

STATE OF CALIFORNIA
DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS

STRATEGIC PLAN 2002-2005



October 28, 2002

INTRODUCTION

Created legislatively in 1978, the California Department of Alcohol and Drug Programs (ADP) brought together the Health and Welfare Agency's Office of Alcoholism and the Department of Health's Division of Substance Abuse as the single state authority for substance abuse prevention and treatment. With approximately 350 permanent staff and an average annual budget of more than \$500 million, ADP provides leadership for local Alcohol and Other Drug (AOD) programs and prevention and treatment providers in the nation's most populous state. The critical functions of the department are to:

- lead the statewide AOD program.
- provide funds to counties for planning and cost-effective implementation of local programs to alleviate problems related to inappropriate AOD use.
- review and approve county AOD program contracts and grant applications submitted for state and federal funds allocated by the department.
- review, certify, and license AOD programs.
- develop standards for assuring minimal statewide levels of service quality provided by AOD programs.
- develop and implement AOD abuse prevention strategies.
- provide public information on AOD problems and programs.

The Department has recently experienced a time of dynamic change. With the November 2000 passage of Proposition 36 -- the Substance Abuse and Crime Prevention Act (SACPA) -- ADP faced the challenge of implementing a major statewide policy initiative involving multiple stakeholders within an aggressive timeframe. The effort was marked by widespread cooperation not usually associated with projects of this magnitude.

ADP's Executive Team embarked on a strategic planning process to provide clear focus, direction, and leadership to the department and its work with other agencies and the field.

The strategic planning process started with an assessment that included:

- organizational strengths and concerns
- the selection of a preliminary set of strategic issues to be addressed by the strategic plan
- identification of those factors which would ensure successful creation and implementation of a strategic plan.

From that assessment, four areas of planning focus were identified:

- Financing
- Building Capability, Skills, and Capacity in Treatment and Prevention Services
- Prevention and Treatment Systems Enhancement
- Internal Capacity Building.

A Steering Committee made up of the ADP Executive Team assigned a staff workgroup to each of the issues and provided oversight for the process. The workgroups developed goals, objectives, and strategies to document their specific recommendations. Both external stakeholders and ADP staff had the opportunity to review and comment on the analysis and recommendations proposed. Implementation plans were developed for each objective to serve as work plans for the ADP executives charged with completing the tasks.

It is important to note that this plan will be updated annually to reflect changing conditions, new state and federal policies, and as the results of various implementation efforts show greater or lesser promise.

In addition, the Department will continue to provide leadership for, and respond to specific program initiatives such as Co-occurring Disorders, Health Insurance Portability and Accountability Act, Homelessness, Mentoring, Proposition 36, Perinatal Programs, and Youth Development. The Department will also focus on the provision of equitable prevention and treatment services for special populations such as African American, Asian American, the disabled, gay/lesbian, Latino, multi-cultural Americans, Native American, and women. These high priority programs will benefit from ADP's more strategic approach to planning and implementation resulting from this effort.

VISION AND MISSION

VISION

Healthy individuals and communities free of alcohol and other drug problems.

STRATEGIC VISION

Californians understand that alcoholism and drug addiction are chronic conditions that can be successfully prevented and treated.

MISSION

To lead California's strategy to reduce alcohol and other drug problems by developing, administering and supporting prevention and treatment programs.

FINANCING

ISSUE DESCRIPTION

ADP distributes funds to counties to provide AOD treatment services. Most of these services are discretionary rather than entitlements. Due to multiple economic factors and tighter state-supported budgets, alternative funding for statewide non-entitlement programs must be sought. Federal Maintenance of Effort issues must be reviewed, particularly those relating to unique programs such as SACPA -- Proposition 36 -- that may impact federal requirements.

Federal Performance Partnership Grants legislation requires that funding be tied to performance, which will potentially affect the relationship between ADP, counties, and other stakeholders. There is a need for program, provider, and client data to measure performance. This data will also enable funding to be targeted to defined best practices. Current allocations based on mathematical formulas rather than on need or outcomes must be reviewed in light of waiting lists and other indicators of need. ADP needs to revisit, clarify, or redefine the cooperative partnership of stakeholders regarding their responsibility for performance outcomes. Similarly, the role of Advisory Groups and how the department responds to advice need review.

There is currently no comprehensive list of available funding for programs and providers. Funds may go untapped and programs unfunded or under-funded. ADP does not have staff identifying and matching funding opportunities. Rather than planning programs and seeking funding, ADP and the field often react when funds are located or when a program is de-funded. Counties and providers may need assistance in applying for grants.

GOALS AND OBJECTIVES

GOAL 1: Support counties and providers in gaining access to grant funds.

Objectives:

- Develop a grant catalog that provides information on available grants.
- Identify potential grants and other financial resources and update the catalog electronically as information becomes available.
- Disseminate grant availability information to counties and providers.
- Publish the catalog annually to coincide with the grant cycle.

GOAL 2: Maximize the use of resources to ensure the availability and continuous quality improvement of prevention and treatment programs and services.

Objectives:

- With county and provider input, develop and adopt an Alcohol and Other Drug (AOD) Resource Allocation Plan that identifies needs, strategic priorities, and allocations.

GOAL 3: Assure the appropriate use of public funds both internally and in the field.

Objectives:

- Develop an improved fiscal system that tracks funding from allocation to contracts to cost settlement to balanced books.
- Develop and implement California's response to the federal Performance Partnership Grants (PPGs).
- Develop and deliver training to counties and providers on use of available funding streams.
- Develop legislative proposals as needed to modify existing statutes to ensure program and fiscal accountability.
- Coordinate, document, and communicate internally across divisional lines, processes and procedures for complying with federal grant requirements.

BUILDING CAPABILITY, SKILLS, AND CAPACITY IN PREVENTION AND TREATMENT SERVICES

ISSUE DESCRIPTION

AOD prevention and treatment services often suffer from a lack of credibility. Insufficient or non-existent standards have, on occasion, led to the perception that AOD counselors lack the necessary skills and awareness of ethical behaviors to provide professional service. The field looks to ADP for leadership in adoption of professional standards, as well as education and experience requirements. Resources for improving the effectiveness of counselors through education and training are not being utilized. There also may be a lack of qualified people willing to work in what has historically been a low-wage field.

Clarification is needed concerning ADP's role in the licensure and certification of privately funded programs and whether the Department should function as a consumer protection agency. Except for Driving Under the Influence programs, current standards do not adequately specify program curriculum for treatment services. Current standards also do not adequately protect or support youth in treatment programs. ADP lacks statutory authority to license facilities for the treatment of youth. The ADP Licensing and Certification Regulations Workgroup is revising existing regulations and has proposed language to address the protection of children accompanying parents into treatment.

There is a need to improve understanding of the nature of AOD prevention and treatment, and reduce the negative stigma of alcohol and drug addiction.

GOALS AND OBJECTIVES

GOAL 4: Establish standards to increase AOD counselor capabilities and skills.

Objectives:

- Evaluate the current state of counselor skills and determine the core competencies needed to provide effective treatment and recovery services.
- Draft new regulations that set forth the criteria and standards for certifying AOD counselors.
- Implement standards for AOD counselors.
- Counselors in AOD programs meet standards.

GOAL 5: Establish standards to increase the capability and capacity of AOD treatment programs.

Objectives:

- Assess the current state of program facilities and services.
- Develop and implement new regulations that set forth program facilities and service standards..
- All certified or licensed programs meet established standards.

GOAL 6: Primary prevention service providers and staff meet specified core competency requirements based on established best practices, knowledge, skills, and abilities.

Objectives:

- Determine the core competencies required for contracted prevention services, defining specific knowledge, skills, and abilities.
- Prevention contracts and competitive prevention grants require that prevention providers meet core competencies.

GOAL 7: Californians understand that alcoholism and drug addiction are chronic conditions that can be successfully prevented and treated.

Objectives:

- Develop concepts and funding for awareness campaigns for enhancing public and institutional understanding of alcohol and drug addiction as a preventable and treatable health condition.
- Contract for public awareness campaigns.

PREVENTION AND TREATMENT SYSTEMS ENHANCEMENT

ISSUE DESCRIPTION

There are opportunities to improve the delivery of AOD prevention and treatment services throughout California. These services have gaps, insufficient resources, limited coordination, and outdated infrastructure. Sound business, prevention, and treatment principles are not consistently applied.

California lacks prevention and treatment outcomes measurement systems to inform various levels of governance and programs. The field also lacks an accepted assessment tool for treatment and placement planning, and for coordination with other systems. The lack of state-level leadership and funding are key barriers to creating a commonly used set of standardized assessment tools. AOD program funding in the state is insufficient to meet the total demand for treatment services.

ADP needs to move to a more proactive leadership role that takes shifting funding priorities into account in determining how to address unmet needs for youth treatment services and adult prevention services. The Department must also act collaboratively with the other systems including mental health, criminal justice and Child Protective Services, as well as those providing ancillary services such as housing, vocational training, and transportation to support successful treatment outcomes.

ADP must find ways to overcome barriers to treatment access — to provide services that are culturally sensitive and that are equitable for the disabled, that take into account geographical issues, and that address the needs of individuals with co-occurring mental illness and substance abuse disorders.

GOALS AND OBJECTIVES

GOAL 8: Implement a statewide treatment and prevention outcomes measurement system that provides information for administering and improving prevention and treatment programs.

Objectives:

- Develop and implement a treatment outcomes measurement system.
- Facilitate the use of an accepted set of assessment tools that support effective treatment planning, placement, and referral.
- Develop a fiscal component to the treatment outcomes measurement system.
- Develop interdepartmental data links that enable ADP to determine client outcomes and cost offsets.
- Integrate prevention outcomes into the Department outcomes measurement system.

GOAL 9: Promote partnerships that provide integrated responses to the needs of AOD populations including criminal justice, perinatal, youth, and those with co-occurring disorders.

Objectives:

- Increase awareness of how the AOD abuse affects their populations throughout the various human services and criminal justice systems.
- Identify and implement a collaborative response appropriate to selected AOD populations.

GOAL 10: Reduce barriers to prevention and treatment services.

Objectives:

- Confirm barriers to prevention and treatment services.
- Implement solutions for reducing barriers to prevention and treatment services.

INTERNAL CAPACITY BUILDING

ISSUE DESCRIPTION

Legislative regulations, external mandates, staff turnover, and a legacy of responding to program crises present challenges to ADP's ability to maintain the quality of service and productivity desired. Department responsibilities continue to grow, frequently without commensurate increases in staffing levels. This creates the need for continual resource realignment and affects opportunities for cross training and staff development.

Internal processes and procedures are not always well documented or consistently followed, and sometimes do not have "process owners" who can offer assistance. Changes to the processes and procedures are not adequately documented or disseminated.

Communications with and among staff can be improved through the personnel appraisal process and through clear understanding of the mission, goals, objectives, and priorities of ADP and of individual divisions.

GOALS AND OBJECTIVES

GOAL 11: Clearly define, maintain, and communicate department systems, processes, and procedures.

Objectives:

- Document and prioritize all systems, processes, and procedures according to division and department goals. Orient and train ADP staff on critical systems, processes, and procedures including the Health Insurance Portability and Accountability Act (HIPAA).
- Develop and implement a system for updating critical systems, processes, and procedures that includes communication on changes to departmental staff.

GOAL 12: Align staff and other resources with Departmental goals and priorities including quality customer service.

Objectives:

- Produce annual division work plans that match work with resources. Incorporate automation and training strategies to help meet workload requirements.
- Adopt a strategy for acquiring additional resources based on a review of division work plans. Work expectations are based on resources available.

GOAL 13: As appropriate, include internal and external stakeholders in the implementation of ADP strategic plan goals, objectives, and strategies, with inclusion based on a clear definition of roles and how input will be used.

Objectives:

- Strategic plan leaders and stakeholders understand their roles in implementing the strategic plan goals, objectives, and strategies.
- Stakeholders have clear, valuable roles in helping department process owners as they make improvements to internal systems, processes, and procedures.
- Department leaders are trained in and use change-management methods to support effective stakeholder involvement in planning and implementing goals, objectives, and strategies.

Leadership Philosophy

This plan places significant emphasis on the role of the Department of Alcohol and Drug Programs in providing leadership to the field. Equally significant is the belief in the importance of working together in collaboration and partnership with the AOD field, state and federal agencies, and other stakeholders. The key leadership strategic issue identified was:

“We must exercise leadership that builds trust and collaboration within the field, makes the best use of the talents and resources of our people and fulfills our vision for change.”

During the Steering Committee's discussion of the various goals and objectives, three guiding principles surfaced that reflect the ADP philosophy of leadership and collaboration:

- I. There is no one best way to provide leadership to the AOD field. A “situational approach” must be used requiring a deliberate choice as to which leadership approach is most appropriate given the particular conditions, problems, or opportunities at issue. Some of the criteria used in this assessment would include: level of clarity, certainty, or consensus in problem definition; strategy or approach; and desired outcomes, including deadlines or resources available.
- II. Continual communication will occur about how the Department intends to exercise leadership in specific situations. ADP will be open to the possibility that partners and stakeholders may want the Department to use a different leadership style depending on the level of discretion they want to exercise. By communicating openly about its intentions, even when differences exist or partners' or stakeholders' desires may not be able to be accommodated, ADP is in a better position to maintain the spirit of collaboration.
- III. Leadership occurs at many levels of an organization. It extends beyond the prerogative of executives or high-level managers. ADP desires to be an organization in which all staff feel free to exert leadership in implementing this, or any other plan, because they feel ownership for the programs and services they deliver.

Acknowledgements

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Executive Steering Committee: Paul Wyatt, Chairperson; ADP Director Kathryn Jett; Chief Deputy Director Thomas Powers; Chief Counsel Mimi Budd; Deputy Director Fran Burton; Deputy Director Michael Cunningham; Assistant Deputy Director Carmen Delgado; Public Information Officer Rosa Escutia; Deputy Director Ann Horn; Acting Deputy Director Les Johnson; Deputy Director Rebecca Lira; Deputy Director Jesse McGuinn; Assistant Deputy Director David Monti; Deputy Director Susan Nisenbaum; Deputy Director Susan Rushing; Deputy Director Del Sayles-Owen; Jennie Verardo, project staff; and Rick Brown, Consultant, The Results Group.

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