

CHESTER COUNTY



CHESTER COUNTY, PA

ANNUAL REPORT
FY 2017/18

Chester County

Department of Drug and Alcohol Services

Government Services Center, Suite 325
601 Westtown Road, P.O. Box 2747
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(610) 344-6620

VISION

Promote alcohol and other drug policies and programs that improve the quality of life and reflect the cultural and economic diversity of the community.

MISSION

Ensure that quality alcohol and other drug intervention and treatment, as well as alcohol, tobacco and other drug prevention programs are provided for citizens in an efficient and cost-effective manner.

GOALS

The service delivery system for county residents has been designed to provide comprehensive and accessible care for both adolescents and adults in need of treatment or intervention services and assistance to communities trying to prevent addiction. There are several overriding goals that the Department tries to achieve in the design and delivery of prevention, intervention, case management, and treatment services as listed below:

- Assist communities in becoming their own change agents.
- Increase community recognition of alcohol and tobacco as drugs.
- Prevent the continuation of intergenerational family dysfunction due to substance use disorder.
- Promote understanding of the disease concept and the hereditary risk factors associated with substance use disorder.
- Assist clients in creating self-sufficient lives.
- Continuously evaluate the services provided to ensure that they are accessible, high quality, effective, cost efficient and best meet the needs of the citizens of Chester County.

BACKGROUND

The Department of Drug and Alcohol Services was established by the Chester County Commissioners as a Public Executive Commission. The Department serves as the Single County Authority (SCA) for Chester County, responsible for the planning, coordination, and administration of community alcohol and other drug prevention, intervention, and treatment services. The Department also provides case management services.

The work of the Department is accomplished with the assistance of the Chester County Advisory Council, whose members are appointed by the Commissioners. Members are community volunteers who advise the Department on community needs, planning and management of resources and services. FY 2017/18 Advisory Council membership was:

Mary Lyness, Chairperson	Jeanette Easley, Member-At-Large
Andrew Gray, Vice Chairperson	Kim Gallagher, Member-At-Large
Darlene Whenny, Secretary	Robert Strauber, Jr., Member-At-Large
Cindy Wanamaker, Member-At-Large	Barbara Dery Paul, Member-At-Large
Cynthia Seigafuse	Christina Snyder, Member-At-Large

The three (3) persons Board of Commissioners is the governing entity responsible for oversight of the Department. The Department is part of Chester County's human services departments, overseen by Human Services Director, Kim Bowman.

The majority of prevention, intervention and treatment services are provided via subcontracts developed and monitored by the Department. The Department also conducts regular needs assessments and develops plans for services.

In addition to planning and administrative activities, the Department also provides some direct case management and prevention services. Case management services include initial assessment for incarcerated individuals and ongoing case management for all residential clients. Prevention services include, but are not limited to, information dissemination and environmental strategies. The staff of the Department is:

Vincent H. Brown, Executive Director
Jamie Johnson, Deputy Director

Administrative Unit

Todd Bender, Program Specialist II
Kathy Collier, Program Specialist II
Kaitlyn Genthert, Prevention Specialist
Mary Jo Nickel, Fiscal Technician
Nora Perrone, Fiscal Officer III
Leomarys Torres, Fiscal Officer II
Cathy Vaul, Program Specialist II
Betty Wade, Administrative Officer I

Case Management Unit

Megan Dunn, Case Manager
Joanne Dzus, Treatment Court Specialist
Kathryn Kinsley, Case Management Supv.
Crystal Murrey, Data Entry Operator
Crystal Robertson, Case Manager
Sheila Romero, Case Manager
Amy Swider, Case Manager
Mathew Mentzer, Case Manager

SCA CASE MANAGEMENT SYSTEM

Striving to ensure ease of access, Chester County has a decentralized system for entry to funded treatment, regardless of level of care needed. The primary points-of-entry for funded treatment are our five (5) subcontracted outpatient providers located in Coatesville, Exton, Kennett Square, Phoenixville and West Chester. Each of these providers will screen for emergent needs upon initial contact and then see the individual to conduct an assessment to determine, with the individual, the type of treatment (level of care) most appropriate.

For those individuals in need of residential treatment, the program will work with our Case Management Unit to determine the most appropriate program and arrange for treatment funding. Following admission to residential treatment, our Case Management Unit will follow the individual to assist with case management needs and ensure continuity of care.

In addition to entry via our outpatient providers, individuals can be assessed at the Chester County Prison with recommendations for level of care made to the presiding criminal justice agency.

For individuals in need of emergency care, detoxification admission can happen prior to assessment as appropriate. While in detox, the individual will be assessed to determine the appropriate treatment referral.

DEPARTMENT ACCOMPLISHMENTS

In addition to the ongoing management of prevention, intervention and treatment system for Chester County, some of the Department's other accomplishments include the following:

Administrative

- ❖ Continued the multi-system County/community Overdose Prevention Task Force with a goal of developing strategies to address the opiate and overdose epidemic in the County.
- ❖ The SCA has partnered with Good Fellowship Ambulance service to provide trainings on effectiveness of Narcan® in preventing fatalities from opiate overdoses as well as the proper manner in which to administer the medication to first responders, treatment providers and the general population. Additionally, Good Fellowship Ambulance has taken the lead to train and distribute Naloxone to County and community agencies.
- ❖ Maintained over 70 provider contracts for prevention, intervention and treatment services, and enjoyed a strong working relationship with contracted providers to ensure quality service provision.
- ❖ Participation in various multi-system Homeless Planning Initiatives which included drug and alcohol and mental health providers, homeless shelters and Community Care Behavioral Health.

- ❖ Continued work with the Chester County Departments of Human Services, Mental Health/Intellectual & Developmental Disabilities (MH/IDD) and Community Care Behavioral Health (CCBH) on the implementation of a recovery oriented system of care principles and services throughout the behavioral health systems.
- ❖ Provided basic substance use disorder and medication assisted treatment trainings to other Departments within Chester County and to the general public at various venues.

Treatment

- ❖ Provided a full continuum of treatment services through our over 70 contracted providers throughout Pennsylvania, to meet the individual needs of our clients.
- ❖ Continued to work with contracted treatment providers to develop and implement Vivitrol protocol for administration prior to discharge from residential treatment with continued dosing at the outpatient level free of charge to clients. The outpatient providers are reimbursed through the Department.
- ❖ Continued to support Creative Health Services in the development of their Maternal Dependency Program (MDP) and assisted Gaudenzia Coatesville Outpatient in the creation of their MDP.

Case Management

- ❖ Completed over 760 assessments in the Chester County Prison and facilitated the referral and placement of approximately 392 inmates in residential treatment.
- ❖ Continued the cost reimbursement plan to fund Administrative Case Managers at each of the five (5) contracted outpatient points of entry. The Administrative Case Managers assist clients with Medical Assistance applications, collateral contacts, life skills, developing goals and other case management duties, thereby, allowing the clinical staff to offer more direct treatment and assessment services.

Recovery Support

Community Outreach Prevention and Education (COPE) is a Chester County initiative that assists individuals who have survived an opioid overdose. The COPE Engagement Team's Certified Recovery Specialists provide one-to-one support and collaboration with the individual and hospital's Emergency Departments (ED). This Warm Hand-off has been implemented at both Chester County and Brandywine Hospitals. COPE's Certified Recovery Specialists connect individuals directly to treatment and recovery support services. COPE also assists and supports families and significant others with education and resources.

- ❖ The Community Outreach Prevention and Education Team (COPE) subcontracted through Holcomb Behavioral Health initiated services April 16, 2018. The team is staffed with a Program Coordinator/Navigator and two (2) part time Certified Recovery Specialist (CRS). Services were provided to two (2) Chester County Hospital Emergency Departments (Chester County Hospital & Brandywine Hospital) in the early phase of rolling out this service. These two hospitals were selected based on their volume served and the number of reported overdose survivors presenting for care.

- ❖ The Council of SEPA continues to be the provider of Certified Recovery Specialist Services here in Chester County. The partnership (Department of Human Services and Community Care Behavioral Health and the SCA) continues to work with The Council Staff to ensure program viability and delivery of quality service. The following data reflects the programming for FY 17/18:
 - 29 different referral sources.
 - 93 individuals referred to CRS services.
 - 159 clients engaged.
 - Staff from the SCA, DHS and CCBH continues to work with this provider as the program stabilizes and grows its service delivery. Expansion of specialized CRS staff (CYF and Youth) will be pursued in the upcoming year.

Prevention/Intervention

- ❖ Over 20,000 Chester County residents were provided current, factual and culturally sensitive information about issues surrounding substance use disorder and how it affects individuals, families and communities. Additionally, knowledge and awareness of the publically funded prevention, intervention and treatments systems available to county residents was provided. This information was disseminated through the following activities: health fairs, presentations and the information and referral line.
- ❖ Working with the Health Department, Good Fellowship Ambulance and community partners, continued efforts to increase awareness of the availability of Narcan® and training to use it. Over 50,000 brochures were distributed to local pharmacies, health care providers, hospitals and community members. Community trainings have been done in more than a dozen locations with Narcan distributed to community via partnerships with Kacie's Cause and Pro-Act.
- ❖ The Overdose Prevention Task Force provided more than 40 trainings to schools, community groups, provider agencies and other key stakeholders on opioid/overdose related topics. Trainings were conducted in conjunction with the Health Department, District Attorney's Office and other community partners, reaching over 1,000 community members, professionals, first responders, and students. Trainings provided participants with information on current issues, ways the problem is being addressed and how they can access services for themselves or others.

CHALLENGES/OPPORTUNITIES FOR ENHANCEMENTS

In addition to the many accomplishments achieved by the Department, there were also various challenges faced throughout the year. Following is a list of the "greater" challenges faced and steps taken to address them, or suggestions for addressing those not resolved.

- ❖ Staffing: The Department was faced with understaffing in several positions throughout most of the year but was able to manage the needs of its client base, Prison Assessments, and other tasks and functions.

Implemented/Suggested Resolution: The Department was actively hiring during this fiscal year.

- ❖ Prevention/Intervention: Increased pressures on school partners regarding academic standards and testing reduces availability of classroom time for Evidence-based programs to be delivered.

Implemented/Suggested Resolution: Creating new relationships with community partners and leveraging existing ones will be necessary to continue to provide these services.

- ❖ Prison Assessments: During FY 2017/18 the County completed 760 separate prison assessments which are significantly higher than the number of assessments completed in FY 2016/17. These assessment were completed without additional SCA staffing.

Implemented/Suggested Resolution: The Department will continue its communications with relevant criminal justice-related departments and the court system in Chester County, and continue to review the options to meet the growing number of prison assessment referrals (e.g. hiring additional case management staff at the County or Prison level, modification of forms and processes). The Department will continue to utilize Holcomb Behavioral Health Systems to assist in conducting prison assessments.

- ❖ Residential Treatment Services: Trending in the decrease in availability of residential treatment beds began which has continued into the New Year. The demand is constantly exceeding available beds.

Implemented/Suggested Resolution: When sufficient beds were not available, referral sources were instructed to refer clients, in need of detox, to local hospital emergency rooms for medical stabilization and referral to detox from there, as appropriate. Providers will also need to offer interim services for those that cannot enter any treatment. The Department continued to monitor the availability of additional detox and rehab providers with which to contract.

- ❖ Drug and Alcohol Treatment System (DARTS): The County continues the process of converting its outdated DOS-based client data system to a new and updated database program. The conversion process has been difficult and slow in order to ensure that all client-related information was successfully migrated to the new system and that all staff members are competent in its use.

Implemented/Suggested Resolutions: All staff will be trained in the proper use of DARTS throughout its implementation process with support from the Human Services Area Manager and the contracted programmer. The DOS-based system will run concurrently with the new program until it has been determined that all client-related and fiscal information has been successfully transitioned into the new database.

A YEAR IN REVIEW

TRENDS

Following are some Countywide trends identified through data related to Department funded and/or contracted services.

- ❖ Over the past eight (8) fiscal years (09/10 to 17/18), the percentage of non-hospital residential admissions with heroin/other opiates as the primary substance of choice increased from 36% to 48%; however, this is a reduction from the 52% in the prior fiscal year while alcohol dropped from 44% to 27%.
- ❖ The opiate abuse and overdose epidemic continues in the County, as does the efforts to respond to this crisis. Our Department is involved in numerous activities, many of which focus on public awareness and education on overdoses/deaths and the availability of Naloxone; ensuring clients can access appropriate treatment services; and participation in various collaborations with other community agencies and organizations, including the development of an Overdose Prevention Task Force.
- ❖ The Department's Case Management Unit has continued to conduct a large number of prison assessments. Contributing to this trend is: the increase use in opiates and subsequent illegal activities; the increase in the County's criminal justice system efforts towards having appropriate clients referred to treatment instead of incarceration, or reducing lengths of incarceration; other changes to criminal justice related protocols, such as an increase in urine testing.
- ❖ Chester County, like other counties in PA and across this country, has struggled with overdose-related deaths; the 2017 calendar year saw 144 accidental overdose-related deaths while in 2018 we have seen a decrease in the overdose-related deaths; the 2018 calendar year had 111* accidental overdose-related deaths (23% reduction between the two years). (*Please note this number is subject to change upon pending coroner reports).

CLIENT STATISTICS

Included below, are client statistics for the 2017/18 fiscal year:

***As a result of the Affordable Healthcare Act, the Medicaid Expansions and older children remaining on their parents' health insurance, the client numbers for the '17-'18 fiscal year continue their downward trend from prior years. ***

- Number of unduplicated clients who received funded drug and alcohol services for all levels of care and activities (all funding types included): **1,798**
- Number of unduplicated assessments: **791**
- Number of unduplicated admissions to detoxification: **153**

- Number of unduplicated admissions to residential treatment: **330**
- Number of unduplicated admissions to halfway house: **14**
- Number of unduplicated clients funded in outpatient, intensive outpatient and partial hospitalization treatment (all services): **1,224**
- Number of unduplicated clients who received methadone Maintenance services: **35**

TRAININGS

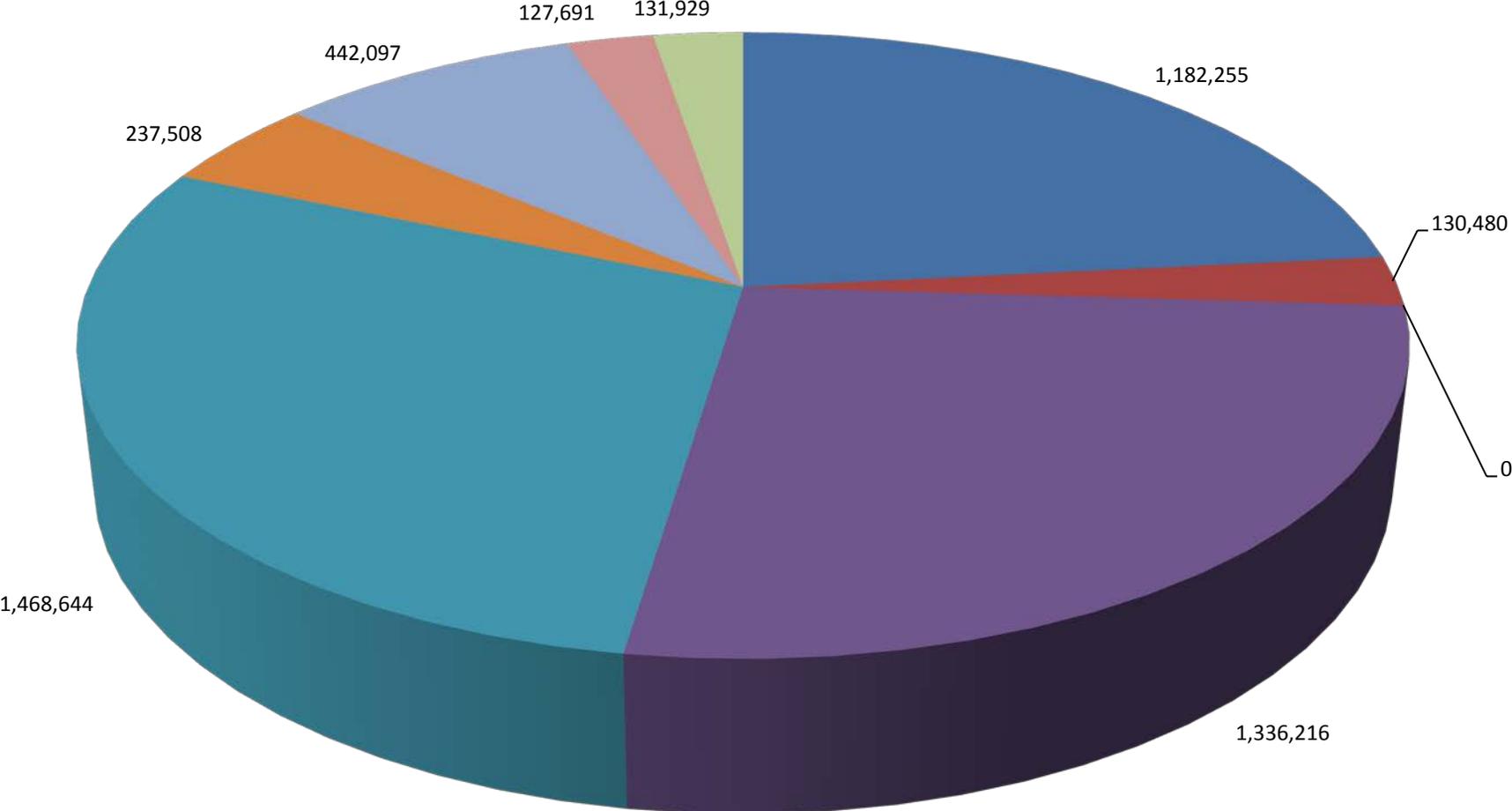
Below is a list of training needs identified by the Chester County SCA in collaboration with its stakeholders and provided by Chester County SCA for FY 17/18.

- ❖ Assessor Training for Chester County
- ❖ Addictions 101
- ❖ Medication Assisted Treatment
- ❖ Narcan/Naloxone Training

FISCAL INFORMATION

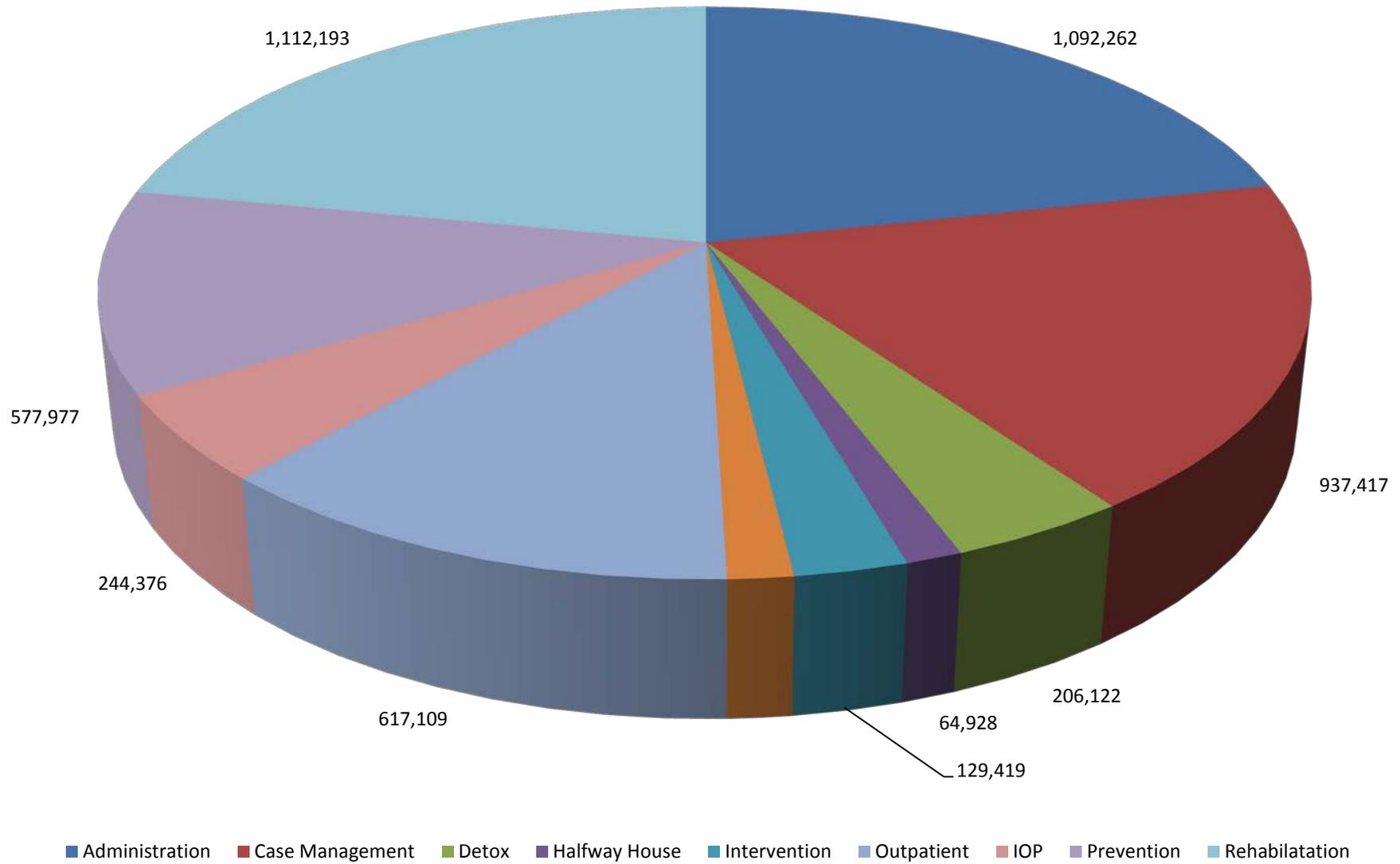
Total Revenue for the Chester County Department of Drug and Alcohol Services for FY 2017/18 was **\$5,056,820**. Revenue Sources included federal funding streams, PA State Base, PA Commission on Crime & Delinquency (PCCD), Human Service Block Grant Fund (HSBG), Chester County matching funds, and other miscellaneous sources (Interest, OMBH, Drug Court and Criminal Justice).

REVENUE

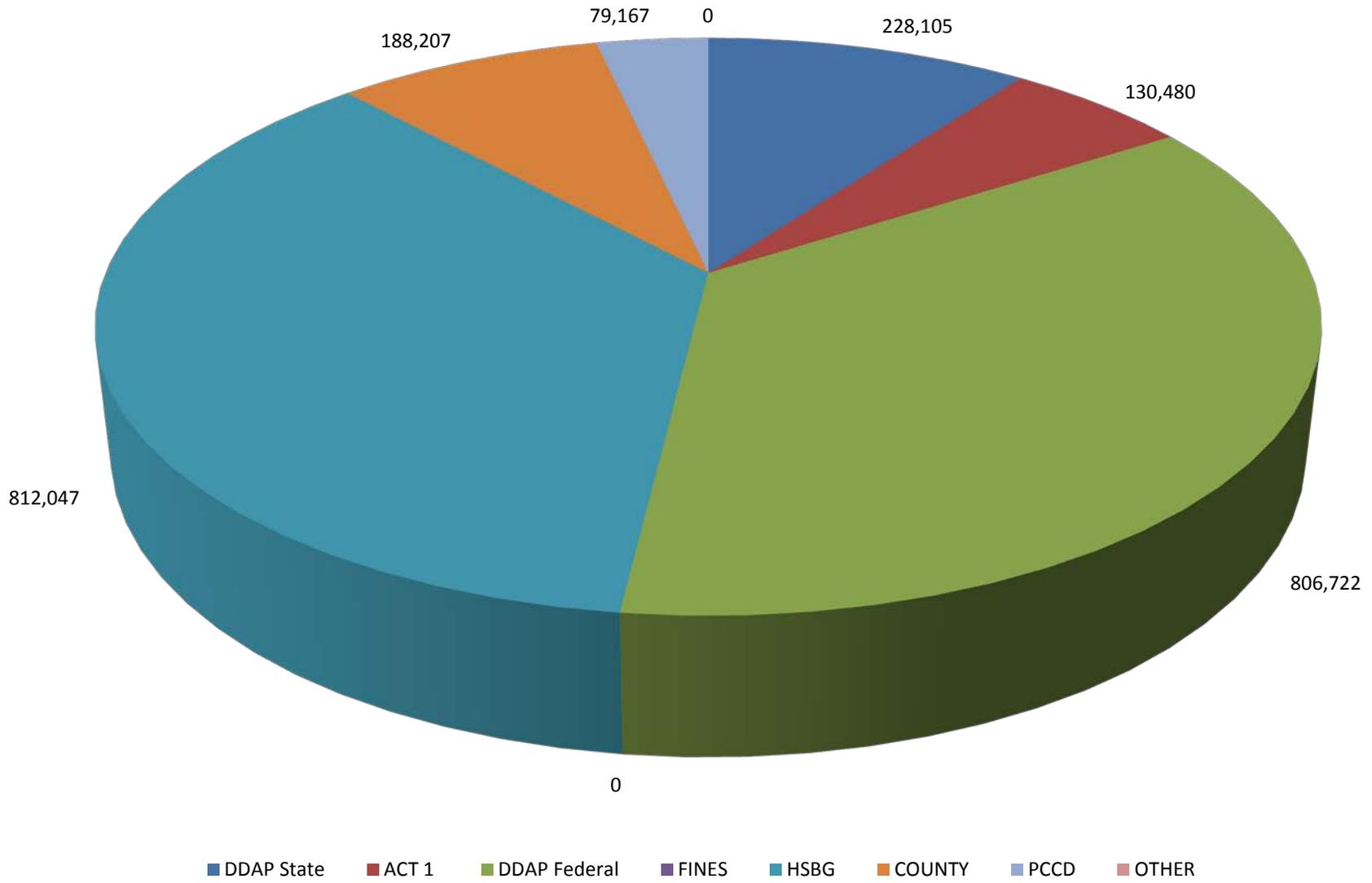


■ DDAP State ■ ACT 1 ■ ACT 50 ■ DDAP Federal ■ HSBG ■ FINES ■ COUNTY ■ PCCD ■ OTHER

EXPENDITURE



FUNDS USED FOR TREATMENT



CHESTER COUNTY COMMISSIONERS 2017

*Michelle Kichline, Chairperson
Kathi Cozzone
Terence Farrell*

These services are made possible by the Chester County Commissioners, Pennsylvania Department of Drug and Alcohol Programs, and the United States Department of Health and Human Services. Some data for use in this report were obtained through the county's contract with the Department of Drug and Alcohol Programs. The Pennsylvania Department of Drug and Alcohol Programs specifically disclaim responsibility for any analysis, interpretations, or conclusions therein.

*Tom Wolf, Governor
Commonwealth of Pennsylvania*

*Jennifer Smith
Department of Drug and Alcohol Programs*

Subcontracting agencies also receive contributions from local United Way chapters, foundations, and private donations.