
COUNTY OF SAN MATEO HUMAN SERVICES AGENCY

ALCOHOL AND OTHER DRUG SERVICES

STRATEGIC PLAN FOR 2003/2004



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The Strategic Plan can be accessed online at <http://www.smchsa.org/alcohol/index.html>.
Additional copies of the Strategic Plan can be requested from
San Mateo County Alcohol and Other Drug Services at (650) 802-6400.

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**“And I am confident in the leadership and our ability to weather the storm
and continue to create new opportunities for our residents.”**

Supervisor Rose Jacobs Gibson, President of the Board of Supervisors
County of San Mateo, State of the County Address
January 6, 2003

THE MISSION STATEMENT

The mission of San Mateo County Alcohol and Other Drug Services is to promote a healthy community by increasing capacity and access to services, changing environmental norms and standards, and educating the community about substance use and abuse, and its related impact on family, community, and health.

EXECUTIVE SUMMARY

The problem of alcohol, tobacco, and other drug use and addiction in San Mateo County is one that cannot be ignored or denied. Substance use and dependency drives costs throughout county systems and in the community, and brings upon individuals and families pain and suffering that cannot be monetarily quantified. The availability of substance abuse prevention and treatment services promotes family wellness, and investing in alcohol, tobacco, and other drug abuse prevention and treatment is critical to the health of the community. Strategies must be developed to address these issues throughout the uncertainties of the next few years.

Substance abuse and addiction in San Mateo County involves drugs, alcohol, and tobacco products. Alcohol and other drugs play a role in virtually all other problems facing the County such as crime, AIDS, abuse and neglect, violence, teen pregnancy, accidents and injury, family violence, homelessness, and mental illness. Many men and women in our criminal justice system are there in part due to untreated substance abuse. The San Mateo County community has creatively addressed the need for alcohol and other drug prevention and treatment by committing resources, searching for creative and effective solutions, and developing this focused strategic plan. There needs to be continued investment not only in the results and devastation of untreated addiction, but also in treatment and prevention. The problems are known. This Strategic Plan brings solutions and approaches to these issues.

The strategic directions identified for San Mateo County Alcohol and Other Drug Services (SMCADS) for the next two years were developed in consideration of the current economic budget outlook and are based upon realistic expectations of what can be accomplished. They include prioritizing issues related to service capacity, improving linkages, promoting community education and advocacy, and improving client outcomes. It is also our intent to develop specific strategies that will maximize revenue streams to support the goals of the Strategic Plan.

The four themes that emerged as Strategic Directions for 2003/2004 are as follows:

1. **Maintain Service Capacity and Ensure a Continuum of Care**
 - Maintain the current level of substance abuse prevention and treatment capacity
 - Seek grant and foundation funding to build a continuum of care, including specialized services for women and adolescent girls, individuals with co-occurring mental health and substance abuse disorders, culturally-specific populations, and individuals not involved in the criminal justice system
 - Seek additional resources for prevention and early intervention services
 - Develop a continuum of services that addresses the needs of adolescents

2. **Improve Linkages**
 - Improve cross-system linkages and increase collaboration with community partners
 - Improve access and linkages to better address the needs of individuals with co-occurring disorders, pregnant women and parenting women with infants and/or young children, and families dealing with issues of violence
 - Improve ability to link substance abusers involved in treatment services with housing

3. Promote Community Education and Advocacy

- Incorporate substance abuse prevention and education in community programs
- Support community advocacy and policy changes
- Reduce stigma and provide education and training regarding alcohol, tobacco and drug concerns using interdisciplinary efforts to change attitudes and address misconceptions

4. Improve Client/Participant Outcomes

- Improve quality of alcohol, tobacco, and other drug prevention and treatment services
- Promote cross-cultural competency among contracted agencies
- Integrate performance outcomes and Outcome-Based Management (OBM) principles in contracting and decision-making processes
- Provide guidance, training, and technical assistance on AOD counselor certification
- Develop a strategic plan for tobacco control

Through the assessment meetings, themes emerged within identified external environmental factors affecting San Mateo County. Social factors included public opinions and social challenges. Political factors were comprised of concerns with competing social priorities and responsibilities of the government and legislation. Economic factors consisted of concerns of limited monetary resources and the redirection of resources. In addition, discussions on the culture of San Mateo County residents and community brought attention to the distinct socioeconomic dynamics within the county. Lastly, technology has brought an increased reliance on information systems for communication, outcome measurement, and decision-making processes. While residents can enjoy increased access to information and data, a conundrum exists because alcohol and tobacco products are now available for purchase through electronic means, where limited enforcement measures are in effect.

A Strengths, Limitations, Opportunities, and Threats (SLOTS) analysis provided a renewed perspective on the current state of affairs facing San Mateo County Alcohol and Other Drug Services (SMCADS). Its strengths include increased systems collaboration and involvement of community partners, other service systems, and funding agencies. SMCADS has the administrative and clinical skills, the ability to manage funding and provide training that is responsive to the needs of the service providers and community. Limitations are system and client centered issues, and most significantly, available resources. There are limited specialized services and many populations who are currently underserved. The opportunities for future planning and implementation include improving efficiencies, demonstrating effectiveness, and seeking new linkages and partnerships. Finally, real threats confronting SMCADS involve possible loss of funding, shifts in priorities, and increasing health and social ills affecting the client population.

This two-year Strategic Plan will provide guidance to SMCADS in upcoming decisions that will be made in program budgeting and other areas. By staying focused on the strategic directions, working together, and wisely using our administrative, capital, and monetary resources, SMCADS will maintain focus and commitment to individuals and communities affected by alcohol, tobacco, and other drugs while adapting to the economic constraints of the period.

INTRODUCTION

San Mateo County Alcohol and Other Drug Services (SMCADS) submitted its first Strategic Plan in September 1998. That strategic plan was accepted by the San Mateo County Board of Supervisors, making a commitment to increase the availability of substance abuse treatment services in the county. Since that time, two progress reports were completed as updated companion documents to the Strategic Plan. This new two-year Strategic Plan for Alcohol and Other Drug Services for 2003/2004 was written to address the numerous changes experienced recently. Some of these changes were predictable; some could never have been imagined.

One of the most significant events was the implementation of Proposition 36. In November 2000, California voters passed the Substance Abuse and Crime Prevention Act of 2000 (SACPA/Proposition 36) with a statewide 61 percent of voters approving the initiative. The Proposition supports community alcohol and drug treatment rather than incarceration for non-violent drug offenders and signals a new model of collaboration among government and community-based organizations in addressing drug addiction. Unforeseen events were the terrorist attack on America, the extent of the economic decline and emerging drug trends with an increase in methamphetamine and other stimulant use. The year 2003 began with two deaths resulting from ecstasy and methamphetamine use during a rave at the Cow Palace. An increasing number of the clients entering treatment are criminal justice involved, or entering treatment with a mental health and/or serious health problem, such as Hepatitis C. The recent Charitable Choice program proposed by President Bush also redirects a focus on recovery issues at a national level.

In 1998, the Board of Supervisors accepted the Strategic Plan for Alcohol and Drug Services, which included a seven-year phase-in plan for implementing additional treatment services required to meet the needs of the community. At that time \$616,000 in additional County funds were allocated for development of treatment expansion for the first year. With these funds, SMCADS was able to expand treatment services and decrease the wait time for entering treatment. The Board also encouraged SMCADS to seek grant funding for additional treatment expansion capacity. Due to SMCADS' ability to secure resources through federal and state grants, the Board was not approached for additional financial resources to continue its progress on the phase-in plan for the next three years. When many of the grants expired after the 3-year grant term, the Human Services Agency sustained the grants with its own agency budget. While progress had been made since the 1998 Strategic Plan, it will be difficult to sustain the additional treatment capacity created due to budgetary limitations.

In July 2000, San Mateo County's Tobacco Prevention Program moved from the Health Services Agency to the Human Services Agency. The transition of tobacco prevention, cessation, and enforcement activities was timely, particularly in consideration of the federal Synar legislation. The Synar amendment emphasizes consistent enforcement, monitoring of retail outlets' compliance, communication of results, and requires States to develop laws barring the distribution of tobacco products to minors. If sales to minors reaches above 20%, California could lose \$100 million in Federal Block grants to Alcohol and Drug Programs. For San Mateo County, the amount of funds that could be potentially lost is \$2,033,552. The integration of efforts is crucial in ensuring that substance abuse treatment and prevention services are not financially impacted by this legislation.

SMCADS participated with 13 other counties in the California Treatment Outcome Project (CalTOP) research study with the State of California Department of Alcohol and Drug Programs (ADP). The results of this innovative pilot study to improve alcohol and drug treatment services are being presented to the California State Legislature. The findings of the CalTOP study indicate that California (and the San Mateo County participants) receiving alcohol and other drug treatment services show significant improvements in seven key life areas: medical, drug use, family social, employment, legal, psychiatric, and alcohol. This research shows that treatment is a cost-effective solution for taxpayers and economically benefits families and communities. For every \$1 invested in alcohol and drug treatment, taxpayers get a return of \$7. (UCLA cost analysis). The information being generated by CalTOP and data collected from the Human Services Agency's Outcome-Based Management (OBM) Project is providing important information that can be utilized by policy and decision-makers for improvements in treatment services and the effective use of limited resources.

Looking ahead to 2003 and 2004, there is an unprecedented amount of interest and study on key issues in the alcohol and drug field. This will occur within the environment created by a state fiscal crisis of historic proportions. Reductions in state funding have already directly impacted the SMCADS budget. The threat of losing state and local general fund revenue will further reduce the amount of funds available to support alcohol and drug programs. The systems used to provide ancillary services are also struggling financially, making it more difficult to secure related care. An increasing number of youth and adolescents are being identified with substance abuse problems, however, there is very limited substance abuse treatment capacity to serve them. This is particularly true for adolescents not involved in criminal justice or mental health systems.

In order to address the current economic climate, emerging service needs and changing demographics of our population, SMCADS began a strategic planning process in May 2002. This two-year Strategic Plan for 2003/2004 is the culmination of the energy and commitment on behalf of all the participants who participated in the meetings and community forums. The strategic directions derived from this process address service gaps and needs, as well as propose action steps that can be taken in moving towards a healthier community.

A number of concerns regarding community impacts were raised by various groups throughout the planning process. There is concern that the service delivery system for substance abuse services remains viable and does not destabilize due to the current budget crisis. Costs of doing business are increasing. While substance abuse treatment capacity has increased in the last few years, a loss of service and capacity would be a major setback. If programs are closed, they usually cannot reopen during better times. There is concern that as substance abuse prevention and treatment services are reduced, an immediate cost increase will be felt in emergency rooms, maternal and child health systems, hospitals, jails/prisons, and increased rates of crime, violence, HIV, and Hepatitis C. Professional efforts are often redirected during times of crisis, taking away from the effectiveness of services to clients or effective planning. There was a general concern that this economic downturn be managed effectively so that morale, motivation, investments, and commitment would not lessen.

Now more than ever we need to be focused on our priorities, clear about the objectives, work in partnership with others, and use the Strategic Plan as our guide.

METHODOLOGY

Beginning in May 2002, San Mateo County Alcohol and Other Drug Services (SMCADS) conducted a series of strategic planning workgroups with community stakeholders. From the workgroup discussions, it was recommended that SMCADS involve all San Mateo County residents in a community assessment of how residents perceive and are affected by issues related to alcohol, tobacco, and other drugs. This process would involve all residents of the county, regardless of their affiliation or involvement in service systems, schools, or businesses. The recommendation included conducting a large-scale community assessment and outreach effort through surveys and focus groups. This could be achieved through mail distribution or on-site at locations such as local supermarkets, courts, and community meetings. However, due to staffing and financial limitations, SMCADS has decided to focus this strategic plan on developing strategic directions for the SMCADS unit with community stakeholders working closely on issues of alcohol, tobacco, and other drugs. A request for technical assistance will be made for support in conducting the large-scale community assessment.

The development of the San Mateo County Alcohol and Other Drug Services Strategic Plan for 2003/2004 included a series of assessment meetings with key stakeholder groups that achieved the following tasks: Review and refine the Mission Statement; Identify local, state, and national external factors; Identify strengths, limitations, opportunities, and threats faced by SMCADS; and the identify best practices/emerging research. These groups developed the basis for the assessment analysis in this plan. The key stakeholder groups included the Alcohol and Other Drug/Tobacco Prevention Program Policy Team, the Drug and Alcohol Advisory Board, Alcohol and Other Drug Treatment and Prevention Providers, and SMCADS staff. A listing of individual participating members can be found in the Acknowledgements Section of this plan.

In addition, a series of community forums were held at 3 different Human Services Agency regional offices in December 2002. The meetings were held in the Central Region in Belmont, the Southern Region in Redwood City, and in the Northern Region in Daly City. The purpose of the community forums were to review the assessment analysis developed for the strategic plan, engage in a dialogue among key stakeholders, identify and prioritize strategic directions for SMCADS in the upcoming years, and identify steps for implementation of the strategic plan. Specifically, the strategic planning questions discussed at the community forums were:

1. What do you see as the most important issues facing SMCADS as we plan strategically for AOD efforts?
2. What is the impact of substance abuse on the services provided by your organization/agency?
3. What are the current gaps in the AOD prevention, treatment, and tobacco prevention/cessation delivery system in San Mateo County?
4. What are the strategies we should be developing to deal with these gaps?
5. What are your concerns if services are decreased?

Participants at the community forums provided a strong direction for the development of the strategic directions listed in the next section.

STRATEGIC DIRECTIONS FOR 2003/2004

The following are the four priority strategic directions identified for San Mateo County Alcohol and Other Drug Services for the coming years. The strategic directions were developed from the assessment data that was gathered through community stakeholder meetings. A summary of the data can be found in Appendix of this Strategic Plan.

1. **Maintain Service Capacity and Ensure a Continuum of Care**
 - Maintain the current level of substance abuse prevention and treatment capacity
 - Seek grant and foundation funding to build a continuum of care, including specialized services for women and adolescent girls, individuals with co-occurring mental health and substance abuse disorders, culturally-specific populations, and individuals not involved in the criminal justice system
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 - Develop a continuum of services that addresses the needs of adolescents

2. **Improve Linkages**
 - Improve cross-system linkages and increase collaboration with community partners
 - Improve access and linkages to better address the needs of individuals with co-occurring disorders, pregnant women and parenting women with infants and/or young children, and families dealing with issues of violence
 - Improve ability to link substance abusers involved in treatment services with housing

3. **Promote Community Education and Advocacy**
 - Incorporate substance abuse prevention and education in community programs
 - Support community advocacy and policy changes
 - Reduce stigma and provide education and training regarding alcohol, tobacco and drug concerns using interdisciplinary efforts to change attitudes and address misconceptions

4. **Improve Client/Participant Outcomes**
 - Improve quality of alcohol, tobacco, and other drug prevention and treatment services
 - Promote cross-cultural competency among contracted agencies
 - Integrate performance outcomes and Outcome-Based Management (OBM) principles in contracting and decision-making processes
 - Provide guidance, training, and technical assistance on AOD counselor certification
 - Develop a strategic plan for tobacco control

For each Strategic Direction, we have included a summary description of the issue, identified key strategies areas, and specified action steps that are recommended. An implementation workplan will be developed from these action steps. The Drug and Alcohol Advisory Board (DAAB) will monitor the progress made towards our goals and make recommendations for updates to the workplan and Strategic Plan.

STRATEGIC DIRECTION #1

MAINTAIN SERVICE CAPACITY AND ENSURE A CONTINUUM OF CARE

Key Strategies

- Maintain the current level of substance abuse prevention and treatment capacity
 - Seek grant and foundation funding to build a continuum of care, including specialized services for women and adolescent girls, individuals with co-occurring mental health and substance abuse disorders, culturally-specific populations, and individuals not involved in the criminal justice system
 - Seek additional resources for prevention and early intervention services
 - Develop a continuum of services that addresses the needs of adolescents
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During the last few years, substance abuse treatment capacity was expanded with the use of Federal funds from the Center for Substance Abuse Treatment, County General Funds, and increases in the State Block Grant System. The success of maintaining the current capacity will rely heavily on the willingness of all stakeholders, including the County Manager's Office, the Board of Supervisors, and the Human Services Agency in taking the necessary actions to implement strategies to maintain the current level of substance abuse prevention and treatment capacity in San Mateo County.

A healthy substance abuse treatment system contains components such as prevention, early intervention, outpatient detoxification, residential detoxification, outpatient treatment, intensive outpatient, day treatment, residential, narcotic replacement, transition, and aftercare. An assessment of the continuum of services currently available in San Mateo County has resulted in the identification of need to seek grant funding to address service gaps. There is a crucial need for specialized services for women and adolescent girls, individuals with co-occurring mental health and substance abuse disorders, culturally specific populations, and individuals not involved in the criminal justice system.

In March 2002, concerns about substance abuse issues relating to women and adolescent girls were addressed by the Alcohol and Other Drugs Services program in collaboration with the Commission on Women in a groundbreaking report. San Mateo County was found to have issues congruent with the state in the prevention, intervention and treatment of women and girls with substance abuse issues. Illustrated by this effort were the continuing gender discrepancies inherent in the system. Multiple entry points, hidden use and the effect on partners and families highlighted concerns brought to the forefront. Women are continuing to be the touchpoint in family dynamics and are coping with a myriad of issues needing resolution in order to facilitate their healing process.

With increasing frequency, clients with mental illness, as well as substance abuse problems are entering substance abuse programs. Many of these clients are not the severely and persistently mentally ill, but face mental health issues that may hinder their progress in treatment. Current data reveals that Proposition 36 clients often have co-occurring disorders. CSAT Treatment Improvement Publication #9 (CSAT, 1990) notes potential pitfalls in treating persons with dual

disorders across multiple systems. These include: diagnostic mislabeling, failing to adequately recognize individuals with dual disorders, automatic transferring of clients to other systems, and/or treatment only addressing certain aspects of the overall problem. The result can be "patients falling through the cracks of treatment systems." The importance of addressing the co-occurring needs of clients is insurmountable. However, a challenge in achieving this task is the fact that the County Mental Health Services Division is currently threatened by budget and service reductions.

San Mateo County Alcohol and Other Drug Services is committed to securing additional resources for prevention and early intervention services. San Mateo County residents and community members identified substance abuse and tobacco prevention and early intervention services as an important and necessary service in our county that is currently under-funded. In October 2002, SMCADS was successful in securing 2 Safe and Drug Free Schools and Communities Grants to provide youth development, environmental prevention, and violence prevention services, however there remains a disparity in the number of youth who receive alcohol, tobacco, and other drug (ATOD) prevention services in the county. A strong recommendation was made throughout the strategic planning process to place a high priority on securing additional funds to sustain and enhance alcohol, tobacco, and other prevention and early intervention services.

There is also a critical need to create additional substance abuse capacity for adolescents that provides a spectrum of services that seamlessly integrates prevention strategies with early intervention and treatment. Services should continue to prioritize adolescents involved with County systems such as mental health, probation and child welfare. SMCADS is currently a member of the Adolescent Collaboration Action Team (ACAT), and will support their goal to ensure all adolescents will live in safe families and communities. Additional possible strategies include increasing sources of funding to enhance existing programs such as Juvenile Drug Court and promoting early intervention techniques that engage youth exhibiting risk behaviors. By continuing to participate in youth system of care committees such as the Children and Youth System of Care (CYSOC) and Youth to Adult Transition Program (YTAC) it will lead to increased collaboration and planning towards a more comprehensive system for youth.

Action Steps:

- Seek funding and develop creative solutions to maintain the current prevention and treatment capacity
- Respond to the federal Charitable Choice voucher option
- Seek new federal funding for capacity expansion and evaluation
- Develop strategies to increase Drug Medi-Cal reimbursements and fee collection
- Encourage contracted providers to conduct fundraising activities
- Improve access to medication and dual diagnosis services
- Conduct extensive multi-disciplinary trainings regarding co-occurring issues
- Facilitate the use of the psychiatrist from Mental Health Services to assist in linkage with mental health services for clients
- Develop a range of alcohol and drug services that serve youth mental health consumers (also cited in Mental Health Services Division Strategic Plan, June 2002)

- Seek funding from the Center for Substance Abuse Prevention (CSAP) and other entities to support prevention and early intervention services
- Seek funding from California Alcohol and Drug Program's State Incentive grant which targets binge drinking through environmental and community prevention activities
- Work collaboratively with the Coalition of Prevention Providers to generate revenue and promote youth development and asset building strategies
- Prioritize services for adolescents involved with county systems such as mental health, criminal justice and human services
- Develop environmental strategies that reduce youth access to alcohol and tobacco while developing appropriate programs that strengthen resiliency and reduce risk for substance use and abuse
- Develop and nurture linkages and best practices among entry points including criminal justice, mental health, health, education, and human services
- Seek funding to provide treatment services as alternatives to incarceration
- Seek funding to provide enhanced services to the rural San Mateo County coastside
- Offer cross training to encourage interdepartmental identification and referral of diverse and hidden populations of women needing intervention such as isolated older women, disabled women, lesbians, incarcerated and recently released women and survivors of childhood and adult sexual and physical trauma

STRATEGIC DIRECTION #2

IMPROVE LINKAGES

Key Strategies:

- Improve cross-system linkages and increase collaboration with community partners
- Improve access and linkages to better address the needs of individuals with co-occurring disorders, pregnant women and parenting women with infants and/or young children, and families dealing with issues of violence
- Improve ability to link substance abusers involved in treatment services with housing

Cross-system linkages continue to increase in their importance in the Alcohol and Other Drug treatment and prevention system. There is recognition that individuals receiving prevention and treatment services are also involved in other public systems. Our community partners are aware that while treating one person's symptoms or struggles is important, the impact of treatment will not be as effective unless the holistic needs or multi-faceted needs of the individual or family are addressed. Funding sources are increasing their requirements for meaningful collaboration. This cross-system work can benefit clients in a wide variety of ways. For example, if an AOD provider can help a client get into stable housing, the chances of enduring recovery are greatly enhanced.

There are also concerns regarding the access to services for pregnant women and women with infants and/or young children. There is a need to work collaboratively to identify means of tracking the incidence and prevalence of drug-exposed infants (estimated at 11% of births or approximately 1,000 births to county residents per year). This could be accomplished through collaboration with the Health Services Agency's Family Health Services programs, including Maternal, Child and Adolescent Health, Prenatal to Three Perinatal Addiction Outreach Team, Black Infant Health Program, and Adolescent Family Life Programs to address substance abuse issues of mutual interest.

The co-occurrence of family violence and substance abuse is very common. Both child abuse and spousal abuse have long lasting effects on both the victims and family members who witnessed the violence. These effects, often identified by our treatment providers, are supported by literature that confirms the correlation of violence and substance abuse. Clients may experience Post-Traumatic Stress Syndrome (PTSD) symptoms, which may cause them to be distracted, impacting their ability to fully participate in treatment.

As men and women who complete residential treatment programs find a new life in recovery, they often find they must start over at the bottom of the employment ladder. For these clients, the shortage of affordable housing can be a significant barrier to their continued recovery. Many of these clients have co-occurring mental and physical disorders that require services beyond the typical treatment, aftercare, and transitional program continuum. SMCADS seeks to enhance this continuum of care by creating service linkages and supporting infrastructure to designed to give recovering persons and their families access to permanent and affordable supportive housing.

Action Steps:

- Provide cross training to assist staff in other services systems to improve identification and referral of substance abuse
- Encourage cross system data linkages that better communicate data on clients and services for care coordination
- Promote interdisciplinary referral efforts within county departments
- Promote partnerships that provide integrated responses to the needs of substance abuse populations including those with mental illness, health problems, or who are homeless.
- Partner more closely with other county departments (ie. County Office of Education) and community-based organizations
- Prioritize substance abusers, and dually diagnosed individuals, involved in the treatment systems with supportive housing options
- Convene a meeting of decision makers and policy makers to address the issues of perinatal substance abuse
- Provide training on perinatal substance abuse and related issues
- Support community efforts to develop a systemic protocol for screening of alcohol and drug exposed infants by healthcare providers and hospitals
- Educate substance abuse treatment providers regarding services available through the Family Health Services programs
- Partner with other agencies and entities working to help persons involved in family violence
- Educate public health and healthcare providers and others regarding substance abuse treatment access
- Provide linkages into permanent supportive housing for homeless shelter residents who are graduates of substance abuse treatment programs
- Develop collaborative partnerships with non profit housing developers to plan and develop permanent supportive housing project (Proposition 46)
- Strengthen referrals streams for multi-diagnosed clients into the tenant based housing voucher programs (Frequent Users of the Treatment Systems)
- In collaboration with SMC Office of Housing and Department of Veterans Affairs, seek grant funding from the U.S. Department of Housing and Urban Development for permanent supportive housing for chronically homeless individuals and families
- Provide assessment and treatment services for substance abuse clients in supportive housing

STRATEGIC DIRECTION #3

PROMOTE COMMUNITY EDUCATION AND ADVOCACY

Key Strategies

- Incorporate substance abuse prevention and education in community programs
- Support community advocacy and policy changes
- Reduce stigma and provide education and training regarding alcohol, tobacco and drug concerns using interdisciplinary efforts to change attitudes and address misconceptions

In 2001, the Human Services Agency conducted a redesign of its alcohol and other drug prevention programs. Programs were encouraged to link with Family Resource Centers to better coordinate alcohol and other drug prevention efforts with other community prevention efforts. As a result, the integration of prevention strategies has enhanced services available to children, youth, and families in the county. These efforts will continue in future program activities, with the hopes that a more comprehensive prevention and early intervention community strategy will be sustained.

San Mateo County Alcohol and Other Drug Services would like to increase forums for policy discussions regarding ATOD issues. The recently developed Alcohol and Other Drug/Tobacco Prevention Program Policy Team can be instrumental in this area. The policy team recently hosted a discussion on the use of medical marijuana, which featured speakers Supervisor Mike Nevin and Dr. Dennis Israelski, Chief of Infectious Diseases. Additionally, community events such as the popular Recovery Film Festival encourages new ways of approaching recovery events.

Current advocacy activities include the Tobacco Education Coalition's involvement in the efforts regarding the tobacco retailer permit. The Tobacco Education Coalition (TEC) is receiving technical assistance from the Center for Tobacco Policy and Organizing to renew and strengthen San Mateo County's retail permit ordinance. Currently, it costs a retailer \$5 per year for the permit to sell tobacco products. The current ordinance is due to expire in September 2003, and the TEC is advocating to increase the cost of the permit resulting in funds that would ensure the funding of enforcement activities.

San Mateo County Alcohol and Other Drug Services is committed to providing education and helping reduce the stigma involved in treating clients with co-occurring disorders, including alcohol and drug dependency issues. San Mateo County offers regular trainings to community providers and SMCADS staff on a variety of topics. Topics range from environmental prevention, sexual abuse, co-occurring disorders, methadone, and reducing the stigma of clients using narcotic replacement therapy. SMCADS provides workshops, trainings, and conferences to aid in educating county funded agencies that provide services to these clients. San Mateo County regularly seeks out opportunities to collaborate with other county departments, such as Mental Health Services. This collaboration of interdisciplinary departments assists in providing training sessions that reach a larger number of employees. These collaborations help promote an understanding of alcohol, tobacco, and other drug issues that impact all county service systems.

SMCADS tries to work with agencies and departments that are proven effective in treating clients with multiple barriers, through science-based research and best practices theories.

Action Steps

- Provide basic education about alcohol, tobacco and other drug prevention and addiction/recovery issues
- Increase community provider knowledge of prevention strategies and alternative recovery methods
- Encourage prevention program strategies that model best practices and are science-based
- Partner with other agency departments to provide trainings to reach a greater audience
- Develop and recommend policy changes via the Alcohol and Other Drug/Tobacco Prevention Program Policy Team and the Drug and Alcohol Advisory Board (DAAB)
- Promote activities between the Human Services Agency and legislative staff regarding alcohol and drug legislation
- Support community events promoting recovery, prevention and treatment

STRATEGIC DIRECTION #4

IMPROVE CLIENT/PARTICIPANT OUTCOMES

Key Strategies

- Improve quality of alcohol, tobacco, and other drug prevention and treatment services
 - Promote cross-cultural competency among contracted agencies
 - Integrate performance outcomes and Outcome-Based Management (OBM) principles in contracting and decision-making processes
 - Provide guidance, training, and technical assistance on AOD counselor certification
 - Develop a strategic plan for tobacco control
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The community based system for alcohol and drug prevention and treatment consists of numerous community-based organizations. Many are small or moderate in size and they are being confronted with concerns such as the high cost of doing business in San Mateo County, a new counselor certification requirement, anxiety about budget reductions, and the recruitment and retention of qualified staff. Efforts to expand are often met with "Not in My Back Yard" responses. An increasing number of alcohol and drug treatment providers are experiencing an influx of clients with multiple and complex issues including co-occurring (both mental health and substance abuse) disorders and other acute problems including health, criminal justice, homelessness, and cultural and family issues. In order to provide quality services that are responsive to the multifaceted issues faced by clients, there is a crucial need to identify the unique circumstances that contribute to their addiction. A new counseling certification requirement will require that all counselors be certified within a five-year period. This will impact current staffing at provider sites and counselors will incur costs for their educational requirement.

The diversity of San Mateo County should be reflected in the quality of services that are available in the community. There is a need to ensure certain services are available and accessible to populations with specific needs. Culturally competent outreach materials and bilingual capability of programs are only one factor in increasing accessibility. There is a need to conduct a demographic analysis between our county population, our client population, and demographic composition of staff. A cultural competency plan that addresses the issues of diversity and organizational cultures should be developed.

In 2000, Alcohol and Other Drug Services was selected as the pilot for the Human Services Agency's Outcome-Based Management Project. Since then, we have developed a process with contracted providers to measure the performance outcomes of individuals who have received services. Currently, performance measures are reported out semi-annually for compliance with the County's budgeting process, resulting in a Year-End Report published for each fiscal year. The next phase of this project is to utilize OBM compliance and outcome data as a factor in formal decision-making processes.

In July 2000, the San Mateo County Tobacco Prevention Program moved from the Health Services Agency and became part of Human Services Agency's Alcohol and Other Drug Services Unit. The Tobacco Prevention Program is the Local Lead Agency for developing

community-based tobacco education programs for the County. Tobacco use continues to be the most preventable cause of death and disability in the United States. Furthermore, in California illegal sales of tobacco products to minors has hit an all time high at 19.3%. Under federal SYNAR legislation, if sales to minors goes above 20%, California stands to lose \$100 million in Federal Block grants to Alcohol and Drug Programs. For San Mateo County, the amount of funds that could be potentially lost is \$2,033,552. Therefore, due to the physical and financial implications of tobacco use in our County, the Tobacco Prevention Program, under the guidance of the Tobacco Education Coalition, will develop a strategic plan in order to most effectively address tobacco issues in our County.

Action Steps

- Ensure quality assurance of services by ongoing monitoring and providing technical assistance to contracted providers
- Ensure substance abuse treatment agencies are in compliance with AOD certification and licensing requirements
- Provide alcohol and drug service providers and organizations serving this population with training on best practices to promote quality services
- Develop an information technology infrastructure that supports the goals, strategies, and operations of AOD and its stakeholders
- Implement Phase I of the new DAISY (Drug and Alcohol Information Systems for You) automation system to collect data and monitor performance outcomes
- Integrate the assessment and review of performance outcome data in the Request for Proposals process
- Integrate performance outcomes and expectations into county contracts
- Maintain knowledge and compliance with the Federal Performance Partnerships initiative
- Create opportunities for providers to secure and own their own property in order to reduce long term overhead costs.
- Provide technical assistance and support to assist contractors in securing resources
- Increase awareness and encourage an environment that is respectful of diversity and the individual, specific needs of clients/participants and their families
- Develop a cultural competency plan for SMCADS
- Develop a communication plan to share best practices and disseminate lessons learned on cultural competency
- Continue to provide training opportunities on topics of cultural competency and providing services to diverse populations
- Encourage providers working with specific ethnic populations to provide cross-training to other providers
- Conduct a thorough assessment of current tobacco control activities in our County, include tobacco prevention, cessation, and enforcement
- Conduct a needs assessment in order to identify gaps in current services and identify underserved communities
- Coordinate tobacco prevention and cessation services with other local programs

CONCLUSION

This Strategic Plan for Alcohol and Other Drug Services for 2003/2004 has identified the directions that San Mateo County Alcohol and Other Drug Services has prioritized for the next two years. In order to make progress towards the directions, an implementation workplan will be developed from the recommended action steps. The Drug and Alcohol Advisory Board (DAAB) will monitor the progress in workplan activities and make recommendations for subsequent action steps.

It is evident that there is a need to maintain our current service capacity in all program areas. One strategy is to continue our program development plan by increasing federal treatment capacity expansion and/or enhancement awards and seek additional funding from the California Department of Alcohol and Drug Programs. The key to success is to improve linkages and foster collaboration between providers and the Human Services Agency in the development of grant proposals that support existing services that enhance and/or expand services to provide prevention services and meet the multiple needs of those seeking substance abuse treatment.

In an effort to increase the capacity of contracted providers in revenue enhancement activities, Alcohol and Other Drug Services will provide training for the Treatment, Prevention, and Tobacco Prevention/Cessation provider community in ways to access funding with AOD staff coordinating all necessary documents needed for successful proposal submission. As we implement Phase I of the DAISY (Drug and Alcohol Information Systems for You) web-based data information system with contracted treatment providers in FY 2003/2004, in-treatment data to support future funding requests will be accessible to support provider program development. Providers will be encouraged to form partnerships and combine resources to provide more efficient and effective prevention and intervention strategies. In addition, SMCADS should adopt a system that generates third party payment of substance abuse services to youth and adults, i.e. Drug Medi-Cal, Minor Consent Medi-Cal, and encourage providers to seek alternative revenues through fundraising.

By continuing to promote community education in San Mateo County, progress will be made in changing environmental norms and standards, and an increased level of awareness about substance use and abuse and its impact on family, community, and health will be fostered. The impact of past legislation on tobacco and substance abuse-related issues have provided funding for program services. The county's involvement in supporting policy changes can have a significant impact on our community health. Lastly, supporting quality programs and services responsive to community needs is imperative. The measurement and monitoring of performance outcomes will ensure programs are effective and efficient. San Mateo County Alcohol and Other Drug Services will pave the road for the future by providing guidance in promoting cross-cultural competency among programs and in the upcoming implementation of the counselor certification requirements.

It is only through the ongoing support of policymakers, community stakeholders, and the alcohol, tobacco and other drug prevention and treatment community that progress can be made towards the strategic directions presented in this Strategic Plan.

ACKNOWLEDGEMENTS

We would like to acknowledge and thank the following community stakeholders who participated in the development of the comprehensive Strategic Plan. They participated in a number of planning meetings, workgroups, assessment meetings and community forums coordinated by Alcohol and Other Drug Services.

THE ALCOHOL AND OTHER DRUG/ TOBACCO PREVENTION PROGRAM POLICY TEAM COMMITTEE:

Annette Passalacqua, Youth and Family Assistance
Christine O'Kelly, Human Services Agency
Clara Boyden, Human Services Agency
David Mineta, Asian American Recovery Services
Darla Munson, Human Services Agency
Desi Tafoya, Human Services Agency
Donna Woche, Human Services Agency
Elizabeth Gheleta, Service League
Evelyn Castillo, American Lung Association
Fred Koehler, Drug and Alcohol Advisory Board
Hideki Hara, Human Services Agency
Jennie Loft, Human Services Agency
John Meermans, Human Services Agency
Julie Scales, Legacy Foundation
Kathy Guttenbeil, South County District Office
Larry Bogatz, Human Services Agency
Laura Martell, Human Services Agency
Laurie Record, American Cancer Association
Nikki Adams, Human Services Agency
Paul Wendler, District Attorney's Office
Pat Morrisey, Human Services Agency
Rich Hayward, Correctional Health Services
Scott Morrow, Health Services
Selina Toy, Human Services Agency
Shelly Nicholson, North County District Office
Sheralynn Freitas, Probation
Stuart Oppenheim, Human Services Agency
Sue Henkin-Haas, Human Services Agency
Sue Pinto, Vocational Rehabilitation Services
Wendy Goldberg, Human Services Agency
Yvonne Frazier, Human Services Agency

DRUG AND ALCOHOL ADVISORY BOARD (DAAB) COMMITTEE MEMBERS

Bernice Straub, Chair
Judy Cohen, Secretary
Laurie Spencer M.D., Vice Chair
Nancy Bain, Member
Fred Koehler, Member
Cindy Perry, Member
Geraldine O'Connor, Member
George Cole, Member
Zohary Bassett, Member
Cory Chen, Youth Commissioner
Shaelyn Dawson, Youth Commissioner
Laura Gamble, Youth Commissioner

AOD TREATMENT PROVIDERS

Asian American Recovery Services, Inc.
Avalon Counseling
Catholic Charities
Daytop Village
El Centro de Libertad
Family and Community Enrichment Services, Inc.
Free at Last
Palm Avenue
Occupational Health Services
Prenatal to Three Initiative
Project Ninety
Pyramid Alternatives, Inc.
San Mateo County AIDS Program
San Mateo County Health Services Agency's
Methadone Clinic
Service League of San Mateo County, Hope
House
Sitikc Counseling Center
The Latino Commission
Walden House
Women's Recovery Association
Youth and Family Assistance, Archway and
Insights Program

AOD PREVENTION PROVIDERS

Asian American Recovery Services
Bay Area Community Resources
Cabrillo Unified School District
Coastside Collaborative for Children, Youth, and Families
El Centro de Libertad
Free At Last
Hope Preservation Inc.
Jefferson School District
Jefferson Union High School District
Millbrae School District/Children's Network
Mis Hermanas
New Perspectives
South Coast Children's Services
The Children's Place Program
Youth and Family Assistance
Youth Empowering Systems
Youth Leadership Institute

TOBACCO EDUCATION COALITION (TEC) MEMBERS

American Cancer Society
American Heart Association
American Lung Association of SF & SM Counties
Health Plan of San Mateo
Jefferson Union High School District
Kaiser Permanente - Redwood City
Menlo Atherton High School Outreach
O'Rorke, Inc.
Ron Carino
San Mateo County Health Services Agency
San Mateo County Medical Association
San Mateo County Office of Education
Sequoia Union High School District
SMC Employee Health and Fitness
SMC Environmental Health Services
Smoke Free Start for Families
Supervisor Jerry Hill's Office
Walden House
Youth Empowering Systems
Youth Leadership Institute

COMMUNITY FORUM ATTENDEES AND STRATEGIC PLANNING WORKGROUP MEMBERS

(Individuals or groups acknowledged elsewhere in this document are not listed twice if they also attended the community forums)

Alfred Camia, Asian American Recovery Services
Alicia Goldstein, San Mateo County Office of Education
Amy Benjamin, Youth Leadership Institute
Anastacio Flores, Jr., Asian American Recovery Services
Beverly Dekker-Davidson, Human Services Agency
Bingo Marasigan, Asian American Recovery Services
Chata Alfaro, Free at Last
Darryl Byrd, New Perspectives
David Mineta, Asian American Recovery Services
Eddie Kaufman, Youth Leadership Institute
Elizabeth Gheleta, Service League/Provider's Coalition
Emily Garfield, Youth Empowering Systems
Joe Laping, Asian American Recovery Services
John Meermans, Human Services Agency
Jolie Bou, Women's Recovery Association
Julie Scales, Legacy Foundation
Leonardo Tacata, Asian American Recovery Services
Linda Moisoff, Palm Avenue Detox
Marc Sabin, Project Ninety
Marilyn Kissinger, Family and Community Enrichment Services, Inc.
Nancy Bain, Drug and Alcohol Advisory Board
Rosy Costas, San Mateo Medical Center
Toby Coates, Service League/Hope House

APPENDIX 1
ASSESSMENT OF THE EXTERNAL ENVIRONMENT

Through group brainstorming meetings with community stakeholders, a series of assessment exercises were conducted to determine the local and national factors affecting San Mateo County Alcohol and Other Drug Services. The findings are detailed in the following charts.

SOCIAL FACTORS	
Public Opinion	Social Challenges
<ul style="list-style-type: none"> • Increased media coverage of medical marijuana • Public support of initiatives in favor of treatment services, such as Proposition 36 • Increased acceptance of substance abuse as a disease, and understanding substance abuse relapse as a part of recovery • Increased research and information available on harm reduction strategies and needle exchange • Programs attempting to establish a location continue to be faced with the “Not in My Backyard” (NIMBY) resistance • Assumption that San Mateo County residents are not faced with issues related to alcohol, tobacco, and other drugs • Awareness that new collaborative partnerships need to be developed 	<ul style="list-style-type: none"> • Community and cultural attitudes towards drug and alcohol use • Advertising and portrayals of drug use in the media and movies • The existence of gender, racial and sexual orientation bias • Co-occurring substance abuse and mental health disorders • High cost of living in San Mateo County • High rates of unemployment and job loss • Funds for services are for individuals who are involved in the criminal justice system • Increase in the inappropriate use of prescription drugs, which are being advertised to the general public in mass media • Physicians are not sufficiently involved in the identification and referral of patients for symptoms of substance abuse

POLITICAL FACTORS	
Responsibilities of Government	Legislation
<ul style="list-style-type: none"> • Elected officials have decision making authority over funding allocations • Competing social priority levels and ensuring equal access to treatment and health care • Balancing funds with limited resources 	<ul style="list-style-type: none"> • Legislation has not been effective in reducing problems with ATOD use • Legislation gets passed/not passed based on whether it is an election year/non election year • Proposition 36-eligible individuals who are arrested are provided with alternatives to incarceration • Funding initiatives for specific populations limits the capacity to serve voluntary clients • The legalization of medical marijuana may impact the field

ECONOMIC FACTORS

Monetary Resources	Culture of Our Population
<ul style="list-style-type: none"> • Federal, State, and local governmental budgets are decreasing • The priority is to maintain current level of service availability • Non-profit organizations are not able to secure funding to purchase or lease facilities • Foundations and corporations are reducing charitable and planned giving • A decrease in high tech jobs is reducing the county's income and tax base • A proposed increase of tobacco tax and alcohol tax "Nickel a Drink" may help support programs • Due to funding restrictions and availability, AOD prevention funding is scarce • There is increased competition for funds and a redirection of resources 	<ul style="list-style-type: none"> • A higher concentration of drug sales occurs in East Palo Alto • There is a disproportionate percentage of alcohol sales and targeted marketing to Latino communities • There is a need to raise awareness of corporate sponsorship in certain ethnic communities • Due to the cost of living, many cannot afford to live and work in San Mateo County • Residents are facing job losses and decreases in pay, with increased costs of living • Loss of high paying jobs for county residents • The coastal communities face transportation barriers, which limit their ability to participate in activities and programs • Family issues must be assessed within a cultural context when conducting an analysis of family members working multiple jobs in the definition of low income • A disparity exists on the policies related to accessibility of alcohol and tobacco products • Language barriers exist for individuals and families seeking services

TECHNOLOGICAL FACTORS

Information Systems	Increased Access Through Technological Advances
<ul style="list-style-type: none"> • Development of information systems that are more user-friendly • Increased reliance of data for reporting and outcome measurement • The relationship between data collection as a planning tool for clinical services needs to be emphasized • Ongoing support of information systems can be a challenge • Internet and e-mail accessibility provides a tool to facilitate communication • Federal Center for Substance Abuse Treatment requires compliance with the Government Performance Results Act (GPRA) and will make decisions for continued funding based on successful web-based data/submission • Emerging Confidentiality/Health Insurance Privacy and Portability Act regulations (HIPPA) 	<ul style="list-style-type: none"> • There is a wealth of data available through the internet • Alcohol and tobacco products can be purchased over the internet, with limited enforcement • Drug companies are increasingly marketing to consumers rather than physicians • Increased inappropriate use of prescription drugs • Information on new developments available on anti-dependency medication are available through the internet

APPENDIX 2
IDENTIFYING STRENGTHS, LIMITATIONS, OPPORTUNITIES, AND THREATS

Based upon the findings resulting from the assessment of the external environment exercise, community stakeholders identified the strengths and limitations of SMCADS, as well as opportunities and threats that are presented for the near future, as detailed below:

STRENGTHS	
Systems Collaboration	Skills and Abilities
<ul style="list-style-type: none"> • Government officials are concerned about issues related to alcohol, tobacco, and drugs • Increasing the understanding that the ATOD issues have an impact on many other social support and service systems • The County Board of Supervisors is supportive of the services provided by AOD • AOD supports and promotes the Peninsula Youth Development movement • Demonstrated strong cross-systems collaboration both within the county system (Probation, Mental Health, Housing, Court Systems) and outside the county system (Parole, California Department of Alcohol and Drugs (ADP), Community Providers) • Integration of tobacco cessation services into substance abuse treatment provider sites • Continued increased involvement with the hospital and health system 	<ul style="list-style-type: none"> • Alcohol and Other Drug Services has expanded and developed significantly in the past five years, broadening the scope to include administrative and direct services. • Skilled administrative and clinical staff who possess a collaborative approach in working with providers • Extremely committed pool of providers delivering services in various modalities • Demonstrated ability to acquire and manage funding from a variety of sources (Federal Grants, Block Grants, State Grants, Foundations) • Program development is based on best practices and science-based approaches • Increased skills in technology and data collection and management • Provision of training for staff, providers, and collaborative partners • Responsive to community needs • Alumni and consumer involvement

LIMITATIONS		
System-Centered Issues	Client-Centered Issues	Resources
<ul style="list-style-type: none"> • Lack of specialized services for early intervention, stimulant abuse, range of detoxification services • Lack of a fully developed adolescent treatment system • Limited culturally and linguistically appropriate competent service delivery system • Difficulty expanding services if unable to maintain existing services 	<ul style="list-style-type: none"> • Increased cross-utilization of services • Lack of capacity for children/youth who are not involved in the criminal justice system • Treatment is more readily available for those who are arrested • Limited services available for youth transitioning to the adult treatment system • Limited transitional housing 	<ul style="list-style-type: none"> • Sustainability, integration, and transition of services after grants sunset • There is a need to develop outreach materials that are specific to ethnic and cultural populations • Limited/lack of categorical funding for prevention and early intervention services for children/youth • Budget issues may impact service delivery system

LIMITATIONS		
System-Centered Issues	Client-Centered Issues	Resources
<ul style="list-style-type: none"> Limited services for transitioning clients from incarceration to the community Recruiting and maintaining staff The existence of pockets of community resistance Community and cultural attitudes around alcohol, tobacco and other drug use may hinder progress 	<ul style="list-style-type: none"> Prop. 36 clients are presenting with severe needs Limited services available for children of alcoholics Language barriers Young people are not able to access services outside of their communities There is a need for psychiatric monitoring for co-occurring disorders. Transportation issues are challenging, based upon the geographical diversity of the county 	<ul style="list-style-type: none"> Perception of San Mateo County as affluent or as having small problems Revenue diversification is needed Lack of detailed research on Prop. 36 clients and how our services save money for probation, parole, etc Lack of funds for staff to attend conferences and training Due to resources needed to secure program sites, residential treatment may be impacted

OPPORTUNITIES	THREATS
<ul style="list-style-type: none"> Increase focus on youth development (asset building and foster resiliency) approaches Improve governmental efficiencies in areas such as data management Develop and provide training on identification and referral services for providers Strengthen cross-system linkages to improve outcomes Support resource allocations based on client and community outcomes Seek opportunities with new partners, such as foundations and businesses Demonstrate that providing prevention and treatment services is preventing costs in other systems Revise and implement the strategic directions put forth in this Strategic Plan Leverage funding among multiple sources Implement environmental and policy changes to make substance use less appealing Conduct further research on cost effectiveness of interventions 	<ul style="list-style-type: none"> The current financial and economic situation may threaten the stability of service providers The cost of market rate rentals in the county are increasing, impacting the financial viability of non-profit organizations Inability to maintain the current level of services Shifts in funding priorities may not favor substance abuse The Governor's Proposed January 2003 Budget may impact funding available for ATOD services Policies (federal/state) often do not address substance abuse services and concerns Federal, state, and local budget situation may result in the loss of treatment and prevention services Possible loss of funds for substance abuse treatment due to the SYNAR legislation Increasing numbers of treatment slots are designated for clients who are criminal justice involved HIV, Hepatitis C, and deteriorating health and mental health due to severe substance abuse Maintaining support for substance abuse services at a time when other types of services are also threatened "Not in my backyard" (NIMBY) response to citing substance abuse treatment programs still exist

APPENDIX 3

GAPS IN THE SERVICE DELIVERY SYSTEM

San Mateo County Alcohol and Other Drug Services gathered input through brainstorming exercises conducted at community hearings, treatment and prevention provider meetings and the Drug and Alcohol Advisory Board. Gaps and areas for further development in the current service delivery system have been identified in a number of areas.

Tobacco cessation services are limited. There is a need to make cessation services for youth available in all high schools, but a limited ability to provide these services. There is also a need for integration of cessation services into alcohol and drug treatment programs. To improve tobacco prevention, a strong tobacco retailer permit is needed.

Gaps were identified in the continuum of alcohol and drug prevention, intervention and treatment services. Prevention services do not receive adequate funding or support and there is recognition of the need to implement environmental prevention strategies. Early intervention services are limited and largely not funded. There is a need for specific early intervention services for youth. In general, the capacity of the system to provide treatment services is not seen as adequate. This is evidenced by waiting lists and waiting times to access treatment. Outreach efforts are limited due to caseload.

The need for development of cross cultural service delivery, gender-specific services, youth treatment (particularly for early adolescents), and services for special populations were identified. These include the need for perinatal services that include more quality residential treatment with placement for children, family reunification and transitional services. There is also a lack of resources for individuals with co-occurring disorders. We need to increase expertise as well as resources so service providers will be better able to respond to multiple needs of the clients they serve (mental health, violence, homelessness, etc.). Demand for youth treatment is high; however, most of the available treatment slots are utilized by youth referred by criminal justice.

Additional ancillary and supportive services are needed. These include the ability to provide comprehensive case management and to assist with locating housing for graduates of residential treatment programs. The treatment community needs to have a clear understanding of how related issues, including violence and health-related concerns such as Hepatitis C, affect substance abuse. Other disciplines, including physicians and other medical professionals, Marriage and Family Therapists and other counselors need to receive training on substance abuse and intervention. Alcohol and other drug service providers need more connection and coordination with other community-based organizations and other systems.

In the area of policy and research, policy changes are needed that will be effective in supporting AOD efforts. An example is the need for college campuses and high schools to develop effective policies on alcohol. There is also increasing emphasis by funders on the need to align service delivery with current research findings.

APPENDIX 4

ADDITIONAL RESOURCES

If you would like additional information regarding Alcohol and Drug or related strategic planning efforts, please refer to the following listing of resources:

San Mateo County Alcohol and Other Drug Services website

<http://www.smchsa.org/alcohol/index.html>

Reports: The Strategic Plan for Alcohol and Drug Services for San Mateo County, July 98 and Status Report Updates

San Mateo County Human Services Agency

<http://www.smchsa.org>

San Mateo County Human Services Agency's Strategic Plan

http://www.plsinfo.org/healthsmc/html/health_well-being.html

Reports: This links to a variety of reports on health/well being in San Mateo County

County of San Mateo website

www.co.sanmateo.ca.us

Report: Shared Vision 2010 People, Prosperity, Place, Partnership

San Mateo County Health Services Agency website

http://www.co.sanmateo.ca.us/smc/departments/home/0,,1954_2139,00.html

California Department of Alcohol and Drug Programs

<http://www.adp.cahwnet.gov/>

County Alcohol and Drug Program Administrators Association of California (CADPAAC)

<http://www.cadpaac.org/>

Alcohol and Drug Policy Institute (ADPI)

<http://www.alcoholdrugpolicy.com>

Center for Substance Abuse Treatment

Changing the Conversation

http://www.samhsa.gov/centers/csat2002/csat_frame.html