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January / February 2012

News from SUDS

Idaho Department of Health and Welfare Substance Use Disorder Program

SUDS PROGRAM UPDATES**KATHY SKIPPEN**

I have written on the topic of recovery in the past...but it is so important to where DHW is headed with the SUD Program, I'm discussing it again. At the ICADD Conference this coming May, the keynote speaker for day one will be Phillip Valentine, Executive Director of Connecticut Community for Addiction Recovery, and one of the best speakers I have heard. After hearing him at a SAMHSA meeting, I came home convinced we need to go in a new direction. He made a comment that has stuck with me; "Error on the side of generosity." I have since found another from him; "Error on the side of the recoveree." I like this one equally well. Ryan Porter and I had a phone conversation with Phillip to discuss his breakout sessions at ICADD and he dropped another one; "Relapse confirms the diagnosis." All simple ideas, but ones we don't hear much, and need to. We need to change how we do business. Some of it will please you, some may not. Hopefully you will read to the end and take my thoughts in whole, not part.

- In meetings with providers it is obvious that over time, we have increased the work load associated with each client, while rates have remained constant. There is a limit to how long this process can go on without affecting the quality of the service provided.
- With the appropriation decision made during the 2011 legislative session to split treatment funding, DHW can now make treatment decisions regarding our client populations which may in some cases be different than those made by the Courts or other agencies.



IDAHO DEPARTMENT OF
HEALTH & WELFARE

- We believe clients shouldn't have to get arrested or rearrested to get treatment but we also must function within a fiscal environment where state funding is limited.
- Idaho currently has a treatment system, not a recovery system.
- Services needed to support client recovery must happen in communities and not all can or need to be funded through the state. Many services can be provided within a peer environment.
- Providers, recoverees, communities, local government, the faith community and people who care for their own personal reasons all need to be part of developing an atmosphere where clients can be successful in their recovery.
- Not every service for a client should be a paid service, but we need to acknowledge there is a cost to providing additional required provisions of justifying a client's continued treatment.
- We are committed to the continued use of the GAIN-I assessment and understand it is only as good as the report that comes from it. We need to examine what we pay for to assure the report is also supported in our payment structure.
- Fairness is a two-way street. We must be willing to acknowledge there is a cost for complying with steps being taken to assure clients in treatment need to be there, and providers must be fair regarding how clients get into treatment and continue to stay there. Treatment time frames must be shortened and recovery services enhanced.
- Recovery services are local and we need local partners to make this new direction a reality.
- Providers must be part of this cooperative effort, including your relationship with us, with your communities and with other providers. We will only flourish if we work well with each other.

I am aware much of what I have stated is vague, and raises questions rather than providing clarity. The points are a work in progress however and document what we are thinking. They demonstrate the discussions we are having in-house on how to create a SUD system we can believe in and sustain.

QSUDP—CHANGES IN CLINICAL SUPERVISION

JOHN KIRCSH

Updates to the How to Manual for Clinical Supervision in Idaho are posted to the DHW/SUD website:

<http://www.healthandwelfare.idaho.gov/LinkClick.aspx?fileticket=z5eg23tgPgk%3d&tabid=1004&mid=8773>

Use the table of contents and click Chapter 14 for all updates and fillable Professional Development Plan formats

Forms may be found online at: <http://www.healthandwelfare.idaho.gov/Medical/SubstanceUseDisorders/InformationforProviders/QualifiedProfessionals/tabid/1004/Default.aspx>:

Updates include:

- Protocols for: Program is left without a Clinical Supervisor (CS), and; Counselor is absent from Job (Ill, Vacation or left the Job)
- Exceptions to the required one hour of clinical supervision per month requirement
- Professional Development Plans now available in two types of formats: Fill out forms online and then printed for signature, and Print forms and then fill in with pen and sign (see Appendix D of the How to Manual)
- Credentialing Process Changes for QSUDPT

Chestnut Health Systems (CHS) - Data Services – Interactive Reports

Chestnut Health Systems (CHS) Data Services will provide interactive reports to entities which are licensed to administer GAIN Assessments on the GAIN ABS website beginning January 2012.

Monthly Data Editing Reports – Interactive

On a monthly basis each agency has the opportunity to receive a report of data editing inconsistencies if there are any discovered. Each agency is invited to designate a GAIN Agency Data Manager (a technical, not necessarily clinical or administrative position) to receive and to take action on the monthly editing reports sent by the GAIN Data Management team. Training for the GAIN Agency Data Manager is available via a self directed webinar and follow up phone call from the CHS GCC Data Management Team.

Quarterly Site Profile Reports

Quarterly Site Profile Reports will be disseminated to each Agency that has performed GAIN assessments on the GAIN ABS website. Each agency will need to designate a staff member to whom the Quarterly Site Report may be sent.

A Data Review Webinar and phone call with the CHS GCC Data Management Team will be made available to all entities to assist in making the best use of Site Profile Report Data.

For detailed information regarding the reports go to <http://www.healthandwelfare.idaho.gov/LinkClick.aspx?fileticket=nL7OEGt902Y%3d&tabid=1915&mid=8469>.

GAIN Site Interviewer Training

Workshop schedule, certified GAIN Trainers, and contact information may be found in training calendar at <http://www.healthandwelfare.idaho.gov/Medical/SubstanceUseDisorders/InformationforProviders/tabid/1915/Default.aspx>.

If you have questions, please contact John Kirsch at kirschj@dhw.idaho.gov or 208-334-6680

Alert posted to the DHW SUD Qualified Professionals web page found at: <http://www.healthandwelfare.idaho.gov/Medical/SubstanceUseDisorders/InformationforProviders/QualifiedProfessionals/tabid/1004/Default.aspx>

Alert

“Only those clinicians who hold certification and licensure per IDAPA 16.07.20, subsections 216, 218, and 223 are authorized to deliver SUD Treatment Services in DHW licensed and BPA contracted SUD treatment facilities.

Exception: Those clinicians who were granted temporary Qualified Professional approval under previous IDAPA rule based on their certification from the National Association of Forensic Counselors will no longer be authorized to continue delivering SUD Treatment Services in DHW licensed and BPA contracted SUD treatment facilities after June 30, 2012”.

Questions regarding the information contained in this Alert may be directed to John Kirsch 208-334-6680, kirschj@dhw.idaho.gov “.

ATR-3 UPDATE

MICHAEL BARTLETT

The ATR grant is projected to fund substance abuse services for approximately 435 clients within the first quarter of the federal grant year (October-December 2011). DHW is currently working with SAMHSA to submit and approve a carryover request for unused unobligated funds from year one. If approved, this will provide the ATR grant with additional funds to be utilized in year two. The majority of these funds will be utilized for direct treatment services. DHW will provide updates regarding this request in a subsequent newsletter.

DHW and BPA have been completing necessary tasks to move forward in implementing ATR services for the dependents and spouses of active military and reserve members. Stakeholders within the substance abuse treatment community as well as the Idaho National Guard have continued to support this expansion. DHW will be providing additional details on the benefit plan for this population shortly.

ATR grantee states are required to maintain a minimum of 80% completion rate for the 6 month follow-up GPRA. Idaho, among other states, has had some initial difficulties achieving this. DHW and BPA are in the process of developing a client incentive program to assist providers with increasing their 6 month follow-up GPRA completion rates. DHW will be sending out a communication providing additional details as the project develops.

WITS GAIN UPDATE

TREENA CLARK

WITS

We are gearing up for WITS implementation. A WITS Kickoff meeting was held with BPA, our partnering agencies and the Supreme Court on December 9th, 2011. The kickoff was followed by a series of WITS demonstrations designed to introduce participants to the functionality of current WITS modules. Ryan Porter will be leading the implementation project and we will work closely with BPA to develop an overall implementation plan and with IDOC, IDJC and the Supreme Court to address their specific needs.

GAIN SS

We have had a number of inquires regarding the GAIN SS and WITS. The GAIN SS is accessible in WITS to all users and is located in the left navigational pane below the Client Profile menu. Screen shots and tips for using the GAIN SS have been posted on the Department's website.

Share Your Feedback

A WITS Feedback form has been added to the WITS webpage on our website! We are interested in receiving your comments, recommendations and questions as we work to implement WITS. All submissions will be reviewed, however, we may not be able to acknowledge and respond to individual posts. Comments from the feedback form may be considered for publication on the website and questions will be used to develop FAQs.

WITS Helpdesk

*Reminder—If you are encountering problems within WITS, please contact the WITS Help Desk via email at DBHWITSHD@DHW.IDAHO.GOV or by calling the central WITS Help Desk phone line at 332-7316.

IDAPA FAQ

RYAN PHILLIPS

Q: Our program will be relocating soon. Do I need to do anything beyond notifying the Department and BPA when we move? Can I just use my current approval certificate until it expires?

A: While the process for relocating, and/or adding a new site, is relatively simple compared to the full renewal application, it's important to note a few requirements. Since approvals are issued on a site specific basis, they are non-transferrable from one location to another. We ask that providers submit a relocation application with the supporting documentation for their new site (occupancy, fire inspection, floor plan, staffing, etc.) as early as possible (90 days notice is required by code) since IDAPA requires that a site survey be completed prior to service delivery. We recognize, of course, that circumstance may require a quick move and will do everything we can to expedite the approval process. For more information, please refer to IDAPA 16.07.20.145.02.

PREVENTION UPDATE

TERRY PAPPIN

Currently prevention services are being offered in 62 Idaho communities. Youth are receiving prevention education classes and adults with parenting education. Watch the prevention website (www.preventionidaho.net) for information on the 2013 prevention needs assessment and the funding application process for 2013.

The Idaho Prevention and Treatment Research website (<http://www.patridaho.gov>) provides Idaho prevention professionals with one-stop resource for risk factor data. The information on the website comes from multiple sources and is available at the state and county level. There is also multi year data on the system, so that trends can be evaluated.

The Idaho RADAR Center, now under the direction of Teri Carrigan, continues to make available outstanding resources for Idaho residents. RADAR has written materials for all ages, including workbooks for children and resource documents for substance abuse prevention and treatment professionals. All written materials are mailed to you at no cost. RADAR also houses an extensive video library with information on a wide range of substance abuse-related topics. Check the Idaho RADAR Center's website at <http://radar.boisestate.edu/> or call (208) 426-3471 for more information on the resources available.

NEWS FROM BPA

SANDY COLLING

In November:

BPA's Frontline Team:

- Answered 93.4% of all calls within 180 seconds.
- They completed 598 phone screenings and processed 385 paper pathway packets.

BPA's Care Managers:

- Answered 335 calls in November and 345 in December maintaining an 86.3% answer in under 3 minute hold time.
- They also processed 2182 events in November and we saw an increase to 2642 for December. Events include call screens for treatment and document reviews for level of care determination and overall clinical need for services.
- Another positive note is that clarification letters have gone down over the last three months hitting a record low of 54 for the month of December, down from the highest level of 147 sent in a single month. Less clarification letters are indicative of efforts on behalf of Care Managers to contact providers via telephone for better customer service and clearly training to documentation needs as well as improved documentation from providers.

BPA's Claims Team:

- Processed 99.71% of claims within 14 days.
- Paid 100% of claims within 30 days.
- Had an average claim turnaround time of 6 days.

BPA's Regional Coordinators:

Conducted 78 Audits last quarter:

- CCA-General: 27
- CCA-PSC: 18
- CSA: 31
- PWWC: 2

Will be conducting the following trainings in the near future:

- February 15, 2012 – ASAM/ Clinical Documentation Training – Region 5 - Twin Falls, Idaho
- February 16, 2012 – Stages of Change Training – Region 5 – Twin Falls, Idaho
- Soon to be announced – Discharge Planning Webinar Training

Please watch for the registration notifications!