

**Agency Activity Inventory**  
**by Agency**  
**Appropriation Period: FY 2010-11**

**Agency:** J20 - Department of Alcohol & Other Drug Abuse      **Functional Group:** Health Services

**1034 Chemical Dependency Service Accountability**

The department seeks, secures, manages, and distributes federal and state block grants and other funding for the delivery of alcohol and other drug (AOD) abuse services to South Carolinians. Activities include strategic planning; developing, managing, and ensuring standards for provider accountability; budget oversight; providing technical assistance on all elements of provider operations and customer support; setting administrative and clinical standards for quality assurance; providing uniform contract management; developing and implementing program and administrative policies; evaluating service provision; ensuring that federal mandates are met; identifying "best practices"; acting as the "point" for service collaboration and coordination, and workforce development; information system management, research, and evaluation; providing prior authorization of Medicaid-eligible AOD services; and identifying alternative funding streams through grant acquisition. (US PL 91-616 and 92-255 / SC Code Section 44-49-10 et.seq. / SC Code 61-12-10 et.seq.)

**Statewide Result Area:** Improve the health and protections of our children and adults

**Strategy:** Provide increased access to insurance and private payment for healthcare.

**FY 2010-11**

Total	General Funds	Federal Funds	Non-Recurring Provisos	Part III (ARRA Funds)	Other Funds	FTEs
\$1,671,120	\$163,871	\$879,870	\$0	\$0	\$627,379	11.35

**Other Fund - Subfund No. & Title:**

3764 - Medicaid Reimbursement Rehabilitative (\$148,178); 3764 - Medicaid Managed Care-Utilization Review (\$139,822); 3037 - Utilization Review (\$139,822); 3037 - Registration Fees (\$95,250); 3056 - DASIS (\$46,500); 3056 - SOMMS (\$57,807)

**Budgetary Program No.:** Part IA, Section 25, Numerals II, III, IV, V, VI,

**Expected Results:**

Improvement in the effectiveness of prevention, intervention, and treatment programs to ensure positive outcomes for AOD abuse clients. Sustainable recovery is the overarching expected result. Providers must meet contract objectives (Industry Standards / State Benchmarks) that include: 1) 75% of clients must receive an assessment within two working days of intake; 2) 50% of clients must receive a qualifying service within six working days of assessment; and 3) Outcome Survey 15% or More of Eligible Discharged Clients. Providers must also meet requirements in the following areas: maintenance of CARF accreditation (Industry Standard / State Benchmark); development and adherence to County Strategic Plans (State Benchmark); maintenance of ADSAP certification (State Benchmark); meet Coordinated County Review indicators (State Benchmark). DAODAS must meet federal block grant set-aside requirements (Federal Benchmark).

**Outcome Measures:**

Providers surpassed the contract assessment requirement of 75%, achieving 90.5% in FY05, 88.6% in FY06, 91.1% in FY07, 92.8% in FY08, 92.3% in FY09 and 92.8% in FY10 (Not Finalized). Providers exceeded the contract service requirement of 50%, achieving 67% in FY05, 70.3% in FY06, 73.3% in FY07, 71% in FY08, 75% in FY09, and 72.5% in FY10 (Not Finalized). Providers exceeded the survey requirement of 15%, increasing contact by 10% (FY09). 100% maintained CARF accreditation, a national designation first required by DAODAS in 1997. 100% maintained ADSAP provider certification. 100% submit County Strategic Plans annually. The CCR Indicator Compliance Goal of 90% was surpassed each year from 2001 to 2010. DAODAS

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met 100% of federal block grant set-aside requirements in each year 2001-2010. No industry standard cost benchmark identified (See Note). SC Unit Cost: \$32.34 as based on numbers served and total expended.

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**1035 Chemical Dependency Community-Based Prevention Services**

To reduce the risk of the development of problems related to the use of alcohol, tobacco, and other drugs (ATODs) among the general public and specific high-risk groups. Services are implemented in communities and schools throughout South Carolina. Prevention services are the use of evidence-based approaches to create or enhance environmental conditions within communities, families, schools, and workplaces to protect individuals from substance abuse and to help them develop personal decision-making skills to reduce the risk of ATOD-related problems. Six strategies are utilized and include information dissemination, education, alternatives, problem identification and referral, community-based processes, and environmental strategies. (Key Customers - Citizen-Clients and their Family Members, stratified into the following populations: women, children and adolescents, and adults; Community Coalitions; and High-Risk Target Groups) (US PL 91-616 and 92-255) (SC Code Section 44-49-40 and Section 44-49-80)

**Statewide Result Area:** Improve the health and protections of our children and adults

**Strategy:** Provide for greater incentives to promote healthy lifestyles.

**FY 2010-11**

Total	General Funds	Federal Funds	Non-Recurring Provisos	Part III (ARRA Funds)	Other Funds	FTEs
\$7,038,604	\$31,553	\$6,914,858	\$0	\$0	\$92,193	6.50

**Other Fund - Subfund No. & Title:**

3056 - SOMMS (\$92,193)

**Budgetary Program No.:** Part IA, Section 25, Numerals V, VI

**Expected Results:**

Use of evidence-based approaches to prevent or reduce the misuse, use, and abuse of ATODs. The department focuses on strategies to reduce underage drinking, to include working with a range of agencies, with an emphasis on partnerships with law enforcement networks. The DAODAS Standard Survey focuses on core measures and includes measuring 30-day alcohol use; 30-day tobacco use; 30-day marijuana use; favorable attitudes toward ATOD use; perceived risk/harm of ATOD use; perceived peer attitudes toward ATOD use; perceived parental attitudes toward ATOD use; and decision-making. Increased evidence-based programming. These are state benchmarks developed by South Carolina and based on federal guidelines. Meet federal Synar requirement of Reducing Youth Access to Tobacco.

**Outcome Measures:**

Outcomes for multi-session prevention education programs for youth ages 10-20 (\*indicates significance): 27.5% reduction in the number of alcohol users\*; 19.2% reduction in the number of marijuana users\*; 15.4% reduction in the number of cigarette users; 29.5% reduction in the number of inhalant users\*; 28.3% reduction in the number

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of non-medical prescription drug users; 10.2% improvement in perceived risk/harm of ATOD use\*; 4.6% improvement in decision-making skills\*; FFY 2010 Synar Tobacco Rate - 7.9% (20% Federal Benchmark / 10% State Benchmark). Evidence-Based Programming -- 2004 - 56 / 2005 - 81 / 2006 - 145 / 2007 - 152 / 2008 - 287 / 2009 - 297 / 2010 - 296. Underage Drinking Focus (AET) - Prevented / Dispersed 118 Parties / Conducted 272 Checkpoints; Ticketed 120 Underage Violations; Ticketed 13 Underage DUIs. School Based Standard Cost Benchmark \$220. SC Unit Cost: \$19.02 as based on total numbers served and total expended. (See Note)

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**1036 Chemical Dependency Community-Based Intervention Services**

Intervention services work to identify, at an early stage, individuals who are at risk of experiencing specific problems caused by their use of alcohol, tobacco, and other drugs (ATODs). Following their identification through self-referral, the school system, the criminal justice system, the workplace, or other social systems, individuals are referred to specific intervention programs for education and treatment services as appropriate. The Alcohol and Drug Safety Action Program (ADSAP), the state's program for individuals charged with or convicted under the state's laws related to driving or boating under the influence, is the largest intervention program. (Key Customers - Self-Referred Consumers; Incarcerated/Paroled Individuals; Juvenile Justice Detainees/Parolees; DUI ADSAP Clients) (US PL 91-616 and 92-255) (SC Code Section 56-5-2990)

**Statewide Result Area:** Improve the health and protections of our children and adults

**Strategy:** Provide disease prevention and disease management.

**FY 2010-11**

Total	General Funds	Federal Funds	Non-Recurring Provisos	Part III (ARRA Funds)	Other Funds	FTEs
\$1,464,180	\$70,573	\$1,393,607	\$0	\$0	\$0	1.00

**Other Fund - Subfund No. & Title:**

\$0

**Budgetary Program No.:** Part IA, Section 25, Numerals V, VI

**Expected Results:**

Reduction in risk of using ATODs. Reduction in DUI risk. Change in client attitudes and behaviors that led them to refrain from use, refrain from abuse, and reduce harm. Sustainable recovery is the overarching expected result. Specific client outcome data include, but are not limited to: 1) maintaining or reducing client alcohol use in the past 30 days; 2) maintaining or reducing client alcohol use to intoxication in the past 30 days; 3) maintaining or reducing client illegal drug uses in the past 30 days; 4) maintaining or reducing client tobacco use in the past 30 days; 5) maintaining or increasing client employment; 6) maintaining or increasing clients in stable housing; 7) reducing emergency room use in the past 30 days; and 8) maintaining or increasing enrollment in school. Federal Benchmarks.

**Outcome Measures:**

70.3% of surveyed clients report no alcohol use from admission to 90 days post discharge from services, an

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increase of 36.3%. Nationally, only 30%-60% report continuous abstinence (Industry Benchmark); 92.6% of surveyed clients report no use of alcohol to the point of intoxication from admission to 90 days post discharge, an increase of 29.1%; 70.2% of clients surveyed report that they are gainfully employed from admission to 90 days post discharge, an increase of 1.5%; 94.4% of students surveyed report a reduction in suspensions, expulsions, or detention from admission to 90 days post discharge, an increase of 10.7%. (FY09 Completed Data – FY10 Not Finalized) Trend data of participation in intervention and treatment services indicate that clients are successful in recovery efforts by reducing ATOD use, finding or staying in employment, and staying in school. Reasonable Cost Benchmark: \$200-\$1,200. SC Cost: \$155.23. (See Note)

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Services

**Functional Group:** Health

### 1037 Chemical Dependency Community-Based Treatment Services

Treatment services are designed to reduce the health and human service costs associated with substance abuse, as well as the economic cost to our communities and state. Multiple treatment modalities that are evidence-based are available to accommodate entry into services and progression along a continuum of care. Specific ATOD services involve various levels of care ranging from outpatient treatment, which is available in every county, to higher levels of specialized treatment services, such as detoxification, adolescent inpatient treatment, and/or various residential services. Specialized services are available on a county, regional, and statewide basis. These include specialized services for women and children that are provided through five long-term residential treatment programs and one long-term transitional housing program; services for adolescents; and services for incarcerated and paroled individuals. (Key Customers - All Customers Identified Above Who Are in Need of Any Level of Treatment) (US PL 91-616 and 92-255) (SC Code Section 44-49-60 and 44-49-80).

**Statewide Result Area:** Improve the health and protections of our children and adults

**Strategy:** Provide disease prevention and disease management.

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Total	General Funds	Federal Funds	Non-Recurring Provisos	Part III (ARRA Funds)	Other Funds	FTEs
\$22,109,191	\$5,909,668	\$15,307,160	\$0	\$0	\$892,363	3.35

**Other Fund - Subfund No. & Title:**

3764 - Medicaid Reimbursement Rehabilitative (\$892,363)

**Budgetary Program No.:** Part IA, Section 25, Numerals IV, V, VI

**Expected Results:**

Sustainable recovery. Reduce use, reduce abuse, and reduce harm. See specific outcome requirements listed under Intervention Services above, as well as benchmarks.

**Outcome Measures:**

The outcomes for Chemical Dependency Community-Based Treatment Services are the same as those listed above under Chemical Dependency Community-Based Intervention Services, as the quality benchmarks. Reasonable Cost Benchmark: \$1,000 - \$5,000; SC Cost: \$679.59. (See Note)

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**1038 Direct Chemical Dependency Services**

DAODAS provides direct services to the adolescent population. The department's Bridge program assists adolescents as they transfer from institutional settings (juvenile justice or inpatient treatment) to community settings by offering a comprehensive array of specialized services, including family-based services, case management, and attention to primary healthcare needs. (No specific statutory requirement exists, but program is within mission focus.)

**Statewide Result Area:** Improve the health and protections of our children and adults

**Strategy:** Provide disease prevention and disease management.

**FY 2010-11**

Total	General Funds	Federal Funds	Non-Recurring Provisos	Part III (ARRA Funds)	Other Funds	FTEs
\$952,118	\$12,513	\$939,605	\$0	\$0	\$0	1.00

**Other Fund - Subfund No. & Title:**

\$0

**Budgetary Program No.:** Part IA, Section 25, Numerals V, VI

**Expected Results:**

Sustainable recovery is the overarching expected result. The Bridge: 75% of graduates will remain abstinent from use of ATODs; 75% of graduates will avoid re-admission to inpatient ATOD treatment; 85% of graduates will avoid re-admission to DJJ; 85% of participants who received any service will avoid re-admission to DJJ; 100% of graduates age 15 and younger will remain in school or seek a GED; 75% of graduates age 16 and older will remain in school or seek a GED; 70% of graduates will increase life/work skills and gainful employment (State Benchmark; the program has been honored nationally for its achievement and held as a national model for adolescent outcomes.)

**Outcome Measures:**

The Bridge: 91% ('07), 92% ('08), 93.5% ('09) and 93% ('10) of graduates remained abstinent from the use of ATODs; 92.5% ('07-08), and 95% ('09-'10) of graduates avoided re-admission to inpatient ATOD treatment; 99% ('07-'09) and 95% ('10) of graduates avoided re-admission to DJJ; 96% ('07), 93% ('08), 94% ('09) and 92% ('10) of participants who received any service avoided re-admission to DJJ; 100% ('07-'09) and 96% ('10) of graduates age 15 and younger remained in school or sought a GED; 89.5% ('07), 91% ('08), 93% ('09) and 91% ('10) of graduates age 16 and older remained in school or sought a GED; 82% ('07), 85% ('08), 75% ('09) and 45% ('10) of graduates increased life/work skills and gainful employment. Cost Benchmark: One Year at DJJ - \$100,000; Bridge Cost in '10: \$3,364. (See Note)

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**1039 Gambling Services**

The department provides gambling information, education, and referral services to persons experiencing gambling addictions and operates a toll-free, 24/7 gambling helpline. In addition, the department provides oversight of the treatment process and expenditures for treatment through utilization review of all gambling services, as well as public awareness campaigns. (SC Section 59-150-230 [I]; Proviso 12.3, FY03-06 Appropriation Acts; Proviso 12.2, FY07-00 Appropriation Acts; Proviso 25.2, FY10-11 Appropriation Acts).

**Statewide Result Area:** Improve the health and protections of our children and adults

**Strategy:** Provide disease prevention and disease management.

**FY 2010-11**

Total	General Funds	Federal Funds	Non-Recurring Provisos	Part III (ARRA Funds)	Other Funds	FTEs
\$257,902	\$3,495	\$4,407	\$0	\$0	\$250,000	0.10

**Other Fund - Subfund No. & Title:**

43B1 - Unclaimed Prize Funds (\$250,000)

**Budgetary Program No.:** Section 59-150-230(I) - SC Education Lottery Manda

**Expected Results:**

Through identification and treatment, the expected result includes a reduction in the number and intensity of problem and pathological gambling behaviors and their often disastrous consequences; decreasing substance use or abuse, as identified; an increase in the identification and referral of problem gamblers through the 24/7 helpline; increased awareness throughout the state of problems related to gambling; and determination of problem vs. pathological gamblers.

**Outcome Measures:**

State Benchmark: 256 Individuals Received Intervention and Treatment Services - Calendar Year (CY) 2004; 659 Individuals Received Intervention and Treatment Services - 2005; 583 Individuals Received Intervention and Treatment Services - 2006; 481 Individuals Received Intervention and Treatment Services - 2007; 426 Individuals Received Intervention and Treatment Services - 2008; 478 Individuals Received Intervention and Treatment Services - 2009; 296 Individuals Received Intervention and Treatment Services - 2010 (To Date). Delaware State Gambling Cost Benchmark: \$1,100 - \$3,000 (Public and Private Rates). SC Cost: \$654. (See Note)

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**1040 Alcohol and Drug Abuse Administration**

This function provides executive leadership; develops and implements short- and long-term directions, performance

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expectations, and organizational values; supports policy development, review, and implementation; and oversees financial services, procurement, personnel services, and communication. (SC Code Section 44-49-10 et. seq.) Quality benchmarks noted above.

**Statewide Result Area:** Improve the health and protections of our children and adults

**Strategy:** Administration

**FY 2010-11**

Total	General Funds	Federal Funds	Non-Recurring Provisos	Part III (ARRA Funds)	Other Funds	FTEs
\$745,086	\$343,944	\$351,445	\$0	\$0	\$49,697	10.51

**Other Fund - Subfund No. & Title:**

3037 - Registration Fees (\$29,750); 3056 - DASIS (\$15,500); 3764- Medicaid Reimbursement Rehabilitative (\$2,947); 3958 - Sale of Other (\$1,500)

**Budgetary Program No.:** Part IA, Section 25, Numerals I, II, III, IV, V, V

**Expected Results:**

Sustainable recovery is the overarching expected result and includes reducing use, reducing abuse, and reducing harm. The agency meets set-aside requirements each year; surveys customers for feedback and satisfaction; and completes the annual Youth Access to Tobacco Study, as required by the federal Synar Amendment. Results noted above.

**Outcome Measures:**

Met federal set-aside requirements each year; met federal MOE requirement for FY06-FY08; makes progress on key efficiency and effectiveness strategic goals, achieving 92.14% in FY10; maintains customer feedback and satisfaction rates above 90% each year ('96 - '01 / 95% - '02 / 95% - '03 / 97% - '04 / 96% - '05-'10); maintains low administrative costs. Cost Benchmark: Administrative Costs no more than 5%. (See Note)

**AGENCY TOTALS**

*Department of Alcohol & Other Drug Abuse Services*

<b>TOTAL AGENCY FUNDS</b>	<b>TOTAL GENERAL FUNDS</b>	<b>TOTAL FEDERAL FUNDS</b>	<b>TOTAL OTHER FUNDS</b>
\$34,238,201	\$6,535,617	\$25,790,952	\$1,911,632
	<b>TOTAL NON-RECURRING FUNDS</b>	<b>TOTAL PART III FUNDS</b>	<b>TOTAL FTEs</b>
	\$0	\$0	33.81