

ARKANSAS REGISTER

FILED Transmittal Sheet

MAY 13 1994



"BILL" McCUMEN J. "Bill" McCuen
SECRETARY OF STATE Secretary of State
State Capitol Rm. 010
Little Rock, Arkansas 72201-1094

For Office Use Only: Effective Date _____ Code Number 007.25.94--001

Name of Agency Bureau of Alcohol and Drug Abuse Prevention

Department Arkansas Department of Health

Contact Person Ray Stephens

Statutory Authority for Promulgating Rules Public Law 102-321

	Date
<input type="checkbox"/> Intended Effective Date <input type="checkbox"/> Emergency	Legal Notice Published April 24, 1994
<input checked="" type="checkbox"/> 20 Days After Filing	Final Date for Public Comment May 23, 1994
<input type="checkbox"/> Other	Filed With Legislative Council May 13, 1994
_____	Reviewed by Legislative Council _____
	Adopted by State Agency July 1, 1994

CERTIFICATION OF AUTHORIZED OFFICER

I Hereby Certify That The Attached Rules Were Adopted
In Compliance with Act 434 of 1967 As Amended.

Joe M. Hill
Signature

Bureau Director
Title

5-12-94
Date

007.25.94--001



JIM GUY TUCKER
GOVERNOR

Arkansas DEPARTMENT OF HEALTH
Bureau of Alcohol and Drug Abuse Prevention

108 East 7th Street, 400 Waldon Building
Little Rock, AR 72201
Telephone (501) 682-6656
FAX (501) 682-6610

May 12, 1994

FILED

MAY 13 1994

Mr. W.J. "Bill" McCuen
Secretary of State
State Capitol Building
Little Rock, AR 72201

W. J. "BILL" McCUEN
SECRETARY OF STATE
BY _____

Dear Mr. McCuen:

Pursuant to Arkansas Public Law 102-321, the Bureau of Alcohol and Drug Abuse Prevention hereby issues the attached Substance Abuse Prevention and Treatment (SAPT) Block Grant Application. The purpose of this proposed rule is to access federal funding to support alcohol and other drug abuse prevention and treatment programs.

If you have further questions, please contact either Ray Stephens or me at 280-4500.

Sincerely,

Joe M. Hill
Bureau Director

Attachment

JMH:sw

cc: Ray Stephens, Associate Bureau Director



JIM GUY TUCKER
GOVERNOR

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Bureau of Alcohol and Drug Abuse Prevention

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ARKANSAS DEPARTMENT OF HEALTH

Notice of Public Hearing

A public hearing will be held May 23, 1994 at 1:30 p.m. in the Arkansas Department of Health's Auditorium, 4815 West Markham Street to allow interested parties to comment on the proposed adoption of Arkansas Substance Abuse Prevention and Treatment Block Grant Application.

Copies of the application are available for public inspection at the Bureau of Alcohol and Drug Abuse Prevention, Freeway Medical Center, Suite 918, 5810 West 10th Street, Little Rock, AR 72204.

The public may submit written comments to the Director of the Bureau of Alcohol and Drug Abuse Prevention no later than 4:30 p.m. on May 23, 1994.

FILED

MAY 13 1994

W. J. "BILL" McCUEN
SECRETARY OF STATE

BY _____



JIM GUY TUCKER
GOVERNOR

Arkansas DEPARTMENT OF HEALTH

Bureau of Alcohol and Drug Abuse Prevention

108 East 7th Street, 400 Waldon Building
Little Rock, AR 72201
Telephone (501) 682-6656
FAX (501) 682-6610

May 12, 1994

FILED

MAY 13 1994

Ms. Kim Baxter
Legislative Analyst
Room 315, State Capitol
Little Rock, AR 72201

W. J. "BILL" McCUEN
SECRETARY OF STATE

BY _____

Dear Ms. Baxter:

This letter is to request Joint Interim Committee on Public Health, Welfare and Labor review of the Bureau of Alcohol and Drug Abuse Prevention's (ADAP) Substance Abuse Prevention and Treatment (SAPT) Block Grant Application for 1994. A public hearing will be conducted on May 23, 1994 at the Health Department's Auditorium. Please take the necessary steps to include the ADAP SAPT Block Grant Application on the Committee's agenda at your earliest convenience.

If needed, I can provide additional copies of the Application and copies of a summary sheet in advance of the meeting. Thank you for your assistance in this matter. Please advise me if you have questions or concerns or need additional information.

Sincerely,

Joe M. Hill
Bureau Director

JMH:sw

Attachment

cc: Ray Stephens, Associate Bureau Director, ADAP

Questionnaire
On Proposed Administrative Rules
Whether New, Amendatory, or Repealing

007.25.94--001

FILED

MAY 13 1994

W. J. "BILL" McCUEN
SECRETARY OF STATE

BY

Leave Blank

FROM:

AGENCY: Department of Human Services

DIVISION: Bureau of Alcohol and Drug Abuse Prevention

CONTACT PERSON: Ray Stephens

ADDRESS: 5800 West 10th Street, Suite 907, Little Rock, AR 72204

PHONE NUMBER: 280-4500

Instructions

- A. Answer each question completely using layman's language. Use additional sheets if necessary.
- B. If you have a method of indexing your rules, give the proposed citation after "Short Title of This Rule" below. (For Example — FSC 804-805)

Short Title of This Rule Arkansas Substance Abuse Prevention & Treatment Block Grant Application

1. What is the subject of the proposed rule?

Arkansas' application for substance abuse prevention & treatment block grant.

2. Will this be a new rule or repeal or amend an existing rule? If it is an amendment, state specifically what is amended.

NO

3. What State or Federal law or regulation grants the authority for this proposed rule?

Public Law 102-321

4. What is the purpose of this proposed rule? Why is it necessary?

To access federal funding to support alcohol and other drug abuse prevention & treatment programs

5. Will this proposed rule be controversial? If yes, explain nature of controversy.

NO

Failure to completely answer ALL questions could result in processing delays.

Attachment for Item 9

Names, Addresses & Phone Numbers	Category	For	Against
<p>Arkansas Substance Abuse Certification Board Bob Connell, Chairperson The Bridgeway 221 Bridgeway Rd. North Little Rock, AR 72118 771-1500</p>	A	X	
<p>Mental Health Council of Arkansas Steve Foti, President 1 Financial Center, Suite 217 650 South Shackelford Little Rock, AR 72211</p>	A	X	
<p>Mr. Jim Ward, President Association of Nonprofit Substance Abuse Treatment Providers 1201 River Road North Little Rock, AR 72114 372-4611</p>	A	X	
<p>Don McMillan, Ph.D. Wilbur Mills Chair on Alcohol and Drug Abuse Prevention UAMS 4301 W. Markham Little Rock, AR 72205 686-8038</p>	A	X	
<p>Arkansas Association of Substance Abuse Treatment Programs Steve Sargent, President P.O. Box 1174 301 Holcomb Springdale, AR 72764 756-1060</p>	A	X	
<p>Arkansas Association of Alcoholism and Drug Abuse Counselors Ramona "Moki" Harris, President P.O. Box 6368 115 Market Street Hot Springs, AR 71902 624-3325</p>	A	X	

Names, Addresses & Phone Numbers	Category	For	Against
Mr. John Greer, Director Ozark Counseling Services #8 Medical Plaza P.O. Box 487 Mountain Home, AR 72653 425-6901	A	X	
Mr. Duane Griffin, Ex. Director OMART P.O. Box 308 Highway 62 Gassville, AR 72635 435-6200	A	X	
Mr. Steve Sargent, Ex. Director 215 Club "Decision Point" P.O. Box 1174 301 Holcomb Springdale, AR 72764 756-1060	A	X	
Mr. William Huddleston, Ex. Dir. North Arkansas Human Services P.O. Box 2578 Batesville, AR 72501 793-8900	A	X	
Mr. Steve Boyd, Director Wilbur Mills Center 3204 E. Moore St. Searcy, AR 72143 268-7777	A	X	
Larry Goodwin, Acting Director NorthCentral Arkansas Development Council P.O. Box 3349 Batesville, AR 72501 793-5765	A	X	
Mr. Jim Jansen, Director Black River Area Development Corp. 1405 Hospital Drive Pocahontas, AR 72455 892-4547	A	X	
Mr. Bobby Yopp, Ex. Director Crowley's Ridge Development Council P.O. Box 1497 Jonesboro, AR 72401 935-8610	A	X	

Names, Addresses & Phone Numbers	Category	For	Against
<p>Mr. Tommy Davis, Director East Central Arkansas Economic Development Corporation P.O. Box 709 Forrest City, AR 72335 633-7686</p>	A	X	
<p>Maurice Caldwell, Director of Mental Health Department of Correction Substance Abuse Treatment Program P.O. Box 8707 Pine Bluff, AR 71601 247-6328</p>	A	X	
<p>Mr. Cliff Benedict, Ex. Director Human Development and Research Services, INC. P.O. Box 8225 HDRS Building Pine Bluff, AR 71611 879-1051</p>	A	X	
<p>Mr. Clarence Perkins, Ex. Director Southeast Arkansas Mental Health P.O. Box 1019 2500 Rike Drive Pine Bluff, AR 71613 534-1834</p>	A	X	
<p>Ms. Freda Stringer, Administrator Arkansas Substance Abuse Certification Board P.O. Box 1477 Conway, AR 72032 329-8987</p>	A	X	
<p>Mr. Shaw Wilson, Director Central Arkansas Substance Abuse Programs INC. 7107 W. 12th Street 203B P.O. Box 5417 Little Rock, AR 72215 666-6460</p>	A	X	
<p>Mr. Steve Newsome, Director Counseling Clinic, INC. 307 East Sevier Street Benton, AR 72015 847-8050</p>	A	X	

Names, Addresses & Phone Numbers	Category	For	Against
Mr. Gene Gibbins, Director GYST House 4201 Barrow Rd. Little Rock, AR 72204 568-1682	A	X	
Mr. Jim Ward, Ex. Director Riverbend Recovery Center 1201 River Road North Little Rock, AR 72114 372-4611	A	X	
Mr. Joe McQuany, Director Serenity Park 2801 W. Rossevelt Rd. Little Rock, AR 72204 663-7627	A	X	
Mr. Lysle Casey, Director Twenty-Four Hour Center (men) 2021 Main Street Little Rock, AR 72206 375-7585	A	X	
Mr. G. S. Ferguson, Assistant Director Benton Detoxification 6701 Highway 67 Benton, AR 72015-8486 778-8820	A	X	
Mr. Phillip Klees, Director Family Service Agency of Central Arkansas 2700 Willow St. P.O. Box 500 North Little Rock, AR 72115 758-1516	A	X	
Mr. Ron Bass, Project Director Freedom House 900 Dike Rd. P.O. Box 1463 Russellville, AR 72801 968-7225	A	X	
Ms. Mary Aleese Schreiber Executive Director Counseling Associates 110 Skyline Drive P.O. Box 1398 Russellville, AR 72801 968-1298	A	X	

Names, Addresses & Phone Numbers	Category	For	Against
<p>Ms. Mickie Grisham, Director Quapaw House P.O. Box 6368 115 Markey Street Hot Springs, AR 71902 624-3325</p>	A	X	
<p>Cindy Crone Arkansas CARES 4301 W. Markham #711-1 Little Rock, AR 72205 661-7979</p>			
<p>Mr. John Goff, Ex. Director Red River Council On Alcohol Drug Abuse 222 W. 5th Ave. Texarkana, TX 75501 903-793-7592</p>	A	X	
<p>Dr. William Peel, Ex. Director South Arkansas Regional Health Center 715 North College El Dorado, AR 71730 862-7921</p>	A	X	
<p>Mr. David Davis, Director Recovery Center 710 W. Grove El Dorado, AR 71730 864-2475</p>	A	X	
<p>Ms. June Bailey, Director Gateway House 1715 Grand Ave. Fort Smith, AR 72901 783-8849</p>	A	X	
<p>Mr. Michael Woods, Director Harbor House, INC. 615 North 19th Street P.O. Box 4207 Fort Smith AR 72914 785-4083</p>	A	X	
<p>Mr. B. R. Kennemer, Ex. Director Western Arkansas Counseling and Guidance Center P.O. Box 2887, Sta. A. Fort Smith, AR 72913 452-6650</p>	A	X	

Names, Addresses & Phone Numbers

Category

For

Against

Names, Addresses & Phone Numbers	Category	For	Against
David Purifoy Horizon 3900 N. Armour Street Fort Smith, AR 72904 783-6664	A	X	
Mr. Robert Shepherd State Drug Director Governor's Office Room 011, State Capitol Little Rock, AR 72201 682-8040	A	X	
Dr. Forrest Miller Family Clinic 4202 S. University Little Rock, AR 72204	A	X	
John Hill U.A.L.R. Dept. of Social Work 2801 South University Larson Hall Little Rock, AR 72204	A	X	
Mr. Bill Manning 417 W. Roosevelt Street West Memphis, AR 72301 739-3606	A	X	
Mrs. Mandy Alford, Chairperson #1 Idylwood Pine Bluff, AR 71603 536-4100	A	X	
Mr. Theodore Blake P.O. Box 354 Stamps, AR 71860 533-4962	A	X	
Mr. Jay Winters 205 Weird Road Russellville, AR 72801 968-4860	A	X	
Ms. Jo Marva Davis Rancifer One Colleen Court Little Rock, AR 72207 224-1655	A	X	
Mr. Andrew Jeffries 1522 West 21st Street Little Rock, AR 72206 374-9495	A	X	

Names, Addresses & Phone Numbers

Category

For

Against

Ms. Pam Warren
Prevention Resource Center
P.O. Box 5822
Pine Bluff, AR 71611
534-2499

A

X

Marsha Broadnax
Delta Counseling Associates
455 West Gaines
Monticello, AR 71655
367-1460

A

X

Steve Willbanks
Prevention Resource Center
P.O. Box 679
Morrilton, AR 72110
354-4589

A

X

Christy Stewart
Prevention Resource Center
339 Charteroak
Hot Springs, AR 71901
623-5591

A

X



JIM GUY TUCKER
GOVERNOR

Arkansas DEPARTMENT OF HEALTH
Bureau of Alcohol and Drug Abuse Prevention

108 East 7th Street, 400 Waldon Building
Little Rock, AR 72201
Telephone (501) 682-6656
FAX (501) 682-6610

March 28, 1994

Ms. Karen Urbany
Acting Grants Management Officer
Grants Administration Branch
Center for Substance Abuse Treatment
Rockwall II Building, 10th Floor
5600 Fishers Lane
Rockville, Maryland 20857

FILED
MAY 13 1994
W. J. "BILL" McCUEN
SECRETARY OF STATE
BY

Dear Ms. Urbany:

Enclosed is the Arkansas Substance Abuse Block Grant Application for FY 1994.

Should you need additional information or clarification concerning the Substance Abuse Block Grant application, please contact Ray Stephens at (501) 682-6654.

Sincerely,

Joe M. Hill,
Director

JMH:vh

cc: Ms. Marcie Gibson, Governor's Office



JIM GUY TUCKER
GOVERNOR

Arkansas DEPARTMENT OF HEALTH
Bureau of Alcohol and Drug Abuse Prevention

108 East 7th Street, 400 Waldon Building
Little Rock, AR 72201
Telephone (501) 682-6656
FAX (501) 682-6610

March 28, 1994

FILED

MAY 13 1994

W. J. "BILL" McCUEN
SECRETARY OF STATE
BY _____

Mr. Tracy Copeland
State Planning and Development
Clearinghouse
1515 Building, Room 412
1515 West 7th Street
Little Rock, AR 72201

RE: SUBSTANCE ABUSE BLOCK GRANT APPLICATION FOR FY1994

Dear Mr. Copeland:

Attached please find a copy of State form 424 and the above referenced document being forwarded to you in compliance with Governor Bill Clinton's 1/22/85 memorandum concerning "Review of Federal Sub-Grants."

Please contact Mr. Ray Stephens of this office if you have questions or concerns regarding this matter. Thank you.

Sincerely,

Joe M. Hill,
Director

JMH:vh

cc Ray Stephens, Director, Division of Planning and Research, ADAP



JIM GUY TUCKER
GOVERNOR

Arkansas DEPARTMENT OF HEALTH
Bureau of Alcohol and Drug Abuse Prevention

108 East 7th Street, 400 Waldon Building
Little Rock, AR 72201
Telephone (501) 682-6656
FAX (501) 682-6610

March 28, 1994

FILED
MAY 13 1994
W. J. "BILL" MCGUEN
SECRETARY OF STATE
BY _____

Ms. Libby Fort
Central Arkansas Planning and
Development District
P. O. Box 187
Lonoke, AR 72086

RE: SUBSTANCE ABUSE BLOCK GRANT APPLICATION FOR FY1994

Dear Ms. Fort:

Attached please find a copy of State Form 424 and the above referenced document being forwarded to you in compliance with Governor Bill Clinton's 1/22/85 memorandum concerning "Review of Federal Sub-Grants."

Please contact Mr. Ray Stephens of this office if you have questions or concerns regarding this matter. Thank you.

Sincerely,

Joe M. Hill,
Director

JMH:vh

cc: Ray Stephens, Director, Division of Planning and Research, ADAP

APPLICATION FOR FEDERAL ASSISTANCE

2. DATE SUBMITTED	Applicant Identifier
3. DATE RECEIVED BY STATE	State Application Identifier
4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier

1. TYPE OF SUBMISSION:

Application
 Construction
 Non-Construction

Preapplication
 Construction
 Non-Construction

5. APPLICANT INFORMATION

Legal Name: **DEPARTMENT OF HEALTH**

Address (give city, county, state, and zip code):
 108 E. 7th Street
 400 Waldon Building
 Little Rock, Arkansas 72201

Organizational Unit:
BUREAU OF ALCOHOL AND DRUG ABUSE PREVENTION

Name and telephone number of the person to be contacted on matters involving this application (give area code):
 Ray Stephens, (501) 682-6654

6. EMPLOYER IDENTIFICATION NUMBER (EIN):

7	1	-	6	0	0	7	3	5	8
---	---	---	---	---	---	---	---	---	---

7. TYPE OF APPLICANT: (enter appropriate letter in box) **A**

A. State	H. Independent School Dist.
B. County	I. State Controlled Institution of Higher Learning
C. Municipal	J. Private University
D. Township	K. Indian Tribe
E. Interstate	L. Individual
F. Intermunicipal	M. Profit Organization
G. Special District	N. Other (Specify): _____

8. TYPE OF APPLICATION:

New Continuation Revision

If Revision, enter appropriate letter(s) in box(es):

A. Increase Award B. Decrease Award C. Increase Duration
 D. Decrease Duration Other (specify): _____

9. NAME OF FEDERAL AGENCY:

SAMHSA

10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:

9	3	9	5	9
---	---	---	---	---

TITLE: **Part B. Title XIX**

11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:

To administer alcohol and drug abuse services, funding and programs in the State of Arkansas as provided through Part B, Title XIX of the Omnibus Budget Reconciliation Act of 1981 and the Comprehensive Plan for Alcohol and Drug Abuse Prevention Activities as required by Act 644 of 1977.

12. AREAS AFFECTED BY PROJECT (cities, counties, states, etc.):

State of Arkansas

13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:	
Start Date	Ending Date	a. Applicant	b. Project
10/1/94	9/30/96	2	1,2,3,4

15. ESTIMATED FUNDING:

a. Federal	\$	7,450,982	.00
b. Applicant	\$.00
c. State	\$.00
d. Local	\$.00
e. Other	\$.00
f. Program Income	\$.00
g. TOTAL	\$	7,450,982	.00

16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?

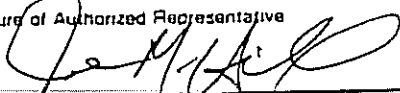
a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON:
 DATE 3/28/94

b. NO. PROGRAM IS NOT COVERED BY E.O. 12372
 OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW

17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?

Yes If "Yes," attach an explanation. No

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED

a. Typed Name of Authorized Representative Joe M. Hill	b. Title Director	c. Telephone number 501-682-6650
d. Signature of Authorized Representative 		e. Date Signed

FILED

MAY 13 1994

W. J. "BILL" McCUEN
SECRETARY OF STATE

BY _____

I. IDENTIFYING INFORMATION AND ASSURANCES

I. IDENTIFYING INFORMATION AND ASSURANCES

SUBSTANCE ABUSE BLOCK GRANT APPLICATION FOR FY 1994

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Form Approved

Application Page 3

Approval Expires:

**FY 1994 SUBSTANCE ABUSE BLOCK GRANT APPLICATION
FUNDING AGREEMENTS/CERTIFICATIONS
AS REQUIRED BY THE PUBLIC HEALTH SERVICE ACT**

As part of the annual application for Block Grant funds, it is required under Title XIX, Part B, Subpart II of the Public Health Services Act, as amended, that the chief executive officer (or an authorized designee) of the applicant organization certify that the State will comply with the following specific citations as summarized and set forth below, and with any regulations or guidelines issued in conjunction with this Subpart except as exempt by statute.

We will accept a signature on this form as certification of agreement to comply with the cited provisions of the PHS Act. If signed by a designee, a copy of the designation must be attached.

I. FORMULA GRANTS TO STATES, SECTION 1921

Grant funds will be expended "only for the purpose of planning, carrying out, and evaluating activities to prevent and treat substance abuse and for related activities" as authorized.

II. CERTAIN ALLOCATIONS, SECTION 1922

- Allocations Regarding Alcohol and Other Drugs, Section 1922(a)
- Allocations Regarding Primary Prevention Programs, Section 1922(b)
- Allocations Regarding Women, Section 1922(c)

III. INTRAVENOUS DRUG ABUSE, SECTION 1923

- Capacity of Treatment Programs, Section 1923(a)
- Outreach Regarding Intravenous Substance Abuse, Section 1923(b)

IV. REQUIREMENTS REGARDING TUBERCULOSIS AND HUMAN IMMUNODEFICIENCY VIRUS, SECTION 1924

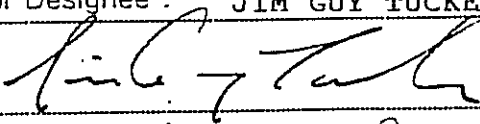
V. GROUP HOMES FOR RECOVERING SUBSTANCE ABUSERS, SECTION 1925
Territories as described in Section 1925(c) are exempt.

The State "has established, and is providing for the ongoing operation of a revolving fund" in accordance with Section 1925 of the Public Health Services Act, as amended.

VI. RESERVED

VII. TREATMENT SERVICES FOR PREGNANT WOMEN, SECTION 1927

- The State "will ensure that each pregnant woman in the State who seeks or is referred for and would benefit from such services is given preference in admission to treatment facilities receiving funds pursuant to the grant."

VIII.	ADDITIONAL AGREEMENTS, SECTION 1928
	<ul style="list-style-type: none"> • Improvement of Process for Appropriate Referrals for Treatment, Section 1928(a) • Continuing Education, Section 1928(b) • Coordination of Various Activities and Services, Section 1928(c) • Waiver of Requirement, Section 1928(d)
IX.	SUBMISSION TO SECRETARY OF STATEWIDE ASSESSMENT OF NEEDS, SECTION 1929
X.	MAINTENANCE OF EFFORT REGARDING STATE EXPENDITURES, SECTION 1930
	The State "will maintain aggregate State expenditures for authorized activities at a level that is not less than the average level of such expenditures maintained by the State for the 2-year period preceding the fiscal year for which the State is applying for the grant."
XI.	RESTRICTIONS ON EXPENDITURE OF GRANT, SECTION 1931
XII.	APPLICATION FOR GRANT; APPROVAL OF STATE PLAN, SECTION 1932
XIII.	OPPORTUNITY FOR PUBLIC COMMENT ON STATE PLANS, SECTION 1941
	The plan required under Section 1932 will be made "public in such a manner as to facilitate comment from any person (including any Federal or other public agency) during the development of the plan (including any revisions) and after the submission of the plan to the Secretary.
XIV.	REQUIREMENT OF REPORTS AND AUDITS BY STATES, SECTION 1942
XV.	ADDITIONAL REQUIREMENTS, SECTION 1943
XVI.	PROHIBITIONS REGARDING RECEIPT OF FUNDS, SECTION 1946
XVII.	NONDISCRIMINATION, SECTION 1947
	I hereby certify that the State or Territory will comply with Title XIX, Part B, Subpart III of the Public Health Services Act, as amended, as summarized above, except for those Sections in the Act that do not apply or for which a waiver has been granted or may be granted by the Secretary for the period covered by this agreement.
State:	ARKANSAS
Name of Chief Executive Officer or Designee ¹ :	JIM GUY TUCKER
Signature of CEO or Designee:	
Title: GOVERNOR	Date Signed: January 20, 1994
¹ If signed by a designee, a copy of the designation must be attached	

U.S. Department of Health and Human Services
Certification Regarding Drug-Free Workplace Requirements
Grantees Other Than Individuals

By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.

This certification is required by regulations implementing the Drug-Free Workplace Act of 1988, 45 CFR Part 76, Subpart F. The regulations, published in the May 25, 1990 Federal Register, require certification by grantees that they will maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when the Department of Health and Human Services (HHS) determines to award the grant. If it is later determined that the grantee knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, HHS, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or governmentwide suspension or debarment.

Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.

Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios.)

If the workplace identified to HHS changes during the performance of the grant, the grantee shall inform the agency of the change(s), if it previously identified the workplaces in question (see above).

Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules:

"Controlled substance" means a controlled substance in Schedules I through V of the Controlled Substances Act (21 USC 812) and as further defined by regulation (21 CFR 1308.11 through 1308.15).

"Conviction" means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes;

"Criminal drug statute" means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

"Employee" means the employee of a grantee directly engaged in the performance of work under a grant, including: (i) All "direct charge" employees; (ii) all "indirect charge" employees unless their impact or involvement is insignificant to the performance of the grant; and, (iii) temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of subrecipients or subcontractors in covered workplaces).

The grantee certifies that it will or will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an ongoing drug-free awareness program to inform employees about:
(1) The dangers of drug abuse in the workplace; (2) The grantee's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and, (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:

(1) Abide by the terms of the statement; and, (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

(e) Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

(Continued on reverse side of this sheet)

CERTIFICATION REGARDING LOBBYING

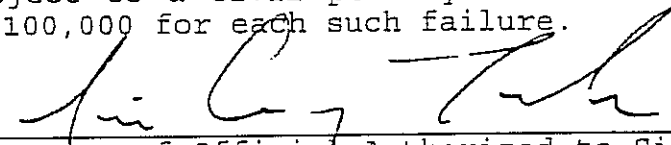
Certification for Contracts, Grants, Loans, and Cooperative Agreements
The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan or cooperative agreement the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

By  Date 1/20/94
(Signature of Official Authorized to Sign Application)
GOVERNOR OF ARKANSAS

ARKANSAS DEPARTMENT OF HEALTH
For: BUREAU OF ALCOHOL AND DRUG ABUSE PREVENTION
Name of Grantee

SUBSTANCE ABUSE PREVENTION AND TREATMENT BLOCK GRANT
Title of Grant Program

FILED

MAY 13 1994

W. J. "BILL" MCCUEN
SECRETARY OF STATE

BY _____

**II. ACTUAL USE OF FFY 1991 BLOCK GRANT SUBSTANCE
ABUSE FUNDS AND OBLIGATIONS OF FFY 1991
SUBSTANCE ABUSE FUNDS**

Did the State make any transfers between FFY 1991 allotments?

Yes

No

If yes, indicate the type of transfer and the amount, and briefly explain why the transfer was made.

Substance abuse to mental health \$ _____

Mental health to substance abuse \$ _____

Reason:

1991 GOALS UPDATE

In FY'91, the Division of Alcohol and Drug Abuse Prevention utilized a planning format that was created in the middle 1970s. The goals were established in the enabling legislation that created the Office of Alcohol and Drug Abuse Prevention (Act 644 of 1977). These six goals, very broad in nature, are as follows:

1. To act as a strong advocate for needed services for alcohol and drug abusers in Arkansas and to assure that these needs are identified and presented to lawmakers and to key decision makers.
2. To assure the provision of comprehensive treatment and prevention services to citizens of Arkansas who have alcohol and/or other drug abuse problems or potential problems.
3. To assure that comprehensive services are tailored to the specific needs of individuals within each county and region of the State.
4. To assure that all services provided for the alcohol and drug abuser meet minimum standards required for quality care.
5. To allocate the available limited dollars to local communities in the most cost-efficient and cost-effective process available to the Agency.
6. to coordinate with other state agencies and voluntary agencies to assure maximum utilization of available resources and services.

Each goal and a review of its status are as follows:

1. **To act as a strong advocate for needed services for alcohol and drug abusers in Arkansas and to assure that these needs are identified and presented to lawmakers and to key decision makers.**

This goal was met in part by two significant events. During 1991, the Division of Alcohol and Drug Abuse Prevention provided leadership in founding The Interagency Coordinating Committee on Drug Abusing Pregnant Women and Drug Affected Infants. This 37 member committee has members from 25 different state and private non-profit agencies and has served as the springboard for joint grant applications and ultimately the establishment of the SSA's three (3) Pregnant and Parenting Women Living Centers. Also, during this same period, the Division presented a legislative package for the 78th Session of the Arkansas General Assembly. Although a great many of the bills were passed, including a \$3,593,010 expansion of adolescent and adult treatment services. However, due to the Revenue Stabilization Act, the Acts were placed in lower funding categories that were not implemented.

2. **To assure the provision of comprehensive treatment and prevention services to citizens of Arkansas who have alcohol and/or other drug abuse problems or potential problems.**

The Division funded a statewide treatment network of 25 residential and outpatient treatment facilities during FY'91. These geographically located facilities provided treatment services to 13,483 men, women and adolescents throughout the State. Additionally, all treatment providers had to be able to provide comprehensive treatment services to their clients either through direct service provision, by sub-contract, or by

referral. The Division, through a combination of funding sources, provided prevention programming through grants to private non-profit agencies. The basic prevention service was delivered through a group of 12 agencies which provided the Early Intervention Program. This skill building/decision making curriculum was available to all Arkansas citizens at no cost. Additionally, the Division funded approximately 21 Prevention Service Program grants with community-based organizations. This is in keeping with the SSA's philosophy that the local community knows best how to solve its own problems.

- 3. To assure that comprehensive services are tailored to the specific needs of individuals within each county and region of the State.**

The Division of Alcohol and Drug Abuse Prevention sub-divided the State into 13 catchment areas for treatment services and eight (8) regions for prevention programming. Funded treatment programs were required to provide services to their entire catchment area, thus providing comprehensive services to all 75 counties in the state. In addition, the Standards for the Accreditation of Alcohol and/or Other Drug Abuse Treatment Programs/Facilities require that treatment program Boards of Directors have representation from all counties in their catchment area, thus assuring that geographic interests were represented. Prevention programming statewide coverage was assured by funding 12 private non-profit agencies to deliver the Early Intervention Program (EIP) in eight (8) regions throughout the state. Each provider of EIP services was mandated to serve the counties in their region or partial region. Additionally, the Division funded two Prevention Service Program (PSP) grants in each of the eight (8) regions and two extra PSPs in the Central Region (largest population concentration area) and three (3) larger PSP grants on an at-large basis.

- 4. To assure that all services provided for the alcohol and drug abuser meet minimum standards required for quality care.**

As mentioned in item three (3) above, the Division of Alcohol and Drug Abuse Prevention has in place an accreditation process for the assurance of quality treatment services for all treatment providers in the State, both publicly funded and for-profit entities. These standards are applied using a peer-review process which includes Division staff as well as peer reviewers. The process is mandated by Act 597 of 1989 and applies to any entity holding itself out to be a provider of alcohol and or other drug treatment services. Additionally each program (treatment and prevention) receives at least one on-site monitoring visit each year and a desk review of monthly and quarterly reports.

- 5. To allocate the available limited dollars to local communities in the most cost-efficient and cost-effective process available to the Agency.**

The Division of Alcohol and Drug Abuse Prevention has historically allocated treatment program funding on a per capita catchment area basis. Such was the case in FY'91. Any other distribution or re-distribution of treatment funding was based on program utilization. Prevention funding was allocated as described in item three (3) above.

- 6. To coordinate with other state agencies and voluntary agencies to assure maximum utilization of available resources and services.**

The Division of Alcohol and Drug Abuse Prevention has continued its close association with the Arkansas Department of Health, the Divisions of the Arkansas Department of

Human Services, Arkansas Department of Correction, and other State agencies. As mentioned in item one (1) above the Division was a leader in establishing the Committee on Drug Abusing Pregnant Women and Drug Affected Infants. Additionally, the Division continued its working relationship with the University of Arkansas for Medical Sciences through its two Division-endowed professorships. The Division again served as a co-sponsor of the Mid-South Summer School on Alcohol and Other Drug Abuse Problems which brought together 768 participants for a week of continuing education in 1991.

2. HOW SUBSTANCE ABUSE FUNDS WERE USED - PREVENTION/EARLY INTERVENTION

The Arkansas Bureau of Alcohol and Drug Abuse Prevention (ADAP) continued to contract a significant portion of the ADMS Block Grants funds to support eleven community-based Early Intervention Programs during the period covered in this narrative. These programs are assigned specific geographical regions within the state to provide services which ensure that a variety of education/prevention/early intervention services are available to the public at no charge.

The EIP's, first funded in 1982, were originally developed as community-based "diversion" programs which were intended to provide Arkansas with effective and less expensive alternatives to treatment for those youth who were experimental, casual recreational and/or moderate substance abusers. The core of each program was a four (4) foci curriculum intended for small, highly interactive group presentations following a skill building, structured learning format, targeting family, youth, parents and the community. The strategies employed through these curricula are designed to address characteristics that correlate positively with reduced risk of alcohol and other drug abuse. Some of the characteristics are as follows:

- Strong identification with viable role models which enhance self concept and provide a positive reference group.
- High identification with and responsibility for "family" process which provides an identity with things greater than self and involves shared investments and responsibility for achievement of outcomes and accountability to others for behavior.
- Strong problem-solving skills which facilitate the ability to work through problems and enhance the belief that through the use of personal resources, solutions may be developed.
- Strong interpersonal skills which enable the individual to effectively communicate, negotiate and adapt their interaction with others.

While the life-skills curricula remains at the core of the EIP's, ongoing assessment and evaluation as well as the application of prevention research from other studies has caused the program to change in the following manner:

1. Application has shown that the EIP curricula represents an activity that can be more accurately described as primary prevention and has been redirected to an audience younger than that originally intended.
2. The curricula as written was not readily embraced by minority, high-risk and other, out of the mainstream populations. To begin to address this deficiency, EIP personnel were provided training in cultural awareness and sensitivity and shown ways to adapt materials to the specific needs of their target population.
3. A K-5 curricula was developed and distributed to further expand the materials available to enable those programs to begin to reach populations not previously served.

4. A Late-Onset Alcoholism Training Model for Formal and Informal Caregivers was accessed and is currently being field tested to further enhance these programs' capabilities to respond to the ATOD needs of our elder population.
5. Program dissemination, which originally relied greatly on adult volunteers, has shifted focus to now recruit and train youth to provide the EIP materials. This change has shown extremely positive results as it empowers the youth by providing opportunities for meaningful participation and responsibility.
6. An Early Intervention Program was placed in the Youth Services Centers to allow access to youth adjudicated by the Juvenile Court System. This program is currently undergoing substantial revision and redirection of program effort as the deficiencies note in the community-based EIP's are magnified tenfold in the detention setting.
7. Finally, ongoing training is provided to the EIP Coordinators and staff to allow them to more appropriately address the specific needs of alcohol and other drug education/prevention/intervention services within their catchment areas. During the period of this report, EIP Coordinators and their staff participated in an intensive Training of Trainers (TOT) using curricula developed by CSAP for their Community Partnership grant recipients. This training follows the previous year's TOT conducted by NASADAD/MACRO/The Circle.

The Early Intervention Programs provide the ADAP's only contracted/directed education/prevention/intervention services. ADMS Block Grant funding accounts for 66% of the funding costs allocated for this effort. Over 72,000 Arkansans were in receipt of these services in state fiscal year 1992. The Early Intervention program would be discontinued in the following fiscal year. These funds will be used to support the creation of Prevention Resource Centers.

Education, training and providing information and referral services to personnel from a variety of disciplines continues to occupy an important role in the attainment of our ADMS Block Grant prevention/early intervention goals. The ADAP continues to support teacher training programs housed at the University of Arkansas - Fayetteville and the University of Central Arkansas to instruct classroom teachers in innovative methods of infusing a holistic health education message into curricula for students in grades K-12. Specific funding is targeted to two local educational agencies (LEA's) to address the needs of those students in an Alternative classroom setting. The ADAP also provides block grant to support a consortium of representatives from the states' 41 campuses of higher education. This constitutes the states sole effort to provide coordinated ATOD prevention programs on these campuses. The Bureau continues to support the Mid-South Summer School on Alcohol and Other Drug Problems which entered its 19th year by providing topical presentations on a variety of ATOD issues to the almost 800 in attendance. Also included in this category is the ongoing support of the Arkansas Substance Abuse Certification Board which ensures quality standards are achieved by the AOD treatment community.

The ADAP also provides funds to twenty-two Chemical Free Living Centers (CFLC's) across the state to assist those individuals that have recently completed a state-certified AOD residential program in maintaining a drug-free lifestyle while they reintegrate into

mainstream society. A Substance Abuse Treatment Program (SATP) is also provided to inmates housed at seven units within the State Department of Correction.

The ADAP strives to assess on an ongoing basis those populations, areas and locations in the state with the greatest need for alcohol and other drug abuse prevention/intervention services and to target programs, resources and services accordingly. Most of the progress we have made in addressing these needs have been through the utilization of funds from sources other than the ADMS Block Grant, such as, the Department of Education Drug-Free Schools and Communities Act - Governor's Portion, CYAP Block Grant funds and through collaborative efforts with other state governmental agencies to maximize the tenuous levels of funds available to address these tasks. An inhouse evaluation of the type of services and programs currently supported through the use of ADMS Block Grant funds is underway. It is anticipated that portion of the funding available to certain efforts will be redistribute to further target identified prevention/intervention needs.

UPDATE ON FY 1993 GOALS

The following are the goals listed in last year's application and a progress report on their objectives:

Goal #1 To develop and implement a comprehensive statewide needs assessment process.

Objectives 1 and 2 were based on ADAP being awarded a CSAT Needs Assessment Grant. ADAP did not receive this grant and therefore these objectives were not attained.

Objective 3 was to continue the ADAP process for receiving public input. This was attained.

Comment: Currently, the ADAP is participating in the development of a needs assessment for the entire Department of Health. The most useful component of this needs assessment for the ADAP's purposes will be a mailed survey of the general public. The ADAP has never had this type of information before.

Goal #3 To monitor all prevention and treatment grants and to make any necessary changes to improve their quality and appropriateness.

Objectives 1 and 2 stated the ADAP's system of monitoring programs on-site and at the ADAP office. Both of these objectives were attained.

Comment: Monitoring has been enhanced this past year due to ADAP's move to the Health Department. As part of this process 4 financial personnel were transferred to the ADAP. All 4 staff members are experienced in alcohol and other drug grants and PC skills.

Goal #4 Address the treatment needs of substance abusers in the State.

Objective 1 addressed the need to provide treatment options.

Objective 2 addressed the needs of options for injection drug users. These objectives were attained.

Objective 3 addressed the need for continuous dissemination of current HIV information to treatment providers. This objective was attained.

Comment: In January, 1994 the ADAP and UAMS opened an injection drug users clinic with methadone services. This is the first in the state.

Goal #5 Insure that comprehensive treatment services are available in Arkansas for drug abusing pregnant women and women with small children.

Objective 1 was to award specific grants for residential centers for this client population. This was attained.

Objective 2 was to continue and enhance interagency cooperation for issues involving this client population. This was attained.

Comment: In 1993 the ADAP awarded 3 grants to establish Pregnant and Parenting Women Living Centers. These are comprehensive, residential treatment centers where pregnant women and women with small children may stay for a maximum of 2 years.

Also, in July of 1993 the ADAP sponsored a team to participant in the Community Team Training Institute.

Goal #6 To seek out potential applicants for the Revolving Loan Fund.

Objectives 1 and 2 addressed the promotion and assistance to potential applicants for this fund. These objectives were attained, but the number of applicants has not increased significantly.

Comment: During 1993, ADAP arranged for a volunteer representative of Oxford Houses, Inc. to address various groups within the state.

GENERAL COMMENT: For FFY'91, the base for services to pregnant omen with dependent children, tuberculosis services and for HIV early intervention was \$0.0. However, as noted above and in other sections of this application, the ADAP is moving forward on all these requirements in our current fiscal year.

SUBSTANCE ABUSE STATE AGENCY SPENDING REPORT

(Include ONLY funds flowing through your agency.)

State: **ARKANSAS**

Dates of State expenditure period: from 7/1/91 to 6/30/92
(same as Form 01)

SOURCE OF FUNDS

ACTIVITY

(See instructions for using Row 1)

ACTIVITY	ADMS Block Grant		C: Medicaid (Federal, State, and Local)	D: Other Federal funds (e.g., Medicaid, other Public Welfare)	E: State funds	F: Local funds (excluding local Medicaid)	G: Other
	A: FFY 1991 Award (spent)	B: FFY 1992 Award (obligated)					
1. Substance abuse treatment and rehabilitation							
2. Alcohol treatment and rehabilitation	1,465	2,152			520	631	863
3. Drug treatment and rehabilitation	1,465*	2,152			520		863
4. Prevention and early intervention	1,073	1,148		983			
5. Administration (excluding program/provider level)	226	287			366		
6. Column total	4,229	5,739		2,320	1,406	631	1,726

Form Approved

* See attached letter dated 11/12/93 from Elaine Johnson granting Arkansas a partial waiver for 1991 set-aside requirements for IVDD's

Application Page

Approval Expires:



Substance Abuse and Mental
Health Services Administration
Rockville MD 20857

NOV 12 1993

Mr.. Joe M. Hill
Director
Bureau of Alcohol and Drug Abuse
Prevention
Arkansas Department of Health
108 East 7th Street
400 Waldon Building
Little Rock, Arkansas 72201

Dear Mr. Hill:

Thank you for your letter of July 22 related to reconsideration of the State's request for partial waivers for fiscal years 1990 and 1991 of the Alcohol, Drug Abuse and Mental Health Services Block grant set-aside requirements for intravenous drug users (IVDU's).

In my October 30, 1992, letter, I denied the State's request for fiscal years 1990 and 1991 because of concern that insufficient resources had been directed toward treating IVDU's. Subsequently, in my letter of February 22, I stated that I would reconsider the State's request if you would reconfigure your budget in order to provide adequate funding for the clinic, and provide a detailed action plan outlining the steps necessary to implement the methadone pilot project.

In response, your letter of July 22 provided me a Notice of Grant Award to the University of Arkansas for Medical Sciences in the amount of \$260,000, with assurances, related to provision of methadone services; a lease agreement for 3,250 square feet of space for the clinic in the Mental Health Complex on State Hospital grounds in Little Rock; and a plan for the "Establishment of an Intravenous Drug Abuse Clinic at UAMS," revised by D. E. McMillan, July 1993. A subsequent attachment to your letter indicated that the likely date for opening the clinic is November 1993.

Based upon the information contained in your July 22 letter, I am granting partial waivers for \$514,859 for fiscal year 1990, and \$191,299 for fiscal year 1991 of the Alcohol, Drug Abuse, and Mental Health Services Block grant set-aside requirements for IVDU's.

The problem of substance abuse is not an isolated problem, but is attended by severely debilitating diseases that, due to their very nature, put persons other than substance abusers at risk of the diseases. When combined with HIV/AIDS, tuberculosis and

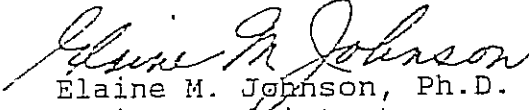
Page 2 - Mr. Joe Hill

sexually transmitted diseases, substance abuse is creating new demands on our Nation's public health and substance abuse treatment systems to offer comprehensive primary public health care to drug-dependent individuals.

In providing methadone maintenance services to residents of the State, you have broadened the health care spectrum to include a previously underserved substance abuse population. You are commended for leadership in the field of public health for your efforts on behalf of substance abusers and health care providers in the State.

The joint Federal-State partnership that exists between our agency and Arkansas is a source of pride, and I appreciate your continuing commitment to it.

Sincerely yours,


Elaine M. Johnson, Ph.D.
Acting Administrator

Detailing expenditures on prevention and early intervention (Row 4)

There are six prevention strategies typically funded by principal agencies administering the block grant. Here are definitions of those strategies:

Information -- This strategy provides knowledge and increases awareness of the nature and extent of alcohol and other drug use, abuse, and addiction, as well as their effects on individuals, families, and communities. It also provides knowledge and increases awareness of available prevention and treatment programs and services. It is characterized by one-way communication from the source to the audience, with limited contact between the two.

Education -- This strategy builds skills through structured learning processes. Critical life and social skills include decision making, peer resistance, coping with stress, problem solving, interpersonal communication, and systematic and judgmental abilities. There is more interaction between facilitators and participants than in the information strategy.

Community and professional mobilization -- This strategy provides ongoing networking activities and technical assistance to community groups or agencies. It encompasses neighborhood-based, grassroots empowerment models using action planning and collaborative systems planning.

Alternatives -- This strategy provides participation in activities that exclude alcohol and other drugs. The purpose is to meet the needs filled by alcohol and other drugs with healthy activities, and to discourage the use of alcohol and drugs through these activities.

Social policy and environmental change -- This strategy establishes or changes written and unwritten community standards, codes, and attitudes, thereby influencing alcohol and other drug use by the general population.

Early intervention -- This strategy is designed to come between a substance user and his or her actions in order to modify behavior. It includes a wide spectrum of activities ranging from user education to formal intervention and referral to treatment from a substance abuse professional.

Now refer back to Form 04 and look at all the entries you made on row 4 (prevention and early intervention). Use the table below to indicate how much funding supported each of the six strategies. Enter in whole dollar amounts.

	ADMS Block Grant		Other	State	Local	Other
	FFY 1991	FFY 1992	Federal			
<input type="checkbox"/> Information	\$ 153	\$ 95	\$ 0	\$	\$	\$
<input type="checkbox"/> Education	\$ 590	\$ 838	\$ 884	\$	\$	\$
<input type="checkbox"/> Community & Professional Mobilization	\$ 38	\$ 2.5	\$ 0	\$	\$	\$
<input type="checkbox"/> Alternatives	\$ 421	\$ 96.6	\$ 85	\$	\$	\$
<input type="checkbox"/> Social Policy & Environmental Change	\$ 0	\$ 0	\$ 0	\$	\$	\$
<input type="checkbox"/> Early Intervention	\$ 0	\$ 0	\$ 0	\$	\$	\$
TOTAL	\$1,101	\$1,032	\$,969	\$	\$	\$

Now complete the following checklist:

Did your State fund resource development activities from the FFY 1991 block grant?

Yes

No

If yes, show the amounts spent. These amounts may be part of lines 1 through 5 in column A. In describing resource expenditures, you are not limited to line 5 (Administration) funds alone. If you cannot separate expenditures on treatment resource development from those on prevention/early intervention resource development, just enter the total amount on the "Total" line at the right. Enter amounts in whole dollar.

	<u>Treatment</u>	<u>Prevention</u>	<u>Total</u>
<input type="checkbox"/> Planning, coordination, and needs assessment	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Quality assurance	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Training (post-employment)	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Education (pre-employment)	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Program development	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Research and evaluation	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Information systems	\$ _____	\$ _____	\$ _____
TOTAL	\$ _____	\$ _____	\$ _____

SUBSTANCE ABUSE FUNDING BY OTHER STATE AGENCIES AND OFFICES

Date: **ARKANSAS**

Dates of State expenditure period: from 7/1/91 to 6/30/92
 (Same as Form 01) (Providing financial data on this form is optional)

Information not available

SOURCE OF FUNDS

ACTIVITY Instructions Using Row 1)	SOURCE OF FUNDS				
	A. Medicaid (Federal, State, and Local)	B. Other Federal funds (e.g., Medicare, other public welfare)	C. State funds	D. Local funds (excluding local Medicaid)	E. Other
Substance abuse treatment and rehabilitation					
Alcohol treatment and rehabilitation					
Drug treatment and rehabilitation					
Prevention and early intervention		3,916			
Administration (excluding program/ provider level)		200			
Column total		4,116			

4. MAINTENANCE OF EFFORT REGARDING STATE EXPENDITURES

This item documents that aggregate expenditures by the principal agency of the State for authorized activities have been maintained at a level that is not less than the average level of such expenditures maintained by the State for the 2 year period preceding the fiscal year for which the State is applying for the grant.

1992 MOE (Combined Substance Abuse (SA) and Mental Health (MH))

Period	Expenditures	1990 + 1991 Average
SFY 1990 SA + MH	\$16,283,633	\$19,068,607
SFY 1991 SA + MH	21,853,582	
SFY 1992 SA + MH	24,070,494	

1993 MOE (Substance Abuse ONLY)

Period	Expenditures	1991 + 1992 Average
SFY 1991 SA Only	\$2,951,044	\$3,356,184
SFY 1992 SA Only	3,761,324	
SFY 1993 SA Only	3,755,281	

SUBSTANCE ABUSE ENTITY INVENTORY

(Complete columns 1-4 first. Then complete columns 5-11 for each entity.)

State: **ARKANSAS**

FFY 1991 award

1. Entity Number	2. NDATAUS ID	3. Area served	4. Use of funds	5. ADMS block grant	6. State funds	7. ADMS block grant	8. ADMS block grant	9. ADMS block grant	10. ADMS block grant	11. ADMS block grant
	Block ID, last 4 digits of NDATAUS ID	1. Federal, 2. State, 3. Private, 4. Other	1. Substance Abuse, 2. Drug Abuse, 3. Prevention, 4. Diversion, 5. Research, 6. Other		(Grant dollar amount)	for alcohol services	for drug abuse services	for prevention	for VDU services	for other
City of NLR	X	1	4	0	6			0		
Decision Point	AR100086	2	1	350	463	139	211			208
		2	1	36	0	18	18			
ARRVAC	AR901111	2	1	119	158	75	44			85
		2	1	36	0	18	18			

FFY 01 FFY02

City of NLR	Decision Point	ARRVAC	Total		Total		Total		Total		Total	
			350	463	139	211	0		208			
			36	0	18	18						
			119	158	75	44			85			
			36	0	18	18						

SUBSTANCE ABUSE ENTITY INVENTORY

(Complete columns 1-4 first. Then complete columns 5-11 for each entity.)

State: **ARKANSAS**

FFY 1991 award

1. Entity Number	2. NDATUS ID <small>Block ID: has the NDATUS ID</small>	3. Averb served <small>1. Entity of Entity 2. Date served 3. Date ended</small>	4. Use of funds <small>1. Statewide Abuse 2. Abuse 3. Drug Abuse 4. Prevention 5. Early Intervention 6. Diversion 7. Research 8. Development</small>	5. ADMS block grant	6. State funds <small>(Block grant funds expended)</small>	7. ADMS block grant funds <small>(for alcohol services)</small>	8. ADMS block grant funds <small>(for drug abuse services)</small>	9. ADMS block grant funds <small>(for prevention)</small>	10. ADMS block grant funds <small>(for IPV services)</small>	11. ADMS block grant funds <small>(for other services)</small>
City of NLR	X	1	4	0	6					
Decision Point	ARI00086	2	1	350	463	35	139	211	0	208
		2	1	36	0	18	18			
ARVAC	AR901111	2	1	119	158	23	75	44	18	85
		2	1	36	0	18	18			
<p>If last Form 06 page, enter State totals</p>										

Form Approved

Application Page 24

Approval Expires:

SUBSTANCE ABUSE ENTITY INVENTORY

(Complete columns 1-4 first. Then complete columns 5-11 for each entity.)

State:
ARKANSAS

FFY 1991 award

1. Entity Number	2. NDATUS ID <small>Match (a) box II no NDATUS ID</small>	3. Action served <small>1. Services of Entity 2. Subject area code</small>	4. Use of funds <small>1. Substance Abuse 2. Alcohol 3. Drug Abuse 4. Prevention 5. Early Intervention 6. Family Intervention 7. Research 8. Prevention Development</small>	5. ADMS block grant	6. State funds <small>(grant dated 5/1/90 or previous period)</small>	7. ADMS block grant <small>for alcohol services</small>	8. ADMS block grant <small>for drug abuse services</small>	9. ADMS block grant <small>for prevention</small>	10. ADMS block grant <small>for VDU services</small>	11. ADMS block grant <small>for program services</small>
Growley's		2	1	90	45	45				26
Delta Counseling	AR301478	2	4	31			74	31		
EGA-EDC	AR750120	2	1	134	28	50	84			77
Gateway House	AR900824	2	1	101	19	47	54			171

Enter at the end of each line: A. FFY 91 B. FFY 92

SUBSTANCE ABUSE ENTITY INVENTORY

(Complete columns 1-4 first. Then complete columns 5-11 for each entry.)

State: **ARKANSAS**

FFY 1991 award

1. Entity Number	2. NDATUS ID <small>Block (1) base ID no NDATUS ID</small>	3. Area served <small>1. Facility or Entity subject area code</small>	4. Use of funds <small>1. Substance Abuse 2. Alcohol 3. Drug Abuse 4. Prevention 5. Early Intervention 6. Outreach 7. Research Development</small>	5. ADMS block grant	6. State funds <small>(Open ended grant expenditures)</small>	7. ADMS block grant funds <small>for alcohol services</small>	8. ADMS block grant funds <small>for drug abuse services</small>	9. ADMS block grant funds <small>for prevention</small>	10. ADMS block grant funds <small>for VDU services</small>	11. ADMS block grant funds <small>for women services</small>
Gateway		2	1	18	0	9	9			
Harbor House	AR9008303	2	1	153	208	85	68			3
		2	1	18	0	9	9			
		2	4	62	67			62		
HDRS	AR901343	2	1	370	465	155	215			66
		2	1	18	0	9	9			

Enter at least one A. FFY 01 D. FFY 02

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SUBSTANCE ABUSE ENTITY INVENTORY

(Complete columns 1-4 (first). Then complete columns 5-11 for each entry.)

State: ARKANSAS

FFY 1991 award

1. Entity Number	2. NDATUS ID <small>Mark (x) has II no NDATUS ID</small>	3. Airoo served <small>1.6 Alcohol of Entity 2. Drug Abuse 3. Other Abuse 4. Prevention 5. Other</small>	4. Use of funds <small>1.6 Alcohol Abuse 2. Drug Abuse 3. Other Abuse 4. Prevention 5. Other</small>	5. ADMS block grant	6. State funds <small>(Federal dollar they spend on)</small>	7. ADMS block grant funds for alcohol services	8. ADMS block grant funds for drug abuse services	9. ADMS block grant funds for prevention	10. ADMS block grant funds for (VDO) services	11. ADMS block grant funds for other services			
NAHSS	AR901194	2	1	104	104	15	35	9	69	9	62	23	28
		2	1	18	0		9						
		2	4	62	67								
NADG	AR750013	2	2	74	77	14	64	10				9	
OMART	AR901137	2	1	69	90	16	43	26				1	
Quapaw House	AR901160	2	1	134	142	30	58	76				75	

Form Approved

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Approval Expires:

SUBSTANCE ABUSE ENTITY INVENTORY

(Complete columns 1-4 first, then complete columns 5-11 for each entity.)

State: **ARKANSAS**

FFY 1991 award

1. Entity Number	2. IDATUS ID <small>Make list last 11 no MODATUS ID</small>	3. Area served <small>1. Eligibility of Entity 2. Substance Abuse Area Code</small>	4. Use of funds <small>1. Substance Abuse 2. Alcohol 3. Drug Abuse 4. Prevention 5. Early Intervention 6. Overall 7. Other Development</small>	5. ADMS block grant	6. State funds <small>(Report during fiscal year period)</small>	7. ADMS block grant funds for alcohol services	8. ADMS block grant funds for drug abuse services	9. ADMS block grant funds for prevention	10. ADMS block grant funds for IVDU services	11. ADMS block grant funds for Alcohol Abuse Services	
Quapaw		2	1	18	0	9	9				29
Red River	AR750310	2	1	108	133	59	49				7
SARHC	AR301460	2	1	107	107	56	51				47
Dept. of Correction	ARI00169	1	1	155	155	77	78	35			290

Form Approved

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Approval Expires:

SUBSTANCE ABUSE ENTITY INVENTORY

(Complete columns 1-4 first. Then complete columns 5-11 for each entry.)

FFY 1991 award

State: ARKANSAS

1. Entry Number	2. ID/STATUS <small>ID Block ID MOA/MS ID</small>	3. Area served <small>1. Entity of Entry Subject was sent</small>	4. Use of funds <small>1. Substance Abuse 2. Alcohol 3. Drug Abuse 4. Prevention 5. Early Intervention 6. Outreach 7. Research 8. Development</small>	5. ADMS block grant	6. State funds <small>(Total direct funds expended period)</small>	7. ADMS block grant funds <small>(for alcohol services)</small>	8. ADMS block grant funds <small>(for drug abuse services)</small>	9. ADMS block grant funds <small>(for prevention)</small>	10. ADMS block grant funds <small>(for IVDU services)</small>	11. ADMS block grant funds <small>(for youth services)</small>
GYST House	AR301486	2	3	156	10		156			109
Family Service Agency	AR901152	2	3	24	2		24			9
Ozark Counseling	AR301635	2	4	65				65		
SEAMHC	AR301445	2	3	52	4		52			21

FFY 01 D. FFY 02

SUBSTANCE ABUSE ENTITY INVENTORY

(Complete columns 1-4 first. Then complete columns 5-11 for each entity.)

State: **ARKANSAS**

FFY 1991 award

1. Entity Number	2. IDATUS ID <small>Match 1st two digits of Entity IDATUS ID</small>	3. Award served <small>1. Start date of Entity 2. Award period 3. Award amount 4. Period covered 5. Agency/Department 6. Agency/Department 7. Title 8. Development</small>	4. Use of funds	5. ADMS block grant	6. State funds <small>(grant during early expenditure period)</small>	7. ADMS block grant funds <small>(or alcohol services)</small>	8. ADMS block grant funds <small>(or drug abuse services)</small>	9. ADMS block grant funds <small>(or prevention)</small>	10. ADMS block grant funds <small>(or IV/DU services)</small>	11. ADMS block grant funds <small>(or mental health services)</small>
Western AR Counsel & Guid.	AR301429	1	1	255	255	245	127	128		
AR Com. Cornerstone Found.	X	2	4	41	38					
Community Svc. Inc.	X	2	4	31	36					
Quachita Children's Center	X	2	4	31	36					
Youth Bridge	X	2	4	62	67					
AR College Personnel Assoc.	X	1	4	22	20					

Form 06 (Rev. 11/87)

SUBSTANCE ABUSE ENTITY INVENTORY

(Complete columns 1-4 first. Then complete columns 5-11 for each entry.)

State: Arkansas

FFY 1991 award

1. Entity Number	2. ID/STATUS <small>Must list box if no ID/STATUS no</small>	3. Area served <small>1. Statewide 2. Statewide or Entity 3. Subunit area code</small>	4. Use of funds <small>1. Substance Abuse 2. Alcohol 3. Drug Abuse 4. Prevention 5. Early Intervention 6. Outreach 7. Research 8. Other</small>	5. ADMS block <small>A: FFY 91 B: FFY 92</small>	6. State funds <small>(Report during first expenditure period)</small>	7. ADMS block <small>grant funds for alcohol services</small>	8. ADMS block <small>grant funds for drug abuse services</small>	9. ADMS block <small>grant funds for prevention</small>	10. ADMS block <small>grant funds for IV/DU services</small>	11. ADMS block <small>grant funds for mental health services</small>
Jonesboro School District	X	2	4	10	10			10		
Malvern School District	X	2	4	10	10			10		
U of Central AR	X	1	4	33	31			33		
U of A Fayetteville	X	1	4	30	30			30		
UALR	X	1	7	64	58			64		
DGRS- YSC	X ARI00268	1	1	96	0	48	48			

SUBSTANCE ABUSE ENTITY INVENTORY

(Complete columns 1-4 first. Then complete columns 5-11 for each entry.)

State: ARKANSAS

FFY 1991 award

Entity Number	2. NDATUS ID <small>Mark 'X' base if no NDATUS ID</small>	3. Avera served <small>1.5 Entity of Entity 2. State of Entity 3. DUNS Code</small>	4. Use of funds <small>1. Substance Abuse 2. Alcohol 3. Drug Abuse 4. Prevention 5. Other (Specify)</small>	5. ADMS block grant	6. State funds <small>(Grant detail, State spending period)</small>	7. ADMS block grant funds <small>for alcohol services</small>	8. ADMS block grant funds <small>for drug abuse services</small>	9. ADMS block grant funds <small>for prevention</small>	10. ADMS block grant funds <small>for VDU services</small>	11. ADMS block grant funds <small>for other services</small>	Total	
											4,533	4,868
Futures LR	X	1	5	0	7						4,533	4,868
Office of Gov-	X	1	4	0	70							
NOT	X	1	4	0	45							
s, Girls, lts Ctr.	X	1	5	0	45							
ty of rmott	X	1	5	0	45							
sssey D. rdan	X	1	5	0	45							

ENTITY INVENTORY LIST

1. City of North Little Rock
Sherman Park Recreation Ctr.
624 North Beech Street
North Little Rock, AR 72114
25. Arkansas Community
Cornerstone Foundation
P. O. Box 5822
Pine Bluff, AR 71611
26. Community Service, Inc.
P. O. Box 679
Morrilton, AR 72110
27. Ouachita Children's Center
339 Charteroak
Hot Springs, AR 71901
28. Youth Bridge
P. O. Box 668
Fayetteville, AR 72702
29. Arkansas College Personnel
Association
SAU Box 1364
Magnolia, AR 71753
30. Jonesboro School District
1307 Flint Street
Jonesboro, AR 72401
31. Malvern School District
525 East Highland
Malvern, AR 72104
32. University of Central AR
Department of Health Education
P. O. Box 5016
Conway, AR 72035-0001
33. University of Arkansas-
Fayetteville
HPER 326-A
Fayetteville, AR 72701
34. University of Arkansas-
Little Rock
2801 University
Little Rock, AR 72204
35. Division of Children and Family Services -
Youth Services Ctr.
P. O. Box 1437
Little Rock, AR 72203-1437
36. New Futures for Little Rock Youth
209 W. Capitol
2nd Floor Annex
Little Rock, AR 72201-3630
37. Office of the Governor
Arkansas Drugs Don't Work
State Capitol Building
Little Rock, AR 72201
38. Boys, Girls, Adults
Community Development Center
P. O. Box 1356
Marvel, AR 72366
39. City of Dermott
P. O. Box 371
Dermott, AR 71638
40. Massey D. Jordan Youth
Development
1314 S. Cherry
Pine Bluff, AR 71601

TREATMENT UTILIZATION MATRIX

(Complete one form for State and one for each SPA.)

Dates of State expenditure period: from 7-1-91 to 6-30-92
(Same as Form 01)

State planning area: STATE

UTILIZATION

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (the primary diagnosis)

State-validated count

	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of people served	E. Number of first-time admissions	F. Average cost per admission	G. Number of people served	H. Number of first-time admissions	I. Average cost per admission	J. (check one box) Yes No
Inpatient	61	N/A	N/A	35	N/A	N/A				X
Outpatient residential	1521	N/A	N/A	449	N/A	N/A				X
AMBULATORY (24-HOUR CARE)										
Inpatient (up to 30 days)	3104	2560	N/A	1532	1314	N/A				X
Inpatient (over 30 days)	0			183	158	N/A				X
AMBULATORY										
Outpatient	0			0						
Outpatient (up to 30 days)	2531	1903	N/A	1688	945	N/A				X
Outpatient (over 30 days)	237	N/A	N/A	172	N/A	N/A				X
AMBULATORY	0			0						

Application Page

Approval Expires

TREATMENT UTILIZATION MATRIX

(Complete one form for State and one for each SPA.)

Arkansas
 State planning area: 1

Dates of State expenditure period: from 7-1-91 to 6-30-92
 (Same as Form 01)

UTILIZATION

Primary Diagnosis of
 Alcohol Problems

Primary Diagnosis of
 Drug Problems

Substance Abuse Problems
 (no primary diagnosis)

State-validated count

	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of admissions	E. Number of first-time admissions	F. Average cost per admission	G. Number of admissions	H. Number of first-time admissions	I. Average cost per admission	J. (check one box) Yes No
Inpatient	0			0						
Outpatient	0			0						
Outpatient (over 30 days)	429	356	977.57	268	230	810				X
Outpatient (less than 30 days)	0			0						
Emergency	0			0						
Emergency (over 30 days)	194	156	405.98	99	71	497.19				X
Emergency (less than 30 days)	0			0						
Emergency (over 30 days)	0			0						

TREATMENT UTILIZATION MATRIX

(Complete one form for State and one for each SPA.)

Dates of State expenditure period: from 7-1-91 to 6-30-92
(Same as Form 01)

Arkansas
State planning area: 3

UTILIZATION

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State-validated count

	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of admissions	E. Number of first-time admissions	F. Average cost per admission	G. Number of admissions	H. Number of first-time admissions	I. Average cost per admission	J. (check one box) Yes No
Inpatient	0			0						X
Outpatient (up to 30 days)	77	58	1447.20	31	22	1333.39				X
Outpatient (more than 30 days)	0			0						
Residential	184	N/A	771.66	57	N/A	778.16				X
Subacute/RESIDENTIAL										
Other	0			0						
Subacute/AMBULATORY										
Other	0			0						X
Subacute/AMBULATORY	181	156	527.02	38	27	266.05				
Other	0			0						
Subacute/AMBULATORY	0			0						

TREATMENT UTILIZATION MATRIX

(Complete one form for State and one for each SPA.)

Dates of State expenditure period: from 7-1-91 to 6-30-92
(Same as Form 01)

Arkansas
State planning area: 5

UTILIZATION

CARE	Primary Diagnosis of Alcohol Problems			Primary Diagnosis of Drug Problems			Substance Abuse Problems (no primary diagnosis)			State-validated count
	A	B	C	D	E	F	G	H	I	
INPATIENT (24-HOUR CARE)	Number of admissions	Number of first-time admissions	Average cost per admission	Number of admissions	Number of first-time admissions	Average cost per admission	Number of admissions	Number of first-time admissions	Average cost per admission	(check one box) Yes No
Inpatient	14	N/A	677.77	3	N/A	4148				X
Outpatient	0			0						
Outpatient (over 30 days)	441	332	849.47	233	195	720.98				X
Outpatient (up to 30 days)	0			0						
Outpatient (less than 30 days)	0			0						
Outpatient (less than 30 days)	0			0						
Outpatient (less than 30 days)	155	110	850.34	67	42	559.49				X
Outpatient (less than 30 days)	5	N/A	372.67	3	N/A	N/A				X
Outpatient (less than 30 days)	0			0						

Application Page

Approval Expires

TREATMENT UTILIZATION MATRIX

(Complete one form for State and one for each SPA.)

Dates of State expenditure period: from 7-1-91 to 6-30-92
(Same as Form 01)

Arkansas
State planning area: 6

UTILIZATION

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State-validated count

CARE	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of admissions	E. Number of first-time admissions	F. Average cost per admission	G. Number of admissions	H. Number of first-time admissions	I. Average cost per admission	J. (check one box)	
										Yes	No
Inpatient	0			0							
Outpatient	0			0							
Residential	0			0							
Partial Inpatient	0			0							
Outpatient (up to 30 days)	242	210	937.29	75	72	945.70				X	
Outpatient (over 30 days)	0			0							
Psychiatric/AMBUATORY	0			0							
Medication	0			0							
Outpatient	206	131	717.56	114	65	225.31				X	
Outpatient	0			0							
Outpatient	0			0							

TREATMENT UTILIZATION MATRIX

(Complete one form for State and one for each SPA.)

Dates of State expenditure period: from 7-1-91 to 6-30-92
(Same as Form 01)

State: Arkansas
Substate planning area: 8

UTILIZATION

TYPE OF CARE	Primary Diagnosis of Alcohol Problems			Primary Diagnosis of Drug Problems			Substance Abuse Problems (no primary diagnosis)			State-validated count (check one box) Yes No
	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of people served	E. Number of first-time admissions	F. Average cost per admission	G. Number of admissions	H. Number of first-time admissions	I. Average cost per admission	
Hospital Inpatient	0			0						
Free-standing residential	0			0						
ADULT DAY/RESIDENTIAL										
Hospital Inpatient	0			0						
Short-term (up to 30 days)	201	174	902.32	98	91	829.92				X
Long-term (over 30 days)	0			0						
ADULT DAY/AMBULATORY Inpatient										
6. Methadone	0			0						
7. Non-methadone Intensive outpatient	72	58	372.06	29	25	305.57				X
Outpatient	0			0						

Form Approved

Application Page ___

Approval Expires: ___

TREATMENT UTILIZATION MATRIX

(Complete one form for State and one for each SPA.)

Date of State expenditure period: from 7-1-91 to 6-30-92
(Same as Form 01)

State: Arkansas
Substate planning area: 8

UTILIZATION

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State-validated count

	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of people served	E. Number of first-time admissions	F. Average cost per admission	G. Number of people served	H. Number of first-time admissions	I. Average cost per admission	J. (check one box) Yes No
Outpatient Inpatient	0			0						
Residential	0			0						
ADULTATION/RESIDENTIAL										
Long-term (up to 30 days)	201	174	902.32	98	91	829.92				X
Long-term (over 30 days)	0			0						
AMBULATORY										
Outpatient	0			0						
6. Methadone	72	58	372.06	29	25	305.57				X
7. Non-methadone	0			0						
Intensive outpatient	0			0						
Detoxification	0			0						

Form Approved

Application Page

Approval Expires:

TREATMENT UTILIZATION MATRIX

(Complete one form for State and one for each SPA.)

Dates of State expenditure period: from 7-1-91 to 6-30-92
(Same as Form 01)

State: Arkansas
Substate planning area: 9

UTILIZATION

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State-validated count

	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of people served	E. Number of first-time admissions	F. Average cost per admission	G. Number of people served	H. Number of first-time admissions	I. Average cost per admission	J. (check one box) Yes No
Outpatient	0			0	N/A	N/A				X
Outpatient Residential	0			0						
Residential	0			0						
Outpatient/Residential	0			0						
Short-term (up to 30 days)	674	579	943.47	222	195	829.29				X
Long-term (over 30 days)	0			183	158	2567.33				X
Outpatient/AMBULATORY										
Outpatient										
Medication	0			0						
Non-medication	451	363	496.39	335	259	494.09				X
Intensive outpatient	0			0						
Detoxification	0			0						

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Approval Expires

TREATMENT UTILIZATION MATRIX

(Complete one form for State and one for each SPA.)

Date: Arkansas
 Substate planning area: 10
 Dates of State expenditure period: from 7-1-91 to 6-30-92
 (Same as Form 01)

UTILIZATION

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State-validated count

	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of people served	E. Number of first-time admissions	F. Average cost per admission	G. Number of people served	H. Number of first-time admissions	I. Average cost per admission	J. (check one box) Yes No
Outpatient	0			0						
Outpatient (up to 30 days)	68	66	814.67	45	44	904.56				X
Outpatient (over 30 days)	0			0						
INPATIENT/RESIDENTIAL										
Outpatient	0			0						
Outpatient (up to 30 days)	294	253	374.51	72	60	275.36				X
Outpatient (over 30 days)	0			0						
INPATIENT/AMBULATORY										
Outpatient	0			0						
Outpatient (up to 30 days)	0			0						
Outpatient (over 30 days)	0			0						

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Approval Expires

TREATMENT UTILIZATION MATRIX

(Complete one form for State and one for each SPA.)

Date: Arkansas
 Substate planning area: 11

Dates of State expenditure period: from 7-1-91 to 6-30-92
 (Same as Form 01)

UTILIZATION

CATEGORIZATION (24-HOUR CARE)	Primary Diagnosis of Alcohol Problems			Primary Diagnosis of Drug Problems			Substance Abuse Problems (no primary diagnosis)			State-validated count
	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of admissions	E. Number of first-time admissions	F. Average cost per admission	G. Number of admissions	H. Number of first-time admissions	I. Average cost per admission	
Outpatient residential	46	N/A	560.86	31	N/A	637.27				X
Outpatient inpatient	0			0						
Short-term (up to 30 days)	149	86	725.49	109	70	678.98				X
Long-term (over 30 days)	0			0						
HOSPITAL/AMBULATORY										
Inpatient										
Outpatient	0			0						
METHODS										
Non-medication	201	113	103.83	103	65	87.41				X
Medication	0			0						
Outpatient	0			0						
Inpatient	0			0						

TREATMENT UTILIZATION MATRIX

(Complete one form for State and one for each SPA.)

State planning area: 12
 Dates of State expenditure period: from 7-1-91 to 6-30-92
 (Same as Form 01)

UTILIZATION

Primary Diagnosis of Alcohol/Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State-validated count

	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of people admitted	E. Number of first-time admissions	F. Average cost per admission	G. Number of people served	H. Number of first-time admissions	I. Average cost per admission	J. (check one box) Yes No
Outpatient	0			0			0			
Outpatient (over 30 days)	239	212	864.71	131	121	955.44				X
Outpatient (30 days or less)	0			0						
Residential	0			0						
Residential (over 30 days)	0			0						
Residential (30 days or less)	0			0						
Non-residential	167	119	994.71	491	100	182.28				X
Non-residential (over 30 days)	6	N/A	372.67	0						
Non-residential (30 days or less)	0			0						

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Application Page

Approval Expires:

TREATMENT UTILIZATION MATRIX

(Complete one form for State and one for each SPA.)

Dates of State expenditure period: from 7-1-91 to 6-30-92
(Same as Form 01)

State: Arkansas
State planning area: 13

Type of Care	UTILIZATION						State-validated count (check one box) Yes No			
	Primary Diagnosis of Alcohol Problems			Primary Diagnosis of Drug Problems						
	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of admissions	E. Number of first-time admissions	F. Average cost per admission	G. Number of admissions	H. Number of first-time admissions	I. Average cost per admission	J. (check one box) Yes No
Outpatient	0	N/A	366	0						X
Outpatient residential	1			0						
Short-term (up to 30 days)	0	1	N/A	0						X
Long-term (over 30 days)	0			0						
Partial Inpatient	0			0						
Intensive Outpatient	117	69	168.71	81	50	147.27				X
Residential	7	N/A	317.07	0						X
Other	0			0						

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Approval Expires:

TREATMENT UTILIZATION MATRIX

(Complete one form for State and one for each SPA.)

State: Dept. of Correction
 Youth Services
 State planning area: State

Dates of State expenditure period: from 7-1-91 to 6-30-92
 (Same as Form 01)

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State-validated count

UTILIZATION

	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of people served	E. Number of first-time admissions	F. Average cost per person	G. Number of people served	H. Number of first-time admissions	I. Average cost per admission	J. (check one box) Yes No
Outpatient Inpatient	0	0		0						
Outpatient Residential	0			0						
Detention (over 30 days)	13	12	N/A	12	12	N/A				X
Detention (under 30 days)	0			0						
Outpatient Ambulatory	0			0						
Outpatient	0			0						
Outpatient (Methadone)	112	991	836.97	60	53	836.97				X
Outpatient (Methadone) (YSC)	212	194	116.79	166	146	116.79				X
Outpatient (Methadone) (YSC) (SATP)	0			0						

Application Page _____

Approval Expires: _____

FILED

MAY 13 1994

W. J. "BILL" MCCUEN
SECRETARY OF STATE

BY _____

**III. INTENDED USE OF FFY 1994 BLOCK GRANT FUNDS
FOR THE PREVENTION AND TREATMENT OF
SUBSTANCE ABUSE**

1. How allotments will be used

This is similar to the first item of Section II, except that there are now separate block grants for substance abuse and for mental health. It documents any plans the State might have to transfer funds between these two block grants. Complete the following checklist:

Does the State plan to make any transfers between FFY 1994 substance abuse and mental health block grants?

Yes

No

If yes, indicate the type of transfer and the amount, and briefly explain why the transfer will be made. Provide a copy of the Chief Executive Officer's letter to Administrator, SAMHSA.

Substance abuse to mental health \$ 1,034,945

Mental health to substance abuse \$ _____

Reason:

Due to an increase for alcohol and drug abuse programming and a concurrent decrease for mental health services in FFY 1993, and FFY 1994, the State of Arkansas transferred \$1,034,945 to minimize the effects of the reduction and to allow time for the identification of alternative resources.

GOALS, OBJECTIVES AND ACTIVITIES

1. An agreement to utilize not less than 35 percent of the grant for prevention activities and treatment services regarding alcohol, and not less than 35 percent of the grant for prevention activities and treatment services regarding other drugs.

STATE GOAL - The Bureau of Alcohol and Drug Abuse Prevention (ADAP) will continue to monitor closely all SAPT expenditures in order to assure the requirement to expend not less than 35% of the grant for alcohol treatment and 35% for other drug treatment.

OBJECTIVES

1. The initial budget allocations will be made in compliance with this requirement.
2. Individual grants will stipulate an amount of alcohol and/or other drug funds.
3. ADAP financial staff will monitor utilization monthly and will initiate adjustments in grants whenever compliance is threatened.

Comment: Within the last year the ADAP increased its financial staff by four positions. Each of these financial persons has extensive PC skills and experience in alcohol and other drug treatment grants and billing. Therefore, ADAP's monitoring abilities have been enhanced.

2. An agreement to spend not less than 20 percent on primary prevention programs for individuals who do not require treatment for substance abuse.

STATE GOAL: - Implement and maintain an alcohol, tobacco and other drug (ATOD) education and primary prevention system that maximizes available resources, targets unserved and underserved populations, and empowers communities.

OBJECTIVES:

1. To create a total of eleven regional Prevention Resource Centers to provide community-based Alcohol, Tobacco, and Other Drug primary prevention and education programming services necessary to facilitate community empowerment in addressing these issues.
 - 1.1 Advertise for bid in those areas not currently served by a Prevention Resource Center the availability of funds for the establishment of such a center.
2. To create a total of sixteen Community Coalitions intended to involve community leaders, multiple diverse organizations and/or interest groups in local communities in more effectively coordinating primary prevention programs and developing ATOD initiatives.
 - 2.1 Create an RFA and advertise the availability of funds for the support of this initiative.
 - 2.2 Provide support services to the coalitions that will consist of targeted training opportunities and technical assistance through the regional PRCs and the Bureau.
3. To continue to support primary ATOD prevention programming which is intended to enhance the availability of these services to African-American high risk youth which reside in the Delta region in eastern Arkansas.
 - 3.1 To provide funding for a minimum of four projects to provide high risk African American youth - 1) after school, weekend and/or summer activities; 2) projects aimed at youth not in school or at risk of dropping out; 3) participation in activities involving the business community 4) projects that involve youth that are members of gangs or susceptible to joining; and/or 5) projects that include a cultural awareness component.
4. To continue support for the Governor's Partnership on Substance Abuse Prevention which will work with local primary prevention initiatives, conferences and trainings related to cultural diversity, ATOD, parents in the workplace and assist in the statewide coordination of the Red Ribbon Campaign.
 - 4.1 Provide funding to maintain a coordinator for this effort within the Bureau.

5. To provide educational opportunities and technical assistance to interested individuals, educators and others on issues surrounding effective strategies in ATOD primary prevention programming.
 - 5.1 Continue to host for the 21st year the Mid-South Summer School on Alcohol and Other Drug Abuse Problems.
 - 5.2 Continue to provide teacher pre-service training to teachers and students through the University of Central Arkansas and University of Arkansas at Fayetteville Health Education Programs.
 - 5.3 Provide continued support for the Arkansas College Personnel Association's Task Force on Alcohol and Other Drug Education Programs for Colleges and Universities.
6. To disseminate and make available ATOD information and other resource materials to the general public, community groups, schools and other organizations free from any charge.
 - 6.1 To maintain an on-site clearinghouse library of pamphlets, brochures, posters, video tapes and other material to be distributed upon request.
 - 6.2 To expand and maintain the Regional Alcohol and Drug Abuse Resource (RADAR) Associate Network.
 - 6.3 To create and maintain a statewide interactive computer bulletin board system to provide ATOD information, availability of funds announcements, laws and regulations, etc, as well as "echo" requests to the RADAR and Internet systems.

3. An agreement to increase by 5 percent of the Block Grant the availability of treatment services designed for pregnant women and women with dependent children; and, directly or through arrangements with other public or nonprofit private entities, to make available prenatal care to women receiving such treatment services, and, while the women are receiving services, childcare.

STATE GOAL - The ADAP will increase by a minimum of 5% the amount of SAPT funds specifically for services to pregnant women and women with dependent children.

OBJECTIVES:

1. By March, 1994, an RFP will be announced for a Pregnant and Parenting Women Living Center (PPWLC).
2. Effective July 1, 1994, an additional PPWLC will be awarded for approximately \$100,000.

Comment: Last year the ADAP awarded three PPWLC grants. PPWLCs are comprehensive, residential treatment centers for pregnant women and women with small children. Residents may stay for two years.

4. **An agreement to provide treatment to intravenous drug abusers that fulfills the 90 percent capacity reporting, 14-120 day performance requirement, interim services, outreach activities and monitoring requirements.**

STATE GOAL: To develop and implement by July 1, 1994 an agreement with providers offering treatment services to IDUs that fulfills the 90% capacity reporting, 14-120 day performance requirement, interim services, outreach activities and monitoring requirements.

OBJECTIVES:

1. Develop a draft agreement

ACTION STEPS:

- 1.1 By April 1, 1994, the Treatment Division of the ADAP will have developed a draft agreement reflecting the requirements of this section.
2. Form a consensus with IDU treatment providers concerning the agreement.

ACTION STEPS:

- 2.1 By May 1, 1994 the Treatment Division will meet with representatives of IDU treatment programs to discuss the agreement.
3. Develop and implement a finalized agreement.

ACTION STEPS:

- 3.1 By July 1, 1994 a finalized agreement will be in place for the new grant year.

5. An agreement, directly or through arrangements with other public or nonprofit private entities, to routinely make available tuberculosis services to each individual receiving treatment for substance abuse and to monitor such service delivery.

STATE GOAL: - Continue to provide tuberculosis related services to all clients of funded alcohol and other drug treatment facilities through a memorandum of agreement with the Arkansas Department of Health Tuberculosis Division.

OBJECTIVES:

1. Test all clients admitted to funded residential treatment facilities for tuberculosis.

ACTION STEPS:

- 1.1 Continue to train residential treatment facility staff to administer and read tuberculosis tests, thereby assuring adequate trained staff and availability of on-site testing.
- 1.2 Test all clients for tuberculosis and refer those individuals in need of follow-up services.
2. Provide tuberculosis related services to all clients.
 - 2.1 Refer all skin-test positive clients to the local county health unit for confirmatory x-ray.
 - 2.2 Provide medical intervention via assignment to a physician for all x-ray confirmed tuberculosis cases. Activities will be carried out by the local county health unit.
 - 2.3 Provide follow-along activities for cases where medical intervention has occurred. Activities will be carried out by the local county health unit.
3. Provide assurance of tuberculosis service delivery.
 - 3.1 Provide for tuberculosis related services to all AOD treatment clients by including a provision for such services in the Single State Agency funding proposal assurances and signed off by the grantee as a condition of receiving the grant.
 - 3.2 Assure the provision of skin testing, referral, and other related tuberculosis through the review of client case records during on-site monitoring visits by Bureau staff.
 - 3.3 Meet at least quarterly with Tuberculosis Division staff to discuss provision of referral services, patient assignment to a physician, medical intervention, and follow-along services.

6. An agreement, by designated States, to provide treatment for persons with substance abuse problems with an emphasis on making available within existing programs early intervention services for HIV in areas of the State that have the greatest need for such services and to monitor such service delivery

STATE GOAL - The ADAP will assure that early intervention services for HIV clients will be provided by all grantees.

OBJECTIVES:

1. By July, 1994, all ADAP grantees will be informed about the Ryan White Consortia services and other HIV/AIDS services and support groups in their catchment areas.
2. By July, 1994, each grantee will be required, as part of their annual Progress Report, to develop an action plan and submit it to the ADAP. This action plan will describe the early intervention services they will provide to their known HIV clients.
3. These services will be monitored at the time of accreditation and case review visits.

Comment: For several years the ADAP, the AIDS/STD Unit of the Health Department, and the ADAP grantees have been working cooperatively on HIV/AIDS issues. These areas of cooperation include:

- An ADAP policy and procedures
- Training opportunities
- Pre- and post-test counseling

7. **An agreement to continue to provide for and encourage the development of group homes for recovering substance abusers through the operation of a revolving loan fund.**

STATE GOAL: - Actively utilize the ADAP Revolving Loan Fund to assist recovering alcoholics and drug addicts in transitioning back into society.

OBJECTIVE:

1. To seek out potential applicants for the Revolving Loan Fund.

ACTION STEPS:

- 1.1 Advertise the availability of the Revolving Loan Fund on a semi-annual basis via newspaper, mailing lists, providers meetings, etc.
- 1.2 Continue to meet with community groups who might have a potential interest in utilizing the Revolving Loan Fund.
2. To assist applicants in successfully applying for a loan from the Revolving Loan Fund.
 - 2.1 Meet with all interested parties to explain the Revolving Loan Fund process.
 - 2.2 Assist applicants, as needed, in the application process.
3. To assure the continuation of the Revolving Loan Fund.
 - 3.1 Monitor all active loans to assure current status.
 - 3.2 Operate the Revolving Loan Fund in accordance with standards of the Arkansas Legislative Council Joint Audit annual review.

8. An agreement to establish State law that makes it unlawful for any manufacturer, retailer, or distributor of tobacco products to sell or distribute any such product to any individual under the age of 18; and, to enforce such laws in a manner that can reasonably be expected to reduce the extent to which tobacco products are available to individuals under age 18.

STATE GOAL - Monitor the implementation and enforcement of State laws that forbid any manufacture, retailer or distributor of tobacco products to sell or distribute any such product to any individual under the age of 18 and subsequently reduce the extent to which tobacco products are made available to individuals under 18.

OBJECTIVES:

1. Coordinate with those state agencies responsible for the enforcement of Arkansas tobacco laws to insure that such laws are being enforced.
 - 1.1 Coordinate with the Arkansas Alcoholic Beverage Control (ABC) to monitor tobacco law enforcement activities carried out by the ABC.
 - 1.2 Coordinate with the Arkansas Department of Health - Food Protection Services Section to monitor tobacco law enforcement activities carried out by the Food Protection Services Section.
 - 1.3 Develop a Memorandum of Agreement with the Department of Finance and Administration to provide for implementation of tobacco licensure sanctions and enforcement actions.
2. Coordinate with key state legislators to enact stricter enforcement policies forbidding access to tobacco products by individuals under age 18.
 - 2.1 Obtain input from key state agencies that enforce tobacco laws as to progress to date, problems encountered, and recommendations for improvement.
 - 2.2 Notify key state legislators as to results of 2.1.
 - 2.3 Aide key state legislators in the drafting of proposed legislation that would strengthen tobacco law enforcement.

9. An agreement to ensure that each pregnant women be given preference in admission to treatment facilities; and, when the facility has insufficient capacity, to ensure that the pregnant women be referred to the State, which will refer the women to a facility that does have capacity to admit the women, or if no such facility has the capacity to admit the women, will provide interim services, including a referral for prenatal care.

STATE GOAL - The Bureau of Alcohol and Drug Abuse Prevention will establish policies and procedures to insure priority services and interim services to pregnant women.

OBJECTIVES:

1. By July, 1994, the ADAP will promulgate a policy and procedures for all grantees which will detail the steps each of them must take to insure this requirement.
2. By July, 1994, this assurance will be incorporated into treatment grant renewals.

Comment: Since the ADAP currently has three Pregnant and Parenting Women Living Centers and will have another by July, 1994, the capacity for serving this population has increased and will continue to increase.

10. **An agreement to improve the process in the State for referring individuals to the treatment modality that is most appropriate for the individual.**

STATE GOAL - The Bureau of Alcohol and Drug Abuse Prevention (ADAP) will develop a standardized assessment tool and criteria for standardized placements into the various treatment modalities.

OBJECTIVES:

1. By March, 1994, the ADAP will convene a meeting(s) of representatives for appropriate organizations to draft recommendations for a standardized assessment tool and standardized placement criteria.
2. By July, 1994, these changes will be implemented as a part of grant requirements.
3. These changes will be monitored after July, 1994 as a part of accreditation and case review visits.

Comment: This assurance will be a high priority because the ADAP believes that this is a necessary step in the preparation for Health Care Reform.

11. **An agreement to provide continuing education for the employees of facilities which provide prevention activities and treatment services.**

STATE GOAL: To ensure that each and every prevention training conducted in the state of Arkansas is designed to be outcome oriented, focused on the arena of application, tied to a long range plan, based on an acceptable theoretical framework, planned and executed collaboratively and be designed to build capacity and empower each person to promote and actively demonstrate a healthy lifestyle.

OBJECTIVES:

1. To provide ATOD prevention and training opportunities which are relative to the assessed need of the target audience and will serve to further improve the current system for delivering ATOD primary prevention and treatment services.

ACTION STEPS:

- 1.1 Continue to host, for the 21st year, the Mid-South Summer School on Alcohol and Other Drug Abuse Problems that actively involves a broad base of ATOD professionals in its planning, organization and delivery.
- 1.2 Participate in the State Capacity Building Training system project administered under CSAP contract by NASADAD and Circle Solutions. Provide training opportunities that are designed to target the needs identified through this process.
- 1.3 Support the Project Addictions Counselors Training (PACT) program to be administered by the University of Arkansas at Little Rock Graduate School of Social Work to provide tuition free training opportunities, coursework and internships to those seeking addiction counselor certification for job placement in licensed treatment facilities.
- 1.4 Support the peer led training events provided by the Arkansas Substance Abuse Certification Board and the Arkansas Prevention Certification Board.
- 1.5 Provide for the PRC Coordinators and their staff a 3 day workshop on Facilitation Skills Development learning process to be conducted through the SCBT initiative.
- 1.6 Provide for the Community Coalition grant recipients a School Community Team Training event to be coordinated with the Southwest Regional Center for Drug-Free Schools and Communities.
- 1.7 Provide replications via volunteer trainers, courses which were conducted in Arkansas by the Center for AIDS and Substance Abuse Training and Westover Consultants.

12. **An agreement to coordinate prevention activities and treatment services with the provision of other appropriate services.**

STATE GOAL: To provide coordinated ATOD prevention activities and treatment services that are designed to maximize the existing resources available at the local, state and Federal levels.

OBJECTIVE:

1. To design and implement a pilot drug diversion court coordinated with the legal and treatment communities that will be designed to identify and provide on-going monitoring and treatment services to those adjudicated of non-violent offenses and determined to be in need of AOD counseling.
2. To provide training in establishing student assistant programs to educators and community based prevention/treatment providers on establishing effective assessment and referral programs for the student abusing AOD.
 - 2.1 To co-sponsor a regional Student Assistance Program training event for educators and treatment providers.
3. To mandate that current and future Pregnant and Parenting Women Living Centers utilize all possible resources and to coordinate them via their case manager.
4. To mandate that the IDU Clinic utilize all possible resources and to coordinate them via staffing and case management activities.
5. To monitor via accreditation visits and case review visits that AOD programs have up-to-date referral systems and that these are utilized for their clients.

13. **An agreement, to submit an assessment of the need in the State for authorized activities, both by locality and by the State in general.**

STATE GOAL - The Bureau of Alcohol and Drug Abuse Prevention (ADAP) will continue to pursue activities related to a statewide needs assessment targeting specifically treatment catchment areas.

OBJECTIVES

1. The ADAP will continue to participate in the development of an Arkansas Health Department needs assessment which was begun in 1993.
2. The ADAP will pursue grant opportunities to fund needs assessments.

Comment: The ADAP is currently reorganizing and will have a new section which will coordinate all planning, research and data information. This action should facilitate any future attempts at developing needs assessment.

14. An agreement to ensure that no program funded through the Block Grant will use funds to provide individuals with hypodermic needles or syringes so that such individuals may use illegal drugs.

STATE GOAL: - Implement a method to insure that no Block Grant funds are used by funded programs to supply hypodermic needles or syringes to addicts, thus promoting illegal drug use.

OBJECTIVE:

1. To provide written assurance that no Block Grant funded programs provide hypodermic needles or syringes as a part of their services.
 - 1.1 Continue the written prohibition of grantees using Block Grant funding for supplying hypodermic needles or syringes, as stated in Single State Agency funding proposal assurances and signed off by the grantee as a condition of receiving the grant.
 - 1.2 Continue the written prohibition of grantees using Block Grant funding for supplying hypodermic needles or syringes, as stated in the Single State Agency's Policies and Procedures Manual which all grantee agencies are required to follow.
2. To develop a monitoring system that will confirm that no Block Grant funded grantee is providing hypodermic needles or syringes as a part of their services.
 - 2.1 Revise the Single State Agency's Accreditation Standards Manual for Alcohol and/or Other Drug Abuse/Addiction Treatment Programs to include items to monitor both the financial, as well as, programmatic aspects of supplying hypodermic needles or syringes, thus confirming compliance with both federal and state regulations.

15. **An agreement to assess and improve, through independent peer review, the quality and appropriateness of treatment services delivered by providers that receive funds from the Block Grant.**

STATE GOAL - Assess and improve, via independent peer review, the quality and appropriateness of treatment services delivered by providers that receive funds from the Block Grant.

OBJECTIVES

1. Clarify the peer review process for all providers/program reviewed under the peer review provision.
 - 1.2 Obtain input from all concerned groups (i.e., Arkansas Association of Alcohol and Drug Abuse Counselors, Arkansas Non-Profit Treatment Providers Association, Arkansas Association of Substance Abuse Treatment Programs, etc.) regarding the revised process.
 - 1.3 Incorporate the revised peer review process into the SSA's Accreditation Standards Manual for Alcohol and/or Other Drug Abuse/Addicted Treatment Programs.
 - 1.4 Obtain approval of the revised peer review process from the Arkansas Alcohol and Drug Abuse Authority.
 - 1.5 Revised peer review process will be initiated once the Accreditation Manual completes the promulgation process.

16. An agreement to ensure that the State has in effect a system to protect from inappropriate disclosure patient records.

STATE GOAL - To enforce the requirements of 42 CFR, Part 2.

OBJECTIVES:

1. Monitor all treatment programs that are under the direct accreditation jurisdiction of the Single State Agency (SSA) for compliance with the confidentiality and client rights standards mandated by the SSA.
 - 1.1 All treatment programs under the direct accreditation jurisdiction of the SSA will receive at least annually a review that will include a mechanism for determining program compliance with 42 CFR, Part 2 and related standards.
 - 1.2 The SSA will investigate possible violations of confidentiality/client rights standards and/or violations of 42 CFR, Part 2.
2. The SSA will provide increased knowledge in the areas of client confidentiality/rights and 42 CFR, Part 2.
 - 2.1 When treatment programs are found not to be in full compliance with client confidentiality/rights standards and/or found to have violated 42 CFR, Part 2, corrective action plan will be mandated and technical assistance/training provided. Increased monitoring will also occur with those programs.
 - 2.2 Workshops on 42 CFR, Part 2 will be provided by SSA staff through coordination with concerned groups (i.e., Arkansas Substance Abuse Certification Board, Arkansas Association of Alcohol and Drug Abuse Counselors, etc.).
 - 2.3 Technical assistance on 42 CFR, Part 2 will be provided, as deemed appropriate, with entities that provide subordinated services for treatment programs (i.e., County Health Units that provide HIV testing for treatment program clients).
3. The SSA will enforce confidentiality requirements and, if deemed necessary, provide punitive actions (i.e., reduction of contract, revocation of contract, revocation of accreditation, prosecution of violators by Arkansas Department of Health legal staff, notification of other agencies such as the DEA or USDA of violations).

SUBSTATE PLANNING

ARKANSAS

Within this item of the application, as well as some of the subsequent items, forms, and attachments, reference is made to estimations of the various client populations needing services. The State of Arkansas has not conducted a comprehensive needs assessment as yet, although FFY94 funds are allocated to do so. Therefore, no estimations are being provided for this application. However, the State has utilized a trial format to test the allocation of funding utilizing population figures for substate planning areas, drug-related crime statistics for those substate planning areas, and drug-related infectious disease rates for those substate planning areas. The trial proved successful and the State will utilize this method of allocating treatment funding beginning July 1, 1994.

The State is planning to develop a comprehensive needs assessment in calendar year 1994. The Single State Agency (SSA) for Arkansas was transferred from the Department of Human Services to the Arkansas Department of Health (ADH) as of July 1, 1993. As stated in last year's application, the anticipated close working relationship has occurred and the SSA now has access to the ADH Epidemiology Unit as a sister agency. Furthermore, the ADH is currently conducting a feasibility study of a statewide needs assessment. All bureaus/divisions will be able to participate in the needs assessment, if the decision to proceed is made.

Plans for substance abuse treatment and prevention by ADAP in Arkansas are developed for eight (8) planning regions.

These regions are divided into thirteen (13) catchment areas. We also plan for certain target populations (youth, IDU, women, minorities and the elderly).

We are not responsible for the development of sub-state plans. Since our services are community-based, local providers submit grant applications to ADAP. However, we do have procedures that grant applicants must follow.

Since we do not develop sub-state or local plans, the only plan we are responsible for is the Annual Plan. Since our Annual Plan has served as our state application for federal funds, our timetable of developing it has been dependent upon deadlines and guidelines from the Federal government (those may vary from year to year). However, the process usually takes approximately four calendar months to complete, including gathering and interpreting statistics from providers throughout the State, adding new or updated information to the format, public comment period, rewriting and printing time. As a part of Arkansas' state requirement (Administrative Procedures Act), a legislative hearing is required to approve our Annual Plan and our state's application for funds. In addition, the recent transfer to the Arkansas Department of Health has expanded the public hearing process. The ADH requires a public hearing, separate and apart from the legislative hearing for all funding applications submitted by the ADH.

Data collected consists of treatment admissions/discharge information collected from all accredited treatment providers through the ADAP Alcohol/Drug Abuse Management Information System; State Drug Task Force information on arrests/confiscations; Arkansas Department of Health AIDS/STD incidence and prevalence information; Arkansas State Crime Lab Drug Analysis reports; Arkansas census information. As has been stated previously, Arkansas currently does not have a valid needs assessment process to be able to accurately track trends, therefore, much of this data is used anecdotally to provide general direction to the ADAP in decision making.

Additionally, the ADAP relies on the Arkansas Alcohol and Drug Abuse Authority as a board of review for policy/program and allocation review. This six (6) member Governor appointed citizen panel meets quarterly to provide input and to approve planning related issues.

The twenty-three (23) member Governor appointed (according to Legislative mandate) Arkansas Alcohol and Drug Abuse Coordinating Council serves as a board of review for the Governor's portion of the Drug-Free Schools and Communities Grant funding decisions.

PUBLIC INPUT

The Arkansas Bureau of Alcohol and Drug Abuse Prevention (ADAP) meets with the Arkansas Association of Substance Abuse Treatment Programs (AASATP) and the Arkansas Nonprofit Treatment Providers Association (ANTPA) to discuss and explore substance abuse issues and trends. The ADAP also meets with all funded treatment providers on a quarterly basis for the sharing of information and the solicitation of input. The Annual Plan and Block Grant Application is released to the AASATP, the ANTPA, the Arkansas Association of Alcoholism and Drug Abuse Counselors, the Arkansas Substance Abuse Certification Board, as well as advertised for a 20 day public comment period in the Arkansas Democrat-Gazette statewide newspaper. In compliance with Executive Order 123872, the State A95 Clearinghouse review process is utilized and a legislative committee public hearing is conducted. Additionally, as noted in the previous section (Substate Planning), since transfer to the Arkansas Department of Health on July 1, 1993, the Single State Agency is required to conduct a public hearing, separate and apart from the legislative hearing for all funding applications submitted by the Arkansas Department of Health.

A six member Governor appointed citizen Alcohol and Drug Abuse Authority acts as a board of review in areas of policy and funding allocation, including the Annual Plan and Block Grant Application. In developing this FY94 Block Grant Application, it was the ADAP's expectation to utilize a series of town meetings to gather grass roots input from across the state. This plan was contingent upon the availability of a staff position to coordinate these activities. Since the position has been acquired only in the last two weeks, this was an unrealized expectation. Therefore, it is the intention of the ADAP during FY94 to conduct a series of town meetings across the state to assist the ADAP in the formulation of plans for the development of the 1994 SAPT Block Grant Application.

The State will utilize a series of tools to assure that funded programs serve communities with the highest prevalence and need based on a comprehensive needs assessment process as outlined by Dr. Eric Wish, CSAT Consultant. The ADAP has available several computer-generated monthly reports which measure utilization and slot capacity. This will be paired with another computer generated report which will measure activity of funded programs in serving identified Injection Drug Users. The ADAP also reviews on a monthly basis data generated by the State-funded Drug Task Forces, the drug analysis reports of the State Crime Lab, the quarterly report of the Arkansas Department of Health AIDS/STD unit, as well as the annual progress reports of the funded treatment and Early Intervention Program providers. The ADAP utilizes these desk-review techniques as well as on-site monitoring and accreditation processes.

Use the following checklist to indicate the criteria your State will use in deciding how to allocate FFY 1994 funds. Mark all criteria that apply. Indicate the priority of the criteria by placing numbers in the boxes. For example, if the most important criterion is "incidence and prevalence levels," put a "1" in the box beside that option. If two or more criteria are equal, assign them the same number.

- 1 Population levels (Specify formula: _____)
- 2 Incidence and prevalence levels
- 1 Problem levels as estimated by alcohol/drug-related crime statistics
- 1 Problem levels as estimated by alcohol/drug-related health statistics
- Problem levels as estimated by social indicator data
- Problem levels as estimated by expert opinion
- Resource levels as determined by _____ (specify method)
- Size of gaps between resources (as measured by _____) and needs (as estimated by _____)
- 1 Other: Prevention projects - competitive (specify)
bid

TREATMENT NEEDS ASSESSMENT SUMMARY MATRIX

State: ARKANSAS

Calendar Year 1992

1. SUBSTATE PLANNING AREA	2. Total population	3. Total population in need		4. Number of IVDPs in need		5. Number of women in need		6. Prevalence of substance-related criminal activity			7. Incidence of communicable diseases		
		A. Needing treatment services	B. That would seek treatment	A. Needing treatment services	B. That would seek treatment	A. Number of DWI arrests	B. Number of drug-related arrests	C. Other (specify)	A. Hepatitis B/100,000	B. AIDS/100,000	C. Tuberculosis/100,000		
1	241,180	18132	1813	169	18	12287	1229	2131	3222		2.07	7.05	5.39
2	86,991	6722	672	74	7	4509	451	1011	924		3.58	14.34	8.96
3	193,036	14595	1459	47	15	9976	998	1604	1900		4.66	5.70	11.91
4	235,071	17272	1727	44	17	12183	1218	2160	2680		2.13	5.10	14.04
5	205,089	15028	1503	207	15	10519	1052	2131	3961		3.90	12.19	11.70
6	168,989	12527	1253	47	13	8669	867	1250	2173		5.33	11.24	4.73
7	150,885	10215	1021	8	10	8020	802	1710	2075		7.29	11.27	7.95
8	138,876	10707	1071	120	11	7237	724	1049	2995		6.48	12.24	12.96
9	462,629	32933	3293	209	33	24046	2405	4250	7742		4.76	24.43	11.67

Form Approved

Application Page

Approval Expires:

TREATMENT NEEDS ASSESSMENT SUMMARY MATRIX

State: ARKANSAS

Calendar Year _____

Page 2 of 2 pages

1. SUBSTATE PLANNING AREA	2. Total population	3. Total population in need		4. Number of IV/DUs in need		5. Number of women in need		6. Prevalence of substance-related criminal activity			7. Incidence of communicable diseases		
		A. Needing treatment services	B. That would seek treatment	A. Needing treatment services	B. That would seek treatment	A. Number of IV/DUs	B. Number of women	A. Number of IV/DUs related arrests	B. Number of drug-related arrests	C. Other (specify):	A. Hepatitis B/100,000	B. AIDS/100,000	C. Tuberculosis/100,000
10	110,903	8008	801	24	8	5763	576	1252	2253		6.31	4.51	15.3
11	128,525	9386	939	23	9	6772	677	597	1109		3.89	13.23	13.23
12	142,559	10349	1035	38	10	7252	725	666	950		5.61	11.92	15.43
13	85,992	6086	609	4	6	4531	453	641	886		1.16	8.14	12.79

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METHODS FOR ESTIMATING THE NUMBER IN NEED OF SUBSTANCE ABUSE TREATMENT SERVICES

In the past the State of Arkansas has used a modified version of the Parker-Marden formula to estimate the numbers of individuals needing treatment services. This formula was first developed for the National Institute on Drug Abuse in the 1970's, and basically computes the numbers of any given population having a substance abuse problem and therefore potentially needing services at 10%. This is the method that is currently in use and will be so, until the State has a more accurate method of estimating these numbers.

The sources of data used in completing this section are as follows:

TOTAL POPULATION - Obtained from the 1990 Census and broken down into the substate planning areas.

TOTAL POPULATION IN NEED - Modified Parker-Marden formula (described above). **THE NUMBER SEEKING TREATMENT** computed by taking 10% of the planning area figure.

NUMBER OF IVUDS IN NEED - Number of IDUs reported to the State's Alcohol/Drug Management Information System (ADMIS). **THE NUMBER SEEKING TREATMENT** computed by taking 10% of the planning area figure.

NUMBER OF WOMEN IN NEED - Modified Parker-Marden formula (described above) applied to the number of females in each substate planning area. **THE NUMBER SEEKING TREATMENT** computed by taking 10% of the planning area figure.

PREVALENCE OF SUBSTANCE-RELATED CRIMINAL ACTIVITY - Total drug-related arrests as reported by the Arkansas Crime Information Center in its publication Crime In Arkansas 1991 and broken down by substate planning area.

INCIDENCE OF COMMUNICABLE DISEASES - Information provided by the Arkansas Department of Health and broken down by substate planning areas.

The information in Column 6 is used anecdotally in discussions/planning activities with the Alcohol and Drug Abuse Authority, Alcohol and Drug Abuse Coordinating Council, Bureau of Alcohol and Drug Abuse Prevention quarterly planning meetings, and other gatherings with interest in this type of data.

The information in Column 7 was used this past year to guide the Bureau in the placement of a pilot street outreach program in the counties with the highest incidence of AIDS/HIV cases. The tuberculosis index is being used to prioritize the order in which the Department of Health Tuberculosis Unit is conducting training and on-site surveys to determine the number and placement of ultra-violet c lighting in residential treatment facilities.

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA.)

State: ARKANSAS

Substate planning area:

SEX AND RACE/ETHNICITY

AGE	A: White, not of Hispanic origin		B: Black, not of Hispanic origin		C: Hispanic		D: Other Specialty:		E: All other or unknown		F: Total (A-E)	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
1. 17 and under	244,862	229,671	69,173	67,237	3,894	3,551	3,902	3,806	1,317	1,163	319,254	301,877
2. 18-24	95,389	43,839	20,341	23,002	1,766	1,271	1,726	1,546	743	470	118,199	118,857
3. 25-44	283,535	287,960	46,415	56,746	3,396	2,888	4,068	4,681	1,410	933	335,428	350,320
4. 45-64	194,012	209,197	21,100	27,663	1,020	1,155	1,895	2,281	318	266	217,325	239,407
5. 65 and over	125,687	180,592	16,532	25,703	400	535	569	829	82	64	142,870	207,188
6. Total	943,485	1,001,259	173,561	200,351	10,476	9,400	12,160	13,143	3,870	2,896	1,133,076	1,217,649

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(**) ASIAN OR PACIFIC ISLANDER, AMERICAN INDIAN AND ESKIMO.

(*) OTHER - WHITE - BLACK - OTHER - ALL OTHER OR UNKNOWN. HISpanic IS NOT INCLUDED.

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

State: Arkansas
 Substate planning area: (TOTAL)

SEX AND RACE/ETHNICITY

AGE	A. White, list of Hispanic origin				B. Black, list of Hispanic origin				C. Hispanic				D. Other				E. All other individuals		F. Total	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female		
	Total		Total		Total		Total		Total		Total		Total		Total		Total			
1-17 and under	151	63	52	22	4	1	2	0									209	86		
18-24	1,399	292	397	68	8	2	11	5									1,815	367		
25-44	3,881	1,045	1,781	581	48	7	26	14									5,736	1,647		
45-64	1,022	236	243	33	8	1	15	1									1,288	271		
65 and over	135	24	17	3	0	0	0	0									152	27		
Total	6,588	1,660	2,490	707	68	11	54	20									9,200	2,398		

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TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

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State: Arkansas
 Substate planning area: Catchment Area 1

SEX AND RACE/ETHNICITY

AGE	A: White, not of Hispanic origin						B: Black, not of Hispanic origin				C: Hispanic				D: Other				E: All other or Unknown		F: Total	
	Male		Female		Male		Female		Male		Female		Male		Female		Male		Female			
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female		
1. 17 and under	20	10	0	1	2	0	2	0	2	0	0	0	0	0	0	0	0	0	0	0	26	11
2. 18-24	190	43	4	0	1	0	4	4	4	4	0	0	0	0	0	0	0	0	0	0	199	67
3. 25-44	340	72	18	14	6	0	4	4	4	1	0	0	0	0	0	0	0	0	0	0	368	87
4. 45-64	57	13	1	0	1	0	3	0	3	0	0	0	0	0	0	0	0	0	0	0	62	13
5. 65 and over	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1
0. Total	609	139	23	15	10	0	13	5	0	0	0	0	0	0	0	0	0	0	0	0	655	159

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

State: Arkansas
 Substate planning area: Catchment Area 2

SEX AND RACE/ETHNICITY

AGE	A. White, total of Hispanic origin		B. Black, total of Hispanic origin		C. Hispanic		D. Other Specify: <u>Asian</u>		E. All other unknown		F. Total	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
1. 17 and under	14	1	0	0	0	0	0	0			14	1
2. 18 - 24	70	19	0	0	0	0	0	0			70	19
3. 25 - 44	182	53	1	0	0	0	1	1			184	54
4. 45 - 64	37	9	0	0	0	0	0	0			37	9
5. 65 and over	4	4	0	0	0	0	0	0			4	4
6. Total	307	86	1	0	0	0	1	1			309	87

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

State: Arkansas

Substate planning area: Catclament Area 3

SEX AND RACE/ETHNICITY

AGE	A. White, not of Hispanic origin		B. Black, not of Hispanic origin		C. Hispanic		D. Other, specify: Asian		E. All other or unknown		F. Total	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
1-17 and under	3	0	0	0	0	0	0	0	0	0	3	0
18-24	76	6	2	0	0	0	0	0	0	0	76	6
25-44	289	38	29	4	3	0	0	0	0	0	321	42
45-64	105	17	4	2	2	0	1	0	0	0	112	19
65 and over	25	3	0	0	0	0	0	0	0	0	25	3
G. Total	469	64	35	6	5	0	1	0	0	0	537	70

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

State: Arkansas
 Substate planning area: Catchment Area 4

SEX AND RACE/ETHNICITY

AGE	A: White, not of Hispanic/ethnicity		B: Black, not of Hispanic/ethnicity		C: Hispanic		D: Other		E: All other or unknown		F: Total	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
	Total		Total		Total		Total		Total		Total	
1-17 and under	2	2	0	0	0	0	0	0	0	0	2	2
18-24	117	23	7	1	0	0	1	0	0	0	125	24
25-44	263	102	21	37	5	0	5	0	0	0	294	139
45-64	44	24	3	2	0	0	0	0	0	0	47	26
65 and over	3	0	0	0	0	0	0	0	0	0	3	0
Total	429	151	31	40	5	0	6	0	0	0	471	191

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

State: Arkansas
 Substate planning area: Catchment Area 5

SEX AND RACE/ETHNICITY

AGE	A: White, not of Hispanic origin		B: Black, not of Hispanic origin		C: Hispanic		D: Other		E: All other for unknown		F: Total	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
1. 17 and under	37	15	2	0	0	1	0	0	0	0	39	16
2. 18-24	127	48	4	1	1	0	3	0	0	0	135	49
3. 25-44	330	137	23	21	8	2	6	1	0	0	367	161
4. 45-64	83	25	5	2	1	0	2	1	0	0	91	28
5. 65 and over	5	2	0	0	0	0	0	0	0	0	5	2
G: Total	582	227	34	24	10	3	11	2	0	0	637	256

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

State: Arkansas
 Substate planning area: Catchment Area 6

SEX AND RACE/ETHNICITY

AGE	A. White, not of Hispanic origin		B. Black, not of Hispanic origin		C. Hispanic		D. Other (Specify: Asian)		E. All other or unknown		F. Total	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
1. 17 and under	2	3	3	0	0	0	0	0	0	0	5	3
2. 18-24	51	18	3	0	2	0	0	0	0	0	56	18
3. 25-44	218	72	19	4	4	0	1	1			242	77
4. 45-64	36	14	4	0	0	0	0	0			40	14
5. 65 and over	4	0	0	0	0	0	0	0			4	0
G. Total	311	107	29	4	6	0	1	1			347	112

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for child SPA)

State: Arkansas

Substate planning area: Catchment Area 7

SEX AND RACE/ETHNICITY

AGE	A: White, not of Hispanic origin		B: Black, not of Hispanic origin		C: Hispanic		D: Other		E: All other or unknown		F: Total	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
1. 17 and under	1	0	1	1	0	0	0	0			2	1
2. 18-24	18	3	17	4	0	0	0	0			35	7
3. 25-44	49	15	183	58	0	0	0	0			232	73
4. 45-64	6	0	10	1	0	0	1	0			17	1
5. 65 and over	3	0	0	0	0	0	0	0			3	0
6. Total	77	18	211	64	0	0	1	0			289	82

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

State: Arkansas
 Substate planning area: Catchment Area 8

SEX AND RACE/ETHNICITY

AGE	A. White, not of Hispanic origin		B. Black, not of Hispanic origin		C. Hispanic		D. Other		E. All other or unknown		F. Total	
	Male	Female	Male	Female	Male	Female	Specify: Asian	Male	Female	Male	Female	
1-17 and under	0	0	0	0	0	0	0	0	0	0	0	
18-24	40	16	4	3	1	0	0	0	0	45	19	
25-44	175	53	39	21	0	1	1	0	0	215	75	
45-64	38	8	7	3	0	0	0	0	0	45	11	
65 and over	2	0	1	0	0	0	0	0	0	3	0	
Total	255	77	51	27	1	1	1	0	0	308	105	

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

State: Arkansas
 Substate planning area: Catchment Area 9

SEX AND RACE/ETHNICITY

AGE	A: White, not of Hispanic origin		B: Black, not of Hispanic origin		C: Hispanic		D: Other		E: All other or unknown		F: Total	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
1-17 and under	35	14	22	10	1	0	0	0			58	24
18-24	190	40	66	14	1	0	0	0			257	54
25-44	601	118	442	102	2	1	0	1			1,045	222
45-64	114	20	41	3	1	0	2	0			158	23
65 and over	5	0	2	0	0	0	0	0			7	0
Total	945	192	573	129	5	1	2	1			1,525	323

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

State: Arkansas

Substate planning area: Catchment Area 10

SEX AND RACE/ETHNICITY

AGE	A. White, not of Hispanic origin		B. Black, not of Hispanic origin		C. Hispanic		D. Other		E. All other or unknown		F. Total	
	Male	Female	Male	Female	Male	Female	Specify: Asian	Male	Female	Male	Female	
1-17 and under	1	0	0	0	0	0	0	0	0	1	0	
2-10-29	43	5	1	0	0	0	0	0	0	44	5	
3-25-44	131	10	66	2	6	0	2	1		205	13	
4-45-64	46	1	19	0	0	0	0	0		65	1	
5-65 and over	6	1	6	0	0	0	0	0		12	1	
G. Total	227	17	92	2	6	0	2	1		327	20	

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

State: Arkansas

Substate planning area: Catchment Area 11

SEX AND RACE/ETHNICITY

AGE	A. White; not of Hispanic origin		B. Black; not of Hispanic origin		C. Hispanic		D. Other		E. All other or unknown		F. Total		
	Male	Female	Male	Female	Male	Female	Specify:		Male	Female	Male	Female	
							Asian	Other					
1. 17 and under	2	4	2	0	0	0	0	0	0	0	0	4	4
2. 18 - 24	72	9	38	4	0	0	0	0	0	0	0	110	13
3. 25 - 44	143	51	158	51	1	1	0	1	0	0	0	302	104
4. 45 - 64	27	2	30	5	0	1	0	0	0	0	0	57	8
5. 65 and over	10	1	1	0	0	0	0	0	0	0	0	11	1
0. Total	254	67	229	60	1	2	0	1	0	0	0	484	130

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

State: Arkansas

Substate planning area: Catchment Area 12

SEX AND RACE/ETHNICITY

AGE	A. White, not of Hispanic origin		B. Black, not of Hispanic origin		C. Hispanic		D. Other		E. All other or unknown		F. Total		
	Male	Female	Male	Female	Male	Female	Specify:		Male	Female	Male	Female	
							Asian	ASIAN					
1. 17 and under	3	2	2	0	0	0	0	0	0	0	0	5	2
2. 18 - 24	100	21	63	8	2	0	0	0	0	0	0	165	29
3. 25 - 44	180	23	271	105	1	0	1	4				453	132
4. 45 - 64	22	11	25	1	0	0	0	0				47	12
5. 65 and over	5	2	4	1	0	0	0	0				9	3
07. Total	310	59	365	115	3	0	1	4				679	178

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

State: Arkansas
 Substate planning area: Catchment Area 13

SEX AND RACE/ETHNICITY

AGE	A: White, not of Hispanic/Latino origin		B: Black, not of Hispanic/Latino origin		C: Hispanic		Specify: D: Other		E: All other or unknown		F: Total	
	Male	Female	Male	Female	Male	Female	Asian	Hispanic	Male	Female	Male	Female
							Specify: Asian					
1: 17 and under	0	0	0	0	0	0	0	0	0	0	0	0
2: 18-24	14	2	9	1	0	0	0	0	0	0	23	3
3: 25-44	32	13	66	19	0	0	0	0	0	0	98	32
4: 45-64	8	4	14	1	0	0	0	0	0	0	22	5
5: 65 and over	3	1	1	1	0	0	0	0	0	0	4	2
6: Total	57	20	90	22	0	0	0	0	0	0	147	42

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

State: Arkansas
 Division of Children and Family Services - Department of Correction

SEX AND RACE/ETHNICITY

AGE	A: White, not of Hispanic origin		B: Black, not of Hispanic origin		C: Hispanic		D: Other Specify: Asian		E: All other or unknown		F: Total	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
1. 17 and under	27	12	20	10	1	0	0	0			48	22
2. 18-24	237	25	171	28	0	1	1	0			409	54
3. 25-44	316	97	317	72	11	1	3	0			647	170
4. 45-64	41	9	31	4	2	0	2	0			76	13
5. 65 and over	0	0	0	1	0	0	0	0			0	1
6. Total	621	143	539	115	14	2	6	0			1,180	260

TREATMENT NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

State: Arkansas
 Substate planning area: Benton Detox (Non-ADHS)

SEX AND RACE/ETHNICITY

AGE	A. White, not of Hispanic origin		B. Black, not of Hispanic origin		C. Hispanic		D. Other		E. All other of unknown		F. Total	
	Male	Female	Male	Female	Male	Female	Specify: Asian	Male	Female	Male	Female	
1-17 and under	4	0	0	0	0	0	0	0	0	4	0	
2-10-20	56	14	8	4	0	1	2	1		66	20	
3-25-44	632	191	128	71	1	1	2	3		763	266	
4-45-64	358	79	49	9	1	0	4	0		412	88	
5-65 and over	58	9	2	0	0	0	0	0		60	9	
0/Total	1,108	293	187	84	2	2	8	4		1,305	383	

PREVENTION NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(Complete one form for State and one for each SPA)

State: ARKANSAS

Substate planning area:

SEX AND RACE/ETHNICITY

AGE	A. White, not of Hispanic origin		B. Black, not of Hispanic origin		C. Hispanic ORIGIN		D. Other, PACIFIC ISLANDER, AMERICAN INDIAN, ALASKA NATIVE		E. All other or unknown		F. Total	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
1. 6 and under	78,710	74,385	21,743	21,404	1,399	1,246	1,210	1,215	501	432	102,164	97,436
2. 6-11	83,091	78,158	23,942	23,379	1,339	1,238	1,361	1,287	441	417	108,835	103,241
3. 12-14	40,868	38,415	11,807	11,381	542	540	677	638	179	174	53,531	50,608
4. 15-17	42,193	38,713	11,681	11,073	616	477	654	666	196	140	54,724	50,592
5. 18-20	43,731	43,095	10,197	10,948	720	550	793	667	258	190	54,979	54,900
6. 21-24	51,658	50,744	10,144	12,054	1046	721	933	879	485	280	63,220	63,957
7. 25-44	283,535	287,960	46,415	56,746	3,396	2,888	4,068	4,681	1,410	933	335,428	350,320
8. 45-64	194,012	209,197	21,100	27,663	1,020	1,155	1,895	2,281	318	266	217,325	239,407
9. 65 and over	125,687	180,592	16,532	25,703	400	535	569	825	82	64	142,870	207,188
10. Total	943,485	1,001,259	173,561	200,351	10,476	9,400	12,160	13,143	3,870	2,896	1,133,076	1,217,649

***Prevention Needs: Population Groups at Risk By Race/Ethnicity and Sex**
 (Completion of this form is optional)

ARKANSAS
 State planning area:

	1 COSAs	2 Placemat Women	3 Drop-out	4 Violent/Delinquent Behavior	5 Mental Health Problems	6 Economic Disadvantage	7 Physically Disabled	8 Abuse Victims	9 Using Substances	10 Homeless/ Runaway/Yth	11 Other/ Specify
M, not of hispanic Origin	N/A	26,768	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
M, not of hispanic Origin	N/A	8,296	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
M, hispanic	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
M, Pacific	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
M, American/ Indian/Alaska Native	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
M, Unknown	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
F, N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
F, N/A	N/A	35,064	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

* Information source is the same as Form 10A.

***Population Priorities for Prevention Programs**
 (Completion of this form is optional)

Age and Sex of State's Populations

	< 5 Yrs		6-11		12-14		15-17		18-20		21-24		25+	
	1 M	2 F	3 M	4 F	5 M	6 F	7 M	8 F	9 M	10 F	11 M	12 F	13 M	14 F
White, not of Hispanic Origin														
Black, not of Hispanic Origin														
Hispanic														
Asian/Pacific Islander														
Native American/Alaskan Native														
Other/Unknown														
Total														

* ADAP CURRENTLY DOES NOT SET PRIORITIES WHEN DELEGATING PREVENTION DOLLARS

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 * ADAP currently does not set priorities when delegating prevention dollars.

Approval Expires:

OMB NO.

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PAGE 1 OF 8 PAGES

PREVENTION NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(COMPLETE ONE FORM FOR STATE AND ONE FOR EACH SPA)

NOTE: HISPANIC ORIGIN IS NOT INCLUDED IN TOTAL

STATE: ARKANSAS

SUBSTATE PLANNING AREA: REGION I

TOTAL MALE 160,207

TOTAL FEMALE 167,964

SEX AND RACE/ETHNICITY

AGE	A. WHITE NOT OF HISPANIC ORIGIN	B. BLACK, NOT OF HISPANIC ORIGIN	C. HISPANIC ORIGIN	D. ALL OTHER OR UNKNOWN	E. TOTAL
18 & UNDER	77,070	513	2,261	4,504	82,087
OVER 18	242,725	1,313	1,394	2,046	246,084
TOTAL	319,795	1,826	3,655	6,550	328,171

FORM APPROVED

APPLICATION PAGE-----

APPROVAL EXPIRES:

PREVENTION NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(COMPLETE ONE FORM FOR STATE AND ONE FOR EACH SPA)

NOTE: HISPANIC ORIGIN IS NOT INCLUDED IN TOTAL

STATE: ARKANSAS

SUBSTATE PLANNING AREA: REGION II

TOTAL MALE 93,280

TOTAL FEMALE 99,756

SEX AND RACE/ETHNICITY

AGE	A. WHITE NOT OF HISPANIC ORIGIN	B. BLACK, NOT OF HISPANIC ORIGIN	C. HISPANIC ORIGIN	D. ALL OTHER OR UNKNOWN	E. TOTAL
18 &	43,732	2,925	635	1,016	47,673
UNDER	139,671	5,265	393	427	145,363
OVER	183,403	8,190	1,028	1,443	193,036
TOTAL					

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APPLICATION PAGE-----

APPROVAL EXPIRES:

OMB NO.

FORM 10
PAGE 3 OF 8 PAGES

PREVENTION NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(COMPLETE ONE FORM FOR STATE AND ONE FOR EACH SPA)

NOTE: HISPANIC ORIGIN IS NOT INCLUDED IN TOTAL

STATE: ARKANSAS

SUBSTATE PLANNING AREA: REGION III

TOTAL MALE 183,922

TOTAL FEMALE 202,034

SEX AND RACE/ETHNICITY

AGE	A. WHITE NOT OF HISPANIC ORIGIN	B. BLACK, NOT OF HISPANIC ORIGIN	C. HISPANIC ORIGIN	D. ALL OTHER OR UNKNOWN	E. TOTAL
18 & UNDER	74,107	36,087	1,637	2,300	112,494
OVER 18	219,474	53,096	1,080	892	273,462
TOTAL	293,581	89,183	2,717	3,192	385,956

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APPLICATION PAGE-----

APPROVAL EXPIRES:

PREVENTION NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(COMPLETE ONE FORM FOR STATE AND ONE FOR EACH SPA)

NOTE: HISPANIC ORIGIN IS NOT INCLUDED IN TOTAL

STATE: ARKANSAS

SUBSTATE PLANNING AREA: REGION IV

TOTAL MALE 110,722

TOTAL FEMALE 117,829

SEX AND RACE/ETHNICITY

AGE	A. WHITE NOT OF HISPANIC ORIGIN	B. BLACK, NOT OF HISPANIC ORIGIN	C. HISPANIC ORIGIN	D. ALL OTHER OR UNKNOWN	E. TOTAL
18 & UNDER	35,798	27,848	975	1,265	64,911
OVER 18	111,924	51,154	608	562	163,640
TOTAL	147,722	79,002	1,583	1,827	228,551

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APPLICATION PAGE-----

APPROVAL EXPIRES:

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FORM 10
PAGE 5 OF 8 PAGES

PREVENTION NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(COMPLETE ONE FORM FOR STATE AND ONE FOR EACH SPA)

NOTE: HISPANIC ORIGIN IS NOT INCLUDED IN TOTAL

STATE: ARKANSAS

SUBSTATE PLANNING AREA: REGION V

TOTAL MALE: 222,166

TOTAL FEMALE: 240,463

SEX AND RACE/ETHNICITY

AGE	A. WHITE NOT OF HISPANIC ORIGIN	B. BLACK, NOT OF HISPANIC ORIGIN	C. HISPANIC ORIGIN	D. ALL OTHER OR UNKNOWN	E. TOTAL
18 & UNDER	85,388	36,148	2,519	4,153	125,689
OVER 18	272,946	62,230	1,342	1,764	336,940
TOTAL	358,334	98,378	3,861	5,917	462,629

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APPLICATION PAGE-----

APPROVAL EXPIRES:

PREVENTION NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(COMPLETE ONE FORM FOR STATE AND ONE FOR EACH SPA)

NOTE: HISPANIC ORIGIN IS NOT INCLUDED IN TOTAL

STATE: ARKANSAS

SUBSTATE PLANNING AREA: REGION VI

TOTAL MALE TOTAL FEMALE

148,805 159,060

SEX AND RACE/ETHNICITY

	A. WHITE NOT OF HISPANIC ORIGIN	B. BLACK, NOT OF HISPANIC ORIGIN	C. HISPANIC ORIGIN	D. ALL OTHER OR UNKNOWN	E. TOTAL
18 & UNDER	66,932	7,516	1,530	2,431	76,879
OVER 18	214,080	15,834	929	1,072	230,986
TOTAL	281,012	23,350	2,459	3,503	307,865

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APPLICATION PAGE-----

APPROVAL EXPIRES:

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PAGE 7 OF 8 PAGES

PREVENTION NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(COMPLETE ONE FORM FOR STATE AND ONE FOR EACH SPA)

NOTE: HISPANIC ORIGIN IS NOT INCLUDED IN TOTAL

STATE: ARKANSAS

SUBSTATE PLANNING AREA: REGION VII

TOTAL MALE 114,076

TOTAL FEMALE 125,352

SEX AND RACE/ETHNICITY

AGE	A. WHITE NOT OF HISPANIC ORIGIN	B. BLACK, NOT OF HISPANIC ORIGIN	C. HISPANIC ORIGIN	D. ALL OTHER OR UNKNOWN	E. TOTAL
18 &	41,633	23,105	1,360	1,698	66,436
UNDER	127,774	44,465	727	753	172,992
OVER	169,407	67,570	2,087	2,451	239,428
TOTAL					

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APPLICATION PAGE -----

APPROVAL EXPIRES:

OMB NO.

FORM 10
PAGE 8 OF 8 PAGES

PREVENTION NEEDS BY AGE, SEX, AND RACE/ETHNICITY

(COMPLETE ONE FORM FOR STATE AND ONE FOR EACH SPA)

NOTE: HISPANIC ORIGIN IS NOT INCLUDED IN TOTAL

STATE: ARKANSAS

SUBSTATE PLANNING AREA: REGION VIII

TOTAL MALE 99,898

TOTAL FEMALE 105,191

SEX AND RACE/ETHNICITY

AGE	A. WHITE NOT OF HISPANIC ORIGIN	B. BLACK, NOT OF HISPANIC ORIGIN	C. HISPANIC ORIGIN	D. ALL OTHER OR UNKNOWN	E. TOTAL
18 & UNDER	49,873	2,268	1,514	4,514	55,655
OVER 18	141,617	4,145	972	2,672	148,434
TOTAL	191,490	6,413	2,486	7,186	205,089

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APPLICATION PAGE-----

APPROVAL EXPIRES:

INTENDED USE PLAN
 (Include ONLY funds to be spent by the agency administering the block grant. Estimated data are acceptable on this form.)

SOURCE OF FUNDS

(24 Month Projection)

State: ARKANSAS

ACTIVITY
 (See Instructions for using Row 1.)

1. Substance abuse treatment and rehabilitation
2. Alcohol treatment and rehabilitation
3. Drug treatment and rehabilitation
4. Prevention
5. Tuberculosis Services
6. HIV Early Intervention Services
7. Administration (excluding program/provider level)
8. Column total

	A. FFY 1994 substance abuse block grant	B. Medicaid (Federal, State, and local)	C. Other Federal funds (e.g., Medicare, other public welfare)	D. State funds	E. Local funds (excluding local Medicaid)	F. Other
1. Substance abuse treatment and rehabilitation						
2. Alcohol treatment and rehabilitation	2,720		915	595		967
3. Drug treatment and rehabilitation	2,720			595		967
4. Prevention	1,490		836			
5. Tuberculosis Services						
6. HIV Early Intervention Services	149					
7. Administration (excluding program/provider level)	372		183	470		
8. Column total	7,451		1,934	1,660		1,934

	FFY 1994 Block Grant	Other Federal	State	Local	Other
<input type="checkbox"/> Information Dissemination	\$ <u>197.5</u>	\$ <u>150</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Education	\$ <u>935.5</u>	\$ <u>300</u>	\$ <u>20</u>	\$ _____	\$ _____
<input type="checkbox"/> Alternatives	\$ <u>291.1</u>	\$ <u>211</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Problem Identification and Referral	\$ <u>97.5</u>	\$ <u>55</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Community- based Process	\$ <u>357.5</u>	\$ <u>120</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Environmental	\$ <u>97.5</u>	\$ <u>-</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Other	\$ <u>29.4</u>	\$ <u>-</u>	\$ _____	\$ _____	\$ _____
TOTAL	\$ <u>1,934</u>	\$ <u>836</u>	\$ <u>20</u>	\$ _____	\$ _____

How to report planned expenditures on substance abuse resource development activities

Your State may plan to spend FFY 1994 block grant funds on substance abuse resource development activities. These kinds of activities were described in Section II. Complete the following checklist:

Does your State plan to fund resource development activities with FFY 1994 funds?

Yes

No

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)
(Estimated data are acceptable on this form.)

State: **ARKANSAS**
Substate planning area: **Cabotment (1)**

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State validated count (column A - J)

UTILIZATION

TYPE OF CARE	Primary Diagnosis of Alcohol Problems			Primary Diagnosis of Drug Problems			Substance Abuse Problems (no primary diagnosis)			State validated count (column A - J)	
	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of admissions	E. Number of first-time admissions	F. Average cost per admission	G. Number of admissions	H. Number of first-time admissions	I. Average cost per admission	J. Yes (check one box)	K. No
1. Hospital Inpatient	0	0	0	0	0	0					
2. Free-standing residential	0	0	0	0	0	0					
REHABILITATION/RESIDENTIAL										Yes	No
3. Hospital Inpatient	0	0	0	0	0	0					
4. Short-term (up to 30 days)	734	600	0	264	235	0					
5. Long-term (over 30 days)	C	0	0	0	0	0					
REHABILITATION/AMBULATORY											
Outpatient											
6. Methadone	0	0	0	0	0	0					
7. Non-methadone	416	292	0	194	160	0					
8. Intensive outpatient	0	0	0	0	0	0					
9. Detoxification											

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)
(Estimated data are acceptable on this form.)

State: ARKANSAS
Substate planning area: Catchment (2)

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State validated count (columns A-J)

UTILIZATION

TYPE OF CARE	Primary Diagnosis of Alcohol Problems						Primary Diagnosis of Drug Problems						Substance Abuse Problems (no primary diagnosis)						J Yes/No (check one box)
	A Number of admissions	B Number of first-time admissions	C Average cost per admission	D Number of people served	E Number of first-time admissions	F Average cost per admission	G Number of admissions	H Number of first-time admissions	I Average cost per admission	J Number of admissions	K Number of first-time admissions	L Average cost per admission	M Number of admissions	N Number of first-time admissions	O Average cost per admission				
1. Hospital Inpatient																			
2. Free-standing residential																			
REHABILITATION/RESIDENTIAL																			
3. Hospital Inpatient																			
4. Short-term (up to 30 days)	316	196	0	56	36	0													
5. Long-term (over 30 days)	0	0	0	0	0	0													
REHABILITATION/AMBULATORY																			
Outpatient																			
6. Methadone	0	0	0	0	0	0													
7. Non-methadone	86	62	0	192	90	0													
B. Intensive outpatient	74	56	0	22	10	0													
9. Detoxification																			

Form Approved

Application Page

Approval Expires:

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)
(Estimated data are acceptable on this form.)

State: ARKANSAS
Substate planning area: Catchment (3)

UTILIZATION

TYPE OF CARE	Primary Diagnosis of Alcohol Problems			Primary Diagnosis of Drug Problems			Substance Abuse Problems (no primary diagnosis)			State validated count (columns A - J)
	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of admissions	E. Number of first-time admissions	F. Average cost per admission	G. Number of admissions	H. Number of first-time admissions	I. Average cost per admission	
DETOXIFICATION (24-HOUR CARE)										
1. Hospital inpatient										
2. Free-standing residential	485	206	0	74	54	0				Yes
REHABILITATION/RESIDENTIAL										
3. Hospital inpatient	0	0	0	0	0	0				
4. Short-term (up to 30 days)	216	152	0	46	32	0				
5. Long-term (over 30 days)										
REHABILITATION/AMBULATORY										
Outpatient										
6. Medications										
7. Non-medications	286	252	0	85	56	0				
8. Intensive outpatient	0	0	0	0	0	0				
9. Detoxification										

Form Approved

Application Page ___

Approval Expires: _____

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)
(Estimated data are acceptable on this form.)

State: ARKANSAS
Substate planning area: Calhoun (4)

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (the primary diagnosis)

State-validated equity (columns A-C)

UTILIZATION

TYPE OF CARE	Primary Diagnosis of Alcohol Problems		Primary Diagnosis of Drug Problems		Substance Abuse Problems (the primary diagnosis)			State-validated equity (columns A-C)		
	A Number of admissions	B Number of first-time admissions	C Average cost per admission	D Number of admissions	E Number of first-time admissions	F Average cost per admission	G Number of people served	H Number of first-time admissions	I Average cost per admission	J Yes/No (check one box)
1. Hospital Inpatient										
2. Free-standing residential										
REHABILITATION/RESIDENTIAL										
3. Hospital Inpatient										
4. Short-term (up to 30 days)	410	354	0	160	135	0				
5. Long-term (over 30 days)										
REHABILITATION/AMBULATORY										
Outpatient										
6. Methadone										
7. Non-methadone	512	228	0	82	64	0				
8. Intensive outpatient										
9. Detoxification	38	22	0	14	10	0				

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)
(Estimated data are acceptable on this form.)

State: **ARKANSAS**
Substate planning area: **Catchment (5)**

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State/validated counts (columns A - J)

UTILIZATION

TYPE OF CARE	UTILIZATION										J
	A	B	C	D	E	F	G	H	I	J	
DETOXIFICATION (24-HOUR CARE)	Number of admissions	Number of first-time admissions	Average cost per admission	Number of people served	Number of first-time admissions	Average cost per admission	Number of people served	Number of first-time admissions	Average cost per admission	Yes/No (check one box)	
1. Hospital Inpatient	18	12	0	2	2	0					
2. Free-standing residential											
REHABILITATION/RESIDENTIAL											
3. Hospital Inpatient											
4. Short-term (up to 30 days)	772	598	0	390	310	0					
5. Long-term (over 30 days)											
REHABILITATION/AMBULATORY											
Outpatient											
6. Methadone											
7. Non-methadone	378	284	0	170	130	0					
8. Intensive outpatient	6	6	0	0	0	0					
9. Detoxification											

Form Approved

Application Page

Approval Expires

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)
(Estimated data are acceptable on this form.)

State: **ARKANSAS**
Substate planning area: **Catchment (6)**

UTILIZATION

Primary Diagnosis of
Alcohol Problems

Primary Diagnosis of
Drug Problems

Substance Abuse Problems
(by primary diagnosis)

State Validated count
(columns A - J)

TYPE OF CALL	Primary Diagnosis of Alcohol Problems			Primary Diagnosis of Drug Problems			Substance Abuse Problems (by primary diagnosis)			State Validated count (columns A - J)	
	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of admissions	E. Number of first-time admissions	F. Average cost per admission	G. Number of admissions	H. Number of first-time admissions	I. Average cost per admission	J. Yes	K. No
1. Hospital Inpatient											
2. Free-standing residential											
REHABILITATION/RESIDENTIAL										Yes	No
3. Hospital Inpatient											
4. Short-term (up to 30 days)	356	112	0	54	48	0					
5. Long-term (over 30 days)											
REHABILITATION/AMBULATORY											
Outpatient											
6. Methadone											
7. Non-methadone	374	262	0	116	90	0					
B. Intensive outpatient											
9. Detoxification											

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)
 (Estimated data are acceptable on this form.)

State: **ARKANSAS**
 Substate planning area: **Catchment (7)**

Primary Diagnosis of
Alcohol Problems

Primary Diagnosis of
Drug Problems

Substance Abuse Problems
(the primary diagnosis)

State validated count
(column A - J)

UTILIZATION

TYPE OF CARE	Primary Diagnosis of Alcohol Problems		Primary Diagnosis of Drug Problems		Substance Abuse Problems (the primary diagnosis)		State validated count (column A - J)			
	A Number of admissions	B Number of first-time admissions	C Average cost per admission	D Number of admissions	E Number of first-time admissions	F Average cost per admission	G Number of admissions	H Number of first-time admissions	I Average cost per admission	J Yes/No (check one box)
1. Hospital Inpatient										
2. Free-standing residential										
REHABILITATION/RESIDENTIAL										
3. Hospital Inpatient										
4. Short-term (up to 30 days)	294	264	0	250	224	0				
5. Long-term (over 30 days)										
REHABILITATION/AMBULATORY										
Outpatient										
6. Methadone										
7. Non-methadone	48	28	0	24	14	0				
8. Intensive outpatient										
9. Detoxification										

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)

(Estimated data are acceptable on this form.)

State: ARKANSAS
 Substate planning area: Catchment (3)

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State Validated counts (columns A - J)

UTILIZATION

TYPE OF CARE	Primary Diagnosis of Alcohol Problems		Primary Diagnosis of Drug Problems		Substance Abuse Problems (no primary diagnosis)		State Validated counts (columns A - J)			
	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of admissions served	E. Number of first-time admissions	F. Average cost per admission	G. Number of admissions served	H. Number of first-time admissions	I. Average cost per admission	J. Yes/No check one box
1. Hospital Inpatient	2	0	0	0	0	0				
2. Free-standing residential										
REHABILITATION/RESIDENTIAL										
3. Hospital Inpatient										
4. Short-term (up to 30 days)	412	330	0	210	180	0				
5. Long-term (over 30 days)										
REHABILITATION/AMBULATORY										
Outpatient										
6. Methadone										
7. Non-methadone	174	142	0	35	32	0				
8. Intensive outpatient	0	0	0	0	0	0				
9. Detoxification										

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)
(Estimated data are acceptable on this form.)

State: ARKANSAS
Substate planning area: Catchment (9)

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State Validated count (column A - J)

UTILIZATION

TYPE OF CARE	Alcohol Problems		Drug Problems		Substance Abuse Problems (no primary diagnosis)		State Validated count (column A - J)			
	A: Number of admissions	B: Number of first-time admissions	C: Average cost per admission	D: Number of people served	E: Number of first-time admissions	F: Average cost per admission	G: Number of people served	H: Number of first-time admissions	I: Average cost per admission	J: Yes/No (check one box)
1. Hospital inpatient										
2. Free-standing residential										
REHABILITATION/RESIDENTIAL										
3. Hospital inpatient										
4. Short-term (up to 30 days)	1316	1086	0	485	440	0				
5. Long-term (over 30 days)	0	0	0	306	264	0				
REHABILITATION/AMBULATORY										
Outpatient										
6. Methadone										
7. Non-methadone	942	754	0	180	156	0				
8. Intensive outpatient										
9. Detoxification										

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)
 (Estimated data are acceptable on this form.)

State: ARKANSAS
 Substate planning area: Cabellnet (10)

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State validated count (columns A - J)

UTILIZATION

DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of people served	E. Number of first-time admissions	F. Average cost per admission	G. Number of people served	H. Number of first-time admissions	I. Average cost per admission	J. Yes/No (check one box)
1. Hospital Inpatient										Yes/No
2. Free-standing residential										Yes/No
REHABILITATION/RESIDENTIAL										Yes/No
3. Hospital Inpatient										Yes/No
4. Short-term (up to 30 days)	154	150	0	86	82	0				Yes/No
5. Long-term (over 30 days)										Yes/No
REHABILITATION/AMBULATORY										Yes/No
Outpatient										Yes/No
6. Methadone										Yes/No
7. Non-methadone	430	340	0	50	30	0				Yes/No
8. Intensive outpatient										Yes/No
9. Detoxification										Yes/No

Form Approved

Application Page

Approval Expires:

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)
 (Estimated data are acceptable on this form.)

State: **ARKANSAS**
 Substate planning area: **Catchment (11)**

Primary Diagnosis of
Alcohol Problems

Primary Diagnosis of
Drug Problems

Substance Abuse Problems
(no primary diagnosis)

State Validated count
(column A - J)

UTILIZATION

TYPE OF CASE	Primary Diagnosis of Alcohol Problems		Primary Diagnosis of Drug Problems		Substance Abuse Problems (no primary diagnosis)		State Validated count (column A - J)			
	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of admissions	E. Number of first-time admissions	F. Average cost per admission	G. Number of admissions	H. Number of first-time admissions	I. Average cost per admission	J. Yes/No (check one box)
1. Hospital Inpatient	144	72	0	44	0					Yes/No
2. Free-standing residential										Yes/No
3. Hospital Inpatient										Yes/No
4. Short-term (up to 30 days)	284	136	0	200	152	0				Yes/No
5. Long-term (over 30 days)										Yes/No
6. Outpatient										Yes/No
7. Non-methadone	346	210	0	194	132	0				Yes/No
8. Intensive outpatient										Yes/No
9. Detoxification										Yes/No

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)
(Estimated data are acceptable on this form.)

State: ARKANSAS
Substate planning area: Catchment (12)

UTILIZATION

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State Validated Count (columns A - J)

TYPE OF CARE	Primary Diagnosis of Alcohol Problems			Primary Diagnosis of Drug Problems			Substance Abuse Problems (no primary diagnosis)			State Validated Count (columns A - J)	
	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of admissions	E. Number of first-time admissions	F. Average cost per admission	G. Number of admissions	H. Number of first-time admissions	I. Average cost per admission	J. Yes (check one box)	K. No
1. Hospital Inpatient											
2. Free-standing residential											
REHABILITATION/RESIDENTIAL										Yes	No
3. Hospital Inpatient											
4. Short-term (up to 30 days)	356	218	0	158	122	0					
5. Long-term (over 30 days)											
REHABILITATION/AMBULATORY											
Outpatient											
6. Methadone											
7. Non-methadone	300	218	0	622	162	0					
8. Intensive outpatient	30	28	0	4	2	0					
9. Detoxification											

Form Approved

Application Page ___

Approval Expires: ___

TREATMENT CAPACITY MATRIX (Complete one form for State and one for each SPA)

State: ARKANSAS
Substate planning area: Catchment (13)

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State-Validated Facility

Type of Client Demographic (24-hour care) 1. Hospital Inpatient 2. Free-standing residential treatment 3. Hospital Inpatient 4. Short-term (up to 30 days) 5. Long-term (over 30 days)	Utilization										Yr. Validated Facility		
	A. Number of admissions	B. Number of bed-days admissions	C. Average cost per admission	D. Number of inpatient admissions	E. Number of bed-days admissions	F. Average cost per admission	G. Number of admissions	H. Number of bed-days admissions	I. Average cost per admission	J. Number of admissions		K. Number of bed-days admissions	
1. Hospital Inpatient	2	2	0	2	2	0							
2. Free-standing residential treatment													
3. Hospital Inpatient													
4. Short-term (up to 30 days)	4	2	0	2	0	0							
5. Long-term (over 30 days)													
6. Methadone													
7. Non-methadone	114	144	0	130	86	0							
8. Intensive outpatient	4	0	0	2	2	0							
9. Detoxification													

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)
 (Estimated data are acceptable on this form.)

State: ARKANSAS
 Substate planning area: Calhoun (13)

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no Primary diagnosis)

State Validated count (columns A - J)

UTILIZATION

TYPE OF CARE	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of people served	E. Number of first-time admissions	F. Average cost per admission	G. Number of people served	H. Number of first-time admissions	I. Average cost per admission	J. Yes/No (check one box)
1. Hospital Inpatient	2	2	0	2	2	0				Yes/No
2. Free-standing residential										Yes/No
REHABILITATION/RESIDENTIAL										Yes/No
3. Hospital Inpatient										Yes/No
4. Short-term (up to 30 days)	4	2	0	2	0	0				Yes/No
5. Long-term (over 30 days)										Yes/No
REHABILITATION/AMBULATORY										Yes/No
Outpatient										Yes/No
6. Methadone										Yes/No
7. Non-methadone	114	114	0	130	86	0				Yes/No
8. Intensive outpatient	4	0	0	2	2	0				Yes/No
9. Detoxification										Yes/No

Form Approved

Application Page

Approval Expires:

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)
 (Estimated data are acceptable on this form.)

State: Ark. (Dept. of Correction
 Youth Services)
 Substate planning area:

TYPE OF CARE

DETOXIFICATION (24-HOUR CARE)

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State/validated count (column A-J)

UTILIZATION

TYPE OF CARE	Primary Diagnosis of Alcohol Problems		Primary Diagnosis of Drug Problems		Substance Abuse Problems (no primary diagnosis)			State/validated count (column A-J)		
	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of admissions	E. Number of first-time admissions	F. Average cost per admission	G. Number of admissions		H. Number of first-time admissions	I. Average cost per admission
1. Hospital Inpatient										
2. Free-standing residential										
REHABILITATION/RESIDENTIAL										
3. Hospital Inpatient										
4. Short-term (up to 30 days)										
5. Long-term (over 30 days)										
REHABILITATION/AMBULATORY										
Outpatient										
6. Methadone										
7. Non-methadone	138	118	0	74	0					
8. Intensive outpatient	1305	1228	0	1146	0					
9. Detoxification										

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)
(Estimated data are acceptable on this form.)

State: ARKANSAS
 Substate planning area: Benton
 Detox

TYPE OF CARE

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Substance Abuse Problems (no primary diagnosis)

State validated unit (column A - J)

UTILIZATION

TYPE OF CARE	Primary Diagnosis of Alcohol Problems			Primary Diagnosis of Drug Problems			Substance Abuse Problems (no primary diagnosis)			State validated unit (column A - J)
	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of admissions	E. Number of first-time admissions	F. Average cost per admission	G. Number of admissions	H. Number of first-time admissions	I. Average cost per admission	
1. Hospital inpatient	0	0	0	0	0	0				Yes/No (check one box)
2. Free-standing residential	2842	1452	0	494	396	0				Yes/No
REHABILITATION/RESIDENTIAL										
3. Hospital inpatient										
4. Short-term (up to 30 days)										
5. Long-term (over 30 days)										
REHABILITATION/AMBULATORY										
Outpatient										
6. Methadone										
7. Non-methadone										
B. Intensive outpatient										
9. Detoxification										

TREATMENT CAPACITY MATRIX

(Complete one form for State and one for each SPA.)
(Estimated data are acceptable on this form.)

State: **ARKANSAS**
 Substate planning area: **SMJL**

TYPE OF CARE

DETOXIFICATION (24-HOUR CARE)

	Utilization						Substance Abuse Problems (no primary diagnosis)			J. State-validated count (column A-J)
	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	D. Number of people served	E. Number of first-time admissions	F. Average cost per admission	Q. Number of admissions	II. Number of first-time admissions	I. Average cost per admission	
1. Hospital inpatient	166	86	0	48	26	0				Yes/No
2. Free-standing residential	3328	1658	0	568	448	0				Yes/No
3. Hospital inpatient	0	0	0	0	0	0				Yes/No
4. Short-term (up to 30 days)	5624	4198	0	2352	1784	0				Yes/No
5. Long-term (over 30 days)	0	0	0	305	264	0				Yes/No
REHABILITATION/AMBULATORY										
Outpatient										
6. Methadone	0	0	0	0	0	0				Yes/No
7. Non-methadone	4644	3334	0	2290	1272	0				Yes/No
8. Intensive outpatient	1458	1340	0	1188	1126	0				Yes/No
9. Detoxification	0	0	0	0	0	0				Yes/No

Primary Diagnosis of Alcohol Problems

Primary Diagnosis of Drug Problems

Form Approved

Application Page ___

Approval Expires: ___

ARKANSAS

PRICE PER UNIT OF SERVICE

Residential Day	\$34.00
Outpatient Hour	40.00
Outpatient Group Hour	6.00
Partial Day Treatment	26.00
Psychological Testing (Full Battery)	157.00
Psychiatric Evaluation	68.00
Psychological Evaluation	40.00
Medical Detoxification Day	338.00
Residential Detoxification Day	122.00
Antabuse Administering	2.50
Medical History/Physical	82.00
Medical Maintenance by Physician (3/4 Hr)	61.00
Drug Testing	6.00

PER CAPITAL ALLOCATION FORMULA:

$$\frac{\text{Catchment Area Population}}{\text{Total Population}} = \text{Percent of allocation}$$

IV. ATTACHMENTS ON SPECIAL REQUIREMENTS

ATTACHMENT 1: GROUP HOME ENTITIES AND PROGRAMS

The State of Arkansas, Bureau of Alcohol and Drug Abuse Prevention has established (9/89) and continues to administer the Revolving Loan Fund for Recovery Homes for Substance Abusers. SAPT Block Grant funds are used as the source to establish the Revolving Loan Fund. There have been no changes from the previous year.

Information is enclosed concerning the Revolving Loan Fund program and the processes involved. The fund conforms to P.L. 100-690 of the Anti-Drug Abuse Act of 1988 or its successor. Through the fund, non-profit corporations may apply for loans of up to \$4,000 to house a minimum of six (6) recovering individuals. The loan shall be repaid to the State in 24 equal installments due on the first of each month with a late fee of \$25 assessed to each payment received after the 25th of the month. Loan funds may be used for any legitimate cost (as listed in the enclosed information) associated with the establishment of a recovery home. Pre-applications or final applications may be submitted to the Bureau with the required documentation. Applications are reviewed in the order in which they are received and a determination of eligibility is made within 10 working days. Warrants are issued through the State payment system normally within a two to three week period.

The Group Home Revolving Fund is monitored by the Administrative Services Section of the Bureau of Alcohol and Drug Abuse Prevention. At a minimum, records are kept on applicants, disposition of applications, loan amounts, payments, and late fees. No loans were made in FY1991. During FFY93, the Bureau received and processed its first applications. Of the four (4) applications received, three (3) were funded. The fourth application was incomplete and additional information was requested. During the interim, the proposed dwelling was withdrawn by the owner and the application was never completed. The Bureau will report on the status of the three active loans when this information is called for in subsequent SAPT Block Grant applications.

STATE OF ARKANSAS
ARKANSAS DEPARTMENT OF HEALTH
BUREAU OF ALCOHOL AND DRUG ABUSE PREVENTION

REVOLVING LOAN FUND
RECOVERY HOMES FOR SUBSTANCE ABUSERS

PURPOSE

The State of Arkansas Bureau of Alcohol and Drug Abuse Prevention has established a revolving loan fund for the purpose of providing loans to support drug and alcohol free housing for recovering alcoholics and/or addicts. This fund is established in accordance with P. L. 100-690 of the Anti-Drug Abuse Act of 1988.

ELIGIBILITY

1. The applicant must be a non-profit corporation; and,
2. The application must provide for housing for a minimum of six (6) recovering alcoholics and/or addicts.

REQUIREMENTS AND LIMITATIONS

1. Loans shall not exceed \$4,000.
2. Each loan shall be repaid in 24 equal payments which will be due on the first day of each calendar month. A late fee of \$25.00 will be assessed to each payment received after the fifteenth day of the month;
3. Loan funds can be applied for any legitimate cost associated with the establishment of a recovery home, to include:
 - a. Security deposits
 - b. First month's rent;
 - c. Purchase of furnishings;
 - d. Dwelling modifications
 - e. The purchase of amenities which support healthy group living;
4. The Borrower must maintain the house as an alcohol and drug free environment;
5. The residents of the house must remain alcohol and drug free;
6. Any resident of the house who uses alcohol or drugs will be expelled from the house;
7. The cost of the housing will be borne by the residents;
8. The house will be operated as a self managed democracy;
9. The borrowers must provide monthly reports on the number of residents entering and leaving the home and the availability of space for new residents;

10. The corporation must have in place a system for measuring progress and effectiveness. This shall include objective measures by persons who are not residents of the home being supported by the loan.

APPLICATION PROCEDURES

Applicants are encouraged to consider submitting their applications in two stages:

1. Pre-application to determine eligibility;
2. Final application to secure a loan in an amount sufficient to cover start-up costs.

The eligibility determination could take several days or longer if there are problems with documentation. Such delays could cause the applicant to lose property that is being pursued for a lease. Pre-approval would eliminate such delays.

The applicant must submit a loan application to:

ARKANSAS DEPARTMENT OF HEALTH
BUREAU OF ALCOHOL AND DRUG ABUSE PREVENTION
108 East 7th Street
400 Waldon Building
Little Rock, AR 72201
Attn: A. D., Administrative Services

Applications can be obtained from the Bureau of Alcohol and Drug Abuse Prevention at the above address or by calling the office at 682-6663. The following documentation is required to be submitted with each application:

1. Certificates or other official documents showing the non-profit status of the corporation. In the event that the non-profit corporation is already known to the State, a letter from the Chief Executive or elected officer of the corporation will suffice.
2. The names of the individuals, a minimum of six (6), who will be the occupants of the proposed recovery home. These individuals must be available for a personal interview, and should be prepared to provide proof of their identity.
3. The applicant must provide a copy of the rules and regulations which will be used to manage their proposed recovery home and be able to demonstrate the following:
 - a. The home will be maintained as a drug/alcohol free environment;
 - b. Anyone using alcohol and/or drugs will be expelled;
 - c. The home is operated as a self managed democracy;
 - d. The home will establish accounts as necessary to cover the costs of housing which will be borne by the residents.
4. Proof of lease including all stipulations for rent, security and advances for which loan funds are requested and or other estimates related to costs associated with the loan request.

07/21/93

STATE OF ARKANSAS
ARKANSAS DEPARTMENT OF HEALTH
BUREAU OF ALCOHOL AND DRUG ABUSE PREVENTION

APPLICATION FOR RECOVERY HOME LOAN

PART I.

ELIGIBILITY

1. Provide the legal name and address of the non-profit organization to which the recovery home is affiliated.

NAME _____ PHONE(____) _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____

FEDERAL TAX ID NUMBER (if available) _____

2. Provide the name and address of at least six (6) recovering individuals who have completed a certified treatment program, who will reside in the proposed recovery home and who will be assuming responsibility for the operation of the home and the repayment of the proposed loan.

NAME _____ PHONE (____) _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____

NAME _____ PHONE (____) _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____

NAME _____ PHONE (____) _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____

NAME _____ PHONE (____) _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____

NAME _____ PHONE (____) _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____

NAME _____ PHONE (____) _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____

3. Attach a copy of any certificates or public documents which show the non-profit status of the corporation. If it is a corporation that has previously done business with the State of Arkansas as a non-profit organization this will not be necessary. You may want to check this with the Chief Executive Officer of the organization.
4. Attach a letter from either the Chief Executive Officer of the Non-Profit Corporation or the President of the Board of Directors which indicates their support of your application.
5. Include with the application a copy of the operating rules and regulations for the recovery home. Be sure that the operating rules provide for an alcohol and drug free home, that the use of alcohol and drugs will result in expulsion, the home will be managed democratically and the manner in which all bills and accounts associated with the maintenance of the home will be managed by the residents.

This is the end of Part I of the application. If you wish to know whether you will be eligible for a loan prior to actually finding a suitable home for lease, then submit this part of the application to:

BUREAU OF ALCOHOL AND DRUG ABUSE PREVENTION
108 East 7th Street
400 Waldon Building
Little Rock, AR 72201
ATTN: A. D., Administrative Services

This will eliminate any delays that might be encountered while trying to determine your eligibility. However, if you are ready to lease property then proceed with Part II of the application.

At this point, if you have any questions regarding how to proceed you can get assistance by calling 682-6663 and asking for the Assistant Director, Administrative Services.

PART II

LOAN INFORMATION

1. Provide the following information on the property that is to be leased.

ADDRESS _____

CITY _____ STATE _____ ZIP _____

How many bedrooms are in this home? _____ Bathrooms _____

LEASE TERMS From _____ To _____ Monthly \$ _____

Check those items that are included in the lease

Fuel _____ Utilities _____ Furnishings _____

ATTACH A COPY OF THE LEASE TO THE APPLICATION

2. Loan funds are requested in the amount of \$ _____
(The maximum loan amount is \$4,000)

Loan funds are to be used for the following purposes:

Security deposit \$ _____

First month's rent _____

Furnishings: _____

Dwelling modifications _____

Other _____ Describe _____

SUPPORTING DOCUMENTATION MUST BE ATTACHED

3. The following Revolving Loan Fund Repayment Agreement is to be completed and signed in the presences of the Assistant Director, Bureau of Alcohol and Drug Abuse Prevention.

The undersigned hereby certify that we are recovering from addiction to alcohol and/or other drugs. That we represent the non-profit corporation identified herein. We understand, that in accepting this loan in the amount of \$ _____, that it will be repaid in _____ installments of \$ _____ each, and a final installment of \$ _____. The first payment will be made on _____ with the balance to be paid on the _____ day of each subsequent month thereafter. Payments received more than fifteen (15) days after the due date will be assessed a late fee of \$25.00 which must be paid with the next installment. We further certify that all information provided

for this loan is true and further agree to provide a monthly report on residents entering or leaving the home and the number of current occupants.

SIGNATURE _____ DATE _____

SIGNATURE _____ DATE _____

SIGNATURE _____ DATE _____

SIGNATURE _____ DATE _____

SIGNATURE _____ DATE _____

SIGNATURE _____ DATE _____

WITNESSED BY _____ DATE _____

07/21/93

Attachment 2: Prevention

Answer the following questions about the status of policies, procedures, and legislation in your State. Most of the questions are related to Healthy People 2000 objectives. References to these objectives are provided for each applicable question. To respond, check the appropriate box or enter numbers on the blanks provided. After you have completed your answers, copy the attachment and submit it with your application.

1. Does your State conduct sobriety checkpoints on major and minor thoroughfares on a periodic basis? (HP 4.1)

- Yes
 No
 Unknown

2. Does your State conduct or fund prevention/education activities aimed at preschool children? (HP 4.6 and 4.16)

- Yes
 No
 Unknown

3. Does your State alcohol and drug agency conduct or fund prevention/education activities in every school district aimed at youth grades K-12? (HP 4.13)

- | SAPT BLOCK GRANT | OTHER STATE FUNDS | DRUG FREE SCHOOLS |
|---|--|---|
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> Yes |
| <input type="checkbox"/> No | <input checked="" type="checkbox"/> No | <input type="checkbox"/> No |
| <input type="checkbox"/> Unknown | <input type="checkbox"/> Unknown | <input type="checkbox"/> Unknown |

4. Does your State have laws making it illegal to consume alcoholic beverages on the campuses of State colleges and universities? (HP 4.16)

- Yes
 No
 Unknown

5. Does your State conduct prevention/education activities aimed at college students that include: (HP 4.7 and 4.16)

- | | | | |
|-----------------------------|---|--|----------------------------------|
| Education bureau? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Unknown |
| Dissemination of materials? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Unknown |
| Media campaigns? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Unknown |
| Product pricing strategies? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> Unknown |
| Policy to limit access? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Unknown |

6. Does your State now have laws that suspend or revoke administrative drivers' licenses for those determined to have been drinking under the influence of intoxicants? (HP 4.15)

- Yes - Upon Conviction
 No
 Unknown

7. Has the State enacted and enforced new policies, beyond those in existence in 1989, to reduce access to alcoholic beverages by minors such as (HP 4.16):

Restrictions at recreational and entertainment events at which youth made up a majority of participants/consumers.

- Yes No Unknown

New product pricing,

- Yes No Unknown

New taxes on alcoholic beverages,

- Yes No Unknown

New laws or enforcement of penalties and license revocation for sale of alcoholic beverages to minors,

- Yes No Unknown

Parental responsibility laws for a child's possession and use of alcoholic beverages,

- Yes No Unknown

8. Does your State provide training and assistance activities for parents?

- Yes
 No
 Unknown

9. What is the average age of first use for the following? (HP 4.5) (if available)

	<u>Age 0-5</u>	<u>Age 6-11</u>	<u>Age 12-14</u>	<u>Age 15-18</u>
Cigarettes	<u>N/A</u>	<u>24.1</u>	<u>12.1</u>	<u>5.7</u>
Alcohol	<u>N/A</u>	<u>35.5</u>	<u>18.0</u>	<u>19.1</u>
Marijuana	<u>N/A</u>	<u>9.1</u>	<u>7.2</u>	<u>5.1</u>

10. What is your State's present legal alcohol concentration tolerance level for: (HP 4.18)

Motor vehicle drivers age 21 and older? .10
 Motor vehicle drivers under age 21? .01

11. How many communities in your State have comprehensive, community-wide coalitions for alcohol and other drug abuse prevention? 11

ATTACHMENT 3: PROGRAMS FOR WOMEN

The Bureau of Alcohol and Drug Abuse Prevention (ADAP) continues to provide treatment services far in excess of the federally mandated amount of SAPT funds for women's services.

Of the funded projects for treatment services for women listed in Form 06, all the grantees will accept pregnant women and continue their alcohol/other drug treatment as long as the pregnant client is able to participate in and benefit from the program.

The ADAP uses no special definition for women in need of services. A desire or need for services is the only eligibility criteria for services for women and for any other client population.

By virtue of our Alcohol and Drug Management Information System (ADMIS), the ADAP was able to monitor the number of women in treatment services and the amount expended for services, thereby assuring compliance with Section 1916 (c) (14).

Other than the above monitoring mechanism, the ADAP, via its accreditation process, case reviews, and services-to-billings audits, monitors the adequacy of our effort to serve women.

In regard to estimation of treatment capacity, see Section III. 4.

The ADAP continued to serve as the lead agency on the "Interagency Coordinating Committee on Services to Drug Abusive Pregnant Women and Drug Affected Infants." This committee shares information, supports each other in funding proposals, and advocates on behalf of this client population.

Beginning in July, 1993 the ADAP began issuing grants for Pregnant and Parenting Women Living Centers (PPWLC). These are comprehensive, residential treatment centers for pregnant women and women with small children. The women and their children may stay at these PPWLCs for up to two years while receiving such services as:

- Alcohol/Drug Treatment
- Prenatal and Postpartum Care
- Case Management
- Parenting Skills
- Job Training
- Life Skills
- and other needed services.

There are now 3 PPWLCs which are operational:

- Arkansas CARES
- 4301 W. Markham, Slot 711-1
- Little Rock, AR 72205
- 661-7979

- Gateway House
- 1715 Grand Avenue
- Fort Smith, AR 72901
- 783-8849

Quapaw House
P.O. Box 6368
115 Market Street
Hot Springs, AR 71902
624-3325 or 624-1360

The number of available beds for women under these grants are:

Quapaw House	6
Gateway House	5
Arkansas CARES	8
Total	19

The ADAP does not specify in its treatment grants that certain amounts must be spent on women. The ADAP's only specification is in regard to "alcohol" vs. "drug" funding. The following, however, is a listing of treatment grants which serve women, either in a women only facility, or a co-ed facility.

PROVIDER	NDATUS #
ARKANSAS CARES	D 53000
OMART	D 14714
DECISION POINT	D 12031
CRDC	D 324311
ECA-EDC	D 32334
DEPARTMENT OF CORRECTION	D 44335
HDRS	D 448311
CASAP	D 546310
ARVAC	D 63813
QUAPAW HOUSE	D 64431
SARHC	D 71732
GATEWAY	D 84112
WESTERN ARKANSAS COUNSELING & GUIDANCE	D 80533

ATTACHMENT 4: PROGRAMS FOR IVDUs

In the past, the Arkansas Bureau of Alcohol and Drug Abuse Prevention has utilized its network of community based residential and outpatient treatment centers to service the alcohol and drug treatment needs of this population. The ADAP had directed its funded providers to insure that IVDUs receive priority access to treatment services by moving identified IVDUs into the next available treatment slot. In most instances for residential services this means placing them in a priority status on a waiting list. In the event that the length of time to access a residential slot will exceed seven (7) days, providers will place the individual into outpatient status and begin the treatment process. Providers also seek referrals to other treatment centers if the client requests and/or is agreeable to this course of action. The ADAP has also revised its method of identifying and capturing data concerning this population. The ADAP has been very aggressive in accessing training for the treatment provider community. In cooperation with The Center for AIDS and Substance Abuse Training and Westover Consultants, nationally recognized AIDS training courses and presenters have been brought to Arkansas at low or no costs to the State. The Training of Trainers courses has allowed the State to develop a core of NIDA certified AIDS trainers who regularly replicate training for administrators, counselors, and others who receive instruction on risk reduction, human sexuality, counseling issues, gay and lesbian issues, etc. Also, through a cooperative agreement with the AIDS/STD Unit of the Arkansas Department of Health, the ADAP has available an AIDS education course, as well as a course on pre- and post-test counseling. AIDS training is also presented through the Arkansas Substance Abuse Certification Board and through the University of Arkansas at Little Rock Department of Social Work's "Mid-South Summer School on Alcohol and Other Drug Abuse Problems" (both funded in part by grants from the ADAP). The ADAP mandates that each funded treatment program has an AIDS contact person on staff who is responsible for providing staff updated information, an agency AIDS policy, collecting a library of AIDS-related material and resources, and implementing an AIDS education component for the clients of the facility. The ADAP is a member of the Arkansas AIDS Advisory Committee, and works closely with the Arkansas Regional AIDS Interfaith Network (Arkansas RAIN), as well as with the Arkansas AIDS Foundation. Following this narrative is a listing of the community-based treatment facilities that provide treatment services to IVDUs in either an outpatient or a comprehensive residential treatment setting. These treatment centers are not equipped at this time to test for the etiologic agent in the Human Immunodeficiency Virus, and consequently utilize their local Arkansas Department of Health county unit to provide the testing for any client who may request it. Several providers have expressed an interest in receiving training in the drawing of blood to be able to conduct testing-related activities on site. All testing is done with Centers for Disease Control-approved pre- and post-test counseling. AIDS testing is at the option of the client and an individual's AIDS/HIV status cannot be used as a criteria for denying admission to treatment. All test results are communicated by the testing unit directly to the client who has the discretion as to whether or not to disclose his/her status to the treatment facility.

FUNDED TREATMENT CENTERS WHO WILL PROVIDE
TREATMENT SERVICES TO IVDUs

Arkansas CARES
4301 W. Markham, Slot 711-1
Little Rock, AR 72205

215 Club, Inc., Dba "Decision Point"
P.O. Box 1174
301 Holcomb
Springdale, AR 72764

Ozark Mountain Alcohol Residential
P.O. Box 308
Highway 62
Gassville, AR 72635

Ozark Counseling Services
#8 Medical Plaza
P.O. Drawer J
Mountain Home, AR 72653

Northcentral Arkansas Development Council
P.O. Box 3349
Batesville, AR 72501

North Arkansas Human Services System, Inc.
P.O. Box 2578
Batesville, AR 72501

Black River Area Development Corp. (Brad)
1405 Hospital Drive
Pocahontas, AR 72455

Crowley's Ridge Development Council
P.O. Box 1497
Jonesboro, AR 72401

Eastcentral Arkansas Economic Development Corporation
P.O. Box 709
Forrest City, AR 72335

Human Development And Research Services, Inc.
P.O. Box 8225
HDRS Building
Pine Bluff, AR 71611

Southeast Arkansas Mental Health Center
P.O. Box 1019
2500 Rike Drive
Pine Bluff, AR 71613

Counseling Clinic, Inc.
307 East Sevier Street
Benton, AR 72015

Detoxification Services Center
6701 Highway 67
Benton, AR 72015-8486

GYST House
4201 Barrow Road
Little Rock, AR 72204

Riverbend Recovery Center
1201 River Road
North Little Rock, AR 72114

Family Service Agency Of Central Arkansas
628 West Broadway
North Little Rock, AR 72115

Serenity Park
2801 W. Roosevelt Road
Little Rock, AR 72204

Twenty-Four Hour Center, Inc. (Men)
2021 Main Street
Little Rock, AR 72206

Twenty-Four Hour Center, Inc. (Women)
3900 Affolter Lane
Route 5, Box 32A
Little Rock, AR 72212

Freedom House
900 Dike Road
P.O. Box 1463
Russellville, AR 72801

Counseling Associates
110 Skyline Drive
Russellville, AR 72801

Quapaw House
P.O. Box 6368
115 Market Street
Hot Springs, AR 71902

Recovery Center
710 W. Grove
El Dorado, AR 71730

Red River Council On Alcohol And Drug Abuse
222 W. 5th Avenue
Texarkana, TX 75501

Harbor House, Inc.
615 North 19th Street
P.O. Box 4207
Fort Smith, AR 72914

Gateway House
1715 Grand Avenue
Fort Smith, AR 72901

Horizon
3900 N. Armour Street
Fort Smith, AR 72904

Sections 1912A and 1915(c) of the Public Health Service Act required that at least 50 percent of the funds expended from any block grant award to combat drug problems be used for treatment programs for individuals whose substances(s) of abuse is/are intravenously administered, with priority given to programs to treat individuals who are HIV infected, for training of drug abuse counselors in these programs, and to carry out related outreach activities.

1. How does the State define IVDUs in need of services?

Any individual who in their drug taking history ever used a needle to inject drugs into their body, whether it be skin popping, intramuscular or intravenous, and present themselves for treatment.

2. What did the State do to insure compliance with Sections 1912A and 1915(c) in spending FFY 1993 block grants funds?

The ADAP has directed its funded providers to insure that IVDUs receive priority access to treatment services by moving known IVDUs into the next available treatment slot and placing them in out-patient services until they can be admitted to the program. The ADAP has been very aggressive in accessing training for the treatment provider staff. In cooperation with the Center For AIDS and Substance Abuse Training and the Westover Consultants, nationally recognized AIDS training courses and presenters have been accessed at either low or no cost to the state. Also, through a cooperative agreement with the AIDS/STD unit of the Arkansas Department of Health, the ADAP has available an AIDS education course, as well as a counseling course on pre and post-test counseling. AIDS training is also presented through the Arkansas Substance Abuse Certification Board and through the University of Arkansas at Little Rock Department of Social Work "Mid-South Summer School on Alcohol and Other Drug Abuse Problems:", (both funded in part by grants from the ADAP). The ADAP mandates that each funded program have AIDS information, an agency AIDS policy, a library of AIDS-related material and resources, and an AIDS education component for the clients of the facility. The ADAP is a member of the Arkansas AIDS Advisory Committee, and works closely with the Arkansas Regional AIDS Interfaith Network (RAIN), as well as the Arkansas AIDS Foundation. All funded providers have at one time or another served IVDUs. In the past there has been no separate discrete funding directly attributable to the provision of services to IVDUs. the only identifiable funding was the billing record of the individual treatment facilities. However, in January 1994 the ADAP opened an IVDU Clinic in conjunction with the University of Arkansas for Medical Sciences (UAMS).

The clinic provides a comprehensive program of treatment services which utilizes prescription methadone as an adjunct to treatment. The pharmacological intervention stabilizes opiate-addicted individuals, thus allowing them to participate in an enhanced treatment service program of counseling, 12 step meetings, and other ancillary services. Topics to be discussed in individual and group counseling sessions shall consist of, at a minimum, issues concerning family or significant others; living skills; methadone maintenance; peer confrontation; positive drug screens; educational training; employment; vocational training; AIDS education. In addition, patients will receive a full range of health screening, including testing for infectious diseases. Patients will

move through treatment phases and will be required to demonstrate a level of stability and progress in treatment prior to being advanced to another phase.

3. What special methods did the state use to monitor the adequacy of efforts to meet the special needs of IVDUs?

Revised the Alcohol and Drug Management Information System (ADMIS) to better identify IVDUs as of July 1, 1991 and began the implementation of an CSAT approved action plan.

4. Describe how the state insured that funds were not used to (1) distribute sterile needles for injection of an illegal drug or distribute bleach to clean needles used for this purpose or (2) carry out AIDS testing without appropriate pre-test and post-test counseling.

The ADAP had grant assurances signed by the funded providers and did follow-up monitoring visits.

5. Section 1916(c) (16) requires that a treatment program serving IVDUs notify the state when the program has reached 90% of its capacity. Describe how the state insured that this was done.

The ADAP did this by desk review of monthly treatment utilization reports by the funded providers and required grant assurances.

6. Section 1916(c) (17) requires that IVDUs be accepted for treatment within seven days. Describe how the state insured that this was done.

The ADAP had directed its funded providers to insure that IVDUs receive priority access to treatment services by moving known IVDUs into the next available treatment slot and placing them in out-patient services until they can be admitted to the program.

7. Section 1916(c) (18) requires the state to carry out outreach activities for IVDUs. Describe how the state insured that this was done.

The ADAP did implement a pilot comprehensive street outreach program for IVDUs on April 1, 1992 in the three highest areas of HIV+/AIDS in the State of Arkansas (Fayetteville, Little Rock and Pine Bluff).

ATTACHMENT 5: WAIVERS

The State of Arkansas, Bureau of Alcohol and Drug Abuse Prevention does not plan to apply for any waivers for the FY1994 Substance Abuse Prevention and Treatment Block Grant.

ATTACHMENT 6: TOBACCO SALES TO MINORS AND LAW ENFORCEMENT

1. Please find attached a copy of Act 543 of 1991, "AN ACT TO AMEND ARKANSAS CODE 5-27-227 TO STRENGTHEN THE LAW PROHIBITING THE SALE OR DISTRIBUTION OF TOBACCO PRODUCTS TO MINORS; AND FOR OTHER PURPOSES."
2. In October, 1993 the Arkansas Board of Health modified the restaurant inspection procedure for inspections to include monitoring of facilities that sell tobacco products as part of their routine inspection. Through an arrangement with the Arkansas Department of Health/Division of Environmental Health Protection, these inspections will now include monitoring the sale of tobacco products to minors. Inspectors will be monitoring placement of vending machines, placement of signage and will also be responsible for the distribution of signs that comply with the State law. Violations will be reported to the Department of Finance and Administration which is the tobacco licensing agent in Arkansas. A Memorandum of Agreement is being negotiated with the Department of Finance and Administration that will outline the process of reporting violations and a determination of fines or loss of licensure.

Discussions have begun with the state Alcohol Beverage Control agency to initiate a process of random buys by underage individuals. It is anticipated these enforcement provisions will be in place by October 1, 1994.

3. There have been a series of ongoing meetings during the current fiscal year with key agencies and individuals to develop strategies for implementing ways to enforce the law against sale or distribution of tobacco products to minors.

ACT 543 1991
A Bill

1 State of Arkansas
2 78th General Assembly
3 Regular Session, 1991
4 By: Senators Snyder and Ross

SENATE BILL 184

FOR AN ACT TO BE ENTITLED

"AN ACT TO AMEND ARKANSAS CODE 5-27-227 TO STRENGTHEN
THE LAW PROHIBITING THE SALE OR DISTRIBUTION OF TOBACCO
PRODUCTS TO MINORS; AND FOR OTHER PURPOSES."

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. Arkansas Code 5-27-227 is hereby amended to read as follows:

"5-27-227. Providing minors with tobacco and cigarette papers.

(a) It shall be unlawful for any person, other than the parent or guardian, to give, barter, or sell to a minor under eighteen (18) years of age, tobacco in any form or cigarette papers.

(b) It shall be unlawful for any person who has been issued a permit or a license under the Arkansas Tobacco Product Tax Act of 1977, as amended, to fail to display prominently at each retail sales counter or each vending machine, a sign that meets the following requirements:

(1) The sign shall contain in red lettering at least one-half inch high on a white background 'IT IS A VIOLATION OF THE LAW FOR CIGARETTES OR OTHER TOBACCO PRODUCTS TO BE SOLD TO A PERSON UNDER THE AGE OF 18', and

(2) The sign shall include a depiction of a pack of cigarettes at least two inches high defaced by a red diagonal diameter of a surrounding red circle.

(c) It shall be unlawful for any manufacturer whose tobacco products are distributed in this state and any person who has been issued a permit or license under the Arkansas Tobacco Tax Act of 1977, as amended, to distribute free samples of any tobacco product or coupons that entitle the holder of the coupon to any free sample of any tobacco product:

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Speaker of the House

1 (1) in or on any public street or sidewalk within five
2 hundred feet (500 ft.) of any playground, public school or other facility
3 when such facility is being used primarily by persons under eighteen (18)
4 years of age for recreational, education or other purposes, or

5 (2) to any person under eighteen (18) years of age..

6 (d) (1) Except as provided in (2) below, it shall be unlawful for
7 any person who owns or leases tobacco vending machines to place a tobacco
8 vending machine in a public place. For purposes of this paragraph,
9 'public place' means a publicly or privately owned place to which the
10 public or substantial numbers of people have access.

11 (2) Tobacco vending machines may be placed in restricted
12 areas within a factory, business, office or other structure to which
13 members of the general public are not given access; in permitted premises
14 which have a permit for the sale of dispensing of alcoholic beverages for
15 on-premises consumption which restrict entry to persons age twenty-one
16 (21) or older; or places where the vending machine is under the
17 supervision of the owner or an employee of the owner.

18 (e) Any person who violates any of the provisions in this section
19 shall be deemed guilty of a misdemeanor and subject to the following
20 penalties:

21 (1) A fine of \$100 for the first violation;

22 (2) A fine of \$250 plus revocation and suspension of the
23 permit or license to distribute or sell tobacco products from the site
24 and vending machine for seven (7) days where the violation occurred for a
25 violation occurring within two years of the first violation;

26 (3) A fine of \$500 plus revocation and suspension of the
27 permit or license to distribute or sell tobacco products from the site
28 and vending machine for not less than one (1) month nor more than six (6)
29 months for a third violation occurring within two years of the first
30 violation;

31 (4) A fine of \$1,000 plus revocation and suspension of the
32 permit or license to distribute ~~or sell tobacco~~ products from the site
33 and vending machine for not less than nine (9) months nor more than
34 eighteen (18) months for each additional violation occurring within two
35 years of the first violation;

36 Upon any revocation or suspension of a permit or license under the

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1 provisions of this section, the person shall not be issued any new permit
2 or license to distribute or sell tobacco products during the period of
3 suspension or revocation.

4 (f) In addition to the penalties in (e) above, upon the fourth or
5 subsequent violation of subsection (a) within a two year period, all of
6 that person's licenses or permits to distribute or sell tobacco products
7 at all sites, locations and vending machines shall be suspended or
8 revoked and shall not be renewed for a period of not less than nine (9)
9 nor more than eighteen (18) months. Further, that person shall not be
10 issued any new permit or license for not less than nine (9) nor more than
11 eighteen (18) months. It shall be a defense to the penalty imposed under
12 this subsection if the person affirmatively demonstrates that the person
13 has an effective system in place to prevent violations of the prohibition
14 in subsection (a).

15 (g) The person convicted of violating any provision of this Act
16 whose permit and/or license to distribute or sell tobacco products is
17 suspended or revoked shall, upon conviction, surrender to the court all
18 such permits and/or licenses and the court shall transmit those permits
19 and licenses to the Director of the Department of Finance and
20 Administration and instruct the Director of the Department of Finance
21 and Administration to suspend or revoke, and not renew the person's
22 permit and/or license to distribute or sell tobacco products and not to
23 issue any new permit or license to that person for the period of time
24 determined by the court in accordance with this Act."
25

26 SECTION 2. All provisions of this Act of a general and permanent
27 nature are amendatory to the Arkansas Code of 1987 Annotated and the
28 Arkansas Code Revision Commission shall incorporate the same in the
29 Code.
30

31 SECTION 3. If any provision of this Act or the application thereof
32 to any person or circumstance is held invalid, such invalidity shall not
33 affect other provisions or applications of the Act which can be given
34 effect without the invalid provision or application, and to this end the
35 provisions of this Act are declared to be severable.
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Speaker of the House

SECTION 4. All laws and parts of laws in conflict with this Act
are hereby repealed.

/s/Snyder, et al

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APPROVED *R. M. Christie*
3-14-91 GOVERNOR

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Speaker of the House

ATTACHMENT 7: PROGRAM COMPLIANCE MONITORING

In order to satisfy compliance of monitoring the admission criteria for IDU clients under section 1923, the ADAP uses several methods.

1. ADAP conducts a monthly census of waiting list information. The particular information that is gathered from the programs that serve IDUs includes: presentation to community groups, street contacts, number entering treatment due to street contact and their demographics, number of persons who entered treatment due to street contact who were not IDUs, number of persons detoxed and their demographics, primary and secondary drugs of choice and number of survival kits given out.
2. Through accreditation visits and periodic case record reviews, the time between initial contact and admission can be documented, as well as any services provided during the interim.

For the special programs for pregnant women, and for HIV and TB services, accreditation visits and case record reviews are the primary methods of compliance monitoring.

ATTACHMENT 8: INDEPENDENT PEER REVIEW

Beginning with the Substance Abuse Prevention and Treatment (SAPT) Block Grant application for FY1995, the Bureau of Alcohol and Drug Abuse Prevention will address compliance of the Independent Peer Review. This section is not applicable for the FY1994 application.

ATTACHMENT 9: CAPACITY MANAGEMENT AND WAITING LIST SYSTEMS

Currently, the ADAP calls each funded treatment program once a month, on the same day of the month to ascertain the following information:

- 1 Confirmation of the bed capacity for residential programs and the slot capacity of outpatient programs. The bed capacity is further broken out into number of male and female beds available.
- 2 The number of males and females who are on the waiting list as of the day of the phone call.
- 3 The estimate by the program of the average length of time it will take for the people on the waiting list to be admitted to treatment.

Obviously, this method is not an adequate measurement for monitoring information regarding waiting lists. Therefore, during the current fiscal year the ADAP conducted a survey of how other states monitored their waiting lists and the particular information they gathered. With some modification, the ADAP has developed a system similar to the one established in Colorado. Basically this will involve the following changes:

1. This information will be sent in monthly along with the admission and discharge reports on the Alcohol/Drug Management Information System (ADMIS).
2. More specific aggregate information will be reported, such as, whether a woman is pregnant.
3. Ultimately, the goal is to have all treatment providers input this information on-line with the ADAP computer system.

An on-line ADMIS reporting system is being developed with our treatment provider within the Arkansas Department of Correction. The ADAP will test this ADC pilot system by July 1, 1994, with the final implementation target date of a statewide on-line system being July 1, 1995, thus assuring timely capacity management information.

ATTACHMENT 10: TB AND EARLY INTERVENTION SERVICES FOR HIV

TB SERVICES

In the fall of 1992, while still a part of the Department of Human Services, the Single State Agency (SSA) began a dialogue with the Arkansas Department of Health Tuberculosis Division. The ensuing discussions centered upon what pro-active steps could be implemented to assure that the publicly-funded AOD treatment programs in Arkansas did not experience outbreaks of active tuberculosis among its client population. The SSA negotiated a Memorandum of Agreement with the TB Division that called for, among other things, the training of AOD treatment facility staff in the administration and interpreting of TB tests, the mandatory testing of all clients entering residential treatment, a confirmatory x-ray by the local county health unit of all clients having a positive TB skin test, and prophylactic intervention and assignment of a primary physician for those clients in need of such intervention. The Agreement also provided for the TB Division to do an on-site survey of all residential AOD treatment facilities funded by the SSA to determine the appropriateness of placing Ultra Violet-C (UVC) germicidal lights in said facilities to protect both clients and staff. The UVC fixtures and light bulbs were provided through a 50-50 matching grant to those facilities that could accept the placement of the fixtures. The TB Division is providing the installation of the fixtures at no cost to the facilities and SSA staff monitor the cleaning and maintenance of the fixtures during routine site visits for compliance and records reviews. William Stead, M.D., Director of the TB Division, has determined that placement of UVC fixtures in outpatient-only clinics is not indicated at this time. This remains an option if the need arises.

In that the SSA was legislatively-transferred to the Arkansas Department of Health on July 1, 1993, the close working relationship established with the TB Division prior to the transfer, has carried on into this year. The Memorandum of Agreement also calls for joint visits to AOD treatment providers, at least quarterly meetings to discuss relevant issues of mutual concern, and cross training to foster better understanding of AOD and TB programs. A staff member of the TB Division was part of the Arkansas State Team that attended the Legal Action Center's Confidentiality and Health Records training held in Kansas City, Missouri in September, 1993. This resulted in confidentiality training being provided to TB Division staff by an SSA staff member in December, 1993. The SSA also negotiated a model Qualified Service Organization Agreement with the TB Division which each AOD treatment provider has used to establish a QSOA with the TB Division, thus fostering and facilitating a closer working relationship.

EARLY INTERVENTION SERVICES FOR HIV

Beginning with treatment grants effective July 1, 1994, the three current IDU street outreach programs will add an HIV intervention services component to their programs, namely, a physician who will provide all services as defined in §96.121 of the March 31, 1993 Interim Final Rules. Furthermore, an agreement will be implemented which satisfies all requirements listed in §1923 of the Public Health Services Act concerning the provision of interim services in conjunction with the admission requirements of this Section.

In particular, a physician will be retained at each of the treatment programs of Decision Point in Springdale, CASAP in Little Rock, and HDRS in Pine Bluff. These physicians will perform, at a minimum, the following:

- * Will perform on-site HIV anti-body testing, pre-test and post-test counseling, and on-going counseling for HIV clients.
- * Will arrange for monitoring of HIV clients' CD4 counts on a regular and as needed basis.
- * Will screen for TB and monitor HIV clients who are also positive for TB.
- * Will medically treat HIV clients, especially for the opportunistic diseases associated with HIV infection.
- * Will contact the local Ryan White consortium to arrange for medications e.g., AZT, ddI, ddC, d4T, etc.
- * Will arrange for procurement of nutritional supplements.
- * Will make other appropriate referrals for HIV clients.
- * Will, in general, perform the tasks of a case manager, in conjunction with the AOD treatment provider, for HIV clients.

In addition to these direct client services, these physicians will provide the staff of their respective treatment centers with in-service training on HIV related issues, will keep staff updated on the statistical trends of HIV in Arkansas, and will assist in the development of policies, procedures, protocols, or other types of guidelines for improving services to HIV clients.

In that the SSA was legislatively-transferred to the Arkansas Department of Health on July 1, 1993, the close working relationship established with the AIDS/STD Division prior to the transfer, has carried on into this year. The Memorandum of Agreement also calls for joint visits to AOD treatment providers, at least quarterly meetings to discuss relevant issues of mutual concern, and cross training to foster better understanding of AOD and AIDS/STD programs. A staff member of the AIDS/STD Division was part of the Arkansas State Team that attended the Legal Action Center's Confidentiality and Health Records training held in Kansas City, Missouri in September, 1993. This has resulted in a better understanding of the confidentiality requirements that AOD treatment providers are subject to. The SSA also negotiated a model Qualified Service Organization Agreement with the AIDS/STD Division which each AOD treatment provider has used to establish a QSOA with the AIDS/STD Division, thus fostering and facilitating a closer working relationship.