

NAWA Strategic Parameters Plan Fiscal Year 2004-2005



A consortium of non-profit agencies,
serving Kansas and the Surrounding
Region since 19 .



Values

- Maintain an environment that is safe, professional and is fair for clients and staff
- Recognize each individual's values, choices and beliefs
- Empower clients and staff to feel respected and valued
- Support the need for personal growth
- Maintain a unified vision that promotes cohesive teamwork



Vision

- Through a caring, supportive environment and a balanced team effort, NAWA offers the opportunity for individual, family and community wellness by fostering hope, encouraging change and nurturing partnerships



Mission

- Serving individuals, families and communities of Kansas and the surrounding region by providing comprehensive alcohol and drug treatment services, utilizing an individualized, research-based clinical stabilization service delivery system.



Strengths...

- A well respected organization with a positive image in the community.
- An organization staffed by committed, experienced, and proactive personnel.
- Recognized in the region as a mission based professional partner known for proactive involvement in building access to a full continuum service delivery system.



Weaknesses...

- Need to continue improving regional perception of who we are as an organization.
- Need to continue the mission of building access to a full service continuum.
- Need to strengthen Women and Family services.
- Need to strengthen commitment from board to actively guide the organization in such a manner that we are recognized within the community and state as a leader in the field of alcohol and drug treatment.



Opportunities...

- We need to operate a well defined service system that is based on consensus and involvement of all community stakeholders.
- We need to create organizational strategic parameters that embrace program service initiatives.
- These initiatives need to be broken down into tangible short and long-range goals and objectives.



Threats...

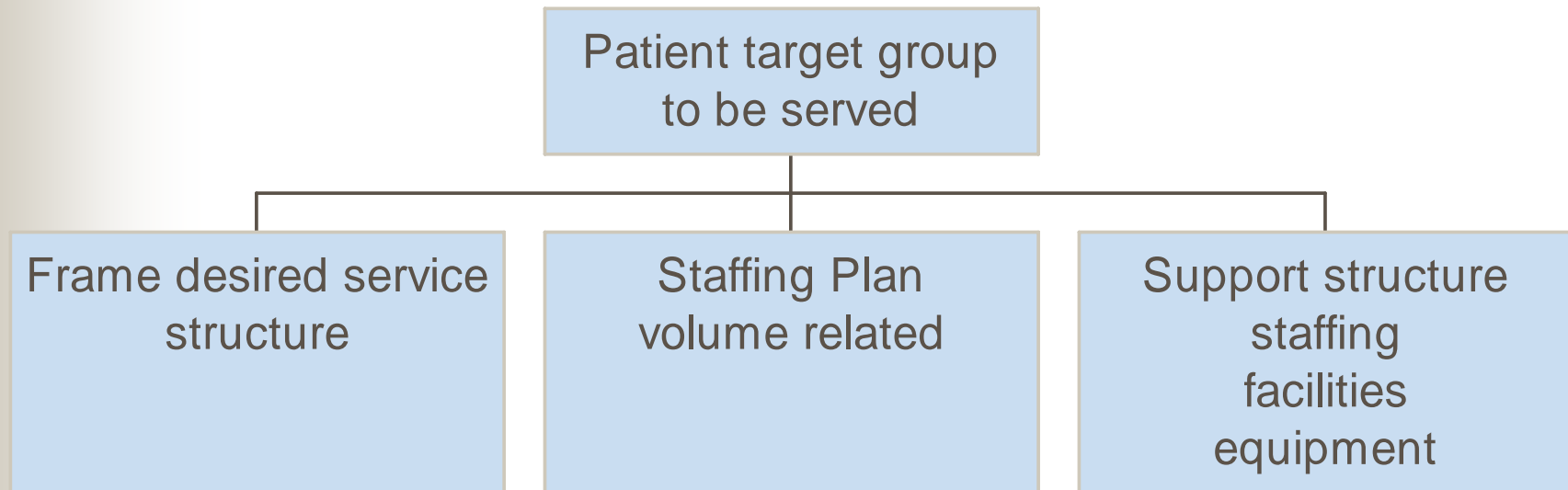
- Scope of treatment services change?
- Primary funding structure changes?
- State creates a competitive treatment system?
- Organization begins to resist change?
- We expand too rapidly and in unclear direction?
- We are not able to keep dedicated CD treatment from being supplanted by MH, CJ, or managed care models?



Primary Organizational Goals

- Assure timely access to service
- Promote efficiency
- Ensure staff competency
- Document effectiveness
- Ensure satisfaction
- Seek consumer input

Basic organizational development method





Desired Outcomes

■ Standards are met

- A diverse, accessible service delivery system.
- Standardized service delivery protocols
- A diversified funding structure
- Client focused
- Measured outcomes

■ Funding justification

- All contract requirements are met
- Critical set asides are met
- Documented evidence that service increments match billing.
- Reporting timelines are met.



Program Service Initiatives

- Evaluation/Intake
- Men's residential services
- Women's Residential services
- Outpatient Drug Court treatment services
- Quality Practice Monitoring
- Success outcome research
- Grant Writing Efforts



Evaluation/Intake services

- Standardized ASI based assessment
- ASAM guided placement
- Access to a full service continuum that includes medical and psychiatric stabilization, IOP, relapse prevention
- Individualized treatment plan
- Success outcome measurement



Evidence of Success...

- 90% of clients presenting for service will receive an ASI/ASAM assessment
- 100% of clients assessed will be referred to the appropriate service resource
- 95% of clients determined appropriate for WYSTAR services will receive an initial treatment plan following assessment
- Data will be collected at baseline, prior to discharge and 6 months post discharge.



Men's residential services

- Access to comprehensive assessment
- Same gender intensive treatment milieu
- Recovery mentoring
- Life skill development
- Success outcome measurement
- Pursue grant funding opportunities



Evidence of Success...

- Establishment of a 35 bed residential facility
- 100% of clients receive ASI assessment prior to or at the time of admission
- 100% of clients have an individualized treatment plan within 3 days of admission
- 85% of clients receive progress reviews at 2 week intervals
- 100% of discharges are planned in advance



Women's residential services

- Access to comprehensive assessment
- Same gender intensive treatment milieu
- Recovery mentoring
- Life skill development
- Success outcome measurement
- Pursue grant funding opportunities
- Design and build Women and Children's Recovery Campus by 2006.



Evidence of success

- Establishment of a 20 bed residential facility
- 100% of clients receive an ASI assessment prior to or at the time of admission
- 100% of clients have an individualized treatment plan within 3 working days of admission
- 85% of clients receive progress reviews at 2 week intervals
- 100% of discharges are planned in advance



Family Services

- Family illness education
- Parenting skill building
- Intensive retreat(to be developed)
- Family support groups
- Success outcome measurement
- Pursue grant opportunities



Evidence of success

- Establishment of a formal family therapy service module by January 2004
- 100% of client family members are contacted within one week following client admission to treatment
- 100% of client families are invited to attend family counseling
- 100% of families presenting for counseling will complete a satisfaction survey



Outpatient Drug Court treatment

- Access to comprehensive assessment services
- Mixed gender intensive treatment milieu
- Recovery mentoring
- Life skill development
- UA protocol and sanctioning process
- Success outcome measurement



Evidence of success

- Establish formal program module by October 2003
- 100% of clients receive an ASI/ASAM assessment prior to admission
- 100% of clients have an individualized treatment plan within 3 working days of admission
- 85% of clients receive progress reviews at 30 day intervals
- 100% of discharges are planned in advance



Quality Practice Committee

- The committee needs to be made up of the following members;
 - Board member (optional)
 - Program Director
 - Program manager's)
 - Designated Clinical staff
 - Available medical/psychological consultants
 - Staff recorder



Success outcome research

- Needs to have a software backbone
- Needs to be ASI/ASAM based
- Must have a dataset intact and the ability to measure from baseline forward in increments
- System needs to be focused on and responsive to meeting client needs
- Outcomes objectives are tracked at least quarterly



Grant writing

- Determine the needs
- Do these needs match mission?
- Target the sources
- Assemble a team approach
- Review plans and progress
- Final review(ers)
- Share the success, starting at the point of application, not upon receipt of grant



Review Plan for Work Flow

- Is desired mission in focus?
- Are we reaching the client?
- Are the clients satisfied?
- Are the referents satisfied?
- Key protocols in place?
- Do the staff know their roles?
- Performance indicators identified?
- Key data systems in place?
- Do we have the right partners involved?
- Are the initiatives adequately funded to ensure success?
- Is the Board on board?



Board and Staff Assignments

- Organizational plan
- Management report
- Outcome and performance report
- Service accessibility plan
- Technology Plan
- Risk management plan
- Board and Director
- Director
- Quality Practice Committee (QPC)
- QPC
- Director
- QPC