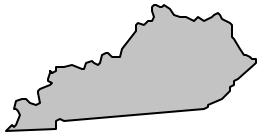


KENTUCKY

State SSA Director

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100 Fair Oaks 4E-D
Frankfort, KY 40601
Phone: 502-564-2880
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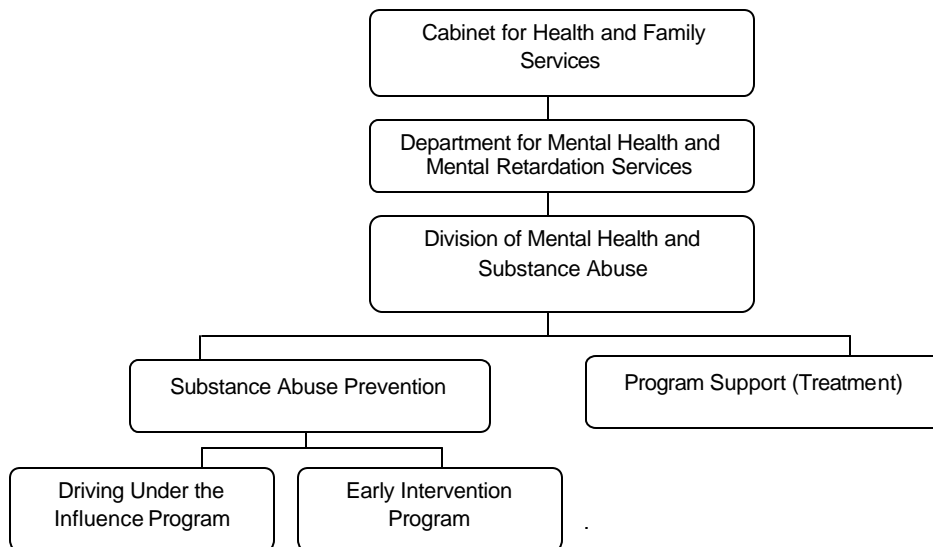
Structure and Function



The Cabinet for Health and Family Services was created by the Governor in July 2004 and includes the Department for Mental Health and Mental Retardation Services. Within the Department for Mental Health and Mental Retardation Services, the Division of Mental Health and Substance Abuse, the Single State Agency (SSA), is responsible for alcohol and other drug abuse prevention and treatment services.

The Division of Mental Health and Substance Abuse includes the Program Support Branch (Treatment Branch) that has primary responsibility for community alcohol and drug abuse treatment services and supports detoxification, family, residential, transition living, intensive outpatient, and other outpatient services. The Substance Abuse Prevention Program also resides in the Division of Mental Health and Substance Abuse and continues to oversee statewide prevention services and training. It oversees a network of 14 Regional Prevention Centers that provide technical assistance and training on prevention strategies.

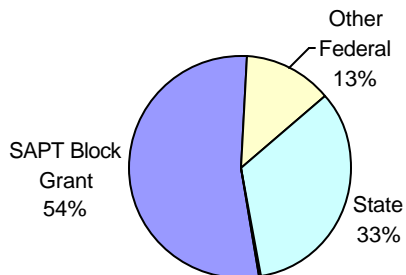
Single State Agency Structure



Single State Agency Funding Overview

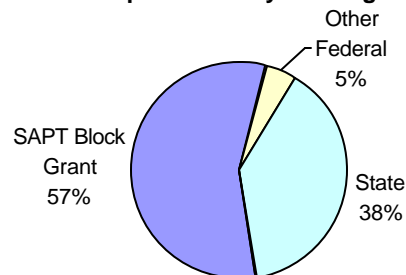
Although peaking in FY 2001 at \$40.4 million, overall expenditures by Kentucky's SSA remained fairly stable between FYs 2000 and 2003. Kentucky's overall SSA funding totaled \$36.5 million in FY 2003. Block grant funding accounted for 57 percent of total expenditures in FY 2003 and State funding accounted for 38 percent.

FY 2000 Expenditures by Funding Source

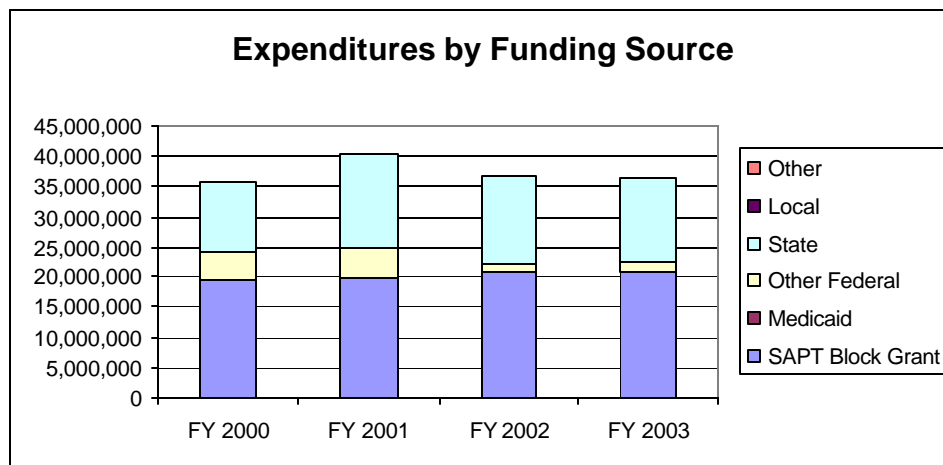


N=35,907,030

FY 2003 Expenditures by Funding Source



N=\$36,460,651



Single State Agency Expenditures From All Funding Sources

Funding Source	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
SAPT Block Grant	19,276,066	54	19,841,212	49	20,646,000	56	20,752,134	57
Medicaid	0	0	0	0	0	0	0	0
Other Federal	4,693,037	13	5,048,029	12	1,381,470	4	1,717,358	5
State	11,937,927	33	15,555,997	38	14,814,707	40	13,991,159	38
Local	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
Total*	35,907,030	100	40,445,238	100	36,842,177	100	36,460,651	100

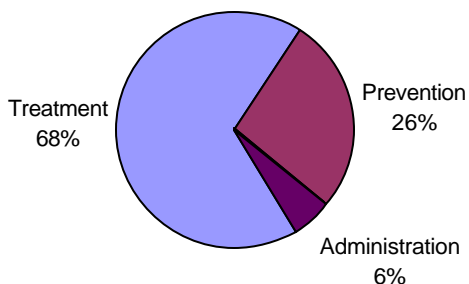
SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4

*Totals may not equal 100 percent due to rounding.

Activities and Expenditures From All Funding Sources

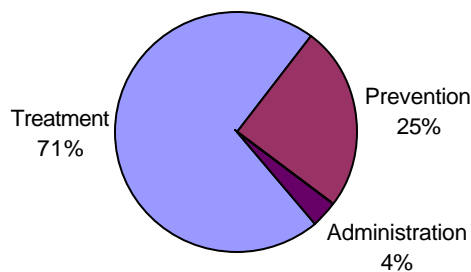
Nearly three quarters (71 percent) of the \$36.5 million SSA expenditures in FY 2003 were allocated for treatment services, followed by prevention (at 25 percent) and administration costs (at 4 percent). This is a slight change from FY 2000 when treatment accounted for 68 percent of expenditures and prevention accounted for 26 percent.

FY 2000 Expenditures by Activity

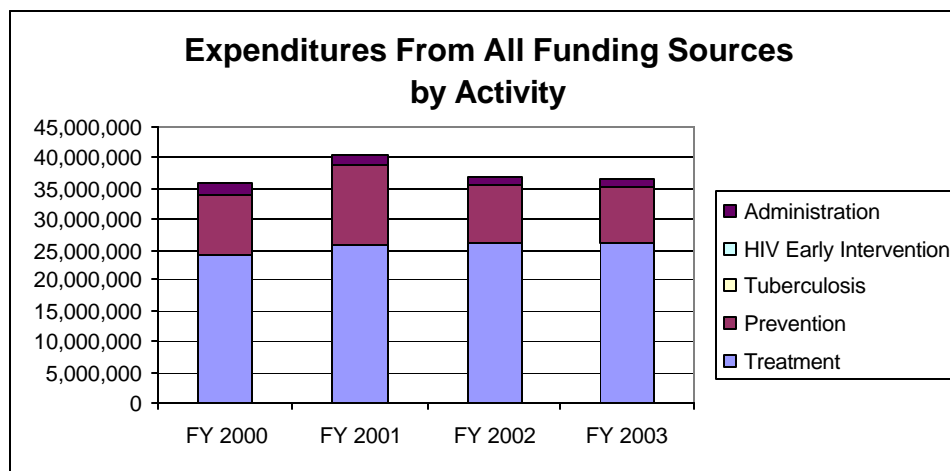


N=\$35,907,030

FY 2003 Expenditures by Activity



N=\$36,460,651



Single State Agency Expenditures From All Funding Sources by Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Treatment and Rehabilitation	0	0	25,939,685	64	26,272,631	71	26,168,067	71
Alcohol Treatment	13,628,330	38	0	0				
Drug Treatment	10,715,574	30	0	0				
Prevention	9,504,298	26	12,950,898	32	9,212,534	25	8,967,526	25
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	0	0	0	0	0	0	0	0
Administration	2,058,828	6	1,554,655	4	1,357,012	4	1,325,058	4
Total*	35,907,030	100	40,445,238	100	36,842,177	100	36,460,651	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4; States were not required to report separate expenditures for alcohol and drug treatment for FYs 2002 and 2003.

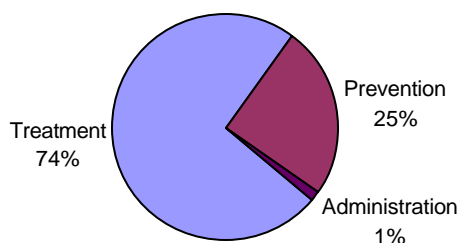
*Totals may not equal 100 percent due to rounding.

Expenditures of Block Grant and State Funds

Expenditures of Block Grant Funds

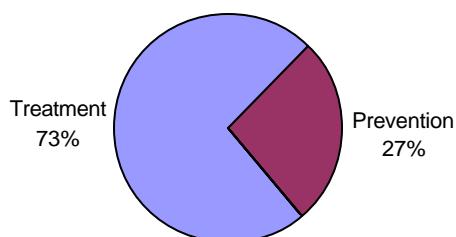
Block Grant expenditures for SSA activities in Kentucky have remained relatively stable over the years and have increased steadily from \$19.3 million in FY 2000 to nearly \$20.8 million in FY 2003. The distribution of funds has also remained stable. In FY 2003, 73 percent of the total funds were spent on treatment services, and 27 percent were spent on prevention services.

FY 2000 Block Grant Expenditures by Activity

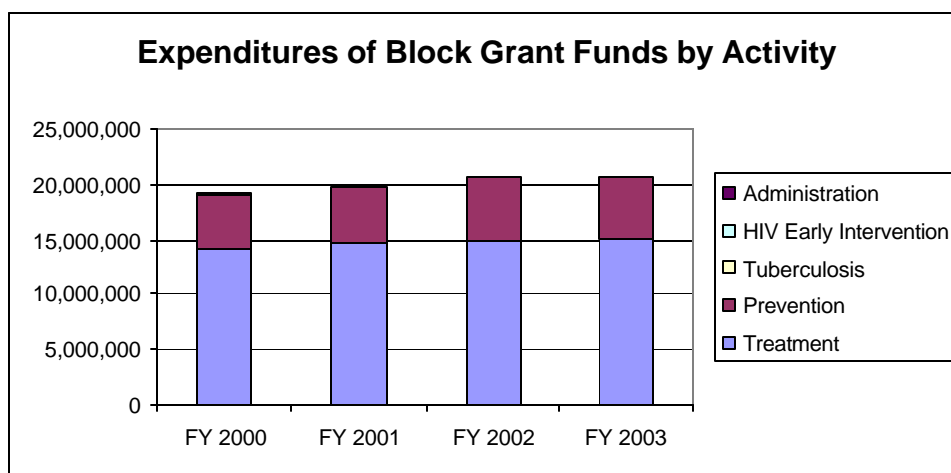


N=\$19,276,066

FY 2003 Block Grant Expenditures by Activity



N=\$20,752,134



Single State Agency Expenditures of Block Grant Funds by Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Treatment and Rehabilitation	0	0	14,800,709	75	14,841,177	72	15,197,700	73
Alcohol Treatment	7,559,139	39	0	0				
Drug Treatment	6,718,758	35	0	0				
Prevention	4,734,441	25	5,020,754	25	5,781,340	28	5,550,682	27
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	0	0	0	0	0	0	0	0
Administration	263,728	1	19,749	0	23,483	0	3,752	0
Total*	19,276,066	100	19,841,212	100	20,646,000	100	20,752,134	100

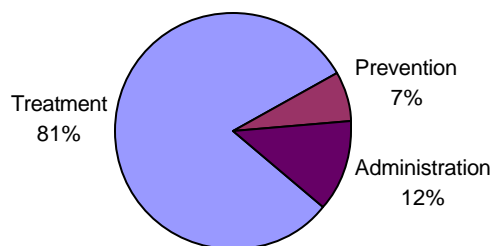
SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4; States were not required to report separate expenditures for alcohol and drug treatment for FYs 2002 and 2003.

*Totals may not equal 100 percent due to rounding.

Expenditures of State Funds

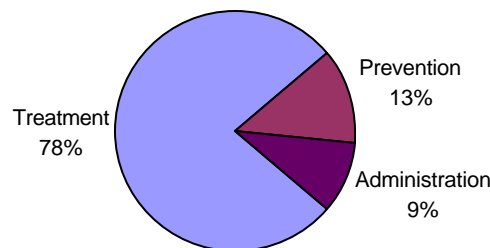
State expenditures increased from \$11.9 million in FY 2000 to \$15.6 million in FY 2001, and declined to \$14.0 million in FY 2003. A large portion (78 percent) of Kentucky's State expenditures for substance abuse services were spent on treatment in FY 2003. Prevention expenditures, peaking in FY 2001 at \$3.7 million, increased from just over \$800,000 in FY 2000 to nearly \$1.8 million in FY 2003.

FY 2000 State Expenditures by Activity

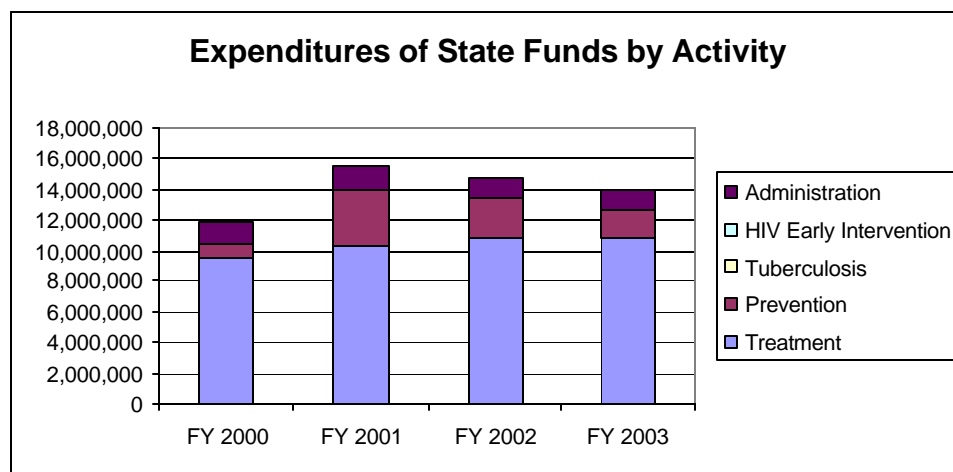


N=\$11,937,927

FY 2003 State Expenditures by Activity



N=\$13,991,159



Single State Agency Expenditures of State Funds by Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Treatment and Rehabilitation	0	0	10,319,455	66	10,923,788	74	10,892,858	78
Alcohol Treatment	5,647,449	47	0	0				
Drug Treatment	3,996,816	34	0	0				
Prevention	829,508	7	3,702,636	24	2,557,390	17	1,776,995	13
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	0	0	0	0	0	0	0	0
Administration	1,464,154	12	1,533,906	10	1,333,529	9	1,321,306	9
Total*	11,937,927	100	15,555,997	100	14,814,707	100	13,991,159	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4; States were not required to report separate expenditures for alcohol and drug treatment for FYs 2002 and 2003.

*Totals may not equal 100 percent due to rounding.

Prevention Services

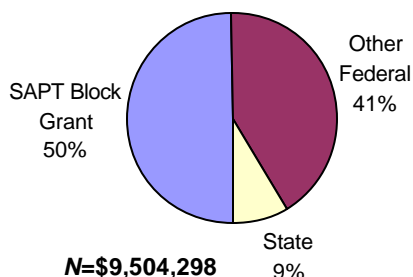
The Kentucky prevention system is based on interagency linkages and 14 Regional Prevention Centers that provide technical assistance and training on evidence-based prevention strategies. The objectives of the system are to assist in the development of community task forces and policy boards; raise community awareness; educate and train target groups, including youth, parents, school personnel, housing authority staff and residents, senior citizens, and employees of businesses; assist community efforts at problem identification and referral; support a network of RADAR associates; and provide alternative activities for youth through teen leadership activities.

Prevention Funding and Expenditures

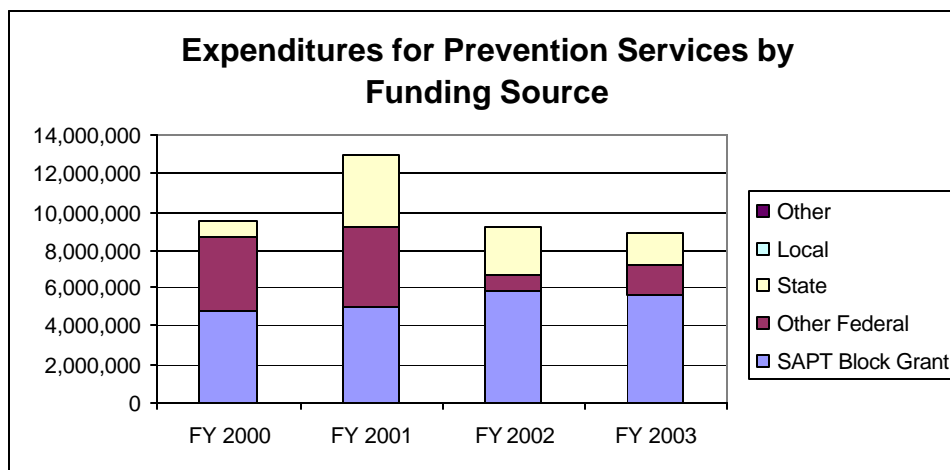
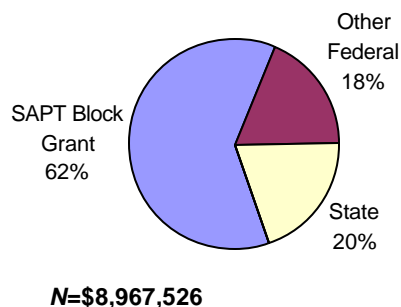
Prevention expenditures, after peaking in FY 2001 at nearly \$13.0 million, declined to about \$9.0 in FY 2003. The distribution of funding sources for prevention services also changed during that time period. In FY 2003, the Block Grant accounted for 62 percent of prevention funding, followed by State resources (at 20 percent) and other Federal resources (at 18 percent). In contrast, Block Grant funds accounted for 50 percent of funding in FY 2000, followed by other Federal (at 41 percent).

Block Grant funds for prevention in Kentucky increased from \$1.17 per capita in FY 2000 to \$1.41 in FY 2002. In FY 2003 Block Grant funds for prevention activities decreased slightly to \$1.35 per capita.

FY 2000 Prevention Expenditures by Funding Source



FY 2003 Prevention Expenditures by Funding Source



Single State Agency Expenditures for Prevention Services From All Funding Sources

Funding Source	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
SAPT Block Grant	4,734,441	50	5,020,754	39	5,781,340	63	5,550,682	62
Other Federal	3,940,349	41	4,227,508	33	873,804	9	1,639,849	18
State	829,508	9	3,702,636	29	2,557,390	28	1,776,995	20
Local	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
Total*	9,504,298	100	12,950,898	100	9,212,534	100	8,967,526	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4

*Totals may not equal 100 percent due to rounding.

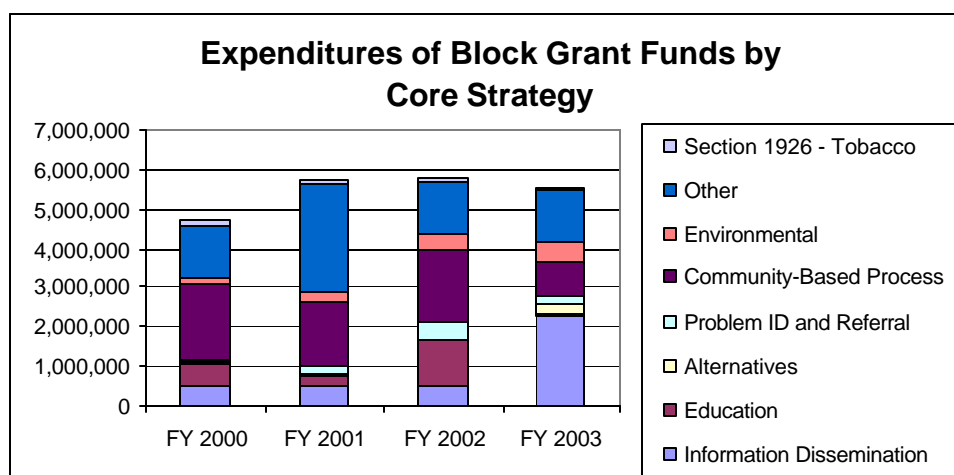
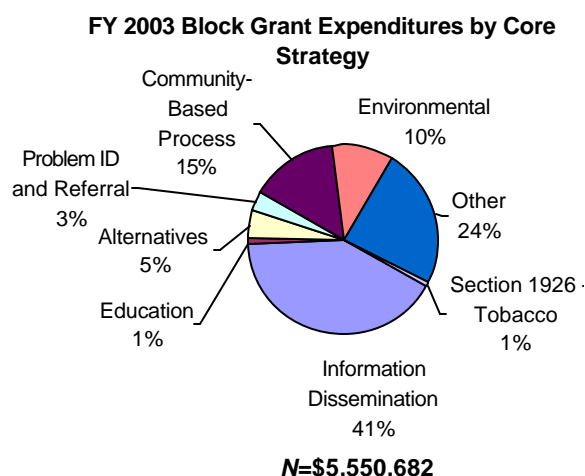
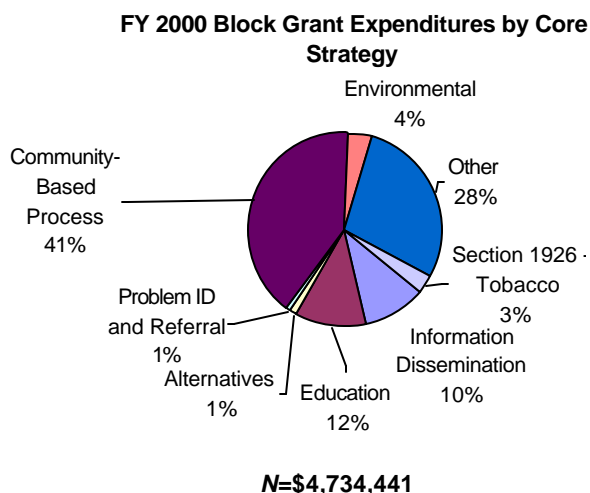
Core Strategies

Examples of core prevention strategies supported by Block Grant funds include:

Core Strategy	Examples of Activities
Information Dissemination	14 associate RADAR Centers disseminate information to communities.
Education	State police deliver the DARE program. The juvenile justice system utilizes the Early Intervention Program.
Alternatives	Youth Empower Strategy (Y.E.S.) engages youth in substance abuse prevention efforts. Other strategies include training on alcohol environmental strategies and media literacy.
Community-based Processes	The Champions program, a network of regional and county action groups, solicits local funding and in-kind support for evidence-based prevention projects. Regional Prevention Centers assist the groups with team building and planning.
Environmental	Champions groups and Regional Prevention Centers raise community awareness of alcohol advertising, marketing strategies, pricing issues, and smoke-free environments.
Problem Identification and Referral	Training and certification of community agencies assess and educate driving under intoxication (DUI) offenders. The Division trains and consults with schools and community groups on effective referrals for those with alcohol and drug problems.

Expenditures of Block Grant Funds for Core Strategies

Block Grant funds for prevention activities in Kentucky reached a high of \$5.8 million in FYs 2001 and 2002 and were \$5.6 million in FY 2003. The largest amount of funds (41 percent) from the Block Grant for prevention went toward the information dissemination strategy followed by strategies and the “other” category (24 percent). The proportion of funds targeted at community-based processes decreased during this time from 40 percent in FY 2000 to 15 percent in FY 2003.



Single State Agency Expenditures of Block Grant Funds by Core Strategy

Strategy	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Information Dissemination	486,646	10	491,136	9	502,464	9	2,254,159	41
Education	551,533	12	289,108	5	1,156,674	20	61,147	1
Alternatives	64,886	1	38,316	1	20,649	0	268,086	5
Problem ID and Referral	32,443	1	208,994	4	427,252	7	190,965	3
Community-Based Process	1,914,143	41	1,580,421	28	1,863,516	32	836,981	15
Environmental	194,659	4	272,477	5	412,672	7	573,695	10
Other	1,328,017	28	2,782,397	49	1,311,953	23	1,310,472	24
Section 1926 - Tobacco	162,114	3	54,800	1	86,160	1	55,177	1
Total*	4,734,441	100	5,717,649	100	5,781,340	100	5,550,682	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4a
 *Totals may not equal 100 percent due to rounding.

Treatment and Rehabilitation Services

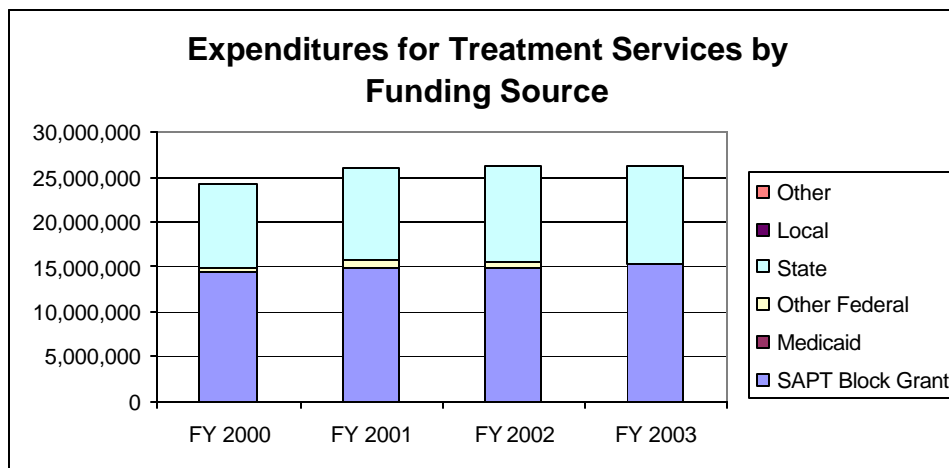
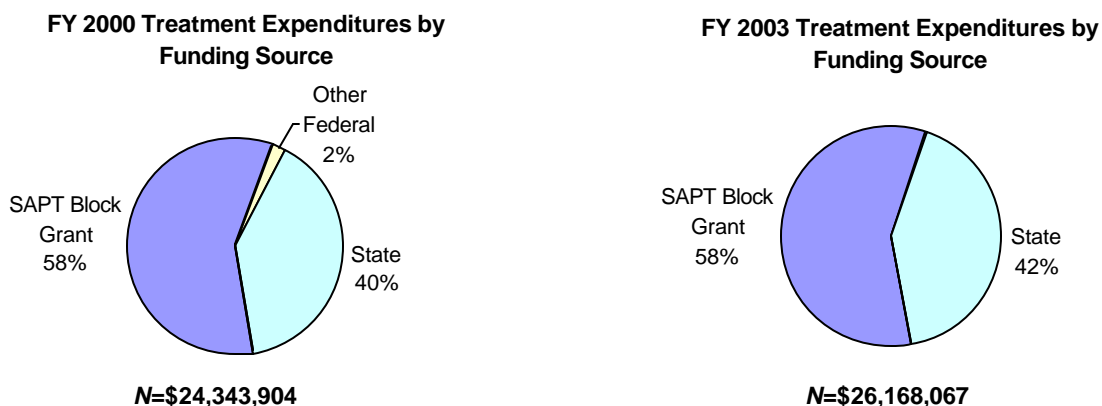
Kentucky’s treatment services are provided through community-based detoxification, residential, transitional, and outpatient service entities. In addition, an array of self-help programs, such as Alcoholics Anonymous, Narcotics Anonymous, and Oxford House for recovering persons and their family members are an integral part of the community-based treatment delivery system.

The treatment branch of the Single State Agency oversees the treatment functions including: (1) statewide planning and program development of treatment services, (2) administration of State and Federal funds, (3) development of programs to address the needs of special populations (i.e., women, adolescents, DUI offenders, injection drug users [IDUs], members of minority populations), (4) delivery of technical assistance for contracted service providers and affiliate agencies, and (5) quality assurance for contracted services. In addition, the branch administers the Kentucky Treatment Outcome Study to measure the impact of professional treatment on clients served.

Treatment Funding and Expenditures

Treatment expenditures in Kentucky increased slightly from \$24.3 million in FY 2000 to \$26.2 million in FY 2003. The proportion of funds expended from the different funding sources remained stable during this time. In FY 2003, the majority Block Grant accounted for the majority (58 percent) of treatment expenditures, followed by the State (42 percent).

Treatment expenditures per capita increased slightly from \$3.53 in FY 2000 to \$3.69 in FY 2003.



Single State Agency Expenditures for Treatment Services From All Funding Sources

Funding Source	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
SAPT Block Grant	14,277,897	58	14,800,709	57	14,841,177	56	15,197,700	58
Medicaid	0	0	0	0	0	0	0	0
Other Federal	421,742	2	819,521	3	507,666	2	77,509	0
State	9,644,265	40	10,319,455	40	10,923,788	42	10,892,858	42
Local	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
Total*	24,343,904	100	25,939,685	100	26,272,631	100	26,168,067	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4

*Totals may not equal 100 percent due to rounding.

Admissions

In examining admissions by specific treatment modality, Kentucky provided services over 40,000 clients in State Fiscal Year 2003 (July 1, 2002, through June 30, 2003).

Number of Persons Admitted by Type of Treatment Care

Type of Care	Total Number Admissions by Primary Diagnosis (N=40,415)		
	Alcohol Problems	Drug Problems	None Indicated
Detoxification (24-hour care)			
Hospital inpatient	0	0	0
Free-standing residential	2,454	3,645	166
Rehabilitation/Residential			
Hospital inpatient (rehabilitation)	0	0	0
Short-term residential	1,014	2,181	175
Long-term residential	146	489	22
Ambulatory (Outpatient)			
Outpatient (methadone)	0	474	0
Outpatient (non-methadone)	7,818	9,646	10,626
Intensive outpatient	607	993	139
Detoxification (outpatient)	0	0	0
Total	12,039	17,428	11,128

SOURCE: FY 2005 SAPT Block Grant Application Form 7a; Reported data for State FY 2002

The Treatment Episode Data Set (TEDS) number for total unduplicated (across modalities and provider organizations)¹ clients served was over 18,000 (where at least one substance was known). Calculations (with imputation) from TEDS data show that nearly 38 percent of persons admitted to treatment programs reported a psychiatric problem combined with alcohol or drug use. This rate did not vary when separating out alcohol-only abuse versus abuse of alcohol in combination with other drugs. (For a discussion of the different data sources, see Appendix D: Methodology.)

¹ For example, in the specific service modality table, clients may have been admitted to residential, intensive outpatient, and outpatient at different points in the year. The modality specific admission table shows each of these admissions, unduplicated within each modality. Hence a client who was admitted twice to residential was not counted twice.

Percent of Admissions with a Psychiatric Problem by Primary Diagnosis

Admissions	2002	
	Admissions Where at Least One Substance Is Known	% with Psychiatric Problem*
Alcohol only	5,624	36.9
Alcohol in combination with other drugs	12,858	38.1
Total	18,482	37.7

SOURCE: Treatment Episode Data Set, 2002

*Values are imputed for admission records with missing information on other psychiatric diagnoses.

While the National Survey of Drug Use and Health reports over 200,000 Kentucky residents 12 and over needing treatment for alcohol abuse or dependence and 88,000 for illicit drug use, State data are somewhat higher. In conducting a household survey using an adapted version of the NSDUH instrument, 423,502 met criteria for needing treatment using DSM-IV criteria or self reported need for treatment in 1999. The State contracts with the University of Kentucky Center on Drug and Alcohol Research to conduct the household survey of over 5,000 households to estimate the need for treatment. A current study has just been completed in 2005 with approximately the same finding. The adolescent survey has been completed but data have not yet been released from this study. Preliminary findings suggest that over 5 percent of the adolescent population needs treatment for substance use problems.

Treatment Gap by Age Group

Measure	% 12 and older	% 12-17	% 18-25	% 26 and older
Needing but not receiving treatment for alcohol use	5.90	5.21	14.15	4.55
Needing but not receiving treatment for illicit drug use	2.56	5.02	6.98	1.49

SOURCE: National Survey on Drug Use and Health; combined data for 2002 and 2003

Resource Development Activities

Planning and Needs Assessment

The Division of Mental Health and Substance Abuse contracts with the University of Kentucky Center on Drug and Alcohol Research to conduct epidemiological studies to determine incidence and prevalence of substance abuse statewide, in the substate planning areas (SPAs), and at county levels. Data for planning purposes are also reported by the 14 Regional Mental Health and Mental Retardation Boards, and each board submits an annual service plan and budget to the Division of Mental Health and Substance Abuse. The data are used in the annual budget planning process. These plans serve as the basis for community substance abuse prevention and treatment services in the geographic regions. The University of Kentucky Center on Drug and Alcohol Research conducts household surveys using the core variables and measures from the NSDUH instrument and adds Kentucky specific measures as well. The current plan is to conduct an adult survey approximately every 2 years and an adolescent every 2 years on the alternate years of the adult surveys. Needs are analyzed factoring in those who have received treatment.

Evaluation

The Division of Mental Health and Substance Abuse monitors all Regional Mental Health/Mental Retardation Board programs off-site through regular data reporting and on-site through routine liaison activities and formal monitoring visits every 2 years. Regional Prevention Centers report their activities and outcomes into the Substance Abuse Prevention Program's Web-based data system. Staff then monitor the database entries and provide a monthly report to each center. Annually, Substance Abuse Prevention Program staff review the data and calculate performance measures regarding delivery of priority services and achievement of outcomes. The Division of Mental Health and Substance Abuse also contracts with University of Kentucky Center on Drug and Alcohol Research to conduct a substance abuse treatment outcome study on an ongoing annual basis. Baseline data are collected by clinicians during intake using a PDA-based data collection instrument based on the CSAT GPRA. Data are synchronized to UK CDAR and clients who consent to followup interviews are contacted by UK CDAR 12 months after treatment to assess change after treatment. Followup findings are published each year using a sample of about 20 percent of consenting clients who are selected randomly within a sample frame stratified by region of the State. Followup results parallel findings from other national studies on increased abstinence, decreased days of use by those still using, reduced crime, and increased employment. The State uses these data to evaluate the overall outcomes of treatment and to estimate cost offsets from treatment. In this State, for every \$1.00 spent on treatment, there is a \$4.52 saving in cost to Kentuckians through crime reductions and increased employment taxes. These data are reported to the Governor and State legislature annually.

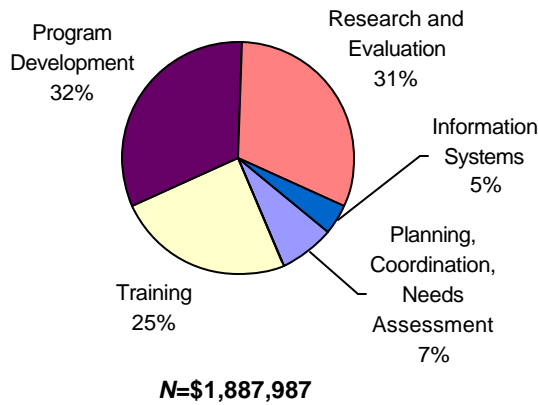
Training and Assistance

The State supports education and training for prevention and treatment professionals. Many trainings are provided by the Prevention Academy and the Kentucky School of Alcohol and Other Drug Studies. Prevention Academy targets Regional Prevention Center staff, early intervention specialists, and others with 2 weeks of intensive training in basic prevention concepts. The Kentucky School offers a 1-week event each summer with workshops on prevention and treatment topics. The Seven Counties Services' Jefferson Alcohol and Drug Abuse Center (JADAC) Training Institute provides training for counselors on best practices for treatment. Conferences are also held throughout the State and other resources include online courses. A workforce development needs assessment is being conducted to formulate a statewide training and development plan with a focus on developing leadership among new providers, training new specialists, and supporting professional certification.

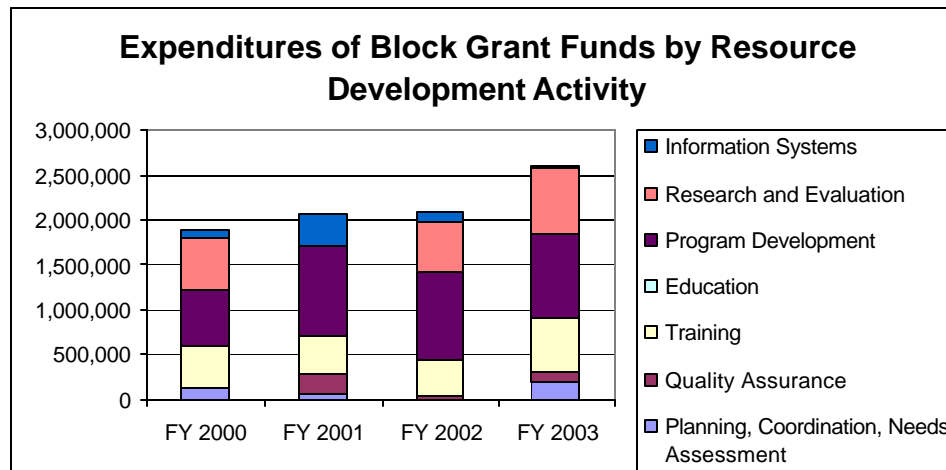
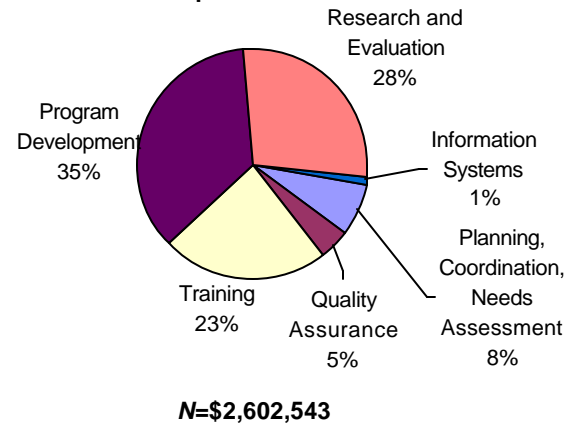
Expenditures of Block Grant Funds for Resource Development Activities

SAPT Block Grant funding for resource development activities in Kentucky totaled \$2.6 million in FY 2003. The type of activity that received most of these funds in FY 2003 was program development (at 35 percent of the total), followed by research and evaluation (at 28 percent).

FY 2000 Block Grant Expenditures on Resource Development Activities



FY 2003 Block Grant Expenditures on Resource Development Activities



Single State Agency Expenditures of Block Grant Funds by Resource Development Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Planning, Coordination, Needs Assessment	139,759	7	75,123	4	6,386	0	196,090	8
Quality Assurance	0	0	214,243	10	36,815	2	118,141	5
Training	465,000	25	425,455	21	407,160	19	599,581	23
Education	0	0	0	0	0	0	0	0
Program Development	612,811	32	1,002,998	49	961,274	46	930,788	35
Research and Evaluation	585,417	31	0	0	570,894	27	733,299	28
Information Systems	85,000	5	348,783	17	116,000	6	24,644	1
Total*	1,887,987	100	2,066,602	100	2,098,529	100	2,602,543	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4b

*Totals may not equal 100 percent due to rounding.

Discretionary Funding

Center for Substance Abuse Prevention

The Center for Substance Abuse Prevention (CSAP) awarded more than \$5.2 million in discretionary prevention grant funds to Kentucky entities in FY 2004. Most (28 of the 31 grants awarded) of these grants funded drug-free communities programs (\$2.6 million). The largest single award was for the Strategic Prevention Framework State Incentive Grant program (SPF SIG) (nearly \$2.4 million).

Center for Substance Abuse Prevention Discretionary Awards for FY 2004

CSAP Discretionary Grants	Number of Awards	Total \$ Amount
CSAP 2004 Earmarks	1	74,558
Drug Free Communities	28	2,637,649
Drug Free Communities Mentoring	1	75,000
Strategic Prevention Framework State Incentive Grants	1	2,350,965
Total	31	5,238,172

SOURCE: www.samhsa.com

Center for Substance Abuse Treatment

The Center for Substance Abuse Treatment (CSAT) awarded \$4.0 million in discretionary treatment grant funds to Kentucky entities in FY 2004. These grants funded pregnant/post-partum women programs (\$1 million), Targeted Capacity- HIV/AIDS (\$500,000), and Adult, Juvenile, and Family Drug Courts (\$400,000), among others.

Center for Substance Abuse Treatment Discretionary Awards for FY 2004

CSAT Discretionary Grants	Number of Awards	Total \$ Amount
Adult Juvenile and Family Drug Courts	1	400,000
CSAT 2004 Earmarks	1	112,333
Pregnant/Post-Partum Women	2	999,998
Recovery Community Support - Facilitating	1	350,000
Strengthening Communities -Youth	1	691,104
State Data Infrastructure	1	100,000
Targeted Capacity Expansion	1	495,697
Targeted Capacity - HIV/AIDS	2	885,389
Total	10	4,034,521

SOURCE: www.samhsa.gov