

#### Program # 21022 - School Svcs - Alcohol, Tobacco and Other Drug Services Version 2/14/2005 s

Priority:EducationLead Agency:School and CommunityProgram Offer Type:Existing OperatingProgram Contact:Peggy SamolinskiRelated Programs:21003, 21005, 21007, 21009, 21014, 21015A, 21016A, 21018, 21020A, 21023, 21024, 21026

Frameworks: School Aged Policy Framework

### **Executive Summary**

Alcohol, Tobacco, and Other Drugs (ATOD) services provides appropriate alcohol and drug screening, assessment, referral, and limited treatment to children aged 12-17 and their families. ATOD works with contractors and system partners on a countywide basis to provide these specialized services for youth participating anywhere in the School Age Policy Framework (SAPF) system and schools.

#### **Program Description**

ATOD services are 20% oriented towards prevention, outreach, education, and treatment, and 80% oriented towards screening, assessment, linkage, and referral. This approach seeks to screen students and get them into appropriate services (thus reducing their use of ATOD); provide outpatient treatment for identified youth; and connect with and educate students about the risks of ATOD use. Screening offers a review of drug and alcohol use to determine patterns that may require further assessment. Assessment involves a more in-depth interview with the youth and his/her family about drug and alcohol use. This results in rapid referral and either a connection to treatment (outside of the program) or the direct provision of outpatient treatment. The program leverages 3rd party insurance to provide treatment for youth who have insurance; direct treatment is targeted to those without other resources. Finally, Prevention and Outreach Activities include skill-building groups (to teach refusal skills, for example) and skill building groups for youth who are at risk for (but not yet demonstrating) substance abuse, such as children from drug-affected families.

#### **Program Justification**

This program supports two of the Education team's six strategies: promoting student retention beyond the fifth grade, and bridge the gaps and breakdown the barriers to help all youth attend, engage in and succeed in school. By reducing ATOD use, the program helps youth be successful in school. Research indicates that the more successful a young person is in school, the less likely he or she is to use, abuse, or become dependent on ATOD; the earlier the intervention, the better the likelihood of preventing substance abuse. This program offers early intervention through screening and assessment and provides an important gateway into other youth ATOD services throughout the County.

In a 2004 survey, 30% of County 8th graders said they'd drunk alcohol in the previous 30 days. Early use is strongly correlated with future use; early intervention is key to breaking the cycle. Most other services focus on treatment. This program targets youth early to avoid long-term use and thus the need for treatment services. For many youth without other treatment options, this program makes such service available.

#### **Performance Measures**

280 youth will engage in screening or assessment services. 100% of youth screened as needing further treatment will be referred to treatment and engage in treatment (this may be treatment with the contractor or through a third party insurer). 75% of the youth assessed as needing further services but not served through this contractor will engage in services with the third party insurer. (Engaged is defined as two or more appointments; this is the "industry" goal and a strong predictor of further engagement and success.)70 youth will participate in treatment services with contractor; 70% of these youth (49) will reduce their use of alcohol, tobacco, and other drugs.

#### Summary of last year's program results and this year's expected results

For FY04, of the 109 youth who entered Level 1 Treatment services, 65% completed that treatment or showed benefit. This percentage meets the state target for Level I treatment outcomes.

For FY05 we expect that 350 youth will receive screening, assessment, and referral or treatment services. 280 youth will engage in screening or assessment services. 100% of youth screened as needing further treatment will be referred to treatment and engage in that effort (this may be treatment with the contractor or through a third party insurer). 75% of the youth assessed as needed further services but not served through this contractor will engage in services with the third party insurer. (Engaged is defined as two or more appointments; this is the "industry" goal and a strong predictor of further engagement and success.)

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# Program Mandate: 4 Program and Funding Level Choice

## Revenue/Expense Detail

	Proposed General	Proposed Other Funds	Proposed General	Proposed Other Funds
Program Expenses	2005	2005		
Personnel	\$0	\$0	\$23,170	\$0
Contracts	\$180,509	\$0	\$184,841	\$0
Materials & Supplies	\$0	\$0	\$586	\$0
Internal Services	\$0	\$0	\$8,011	\$0
Subtotal: Direct Exps:	\$180,509	\$0	\$216,608	\$0
Administration	\$0	\$0	\$2,183	\$0
Program Support	\$0	\$0	\$13,476	\$0
Subtotal: Other Exps:	\$0	\$0	\$15,659	\$0
Total GF/non-GF:	\$180,509	\$0	\$232,267	\$0
Program Total:	\$180,509		\$232,267	
Program FTE	0.00	0.00	0.28	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

## **Explanation of Revenues**

County General Fund - Based on current service level

## Significant Program Changes

N/A