

The South Dakota Model: An Innovative Approach to Add Sustainability and Reach To A Conventional ROSC

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www.faceitsiouxfalls.org

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OVERVIEW OF PRESENTATION

- Genesis of Face It TOGETHER™ Sioux Falls
- Some overlaps with NIATx
 - The Co-Founder's Perspective
- Some Basics: Demographics & such for Sioux Falls and a description of the Model
- Overview of the Model
 - The Executive Director's Perspective
- The Business Model: Basics and Challenges
- The Secret Sauce: Engaging the Private Sector through the Workplace
- A Case Study
- Healthcare Reform & ROSC Movement = Wonderful Strategic Opportunity
- Face It TOGETHER™
- Contact Information

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GENESIS OF FACE IT TOGETHER™ SIOUX FALLS

“Co-Founders” were Kevin Kirby and Charlie Day

- Two lawyers with finance backgrounds (one is in recovery)

“Stimulators”

- Connecticut Community For Addiction Recovery
- National thought leaders &
- SD Division of Alcohol & Drug Abuse (Gib Sudbeck)

“Creators”

- Community representatives who participated in 7 “town hall” meetings (1 Saturday per month)
- Challenged to envision what a ROSC would look like in Sioux Falls in 10 years

Overall timeframe from planning to launch was 14 months

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SOME OVERLAPS WITH NIATx

Highly Aligned Missions:

- NIATx: to improve care delivery to help people live better lives
- Face It TOGETHER™ Sioux Falls: to *dramatically increase* both the number of individuals and families in recovery and the *quality and accessibility* of services by creating a recovery-oriented system of care

We Agree substance use disorder is a chronic disease

We Agree "customer" can be defined broadly

We Agree much can be learned from the private sector

We Agree the private sector can be a good partner

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THE CO-FOUNDER'S PERSPECTIVE



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SOME BASICS: DEMOGRAPHICS & SUCH

- **South Dakota Population:** +/- 825,000, about 50% of the population is in two MSAs and major industries are Government, Financial Services, Healthcare, and Tourism
- **Sioux Falls MSA:** +/- 250,000 residents and 4.6% unemployment
- **Substance Use Disorder:** Approximately 1 in 10 adults in the greater Sioux Falls Area suffer (about 18,000 people)
- **Seek Help:** +/- 75% of those afflicted will never seek help (largely due to psychological barriers)
- **Impact on Others:** Each person suffering directly & negatively impacts 4-5 additional people
- **Who and Where Are They:** +/- 75% of those with the disease go to work
- **Government Spending:** "Cost Avoidance" oriented & generally has missed the private sector

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THE MODEL: SOME BASICS

- A ROSC Model developed with full community participation through a seven month Town Hall process to create a broadly supportive “Community of Recovery”

- ROSC defined (William White)

“The complete network of indigenous and professional services and relationships that can support the long-term recovery of individuals and families or the creation of values and policies in the larger cultural and policy environment that are supportive of these recovery processes”

- Face It TOGETHER™ Sioux Falls is a not for profit 501(c)(3) Recovery Community Organization (RCO) at the heart of the ROSC that additionally supports extension of the “Community Of Recovery” into the private sector (The “Workplace Initiative”)

- A RCO that delivers peer to peer services that are financed by a sustainable private sector funding model built on measurable *“value propositions”* and that has added Awareness and Advocacy to its Mission

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THE MODEL: ADVANTAGES

- Chronic disease focus
- Community wide focus on recovery
- Engages the private sector
- Creates sustainable/recurring revenue streams
Promotes longer term strategies
- Through advocacy creates virtually integrated approach to supporting recovery
- Awareness Program to attack barriers to getting help

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THE BUSINESS MODEL

Lines of Business

- Recovery Support Services
- Advocacy
- Awareness Program

Organization

- Financial
- Human Capital
- Strategic Relationships
- Volunteers



Outcome Measures/Pursuing “Best Practices”

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LINES OF BUSINESS: RECOVERY SUPPORT SERVICES

- Clearinghouse for treatment and recovery information
- Peer Telephone Recovery Support
- Housing and transportation information
- Employment Support Services
- Free computers and internet access
- Space for peer based recovery support groups
- Sober social activities



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LINES OF BUSINESS: RECOVERY SUPPORT SERVICES



| | |
|---|---------------|
| Daily Walk-Ins to the Center | 704 |
| In-bound Phone Calls (only since Jan. 2011) | 319 |
| Telephone Recovery Support Participants (represents 3441 outbound calls) | 184 |
| Workplace Presentation Participants | 3200 |
| Community Presentations | 4100 |
| Unique Web site Visits (since March 2011) | 4000 |
| Total Clients Served | 12,507 |

(Numbers unless otherwise noted are from December 2009 through April 2011)

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LINES OF BUSINESS: ADVOCACY

- Build out the ROSC model
- Employer Initiative
- Integration of community resources including recovery treatment providers, medical providers and service providers that better reflect the chronic nature of the disease
- Other private and public sector partners such as the Faith Community, Education, Government and Legal, Housing, etc.



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THE EXECUTIVE DIRECTOR'S PERSPECTIVE



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THE BUSINESS MODEL

- Governance
 - Board has breadth of skills to further the mission and lines of business
- Management
 - Executive Director came from corporate world (Sr. V.P. of HR of Regional Bank)
- Staffing
 - 40%-50% of budget
 - Maximize volunteers
- Funding Targeted To Be 100% Private Sector
 - Budget +/- \$400,000
 - Employers 25%-50%
 - Board driven development effort 25%
 - United Way (20%-40%)
 - Economic development organizations
 - Strategic relationships (in-kind support)
 - (% vary with stage of evolution of the model)

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SOME CHALLENGES TO MODEL DEVELOPMENT & IMPLEMENTATION

- Catalyst(s) required
 - Strategic phase
 - Start up phase
 - Best if mix of corporate and individual
- Governance
 - Board make up
 - Executive director skill sets
- Funding
 - Strategic process (+/- \$200,000)
 - Operational phase
 - Expect demand for services to require development and creation of recurring revenue streams to become a core competency
 - Awareness program can be “borrowed” but requires a sustaining partner
 - Advocacy focus requires more time than money

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SOME CHALLENGES TO MODEL DEVELOPMENT & IMPLEMENTATION

Impact of Awareness Program Launch

Results of Creating Demand

Reaching those individuals who have not previously sought help for their alcohol or drug problem

- 238% Increase in In-bound Phone Calls
- 261% Increase in Daily Walk-Ins

(period compared is Jan/Feb 2011 to Mar/Apr 2011)

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IDEAS ON HOW A COMMUNITY CAN BEAT THE ODDS

- Strong employer support
- Employers committed to employees
- Positive experiences with wellness/disease management
- Union support should not be an issue
- Integrated healthcare delivery system a big help
- Tradition of successful focus on community issues
- Private sector behavioral health provider leadership
- Embracing "Social Entrepreneurship" (using private sector approaches to address traditionally public sector owned problems)

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THE WORKPLACE INITIATIVE

Employer Group's Mission Statement:

"Believing that addiction is a chronic illness and that companies can be a part of creating a recovery oriented community, Sioux Falls, SD, companies join together to use the winning elements of our wellness programs and services for the employee to open new doors and remove barriers to recovery."

Vision

"Our companies and community are united in the acceptance of and support for the journey of recovery from addiction; that services are accessible to all and the face of recovery is celebrated."

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THE WORKPLACE INITIATIVE (CONT'D)

Our Employers Are Investing In Recovery
Because It Makes Good Business Sense

- Research suggests significant return on investment
- Retained skilled and healthy workforce is key to success
- Healthy employees are a key strategic response to the Affordable Care Act
- Anything that impedes an employee's ability to contribute to the organization is a barrier and a cost

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THE WORKPLACE INITIATIVE (CONT'D)

Employer Goals

- Extend community of recovery into the workplace
- Show that successful employee wellness/disease management programs can be expanded to include substance use disorder
- Provide a template of activities and success stories to incent other employers to participate
- Develop a shared belief that substance use disorder is a chronic disease and challenge employers to review their programs within that context
- Use the winning elements of current worksite wellness & disease management program to incorporate understanding, education, acceptance and support for employees & their families on their journey of recovery from addiction

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THE WORKPLACE INITIATIVE (CONT'D)

What Has Happened (Big Picture)

- The initiative was organized in March of 2009 after a proposal by Face It TOGETHER™ Sioux Falls
- 20 business committed to the initiative
- Executive and HR leadership from each company became fully engaged
- Mission, vision, and steering group have evolved
- Multiple educational experiences from meeting with AA, EAP's, providers, tours of detox, treatment facilities and much more
- Wellness coaches trained and engaged in the model
- Two health plans are fully engaged in the model
- Local university has become a committed research partner

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THE WORKPLACE INITIATIVE (CONT'D)

What Has Happened (Some Details)

- Employee awareness sessions in the workplace with mandatory attendance
- Face It TOGETHER™ Sioux Falls provides speakers relevant to the setting & other information
- Recovering person's story (from the extensive Face It TOGETHER™ Sioux Falls Speaker's Bureau)
- Employer resources and committed messaging of support
- Handout materials
- Engagement of local integrated health systems to begin collecting and integrating claims data
- Development of visible employee peer support process within the companies ("co-workers in recovery")
- Employees and families are contacting Face It TOGETHER™ Sioux Falls for assistance as well as EAP's and other providers

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THE WORKPLACE INITIATIVE: CASE STUDY

Employer's Commitment

- Corporate wellness/disease management programs provide the tool to address health issues that result in lower productivity from the employee
- The employer's self insured health plan structure allowed the employer to design benefits that support corporate values/objectives
- The employer considered substance use disorder the same as any chronic illness that requires the long life style changes
- Used both Health Coaches and EAP as a resource for the employees to identify their health/life needs

Health Coaches And EAP Providers

- Professionals committed to the organization's "community health"
- Trained in behavioral change motivation
- Relationship focused and mutual respect

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THE WORKPLACE INITIATIVE: CASE STUDY

Implementation

- Create a culture of trust and accountability
- Implement per communicated processes
- Consistency and confidentiality
- Comply with HIPAA; ADA and any other legal obligations
- Employees getting the help they need and sharing with their fellow employees how it has changed their lives!

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THE WORKPLACE INITIATIVE: CASE STUDY

Is This Employer Unique?

- A leading employer, yes! But unique, no

Employers in our community generally are it

- Manufacturing, health care, financial services, not-for-profit, governmental...doesn't matter
- Size does not matter

Health Plan design Not A Barrier-Fully/Self Insured

- Multiple network access or single integrated network

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THE WORKPLACE INITIATIVE: CASE STUDY (CONT'D)

How Employers Will Measure Success

- Corporate Culture Change
 - Acceptance of the “Community of Recovery”
 - Lack changes in attitude & awareness with surveys
 - Growth in peer support processes in workplace
 - Dialogue change in management meetings
- Changes in health claims experience
 - Initially claims/cost increases as those in need receive care
 - Examining trends in co-morbidity diagnosis/claims
 - Comparing per member per year trend data with employers who do not manage chemical dependency
- Other Company Process Measures
 - Absenteeism, accidents, workers comp claims, productivity indicators

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THE WORKPLACE & HEALTHCARE REFORM: A STRATEGIC OPPORTUNITY FOR RCO'S

- Healthcare Reform (Mental Health Parity & The Affordable Care Act) has linked substance use disorder & mental health with chronic disease in a new way
 - Healthcare reform is pushing employers to have healthier employees (e.g. elimination of annual & lifetime limits) and to incent employees to be healthier
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- The Bottom Line: healthcare reform is taking the ROSC movement from the “Right Thing To Do” to “A Necessity”

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THE WORKPLACE & HEALTHCARE REFORM: A STRATEGIC OPPORTUNITY FOR RCO'S (CONT'D)

- **The Strategic Solution:**

- RCO's can help employers add substance use disorder support to workplace wellness & chronic disease management programs & extend "community support" into the workplace
- Allows creation of "true 24/7 anywhere/anytime ROSC"

- **The Ideal Environment:**

- An existing ROSC
- Employers with a commitment to wellness/chronic disease management & retaining employees
- An "integrated healthcare delivery system" (a model where physicians, clinics, hospitals & a health plan are under 1 roof)
- A community with a tradition of problem solving

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www.wefaceittogether.org

- Sioux Falls based 501(c)(3) not-for-profit formed to evangelize the South Dakota Model and support the creation of *Affiliates*
 - Its purpose resembles in concept Komen /Livestrong®
- Initial Support Services For Affiliates
 - Strategic (Town hall planning implementation): Fee
 - Operational consultations as requested: Fee
 - Awareness program: Free
 - Disseminate best practices: Free

- Funding Model
 - National corporate and foundation support
 - Fees derived from requested Affiliate services

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CONTACT INFORMATION

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