

AGENDA
JOINT MILLENNIUM FUND COMMITTEE
9:00 A.M.
Room EW42
Friday, December 09, 2016

SUBJECT/TIME	DESCRIPTION	PRESENTER
9:00 - 9:10 AM	Opening Comments	Representative Fred Wood and Senator Patti Anne Lodge, Co-Chairs
9:10 - 9:30 AM	Phoenix Multisport: Boise - A Sober Active Community	Ginny Gobel, Executive Director Boise Chapter
9:30 - 9:50 AM	Recovery 4 Life: Serial Inebriate Program	Amy Jeppesen, Executive Director
9:50 - 10:10 AM	Shoshone-Bannock Tribe: Peer Recovery Support Services	Donna Honena, Manager of Four Directions Treatment Center
10:10 - 10:30 AM	Foundation for Alcohol & Drug Dependency (ICADD): Recovery Coach Scholarship	Amy Jeppesen, ICADD Foundation Chair
10:30 - 10:50 AM	Benchmark Research & Safety, Inc.: Addictions Electronic Clearinghouse	Richard Reardon, Consulting Psychologist from the University of Idaho
10:50 - 11:00 AM	Applicant Scoring Process and Submission	Jared Tatro, Principal Budget & Policy Analyst, Legislative Services Office
11:00 AM	Closing Comments	
Adjournment	At the Discretion of Co-Chairs	

Live audio stream made available by Idaho Public Television at:
legislature.idaho.gov

COMMITTEE MEMBERS

Senator Lodge, Co-chairman	Representative Wood, Co-chairman
Senator Johnson	Representative Hartgen
Senator Martin	Representative Anderst
Senator Ward-Engelking	Representative King
Senator Burgoyne	Representative Wintrow

STAFF CONTACT(S)

Jared Tatro
 Phone: 334-4740
 email: jtatro@lso.idaho.gov



**This Page
Intentionally
Left Blank**

Millennium Fund – Phoenix Multisport



October 12, 2016

Joint Millennium Fund Committee
Room C 305
Idaho State Capitol
Boise, ID 83720

Attn: Mr. Jared Tatro, Principal Budget and Policy Analyst

Dear Mr. Tatro:

Please accept the enclosed grant application for Phoenix Multisport – Boise (Phoenix). We respectfully request a \$177,675 grant for the fiscal year of 2017-2018 in support of our mission to break down barriers that prevent individuals in recovery from substance use disorder to maintain long term recovery. Your investment in this highly successful program will allow us to provide free physical and social programs to individuals determined to embrace sober living and help end the cycle of addiction/treatment/relapse. Fund awarded will be used solely for the Boise chapter.

Phoenix began offering its free programs in Boulder, Colorado in 2007, and has received national acclaim, serving over 19,000 individuals to date through Colorado, California and Massachusetts. In July 2016, Boise was selected, out of hundreds of requests from other cities, to be the next chapter for expansion! As part of Phoenix, the Boise chapter is fully integrated into a well established organization with systems, infrastructure and tested practices that not only ensure program success but establishes Boise on the forefront of a growing recovery movement.

The innovative **Phoenix community** offers the support and networking necessary to get and stay sober, where to access treatment, how to find a good 12-step meeting, how to find **purpose in life**. The limited requirements to attend free Phoenix programming are a minimum of 48 hours clean and sober, avoidance of using tobacco products at Phoenix activities and adherence to the Membership Agreement code of conduct. Physical activities facilitated by peer instructors help bypass social awkwardness by focusing on the activity at hand. As the founder, Scott Strode is fond of saying, "They come for the sport, but they stay for the community."

We sincerely appreciate your review and consideration of the attached grant application.

Kindest regards,

Ginny Gobel
Executive Director – Boise
2400 Shaw Mountain Rd, Boise, 83712
ginny@phoenixmultisport.org
208-869-0951

Scott Strode
National Executive Director, Founder
2233 Champa St, Denver, CO 80205
scott@phoenixmultisport.org
720-440-9175



Millennium Fund Grant Proposal

Prevention/Cessation/Treatment

For the Period July 1, 2017 through June 30, 2018

Phoenix Multisport – Boise: A Sober Active Community

I. Grant Applicant

Full Legal Organization Name

Phoenix Multisport – Boise
 2400 Shaw Mountain Road
 Boise
 ID
 83712
www.phoenixmultisport.org

Primary Grant Applicant Contact Person

Ginny Gobel
 Executive Director – Boise Chapter
 (208) 869-0951
ginny@phoenixmultisport.org

Alternate Grant Applicant Contact Person

Scott Strobe
 Founder & Executive Director
 (720) 440-9175
scott@phoenixmultisport.org

Anticipated Presenter

Ginny Gobel
 Executive Director – Boise Chapter
 (208) 869-0951
ginny@phoenixmultisport.org

II. Grant Proposal Summary

(Indicate Yes Where Applicable)

Select all Applicable Criteria:

1. Tobacco Cessation or Prevention	Yes
2. Vaping/E-Cigarette Cessation or Prevention	Yes
3. Substance Abuse Cessation or Prevention	Yes
4. Tobacco or Substance Abuse Treatment	No

Purpose of Grant:

This grant award will be used to meet operational funding needs for Phoenix Multisport – Boise during the 2018 fiscal year. As part of Phoenix Multisport (Phoenix), the Boise chapter is integrated into an established national organization with systems, infrastructure and tested practices that not only ensure program success, but establish Boise on the forefront of a growing recovery movement. The mission of Phoenix is to foster a supportive, physically active community for individuals, aged 16 and older, who are recovering from alcohol and substance use disorders (SUD), and for those who choose to live a sober life. By offering free programs such as running, hiking, CrossFit, weight training, cycling, mountain biking, yoga, family events and other social events, Phoenix helps participants (team members) find the physical and

emotional strength to recover. Programs are offered at no cost to individuals with 48 hours of sobriety. Phoenix instructors are peers and living proof that recovery is possible. Phoenix is an innovative, evidence-based community recovery support that is currently unavailable in the Treasure Valley. Phoenix aims to decrease substance use, relapse, and recidivism by conducting outreach and bridging individuals to long term recovery.

Grant Amount Requested (should tie to budget table): 177,675

III. Proposed Budget

The attached budget for Phoenix Multisport – Boise, includes the following:

Personnel	Operating	Capital Outlay	In-Kind	Other Funding Sources	Request from Millennium Fund
\$133,420	\$97,585	\$86,000	(\$79,330)	(\$60,000)	\$177,675

Executive Director, Ginny Gobel is volunteering her time. The additional personnel costs include a Program Coordinator and contracted staff to run programs. In addition to regular operating costs, rent is included under the assumption that we will have funding to lease a program space and overhead costs are fifteen percent (15%) of personnel and operating costs. The capital outlay costs include leasehold improvements for the building we lease and the addition of program equipment that will allow us to diversify the types of programs offered.

IV. Statement of Need

Nationally, of the estimated 22.7 million individuals aged 12 and older in 2013 who needed treatment for an illicit drug or alcohol use problem, 2.5 million (0.9 percent) received treatment at a specialty facility.¹ The rate of treatment for SUD for Idahoans, aged 12 and older, is approximately 8 percent² and it is estimated that an Idahoan dies every 19 hours from an overdose or alcohol induced death.³ Additionally, of the estimated 4,500 individuals incarcerated in Idaho Department of Correction’s District 4, which includes the Boise area, it is estimated that 80-90 percent of offenders have drug or alcohol dependence.² Nearly 40 percent (650,288) of Idaho’s population lives in the areas of Boise, Nampa, and Meridian, comprising the majority of what is referred to as the Treasure Valley, the area of focus of this grant proposal.⁴

Although SUD is understood to be a chronic disease requiring ongoing treatment, services, and support across the life course, the vast majority of funding for services are limited to prevention and treatment, with negligible support for long term recovery. Without services to support sustained abstinence and recovery, repeated episodes of relapse are likely, and premature death due to overdose or secondary health concerns are probable. There is no other organization like Phoenix Multisport in the Treasure Valley to support sobriety for individuals with SUD.

V. Project Design

Phoenix Multisport utilizes skilled and certified instructors who are in recovery to facilitate programs such as yoga, climbing, and CrossFit for anyone who has 48 hours sober. This peer-to-peer model offers opportunities for members to learn from instructors and other members

who have been in their shoes and can walk beside them on their recovery journey. The community offers the support and networking necessary to get and stay sober, where to access treatment, how to find a good 12-step meeting, how to find purpose in life and how to live each day to the fullest. Together, Phoenix team members improve focus on their health, and learn to thrive in recovery.

Our goal is to fundamentally change the way recovery support is delivered by improving access to recovery support that leverages the intrinsic power of physical activity and social connection to reduce relapse and make recovery a reality. When treatment ends, individuals must rely on self-care strategies to stay sober. Phoenix picks up where treatment leaves off by providing healthy ways to connect with others and real world skills that promote recovery. Essential to program success is a culture that is welcoming, prioritizes safety, promotes healing and values being of service to others.

Attainment of the goals and objectives described below will be our benchmark for success or failure. Our progress towards these goals and objectives will be tracked using the methods and validated instruments described in the Section VI.

Goal 1: Provide access to recovery support services for individuals in recovery.

- Obj. 1.1 Community Programming – Facilitate, on average, 8 group fitness events (e.g. CrossFit, climbing, run/walks, mountain biking, cycling), a family support and art groups per week across Boise and surrounding communities. An estimated 10% growth in members served is expected each month after programming begins, serving a total of 200 members in the first year.
- Obj. 1.2. Collaboration with Community Partners – Provide concrete information about access to Phoenix programs at places where individuals are likely to be receiving related support services (e.g. Peer Wellness Center, homeless shelters, Drug and Alcohol Courts, IDOC, SOBER Club of Boise State University, Idaho Veterans Wellness Center, Boise Hive, Boise Area Council of Young People in Alcoholics Anonymous and other twelve step groups.) Program access will be advertised in local news media, through speaking engagements, on social media (e.g. local Facebook recovery support groups: MindShift+DailyHabits=Progress, Drunkless, Idaho Voices in Recovery) and a website containing a digital calendar of Phoenix programs.

Goal 2: Improve personal recovery capital and factors known to mediate sustained recovery for Members.

- Obj. 2.1 Improved self-perceptions– Increase participants’ self-esteem, general self-efficacy and sense of purpose
- Obj. 2.2 Improved coping and interpersonal skills - Increase participants’ coping skills and ability to exhibit prosocial behaviors.
- Obj. 2.3 Increase hope and sustained sobriety – Increase number of participants who have a sense of hope that recovery is possible, are able to maintain their sobriety and feel they can return to Phoenix programming after a relapse.
- Obj. 2.4 Quality of Life – Improve team members’ quality of life, physical and emotional health.

Our theory of change and logic model is used to ensure that evidence-based practices are incorporated into Phoenix programming, to evaluate outcomes and inform midcourse corrections when needed. In the short-term, implementing peer-facilitated sports and activities in a supportive sober community results in change in the personal capacities that support

recovery. As members enrich their personal recovery capital and sustain their sobriety, long-term improvements in their quality of life follow. There is a sustainable evidence base to support the use of peer-based recovery support, the transformative nature of sports and exercise and a sober active community to sustain recovery for those suffering from SUDs (see Section VII). Quality metrics are included in our evaluations to monitor the fidelity to Phoenix's evidence-based strategies. Specifically, events must be perceived as (1) physically safe, (2) led by instructors in a professional manner (3) perceived as "peer-facilitated" such that members and instructors have a sense of mutual identification (4) experiential, in that life-limiting perceptions are routinely challenged and overcome (5) providing access to a supportive network of peers in recovery (6) exist in a culture that is emotionally safe, while fostering pride and sense of purpose in its members.

VI. Evaluation Plan

We hope to learn more about how participation in Phoenix improves recovery outcomes for members. We will carry out an ongoing process and quality assurance evaluation to inform program implementation and ensure fidelity. Specifically, we want to know:

- 1) Does participation in Phoenix programming improve individual's personal recovery capital, particularly with respect to improvements in attitudes towards sober activities, coping skills, self-efficacy, self-esteem and sense of purpose?
- 2) Does participation in Phoenix programming improve the quality of life of individuals, with respect to, hope in recovery, sustained sobriety and physical and emotional health?
- 3) How many members are served and, to what extent do team member's perceptions of their experience align with Phoenix's benchmarks for high-quality implementation?

We will evaluate questions 1 and 2 by administering the Phoenix Multisport Evaluation Survey to members three-months after participating. The scales used in the survey have been pilot-tested and validated in a sample of Team Members and are derived from widely-used, validated instruments, such as the General Self-Efficacy Scale⁵, the Coping Strategies Inventory Short-Form⁶, the Rosenberg Self-Esteem Scale⁷ and the World Health Organization's Quality of Life scale⁸. All of our members must have 48 hours of sobriety before attending events; therefore, members who are new to recovery, particularly those who have recently completed treatment programs, are likely to have high self-ratings on baseline measures of recovery-related outcomes. These "baseline" measures speak more to the benefit of services used (or not used) prior to coming to Phoenix Multisport than the start of the recovery process. As members participate in Phoenix Multisport they may also change their understanding of the recovery dimensions being measured. To account for the high potential for "response shift" before and after participation⁹, we utilize a retrospective design in our evaluation survey. Specifically, members are asked to report on their perceptions of themselves the first day they started participating in programming and their current self-perceptions. We also include process evaluation components in our design to evaluate Question 3. Attendance is captured using electronic sign-in forms at each event, which tracks the individual members who have attended each event and the details about the event (e.g., discipline of the event, location, number of instructors, etc.). The quality of participation is captured using questions on our evaluation survey that align with our standards of high-quality programming and fidelity to the organization's mission (see Section V for benchmarks).

On a quarterly basis, Brett Wyker, Evaluation Manager for Phoenix, will analyze and report outcomes for accountability and performance measurement purposes. Brett has over ten years of experience collecting, managing, analyzing and reporting on evaluation data for social service organizations, including several years working as an external evaluator for nonprofit organizations. He developed and currently maintains Phoenix's electronic data collection systems and validated the evaluation instruments used to report on outcomes and guide organizational decision making. He holds a Master's in Social Behavior and Community Health, has been an instructor of graduate-level Program Evaluation courses and has published in a variety of peer-reviewed journals on evaluation methodologies and survey validation.

VII. Evidence-Based Research

Phoenix Multisport's Active Community Model uses experiential, peer-facilitated, physical, social and educational programming to change participant's self-perceptions, improve coping skills and increase hope that recovery is possible, which, in turn, mediates long-term improvements in social connectedness, sustained recovery, quality of life, and physical and emotional health.

Peer-Based Recovery Support: Bassuk, E. L., Hanson, J., Greene, R. N., Richard, M., & Laudet, A. (2016). Peer-Delivered Recovery Support Services for Addictions in the United States: A Systematic Review. *Journal of substance abuse treatment*, 63, 1-9. Available at: <http://www.facesandvoicesofrecovery.org/resources/peer-delivered-recovery-support-services-addictions-united-states-systematic-review-0>

- A summary of nine peer-reviewed studies by Bassuk and colleagues found improvements in substance use and/or a wide range of recovery-related outcomes (e.g., reduced re hospitalization rates, increased post-discharge adherence, increased social-connectedness) for individuals who received recovery support services delivered by peers.

Physical Activity & Coping Skills Development: Hser, Y. I., Hoffman, V., Grella, C. E., & Anglin, M. D. (2001). A 33-year follow-up of narcotics addicts. *Archives of general psychiatry*, 58(5), 503-508. Available at: <http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.216.1490&rep=rep1&type=pdf>

- In a 33-year study of heroin users, Hser & Anglin (2001) identified the lack of constructive coping skills as a principal risk factor for relapse. Conversely, having a non-drug-using supportive network available and using substance-free strategies to cope with stressful conditions, protected against relapse.

Group Membership & Social Identity: Buckingham, S. A., Frings, D., & Albery, I. P. (2013). Group membership and social identity in addiction recovery. *Psychology of Addictive Behaviors*, 27(4), 1132. Available at: https://www.researchgate.net/profile/Daniel_Frings/publication/236183080_Group_Membership_and_Social_Identity_in_Addiction_Recovery/links/0046352d7e6a22b441000000.pdf

- Studies in social psychology have demonstrated there are positive effects on individual well-being when people identify as belonging to a common group. Buckingham, Frings & Albery found that identifying with others in "recovery" as opposed to "addicts" can reduce the risk of relapse. Evaluations of Phoenix programming have found that nearly two-thirds of members feel more socially connected to others in recovery after participating in programming.

VIII. Grant Management

Bringing together knowledge and experience in business (e.g., finance, program development, implementation and evaluation), clinical (e.g. peer recovery support and special populations), education, and fundraising, with a proven record of successfully growing Phoenix to serve over 19,000 people across 4 states, we are positioned to effectively implement the proposed solution. Phoenix has also demonstrated a track record of successfully implementing grant programs including a 2013 Substance Abuse Mental Health Service Administration award for \$750,000 to pilot the “Together Families Recover”, which allowed Phoenix to expand programming to serve recovering families.

For this project the executive team will provide oversight and support to the Boise team in implementing the program elements outlined in the proposal. While the Boise Executive Director will oversee execution of all grant activities, the Program Coordinator will be responsible for ensuring quality and fidelity in program delivery. Weekly supervision and monthly team meetings will provide opportunities to review progress on the grant and strategize around any program changes that will improve success. Program staff will be offered opportunities to participate in evidence-based and discipline specific training.

IX. Sustainability

Nationally, over the last ten years of operation, Phoenix has built a sound physical and organizational infrastructure with diverse funding strategies. To ensure sustainability in Boise we will pursue a combination of:

- Traditional Fundraising
 - Fundraising campaigns and events
 - Individual donations
 - Government and foundation grants
 - Corporate sponsorships
- Revenue Ventures
 - Health /wellness contracts with treatment centers and businesses
 - Training, technical assistance and consulting services
 - Facility rentals

Sustainability is further strengthened through community partnerships (see addendum Collaboration Table) and a robust volunteer program. By partnering with other organizations we can keep costs down and improve service access for members. Volunteerism also serves the dual objectives of promoting purpose among members and allows Phoenix to offer more services for less cost.

Critical to Phoenix’ success is a robust volunteer and apprentice instructor program. A primary task of instructors it to ensure that the culture surrounding programming is safe, welcoming and promotes an ethic of giving back. Volunteers interested in advancing to hold more responsibility receive training to do outreach and assist with program instruction. Those interested in employment in fitness and outdoor industries and participate in the Phoenix Workforce Development Program, where they will receive training, funding and opportunities to get certifications that allow them to seek employment in fitness and outdoor industries.

Phoenix Multisport - Boise - FY 2017 - 2018

	Millennium Fund Grant Application				Organization Total
	Millennium Fund	Other Fund Sources	Project Total	In-Kind Contributions	
PERSONNEL COSTS					
Organization Hired Staff					
Number of staff	1.0	0.0	1.0	1.0	2.0
Est. Hours to be worked	2,080.0	0.0	2,080.0	2,080.0	4,160.0
Salaries	\$22,760.00	\$23,000.00	\$45,760.00	\$77,000.00	\$122,760.00
Benefits	\$2,330.00	\$0.00	\$2,330.00	\$2,330.00	\$4,660.00
Contract Hired Staff					
Number of staff	2.0	0.0	2.0	0.0	2.0
Est. Hours to be worked	200.0	0.0	200.0	0.0	200.0
Salaries	\$6,000.00	\$0.00	\$6,000.00	\$0.00	\$6,000.00
Benefits	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL PERSONNEL STAFF	3.0	0.0	3.0	1.0	4.0
TOTAL PERSONNEL HOURS	2,280.0	0.0	2,280.0	2,080.0	4,360.0
TOTAL PERSONNEL COSTS	\$31,090.00	\$23,000.00	\$54,090.00	\$79,330.00	\$133,420.00
OPERATING EXPENDITURES					
Program Evaluation (not already counted)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Travel	\$5,000.00	\$0.00	\$5,000.00	\$0.00	\$5,000.00
Marketing	\$1,250.00	\$0.00	\$1,250.00	\$0.00	\$1,250.00
Advertising	\$1,250.00	\$0.00	\$1,250.00	\$0.00	\$1,250.00
Insurance	\$3,500.00	\$0.00	\$3,500.00	\$0.00	\$3,500.00
Rent/Bldg. Lease	\$57,000.00	\$0.00	\$57,000.00	\$0.00	\$57,000.00
Utilities elec, gas, phone	\$3,600.00	\$0.00	\$3,600.00	\$0.00	\$3,600.00
Organization Overhead	\$16,785.00	\$0.00	\$16,785.00	\$0.00	\$16,785.00
Lobbying Activities/ Organization Awareness	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Materials & Supplies	\$3,700.00	\$0.00	\$3,700.00	\$0.00	\$3,700.00
Contracts (not already counted)	\$3,000.00	\$0.00	\$3,000.00	\$0.00	\$3,000.00
Employee Development/Training	\$1,500.00	\$0.00	\$1,500.00	\$0.00	\$1,500.00
Other*	\$1,000.00	\$0.00	\$1,000.00	\$0.00	\$1,000.00
<i>* Other: professional fees (i.e.legal)</i>					
TOTAL OPERATING EXPENDITURES	\$97,585.00	\$0.00	\$97,585.00	\$0.00	\$97,585.00
EQUIPMENT/CAPITAL OUTLAY COSTS					
Computers	\$4,000.00	\$0.00	\$4,000.00	\$0.00	\$4,000.00
Printers	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Projectors	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Leasehold improvements	\$10,000.00	\$0.00	\$10,000.00	\$0.00	\$10,000.00
Program equipment	\$35,000.00	\$0.00	\$35,000.00	\$0.00	\$35,000.00
Other - bikes, trailer	\$0.00	\$37,000.00	\$37,000.00	\$0.00	\$37,000.00

Phoenix Multisport - Boise - FY 2017 - 2018					
TOTAL CAPITAL OUTLAY	\$49,000.00	\$37,000.00	\$86,000.00	\$0.00	\$86,000.00
TOTAL MILLENNIUM FUND BUDGET REQUEST	\$177,675.00	\$60,000.00	\$237,675.00	\$79,330.00	\$317,005.00

TRANSFERS TO OTHER ORGANIZATIONS/AGENCIES	N/A				
---	-----	--	--	--	--

Organization Name _____
 Amount _____
 Purpose N/A

SUBCONTRACTING/SUBGRANTING INFORMATION	N/A				
--	-----	--	--	--	--

Organization Name _____
 Amount _____
 Purpose N/A



Presentation



**PHOENIX
MULTISPORT**

Figure 2.3: The Three Stages of the Addiction Cycle and the Brain Regions Associated with Them

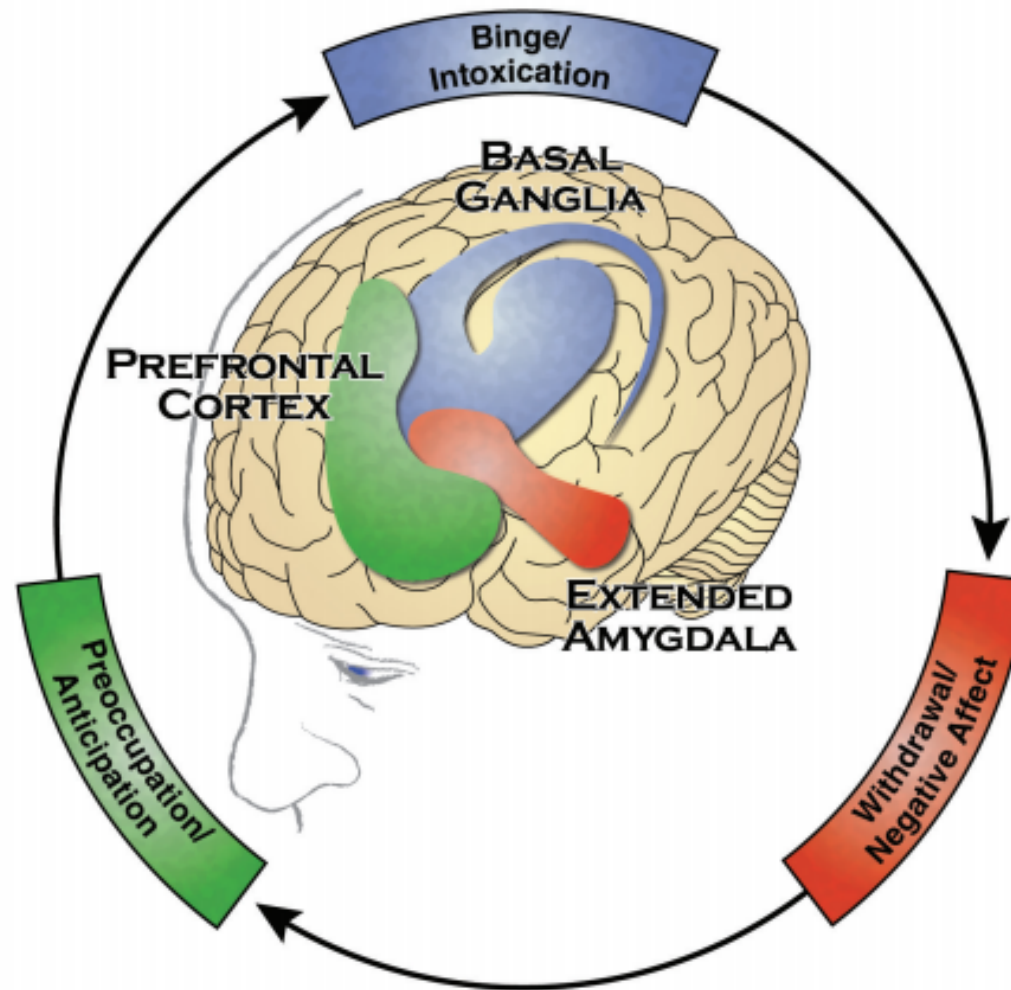
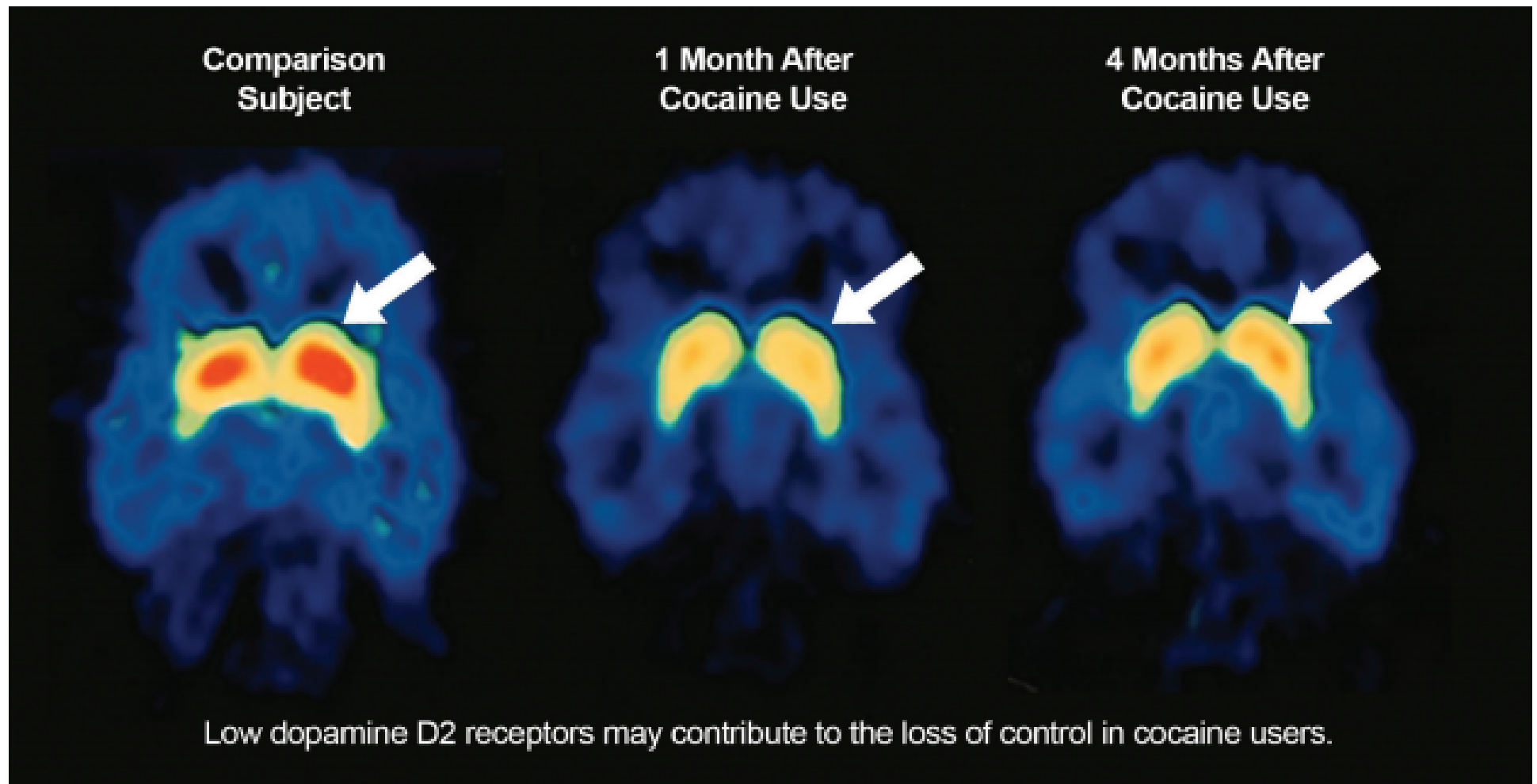


Figure 2.8: Time-Related Decrease in Dopamine Released in the Brain of a Cocaine User









**This Page
Intentionally
Left Blank**



October 14, 2016

RE: 2018 Millennium Fund Grant Application

Dear Joint Millennium Fund Committee Members;

Recovery 4 Life LLC is a State Licensed Behavioral Health Agency located in Boise and Caldwell Idaho. We specialize in treating Co-Occurring and Drug and Alcohol issues. We are entering our seventh year of business and have become one of the leading Drug and Alcohol treatment centers in the state. We utilize evidenced based practices to provide Level II.IOP and Level IOP services such as group, individuals and family therapy. We are known for our initiative treatment approaches including comprehensive treatment of trauma, Co-Occurring, 17-24 year old's and family issues. We also provide daycare and play therapy to stop the cycle in these families. Recently we have added Recovery Coaches.

A year ago we were asked to be a part of an innovative group from the Ada County Courts, Ada County Sheriff's office, Ada County Jail, Boise Police Department, Terry Rielly, the Food Bank and Rising Sun to find a solution to the chronic homeless/chronic Alcoholic problem in Ada County. This population tends to cost the county disproportionate amounts of money and utilizing the most resources, through emergency rooms visits, EMS responses, arrests, jail and court time. They also create problems for the public and specifically business downtown. This population is unlikely to seek treatment. Creating an endless drain on financial resources in Ada County. One such participant that we studied over the last year cost the community \$100,000.00 in one-years' time.

Penelope Hansen from the Boise Police Department introduced the group to the Serial Inebriate Program that is currently being used in San Diego, Montana and Washington with tremendous results. This group mad commitments to work together to form a plan for implementation of this program in Ada County. Funding was identified through the Access to Recovery Grant for treatment. This grant however closes in February 2017. There is no other funding for the treatment portion at this current time as many of these clients do not meet current requirements for Medicaid.

We are respectfully requesting \$437,600.00 in Millennial Funds to be utilized to treat 20 chronically homeless/chronic Alcoholics in Ada County. This would provide the treatment and safe and sober housing of the Serial Inebriate program for a year. Participants will have Substance abuse treatment along with intensive case management services to help them put their life back on track and obtain employment and long term self-sufficiency. Safe and Sober housing would be paid for through this grant for the first 6 months. In other states using this model they have demonstrated a significant decrease in cost to county, taxpayers and community agencies.

We believe that an investment in this program rehabilitate this population, save the county and taxpayer's significant amounts of money. Thank you for your consideration.

Sincerely,

Amy Jeppesen LCSW ACADC
Executive Director
Recovery 4 Life LLC



Millennium Fund Grant Proposal

Prevention/Cessation/Treatment

For the Period July 1, 2017 through June 30, 2018

The Idaho Legislature appropriates funding from the Idaho Millennium Fund to eligible applicants who provide services that help individuals to never start, to quit, or to receive treatment for, tobacco or substance use. This process begins with a submitted application to the Joint Legislative Millennium Fund Committee. Applicants that are awarded a Millennium Fund Grant must then submit an annual report detailing the project, and any outcomes and expenses. Please contact Jared Tatro, Legislative Services Office, with any questions at (208) 334-4740 or email jtatro@lso.idaho.gov.

Serial Inebriate Program

I. Grant Applicant

Full Legal Organization Name

Address

City

State

Zip Code

Website

JX2 DBA Recovery 4 Life

8950 W Emerald St. STE 178

Boise

ID

83704

www.recovery4lifeidaho.com

Primary Grant Applicant Contact Person

Name

Title

Phone

Email Address

Amy Jeppesen

Executive Director

208-376-7083 ex 1102 C. 208-914-1208

amyj@recovery4lifidaho.com

Alternate Grant Applicant Contact Person

Name

Title

Phone

Email Address

Melanie Simon

Chief Operation Officer

208-376-7083 ex 1106

<email address>

Anticipated Presenter

Name

Title

Phone

Email Address

Amy Jeppesen

Executive Director

208-914-1208

Amyj@recovery4lifeidaho.com

II. Grant Proposal Summary

(Indicate Yes Where Applicable)

Select all Applicable Criteria:

1. Tobacco Cessation or Prevention	
2. Vaping/E-Cigarette Cessation or Prevention	
3. Substance Abuse Cessation or Prevention	Yes
4. Tobacco or Substance Abuse Treatment	Yes

Purpose of Grant:

The purpose of this grant is to continue the Serial Inebriate Program (SIP) a program to provide long term solutions to the problems of chronic homelessness/ chronic alcoholism in Ada County. One year ago Boise Police Department and others County partners gathered together to start this project in Ada County.

Ada county has a number of individuals experiencing chronic alcoholism & homelessness who are stuck in a revolving door, going in and out of jail and local emergency rooms. This creates poor outcomes for the individual and very high cost to the community. The SIP program would create a collaborative community partnership leveraging existing resources to implement a court managed diversion program engaging a group of these high cost individuals in treatment while living in safe and sober housing, and ultimately gaining tax-paying employment and permanent housing. This Grant would cover the one-year cost for SIP in Ada County. Currently funding has been provided through the Access to Recovery Grant but that funding end in February 2017. In 2015-2016 community partners began meeting planning and laying out the process for the SIP program.

Goal 1. To obtain funding to continue the SIP Program in Ada County

Goal 2. To serve 20 clients in the first year of operation.

III. Proposed Budget

Grant Amount Requested \$437,600.00 (see Separate Excel file.)

This budget is for personal to provide the treatment services at Recovery 4 life. Recovery 4 Life employ 4 FTE and 4 PFT's to run the program total of 8 at a cost of \$280,800.00 for the year. This program will provide safe and sober housing for 6 months through Rising Sun at a total cost of \$55,200. Operating expenditures include in the other \$55,200 for the Safe and Sober Housing for 6 months then the participant will pay own rent at this point they are to be employed. It also includes \$28,080 for drug testing of the participants 2 x a week at a cost of \$13.50. There is a \$28,630 or 7% for agency overhead to cover accounting for grant monies.

IV. Statement of Need

The 2016 Point in Time Homeless Study found 867 homeless individuals in Ada County. Approximately 27% of them self-reported mental health and substance misuse. This is a conservative assessment since we have 17% of that total population are chronically homeless. National data suggest that about 30% of those who experience chronic homelessness have mental health conditions and about 50% have co-occurring substance use problems. (Current Statistics on the Prevalence and Characteristics of People Experiencing Homelessness in the United States (Last Updated July 2011)). This subset of homeless persons has frequent contacts with law enforcement, repeated incarcerations and costly short-term emergency medical services. This results in a disproportionately large cost burden to the community. In addition, while there are treatment resources available in the community to support these individual's recovery,

they seldom seek treatment. This scenario creates a revolving door where individuals are triaged in the most expensive services in the system without receiving any treatment to assist them in breaking this cycle. Tragically, many of these individuals lives end in a premature death related to their alcohol consumption and poor health and cost the county city and tax payers an absorbent amount of money with no solution.

A Boise Police Department officer went to "Joe", an individual he had repeated daily interactions with and asked him to sign a release of information to investigate his cost to the system for a mere six months. He found that Joe had 14 arrests, (\$3,066) and served 95 days in jail (\$10,040). Joe had 11 EMS transports (\$14,652) and 13 visits to St. Luke's (\$26,000). Joe cost the community approximately \$53,758 during the six-month period of July -Dec. 2015; a projected cost of Joe continuing in this cycle for a year is well over \$100,000.

V. Project Design

The Goal is to provide funding for SIP program and engage 20 participants during that one-year period of time. To meet this goal, we have the following objectives:

1. Bring out the San Diego team to be a resource for a 2-day training for the community collaborative partners to set up and begin to administer the program.
2. Identify an initial, five "high-resource using" clients to start the SIP program.
3. Set up quarterly meetings with the community collaborative partners to follow up on progress and problem-solve any issues that arise.
4. Bring together the community collaborative partners to identify alternative funding for sustainability.

SIP involves agencies working in a collaborative effort to provide the structure and treatment needed to be successful. San Diego has been running this program successfully for 15 years. We will bring out trainers to Idaho and provide a two-day training to the collaborative partners helping them understand their respective roles, break down barriers that currently exist in our systems of care and promote collaboration. The partnering agencies will implement and oversee the SIP program. These Agencies began meeting this past year discussing this process and laying out a plan to implement. These agencies will continue to meet on a quarterly basis to discuss progress, problem solve and create sustainability.

Participants for the Serial Inebriate Program (SIP) will be identified by Law Enforcement, EMS and local hospitals. The target population criteria are: persons who have had excessive contact with Law Enforcement and/or a disproportionate amount of EMS or hospital visits due to alcohol usage. The individual is a high resource utilizer of Emergency Medical Services and Hospital Emergency Departments, and the jail. They must have a primary alcohol use disorder and they must be a nonviolent offender with a history of low level misdemeanor offenses. They cannot have a history of violent crimes, sexual offenses and/or an arson offense.

With a criminal charge pending, a prospective participant will have a court-offered option of treatment and Safe and Sober Living versus a longer sentence in jail in proportion to chronic criminal history. San Diego has demonstrated this approach to be a motivating factor for participants to choose treatment. The participant will begin to engage in substance abuse treatment, mental health treatment and medical care and case management. Case management will be focused on gaining access to legal identification documents, public assistance, employment and many other life skills. In addition, they will receive peer support/recovery coaching and have transportation to alcohol related treatment services. The program is focused on assisting the participant move from the street to support in treatment and safe and sober living; moving out of the dysfunctional cycle into a healthy, safe lifestyle.

The Serial Inebriate Program (SIP) takes advantage of existing resources in our community and links them together in a meaningful way to establish a consistent and targeted, best-practice treatment program. The program does not seek to build new facilities but to develop a new system of care in which all aspects of the participant's experiences is being supported and encouraged toward healthy change and recovery.

Recovery 4 Life (R4L) will be the primary treatment provider and has completed site visits with San Diego's SIP treatment provider to develop the curriculum and treatment philosophy. R4L has partnered with Terry Reilly who provides medical and mental health treatment to those who are experiencing homelessness. These two providers have a memorandum of understanding and have developed a service partnership. Transportation will be provided for appointments to increase the compliance with treatment.

The Rising Sun Sober Living will provide clean and sober living for men and women recovering from drugs and alcohol. Rising Sun Sober Living requires attending AA/ NA meetings, abide by a curfew, attend house meetings, submit to random drug testing, complete a daily chore, be considerate and respectful to others, pay guest fees on time and have no visitors.

Success in the SIP program comes from the expectations that participants will be responsible and productive members of society. Participants are expected to obtain employment after stabilizing in the program. They are responsible to do chores in the meantime at their housing facility as well as treatment provider to do their part towards their treatment in the beginning. Participants will be placed on probation and sent to treatment in lieu of Jail time and will be accountable to their probation officer for progress.

San Diego's long standing evidence-based Serial Inebriate Program (SIP) developed in partnership with law enforcement, emergency medical services, hospitals, and the courts. Counterparts exist in Portland Oregon, Montana and Seattle Washington. SIP could be replicated in Ada County with a few alterations to better fit our existing community resources and structure.

VI. Evaluation Plan

Evaluation of the project will include three parts.

Gathering of Data from local hospitals, EMS, Jails Etc.

1. Did providing treatment to SIP participants decrease the cost on our community resources?

We will be gathering data on baseline costs the participant had incurred in the community prior to entering the SIP program. We will monitor costs to these same entities throughout the treatment process. We expect this data will show a significant decrease in cost for these individuals. We will be utilizing these data to engage other community partners in making financial and service contributions to create sustainability for this program in the future.

We will establish MOU's with the partnering agencies that will allow for the exchange of information in regards to frequency of services and associated costs. This information will be tracked by the Boise Police Department. A report of this will be presented in a bi-annual basis by the Boise Police Department to the collaborative partners.

Direct Client Follow-Up

2. Did clients who received the SIP program remain in housing and employed for a period of 6 months after completion of the program?

Clients will be followed through the program, using the Coordinated Entry Assessment Questionnaire developed by the national alliance to end homelessness. Information will be collected upon entry to the program, at completion, at 6 months and 1-year post treatment. Clients will be asked questions about housing stability and current employment. The cost of this follow-up process will be \$1200 for the year.

Partner Agency Survey

1. Did the SIP program provide a platform for more collaborative communication and relationships between the community partners?

Partnering agencies will receive surveys from Boise Police Department. This will be an anonymous survey and will contain questions around satisfaction in working with the group, increase in knowledge about services of other agencies. The survey will be done at the beginning of the project, at 6 months into the project and at the end.

VII. Evidence-Based Research

Study of 529 individuals identified as chronic inebriates in San Diego. Findings: By coordinating resources and aims across agencies, SIP not only appears able to end the cycle for 25% of its enrollees; this strategy appears also to reduce the consumption of emergency health-care resources—in part by enrolling some of the highest users of health-care resources—while increasing enrollment in alcohol recovery programs.

An Evaluation of the Impact of San Diego’s Serial Inebriate Program (SIP) California Program on Access to Care Findings. December 2006

<https://www.sandiego.gov/sites/default/files/legacy/sip/pdf/Institute%20for%20Public%20Health%20-%20Graduate%20School%20of%20Public%20Health%20at%20SDSUUCSD.pdf>

Carol Caton, Carol Wilkins, and Jacquelyn Anderson document the considerable efforts of the past decade to address the needs of people who are considered chronically homeless; that is, unaccompanied adults with disabling conditions who experience long or numerous spells of homelessness. The authors detail the prevalence, characteristics, and service needs of adults who are chronically homeless and present a synthesis of recent research on service and housing interventions. Finally, they discuss the implications of the findings for services and for future research. The authors note that rigorous research on many interventions is lacking, but promising practices from the field may help guide the development of housing and services.

People who experienced long term homelessness; Characteristics and Interventions. Carol L.M..Caton PhD Columbia University, New Your NY Carol Wilkins, MPP, Corporation for supportive Housing, Oakland CA Jacquelyn Anderson, MPP, Corporation for Supportive housing, Oakland CA. May 2010

<http://aspe.hhs.gov/hsp/homelessness/symposium07/caton/>

The numbers speak for themselves, but Matt Lennick, Tony Nichols and Joel Simpson don’t mind telling a visitor how well a new program is working both downtown and citywide.

They point out statistics that indicate the Motivated Addiction Alternative Program is having the desired effect of getting Billings’ identified serial inebriate population into treatment — or, if they choose, into jail for somewhat lengthy stays.

- From Jan. 1 through Sept. 1, 2014, calls regarding public inebriation, including alcohol-related trespass, numbered 832 within the boundaries of the Business Improvement District, roughly the city’s downtown, where Lennick and Nichols serve as downtown resource officers, and Simpson, a licensed addictions counselor at Rimrock, is the resource outreach coordinator. During the same period this year, 566 calls came in.
- Open container citations plunged during the same period from 1,050 in 2014 to 567 in 2015. Alcohol-related trespass, mostly within the BID boundaries, dropped from 466 to 357.
- From July 1 through Sept. 30, there were 264 MAAP incidents — open container violation and alcohol-related trespass. Of those, 214 offenders chose a written citation or arrest, determined by how many times in the past 30 days they’d been cited, and 50 — 19 percent — chose to speak with an addictions counselor. “That’s 50 cases that were diverted out of the courts and out of jail,” Lennick noted.
- Of the 214 cited or arrested, 32 cases representing 29 people (some with multiple offenses) went through the court system. 27 of those cases (24 people) chose addiction treatment provided daily by Simpson. Five decided to do the jail time.

Downtown seeing results with the serial inebriate initiative in Montana. Mike Ferguson billings gazette. Oct 2015

http://billingsgazette.com/news/local/crime-and-courts/downtown-seeing-results-with-serial-inebriate-initiative/article_4a7c669e-ff8a-5cb3-affb-7a29bf6a6d90.html

VIII. Grant Management

The grant will be managed by Recovery 4 Life's Executive Director Amy Jeppesen LCSW ACADC. Recovery 4 Life is an LLC and has been doing business in Boise for the past 6 ½ years. Amy Jeppesen LCSW ACADC has been practicing for 17 years and an Executive Director in charge of budgets and financial management for 12 of those 17 years. Financial management and reports will be generated at Recovery 4 Life by Melanie Simon who has a background and degree in finances. Melanie has been working in financial management for 7 years and has a track record for financial prudence and eye to detail. Financial reports will be generated by Recovery 4 Life on a quarterly basis. An accounting and update of the grant dollars and budget will be provided to the community partners in the quarterly meetings for feedback and review.

IX. Sustainability

The SIP program can provide a valuable service in Ada County and potentially replicable to other parts of the state as a solution for chronic alcohol misuse and high emergency service utilizers. San Diego has been successfully utilizing the program for 15 years saving the county resources millions of dollars per year as well as decreasing the number of homeless who have severe alcohol addiction issues. In a study done on the impact of the SIP program in San Diego it showed that those SIP participants who accepted treatment decreased in monthly community charges by 100% while those who declined treatment increased in use of community resources by 1100%. We will be utilizing the data we collect from money saved to recruit new partners who can make financial or resource contribution. So far the following programs have already committed the following resources or dollars. Recovery 4 life purchased a van for transportation, Rising Sun waived the \$65 a month utility fee and created a private apartment for these participants, St Vincent's DePaul has issued vouchers for clothing and hygiene kits for the day participants get out of Jail. The Vineyard added a special volunteer and are willing to open up their food pantry on the day the participants get out of Jail to provide a food box for them to take to housing. Terry Reilly is utilizing their homeless grant to cover all the medical care as well as mental health medications and has committed to give first priority to these clients on the day they get out of Jail.

We will also spend the next year looking for grants to help fund this program and plan to apply for future grants as the program grows. We are hopeful that others are willing to join us in this effort when they can see the savings to the county and other agencies in the community.

Serial Inebriate Program at Recovery 4 Life

PERSONNEL COSTS	Millennium Fund Grant Application				Organization Total
	Millennium Fund	Other Fund Sources	Project Total	In-Kind Contributions	
Organization Hired Staff					
Number of staff	8.0		8.0		8.0
Est. Hours to be worked	10,920.0		10,920.0		10,920.0
Salaries	\$252,600.00		\$252,600.00		\$252,600.00
Benefits	\$29,200.00		\$29,200.00		\$29,200.00
Contract Hired Staff					
Number of staff			0.0		0.0
Est. Hours to be worked			0.0		0.0
Salaries			\$0.00		\$0.00
Benefits			\$0.00		\$0.00
TOTAL PERSONNEL STAFF	8.0	0.0	8.0	0.0	8.0
TOTAL PERSONNEL HOURS	10,920.0	0.0	10,920.0	0.0	10,920.0
TOTAL PERSONNEL COSTS	\$281,800.00	\$0.00	\$281,800.00	\$0.00	\$281,800.00
OPERATING EXPENDITURES	Millennium Fund	Other Fund Sources	Project Total	In-Kind Contributions	Organization Total
Program Evaluation (not already counted)	\$1,200.00		\$1,200.00		\$1,200.00
Travel	\$0.00		\$0.00	\$6,500.00	\$6,500.00
Marketing	\$4,600.00		\$4,600.00	\$2,000.00	\$6,600.00
Advertising			\$0.00		\$0.00
Insurance	\$4,306.00		\$4,306.00		\$4,306.00
Rent/Bldg. Lease	\$14,004.00		\$14,004.00		\$14,004.00
Utilities	\$1,440.00		\$1,440.00		\$1,440.00
Organization Overhead	\$28,630.00		\$28,630.00		\$28,630.00
Lobbying Activities/ Organization Awareness	\$2,000.00		\$2,000.00		\$2,000.00
Materials & Supplies	\$1,500.00		\$1,500.00		\$1,500.00
Contracts (not already Employee			\$0.00		\$0.00
Employee	\$5,880.00		\$5,880.00		\$5,880.00
Other* Conference fees <i>age and cover meeting for 6 months for each participant. Drug testing while in the program for each participant</i>			\$0.00		\$0.00
* Other:	\$83,280.00		\$83,280.00		\$83,280.00
TOTAL OPERATING EXPENDITURES	\$146,840.00	\$0.00	\$146,840.00	\$8,500.00	\$155,340.00
EQUIPMENT/CAPITAL OUTLAY COSTS	Millennium Fund	Other Fund Sources	Project Total	In-Kind Contributions	Organization Total
Computers	\$3,600.00	\$2,400.00	\$6,000.00		\$6,000.00
Printers	\$600.00		\$600.00		\$600.00
Projectors			\$0.00		\$0.00
Furniture	\$2,000.00	\$6,000.00	\$8,000.00		\$8,000.00
Software	\$2,760.00		\$2,760.00		\$2,760.00
Other			\$0.00		\$0.00
TOTAL CAPITAL OUTLAY	\$8,960.00	\$8,400.00	\$17,360.00	\$0.00	\$17,360.00

Serial Inebriate Program at Recovery 4 Life					
TOTAL MILLENNIUM FUND BUDGET REQUEST	\$437,600.00	\$8,400.00	\$446,000.00	\$8,500.00	\$454,500.00

TRANSFERS TO OTHER ORGANIZATIONS/AGENCIES	Rising Sun Sober living				
--	-------------------------	--	--	--	--

Organization Name _____ Rising Sun _____

Amount \$55,200

Purpose The program will provide 6 months of safe and sober housing for each participant. At the end of the 6 months the participant is expected to pay rent on their own. This service will be provided by Rising Sun Sober living in Boise Idaho.

SUBCONTRACTING/SUBGRANTING INFORMATION	NONE				
---	------	--	--	--	--

Organization Name _____

Amount

Purpose <Replace with own text, briefly explain why there will be a sub grant and how it will meet the mission of prevention/cessation/treatment>



Presentation

SERIAL INEBRIATE PROGRAM (SIP)

AMY JEPPESEN LCSW ACADC

DECEMBER 9TH 2016

SERIAL INEBRIATE PROGRAM - PURPOSE

- Reduce Chronic Homelessness and Alcoholism
- Evidenced Based Model Developed and Used in San Diego
- Training from the San Diego Team
- Community Collaborative Efforts
- Decrease Cost on Community Resources

SERIAL INEBRIATE PROGRAM FUNDING

- Maximizing Impact
- Community Partnerships
- Accounting Practices
 - Expenditures will be tracked and logged
 - Reporting to community partnerships

SERIAL INEBRIATE PROGRAM –MILLENNIUM FUNDS

- Reducing Alcoholism and Homelessness in Ada County
 - Utilizing accountability model
- Providing Substance Abuse Treatment for cessation of use.
 - Long term changes

SERIAL INEBRIATE PROGRAM

- Questions?
- Amy Jeppesen LCSW ACADC
- amyj@recovery4lifeidaho.com



**This Page
Intentionally
Left Blank**

The SHOSHONE-BANNOCK TRIBES



FORT HALL INDIAN RESERVATION
PHONE: (208) 236-1007
FAX: (208) 239-4571

FOUR DIRECTIONS TREATMENT CENTER
P.O. BOX 306
FORT HALL, IDAHO 83203

October 14, 2016

Joint Millennium Fund Committee
Room C305, State Capitol
Boise, ID 83720

Organizational Introduction. The Four Directions Treatment Center (FDTC) is a tribally operated adult and adolescent substance abuse treatment facility on the Fort Hall Reservation. The FDTC provides adult and adolescent outpatient treatment services and is the only tribally operated adult primary residential treatment program in Idaho. The FDTC alcohol/drug counselors are all certified in the State of Idaho by the Idaho Board of Alcohol/Drug Counselor Certification (IBADCC).

The certified counselors provide evidence-based treatment, and facilitate daily assessments, counseling, and treatment groups. The adult primary residential facility is operated twenty-four hours a day, seven days a week, has eight beds, and is a non-lock down facility. Additionally, the Four Directions Treatment Center provides culturally appropriate and holistic treatment services. The program has a sweat lodge located on the facility premises, and in group therapy provides smudging, the traditional talking circle, the Native 12 Steps, arts and crafts, traditional teachings, and the Tribal Shoshone-Bannock language class.


The majority of clients are legal referrals from the surrounding justice systems: the Tribal Court, Bingham County, Bannock County, Power County, Bonneville County, other counties in Idaho, and the Federal Court. The other entities that refer to the FDTC are local probation and parole officers, social services, medical staff, mental health, schools, and parents. The clinical counseling staff works to provide the highest quality of health care and substance abuse treatment for each individual.

The challenge is the overwhelming number of clients needing services, and the Four Directions Treatment Center's limited ability to meet the client needs for case management, and community prevention, outreach, and peer recovery support services.

Summary of Proposal. The Millennium grant funds will allow the Four Directions Treatment Center to meet the needs for peer recovery support services, and for case management and prevention. The funds will employ a full-time recovery service coordinator and two full-time recovery coaches. The staff will provide tobacco, alcohol and drug abuse awareness and community training, and support individuals in recovery and those seeking treatment services.

With the rise in abuse of methamphetamine and opiate drugs on the Reservation, and the need to educate community members about addiction and the danger of tobacco and drugs, the FDTC program must be better equipped to serve individuals seeking help. These recovery support services will be sustained through billing of services and grant applications.

Sincerely,


Donna Honena, Manager
Four Directions Treatment Center

October 14, 2016

Joint Millennium Fund Committee
Room C305, State Capitol
Boise, ID 83720

Addendum:

Idaho Department of Health and Welfare Letter of Support
Recovery Service Coordinator Job Description
Recovery Coach Job Description
Sho-Ban News Recovery Articles
Recovery Coach Academy at Fort Hall
Fort Hall Support Group Meetings
Walk Against Meth



Millennium Fund Grant Proposal

Prevention/Cessation/Treatment

For the Period July 1, 2017 through June 30, 2018

Shoshone-Bannock Tribes Four Directions Treatment Center Peer Recovery Support Services

I. Grant Applicant

Full Legal Organization Name

Shoshone-Bannock Tribes Four Directions Treatment Center

Address
City
State
Zip Code
Website

P. O. Box 306
Fort Hall
Idaho
83203-0306
<http://www.shoshonebannocktribes.com/health-and-wellness.html>

Primary Grant Applicant Contact Person

Name
Title
Phone
Email Address

Donna Honena
Manager, Four Directions Treatment Center
(208) 236-1009; (208) 417-9088
dhonena@sbth.nsn.us

Alternate Grant Applicant Contact Person

Name
Title
Phone
Email Address

Sharon Collins
Grant Writer
(208) 478-3927
scollins@sbtribes.com

Anticipated Presenter

Name
Title
Phone
Email Address

Donna Honena
Manager, Four Directions Treatment Center
(208) 236-1009; (208) 417-9088
dhonena@sbth.nsn.us

II. Grant Proposal Summary

(Indicate Yes Where Applicable)

Select all Applicable Criteria:

1. Tobacco Cessation or Prevention	Yes
2. Vaping/E-Cigarette Cessation or Prevention	Yes
3. Substance Abuse Cessation or Prevention	Yes
4. Tobacco or Substance Abuse Treatment	Yes

Purpose of Grant:

Four Directions Treatment Center (FDTC) provides certified clinical treatment for drug and alcohol abuse on the Fort Hall Reservation. However, FDTC has limited resources for prevention and peer recovery support services. This proposal requests funding for peer recovery support to include a Recovery Services Coordinator, and for training and certification of Recovery Coaches to become employed at the treatment center. A full-time Recovery Services Coordinator will assist recovering individuals through

case management and referrals to mental health, transportation to appointments and detox facilities; the Coordinator will supervise Recovery Coaches, and provide prevention activities in the community and in the Sho-Ban schools. Prevention outreach presented by the Recovery Services Coordinator and Recovery Coaches will include tobacco, vaping, inhalant, drug and alcohol topics. Prevention activities will be conducted in the five rural districts that are miles from the Fort Hall agency, which is home of the Tribal Government.

Two student Recovery Coaches are currently receiving supervision, on-the-job training, and are volunteering at the FDTC; they are working on their supervision hours for certification. Millennium funding will provide the opportunity for the volunteer coaches to become employed at the Four Directions Treatment Center. Recovery Coaches will provide peer recovery services for recovering individuals with motivation, advocacy, mentoring, life skills, and a drug and alcohol-free support network. Millennium funding will enable the certified Recovery Coaches to become qualified through train-the-trainer courses; they will teach recovery coaching to members of the community to create a community-wide support network for those seeking recovery.

III. Proposed Budget

Personnel Costs (\$116,700). The Millennium funds will allow the Four Directions Treatment Center to hire a full-time Recovery Services Coordinator and two full-time Recovery Coaches. The Tribes offer a benefit package for employees. There are no contract-hired staff. **In-kind Personnel Costs (\$15,000).** The FDTC Manager will supervise the peer recovery staff and maintain administrative oversight of the project. Her funding will be provided by the Tribes.

Travel (\$1,800). Travel and per diem costs for train-the-trainer courses is for three persons for four days.

In-Kind Marketing, Advertising, Organization Awareness (\$500). Marketing funding will be provided to the recovery support project by Four Directions. Costs include printing for brochures, purchase of prevention pamphlets and support group coins, a display table cover, cultural items, and T-shirts for community and school activities.

Organizational Overhead (\$30,400). The Shoshone-Bannock Tribes have negotiated an indirect rate of 24.68% from the Department of Interior for FY 16 that is estimated at 26% for FY 17. This rate is applied to labor and fringe benefits. **In-Kind Overhead Costs (\$4,000).** The FDTC Manager funding will include overhead provided by the Tribes.

Materials and Supplies (\$500). General office supplies include writing utensils, binders, tablets, printer paper, paper clips, ink cartridges, calendars, planners, file folders.

Development/Training (\$1,200). Training includes tuition for train-the-trainer with the Idaho Department of Health and Welfare. **In-Kind Development/Training (\$1,000).** The Four Directions Treatment Center will assign Recovery Coaches to attend Tribal and Health and Human Services symposiums such Violence Against Women, Grief Conference, Community Wellness Conference, Elder Abuse Prevention, and other training funded by the Tribes.

Equipment (\$10,800). Equipment requested includes computers (\$2,000), a printer (\$500), and desks and chairs (\$500). A GSA vehicle will be leased to travel among the five rural Reservation districts for training (\$7,200). A cell phone will be required for the staff to coordinate events and stay in touch with the manager (\$600). **In-Kind Equipment (\$1,250).** FDTC will provide computers (\$1,000) and furniture (\$250) in addition to grant funding.

Other In-kind Contributions. Other in-kind contribution by the Tribes includes office rent, electricity, information technology support, and internet.

Grant Amount Requested: \$161,400

IV. Statement of Need

Problem. The Four Directions Treatment Center needs peer recovery support services for tobacco, alcohol and drug awareness and prevention and for recovery from addiction. The challenge is the overwhelming number of clients needing services, and the FDTC's limited ability to meet client needs for case management, and community prevention, outreach, and recovery support services.

Population. As of January 30, 2016, there were 5882 enrolled members of the Shoshone-Bannock Tribes, with approximately 3800 of those members residing on the Fort Hall Reservation. There are also about 1500 members of other tribes that reside on the Reservation, and many non-natives. Living in Fort Hall is challenging, particularly for its young, poor, unemployed, and undereducated population sectors. Individuals and families must choose between staying in Fort Hall versus leaving the community to search for new opportunities and breaking from what they have known. Those who choose to stay find ways to deal with the local poverty, isolation, and social issues; often their coping strategies include tobacco and substance abuse. FDTC staff estimates that 50% of the Reservation population suffers from addiction.

Magnitude of problem. Substance abuse clients often arrive in treatment with numerous social problems and are unemployed or under-employed due to lack job skills or work experience. Many do not have a high school diploma, are homeless, and those who have been incarcerated face significant barriers in accessing safe and affordable housing. Moreover, many substance abuse clients have alienated their families and friends or have peer affiliations with other substance abusers only. Women in treatment have often been victims of domestic violence, including sexual abuse.

V. Project Design

Objective 1: Establish peer recovery support services. Four Directions Treatment Center recovery support services will include a Recovery Services Coordinator and two Recovery Coaches to provide motivation and support to enable individuals to maintain long-term sobriety.

The Recovery Services Coordinator will be a full-time employee with an associates' degree, or a certified drug and alcohol counselor. Please see the Recovery Services Coordinator job description in the Addendum. The Coordinator will provide services to clients in the FDTC outpatient and inpatient programs. He or she will provide case management services to clients in need of referral for a higher level of care, including follow-up, transportation, medical, psychiatric, housing, education and other services in accordance with a wellness plan or continuum of care plan. The Recovery Services Coordinator will assign the Recovery Coaches activities for recovering clients. The Coordinator will provide case management for the counselors, supervise Recovery Coaches, and supervise data tracking and prevention activities.

Recovery Coaches will be trained, supervised, and certified. Coaches are not sponsors or addiction counselors. Instead, they are people who have lived experience with recovery who provide non-clinical recovery support to their peers. Please see the Recovery Coach job description in the Addendum.

Objective 2: Enhance and increase tobacco, alcohol, and drug abuse awareness and prevention.

The Recovery Services Coordinator and Recovery Coaches will help to reduce stigma and labels through community recovery activities, training, and prevention services. With community members trained on the effects of tobacco, alcohol, and drugs, the Reservation will have a better understanding of how chemical substances and addiction negatively affects the Tribes. The community will better understand that an individual recovering from alcohol or drug addiction will find it difficult to remain sober, and that stigma and labels are harmful. With recovery outreach, the public will learn recovery is possible and very positive.

The Recovery Services Coordinator and Recovery Coaches will provide community and service-provider workshops each month. They will provide quarterly tobacco, alcohol, and drug prevention sessions to youth at the Tribal schools. Recovery Coaches will provide outreach and advocacy on a weekly basis to clients and community members, and they will actively participate at a weekly life skills class at Tribal Employment, Education and Training (EET) and Temporary Assistance for Needy Families (TANF) Departments. The recovery support staff will set up prevention booths at the community wellness conference, pow-wows, Tribal Health activities, the youth conference, the employment fair, and summer youth recreation. Other events where prevention activities will be included are basketball tournaments, the Shoshone-Bannock Festival and parade, the FDTC Walk Against Methamphetamine, and Recovery Fest. See the news articles in the Addendum.

Objective 3: Support community members in recovery. Individuals who seek recovery find it difficult to overcome barriers and challenges. One of the roles of the Recovery Coaches is as resource brokers; they help individuals develop a recovery wellness plan and assist them to seek resources for a successful recovery. The wellness plan includes assessment of connectedness to the community; physical, emotional, and spiritual health; school, job, and education status, as well as personal and daily living management. Persons trained in the community will build a movement towards wellness and remove the negative stigma associated with recovery, and will build a network of Coaches.

Millennium funding will pay for training fees and travel for Recovery Coaches to become trainers. The Recovery Services Coordinator and two certified Coaches will teach Connecticut Model Recovery Coach Training to community members, which will be provided at no cost. The recovery movement is new to the State of Idaho; the Department of Health and Welfare is providing the training. There are currently fifteen community members who have completed the Recovery Coach Training Academy; seven are working on their certification hours. Please see information in the Addendum. Recovery Coaches will decrease criminal justice involvement by giving back to the community in a positive manner, and communicate optimism for recovery.

Measurement of success is discussed in Section VI, Evaluation Plan. Evidence-based processes are discussed in Section VII, Evidence-Based Research.

Desired Outcomes. Recovery Coaches hired by the Four Directions Treatment Center will facilitate addiction prevention and a community network for recovery, reducing stigma for treatment. This will enable more community members to recover from addiction.

VI. Evaluation Plan

Primary evaluation questions. How much do Recovery Coaches help people come through the doors of the Four Directions Treatment Center? To what extent do recovery support services help people follow through with treatment? How much does mentorship and advocacy, prevention and awareness, and leverage with other resources help with recovery from addiction?

Assessment methods and strategies. Client clinical data is entered into the Indian Health Services Resource and Patient Management System (RPMS). Peer support referral and follow up client contacts will be captured in the client treatment note in the RPMS. Recovery Coaches will be trained in confidentiality requirements and trained to document information in the patient reporting system. The FDTC currently has no comprehensive statistical database so there will be no baseline data for recovery services.

Stakeholders for the program include Four Directions patients and the Fort Hall community. Recovery Coaches will create culturally specific wellness plans, and will measure how many clients follow through. Coaches will be assigned client follow up, and will document contacts on a daily contact sheet. They will meet with community members, and will document meetings and phone contacts. Recovery Coaches will also track tobacco and substance abuse prevention events and contacts gathered by sign-in sheets at community events. A pre-survey will measure the public's awareness of tobacco and substance abuse and prevention, and post-surveys will document increases in awareness and services provided. The FDTC has a biannual patient satisfaction survey; peer support questions will identify whether patients find the program helpful.

Program evaluation and improved outcomes. FDTC will evaluate whether more community members seek treatment services, how much case management and outreach increase recovery success, and if clients experience fewer legal charges related to alcohol and drug use. With data collection and outcome measurements, the FDTC will evaluate client care services and use the data to plan for service improvement and sustainability.

Who will be conducting evaluation? The Recovery Services Coordinator and Recovery Coaches will be responsible for data tracking and evaluation. The program status will be reported monthly to the Four Directions Treatment Center Manager, who will evaluate overall success of the program.

How is success defined? The Recovery Services Coordinator and Recovery Coaches will tally survey responses; success will be indicated by ratings of excellent, good, fair, and poor. In addition, success will be evaluated by data trends compiled from performance tracking.

VII. Evidence-Based Research

Four Directions volunteer recovery support services follow the methods from these evidence-based resources on peer recovery support services:

Idaho Department of Health and Welfare Recovery Coaching Idaho
<http://healthandwelfare.idaho.gov/Medical/SubstanceUseDisorders/RecoveryCoaching/tabid/2287/Default.aspx>

U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment, "What Are Peer Recovery Support Services?" <http://store.samhsa.gov/shin/content/SMA09-4454/SMA09-4454.pdf>

Ibid. "Perspectives on the Evolution and Future of Peer Recovery Support Services"
<http://www.williamwhitepapers.com/pr/CSAT%20Perspectices%20on%20Peer%20Recovery%20Support%20Services%202013.pdf>

Minnesota Recovery Connection <https://minnesotarecovery.org/peer-recovery-specialist-training/>. Peer recovery support services are designed and delivered by people who have experienced both substance use disorder and recovery.

Connecticut Community for Addiction Recovery <http://ccar.us/>

Four Directions Treatment Center volunteers are trained through the Recovery Coach Academy. The CCAR Recovery Training Center was established in 2014 in order to provide a centralized location for Recovery Coaching support.

VIII. Grant Management

Background information for the Four Directions Treatment Center is included in the application cover letter. Donna Honena, FDTC Manager, and staff will maintain oversight of the project, and will perform eight hours per week of in-kind supervision and administrative functions. Donna is a board member of the Idaho Board of Alcohol/Drug Counselor Certification. She is Region 6 Representative as shown on the board member listing at http://ibadcc.org/new_web/contact/board/board_members.shtml. Donna is also a member of the Region 6 Behavioral Health Board. She is a certified counselor and is certified to supervise Recovery Coaches.

The Shoshone-Bannock Tribal government's administrative functions operate in accordance with established policies; an Executive Director is in charge of day-to-day operations. The Tribes operate more than 75 departments and programs that provide a variety of services, including public safety; healthcare and social services; education, transportation, natural resource management, culture and recreation. Program Directors are responsible for grant management and contract compliance, including supervision of project staffing, meeting reporting requirements, and project evaluation. The Shoshone-Bannock Tribes have an extensive background in grant and financial resource management. The Tribes' Finance and Contracts Departments administer government and private awards, and have successfully administered Federal grants, cooperative agreements, and other financial awards since the 1970s.

IX. Sustainability

With the certification and hiring of two Recovery Coaches, the Four Directions Treatment Center will apply to receive reimbursement for recovery support services from the State of Idaho outpatient insurance through BPA Health, the State's alcohol and drug service reimbursement manager. Project sustainability will be possible as the Recovery Coaches increase their support network through the Fort Hall community and through coordination with other Tribal organizations including EET and TANF. Collaboration with the Idaho Department of Health and Welfare, and other treatment programs such as the Pocatello and Idaho Falls Recovery Centers will leverage resources. Additionally, the Fort Hall community has created a Tribal Action Plan (TAP), which is a long-range plan to address alcohol and drug abuse on the Reservation. This TAP team includes community members and tribal leaders.

In addition to insurance reimbursement, Four Directions Treatment Center will continue to apply for state, federal, and foundation funding to build and enhance the peer recovery services program.

Shoshone-Bannock Tribes Four Directions Treatment Center

	Millennium Fund Grant Application				Organization Total
	Millennium Fund	Other Fund Sources	Project Total	In-Kind Contributions	
PERSONNEL COSTS					
Organization Hired Staff					
Number of staff	3.0	0.0	3.0	2.0	5.0
Est. Hours to be worked	6,240.0	0.0	6,240.0	400.0	6,640.0
Salaries	\$77,100.00	\$0.00	\$77,100.00	\$12,000.00	\$89,100.00
Benefits	\$39,600.00	\$0.00	\$39,600.00	\$3,000.00	\$42,600.00
Contract Hired Staff					
Number of staff	0.0	0.0	0.0	0.0	0.0
Est. Hours to be worked	0.0	0.0	0.0	0.0	0.0
Salaries	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Benefits	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL PERSONNEL STAFF	3.0	0.0	3.0	2.0	5.0
TOTAL PERSONNEL HOURS	6,240.0	0.0	6,240.0	400.0	6,640.0
TOTAL PERSONNEL COSTS	\$116,700.00	\$0.00	\$116,700.00	\$15,000.00	\$131,700.00
OPERATING EXPENDITURES					
Program Evaluation (not already counted)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Travel	\$1,800.00	\$0.00	\$1,800.00	\$0.00	\$1,800.00
Marketing	\$0.00	\$0.00	\$0.00	\$500.00	\$500.00
Advertising	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Insurance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Rent/Bldg. Lease	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Utilities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Organization Overhead	\$30,400.00	\$0.00	\$30,400.00	\$4,000.00	\$34,400.00
Lobbying Activities/ Organization Awareness	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Materials & Supplies	\$500.00	\$0.00	\$500.00	\$0.00	\$500.00
Contracts (not already counted)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee Development/Training	\$1,200.00	\$0.00	\$1,200.00	\$1,000.00	\$2,200.00
Other*		\$0.00	\$0.00	\$0.00	\$0.00
<i><Include a written description of all "other" costs.></i>					
TOTAL OPERATING EXPENDITURES	\$33,900.00	\$0.00	\$33,900.00	\$5,500.00	\$39,400.00
EQUIPMENT/CAPITAL OUTLAY COSTS					
Computers	\$2,000.00	\$0.00	\$2,000.00	\$1,000.00	\$3,000.00
Printers	\$500.00	\$0.00	\$500.00	\$0.00	\$0.00
Projectors		\$0.00	\$0.00	\$0.00	\$0.00
Furniture	\$500.00	\$0.00	\$500.00	\$250.00	\$0.00
Software		\$0.00	\$0.00	\$0.00	\$0.00
Other	\$7,800.00	\$0.00	\$7,800.00	\$0.00	\$0.00

Shoshone-Bannock Tribes Four Directions Treatment Center					
TOTAL CAPITAL OUTLAY	\$10,800.00	\$0.00	\$10,800.00	\$1,250.00	\$3,000.00
TOTAL MILLENNIUM FUND BUDGET REQUEST	\$161,400.00	\$0.00	\$161,400.00	\$21,750.00	\$174,100.00

TRANSFERS TO OTHER ORGANIZATIONS/AGENCIES	NA				
--	----	--	--	--	--

Organization Name _____
 Amount _____
 Purpose NA

SUBCONTRACTING/SUBGRANTING INFORMATION	NA				
---	----	--	--	--	--

Organization Name _____
 Amount _____
 Purpose NA



Presentation

Four Directions Treatment Center Peer Recovery Support Services Program



Recovery Coach Academy – January 2016



Recovery Coach Academy – August 2016

The Four Directions Treatment Center took the initiative to create inspiration, vision and to encourage local Tribal community members to become peer recovery coach mentors, positive leaders and to have the opportunity to give back to the community by helping others through peer recovery support services. Recovery lasts a lifetime.

Presenters: Donna Honena, Ranelda Stone, George Moore and Eleena Eldridge

“Celebrating Life, Recovery and Native Wellness”



SHOSHONE-BANNOCK TRIBES

Tribal Health and Human Services Department



Prevention and Recovery Support



“Community Walk Against Meth” and “Advocacy for Recovery”



“Red Road Tournament and Youth Education and Prevention”



Advocacy: “Positive motivator to help people find resources to be successful”

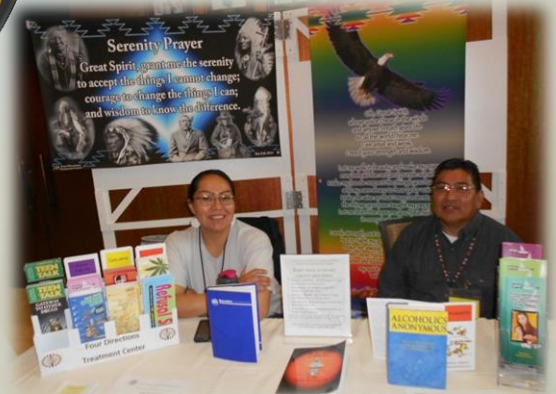


Prevention and Recovery Support

Red Ribbon Week – Drug Prevention
School Presentation in collaboration
with local law enforcement



Community education and
presentations to local
schools and agencies



Ethical Responsibility: "Promoting Healthy and Honest Personal Boundaries"



SHOSHONE-BANNOCK TRIBES

Community Prevention and Recovery Support - Native Voices in Recovery



Tribal Recovery Coaches

**Community Drug Prevention
Presentations and Recovery Stories
Reducing Stigma and Labels**



Tribal Recovery Coaches



“Community Elder Drug Prevention”



Education and Mentoring: “Sharing the words of experience, Strength and Hope”



SHOSHONE-BANNOCK TRIBES

Cultural and Spiritual Recovery

Community Ceremonial,
Spiritual and Cultural Events



“Culture is Prevention”

“Smudge me, don’t judge me”

Recovery, Wellness and Support: “Living within the circle of positive healing, service, change and support for our future generations”

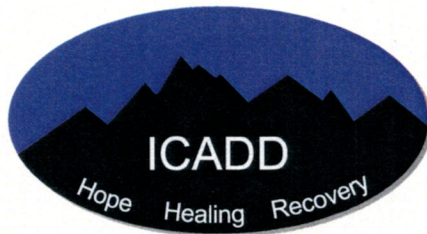


SHOSHONE-BANNOCK TRIBES



**This Page
Intentionally
Left Blank**

PO Box 1311
Meridian, ID 83680



Ph: 208-466-2519
Fax: 208-466-7693
www.attendicadd.com

October 14, 2016

RE: 2018 Millennium Fund Grant Application

Dear Joint Millennium Fund Committee Members;

The Foundation for the Idaho Conference on Alcohol and Drug Dependency, Inc. (ICADD) is a private not-for-profit organization dedicated to providing educational and training opportunities regarding evidence-based approaches to the prevention, treatment and recovery support services for substance use disorders. Since 1984 ICADD has produced an annual conference held in Boise. This conference is attended by providers, volunteer community coalition members and state agency staff who work with those who receive state-funded substance use disorder (SUD) services.

As part of the community of substance abuse specialists, Recovery Coaches are individuals who have personally been through substance abuse treatment and have demonstrated sustained recovery. These coaches do not provide clinical services; rather serve more as a mentor or peer in establishing a recovery plan, providing personal guidance, and identifying resources for treatment, harm reduction, and family/group support. They utilize their knowledge, expertise, and personal experiences to support successful change in individuals that are seeking recovery from substance abuse. Recovery Coaching is especially important in the rural communities of Idaho that lack a wide range of treatment and service options for recovering individuals.

Many Recovery Coaches are in the process of changing their own lives and may lack the financial ability to attend quality continuing education courses. In areas where substance abuse is abundant, lack of properly prepared Recovery Coaches will be detrimental not only to individuals struggling to gain recovery, but to the communities and families that suffer with them.

We respectfully are submitting a request for \$58,000 in Millennial Funds to be utilized to provide 50 scholarships to current and potential Recovery Coaches in Idaho to attend ICADD. This educational opportunity will immediately provide significant benefits to communities, families and individuals across Idaho. We propose the majority of these scholarships be granted to individuals that are serving in rural areas of the state, with the balance going to recipients in more populated areas. Each recipient would receive funds to cover the cost of travel, lodging, food, and conference registration fees.

We believe that this investment in Recovery Coaching will return immeasurable benefits to individuals struggling to obtain and maintain sobriety. Thank you for your consideration.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Chris Daniel', is written over a faint, large watermark that says 'MILLIENNIUM FUND'.

Chris Daniel
Executive Director
The Foundation for the Idaho
Conference on Alcohol and
Drug Dependency, Inc.



Millennium Fund Grant Proposal

Prevention/Cessation/Treatment

For the Period July 1, 2017 through June 30, 2018

The Idaho Legislature appropriates funding from the Idaho Millennium Fund to eligible applicants who provide services that help individuals to never start, to quit, or to receive treatment for, tobacco or substance use. This process begins with a submitted application to the Joint Legislative Millennium Fund Committee. Applicants that are awarded a Millennium Fund Grant must then submit an annual report detailing the project, and any outcomes and expenses. Please contact Jared Tatro, Legislative Services Office, with any questions at (208) 334-4740 or email jtatro@lso.idaho.gov.

Current and Potential Recovery Coach Training Scholarships

I. Grant Applicant

Full Legal Organization Name

The Foundation for the Idaho Conference on Alcohol and Drug Dependence, Inc.

Address
City
State
Zip Code
Website

P.O. Box 1548
Meridian
ID
83680
<http://www.attendicadd.com/>

Primary Grant Applicant Contact Person

Name
Title
Phone
Email Address

Chris Daniel
ICADD Foundation, Executive Director
208.466.2519
cdaniel@attendicadd.com

Alternate Grant Applicant Contact Person

Name
Title
Phone
Email Address

Amy Jeppesen
ICADD Foundation Chair
208.376.7083
Amyj@recovery4lifeidaho.com

Anticipated Presenter

Name
Title
Phone
Email Address

Amy Jeppesen
ICADD Foundation Chair
208.376.7083
Amyj@recovery4lifeidaho.com

II. Grant Proposal Summary

(Indicate Yes Where Applicable)

Select all Applicable Criteria:

1. Tobacco Cessation or Prevention	
2. Vaping/E-Cigarette Cessation or Prevention	
3. Substance Abuse Cessation or Prevention	Yes
4. Tobacco or Substance Abuse Treatment	Yes

Purpose of Grant:

The purpose of this grant is to provide quality training and education for current and potential Recovery Coaches in Idaho. Recovery Coaches are individuals who have personally been through substance abuse treatment and have demonstrated sustained recovery. These coaches do not provide clinical services; rather serve more as a mentor or peer in establishing a recovery plan, providing personal guidance, and identifying resources for treatment, harm reduction, and family/group support. They utilize their knowledge, expertise, and personal experiences to support successful change in individuals that are seeking recovery from substance abuse. Recovery Coaching is especially important in the rural communities of Idaho that lack a wide range of treatment and service options for recovering individuals.

To become a certified Recovery Coach in Idaho, you must complete 46 hours of specific education/training related to the domains of Advocacy, Mentoring/Education, Ethical Responsibility, and Recovery Wellness/Support, complete 500 hours of internship and 25 hours of supervision to become certified. To maintain certification a Recovery Coach must complete 96 hours of supervision and 20 hours of continuing education/training, six of which are in the domain of Ethical Responsibility per year. Recovery coaches are certified by the Idaho Board of Alcohol and Drug Counselor Certification Inc. (IBADCC).

Since 1984, Idaho Conference on Alcohol and Drug Dependency, Inc. (ICADD) has produced an annual conference held in Boise. This conference is attended by providers, volunteer community coalition members and state agency staff who work with those who receive state-funded substance use disorder (SUD) services. We propose offering 50 scholarships to current and potential Recovery Coaches to attend the Recovery Coach track at the May 2018 event. In selecting scholarship recipients, preference will be given to candidates in rural areas with a goal of 30 scholarship recipients in rural communities and 20 recipients in Idaho's more populated areas. These scholarships will cover travel, lodging, food and conference registration costs.

III. Proposed Budget

Grant Amount Requested: \$58,000

FY 2018 Millennium Fund Committee Grant Budget							
Millennium Fund Grant Management (Expenditure breakdown)			Number of people funded		Percent allocations		
Travel	\$ 270.00		50	\$13,500.00	23%		
Lodging (up to 4 days at 95 per day)	\$ 380.00		50	\$19,000.00	33%		
Meals	\$ 120.00		50	\$ 6,000.00	10%		
Conference registration	\$ 310.00		50	\$15,500.00	27%		
Administration	\$ 80.00		50	\$ 4,000.00	7%		
				\$58,000.00			
Reimbursement criteria		Region 1	Region 2	Region 3	Region 4	Region 5	Region 6 Region 7
Scholarship covers travel (up to \$270), lodging (up to \$95 per day), and conference registration.		Yes	Yes				
Conference registration only				Yes	Yes		
Beyond 30 miles from BSU - scholarship covers travel (up to \$100), lodging (up to \$95 per day), meals (up to 4 days at \$30 per day) and conference registration.				Yes	Yes		
Scholarship covers travel (up to \$175), lodging (up to \$95 per day), meals (up to 4 days at \$30 per day) and conference registration.						Yes	
Scholarship covers travel (up to \$225), lodging (up to \$95 per day), meals (up to 4 days at \$30 per day) and conference registration.							Yes
Scholarship covers travel (up to \$250), lodging (up to \$95 per day), meals (up to 4 days at \$30 per day) and conference registration.							Yes
Funding return note: Funds which are not utilized for items 1-4 shall be returned to the MF Grant Committee							

IV. Statement of Need

Currently in our state there is a workforce shortage in the field of substance and use disorder treatment. This is especially true in rural areas of Idaho. By providing scholarships for Recovery Coaches we will increase access to training for these Recovery Coaches in rural communities. This will also increase the standard of care and facilitate certification for Recovery Coaches from these areas.

As many Recovery Coaches are in the process of changing their own lives, they may lack the financial ability to attend quality continuing education courses. In our communities where substance abuse is abundant, lack of properly prepared Recovery Coaches will be detrimental not only to individuals struggling to gain recovery, but to the communities and families that suffer with them.

By providing scholarships covering registration cost and travel expenses to 50 current Recovery Coaches, with priority given to rural communities, ICADD will impact the efficacy of Recovery Coaches through quality education. In turn, these trained individuals will bring their new knowledge and training back to their communities, increasing the return on investment even more. The anticipated improved outcomes will include many positive social and community benefits - improved community safety and livability, reunited families, reduced welfare and child welfare costs, and reduced crime and victimization.

V. Project Design

Idaho has achieved considerable success in extending treatment for substance abuse disorders, performed by well-trained, educated, and skilled providers throughout Idaho. While the need still outstrips demand, there are currently 500 people that have completed the basic recovery coach training and are working towards certification. Additionally we project that another 150 individuals will be working towards certification by May, 2018.

To maintain certification a trained Recovery Coach must complete 20 hours of continuing education/training. Six of those 20 hours must be in Ethical Responsibilities. The planned ICADD Recovery Coach track will provide needed continuing education and training hours as well as meet the ethics education requirement. The track will help to prepare individuals for successfully passing the certification exam.

Many Recovery Coaches currently trained or being trained lack the resources to attend ICADD and gain the required continuing education hours. It is imperative that we do not lose these valuable contributors due to the fact that many may not have the finances to obtain and maintain Recovery Coach Certification. Without this valuable treatment resource the recovery community could be at risk.

Driving the push to certification is the fact that beginning July 1, 2017, Recovery Coaches will be required to be certified by the IBADCC in order to be reimbursed for their services.

ICADD utilized Millennium Grant Funds to provide 20 scholarships to current and potential Recovery Coaches to our conference in May, 2016. These scholarships covered travel, lodging, food and conference registration costs. Since the event was held fairly recently, we are unable to provide a complete picture of the impact of these scholarships. However, attached you will find four accounts of how this training helped scholarship recipients. We are confident that we will see additional returns on this investment as Recovery Coaches complete the requirements for certification. We anticipate many of these same recipients will benefit from the 2018 funding as they will need to acquire CEUs to remain certified.

VI. Evaluation Plan

Evaluation of the project will include three parts:

Feedback Survey

A survey of recovery coach continuing education participants at ICADD will be conducted as part of the overall ICADD evaluation and conference feedback. This evaluation will seek specific feedback on the perceived benefits of the Recovery Coach Track continuing education and of the Recovery Coach Certification Exam Preparation

sessions. *Evaluation Question: Did participation in the ICADD Recovery Coach Track provide useful information for your practice and did it assist you in preparing for the Certification Examination?*

Successful completion of certification

ICADD scholarship participants will be followed-up with the counselor certification board to determine if they successfully completed their certification in Calendar Year 2018. *Evaluation Question: How many Recovery Coaches who completed the ICADD Recovery Coach Track gained certification as a Recovery Coach in calendar year 2018?*

Provider organization feedback survey

A survey of provider organizations employing individuals who participated in the continuing education offered at ICADD will be conducted to determine employer perceptions of benefit of the continuing education provided on Recovery Coach Practice. *Evaluation Question: Did participation in the Recovery Coach continuing education provided at ICADD show improvement in practice as a Recovery Coach in your organization?*

Norma Jaeger Ph.D. (ABD), who is a member of the Board of Directors of the ICADD Foundation and long-time administrator and evaluator of public substance abuse and mental health programs, will oversee this evaluation and compile the evaluation report. The report will be available to the Board of Directors of ICADD and to the Millennium Fund Committee, to enable an assessment of the effectiveness of the continuing education provided to Recovery Coaches.

Stakeholder Involvement: Stakeholders including current Recovery Coaches, Recovery Coach Trainers and organization directors who employ Recovery Coaches will be involved in planning the Recovery Coach Continuing Education Track at ICADD through the broad-based ICADD Planning Committee. They will also assist in evaluating responses to the evaluation and in interpreting feedback results for the evaluation.

VII. Evidence-Based Research

Promising research has demonstrated the benefits attained from peer-to-peer services such as that provided by Recovery Coaches. Such peer-to-peer services have been recognized by the Centers for Medicare and Medicaid Services as a reimbursable, evidence-based practice. Other evaluations of review findings between 2009 and 2016 are summarized, as follows: (White, 2016).

“There are independent studies of particular peer-based recovery support services that have been linked to enhanced engagement, access, treatment completion, and improved long-term recovery. Positive studies of key service elements provided by recovery coaches suggest that P-BRSS [peer-based recovery support services] is a potentially promising practice as an adjunct to addiction treatment. The determination of the extent to which P-BRSS can elevate long-term recovery outcomes will require additional studies of such services.” (White, 2009)

“Studies [of peer recovery support for individuals with substance use disorders] demonstrate improved relationships with providers and social supports, increased satisfaction with the treatment experience overall, reduced rates of relapse, and increased retention in treatment. It is clear that peer support services can provide a valuable approach to guiding consumers as they strive to achieve and maintain recovery.” (Rief, et al, 2014)

“...the general conclusion from the body of evidence is that participation of peers in recovery support interventions appears to have a salutary effect on participants and makes a positive contribution to substance use outcomes. The individuals studied generally had complex needs in addition to substance use issues and benefitted from the support of peers across diverse types of interventions.” (Bassuk, et al, 2016)

In addition to national studies of effectiveness, the Department of Health and Welfare recently conducted a small pilot program having Recovery Coaches contact clients within 48 hours after making a treatment appointment. This pilot ran from April 2016-August 2016. These clients were at high risk for not following through with treatment, for committing new crimes, and for dropping out of treatment. Clients met with a Recovery Coach prior to going their first provider appointment. 76.9% of these clients entered and continued in treatment. This represents a major success rate compared to the typical experience in which a large share (80% or more) would fail to keep the initial assessment appointment or would drop out of treatment.

Peer Recovery Support for Individuals with Substance Use Disorders: Assessing the Evidence

Authors: Reif S¹, Braude L¹, Lyman DR¹, Dougherty RH¹, Daniels AS¹, Ghose SS¹, Salim O¹, Delphin-Rittmon ME¹.

Link: <https://www.ncbi.nlm.nih.gov/pubmed/24838535>

Peer-based Addiction Recovery Support: History, Theory, Practice, and Scientific Evaluation

Author: William L. White, MA

Link: http://www.naadac.org/assets/1959/whitew2009_peer-based_addiction_recovery_support.pdf.

Peer Recovery Coaching: Recent Evidence Reviews. William L. White, Blog and New Postings, 6/10/2016

Author: William L. White, MA. Retrieved October 10, 2016

from <https://www.williamwhitepapers.com/blog/2016/06/peer-recovery-coaching-recent-evidence-reviews.html>.

VIII. Grant Management

Funding provided through this grant will be administered by The Foundation for the Idaho Conference on Alcohol and Drug Dependency, Inc. Current and potential Recovery Coaches throughout the state will be invited to apply for scholarships to complete the Recovery Coach track for the annual conference which will be held for four days in Boise in May 2018. The scholarship will cover the necessary cost of conference registration and lodging, meals and a stipend for travel expense, where required. Applicants for scholarships will be asked to submit their applications through their Regional Behavioral Health Boards (RBHB). It will be the RBHBs responsibility to ensure those applicants that are being forwarded to the ICADD Foundation Board meet a substance use disorder service need in their regions. The ICADD Foundation Board will make the final decisions regarding who receive scholarships to attend the conference.

IX. Sustainability

As the field of Recovery Coaching grows, and as coaches become certified and qualified to be reimbursed for their services, they will increasingly be able to pay for continuing education activities. As they become a more and more valued part of treatment provider organizations, their employers will also be in a position to subsidize their continuing education in order to maintain certification. This will enable the Recovery Coach track at ICADD to continue to offer high-quality continuing education and especially to continue to provide the needed ethics training. While continued support from the Millennium Fund may be needed and most gratefully received in the short term, the long-term outlook for sustainability of continuing education for Recovery Coaches is very positive.

ICADD Foundation					
PERSONNEL COSTS	Millennium Fund Grant Application				Organization Total
	Millennium Fund	Other Fund Sources	Project Total	In-Kind Contributions	
Organization Hired Staff					
Number of staff	1.0		1.0		1.0
Est. Hours to be worked	150.0		150.0		150.0
Salaries	\$4,000.00		\$4,000.00		\$4,000.00
Benefits			\$0.00		\$0.00
Contract Hired Staff					
Number of staff			0.0		0.0
Est. Hours to be worked			0.0		0.0
Salaries			\$0.00		\$0.00
Benefits			\$0.00		\$0.00
TOTAL PERSONNEL STAFF	1.0	0.0	1.0	0.0	1.0
TOTAL PERSONNEL HOURS	150.0	0.0	150.0	0.0	150.0
TOTAL PERSONNEL COSTS	\$4,000.00	\$0.00	\$4,000.00	\$0.00	\$4,000.00
OPERATING EXPENDITURES	Millennium Fund	Other Fund Sources	Project Total	In-Kind Contributions	Organization Total
Program Evaluation (not already counted)			\$0.00		\$0.00
Travel	\$38,500.00		\$38,500.00		\$38,500.00
Marketing			\$0.00		\$0.00
Advertising			\$0.00		\$0.00
Insurance			\$0.00		\$0.00
Rent/Bldg. Lease			\$0.00		\$0.00
Utilities			\$0.00		\$0.00
Organization Overhead			\$0.00		\$0.00
Lobbying Activities/ Organization Awareness			\$0.00		\$0.00
Materials & Supplies			\$0.00		\$0.00
Contracts (not already counted)			\$0.00		\$0.00
Employee Development/Training			\$0.00		\$0.00
Other* Conference fees	\$15,500.00		\$15,500.00		\$15,500.00
<i><Include a written description of all "other" costs.></i>					
TOTAL OPERATING EXPENDITURES	\$54,000.00	\$0.00	\$54,000.00	\$0.00	\$54,000.00
EQUIPMENT/CAPITAL OUTLAY COSTS	Millennium Fund	Other Fund Sources	Project Total	In-Kind Contributions	Organization Total
Computers			\$0.00		\$0.00
Printers			\$0.00		\$0.00
Projectors			\$0.00		\$0.00
Furniture			\$0.00		\$0.00
Software			\$0.00		\$0.00

ICADD Foundation					
Other			\$0.00		\$0.00
TOTAL CAPITAL OUTLAY	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL MILLENNIUM FUND BUDGET REQUEST	\$58,000.00	\$0.00	\$58,000.00	\$0.00	\$58,000.00

TRANSFERS TO OTHER ORGANIZATIONS/AGENCIES	NONE
--	------

Organization Name _____

Amount _____

Purpose <Replace with own text, briefly explain why there will be a sub grant and how it will meet the mission of prevention/cessation/treatment>

SUBCONTRACTING/SUBGRANTING INFORMATION	NONE
---	------

Organization Name _____

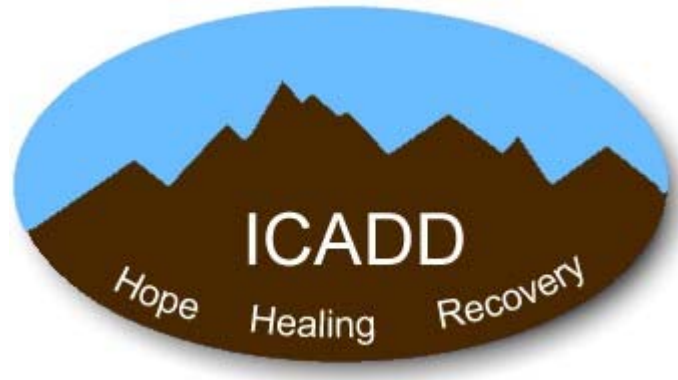
Amount _____

Purpose <Replace with own text, briefly explain why there will be a sub grant and how it will meet the mission of prevention/cessation/treatment>

A photograph of the Idaho State Capitol building, featuring a prominent dome and classical architectural elements like columns and windows. The image is faded and serves as a background for the title.

Presentation

Millennium Fund Presentation
Friday, December 9th



Idaho Conference on Alcohol and Drug Dependency

Purpose of Grant

- The purpose of this grant is to provide quality training and education for current and potential Recovery Coaches in Idaho.
- Recovery Coaches are individuals who have personally been through substance abuse treatment and have demonstrated sustained recovery.
- Coaches do not provide clinical services; rather serve more as a mentor or peer in establishing a recovery plan, providing personal guidance, and identifying resources for treatment, harm reduction, and family/group support.

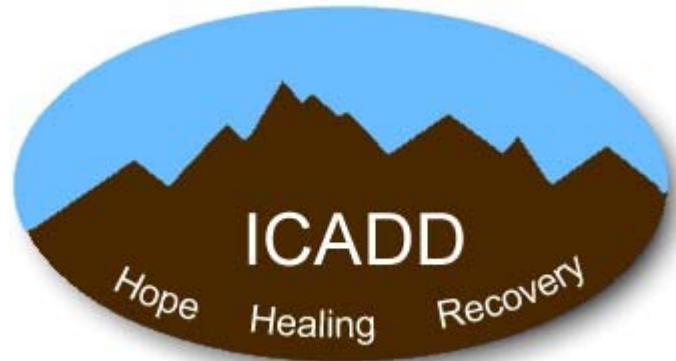
Funding

- ICADD will offer stipends to include cost of the conference, travel, and lodging for 50 Recovery Coaches, with a focus on rural Idaho participants who could not afford to attend the training.

Evidence Based Background

- Promising research has demonstrated the benefits attained from peer-to-peer services such as that provided by Recovery Coaches. Such peer-to-peer services have been recognized by the Centers for Medicare and Medicaid Services as a reimbursable, evidence-based practice.
- Independent studies of particular peer-based recovery support services that have been linked to enhanced engagement, access, treatment completion, and improved long-term recovery.

Thank you Joint Millennium Fund Committee members
for the opportunity to present this grant proposal.



Idaho Conference on Alcohol and Drug Dependency



**This Page
Intentionally
Left Blank**

Benchmark Research & Safety, Inc.

October 14, 2016

Attn: Jared Tatro
Legislative Services
Millennium Fund Grant
State of Idaho

Re: Millennium Grant Application
Proposed Project Title: Addictions Electronic Clearinghouse

Mr. Tatro:


On behalf of Benchmark Research & Safety, Inc. please accept this grant proposal entitled “Addictions Electronic Clearinghouse” for consideration for the SFY 2018 Millennium Fund Grant.

We are requesting funds to establish an electronic clearinghouse for information regarding addictions of all kinds, but primarily those involving ingestible substances. The clearinghouse will involve multiple platforms, and access will be possible with computers or mobile devices.

There are many sources of information on addictions, but they are not readily available through a single starting place. Our goal is to have key pieces of information available to anyone who wants to access it, and to make it possible to access it quickly. We believe our most important audiences will be educators, law enforcement, civic leaders, attorneys, healthcare providers, and political leaders. As importantly, we have learned much in our current work (some of which has been supported by Millennium funds) that families, businesses, friendship networks and even potential substance users often wish look for information to learn about harm (medical and legal) and make decisions about usage and intervention. Our tool will be designed to show current usage patterns, “hot spots” of illegal activity, current understandings about health and criminal risk, research on best practices in treatment and management, the legal landscape (laws, changes in laws, penalties), and sources of help (treatment facilities, community support groups).

If you have any questions or would like to discuss any matter related to the proposal submitted, please do not hesitate to contact Curt Braun by phone at 208-310-9564 or via email at cbraun@benchmarkrs.com.

Cordially,



Jill Maldonado, MS
Chief Operating Officer



Millennium Fund Grant Proposal

Prevention/Cessation/Treatment

For the Period July 1, 2017 through June 30, 2018

The Idaho Legislature appropriates funding from the Idaho Millennium Fund to eligible applicants who provide services that help individuals to never start, to quit, or to receive treatment for, tobacco or substance use. This process begins with a submitted application to the Joint Legislative Millennium Fund Committee. Applicants that are awarded a Millennium Fund Grant must then submit an annual report detailing the project, and any outcomes and expenses. Please contact Jared Tatro, Legislative Services Office, with any questions at (208) 334-4740 or email jtatro@lso.idaho.gov.

<Addictions Electronic Clearinghouse>

I. Grant Applicant

Full Legal Organization Name

Address

City

State

Zip Code

Website

Benchmark Research and Safety

1150 Alturas Drive, Suite 108

Moscow

Idaho

83843

www.benchmarkrs.net**Primary Grant Applicant Contact Person**

Name

Title

Phone

Email Address

Richard Reardon

Consulting Psychologist

208-446-9775

rreardon@uidaho.edu**Alternate Grant Applicant Contact Person**

Name

Title

Phone

Email Address

Steven Meier

Consulting Psychologist

same

smeier@uidaho.edu**Anticipated Presenter**

Name

Title

Phone

Email Address

Richard Reardon

same as above

same as above

rreardon@uidaho.edu

II. Grant Proposal Summary

(Indicate Yes Where Applicable)

Select all Applicable Criteria:

1. Tobacco Cessation or Prevention	yes
2. Vaping/E-Cigarette Cessation or Prevention	yes
3. Substance Abuse Cessation or Prevention	yes
4. Tobacco or Substance Abuse Treatment	yes

Purpose of Grant:

This proposal is for a project that is being submitted by Benchmark Research and Safety, with informal assistance of the University of Idaho (expert personnel and space). We are requesting funds to establish an electronic clearinghouse for information regarding addictions of all kinds, but primarily those involving ingestible substances. The clearinghouse will involve multiple platforms, and access will be possible with computers or mobile devices.

There are many sources of information on addictions, but they are not readily available through a single starting place. Our goal is to have key pieces of information available to anyone who wants to access it, and to make it possible to access it quickly. We believe our most important audiences will be educators, law enforcement, civic leaders, attorneys, healthcare providers, and political leaders. As importantly, we have learned much in our current work (some of which has been supported by Millennium funds) that families, businesses, friendship networks and even potential substance users often wish look for information to learn about harm (medical and legal) and make decisions about usage and intervention. Our tool will be designed to show current usage patterns, “hot spots” of illegal activity, current understandings about health and criminal risk, research on best practices in treatment and management, the legal landscape (laws, changes in laws, penalties), and sources of help (treatment facilities, community support groups).

III. Proposed Budget

Personnel (\$157,760.00)

Direct Hire

- Project Manager/Designer (to be decided by search); 2080 hrs. @ \$32.64/hr.; \$67,891.00; will require bachelor’s degree with background in Human Factors or related field, and administrative experience.
- Richard Reardon, Ph.D.; Project Director; 300 hrs. @ \$85.68/hr.; \$25,704.00; Professor of Psychology

Contracted Labor

- Steven Meier, Ph.D., Co-Director and Consultant; 200 hrs. @ \$81/hr.; \$16,200.00; Professor of Psychology and Consultant.
- Daniel Fisher, M.S., ACADC; Content Consultant; 100 hrs. @ \$54/hr.; \$5,400.00; M.S. in Psychology, Advanced Certified Alcohol & Drug Counselor (Idaho).
- D. M. Hiseley, R.N., B.S.N, M.S.; Content Consultant; 100 hrs. @ \$67.50/hr.; \$6,750.00; M.S. in Public Health (Admin), B.S.Nursing, practicing Psychiatric Nurse, licensed in Idaho and Washington.
- Student research (may be split among 1-3 individuals) and testing help; 200 hrs. \$15hr.; \$3,000.00; to assist with information gathering and initial site testing.
- System Admin (to be chosen by bid) to provide technical assistance, server and computer systems oversight; 520 hrs. @ \$30/hr.; \$15,600.00;

Operating Expenses (\$49,371.00)

- Propaganda Creative (PC), \$10,000.00. PC will provide site launch expertise, once the site and applications have been tested internally. They will also be able to provide analytics on initial usage patterns and problems.
- Program Evaluation: No cost; included in duties of Manager, with additional site data collected by Propaganda Creative

- Travel: \$4,500.00; 10 trips to Boise from Coeur d'Alene; purpose to meet with major state constituents who may be potential users or content providers; estimate for each trip: airfare: \$200, 1 hotel night: \$90, per diem for 2 days: \$80, car rental for 2 days: \$80; Total per trip: \$450.00
- Marketing: \$6000.00; traditional marketing tactics (newspapers, electronic boards, specialty publications and sites; Propaganda Creative will assist.
- Advertising: No Costs; covered under Marketing.
- Insurance: No Costs; insurance needs covered with other items
- Rent/Bldg. \$5,625.00; The University of Idaho Research Park in Post Falls provides organizations with start-up, -incubation space at \$1.25/sqft.; one large room, 15' X 25';
- Utilities: No costs; included in rent.
- Organization Overhead: \$20,646.00; to cover administrative costs (routine matters of payments to employees, taxes and withholding, etc.; 7.5% to total costs.
- Lobbying Activities/ Organization Awareness: None
- Materials & Supplies: \$2,000.00; basic office supplies (pens, paper, printer supplies, etc.)
- Contracts (not already counted): None
- Employee Development/Training: None
- Other*: \$600.00 A few small-dollar costs associated with web hosting accounts, subscriptions/fees to access data sites,

Capital Expenses (\$14,050.00)

- Computers: \$4000.00; This is a computer-intensive project; Benchmark office staff are already equipped, but the project has special demands; 3 desk or laptops plus a high capacity/high speed server and monitor.
- Printers: \$350.00; shared.
- Projectors: none
- Furniture: \$7200.00; basics for 4 work stations, three to be shared;
- Software: \$2500.00; web and application specialty software purchases and licenses.
- Other: none

Grant Amount Requested (should tie to budget file): \$221,181.00

IV. Statement of Need

The need has been made obvious to us (a) in our addiction education programs, (b) in the advising we do with traditional and nontraditional students, and (c) when we are approached by members of the community for group and community-level guidance. When questions are asked, it is often in the context of family members' struggles with addictive substances, or perhaps the questioners' own struggles. We have been struck by how little the questioners know, and how difficult it is for them to find out information that might steer them away from substances and toward treatment, or might help families or businesses decide on an appropriate intervention.

In addition to these more immediate and compelling scenarios, we have often found that medical personnel, legal personnel, and law enforcement officers, not specifically trained in addictions, know very little about them. Those that do have a good understanding are, more often than not, self-taught.

The information is available, but without a guide to the dozens and dozens of separate medical, research, legal, governmental, and demographic sites out there, they are left feeling overwhelmed. The need for a "one-stop-shop" for this material is clear. A single site location, and a well-built, well-organized site when the searcher gets there, can save time, can offer the possibility of an earlier intervention, could act as a deterrent, and could raise the overall understanding of the scope of our problems. It could be a source of hope.

V. Project Design

The first phase of the project will be to confirm the utility of key elements that will be included in the final site. We have many informants from education, law enforcement, healthcare, and among state officials. That will be our starting point. Several will be identified as test evaluators. We will also seek feedback from the general population. If our project is to have value to potential substance users and those close to them, we must make sure that there is comfort, utility, and appeal for everyday citizens. We will ask them to provide feedback on usability at various stages of development leading to the launch.

Our initial design elements will include a section for applicable law (for Idaho and adjacent state), a section cutting edge research on drug impacts as well as treatment and prevention strategies, a section on available treatment options; a primer on substances, with attention paid to newer substances (like some of the new synthetics), newer ingestion means (e.g., vaping devices), and national and local trends. Other areas or sub areas might be identified by our testers (see Evaluation Plan, below). The site itself will have to be created with a system that automatically replicates itself for portable platforms (pads, phones or other mobile devices). This top layer of information will be rich and plentiful, but also freely available.

The next phase will be to go steps deeper to a level that might appeal only to professionals in the field. The depth would reflect more the more technical aspects of the overall field, and each area would be in the vernacular of that area. “Legalese” would be appropriate in the legal and law enforcement areas, some depth in human biology would be necessary in some of the medical and physiological areas, and so on. This area will probably have to be protected by subscription.

Before the end of the year, with the help of Propaganda Creative and our own staff, we will launch the site. Propaganda Creative’s particular skill is in using online resources to get messages into the community. We should start seeing “hit” data before the end of the year, so we will have reportable results for the legislature.

A final phase would include the development of a research help function. Professionals could request very deep questioning of the research. We would provide a bid for that work and, if accepted, we would recruit and pay the researchers to prepare a report. This final phase would not be implemented until after year one, and is beyond the scope of this proposal (although the work in the proposal makes this phase possible).

How will we evaluate our progress and impact? Some details on that are above and in the next section. Something less obviously measurable is that there should be a buzz about the site, and people should start adopting it as their “first call” when they have a question or an issue to resolve. These buzz responses would be anecdotal of course, but if they are backed by the “hit” data, then we will be confident that we are having an impact and providing the service we intend.

VI. Evaluation Plan

We have local college students that we will use to do initial usability/navigation testing. As we eliminate “bugs” in the system, we will collect a group of respondents from various sectors for whom addictions matter (educators, police, attorneys, medical personnel) as well as a random sample to pick up potential (and perhaps actual) substance abusers. The emphasis will again be on whether the site is usable, informative, and so on. A simple questionnaire will be used, and it will ask basic questions like

“what did you learn” and “would you come back” and “would you send a friend there”. These are fairly typical questions for this kind of assessment. Additionally through Propaganda Creative, we will be able to use the analytical tools available in some system to assess hit rates, time on site, and so on. A subtle measure of our impact after the first year will be the number of agencies and organizations that would like to sponsor the site in subsequent years.

VII. Evidence-Based Research

There is no specific evidence that the tool we are proposing will have the impact we intend. Web content has been shown to be effective, but we are unaware of an attempt such as the one we are proposing. So, instead of research articles, we would like to submit some links to sites that have some of the qualities we are intending to deploy. These sites are narrow compared to what we are proposing, but I believe they capture a look that we would like to *minimally* have. We would like to explore a more extensive use of graphics (e.g., using “hot spots” to identify high usage areas). These sites link to the research in their domains, so once there you will find a strong scholarly presence.

The first site is the Massachusetts Substance Abuse Information and Education Helpline (Weblog, n.d.). It is narrow, and fails to offer quick glance options, but tabs to treatment advice and options. They appear not to vet the agencies in their referral lists, which is worrisome.

The second site is for the Substance Abuse and Mental Health Services Administration (SAMSHA; Weblog, n.d.). This is a governmental site at the federal level. It is well constructed, appealing, but (understandably) very broad. It offers very little that would be actionable at the local/state level.

The third site is PSYBLOG (Weblog, n.d.). This site leans toward interpretation of basic research for broad audiences. That is an element we would like to replicate, but that is not *all* we want on our site (as in PSYBLOG), and its focus is on many other topics besides addictions. This site is very good at directing readers to basic research.

Lastly, this site focuses narrowly on treatment, but has a good look and a serious demeanor: Treatment 4 Addiction.com (Weblog, n.d.).

A look at any of these sites captures the spirit or what we are attempting, but they are offering only a fraction of what we hope to deliver.

VIII. Grant Management

Richard Reardon, PhD, is a former Associate Dean of the College of Letters, Arts, & Social Sciences, and former Chair of the Department of Psychology at the University of Idaho. He is a specialist in organizational and social behavior, and has managed grants and appropriations in the past.

Steven Meier, PhD, is well-known in the state for his many years of work in the service of addictions treatment and prevention. He developed the Addictions training program at the University of Idaho, and has consulted for community, industry, and public organizations for many years.

The task of principles Reardon and Meier will be to ensure that the content generated by the project is faithful to the needs of potential users.

Benchmark Research and Safety, under CEO Curt Braun, has a long record of providing administrative support and fiscal oversight of research and service projects in our state and beyond. They have offices in N. Idaho, S. Idaho, Washington, and elsewhere. Of particular relevance, Benchmark administered several large tobacco sales compliance projects, and several behavioral health programs, for Idaho and other NW states over the last 15 years.

Day to day operations will be handled by a person to-be-determined (our Project Manager). There are several excellent candidates interested in the job, and all have administrative experience and superior technical skills.

Fisher and Hiseley have credentials and direct experience in addictions treatment and education, and will assist with content selection, vetting of sponsors (see sustainability, below), and site testing.

Additional technical help is budgeted to manage the server, computers, and network connections.

IX. Sustainability

The first year of the project will be the most expensive because of startup costs. Subsequent years should require only 60% of first year costs. Our goal is to create a system that is self-sustaining after that first year. We believe this is possible by either, or probably both, of the following means:

First, we plan to develop a subscription fee for deeper access. Our intention is to give as much of the service away as we can. It is, after all, a service. However, some groups, agencies, or educational entities may wish to have access to information at deeper levels. We feel we can keep subscription fees to under \$10 per month. We will also develop a research service. Users that wish even greater depth may send their needs to us and we will offer a bid to help them.

Second, we will seek sponsors from among the treatment and service communities. We will vet those providers to make sure they are ethical and effective. The value to the sponsors is the sponsorship listing, which they may find useful in their own marketing initiatives. Twenty or so sponsors statewide, paying \$250 a month, should provide a second, stable stream of support.

References

Massachusetts Substance Abuse Information and Education Helpline [Weblog]. Retrieved from <http://helpline-online.com> .

SMSHA [Weblog]. Retrieved from <http://www.samhsa.gov> .

PSYBLOG [Weblog]. Retrieved from <http://www.spring.org.uk> .

Treatment 4 Addiction.com [Weblog]. Retrieved from <http://www.treatment4addiction.com/blog/> .



Benchmark Research and Safety

PERSONNEL COSTS	Millennium Fund Grant Application				Organization Total
	Millennium Fund	Other Fund Sources	Project Total	In-Kind Contributions	
Organization Hired Staff					
Number of staff	2.0	0.0	2.0	0.0	2.0
Est. Hours to be worked	2,380.0	0.0	2,380.0	0.0	2,380.0
Salaries	\$93,595.00	\$0.00	\$93,595.00	\$0.00	\$93,595.00
Benefits	\$17,205.00	\$0.00	\$17,205.00	\$0.00	\$17,205.00
Contract Hired Staff					
Number of staff	5.0	0.0	5.0	0.0	\$5.00
Est. Hours to be worked	1,120.0	0.0	1,120.0	0.0	\$1,120.00
Labor Cost	\$46,960.00	\$0.00	\$46,960.00	\$0.00	\$46,960.00
TOTAL PERSONNEL STAFF	7.0	0.0	7.0	0.0	7.0
TOTAL PERSONNEL HOURS	3,500.0	0.0	3,500.0	0.0	3,500.0
TOTAL PERSONNEL COSTS	\$157,760.00	\$0.00	\$157,760.00	\$0.00	\$157,760.00
OPERATING EXPENDITURES	Millennium Fund	Other Fund Sources	Project Total	In-Kind Contributions	Organization Total
Travel	\$4,500.00	\$0.00	\$4,500.00	\$0.00	\$4,500.00
Marketing	\$6,000.00	\$0.00	\$6,000.00	\$0.00	\$6,000.00
Rent/Bldg. Lease	\$5,625.00	\$0.00	\$5,625.00	\$0.00	\$5,625.00
Organization Overhead	\$20,646.00	\$0.00	\$20,646.00	\$0.00	\$20,646.00
Materials & Supplies	\$2,000.00	\$0.00	\$2,000.00	\$0.00	\$2,000.00
Contracts (Prop. Creative, below)	\$10,000.00	\$0.00	\$10,000.00	\$0.00	\$10,000.00
Other*	\$600.00	\$0.00	\$600.00	\$0.00	\$600.00
<i>Domain purchase; access to online research sites and materials that are protected;</i>					
TOTAL OPERATING EXPENDITURES	\$49,371.00	\$0.00	\$49,371.00	\$0.00	\$49,371.00
EQUIPMENT/CAPITAL OUTLAY COSTS	Millennium Fund	Other Fund Sources	Project Total	In-Kind Contributions	Organization Total
Computers	\$4,000.00	\$0.00	\$4,000.00	\$0.00	\$4,000.00
Printers	\$350.00	\$0.00	\$350.00	\$0.00	\$350.00
Furniture	\$7,200.00	\$0.00	\$7,200.00	\$0.00	\$7,200.00
Software	\$2,500.00	\$0.00	\$2,500.00	\$0.00	\$2,500.00
Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL CAPITAL OUTLAY	\$14,050.00	\$0.00	\$14,050.00	\$0.00	\$14,050.00
TOTAL MILLENNIUM FUND BUDGET REQUEST	\$221,181.00	\$0.00	\$221,181.00	\$0.00	\$221,181.00

TRANSFERS TO OTHER ORGANIZATIONS/AGENCIES

Organization Name _____ none

Amount \$0 _____

Purpose _____

Benchmark Research and Safety

SUBCONTRACTING/SUBGRANTING INFORMATION

Organization Name Propaganda Creative

Amount \$10,000

Purpose Propaganda Creative, a private N. Idaho/E. Washington company, specializes in online marketing. They will assist with the launching of the system, and can help with metrics to assess impact. Propaganda Creative has successfully participated in a previous Millennium Fund project.



Presentation

Addiction E-Clearinghouse

(Addictions War Room?)

The Problem: Information is available but hard to “must” (too narrow, too widely dispersed, too local)

Answer: “one-stop shopping” online location for all information that a *citizen of Idaho* might seek.

Principals:

Richard Beaulieu, Ph.D.

Steven Meier, Ph.D.

Benchmark Research & Safety (<http://benchmarkrs.net>)

Human Systems specialists: Human Factors, Usability; Program Administration

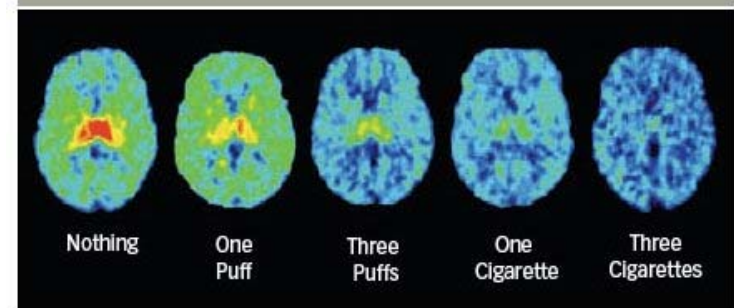
Benchmark
Research & Safety, Inc.

Who would we serve? (*What do they seek?*)

- Users, abusers, and their families and friends (*treatment info.; the law*)
- Lawmakers (*the law, incidence rates; hot spots; research*)
- Legal community
 - lawyers, judges (*the law; treatment info.; incidence rates*)
 - law enforcement: police, prosecutors (*the law; hot spots; incidence rates*)
- Healthcare community
 - physicians, counselors, other providers (*treatment info.; the law; research*)
 - public health units: the state & each county (*incidence rates; treatment info.; research; hot spots*)
- News Media (*incidence rates; hot spots; the law; research*)
- Researchers and Educators (*research, treatment info.; incidence rates; the law*)
- Private and governmental organizations (employers) (*treatment info., the law, research*)



SMOKING SATURATES RECEPTORS As nicotine from a cigarette attaches to the $\alpha 4\beta 2^*$ -nACh nicotinic receptors in the brain, it displaces a radiolabeled tracer (red and yellow indicate high levels of the tracer, green indicates intermediate levels, and blue indicates low levels). The nicotine from three puffs displaced 75 percent of the tracer from study participants' receptors, and the nicotine from three cigarettes, nearly all.



Sponsors

Welcome to Benchmark's Portal!

Where would you like to go?

What?

Who?



Tobacco/nicotine

Users, smokers, ...

THC/marijuana

Treatment

alcohol



Lawmakers; gov't officials

opiates

Law enforcement

synthetics



News media

methamphetamines



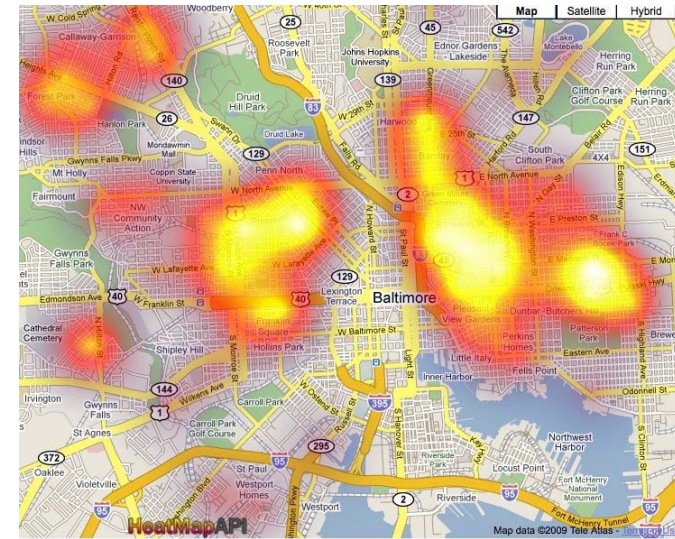
Legal services

Researchers, educators, students

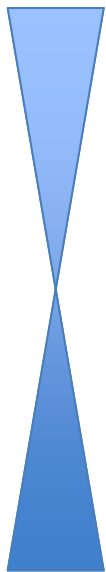
Employers

The site should:

- Stand alone, but also be fed by high traffic gateway apps and sites (Facebook, Twitter, Instagram, etc.).
- Be simple to navigate, with clutter kept to a minimum; no ads.
- Offer material within the site that is free; fees may be charged for contracted services or focus.
- Be available in standard format for desktops and laptops, but also suitable for mobile devices.
- Take advantage of the ability of the WWW to be visually interesting as well as informative; to give both quick glances as wells as depth.



Timeline:



July 1 – Aug 31: Set up spaces, hire administrative and technical help; establish online account, reserve domains; purchase licenses.

Sep 1 – Oct 30: Site construction, information collection.

Nov 1 – Dec 31: gather site testers from our target domains (users, law enforcement, educators, etc.).

Jan 1 – Feb 29: Construct feeds from satellite apps; begin site testing.

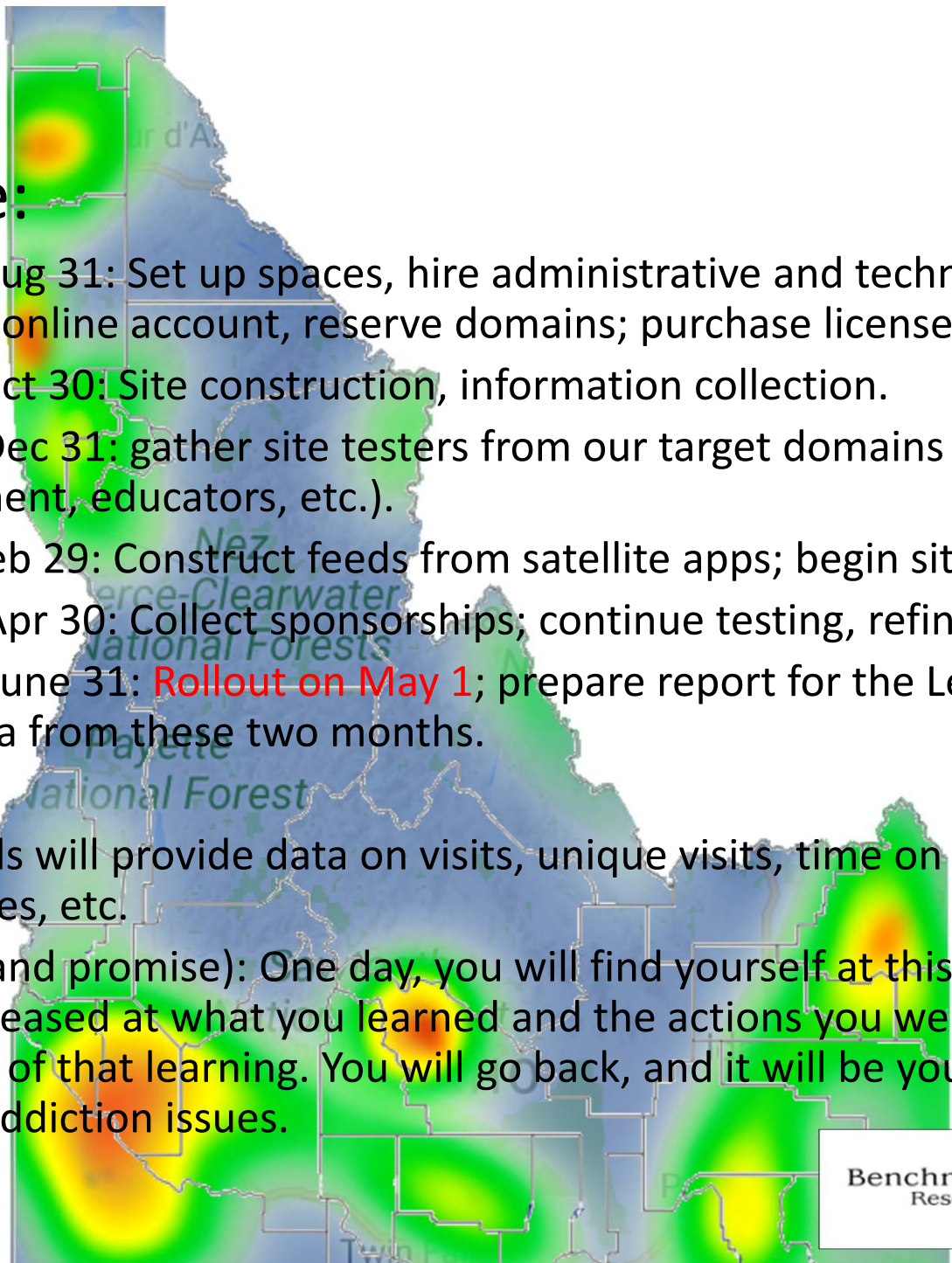
Mar 1 – Apr 30: Collect sponsorships; continue testing, refining.

May 1 – June 31: **Rollout on May 1**; prepare report for the Legislature using data from these two months.

Data:

Analytics tools will provide data on visits, unique visits, time on site, page views, bounces, etc.

Conclusion (and promise): One day, you will find yourself at this site, and you will be pleased at what you learned and the actions you were able to take because of that learning. You will go back, and it will be your “go to” location for addiction issues.





**This Page
Intentionally
Left Blank**