

2015 Sunset Review:

Rural Alcohol and Substance Abuse Prevention and Treatment Program



October 15, 2015

Members of the Colorado General Assembly c/o the Office of Legislative Legal Services State Capitol Building Denver, Colorado 80203

Dear Members of the General Assembly:

The mission of the Department of Regulatory Agencies (DORA) is consumer protection. As a part of the Executive Director's Office within DORA, the Office of Policy, Research and Regulatory Reform seeks to fulfill its statutorily mandated responsibility to conduct sunset reviews with a focus on protecting the health, safety and welfare of all Coloradans.

Programs scheduled for sunset review receive a comprehensive analysis. The review includes a thorough dialogue with agency officials, representatives of the regulated profession and other stakeholders. Anyone can submit input on any upcoming sunrise or sunset review via DORA's website at: www.dora.colorado.gov/opr.

DORA has completed the evaluation of the Rural Alcohol and Substance Abuse Prevention and Treatment Program. I am pleased to submit this written report, which will be the basis for my office's oral testimony before the 2016 legislative committee of reference. The report is submitted pursuant to section 24-34-104(8)(a), of the Colorado Revised Statutes (C.R.S.), which states in part:

The department of regulatory agencies shall conduct an analysis of the performance of each division, board or agency or each function scheduled for termination under this section...

The department of regulatory agencies shall submit a report and supporting materials to the office of legislative legal services no later than October 15 of the year preceding the date established for termination....

The report discusses the question of whether there is a need to continue the funding provided under Article 80 of Title 27, C.R.S. The report also discusses the effectiveness of the Colorado Department of Human Services in carrying out the intent of the statutes.

Sincerely,

Joe Neguse

Executive Director





2015 Sunset Review Rural Alcohol and Substance Abuse Prevention and Treatment Program

SUMMARY

What Is The Program?

The Rural Alcohol and Substance Abuse Prevention and Treatment Program (Program), which is housed in the Colorado Department of Human Services, provides funding to rural areas for youth substance abuse prevention programs and detoxification services. Rural areas are defined in statute as counties with populations of less than 30,000 residents.

Why Was It Created?

The Program was created to address the increased need for substance abuse prevention programs for youth as well as additional funding for detoxification services in rural counties.

Who Received Funds?

The Program provides funding for youth substance abuse prevention programs, such as life skills training, which is a school-based program that aims to prevent alcohol and substance abuse, in the following counties:

- Archuleta
- Chafee
- Del Norte

- Hinsdale
- Gunnison
- Routt

The Program also provides funding for detoxification services at the following facilities:

- Arapahoe House
- Axis Health Systems
- Colorado West Regional Mental Health Center
- Crossroads' Turning Points

- Denver Health
- El Paso County Sheriff's Office
- North Range Behavioral Health
- Region Six Alcohol and Drug Abuse

How Are The Funds Generated?

The funds are generated through a penalty surcharge on convictions of driving under the influence, driving while ability impaired, alcohol or drug offenses and underage drinking and driving.

How Many Funds Were Used?

In fiscal year 14-15, there were \$151,243 available for distribution. The statute required the funds to be equally divided between the substance abuse prevention account and the detoxification account.

KEY RECOMMENDATIONS

Continue the Program for nine years, until 2025.

The Program provides valuable funds for substance abuse prevention programs for youth as well as additional funding for detoxification services in rural counties. In fiscal year 14-15, there were \$151,243 available for equal distribution between substance abuse prevention programs and detoxification services. As such, six rural counties utilized funds to provide substance abuse programs to youth and eight detoxification facilities received funds from the Program.

METHODOLOGY

As part of this review, staff at the Department of Regulatory Agencies interviewed staff at the Colorado Department of Human Services, Office of Behavioral Health and stakeholders, and also reviewed Colorado statutes and rules.

MAJOR CONTACTS MADE DURING THIS REVIEW

Crossroads' Turning Points
Department of Human Services
Mind Spring Health
North Range Behavioral Health
Region Six Alcohol and Drug Abuse

What is a Sunset Review?

A sunset review is a periodic assessment of state boards, programs, and functions to determine whether they should be continued by the legislature. Sunset reviews focus on creating the least restrictive form of regulation consistent with protecting the public. In formulating recommendations, sunset reviews consider the public's right to consistent, high quality professional or occupational services and the ability of businesses to exist and thrive in a competitive market, free from unnecessary regulation.

Sunset Reviews are prepared by: Colorado Department of Regulatory Agencies Office of Policy, Research and Regulatory Reform 1560 Broadway, Suite 1550, Denver, CO 80202 www.dora.state.co.us/opr



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Background

Introduction

Enacted in 1976, Colorado's sunset law was the first of its kind in the United States. A sunset provision repeals all or part of a law after a specific date, unless the legislature affirmatively acts to extend it. During the sunset review process, the Department of Regulatory Agencies (DORA) conducts a thorough evaluation of such programs based upon specific statutory criteria ¹ and solicits diverse input from a broad spectrum of stakeholders including consumers, government agencies, public advocacy groups, and professional associations.

Sunset reviews are based on the following statutory criteria:

- Whether regulation by the agency is necessary to protect the public health, safety and welfare; whether the conditions which led to the initial regulation have changed; and whether other conditions have arisen which would warrant more, less or the same degree of regulation;
- If regulation is necessary, whether the existing statutes and regulations establish the least restrictive form of regulation consistent with the public interest, considering other available regulatory mechanisms and whether agency rules enhance the public interest and are within the scope of legislative intent;
- Whether the agency operates in the public interest and whether its operation is impeded or enhanced by existing statutes, rules, procedures and practices and any other circumstances, including budgetary, resource and personnel matters;
- Whether an analysis of agency operations indicates that the agency performs its statutory duties efficiently and effectively;
- Whether the composition of the agency's board or commission adequately represents the public interest and whether the agency encourages public participation in its decisions rather than participation only by the people it regulates;
- The economic impact of regulation and, if national economic information is not available, whether the agency stimulates or restricts competition;
- Whether complaint, investigation and disciplinary procedures adequately protect the public and whether final dispositions of complaints are in the public interest or self-serving to the profession;
- Whether the scope of practice of the regulated occupation contributes to the optimum utilization of personnel and whether entry requirements encourage affirmative action;

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¹ Criteria may be found at § 24-34-104, C.R.S.

- Whether the agency through its licensing or certification process imposes any
 disqualifications on applicants based on past criminal history and, if so, whether
 the disqualifications serve public safety or commercial or consumer protection
 interests. To assist in considering this factor, the analysis prepared pursuant to
 subparagraph (i) of paragraph (a) of subsection (8) of this section shall include data
 on the number of licenses or certifications that were denied, revoked, or
 suspended based on a disqualification and the basis for the disqualification; and
- Whether administrative and statutory changes are necessary to improve agency operations to enhance the public interest.

Types of Regulation

Consistent, flexible, and fair regulatory oversight assures consumers, professionals and businesses an equitable playing field. All Coloradans share a long-term, common interest in a fair marketplace where consumers are protected. Regulation, if done appropriately, should protect consumers. If consumers are not better protected and competition is hindered, then regulation may not be the answer.

As regulatory programs relate to individual professionals, such programs typically entail the establishment of minimum standards for initial entry and continued participation in a given profession or occupation. This serves to protect the public from incompetent practitioners. Similarly, such programs provide a vehicle for limiting or removing from practice those practitioners deemed to have harmed the public.

From a practitioner perspective, regulation can lead to increased prestige and higher income. Accordingly, regulatory programs are often championed by those who will be the subject of regulation.

On the other hand, by erecting barriers to entry into a given profession or occupation, even when justified, regulation can serve to restrict the supply of practitioners. This not only limits consumer choice, but can also lead to an increase in the cost of services.

There are also several levels of regulation.

<u>Licensure</u>

Licensure is the most restrictive form of regulation, yet it provides the greatest level of public protection. Licensing programs typically involve the completion of a prescribed educational program (usually college level or higher) and the passage of an examination that is designed to measure a minimal level of competency. These types of programs usually entail title protection - only those individuals who are properly licensed may use a particular title(s) - and practice exclusivity - only those individuals who are properly licensed may engage in the particular practice. While these requirements can be viewed as barriers to entry, they also afford the highest level of consumer protection in that they ensure that only those who are deemed competent may practice and the public is alerted to those who may practice by the title(s) used.

Certification

Certification programs offer a level of consumer protection similar to licensing programs, but the barriers to entry are generally lower. The required educational program may be more vocational in nature, but the required examination should still measure a minimal level of competency. Additionally, certification programs typically involve a non-governmental entity that establishes the training requirements and owns and administers the examination. State certification is made conditional upon the individual practitioner obtaining and maintaining the relevant private credential. These types of programs also usually entail title protection and practice exclusivity.

While the aforementioned requirements can still be viewed as barriers to entry, they afford a level of consumer protection that is lower than a licensing program. They ensure that only those who are deemed competent may practice and the public is alerted to those who may practice by the title(s) used.

Registration

Registration programs can serve to protect the public with minimal barriers to entry. A typical registration program involves an individual satisfying certain prescribed requirements - typically non-practice related items, such as insurance or the use of a disclosure form - and the state, in turn, placing that individual on the pertinent registry. These types of programs can entail title protection and practice exclusivity. Since the barriers to entry in registration programs are relatively low, registration programs are generally best suited to those professions and occupations where the risk of public harm is relatively low, but nevertheless present. In short, registration programs serve to notify the state of which individuals are engaging in the relevant practice and to notify the public of those who may practice by the title(s) used.

Title Protection

Finally, title protection programs represent one of the lowest levels of regulation. Only those who satisfy certain prescribed requirements may use the relevant prescribed title(s). Practitioners need not register or otherwise notify the state that they are engaging in the relevant practice, and practice exclusivity does not attach. In other words, anyone may engage in the particular practice, but only those who satisfy the prescribed requirements may use the enumerated title(s). This serves to indirectly ensure a minimal level of competency - depending upon the prescribed preconditions for use of the protected title(s) - and the public is alerted to the qualifications of those who may use the particular title(s).

Licensing, certification and registration programs also typically involve some kind of mechanism for removing individuals from practice when such individuals engage in enumerated proscribed activities. This is generally not the case with title protection programs.

Regulation of Businesses

Regulatory programs involving businesses are typically in place to enhance public safety, as with a salon or pharmacy. These programs also help to ensure financial solvency and reliability of continued service for consumers, such as with a public utility, a bank or an insurance company.

Activities can involve auditing of certain capital, bookkeeping and other recordkeeping requirements, such as filing quarterly financial statements with the regulator. Other programs may require onsite examinations of financial records, safety features or service records.

Although these programs are intended to enhance public protection and reliability of service for consumers, costs of compliance are a factor. These administrative costs, if too burdensome, may be passed on to consumers.

Sunset Process

Regulatory programs scheduled for sunset review receive a comprehensive analysis. The review includes a thorough dialogue with agency officials, representatives of the regulated profession and other stakeholders. Anyone can submit input on any upcoming sunrise or sunset review via DORA's website at: www.dora.colorado.gov/opr.

The Rural Alcohol and Substance Abuse Prevention and Treatment Program (Program) as enumerated in Article 80 of Title 27, Colorado Revised Statutes (C.R.S.), shall terminate on July 1, 2016, unless continued by the General Assembly. During the year prior to this date, it is the duty of DORA to conduct an analysis and evaluation of the Program pursuant to section 24-34-104, C.R.S.

The purpose of this review is to determine whether the currently prescribed funding for the Program should be continued. During this review, the Colorado Department of Human Services must demonstrate that the Program serves the public interest. DORA's findings and recommendations are submitted via this report to the Office of Legislative Legal Services.

Methodology

As part of this review, DORA staff interviewed staff at the Colorado Department of Human Services, Office of Behavioral Health and stakeholders, and also reviewed Colorado statutes and rules.

Profile of the Program

Alcohol and substance abuse among youth and adults is a pervasive problem that continues to transcend communities large and small throughout the country, including Colorado. Metropolitan areas experience significant alcohol and substance abuse issues; rural counties also feel the effects of alcohol and substance abuse. ²

In fact, in rural communities in general, substance abuse is as great a problem as it is in the cities.³ Further, prevalence rates for alcohol use are similar in nonmetropolitan and metropolitan communities, but nonmetropolitan 12th graders report more problems from their use of alcohol than do metropolitan students.⁴ In an attempt to address the issue of youth alcohol and substance abuse in rural counties in Colorado, funding for prevention programs has been established, including the Rural Alcohol and Substance Abuse Prevention and Treatment Program (Program).

Prevention programs for youth can help reduce alcohol and substance abuse in rural counties. Programs using evidence-based strategies in settings such as schools and involving parents may discourage alcohol and substance abuse by youth.⁵

Prevention programs that identify problems and develop prevention strategies in rural counties are beneficial. Some prevention strategies include:

- Life Skills Training, which is a school-based program that aims to prevent alcohol, tobacco and marijuana use and violence by targeting the major social and psychological factors that promote the initiation of substance use; and
- Training adults as volunteers to mentor at-risk youth.

The Program also provides funding for detoxification facilities in rural counties. There are many negative consequences associated with alcohol and substance abuse such as increased crime and violence and vehicular accidents caused by driving while intoxicated. These problems are further exacerbated by unique challenges in rural counties, such as detoxification services not being as readily available to members of those communities. ⁶ Consequently, providing necessary funding for the detoxification facilities utilized in rural areas in Colorado is critical.

² Rural Assistance Center. *Substance Abuse in Rural Areas*. Retrieved August 5, 2015, from https://www.raconline.org/topics/substance-abuse

³ NCREL. *Alcohol, Tobacco, and Other Drug Use by Youth in Rural Communities.* Retrieved August 5, 2015, from http://www.ncrel.org/sdrs/areas/issues/envrnmnt/drugfree/v1edward.htm

⁴ NCREL. *Alcohol, Tobacco, and Other Drug Use by Youth in Rural Communities.* Retrieved August 5, 2015, from http://www.ncrel.org/sdrs/areas/issues/envrnmnt/drugfree/v1edward.htm

⁵ Rural Assistance Center. *Substance Abuse in Rural Areas.* Retrieved August 5, 2015, from https://www.raconline.org/topics/substance-abuse

⁶ Rural Assistance Center. *Substance Abuse in Rural Areas*. Retrieved August 5, 2015, from https://www.raconline.org/topics/substance-abuse

Legal Framework

History of Regulation

The Rural Alcohol and Substance Abuse Prevention and Treatment Program (Program) was created by the General Assembly in 2009. Specifically, House Bill 09-1119 established the Program with an implementation date of January 1, 2011.

The Program enables the Colorado Department of Human Services, Office of Behavioral Health (OBH) to distribute funds to rural counties throughout Colorado to help mitigate alcohol and substance abuse among Colorado's rural youth.

The Program also serves as an additional funding source for detoxification facilities in rural counties. The additional funding was particularly important because the Code of Colorado Regulations (CCR), 6 CCR 1008.1 Rule 15.228.1.C, requires detoxification facilities to have a minimum of two staff members for every 10 detoxification beds, with a minimum of two staff members at all times, working at the facilities.

Legal Summary

The Program is created in section 27-80-117, Colorado Revised Statutes. The purpose of the Program is to provide funding for preventative substance abuse services for youth in rural counties as well as to provide funding for detoxification services.

Rural areas are defined as counties with a population of less than 30,000 people, ⁷ and youth are defined as individuals who are 18 years of age or younger. ⁸

The Program is cash-funded and the funds are derived from surcharges assessed from convictions of crimes such as driving under the influence, driving while ability impaired, alcohol or drug offenses and underage drinking and driving. 9

There are two separate accounts for the funds: a youth substance abuse prevention account and a detoxification account. ¹⁰ The funds received via the surcharges are required to be equally divided between the aforementioned accounts. ¹¹

The OBH is responsible for administration of the Program and determining how the funds are allocated. 12

⁷ § 27-80-117(1)(b), C.R.S.

⁸ § 27-80-117(1)(c), C.R.S.

⁹ § 27-80-117(3)(a), C.R.S.

¹⁰ § 27-80-117(3)(a), C.R.S.

¹¹ § 27-80-117(3)(a), C.R.S.

¹² §§ 27-80-117(2)(a)(B)(II) and (2)(b), C.R.S.

Program Description and Administration

The Rural Alcohol and Substance Abuse Prevention and Treatment Program (Program) is created in section 27-80-117, Colorado Revised Statutes. The purpose of the Program is to provide funding for youth alcohol and substance abuse prevention and detoxification services in rural counties in Colorado. Rural counties in Colorado are defined as counties with less than 30,000 residents.

The Colorado Department of Human Services, Office of Behavioral Health (OBH), is responsible for administration of the Program.

Funds for the Program are derived from surcharges on convictions of driving under the influence, driving while ability impaired, alcohol or drug offenses and underage drinking and driving.

Currently, the Program provides funding for substance abuse prevention services in six rural counties located throughout Colorado. The Program also provides funds to eight rural detoxification facilities; these recipients are named in this report starting on page 9.

In fiscal year 14-15, OBH devoted 0.20 full-time equivalent (FTE) employees to the Program. The FTE are as follows:

- Contract Manager (General Professional V) 0.1 FTE, and
- Contract Coordinator (General Professional III) 0.1 FTE.¹³

Table 1 highlights the total funds allocated in fiscal years 11-12 through 14-15, as well as the funds allocated for rural youth alcohol and substance abuse prevention and detoxification services. Program funds are divided equally between the alcohol and substance abuse portion and detoxification services.

Table 1
Total Program Funds Allocated

| Fiscal Year | Total Funds Allocated | Rural Detoxification Funds | Youth Substance Abuse Prevention Funds |
|-------------|-----------------------|----------------------------|---|
| 11-12 | \$88,443 | \$44,221 | \$44,222 |
| 12-13 | \$88,443 | \$44,221 | \$44,222 |
| 13-14 | \$88,443 | \$44,221 | \$44,222 |
| 14-15 | \$151,243 | \$75,622 | \$75,621 |

¹³ There are two part-time employees who are Contract Coordinators, and they share the duties for the Program.

The total funds allocated in fiscal year 14-15 increased from the previous fiscal years, which is attributable to the continual increase in the fund balance of the Program.

Program funds allocated for substance abuse prevention services were equally distributed in each of the four fiscal years among participating rural counties. However, in fiscal year 11-12, the Program had only one rural county (Del Norte) participating in the alcohol and substance abuse prevention portion of the Program. Del Norte received \$7,370 and the balance of the amount, \$36,852, remained in the fund.

Also, in fiscal year 14-15, the Program allocated \$44,215 in funds to counties participating in the substance abuse portion of the Program, leaving a balance of \$31,406. The entire fund balance was not allocated to the participating rural counties because the Request for Proposal (RFP) that was utilized did not contain a provision for an increase in fund expenditures beyond the amount that was available in the RFP. Essentially, the RFP stated that there was \$44,222 available to be divided equally among fund recipients, but the RFP did not contain language that allowed for flexibility to increase the total amount awarded to participants as the fund grew.

OBH staff has rectified the RFP issue and future RFPs, beginning in fiscal year 15-16, will include flexibility to increase the dollar amount to recipients if the fund balance grows more than anticipated.

All of the funds were used for detoxification services in each of the four fiscal years delineated in Table 1.

Alcohol and Substance Abuse Prevention

In order to award Program funds for substance abuse prevention, OBH staff prepares and sends out an RFP to the counties in Colorado. An RFP is essentially a proposal that is completed and returned to OBH highlighting detailed information illustrating a county's need for additional funding to implement substance abuse prevention strategies.

Within a specified period of time, RFPs are returned to the OBH staff, and a committee is created to review and recommend to OBH staff the distribution of funds. The committee generally consists of between three and seven members and is typically a diverse mixture of reviewers. Oftentimes, the committee will consist of private citizens, staff from other state departments and/or other members of the community.

Once the committee makes its recommendation to OBH staff, the staff will review the recommendation and ultimately reward the funds to various rural counties. In many instances, non-profit organizations or local school districts within the rural counties provide the substance abuse prevention services to youth in the community. In fiscal year 14-15, the funds were awarded to the following rural counties:

- Archuleta \$7,365,
- Chaffee \$7,370,
- Del Norte \$7,370,
- Hinsdale \$7,370,
- Gunnison \$7,370, and
- Routt \$7,370.

Rural counties participating in the Program offered a variety of services to youth for alcohol and substance abuse prevention. Highlighted below are examples of the services provided by participating counties.

Archuleta County

In Archuleta County, substance abuse prevention strategies are taught through the Archuleta School District 50J. The primary strategy used in the school district is The Great Body Shop (GBS), which is an evidence-based curriculum, developed by the Children's Health Market. The GBS is a comprehensive health, substance abuse and violence prevention curriculum used for all students age 5 through 15 in the Archuleta School District. To

Chaffee County

Chaffee County uses several programs to address substance abuse issues. Some programs include:

- Nurturing Parenting Program (NPP), and
- Girls Circle/Boys Council.

¹⁴ Office of Behavioral Health - Community Prevention Programs. Archuleta School District 50J. P. 1.

¹⁵ Office of Behavioral Health - Community Prevention Programs. Archuleta School District 50J. P. 1.

The NPP is geared towards education for both children and adults. The purpose of the NPP is to build nurturing skills to help mitigate abusive parenting/child rearing attitudes and practices. The desired outcome from participation in the NPP is, among other things, to reduce the rate of juvenile delinquency/alcohol abuse. The purpose of the NPP is among other things, to reduce the rate of juvenile delinquency/alcohol abuse.

Additionally, the Girls Circle/Boys Council is geared toward middle and high school students and features a primary focus on life skills training. The life skills training approaches help students learn appropriate and adaptive skills to resist pressures to use substances. ¹⁸

Del Norte County

The Del Norte School District, along with the Rio Grande Prevention Partners, implemented many strategies to provide education and outreach to middle and high school students concerning substance abuse. For example, on several occasions, substance abuse information was given to students, including presentations which highlight the harm (danger) of substance abuse. ¹⁹

Mothers Against Drunk Driving staff also give presentations to middle school students educating them on the effects of underage drinking.²⁰

Hinsdale County

Hinsdale County enlisted the services of Full City of Lake County, Inc., which is a non-profit 501(c)(3) organization that implements a number of substance abuse prevention strategies in Hinsdale County. One example is the implementation of the Full Circle Mentoring Project. This program is an evidenced-based strategy geared to reduce substance abuse in children under age 18.²¹

¹⁶ Office of Behavioral Health - Community Prevention Programs. Chafee County Department of Health and Human Services, p. 1.

¹⁷ Office of Behavioral Health - Community Prevention Programs. Chafee County Department of Health and Human Services, p. 2.

¹⁸ Office of Behavioral Health - Community Prevention Programs. Chafee County Department of Health and Human Services, p. 1.

¹⁹ Rio Grande Prevention Partners. Office of Behavioral Health (2015), p. 2.

²⁰ Rio Grande Prevention Partners. Office of Behavioral Health (2015), p. 2.

²¹ Block Grant Prevention Grants Final Narrative Report (Summary of Year 1 to 5) Hinsdale County, Office of Behavioral Health (2015), p. 3.

Gunnison County

Gunnison County enlisted the services of Gunnison Hinsdale Youth Services, which is a non-profit 501(c)(3) organization, to provide various services to youth related to substance abuse prevention. One program utilizes the Choice Pass ski program, which was developed in partnership with the school district and Crested Butte Mountain Resort (CBMR). The program is available to all middle and high school students who pledge to remain drug and alcohol free during the ski season. In exchange for their pledge, students receive highly discounted Gold season passes at CBMR, and discounted ski and snowboard rentals as well as free ski lessons. ²²

Routt County

In Routt County, a community-based mentoring program serves youth, ages 7 to 17, who are victims of abuse or neglect, familial incarceration or substance abuse.

Specifically, the Lunch Partners Program, which began in February 2012, provides youth guidance and support with issues such as substance abuse. The Lunch Partners Program pairs a youth with an adult volunteer who makes or purchases a healthy lunch to share three times per month during the child's lunch period.²³

Additionally, Routt County utilizes funding from the Program to enable youth to participate in the Nexus Program. The Nexus Program provides group recreational and life-skill activities to youth.²⁴

The Rocky Mountain Youth Corps in Routt County utilizes a portion of the Program funds to implement the Individual Development Portfolio. The Individual Development Portfolio, among other things, addresses high-risk behaviors related to substance abuse through a combination of education and alternative strategies that directly address prevention. ²⁵ Specifically, the Individual Development Portfolio utilizes service learning, job readiness and life skills training and education as the platform for instilling healthy, productive and positive lifestyles for youth. ²⁶

²² Block Grant Prevention Grants Final Narrative Report (Summary of Year 1 to 5) Gunnison County, Office of Behavioral Health (2015), p. 3.

²³ Block Grant Prevention Grants Final Narrative Report (Summary of Year 1 to 5) Routt County, Office of Behavioral Health (2015), p.3.

²⁴ Block Grant Prevention Grants Final Narrative Report (Summary of Year 1 to 5) Routt County, Office of Behavioral Health (2015), p. 4.

²⁵ Block Grant Prevention Grants Final Narrative Report (Summary of Year 1 to 5) Routt County, Office of Behavioral Health (2015), p. 4.

²⁶ Block Grant Prevention Grants Final Narrative Report (Summary of Year 1 to 5) Routt County, Office of Behavioral Health (2015), p. 5.

Rural Detoxification Project

The second part of the Program provides funding for treatment services to persons addicted to alcohol or drugs. Specifically, the funds are utilized to assist in paying for additional staff that is required at detoxification centers in rural areas. Detoxification centers are required to provide two staff members for every 10 beds at each facility, with a minimum of two staff members present at all times.

The State of Colorado is divided into seven geographic areas to provide managed care for substance abuse. The areas are referred to as sub-state planning areas (SSPA). All of the SSPAs, with the exception of SSPA 7 (Boulder County), received Program funds for detoxification services. In fiscal year 14-15, the SSPAs received a total of \$75,622.

Program funds are allocated for detoxification services through Managed Service Organizations (MSOs), and the funds are usually encapsulated in a community block grant. Essentially, OBH contracts with regional MSOs for the provision of substance use disorder treatment services throughout Colorado. ²⁷ They in turn contract with over 40 local providers to deliver a full continuum of care, ²⁸ including detoxification services. There are currently eight detoxification facilities that benefit from Program funds utilized for detoxification services. In fiscal year 14-15, the following detoxification facilities received Program funds:

- Arapahoe House,
- Axis Health Systems,
- Colorado West Regional Mental Health Center,
- Crossroads' Turning Points,
- Denver Health,
- El Paso County Sheriff's Office,
- North Range Behavioral Health, and
- Region Six Alcohol and Drug Abuse.

Collateral Consequences – Criminal Convictions

Section 24-34-104(9)(b)(VIII.5), Colorado Revised Statutes, requires the Department of Regulatory Agencies to determine whether the agency under review, through its licensing processes, imposes any disqualifications on applicants or licensees based on past criminal history, and if so, whether the disqualifications serve public safety or commercial or consumer protection interests.

This criterion is not applicable to the Program.

²⁷ Colorado Department of Human Services. Accessing Substance Use Services through Managed Service Organizations (MSO). Retrieved July 24, 2015, from http://www.colorado.gov/cs/Satellite/CDHS-BehavioralHealth/CBON/1251587182404

²⁸ Colorado Department of Human Services. *Accessing Substance Use Services through Managed Service Organizations (MSO)*. Retrieved July 24, 2015, from http://www.colorado.gov/cs/Satellite/CDHS-BehavioralHealth/CBON/1251587182404

Analysis and Recommendations

Recommendation 1 – Continue the Rural Alcohol and Substance Abuse Prevention and Treatment Program for nine years, until 2025.

The Rural Alcohol and Substance Abuse Prevention and Treatment Program (Program) provides funding to rural areas for youth substance abuse prevention programs and detoxification services. Rural areas are defined in section 27-80-117(1)(b), Colorado Revised Statutes, as counties with populations of less than 30,000 residents.

The funds are generated through a penalty surcharge on convictions of driving under the influence, driving while ability impaired, alcohol or drug offenses and underage drinking and driving. ²⁹ In fiscal year 14-15, there were \$151,243 available for distribution. There are two separate accounts for the funds: a youth substance abuse prevention account and a detoxification account. ³⁰ The funds received via the surcharges are required to be equally divided between the aforementioned accounts. ³¹

Currently, there are six rural counties utilizing the funds offered through the Program to provide substance abuse prevention programs to youth. To obtain funds through the Program, rural counties are required to submit requests for funding through a Request for Proposal (RFP) process that is administered by the Department of Human Services, Office of Behavioral Health (OBH). OBH staff convenes a committee, which typically consists of three to seven members, to review the RFPs, and make recommendations to OBH staff as to which communities should receive Program funds. OBH staff reviews the recommendations and ultimately grants funding to specific communities.

Additionally, Program funds are allocated for detoxification services through Managed Service Organizations (MSOs), and the funds are usually encapsulated in a community block grant. OBH contracts with regional MSOs for the provision of substance use disorder treatment services throughout Colorado. They in turn contract with over 40 local providers to deliver a full continuum of care, including detoxification services. There are currently eight detoxification facilities that receive Program funds for detoxification services.

³¹ § 27-80-117(3)(a), C.R.S.

²⁹ Human Services Legislative Update 2009.

³⁰ § 27-80-117(3)(a), Č.R.S.

³² Colorado Department of Human Services. *Accessing Substance Use Services through Managed Service Organizations* (MSO). Retrieved July 24, 2015, from http://www.colorado.gov/cs/Satellite/CDHS-BehavioralHealth/CBON/1251587182404

³³ Colorado Department of Human Services. *Accessing Substance Use Services through Managed Service Organizations (MSO)*. Retrieved July 24, 2015, from http://www.colorado.gov/cs/Satellite/CDHS-BehavioralHealth/CBON/1251587182404

The Program has provided needed funding for services in the area of substance abuse prevention programs in rural areas of Colorado. The types of services offered vary, but they have been effective in providing services that youth use. For example, one service in Routt County is the Lunch Partners Program, which began in February 2012, and provides youth guidance and support while they are waiting to be served in other areas of the community-based mentoring program. The Lunch Partners Program pairs a youth with an adult volunteer who makes or purchases a healthy lunch to share three times per month during the child's lunch period. To date, a total of 18 partnerships have been created.

Also, Routt County engaged in the Individual Development Portfolio. The Individual Development Portfolio, among other things, addresses high-risk behaviors related to substance abuse through a combination of education and alternative strategies that directly address prevention. Specifically, the Individual Development Portfolio utilizes service learning, job readiness and life skills training and education as the platform for instilling healthy, productive and positive lifestyles for youth. One notable outcome from the Program was the decrease in alcohol and marijuana usage among participating youth in Routt County. 34

Additionally, the Program has enabled detoxification facilities in rural counties to receive much needed additional funding ensuring enhanced availability of services. The additional funding was particularly important because the Code of Colorado Regulations (CCR), 6 CCR 1008.1 Rule 15.228.1.C, requires detoxification facilities to have a minimum of two staff members for every 10 detoxification beds, with a minimum of two staff members working at the facilities at all times. The aforementioned state rule requires minimum staff levels and the Program helps the detoxification facilities in rural counties comply with the requirement.

The Program provides valuable funds for substance abuse prevention programs for youth as well as additional funding for detoxification services. Therefore, the General Assembly should continue the Program for nine years, until 2025. Doing so will ensure that the Program continues to provide these needed funds and services in rural counties throughout Colorado.

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 $^{^{34}}$ Block Grant Prevention Grants Final Narrative Report (Summary of Year 1 to 5) Routt County, Office of Behavioral Health (2015), p. 5.