30/2009	IDHW IDOC IDJC IAC	-- Client treatment retention rates -- Number of clients who successfully complete probation	6/30/2012	IDHW IDOC IDJC IAC
7a: The Office of Drug Policy, in collaboration with ICSA, will develop statewide data protocols to enable System components to share, integrate and validate common case management data sets.	Interval 2 Objective -- Measurements to be determined			Interval 2 Objective -- Measurements to be determined		

7b: The Department of Health and Welfare, in collaboration with ICSA, will develop a protocol for co-occurring treatment practices utilizing a "treatment team" approach.	Interval 2 Objective -- Measurements to be determined			Interval 2 Objective -- Measurements to be determined		
8a: The Office of Drug Policy, in collaboration with ICSA, will document a protocol for coordinating and allocating substance abuse funds among receiving entities for the base budget and any new appropriations.	-- Protocol is completed -- Monthly budget reports provided to ICSA	6/30/2008	ODP	Level of ongoing duplication of funding and services	6/30/2009	ODP
8b: The Office of Drug Policy, in collaboration with ICSA, will document a protocol for submitting a coordinated funding request, and for tracking fiscal obligations and payment.	-- Protocol is completed -- Monthly fiscal obligations and payments provided to ICSA	6/30/2008	FMC	Level of ongoing duplication of funding and services	6/30/2009	ODP
8c: The Office of Drug Policy, in collaboration with ICSA and the Department of Administration, will develop contracts with consistent, standardized rates for substance use disorder services.	Number and type of contracts with consistent, standardized rates	9/30/2008	FMC	Level of ongoing duplication of contracts and inconsistent rates	9/30/2009	ODP
9a: ICSA will develop a statewide data protocol to share, integrate and validate common financial and outcome-based data.	-- Protocol is completed -- Expenditures and outcomes are reported by ICSA entities	6/30/2009	ODP	Ability of Legislature and citizens to make sense of ICSA financial and outcome reporting	9/30/2009	ODP
9b: The Office of Drug Policy, in collaboration with ICSA, will define standardized tracking mechanisms and standardized reporting timelines.	Standardized tracking mechanisms and standardized reporting timelines have been developed	6/30/2008	ODP	Timeliness of reporting and consistency with approved formats	6/30/2009	ODP

10a: The Office of Drug Policy will enact internal policies and procedures specific to their roles, responsibilities and statutory function.	Policies and procedures have been developed to cover responsibilities of ODP	12/31/2008	ODP	Degree of clarity with the Legislature, ICSA entities and citizens regarding ODP role, responsibilities and function	12/31/2009	ICSA
10b: The Office of Drug Policy, in collaboration with the legislature and Governor, will annually review pertinent System-related IDAPA rules to determine relevance, barriers, and potential need for change.	Process established for systematic review of SUD IDAPA rules	6/30/2008	ODP	Degree of system operations alignment with IDAPA rules	12/31/2009	ICSA
11a: The Office of Drug Policy will develop and implement a System communication plan.	Communication plan, flow chart and contact information have been developed	6/30/2008	ODP	Legislature and citizens can easily access System information	9/30/2008	
11b: The Office of Drug Policy will create a central clearinghouse for information related to System programs and services.	Central clearinghouse is developed	6/30/2008	ODP	-- Legislature and citizens can easily access System information -- Information sought is available through the clearinghouse	9/30/2008	ODP
11c: The Office of Drug Policy, in collaboration with ICSA, will identify programs and practices that demonstrate effective private partnerships to address workforce job skills and employability.	Interval 3 Objective -- Measurements to be determined			Interval 3 Objective -- Measurements to be determined		