

This rule was filed as 7 NMAC 32.6.

TITLE 7 HEALTH
CHAPTER 32 ALCOHOL AND DRUG ABUSE
PART 6 COUNTY DWI PLAN GUIDELINES

7.32.6.1 ISSUING AGENCY: Department of Health, Behavioral Health Services/Division of Substance Abuse.
[10/8/93, 1/1/97; Recompiled 10/31/01]

7.32.6.2 SCOPE: All New Mexico counties.
[1/1/97; Recompiled 10/31/01]

7.32.6.3 STATUTORY AUTHORITY: The Community Alcoholism and Alcohol Abuse Prevention, Screening and Treatment Act, Section 43-3-11A(2) NMSA 1978 (as amended by Laws 1993, Chapter 65), which requires the department to adopt rules to provide for “the format and guidelines for county DWI plans and the criteria for evaluating them.”
[10/8/93, 1/1/97; Recompiled 10/31/01]

7.32.6.4 DURATION: Permanent.
[1/1/97; Recompiled 10/31/01]

7.32.6.5 EFFECTIVE DATE: January 1, 1997, unless a later date is cited at the end of a Section or Paragraph.
[1/1/97; Recompiled 10/31/01]
[Compiler’s note: The words *or paragraph*, above, are no longer applicable. Later dates are now cited only at the end of sections, in the history notes appearing in brackets.]

7.32.6.6 OBJECTIVE: To establish the format and guidelines for county DWI plans and the criteria for evaluating them.
[1/1/97; Recompiled 10/31/01]

7.32.6.7 DEFINITIONS:

- A.** “Alternative sentencing program” means a program that provides the courts with a sentence alternative to incarceration while providing access to intervention services in an environment which is consistent with the “least restrictive” principle (e.g. non-residential intensive supervision) for the DWI offender.
- B.** “Board” means the board of county commissioners of a county.
- C.** “Continuum of care” means linkage of services including prevention, crisis intervention, intervention, treatment and aftercare.
- D.** “Department” means the New Mexico department of health.
- E.** “DFA” means the New Mexico department of finance and administration.
- F.** “DWI” means driving while intoxicated/impaired whether because of alcohol or other drug use.
- G.** “DWI program” means a community program specifically designed to provide treatment and/or prevention regarding driving while under the influence of alcohol or drugs.
- H.** “Planning council” means a county DWI planning council that represents a broad spectrum of interests.
- I.** “Prevention program” means any program which has as its objective the amelioration of conditions known to motivate excessive or abusive use of alcohol and other drugs or to increase the ability of the individual to resist pressures from other people to use or abuse alcohol and other drugs, through such techniques as effective education, values clarification, saying no to peer pressure, recreational alternatives to substance abuse, and wilderness experience.
- J.** “Screening program” means a program that provides screening or examination by alcoholism treatment professionals of persons charged with or convicted of driving while intoxicated or of other offenses to determine whether the individual is:
 - (1)** physically dependent on alcohol and thus suffering from the disease of alcoholism;

- (2) an alcohol abuser who has not developed the alcoholism disease syndrome but has an entrenched pattern of pathological use of alcohol and social or occupational impairment in function from alcohol abuse;
- (3) neither an alcoholic nor an alcohol abuser whereby alcoholism treatment is not necessary; and
- (4) that provides referral or recommendation of such persons to the most appropriate treatment.

K. “Statewide substance abuse prevention and treatment services plan” means the comprehensive plan for a statewide services network developed by the department that documents the extent of New Mexico’s alcoholism, and alcohol and drug abuse problems. The plan also documents statewide needs for prevention, screening, detoxification, short-term and long-term rehabilitation, outpatient programs and DWI programs. The plan shall be based on the continuum of care concept of a comprehensive substance abuse prevention and treatment system.

[10/8/93, 1/1/97; Recompiled 10/31/01]

7.32.6.8 INTRODUCTION: The 1993 New Mexico legislature enacted Laws 1993, Chapter 65 (SB 341, etc., as amended) to address DWI issues in the state. The law increases the rate of the liquor excise tax to provide for state and local programs for the prevention, screening, assessment, treatment and other alternative sentencing services relating to DWI. A portion of the law creates the local DWI grant program, providing for county and municipal funding. Counties must establish a planning council which must adopt a county DWI plan; municipal activities can be submitted only as part of the official county DWI plan. With the advice of the planning council, the board or its designee shall prepare the county DWI plan. Upon approval of the county DWI plan by the board and the planning council, the board shall submit the county DWI plan to the department for approval and integration into the statewide substance abuse prevention and treatment services plan.

[10/8/93, 1/1/97; Recompiled 10/31/01]

7.32.6.9 DWI GRANTS: The purpose of all available DWI grants to local communities is to fund new, innovative or model programs, services or activities of any kind designed to prevent or reduce the incidence of DWI, whether related to alcoholism and alcohol or other drug abuse, as described below.

A. Prevention is an active process for developing conditions and personal attributes that promote the well-being of people. Prevention activities are designed to promote the personal, holistic and social growth of individuals to support those aspects of the community and culture which promote positive behaviors and healthy lifestyles. Prevention programs focus on providing information, education and alternatives in an effort to reduce the inclination toward DWI behavior. Community participation is critical to promote a healthy safe environment and must involve individuals, family and community groups.

B. New or pilot screening and assessment services shall be designed to become self-sustaining. Screening programs shall be established in collaboration with the district, magistrate, metropolitan and municipal courts to be served by the screening program. Where feasible, screening programs shall not be operated by alcoholism treatment programs serving judicial districts in order to avoid conflicts of interest when recommending offenders for treatment.

C. DWI treatment programs shall be specifically designed to reduce the incidence of DWI and to successfully reduce repeat DWI offenses.

D. DWI alternative sentencing programs shall be specifically designed to reduce the incidence of DWI, and successful in reducing repeat DWI offenses.

[10/8/93, 1/1/97; Recompiled 10/31/01]

7.32.6.10 ELIGIBILITY FOR COUNTY DWI PLANS:

A. County DWI plans shall be accepted only from counties that have established a planning council which has adopted a county DWI plan; municipal activities shall be submitted only as part of the official county DWI plan.

B. Multi-county DWI plans may be submitted.

C. County DWI plans shall be signed by the chairperson of the board, the chair of the planning council and by the authorizing agent for each municipality, if any, participating in the plan. Each entity shall sign the official county DWI plan certification form in the application packet.

D. All counties participating in a multi-county DWI plan must submit letters of agreement confirming their role in a multi-county DWI service system. Letters of agreement shall be signed by the chairperson of the board in all counties participating in a multi-county plan.

[10/8/93, 1/1/97; Recompiled 10/31/01]

7.32.6.11 SUBMISSION REQUIREMENTS FOR COUNTY DWI PLANS: Counties shall adhere to the following submission requirements in order to be eligible for consideration for funding during the fiscal year July 1, 1993 through June 30, 1994 by the local government division of DFA. The county DWI plan period for subsequent years shall run from July 1 through the following June 30, unless otherwise determined by the department.

A. The county DWI plans shall be received by the department by the close of business on October 15, 1993 for the first year of the plan. The submission date for subsequent years will be August 31 unless otherwise specified by the department.

B. Counties shall submit one original and ten copies of their county DWI plan to: New Mexico Department of Health, Division of Substance Abuse, Room N-3300 Harold Runnels Building, P.O. Box 26110, 1190 St. Francis Drive, Santa Fe, New Mexico 87502-6110.

C. Each county DWI plan shall be received by the above date and time or it will not be considered for review.

[10/8/93, 1/1/97; Recompiled 10/31/01]

7.32.6.12 PLANNING COUNCIL COMPOSITION AND PURPOSE:

A. A board may create and, if created, appoint the members of a planning council. The members of the planning council shall be selected to represent a broad spectrum of interests and may include, but not be limited to, one representative from each of the following: county government, incorporated municipal government and, where applicable, tribal government, DWI prevention, screening and treatment programs, law enforcement, alcohol counselors/therapists, public schools, court/judicial officials, emergency medical services, local public health offices, community partnerships, community DWI task forces, and, where applicable, local maternal and child health councils and healthier communities councils and other interested community based organizations.

B. The board shall develop policies and procedures for selection of council members, terms of office and scope of authority of the council. These policies and procedures shall be developed to avoid conflict of interest issues.

C. The board shall demonstrate a good faith effort to solicit the participation of the entities listed in paragraph 12.1 [now Subsection A of 7.32.6.12 NMAC] above.

D. Each council member shall certify his or her participation in the development of the county DWI plan. A certification signature sheet shall be included in the county DWI plan application (included in the county DWI plan packet).

E. Counties are encouraged to utilize their local DWI task force as a base for developing their planning council.

[10/8/93, 1/1/97; Recompiled 10/31/01]

7.32.6.13 SCOPE OF COUNTY DWI PLANS:

A. The county DWI plan shall be a comprehensive plan for a county-wide services network that documents the extent of the county's alcoholism problem and all county needs regarding DWI, alcoholism and alcohol or other drug abuse issues, including prevention, screening, assessment, treatment and/or alternative sentencing programs.

B. The county DWI plan shall be based on the continuum of care concept.

C. The county DWI plan shall be consistent with the statewide substance abuse prevention and treatment services plan.

D. The county DWI plan shall document how proposed services will adhere to department regulations that specify minimum standards concerning prevention, screening, assessment and treatment programs.

E. The county DWI plan shall adhere to the format and guidelines specified in the county DWI plan application provided by the department to each county.

[10/8/93, 1/1/97; Recompiled 10/31/01]

7.32.6.14 COUNTY DWI PLAN COMPONENTS: The county DWI plan shall contain the following components as outlined in subsections 14.1 through 14.7 [now Subsections A through G of 7.32.6.14 NMAC]. The department will provide forms and/or a format for development of each section of the county DWI plan corresponding to subsections 14.1 through 14.7 [now Subsections A through G of 7.32.6.14 NMAC]. If preparing a

multi-county DWI plan, separate information for each county must be submitted with a description of the proposed integration of services into a multi-county DWI service system.

A. Problem description: Describe county problems related to DWI, alcoholism and alcohol or other drug abuse issues, using county-specific data.

B. County resource assessment: List the available resources in your county regarding the prevention of DWI, alcoholism and alcohol or other drug abuse issues.

C. Summarize the **gaps** in prevention, screening, assessment, treatment and alternative sentencing of DWI, alcoholism and alcohol or other drug abuse in your county. Limit this section to two pages.

D. List the **priority needs** of your county in the areas of prevention, screening, assessment, treatment and alternative sentencing of DWI, alcoholism and alcohol or drug abuse.

E. Action plan: Develop goals and objectives based upon the prioritized needs and gaps cited in subsection 14.4 [now Subsection D of 7.32.6.14 NMAC]. Describe the proposed activities and explain how this activity is expected to impact the DWI problem in the county, what will be measured, what changes are expected and the estimated costs associated with each activity.

F. Process and outcome evaluation:

(1) Process evaluation: Applicants shall include a plan for the evaluation of the procedures used to implement and conduct the proposed project.

(2) Outcome evaluation: Applicants shall include a plan for the evaluation of the impact of the proposed activities on the local DWI condition.

G. Budget development:

(1) List current funding levels and sources, including in-kind resources, for all current DWI, alcoholism and alcohol or other drug abuse prevention, screening, assessment, treatment and alternative sentencing programs in the county(ies) covered by the county DWI plan.

(2) Document projected funding needed to address gaps in prevention, screening, assessment, treatment and/or alternative sentencing. This is not your request for funding, but rather documents the needs based on the continuum of care concept for a comprehensive substance abuse prevention and treatment system. This information will be used for long-range planning.

(3) List requested funding levels from the county DWI plan fund for prevention, screening, assessment, treatment and/or alternative sentencing that specifically relate to reducing the incidence of DWI.

(4) The department shall provide budget forms for paragraphs 14.7.1, 14.7.2 and 14.7.3 [now Paragraphs (1), (2) and (3) of Subsection G of 7.32.6.14 NMAC] above.
[10/8/93, 1/1/97; Recompiled 10/31/01]

7.32.6.15 REVIEW AND APPROVAL OF COUNTY DWI PLANS:

A. The county DWI plans shall be approved or disapproved by the secretary of the department, based on the review process and the recommendations made by the department county DWI plan review committee. The department review committee may include, but need not be limited to, representatives from the behavioral health services division, the public health division, the division of mental health, the division of epidemiology, evaluation and planning of the department; the division of local government, DFA; and the traffic safety bureau of the highway and transportation department.

B. The department shall submit the county DWI plans as approved or disapproved to the division of local government, DFA. Funding decisions for county DWI projects will be made by the DWI grant council with recommendations from DFA.

C. Technical assistance for the preparation of the county DWI plan may be requested from the department. A resource inventory will be provided by the department to each county. The resource inventory lists specific areas of technical assistance and resources for preparation of county DWI plans.

[10/8/93, 1/1/97; Recompiled 10/31/01]

7.32.6.16 COUNTY DWI PLAN REVIEW CRITERIA: The county DWI plan shall be evaluated on the following criteria:

A. Services/activities description: The extent to which the county DWI plan documents the current availability of prevention activities, screening, assessment, treatment and alternative sentencing programs in the county.

B. Demonstration of the assessment of alcohol problems and issues in the county: The extent to which the county DWI plan utilizes data to assess the county's DWI, alcoholism, alcohol and other drug abuse problems.

C. Needs/gaps: The extent to which the county DWI plan adequately describes needs/gaps within the county relating to DWI, alcoholism and alcohol or other drug abuse prevention activities, screening, assessment, treatment and alternative sentencing programs.

D. Goals, objectives, strategies and activities: The extent to which the county DWI plan develops a comprehensive set of goals, objectives, strategies and activities based on the assessed needs and gaps.

E. Activities requested: The extent to which the county DWI plan demonstrates that the activities requested in the action plan will enhance and/or improve DWI programming, and will not supplant existing programs.

F. Process and outcome based measures: The extent to which the county DWI plan describes appropriate evaluation methods to be used to assess the short-term and long-term effects of prevention, screening, assessment, treatment and alternative sentencing programs on the reduction of DWI. The county DWI plan must cite data sources to be utilized as well as the methods for evaluating changes in incidence, behavior, attitude and knowledge as the result of implementation of the plan's activities.

G. Budget: The extent to which the county DWI plan's budget reflects reasonable and justified costs as well as demonstrating sound, economical use of other resources in the county.

H. Planning council: The extent to which the county DWI plan demonstrates inclusion of a broad spectrum of the community on the planning council, including the suggested representatives listed in these guidelines.

I. Collaborative efforts: The extent to which the county DWI plan demonstrates collaboration in the plan preparation with local entities involved in DWI - related issues, such as county DWI task forces, other substance abuse-related committee/task forces, local maternal and child health councils, substance abuse prevention partnerships, and screening, prevention and treatment programs in the county.

J. Municipalities and county government collaboration: the extent to which the county DWI plan documents collaboration among the county and participating municipalities and tribal governments, where applicable.

[10/8/93, 1/1/97; Recompiled 10/31/01]

7.32.6.17 COUNTY DWI PLAN UPDATE: The county DWI plan shall be updated at the request of the department if the plan, as implemented through the statewide substance abuse prevention and treatment services plan is not achieving its stated goals; if the needs of the county have changed; or if it is determined that the distribution of funds is not having an impact on the incidence of driving while intoxicated/impaired.

[10/8/93, 1/1/97; Recompiled 10/31/01]

HISTORY OF 7.32.6 NMAC:

Pre-NMAC History: The material in this part was derived from that previously filed with the State Records Center: DOH 93-11 (BHSD), County DWI Plan Guidelines, 10/8/93.

History of Repealed Material: [Reserved]