

## VISIONS

May, 2007


 2006 NAATP ANNUAL REPORT

NAATP Visions is the official newsletter of the National Association of Addiction Treatment Providers (NAATP),

For the past two years, I have had the honor and privilege of serving as chairman of the Board of Directors of the National Association of Addiction Treatment Providers. During that time, and from such a lofty perch, I was able to observe—and in some small way contribute to—how our organization works tirelessly to advance the needs of our members while responding to the needs of our field.

As I prepare to vacate the chairman's seat, I want to take this opportunity to express my deep felt appreciation to my fellow wonderful, talented and hardworking Board members. These dedicated individuals represent a broad section of our country and a variety of programs. I've appreciated having the opportunity to serve such a distinguished group, as well as the full NAATP membership. After such a close association with the Board, I can attest that each and every member is dedicated to and passionate about the "cause."

I also want to acknowledge the contribution of Dr. Ronald J. Hunsicker to NAATP and our field. Dr. Hunsicker offered countless hours of service and attention to the Board, to members, and to the issues we face, and for that, I am most grateful. We all can be extremely comfortable knowing that Dr. Hunsicker's talents and skills are dedicated to the field, and done so with the highest level of quality, professionalism, integrity, and intelligence. I am a better professional for having worked alongside him.

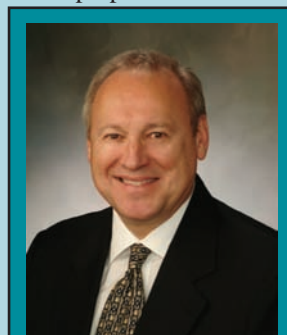
Under Dr. Hunsicker's leadership and the Board's direction, NAATP continues to work hard to bring innovative and meaningful products and services to its members. Examples include a refinement of the benchmarking progress,

as well as a managed care tool kit and information technology trainings. The NAATP Annual Addiction Treatment Leadership Conference also continues to grow and improve in both quality and credibility.

Dr. Hunsicker has testified at public policy hearings in Washington, DC, and is a constant voice on behalf of our membership for such issues as the recently introduced parity legislation.

In all, NAATP remains in very capable hands. The new chairman, Edward Diehl, president of Seabrook House in New Jersey, will provide strong visionary leadership and, with his guidance, our association will continue to grow in strength and purpose. As I prepare to hand him the chairman's gavel, I also pledge my continued support and encouragement. We belong to an important and effective organization, one that will remain so only with our continued hard work and commitment.

Thank you again for allowing me the opportunity to serve you. It was a singular professional experience and one I will not soon forget. It has been a great ride!



**Kenneth S. Ramsey, Ph.D.**  
Chairman  
Board of Directors  
NAATP

*"NAATP membership has grown dramatically in the last several years. The reason is clear; membership is worth the cost. Due in large part to the strong leadership of Ron Hunsicker, NAATP is fearlessly taking on the toughest issues currently facing treatment providers. Also, the opportunity to build relationships with other providers has served our organization well."*

**Ken Gregoire, CEO**  
Valley Hope Association

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ISSUE



national association of addiction treatment providers

# EXECUTIVE REPORT

This marks the 10<sup>th</sup> annual report that I have had the very good fortune to write on behalf of the National Association of Addiction Treatment Providers. Beginning with the report for 1996 through this report for 2006, **your** association has continued to grow, have an impact and become recognized as the organization with life and vitality. In the 2005 executive report, I indicated that the membership for NAATP was approaching 300 organizations. As you can see as you review the organizations that made the decision to become members of NAATP in 2006, we have rocketed past that 300 mark. While membership is not the only measure of the health of an organization, it certainly is a strong indicator of the appeal and attraction which an organization has. NAATP continues to grow each year and it continues to represent some of the best know, best operated and most highly committed organizations delivering addiction treatment.

One of the most visible and concrete examples of the strength of your association is your board of directors. It has again been my privilege to work with this exceptional group of individuals who are committed to the association and to having the association become a source of information for members, potential members, the public, policy makers and for individuals and families seeking addiction treatment.

During 2006, your board of directors spent a considerable amount of time taking a look at all the changes taking place in addiction treatment, the diversity represented by membership in NAATP. That discussion led the board to affirm that as an association our commitment is to providing addiction treatment which has **recovery** as the ultimate goal. NAATP wants to assume a leadership position in making sure that recovery is what we offer to patients and that we do not settle just for harm reduction or symptom reduction as a definition of treatment. The other seminal discussion and focal point of your board was to affirm that the emphasis of NAATP would be on addictions. The board is well aware that *abuse* is a very significant issue in society, but that our emphasis will continue to primarily be on treating the disease of addiction.

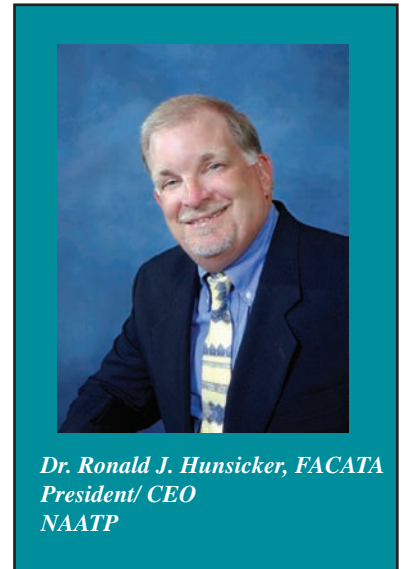
A major celebration at the 2006 annual conference was the release of the NAATP Managed Care Tool Kit. This resource is a collection of definitions as well as best practices among NAATP members in regards to their experience in working with managed care organizations. The Managed Care Tool Kit was unveiled and distributed to the registrants at the 2006 NAATP annual conference and then subsequently distributed to the entire NAATP membership. This resource is now also available on a CD. The managed care tool kit is available to member organizations of NAATP only and is a membership benefit.

Member benefits continue to include benchmark surveys, bi-annual salary surveys, annual conferences, 10 issues of a newsletter, regional gatherings, and the SECAD conference held in Atlanta, GA each year. As an information hub, your NAATP office receives over 200 incoming phone calls a week and

well over 900 emails per week. The NAATP office has set up a system to quickly communicate with the members of NAATP through an email blast. If you have not been receiving these communications, it could be that the office does not have your email address or that the one being used is no longer working or accurate.

2006 also saw your board and the entire association become much more energized around issues of public policy. NAATP would like to be recognized as the organization that has positioned itself as the expert in terms of addiction treatment. To accept this leadership role, we need to position ourselves as being accessible and to being ready to respond to a variety of issues. The next step for NAATP will be to secure the staffing expertise to ensure that its agenda is communicated to policy makers and that decision makers have access to our concerns and our agenda. The ground work has been laid in 2006 for this to happen!

Finally, your organization is managed by a volunteer board of directors. There is absolutely no possible way that this association would have achieved what it has without the commitment of its board of directors. It is my very distinct pleasure and a real honor to serve your board. Your association is in exceptional hands.



Dr. Ronald J. Hunsicker, FACATA  
President/ CEO  
NAATP

A handwritten signature in black ink that reads "Ronald J. Hunsicker". The signature is written in a cursive style.

*"NAATP is the first source to go to acquire confidential advice from colleagues on the development of policies. It is where my administrators go first for the best answers to complex leadership questions."*

*"Why not consult with the best and brightest in the business. NAATP is where the experienced, successful treatment organizations come together to compare notes on the issues of the day".*

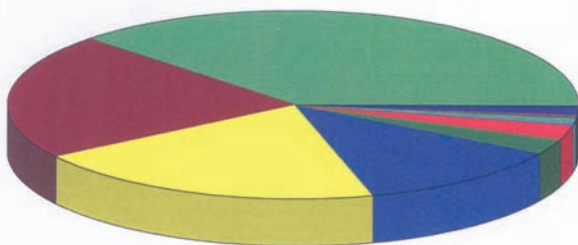
**Edward Diehl, President/CEO  
Seabrook House**

# FINANCIAL REPORT

AS THE NATIONAL ASSOCIATION OF ADDICTION TREATMENT PROVIDERS CONTINUES TO GROW, SO DOES THE DIVERSITY OF OUR INCOME AND OUR EXPENSES. WE ARE AN ASSOCIATION WHICH IS COMMITTED TO DELIVERING MEMBERSHIP OF VALUE TO ITS MEMBERS AND AS SUCH WE RECEIVE NO REVENUE/INCOME FROM GRANTS OR OTHER FUNDING SOURCES. MEMBERSHIP DUES, AND PRODUCTS AND SERVICES OFFERED THE MEMBERSHIP AND OTHERS RELATED TO ADDICTION TREATMENT CONSTITUTE THE INCOME STREAM FOR NAATP. IN 2006 THE TOTAL INCOME WAS \$965, 114 AND THE TOTAL EXPENSES WERE \$845,758.

THE INCOME FROM MAJOR SOURCES LOOKED AS FOLLOWS:

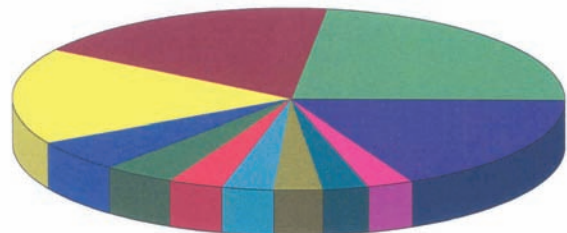
NAATP DUES	\$364,236
NAATP ANNUAL CONF.	\$209,560
SECAD	\$195,023
MEMBERSHIP	
DIRECTORY ADS/WEB ADS	\$ 52,308



NAATP Dues	%37.74
NAATP Annual Conference	21.71
SECAD	20.21
Public Policy Fact Sheet	12.11
Membership Directory Ad	2.73
Web Hot Link	2.69
Misc. Income	0.84
Mail Label Sales	0.54
Newsletter Ads	0.45
Job Posting on Web	0.29
Other	0.67
<b>Total</b>	<b>\$965,111.14</b>

EXPENSE DISTRIBUTION FOR 2006 WAS:

MANAGED CARE TOOL KIT	\$ 35,125
NAATP ANNUAL CONF.	\$154,352
SECAD	\$144,582
MEMBERSHIP BENEFITS	
PUBLICATIONS	\$ 25,210



Wages (gross)	%22.94
NAATP Annual Conf Expense	18.25
SECAD Expense	17.09
Printing and Reproduction	5.69
Managed Care Tool Kit	4.15
Newsletter	3.29
Travel & Ent	3.09
Member Benefit	2.98
Public Policy	2.75
Office Supplies	2.71
Other	17.05
<b>Total</b>	<b>\$845,758.13</b>

*NAATP keeps me current with addiction public policy related issues, clinical best practices and business benchmarks. There is no way I'd have the time to do the research to know what I know without NAATP. The leadership and personal attention Ron Hunsicker provides members, coupled with the opportunities to meet other CEOs, has provided me with an incredible network from which I have learned a lot and has helped Fairbanks grow towards an exciting future.*

**Helene Cross**

# 2006 NEW MEMBERS

A Bridge to Recovery  
Ridgeland, MS

AJG Solutions, Inc.  
Pompano Beach, FL

Alkermes, Inc.  
Cambridge, MA

Ascent  
Naples, ID

Behavioral Health of the Palm Beaches  
North Palm Beach, FL

Better Times Productions  
Calabasas, CA

Bridgeway Counseling Services  
St. Charles, MO

Bridging the Gaps  
Winchester, VA

Brookside Institute  
Irvine, CA

Canterbury Institute  
Iselin, NJ

Canyon View  
Twin Falls, ID

Carrier Clinic - Blake Recovery Center  
Belle Mead, NJ

Casa Palmera  
Del Mar, CA

Clinica Nuevo Ser  
Tijuana, B.C., Mexico

Core Solutions, Inc.  
Wayne, PA

Crossroads Treatment Centre  
Kelowna, BC

CSS Test Headquarters  
Voorhees, NJ

De Paul Treatment Centers, Inc.  
Portland, OR

Decision Point  
Prescott, AZ

Desert Star Addiction Recovery Center  
Tucson, AZ

English Mountain Recovery  
Sevierville, TN

Focus Healthcare of Tennessee  
Chattanooga, TN

Focused Recovery  
Santa Fe, NM

Four Circles Recovery Center  
Horse Shoe, NC

Gateway Community Services, Inc.  
Jacksonville, FL

GCD + Company, P.C.  
Kerrville, TX

Good Samaritan Center for Counseling Services  
St. Clair, PA

Hanley Hall  
Vero Beach, FL

Heritage Home, Inc.  
Huntingdon, Quebec

Inner Harbour, A Safe Passage for Women in  
Recovery, Tequesta, FL

Lakeside Behavioral Health  
Memphis, TN

Mayflower Center, LLC  
San Rafael, CA

Memorial Hermann Prevention & Recovery Center  
Houston, TX

Miramar Laguna Beach  
Laguna Beach, CA

Moonview Sanctuary  
Santa Monica, CA

Morningside Recovery  
Newport Beach, CA

New Found Life, Inc.  
Long Beach, CA

New Hope Foundation  
Marlboro, NJ

Newgate 180  
Merrickville, Ontario Canada

Newport Coast Recovery  
Newport Beach, CA

Pacific Coast Recovery Center  
Laguna Beach, CA

Palm Partners  
Delray Beach, FL

Paradise Recovery  
Honolulu, HI

Passages, Inc.  
Houston, TX

Rebecca's House/Eating Disorder Outpatient Programs  
Lake Forest, CA

Recovery Connection  
Philadelphia, PA

Safe Harbor Treatment Center for Women  
Costa Mesa, CA

Sober Living by the Sea  
Newport Beach, CA

Southeast Michigan Community Alliance  
Taylor, MI

Sunshine Coast Health Centre  
Powell River, BC

The Haskell House  
Climax, NY

The McLean Center at Fernside  
Princeton, MA

The Morton Center  
Louisville, KY

Todos Santos Company  
New York, NY

Townsend Recovery  
Lafayette, LA

Westbridge, Inc.  
Manchester, NH



# *Ambassador* series by Blockhouse

## Value

When dollars get tight, you must consider your Return On Investment; shortsighted choices may damage your long-term program. Buying Blockhouse furniture is more than just a purchase - it's an investment in style, quality and durability. Our customers demand it, our reputation depends on it.



Your choice in fully upholstered lounge seating when versatility is essential. Available with a selection of (2) additional arm options, the Ambassador is ideal for many types of facilities.

Both seat and back cushions are reversible so they can be flipped over when soiled. Fabric seams are triple needle stitched using reinforcing tape on the back side of the seam for strength. All upholstery is applied with heavy duty hook and loop fasteners (Velcro) easily removable for cleaning or replacement. The back cushion has a no-sag spring installed at the base of the cushion to provide ergonomically correct lumbar support. Ambassador is built to last, bolted together using solid steel brackets; your assurance of the Blockhouse guarantee of durability.

## THE POWER OF HAVING THE BOARD ON BOARD

I want to take this opportunity to speak to NAATP members about an important initiative led by the Institute for Healthcare Improvement as part of its Five Million Lives Campaign. This Campaign is focused on preventing unnecessary deaths in healthcare settings and reducing incidents of medical harm. In the classical sense, one's mind immediately jumps to the well-publicized surgeries on the wrong body part. However, as an important but sometimes overlooked component of healthcare in this country, addiction treatment organizations confront a fragile population of patients on a daily basis, and effective and safe care for our patients, especially those in residential treatment, is just as critical. Our responsibility is no less vital than the duties of our brethren in acute care hospitals.

As a key element in this Campaign, the Institute for Healthcare Improvement has identified for the first time a non-clinical goal: effective leadership and governance by Boards.

To help Boards assume a major leadership role in improving clinical quality and reducing harm, it had identified six crucial goals and related activities for Boards:

- **Set Aims:** Make an explicit, public commitment to measurable improvement.
- **Seek Data and Personal Stories:** The example given is to audit randomly chosen patient charts for all types and levels of injury, and conduct a "deep down" investigation of one major incident, involving interviewing the affected patient, family and staff.
- **Establish and Monitor System-Level Measures:** Track organization-wide progress by installing and overseeing crucial system-level metrics of clinical quality, such as medical harm per 1,000 patient days or risk-adjusted mortality rates over time.
- **Change the Environment, Policies and Culture:** Require reports, communication, disclosure, transparency, resolution, and that all the elements of the organization are committed to quality and safety.
- **Encourage Learning, Start with Yourself:** Identify the capabilities and achievements of the best Boards and apply that standard to yourself and all staff.
- **Establish Accountability:** Set the agenda for improvements by linking executive performance and compensation to quality and safety.

This is an agenda that requires the commitment of the entire organization and its governing Board to fulfill. At Hazelden, while we have a long-standing commitment to quality care for our patients, we have made significant efforts in the last several years to incorporate these efforts more visibly into our strategic plan with a goal to improve patient outcomes. At the Board level we have first focused on enhancing our own governance practices. For example, our Board has adopted a set of governance principles (soon to be available on our website at [www.hazelden.org](http://www.hazelden.org)) and a Board Code of Conduct and Ethics. We have established a Board education plan to provide resources for learning to our Board members who come from communities across the country. We report quarterly to our Board committee that oversees patient

care and quality on various measures, including data on our patient population, patient treatment satisfaction, treatment effectiveness, abstinence rates and patient safety.

Clearly, a number of hospitals and healthcare systems are well ahead of our own field in their public reporting of quality measures. Take a cruise on the Internet, and you will find performance metrics displayed on a wide array of goals from patient satisfaction to adherence to the use of evidence-based protocols for medical events such as heart attacks, heart failure and pneumonia. Public awareness of quality failures and increasing demands by payors for improving the quality of outcomes will only continue, and those trends will affect the addiction treatment world as consumers, government and other payors apply the same due diligence to our field.

While addiction treatment providers have no standard agreed upon measure of "success", I believe that in addition to finding a way to agree on a standard success measures, we should also be raising the level of our Board performance, and including our Boards of Directors in the conversation about our efforts to increase the chances for our patients to sustain life-long recovery. As we press forward to insist on parity for healthcare coverage of the disease of addiction, the payors will be looking to us to demonstrate our own commitment to quality and improved outcomes. Our Boards need to help lead the way, as they represent the public "face" of our organization.

At Hazelden, we begin each Board meeting with the Board Chair reading a letter from a grateful patient or family member to remind all present of the fundamental reason why we are in the room. We end each meeting with an executive session where the Board can candidly address the quality of the meeting, the quality of the discussions and address sensitive issues. We believe this approach sets the right tone for Board governance at Hazelden as the ultimate fiduciaries of the organization. I encourage each of you who has governance responsibilities in your own organization to consider how you can harness the power of your Board to raise the bar on performance, and improve the standards of care and safety for your patients and clients, and ultimately to improve outcomes.

In a time of increased public scrutiny, heightened consumer expectations, greater complexity of our patients and new learnings about our disease every day, leaders of treatment organizations cannot drift along with the tides, but need to be moving aggressively with our Boards to be viewed as colleagues and partners of the leading acute healthcare organizations in providing high quality, patient-centered care.

As Eleanor Roosevelt put it, "You must do the thing you think you cannot do." We can wring our hands over inequitable insurance coverage, the stigma of the disease, the lack of funding, etc. Or we can roll up our sleeves, harness the power of our Boards and each other, and set to the important work at hand.

ELLEN L. BREYER, PRESIDENT/CEO  
HAZELDEN FOUNDATION  
MEMBER, NAATP BOARD OF DIRECTORS

## CAREER OPPORTUNITIES

### ADDICTIONS MANAGER

ADDICTIONS MANAGER NEEDED FOR THE JADAC 76 BED INPATIENT PROGRAM. MUST HAVE MASTERS DEGREE OR EQUIVALENT, KENTUCKY CADC, AT LEAST SIX YEARS OF ADDICTIONS TREATMENT EXPERIENCE, AND AT LEAST FOUR YEARS OF ADDICTIONS MANAGEMENT EXPERIENCE. SEND RESUME TO SCS JADAC, ATTN: HR, 600 S PRESTON ST, LOUISVILLE, KY 40202. EOE

## Welcome New

### NAATP MEMBERS

CORE SOLUTIONS, INC.  
WAYNE, PA

TOWNSEND RECOVERY  
LAFAYETTE, LA

TODOS SANTOS COMPANY  
NEW YORK, NY

NEWPORT COAST RECOVERY  
NEWPORT BEACH, CA

SOBER ESCORTS, INC.  
OCALA, FL

CLEAR HAVEN CENTER  
CHERTSEY, QUEBEC, CANADA

SAN CRISTOBAL ACADEMY  
TAOS, NM

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[bill@billrussellassociates.com](mailto:bill@billrussellassociates.com)  
561-306-1684

## UPCOMING EVENTS FOR YOUR CALENDER

**The Refuge** will hold a Somatic Experiencing® training in Florida! Developed by Peter A. Levine, Ph.D., author of *Waking the Tiger*, it is a naturalistic approach to healing trauma. This Beginning level training is co-sponsored by The Refuge and will be held at their facility **June 1-4, 2007**. Visit [www.traumahealing.com](http://www.traumahealing.com) or call 303-652-4035 for additional information.

**The National Council on Problem Gambling** will hold its national conference "Gambling and Co-Occurrence: Improving Practice and Managing Consequences," **June 9-11, 2007 in Kansas City, MO**. For more information, visit [www.ncpgambling.org](http://www.ncpgambling.org)

SAVE THESE DATES for the **Haymarket Center** upcoming 13<sup>th</sup> Annual Summer Institute on Addictions on **June 27, 28, & 29, 2007, at The Drury Lane in Oakbrook Terrace, Illinois**, with nationally-known speakers: Stephanie Covington, Ph.D., Earnie Larsen, Peter Bell, Stanton Peele, J.D., Ph.D., Cardwell C. Nuckols, Ph.D., and Delbert Boone. For more information, contact Carol Blyskal at (312) 226-7984 x314 or view our website at [www.hcenter.org](http://www.hcenter.org).

**Ben Franklin Institute** will present the 2007 Summits for Clinical Excellence Conferences **June 21-24** LAS VEGAS, NV; **July 19-22**, BOULDER, CO; **October 18-21**, TEMPE, AZ. For more information, visit [www.BFIsummit.com](http://www.BFIsummit.com) or call 1-800-643-0797.

**The Ohio State University and the Ohio Department of Alcohol and Drug Addiction Services** presents the Annual Addiction Studies Institute **August 14-17, 2007** at the Greater Columbus Convention Center in **Columbus, Ohio**. Contact Garrison and Associates, Inc. at 614.273.1400 or email [asi@garrisonevents.com](mailto:asi@garrisonevents.com)

The **Network for the Improvement of Addiction Treatment (NIATx)** will hold its first annual summit, "Improving Access and Engagement in Addiction and Behavioral Health Treatment" on **April 23-24** in **San Antonio, Texas** in partnership with the Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Treatment and the Robert Wood Johnson Foundation. For more information and to register, visit [www.NIATx.net](http://www.NIATx.net).

**The Dallas Chapter of the Texas Association of Addiction Professionals** will sponsor NOVA 2008, STRENGTH, PROSPECTIVE & ADVOCACY, THE ANNUAL UPDATE ON ADDICTIONS, **January 24-26, 2008**. For information contact: Dallas Chapter TAAPP.O. Box 192186, Dallas, Texas 75219 Or email Paula at [lcdctraining@yahoo.com](mailto:lcdctraining@yahoo.com)

## NAATP VISIONS

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V I S I O N S

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