

Crawford County Drug & Alcohol Executive
Commission, Inc.

920 Water Street, Downtown Mall

Meadville, PA 16335

Fiscal Year: 2019/2020 Annual Report

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STAFF AS OF JUNE 30, 2020

Executive Director.....Anita Robinson, MBA
Assistant Director/HRSA Project DirectorJayme Ferry, LSW
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Treatment Supervisor (until June 19, 2020).....Amy Kellerman, MA, CAADC, LPC
Addictions Counselor.....Amy Burlingame, BSW, CADC
Addictions Counselor.....Lora Shrock, MA, CCDPD, CAADC
Addictions Counselor.....Deirdre Foll, MAAT, CADC
Addictions Counselor.....Samantha Bohr, MA
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Addictions Counselor.....John Force, MS, NCC
Addictions Counselor.....Jena Skelton, MA

Prevention/Intervention Program Supervisor.....Angela Morten, MA
Prevention Specialist.....Kandy Foote, BA, CPS
Prevention Specialist.....Rebecca Pears, MEd, CPS
Prevention Specialist.....Nathaniel Latimer, BS
Prevention SpecialistJulia Covert, BS
Prevention SpecialistKelsey Kinkade, BS

Case Manager Supervisor.....Cheryl Nelson, BA, CCSM

Case Manager Supervisor.....Kelly Parker, MA, CCSM

Case ManagerPatricia Armstrong, BA, CCSM

Case Manager.....Kim Bidwell, BSW, CCSM

Case Manager.....Trina Andrews, BA, CAAP

Case Manager.....Allison Parker, BS

Case Manager.....James Beck, BS

Case Manager.....Marlena Thompson, BA

Case Manager.....Jon Piccinini, BS

Recovery Specialist Supervisor.....Lisa McFarren, BSW, CCSM

Recovery Specialist.....Judith L. Stine, CRS

Recovery SpecialistThomas Medved, CRS

Recovery SpecialistKyle Kellerman, CRS

Recovery SpecialistDiana Ciniello, CRS

Medical Director (Contract).....Thomas H. Turner, MD

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Fiscal Year 2019-2020

A few words from the Director...

Fiscal year 2019/2020 was a year of change for Crawford County Drug & Alcohol Executive Commission, Inc. (CCDAEC). Executive Director, David Crowe, had retired the end of the previous year, causing a shift in responsibilities and leadership. The agency acquired a Department of Drug and Alcohol grant that allowed for the expansion of services and staffing within the Case Management and Recovery Support programs. We were awarded a multi-year HRSA grant to address opioid use through prevention, treatment and recovery efforts and a USDA grant for purchasing telehealth equipment. Collaboration among community partners was on the rise, and then COVID-19 became the focus of our daily lives.

The full staff compliment was retained and moved quickly to providing services via telehealth. There was a whirlwind of activities with the IT manager assessing the need for laptops and phones and equipping staff with the tools they needed either in the office or when working from their homes. Confidentiality remained paramount and was rivaled only by the safety and welfare of our clients and staff. Social distancing, sanitizing surfaces and hands, and wearing masks became part of the daily routine. Staff utilized newly acquired electronic signature software, and policies were developed and disseminated along with best practices for providing services remotely.

Change was far from easy, but staff never lost focus of our agency's mission and the clients we serve. I am very proud of the work the team has done and look forward to positive changes in our future.

Respectfully submitted,

Anita Robinson

Anita L Robinson, Executive Director

Major Accomplishments of the SCA

FISCAL

Crawford County Drug & Alcohol Executive Commission, Inc. (CCDAEC) met the challenge of limited fund allocations while managing ever increasing client needs and Federal and State mandates. Matching client needs with proper funding while satisfying all regulations and requirements is a top priority.

Crawford County is a rural county with few drug and alcohol providers. To further complicate services for those seeking help, some providers limit the category of clients they accept or do not provide services to all ages. This agency has been in operation for decades, serving not only as the Single County Authority (SCA) of Crawford County's Drug and Alcohol funds, but also as a provider of Prevention, Intervention, Case Management, and Outpatient and Intensive Outpatient levels of care. These supportive services are provided with no restrictions to county residents. Client choice is a must and an important part in giving the client a voice in, and control of his or her treatment. Although there may be few providers from which to choose, thanks to the funds we receive as the SCA, clients meeting eligibility criteria can access financial assistance for their treatment no matter where they choose to get that help.

As the Single County Authority, CCDAEC received both State and Federal prevention and treatment funding from the Department of Drug and Alcohol Programs (DDAP) to support substance abuse prevention, intervention, treatment, and case management services to county residents.

The State Base Allocation is the backbone of our funding. Its use is not limited to populations or activities. The State Base funding is utilized in Administration and all other activities. Clients not meeting other funding guidelines can access the State Base dollars to fund their treatment. The County provides a match on a portion of the State Base dollars.

DDAP provided specific funds intended to support services to pregnant women or women with children. The Federal Block Grant for Pregnant Women/Women with Children (PWWWC) provided important funds for this population who met the funding guidelines. In fiscal year 2019-2020 the SCA was awarded a total of \$32,179 for this population to provide Prevention (\$1,297) and Treatment (\$30,882) services. Because the agency anticipated the full PWWWC award could not be utilized as specified in the grant, a waiver

was submitted to DDAP requesting that the agency be permitted to utilize a small portion of the PWWWC allocation to fund general activities and treatment services to clients who did not fit the intended population of the award. Our waiver was granted allowing the SCA to make full use of the funds in the delivery of Treatment Services; however, a total of \$1,205 was returned in Prevention PWWWC funds. Of the total PWWWC award, \$4,379 services fell under the approved waiver.

The Student Assistance Program (SAP) Prevention funds received through DDAP support the mandated and important process of screening and referrals for at-risk or troubled youths identified thru the SAP process. CCDAEC has a strong relationship with the Crawford County School District's SAP Teams, guaranteeing a successful program for the students.

The funds awarded by DDAP included the SCA State Gaming Funds under Act 2010-01 in the amount of \$17,071. This is approximately a 3.3% increase in Act 2010-01 funds from the previous fiscal year. CCDAEC utilized these funds by providing drug and alcohol non-hospital rehabilitation and non-hospital detoxification treatment to eight county residents.

The SCA and its Prevention Department had been awarded a Compulsive and Problem Gambling Treatment Grant for the 2019-2020 State Fiscal Year. The grant totaled \$49,355. The Prevention staff provided many Gambling related activities and services throughout the year. At fiscal year-end, \$20,596 of the allocation had been utilized and the remaining funds were not requested from DDAP.

CCDAEC received \$502,511 from the Human Services Block Grant allocation. These allocations came from the County under the County Block Grant (CBG) process. Through our Assessment, Utilization Review and Authorization process, these funds purchased needed client treatment for all levels of care. The agency staff was diligent in its efforts to utilize the County Block Grant (CBG) funds to maximize cost effectiveness for needed services. At fiscal year-end, all funding had been used.

In association with the County Block Grant process, the SCA received a Match from the County on the CBG Funds we received. The SCA received \$28,341 in Match and used these funds to further provide client services and administration.

Crawford County Drug & Alcohol Executive Commission continued its relationship with Value Behavioral Health of PA (VBH) as its HealthChoices managed care organization. The HealthChoices program offers payment for many of the services provided at the functional unit. As the SCA, CCDAEC's fiscal department maintained direct contact with billing staff of other county providers to keep the providers apprised of changes at VBH, or to assist with any billing problems between VBH and the county providers.

The agency was again involved as a subcontractor with the County's Adult Probation Department on a Pennsylvania Commission on Crime and Delinquency (PCCD) Grant. The funding received through the PCCD sub-grant enabled Crawford County Drug & Alcohol to provide services, transportation and recovery

materials totaling \$90,091 to eligible clients who qualified for the Restrictive Intermediate Punishment program.

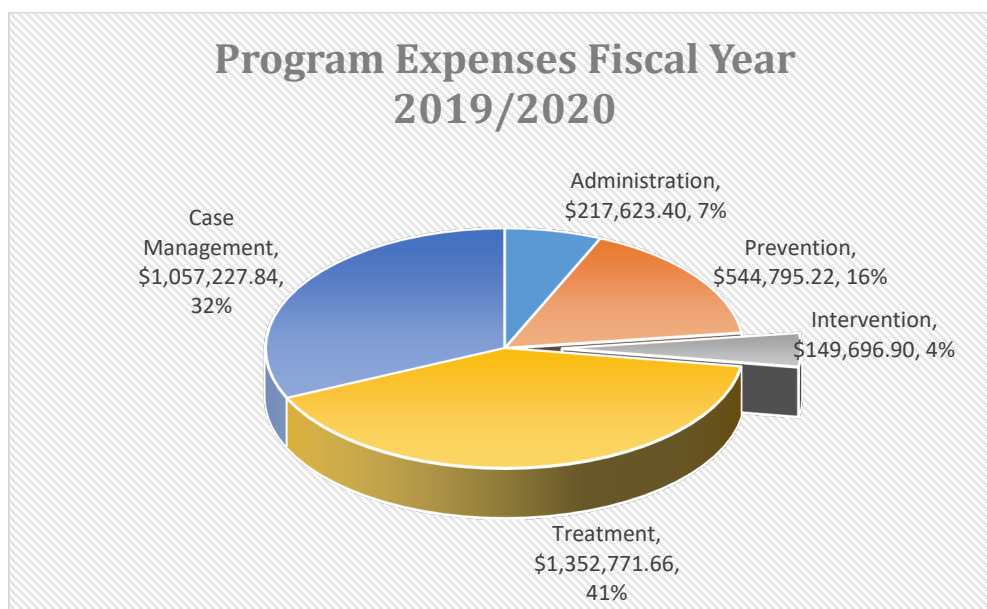
CCDAEC received \$23,096 from DDAP to support a Warm Hand-off program where there is a case manager on call after agency hours to respond to any county resident in crisis. Beginning in FY 17/18, CCDAEC received funding to help combat the opioid epidemic. These STR/SOR (State Targeted Response/State Opioid Response) funds were used in Prevention, Treatment, Non-hospital Withdrawal Management/Residential treatment, and Case Management services, including carry over from FY 18/19 totaling \$107,214.67. CCDAEC spent \$353,503.25 in FY 19/20 with no carryover into FY 20/21.

The County School Districts and a small HSDF Grant (now included in the County Block Grant) from the County provided much needed financial support that allowed the agency to maintain the important intervention program of In-School Groups for at-risk students.

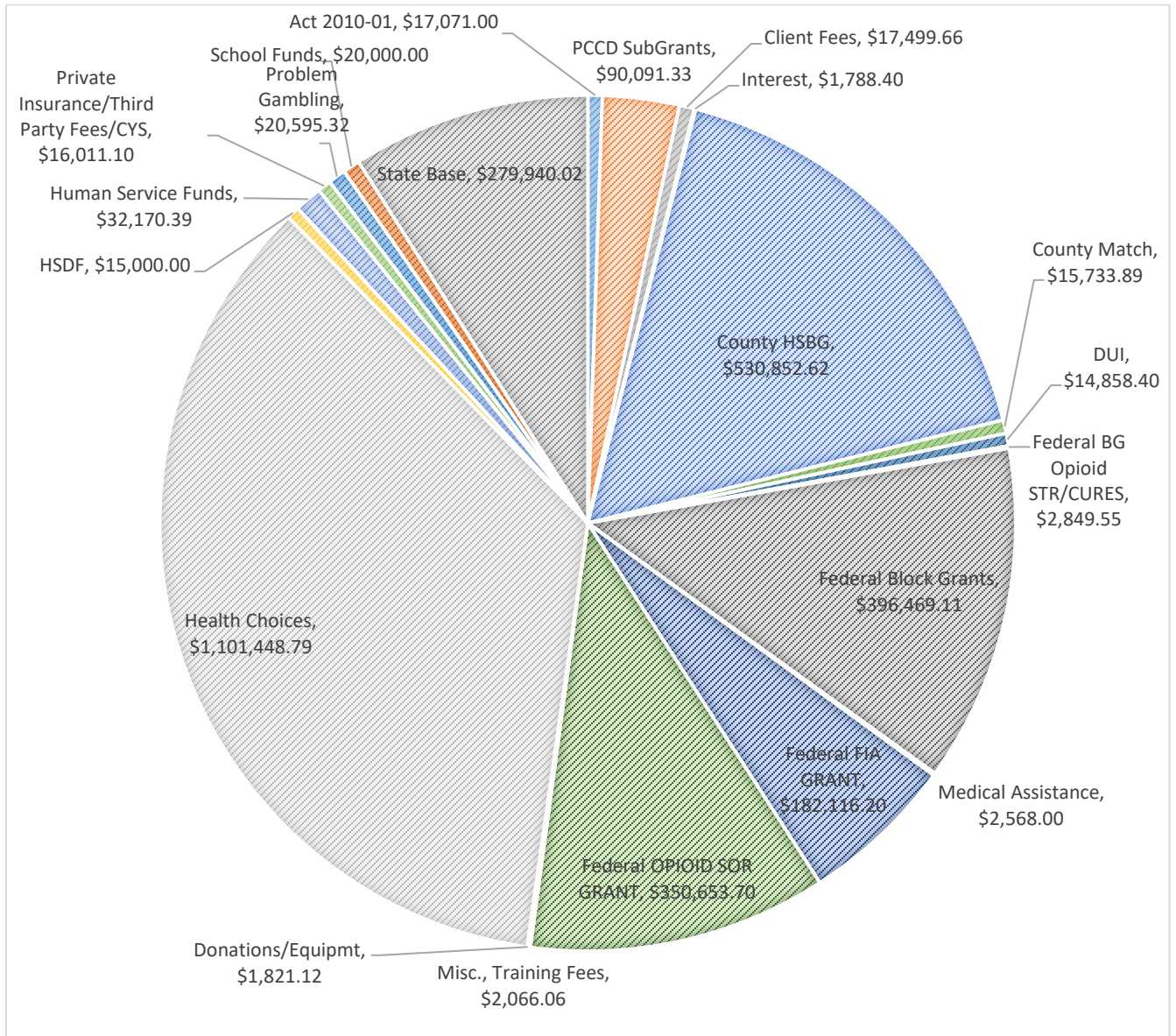
Fiscal regulations and budget constraints affect all agency departments. Each department has different needs and goals for any given year. Communication between the Supervisors of the various departments and the Fiscal Department is most important so that department needs, and goals can be considered during the budget process to ensure funds are available where needed.

Administrative Costs

Administrative (Activity 51) costs for the agency were a very modest 6.6% of the total agency costs for the year. The greater portion of revenue was devoted to the provision and purchase of community and client services.



Program Revenue Fiscal Year 2019/2020



INFORMATION TECHNOLOGY



We need technology in every classroom and in every student and teacher's hand; in every business and every household around the world, because it is the pen and paper of our time, and it is the lens through which we experience the world."-David Warlick

We entered the second year of the USDA Distance Learning & Telemedicine Grant. This grant will provide Telemedicine technology equipment to ten different sites across Crawford County. The IT Department continued working with Administration and other grant awardees on vetting Telemedicine equipment providers and scheduling site surveys for the different locations where the equipment will be utilized. Once the procurement process is complete, each location will be able to use their equipment to connect staff to other sites for training, education, and enhance the warm-handoff process from other providers. Telecommunication equipment helps rural communities use the unique capabilities to telecommunications to connect to each other and to the world, overcoming the effects of remoteness and low population density.

Ever increasing data reporting requirements to DDAP's PA WITS and many of the grants awarded has challenged us to look at different, more predictive ways to analyze the data that we collect in our Celerity EHR. The importance of data in daily decision-making lies in consistency and continual growth. Over this past year, we have started to learn how to use the data we collect to generate more revenue, predict future trends, optimize current operational efforts, and explore ways to create new business opportunities. As a vital component of strategic planning, our data will continue to be part of our daily decision-making process.

Change continues to be a characteristic of technology and this has never been more evident than when the world was faced with a global pandemic. Much of the technology that we needed to remain accessible to our clients was already in place, but technology cannot do it alone. In order to truly pivot to a more digital organization, agencies must have a solid backbone of staff and systems that can easily shift gears and adapt to a new way of connecting with the outside world and providing services to the people we serve. When stay-at-home orders were implemented, the staff at CCDAEC were provided the devices and software to provide telemedicine services remotely. Our staff used these tools in a way that has never been seen before – to connect with clients, to meet virtually with each other for supervision and support, to continue with their training and online learning, to reach out from social media platforms with messages of support and connection, and the list goes on. The IT Department merely provided these tools; what the staff of this agency did with those tools is by far the most noteworthy story of the year. Change indeed...



PREVENTION MAJOR ACCOMPLISHMENTS

CCDAEC Prevention Department provides services to address specific priorities determined by the Needs Assessment, facilitated by DDAP. The Needs Assessment has assisted with refinement of our services to address substance related issues specific to Crawford County. Coalition engagement, and community partnerships with other agencies, businesses, and schools are critical to attain our strategic goals, and impact measurable outcomes. Services are provided across a geographically diverse area within Crawford County, in a variety of environments, including schools, community centers, and government facilities. We provide services to a varied demographic, including all age groups, via single sessions, and reoccurring services. Gender, race, ethnicity, and gender identity are all represented in the overall county population.

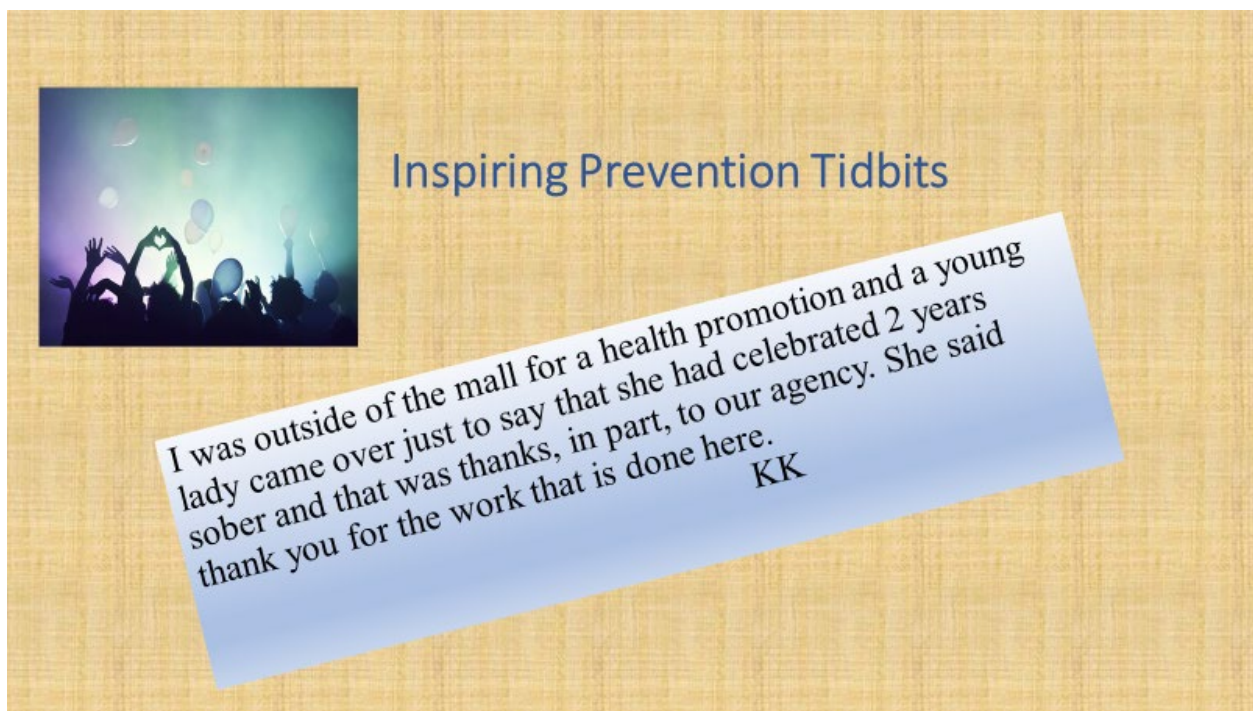
Staff and contracted services of the Prevention Department use the following Federal strategies as part of a comprehensive program:

1. Information Dissemination – Provides awareness and knowledge of substance misuse, abuse, addiction, and the influence on individuals, families, and communities; characterized by one-way communication.
2. Education – Provides training to affect critical life and social skills; characterized by two-way communication.
3. Alternatives – Encourages participation of targeted groups in constructive and healthy activities, minimizing the attraction to ATOD (alcohol, tobacco, and other drug) use.
4. Problem Identification and Referral – Identifies individuals who have engaged in illegal or early ATOD use, to assess whether their behavior can be altered through education.

5. Community-Based Process – Enhances the ability of communities and neighborhoods to provide prevention and treatment services more-effectively for substance abuse disorders.
6. Environmental – Establishes or changes written and unwritten community standards, codes, and attitudes which influence the incidence and prevalence of ATOD abuse in the general population.

The SCA's Prevention Department contract with DDAP requires the delivery of a minimum of 25% of Prevention services through a combination of EB (evidence-based), and state approved programs. We exceeded the state minimum, implementing 59% EB or state approved programs. We are also required to provide 20% of our services as recurring events. Crawford County's Prevention Department exceeded the minimum requirement, with 57% one-time services, and 43% recurring sessions.

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Inspiring Prevention Tidbits

I was outside of the mall for a health promotion and a young lady came over just to say that she had celebrated 2 years sober and that was thanks, in part, to our agency. She said thank you for the work that is done here.

KK

Information Dissemination

Health Promotions, Speaking Engagements, and Information Dissemination

During the Fiscal Year 2019/2020, the Prevention Department continued to implement numerous community health promotions throughout the county. The Crawford County Fair continues to be the largest effort in this area with eight days of dedicated service reaching approximately 1000 students who pledged to make “Healthy Choices” in their lives. Focus on rural areas of the county offer an opportunity reach an often-underserved population. The Prevention Department also participated in education about Fetal Alcohol Spectrum Disorder (FASD) throughout Crawford County, with 2 specific FASD activities in the month of September, as required by DDAP. Educational speaking engagements on ATOD&G (Alcohol, Tobacco, Other Drugs, and Gambling) were provided at local senior centers, day care programs, housing projects, civic groups, and community provider agencies. Prevention staff completed sessions of Too Good for Drugs in 2nd grade classrooms in Conneaut and Titusville School Districts. Other gambling specific programs have been provided in school settings as well as community settings.

Health promotions/events: Crawford County Fair, Cambridge Springs Fireman’s Carnival; Narcan distribution; Newsletters; FASD information; Titusville Open Air Market; downtown mall; Meadville Area Recreation Complex; Fifth Ward HOPE Project. During the pandemic, Prevention staff engaged the community through social media, by posting videos, participating in social media Livestream, radio ads, and cable television speaking engagements.

Speakers Bureau and Prevention Resources

The Prevention Department continues to offer Prevention/Education in schools and throughout the community. Prevention staff did agency and service promotion on the radio with Forever Media, and Armstrong Cable Television, particularly during the pandemic; ELECT; Fairview/Fairmont; Recovery Celebration; Suicide Task Force; System of Care; Peace4Crawford; Armstrong Cable, Facebook Livestream on Commissioner’s COVID-19 page; Supports, Inc.; Women’s Services; Meadville Area Recreation Complex (MARC); Titusville Open Air Market; Kinship Resource Webinar.

Gambling

DDAP Gambling grant funding was utilized for Prevention staff to provide Problem Gambling Education Services at Stand Tall program at Titusville School, as well as information dissemination on Problem Gambling throughout Crawford County. The Prevention Department planned an in-person Problem Gambling/Gaming session, which had to be presented as a webinar during the pandemic. Forty-seven people from around the region attended the webinar, hosted by the Executive Director of the PA Council on Compulsive Gambling. A second session was held, as a “Q&A” opportunity for participants to ask questions of the Director, who provided education about compulsive gambling behavior, and the convergence of gaming and gambling. Prevention Supervisor participated in DDAP Problem Gambling Workgroup, as well as a subcommittee working to promote uniform problem gambling and gaming messages throughout the state.

Education

Underage Drinking Program

The Underage Drinking Program (UDP) is a course for individuals under the age of 21 who receive a charge of underage drinking. UDP topics include Drinking, Binge Drinking, Nicotine, Marijuana, Inhalants, Stimulants, Crack/Cocaine, Hallucinogens, Prescription Drugs, Addiction, Dependency and Abuse Issues, Laws and Penalties, Stress Management, Healthy Coping Skills, Anger Management, Refusal Skills and Communication. Youth are referred through the court system, as an alternative to traditional legal recourse.



After a session of TGFD (Too Good For Drugs) at a 2nd grade classroom, the students gave Prevention staff drawings and homemade cards as a farewell token. They expressed how much they would miss the staff, and shared appreciation for the positive messages they learned about self-esteem, coping, and making good choices. These are the moments that remind us why we do what we do!

Alternatives

ATOD (Alcohol, Tobacco, and Other Drugs) Alternative Activities are programs that promote ATOD free alternatives in the community, and school districts. The goal of the program is to provide various ATOD-free recreational and/or social activities, or recognition events. Prevention staff partnerships with the Children's Advisory Council, and Safe Kids coalition, and various other area providers provided a unified message and resources for the community.

Prevention Supervisor and Staff continued work on the community Needs Assessment, which is a living document driving each SCA's Prevention Goals. Specific problems identified in Crawford County are vaping/e-cigarette use, heroin/polysubstance use, pregnant women with substance use disorders (potential NAS; neonatal abstinence syndrome), and marijuana use. Each problem area has been assigned specific prevention programs and services to work toward decreasing these issues in our County.

The Prevention Department has worked with the Commonwealth Prevention Alliance, on the PaStart/PaStop Campaign. Crawford County joined all the SCA Prevention Departments in the Western Region for a collective media buy to increase opioid awareness, and messages for parents to engage their children in discussions to prevent substance use. Advertising has been limited by the pandemic, having only been via billboards, with anticipated digital, radio, television, and postcard mailings in the coming weeks. The postcard mailing will promote a PaStart message, as well as CCDAEC services.

At the Center for Family Services Food Pantry we don't often get a thank you from families for the food, but when we do it is often very sincere and heartfelt. It is nice to know we are positively impacting families by giving them such essential needs. Each bag is given with a CCDAEC crisis card in it. KF



Problem Identification and Referral

The Student Assistance Program (SAP) provides ongoing screening and intervention services to the eleven secondary schools in all four districts in Crawford County, as well as Bethesda Children's Home and Titusville School District Alternative Education Programs. SAP Liaisons meet monthly with each school and, whenever requested, for any additional needs. Prevention SAP Liaison, in conjunction with the Mental Health SAP Liaison through Crawford County Human Services, also conduct school-based screening assessments when requested by the school SAP Teams.

The primary function of the SAP Program is early identification and intervention with students who are evidencing academic and behavior problems, and who are at high risk for developing substance abuse problems. Once a school-based screening assessment has been completed with the student, who must have parental permission and preferably be accompanied by a parent, a recommendation for services is made. Most often, students with alcohol or other drug problems are referred to the in-school Drug and Alcohol Prevention Specialist to provide education and information. This includes teaching students how to make healthy decisions, and how to respond to negative peer influence. Those students who manifest problems beyond the scope of our in-school services are recommended for more comprehensive assessment and possible drug and alcohol treatment services.

Prevention Specialists attended one SAP Core Team meeting per school, each month, leaving 3 weeks per month for SAP services. They attended approximately 130 SAP Core Team Meetings in the 2019-2020 school year. In the two previous years, between 207-219 students were referred and screened for SAP services. Until the schools closed due to the pandemic, Prevention Staff had screened 205 students, indicating that screenings would have likely surpassed the two previous years if school had remained open for the remainder of the year (an additional 2.5 months). The new Prevention Supervisor attended SAP Leadership Training and has engaged in communication with the Regional SAP Coordinator to explore options to accommodate virtual SAP services if the upcoming school year is influenced by the pandemic. Drug and Alcohol Student Assistance Program services continue to be recognized by the schools as essential and effective.



During a HALO (Healthy Alternatives for Little Ones) preschool class we were talking about what healthy things we can do to feel better when we are feeling scared and one little girl said, “I could just ask my mom for a piece of cheese!” Funniest reply ever!
KK

Community-Based Process

The Prevention Department serves on several advisory boards, steering committees, and other collaborations with community, and regional partners, including: Children’s Advisory Council, Titusville Safe Kids, Crawford Health Improvement Coalition, Crawford County System of Care, Peace4Crawford Trauma Informed Initiative, Courageous Conversations, the Erie and Crawford County Trauma Conference Committee, the annual Recovery Celebration and 5K, as well as a grant from the Erie Arts Foundation, project: Crawford Profiles of Recovery, highlighting local artists with local persons in recovery as subjects for the art exhibit. The project was delayed due to the pandemic, though remains viable. During the pandemic, Prevention staff participated in a new initiative to reduce trauma in the community: the “Hope Line”; a warm line to address emotional stress associated with COVID-19. The Prevention Supervisor was assigned to the Beacon Health Options Performance Improvement Project to assess and improve prevention and treatment procedures throughout the region. Prevention staff assisted with various food distribution and youth lunch programs throughout the county, to diminish food insecurity during the pandemic.

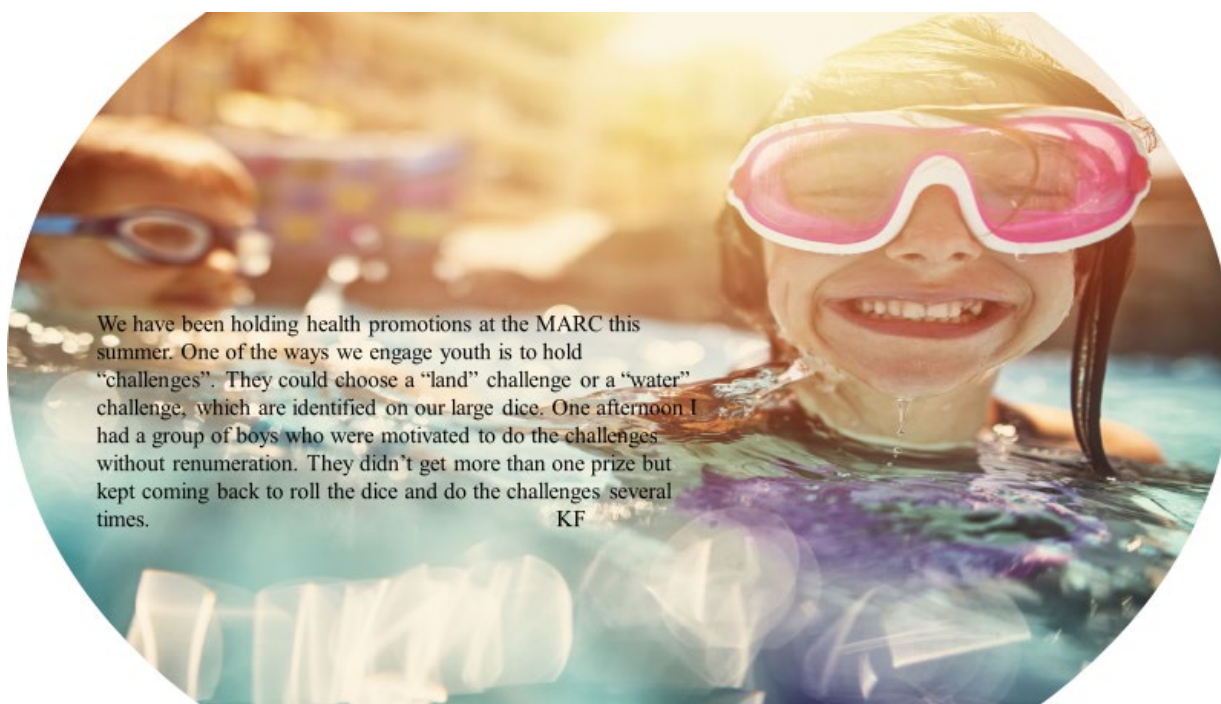


Our involvement with Titusville Open Air Market has proven to be a positive experience. We are touching people/families that we would not necessarily be providing services to in other circumstances. The board that operates the Open Air Market holds a “customer appreciation” Saturday one time each month, where families are eligible to enter a drawing (via a spin of our wheel) for a prize or “Market Moolah.” The recent customer appreciation day was an overwhelming success! We had a great amount of participation.

KF

Environmental

Charged with changing laws and norms making substance abuse less acceptable in our community, the Prevention Department does ongoing outreach at the Crawford County Fair with our “Promise Signature” campaign. Prevention staff also assisted with the Social Norms Campaign at Titusville High School distributing gambling specific social norms messages. The Prevention Supervisor works closely with our Regional Tobacco/Nicotine educator to advocate for Clean Air initiatives, and more stringent procedures for school tobacco violations, as well as community education about the risks of tobacco and nicotine vaping. Prevention staff participated in the “Day at the Capitol” virtual event in Harrisburg, involving state advocacy, and youth engagement in tobacco/nicotine/vaping education and cessation. Prevention staff began advocacy regarding “Youth Lungs at Play” campaign to display no smoking/vaping signs in local parks where children and families attend.



We have been holding health promotions at the MARC this summer. One of the ways we engage youth is to hold “challenges”. They could choose a “land” challenge or a “water” challenge, which are identified on our large dice. One afternoon I had a group of boys who were motivated to do the challenges without remuneration. They didn’t get more than one prize but kept coming back to roll the dice and do the challenges several times.

KF



I recently enjoyed some community engagement at a local Housing Project where we provide activities after the neighborhood lunch program. It was wonderful to see how many children were eager to participate, even if for a portion of the activity. Two of the children gave me their paintings to bring back to the office! Knowing we are increasing protective factors against substance abuse in our community really compels the work we do.

AM

Tobacco

The Prevention Department does ongoing prevention education on the risks of tobacco and nicotine/vaping. Tobacco prevention and education is an integral part of ATOD educational services and information dissemination. Prevention Staff implemented INDEPTH, the American Lung Association's "Intervention for Nicotine Dependence: Education, Prevention, Tobacco, and Health" at one local High School, providing an alternative to suspension for youth from whom vaping devices were confiscated. Prevention Supervisor participated in advocating for the increase of the legal age for tobacco/nicotine purchase, from age 18, to 21. The Prevention Department coordinated with, and continues to collaborate with the regional Tobacco Educator, to offer nicotine/tobacco cessation to CCDAEC staff and clients, as well as facilitating communication with community partners.



Question:
What do bees like to chew?



Answer:
Bumble-gum



Preventioneer KIDS
VOLUME 1 ISSUE 3
JUNE 2020

Swimming Safely...

Do you like to swim? For many kids, going swimming is one of the best things about summer. If you're going swimming at a pool, a beach, or even your backyard creek, there are some important things to remember! First, never go swimming all alone. You should always have permission from a grown-up and someone to go with you. Next, follow the rules...if you're at a community pool, one rule is "No Running!" That's because everything around the pool is wet and slippery, and you could fall and get hurt. There might be a rule about only jumping feet first if the water is too shallow for diving. If you aren't great at swimming just yet, you may need to wear a life jacket. Wherever you are, check with the grown-ups or life guard to see what the rules are, and follow them! It's also a good idea to wear sunscreen anytime you'll be out in the sun for awhile...when you are swimming, you may need to put it on more than once. If you get a chance to go swimming—stay safe and have fun!



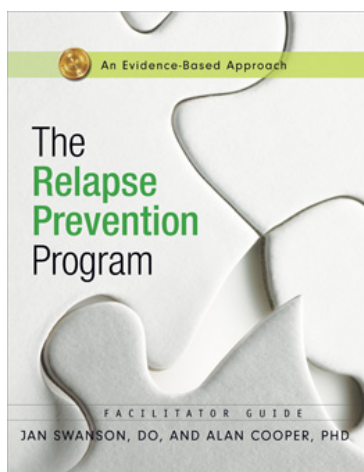
TREATMENT AND INTERVENTION

Outpatient level of care treatment was offered at CCDAEC outpatient office, Stepping Stones (Meadville Medical Center) and Family Services and Children's Aid Society (FSCAS) of Titusville. Intensive outpatient level of care treatment is offered at CCDAEC. Adolescent outpatient treatment was provided predominantly by CCDAEC and on a very limited basis by Family Services and Children's Aid Society of Titusville.

As a functional unit, in-house treatment continuum features multiple services including assessment, interim services, orientation, individualized treatment planning, individual counseling sessions, client/family sessions, group counseling, criminal justice-specific services, consultation, referral, discharge planning and follow-up sessions, etc. as well as numerous referral agreements with other county service agencies. CCDAEC's provision of daytime and/or evening groups include the Matrix Model IOP, a Seeking Safety group, adolescent counseling, dual recovery topical process group, a relapse prevention track, a diverse topical process group series, Suboxone groups, a process group that utilizes various art techniques/skills and aftercare groups. Included in the treatment structure is the implementation of several evidence-based treatment programs including Living in Balance and The Relapse Prevention Program—please reference the descriptions below

Relapse Prevention Program

The Relapse Prevention Program is an evidence-based approach is helping clients identify high-risk situations, work on responses and coping skills, and exploring lifestyle factors that may increase vulnerability. This model is customizable to meet the needs to each client; it is being used in individual and group sessions.

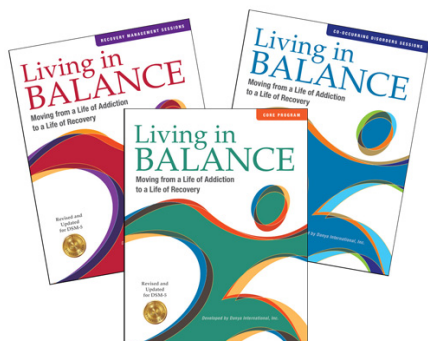


Topics include the following to address relapse prevention plans surrounding the following subjects:

Negative Feelings
Cravings to Use
Pleasant Emotions
Physical Discomfort or Illness
Testing Personal Control
Social Pressure to Drink or Use Other Drugs
Conflict with Others
Reviewing lapse, relapse, prolapse
Coping Skills, Healthy Behavior Changes

Living in Balance

A research based, flexible, practical, and user-friendly substance abuse treatment curriculum that helps patients address issues in lifestyle areas that may have been neglected during addiction. There is a lot of flexibility/customization throughout this program, because there is no beginning or ending session; the parallel treatment model allows patients to start anywhere, end anywhere, and stay current even if they miss a session. We utilize two programs from Living in Balance, core program and supplemental:

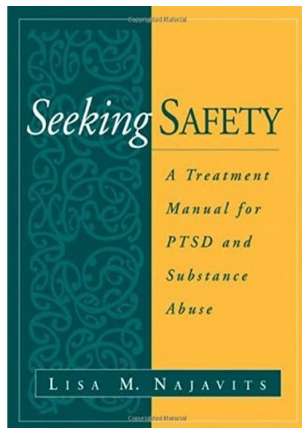


12 CORE
client
sessions to
help clients
address life
issues that
are central
to
achieving
successful
recovery

-
- Session 1: Definitions, terms, and self-assessment
 - Session 2: Alcohol and other drug education
 - Session 3: Triggers, cravings and avoiding relapse.
 - Session 4: Planning for Sobriety
-
- Session 5: Alcohol and Tobacco
 - Session 6: Spirituality
 - Session 7: Sex, Alcohol, and Other drugs
 - Session 8: Stress and Emotional Well-Being
-
- Session 9: Skills for Reducing Stress
 - Session 10: Negative Emotions
 - Session 11: Anger and Communication
 - Session 12: Relapse Prevention Basics
-

Seeking Safety

An integrative treatment approach that is a present-focused therapy specifically for post-traumatic stress disorder and substance abuse. CCDAEC has been implementing Seeking Safety program since fall of 2017. This program can be delivered within a group and individual setting. Seeking Safety is the only model endorsed by professional societies as having strong research support for PTSD/substance abuse.



Helps clients attain safety in thinking, emotions, behaviors, and relationships. Topics include the following:

Self-nurturing
Respecting your time
Recovery thinking
Healthy Relationships
Grounding techniques
Setting boundaries in relationships
PTSD: Taking your power
Honesty
Commitment

Matrix Model IOP

An evidence-based treatment for clients who need to achieve abstinence from alcohol and other drugs. It is a structured program that consist of several core areas: Early Recovery skills, relapse prevention skills, treatment-planning accountability with the group, individual and group sessions. This program allows individuals to practice resocialization skills in a safe and familiar environment while providing a greater understanding of a client's substance use disorder and developing positive changes in one's behaviors and attitudes.



Program is divided into two sections: Relapse Prevention and Early Recovery topics. Clients create a schedule and mark their schedules throughout the week where they create a 7 day schedule to assist with structure.

Avoiding relapse drift
Work and Recovery
Dealing with feelings and depression
Taking care of yourself
Twelve step/Community supports
Your body chemistry in recovery
Recognizing stress
Repairing Relationships
Taking care of business and managing money
Dangerous emotions

Suboxone Groups

3 Levels of groups are provided, as illustrated by a portion of our brochure below:

STAR Program	Treatment	Your Schedule
<p>The STAR Program has three (3) levels of treatment:</p> <p>Level 1: Clients new to treatment and Suboxone maintenance therapy.</p> <p>Level 2: Clients who are in the maintenance stage of their Suboxone treatment.</p> <p>Level 3: Clients who have been in Suboxone maintenance therapy for 36 months and are stabilized in their recovery.</p> <p><i>Our staff at Crawford County Drug & Alcohol Executive Commission, Inc., are here to help you get better.</i></p>	<p>While in treatment with us at Crawford County Drug & Alcohol Executive Commission, Inc., you will take steps to control your life.</p> <p>You will learn about your substance use disorder and Suboxone maintenance therapy.</p> <p>You will learn new, healthier ways to cope with stress, pain, and cravings.</p> <p>You will join a community of individuals, professionals, and your peers who will support you.</p> <p>Our treatment program is aimed at getting you to look at your addiction honestly and realistically.</p>	<p>We offer daytime and evening sessions.</p> <p>You will be scheduled for group and individual sessions based upon your needs.</p> <p>Depending on your need, we offer a variety of other group topics.</p> <p>Many individuals can learn to cope with specific problems more easily if they are able to relate their frustrations, fears, and experiences with others.</p> <p><i>The interactions and relationships within group therapy greatly enhance your rehabilitative process.</i></p>

Challenges in Treatment

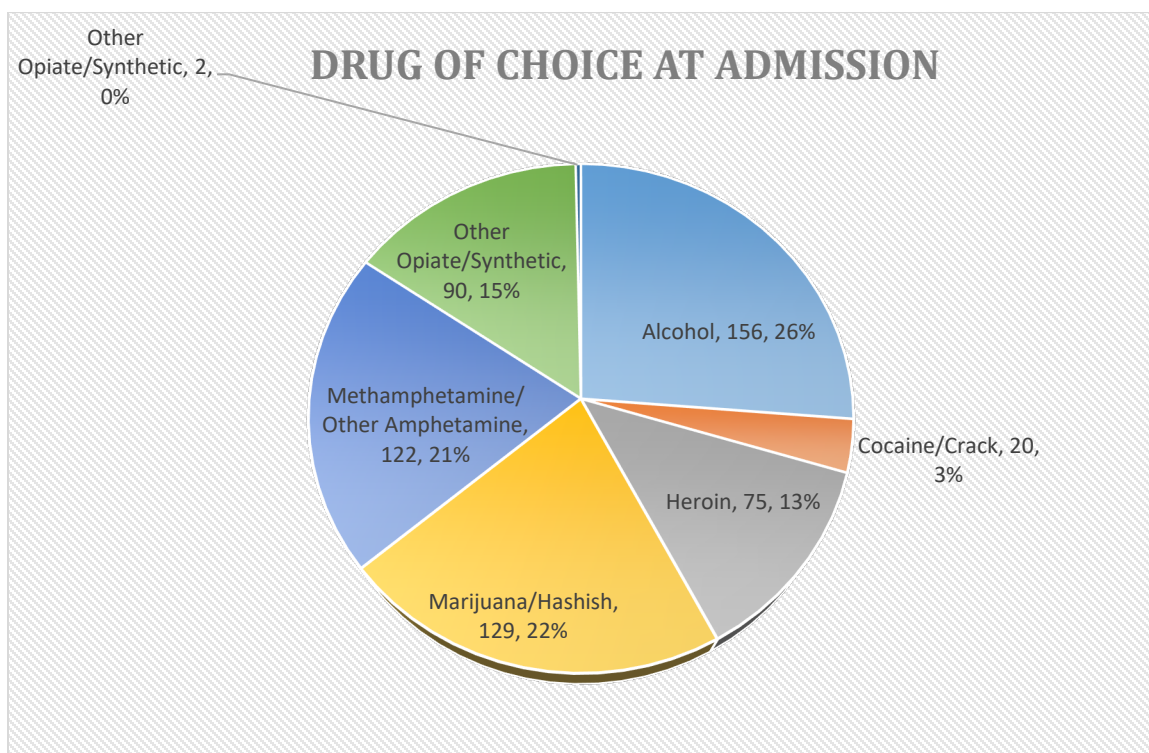
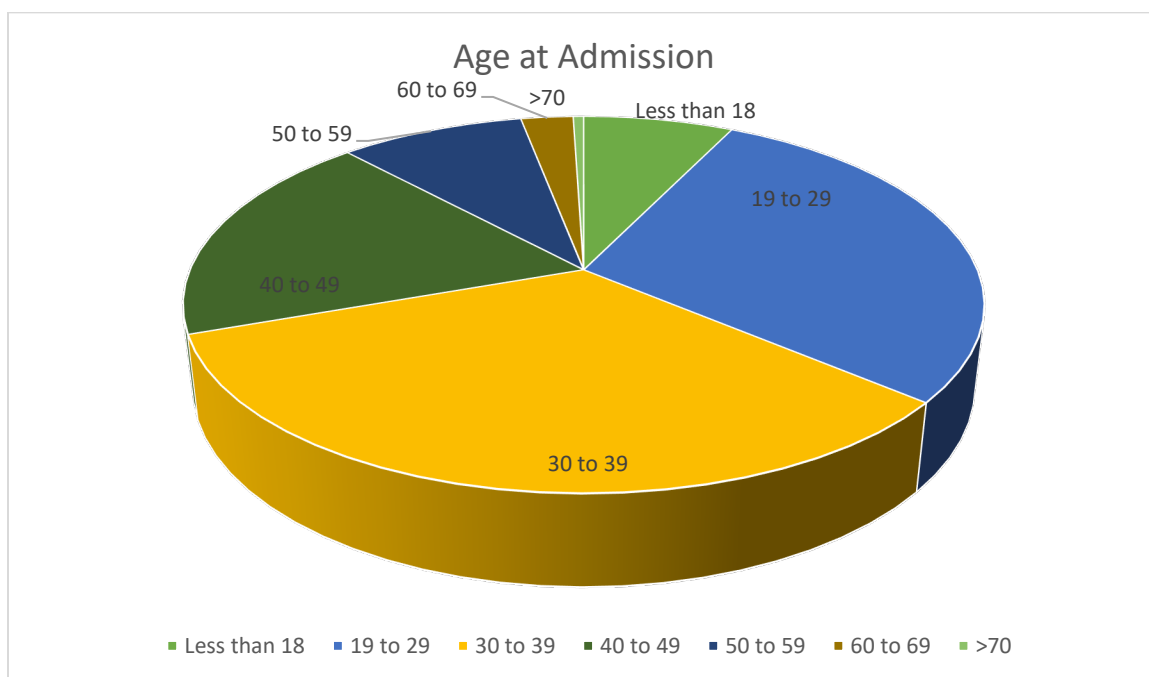
As a result of the COVID-19 pandemic, Pennsylvania Department of Drug and Alcohol Programs announced on March 16, 2020, pursuant to the provisions of Subsection 7301(c) of the Emergency Management Services Code, 35 Pa. C.S. § 7101, et seq., Governor Tom Wolf issued a Proclamation of Disaster Emergency in which announced that Single County Authorities may use grant funds they have received from the Department of Drug and Alcohol Programs for outpatient substance use disorder (SUD) treatment facilities to provide counseling and other clinical services using telehealth technology.

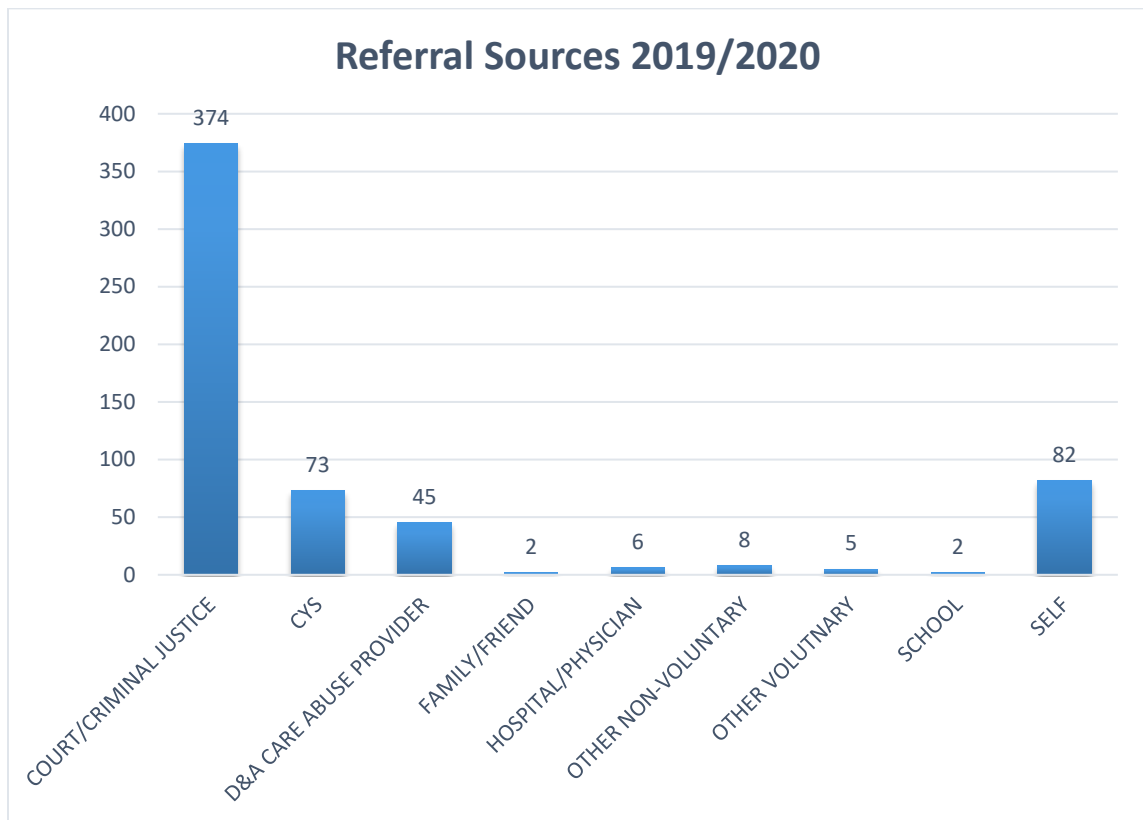
This allowed our outpatient program to deliver telehealth sessions for individual and group sessions. Zoom was the video communication utilized to deliver our telehealth sessions. While Pennsylvania remained in a “stay a home” order per governor’s request, our outpatient program was able to deliver all 9 hours of intensive outpatient groups throughout the week. A total of 3 outpatient groups were offered: Seeking Safety, Relapse Prevention, and a Suboxone Group.

Many clinicians had to dive into telehealth services without prior experience and/or trainings. Crawford County Drug & Alcohol Executive Commission, Inc clinicians were able to partake in many telehealth trainings to become quickly acquired with these services. As time goes on, CCDAEC clinicians are becoming more adapt and comfortable with delivering telehealth services.

Barriers to treatment such as medical issues, transportation issues and other potential barriers to treatment have been alleviated with the delivery of telehealth services. With nearing towards the end of the fiscal year, a hybrid version of treatment where in-person visits combined with telehealth virtual sessions have become the new norm for treatment as we forge ahead through this pandemic.

The graphs below demonstrate several areas of data where tracking of trends and patterns are illustrated: Drug of Choice at time of Admission; Referral Sources, and Age of Admission.





Crawford County Correctional Facility

The current program at the Crawford County Correctional Facility (CCCF) began in March of 2004 to serve the needs of the county's 200 to 250 inmates. The inmate population is made up of people awaiting bail or trial, inmates serving county sentences of up to 24 months minus 1 day, inmates awaiting transfer to other correctional facilities, and county probation violators. Inmates can serve as little as a few days or as much as twenty-four months, less one day.

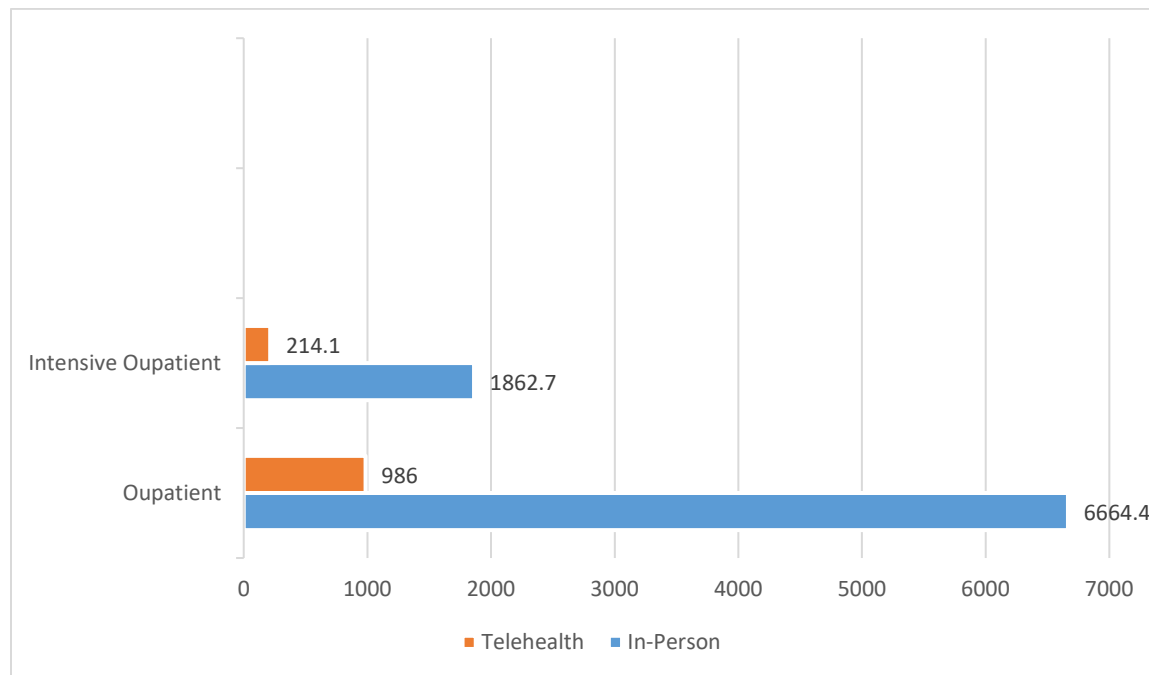
The target population of the jail program largely consists of inmates in the pre-contemplation or contemplation stages of recovery. The program provides intervention services and offers an outpatient level of care consisting of a series of process and topical process groups. This series of groups cycles approximately once every four months. Groups are run in all the major housing units and are open to any inmate who wishes to attend on a voluntarily basis. Individual counseling is provided as appropriate and art techniques/skills have been utilized in this setting as well. Staff responds to inmate requests

individually and in a timely manner. Once involved in the program, staff creates a network between the inmate, case management, CRS, the courts and probation to assist inmate referrals to treatment facilities on the outside. CCDAEC's goal is to provide interventions designed to motivate our jail clients to seek recovery from chemical addiction and by both professional organizations and self-help groups to aid them in becoming productive citizens when they are released back into society.

The program assists longer term inmates that serve a county sentence in forming a workable parole plan that is compatible with recovery. The program provides education and information to our inmates about our local Alcoholics Anonymous and Narcotics Anonymous fellowships. Encouragement is given to the inmates to voluntarily use the twelve step programs as a permanent part of an ongoing life-long self-directed program of recovery. Treatment plans and goals are tailored to each individual inmate who desires voluntary drug and alcohol treatment.

TREATMENT MAJOR ACCOMPLISHMENTS

Counseling hours provided by the CCDAEC out-patient office treatment staff to each patient (group and individual therapy) totaled 9727.2 hours. The graph below illustrates in-person hours provided and telehealth hours provided per level of care:



The provision of treatment services for offenders in the successful Drug & Alcohol Restrictive Intermediate Punishment program (RIP) continued throughout this fiscal year. This program is a collaborative effort between the county criminal justice department and a grant through the Pennsylvania Commission on Crime and Delinquency.

CCDAEC treatment staff is represented on two essential committees: The Quality Management Committee of Value Behavioral Health and the Provider Advisory Council. The Quality Management Committee provides a systematic method of improving the efficiency, quality, and effectiveness of all behavioral health services provided to all members of the Northwest Behavioral Health Partnership HealthChoices Program. The Provider Advisory Council exchanges knowledge and concepts between VBH of PA, Inc. and the HealthChoices Provider Network. The Council's goal is to ensure the appropriate delivery of behavioral healthcare services to HealthChoices members and represents the views of the provider community.

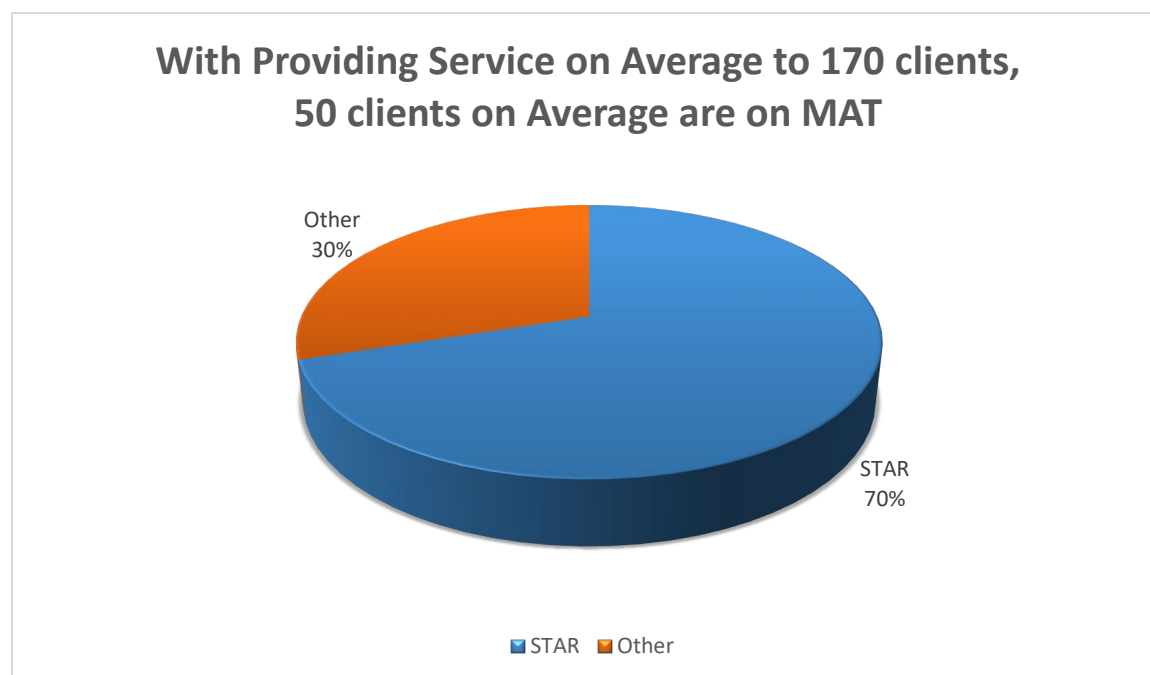
Due to expansion and adding new staff members trainings attended and/or coordinated by the Agency during the fiscal year, key trainings included ***"When Even the Voice are Hungover which focused on dual diagnosis," "ASAM 2 Day Skills Building and ASAM Service Planning and Motivational Interviewing Strategies," and "Cognitive Behavioral Therapy: Rational Living Therapy"***. ***Three clinicians successfully completed Level 1 certification in Cognitive Behavioral Therapy: Rational Living which was led by Dr. Pucci.*** Abundance of online trainings were offered this past year due to circumstances from COVID-19 which allowed our clinicians to participate in trainings that they would not typically have access to. Treatment staff attended a total of 371.5 (153 unduplicated) training hours this fiscal year.

STAR Program

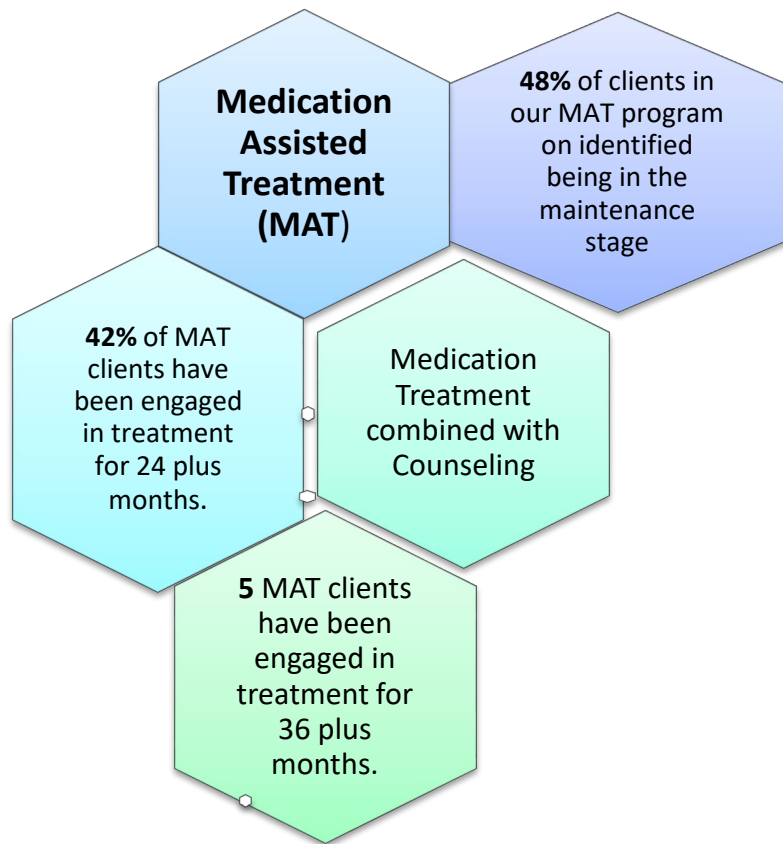
CCDAEC continues our collaboration with Meadville Medical Center in a combined approach to MAT therapies. The STAR (Suboxone Treatment and Recovery Program) has been providing individuals with a moderate or severe opioid use disorder and alcohol use disorder, treatment through a combination of

Physician prescribed medications. Buprenorphine (commonly called Suboxone) and Naltrexone are prescribed and medically monitored by a Meadville Medical Center Physician.

Case management and recovery supports, and outpatient/intensive outpatient substance abuse treatment are provided by CCDAEC. The population served is adults (18 years of age and older). CCDAEC is providing group therapy to meet the individualized needs of patients who are on MAT therapies. This program consisted of a steady growth with nearing around 30 to 35 clients participating in the STAR program which is 70% of the MAT clients that we service, the remaining receive MAT through other providers



Regardless of what setting MAT is provided, it is more effective when counseling and other behavioral health therapies are included to provide patients with a whole-person.



Collaboration with Meadville Medical Center continues to be of discussion as CCDAEC mission is to provide comprehensive services to the citizens of Crawford County.

Cognitive Behavior Institute collaborated with Department of Drug and Alcohol Programs (DDAP) to deliver Cognitive-Behavioral Strategies for Treatment Substance Use Disorders training. Crawford County SCA was selected as the start of this pilot training. This training consists of 4 Levels which is a model that encourages participants to learn the foundational elements of CBT at their own pace. Level 1 consisted of online training to learn the foundational information. Level 2 consisted of in-person small groups to practice skills and interventions. Level 3 consisted of in-person small group work where recordings of said skills were practiced and evaluated. Level 4 is an ongoing supervision of videoconferencing to engage in ongoing training and support.



Treatment: Professional Accomplishments

November 2019: Samantha Bohr obtained her certification as a Certified Advanced Drug and Alcohol Counselor (CAADC)

January 2020: Brittany Glass-Moran obtained her certification as a Certified Advanced Drug and Alcohol Counselor (CAADC)

June 2020: John Force obtained his certification as a Certified Advanced Drug and Alcohol Counselor (CAADC)

Treatment: Customer Satisfaction

Based on the results of 16 interviews conducted by the Crawford County Consumer Satisfaction Team:

100% of the participants identified they participated in treatment planning/goals.

100% identified being satisfied with D&A services.

100% identified being given the chance to make treatment decisions.

100% identified in the last 12 months they were able to get the help they needed.

Highlights from the survey identified below:

Consumers are learning new ways to deal with stress

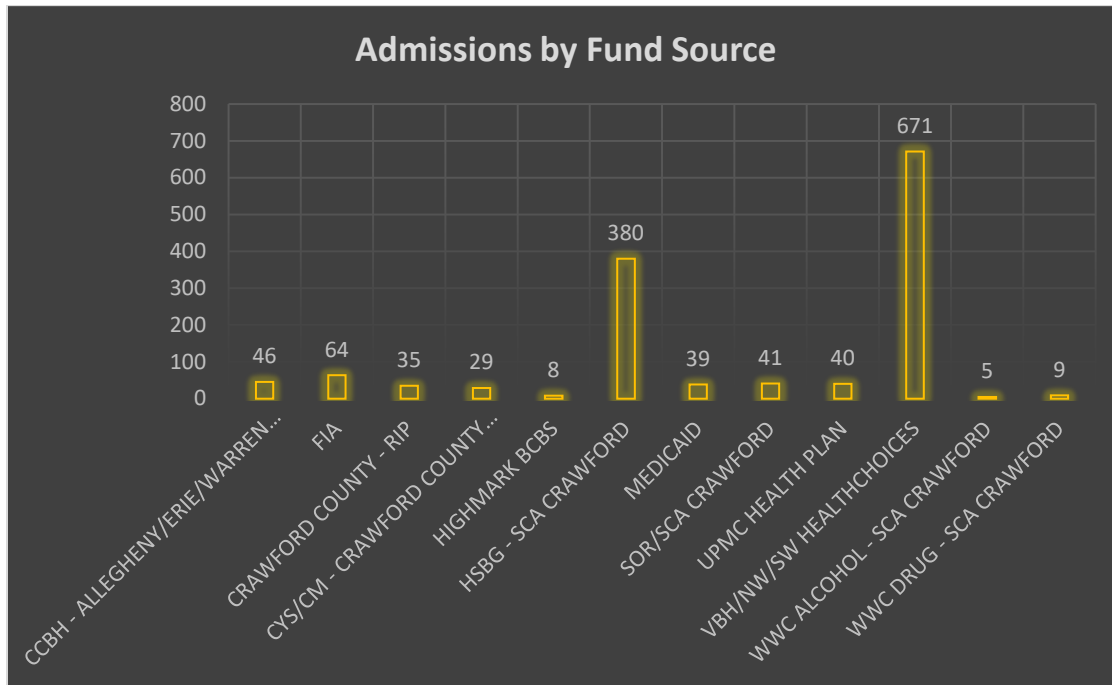
Being sober has improved relationships with friends and family.

Learning ways to think more positively and let go of the negative.

Able to talk with others who had similar experiences and situations.

Learning how to use natural supports.

Central Intake and Case Management



Treatment costs were provided through private insurance, on a self-pay basis, and through public and SCA funding – Medicaid, Restrictive Intermediate Punishment funding, Human Service Block Grant, State Base, Women with Children, Children and Youth Services, and Student Assistance Program funding as eligible.

Following the initial Level of Care recommendation, clients eligible for funding were referred for monitoring by the Utilization Review department. Based on Pennsylvania Client Placement Criteria for adults and the ASAM Level of Care Index for adolescents, a total of 130 continued stay reviews were processed to review the appropriateness of a client's continued stay at their current level of care and/or a referral to a more appropriate level of care. However, we provided Case Coordination Utilization Support for 290 funded clients.

Initial Level of Care (LOC) Referrals Fiscal 19/20:

<i>Type of Treatment</i>	<i>Number Referred</i>	<i>+or- From last Fiscal Year</i>
<i>0.5 Intervention</i>	7	0
<i>1.0 Outpatient</i>	644	-116
<i>2.1 Intensive Outpatient</i>	279	+41
<i>3.5 Clinically Managed Med. Intensity Residential</i>	107	+135
<i>3.7 Medically Managed High Intensive Inpatient</i>	133	*
<i>4.0 Medically Managed Intensive Inpatient</i>	26	+22
<i>No Treatment/Refused</i>	90	-13
<i>Total Initial LOC Referrals</i>	1,286	+69

Please note the previous year's levels of care were based on PCPC (Pennsylvania Client Placement Criteria) and this year's on ASAM (American Society of Addiction Medicine). The 3.7 level of care was added in 19/20. Withdrawal management may occur in either 3.5 or 3.7.

RECOVERY SUPPORTS/CASE MANAGERMENTS MAJOR ACCOMPLISHMENTS

Recovery Supports

Our recovery Certified Recovery Specialist program, begun in October of 2010, expanded from two CRSs to four during FY 19/20. Credentialed by the Pennsylvania Certification Board (PCB), each Recovery Specialist completed 54 hours of training in three core areas of competency – recovery management, education and advocacy, and professional ethics and responsibilities. Recertification must be maintained every two years with an additional 30 hours of training related to the domains which include 6 hours of ethics training and 6 hours of confidentiality training. These credentials follow state and Beacon Health Options requirements.

Providing services to county adults (18 years of age and older), the Certified Recovery Specialist program is a critical component of care offered by CCDAEC. The recovery support specialists are dedicated to providing services to support individuals with substance use disorders (SUDs) or co-occurring mental health and SUDs needing outreach, mentoring, and peer support in all stages of the recovery process. They offer stage-appropriate recovery education and guidance, support to overcome obstacles, and assist in the development of an individual recovery plan. “Meeting clients where they are” is more than just a figurative statement to the CRS program. Considering possible barriers or limitations to accessing services, the CRSs are available to meet with clients at treatment facilities, in the community, and in their homes.

To help facilitate access to various community resources to ensure basic needs are being met, Certified Recovery Specialists communicate closely with the CCDAEC Case Managers providing case coordination which addresses housing, transportation, childcare, and other ancillary needs. This collaboration also extends to treatment counselors in an effort to monitor an individual’s recovery stability as they work particularly close with the individual outside of the treatment environment. Individuals are encouraged to build or rebuild positive, constructive relationships with others, often through 12-step programs with the support of a CRS to introduce and engage them in the recovery community. A CRS can also direct or redirect an individual to treatment when necessary. Additionally, the CRSs rotate attendance in treatment groups to explain recovery supports and to enhance engagement in the services.

In an effort to address the stigma of addiction, recovery supports established a presence at Women’s Services, Inc. by attending a monthly house meeting with the shelter’s guests to offer an overview of services as well as other supports as needed. A CRS also attends monthly sessions of Courageous Conversations and is available bi-weekly at the Living Waters Food Pantry to assist patrons with resource coordination.

Collaborative Initiatives

In September 2018, our agency collaborated with Meadville Medical Center to serve individuals with Opioid Use Disorders who wanted a local Medication Assisted Treatment (MAT) option rather than traveling outside of Crawford County for MAT. This collaborative program, Suboxone Treatment and Recovery Program (STAR) provides for individuals with moderate or severe opioid use disorders and is a combination of Physician prescribed Buprenorphine (Suboxone), medical monitoring, case management, recovery supports and outpatient/intensive outpatient substance abuse treatment. The population to be served is adults (18 years of age and older) excluding pregnant women. However, we have since added the capability to serve pregnant women with Subutex on a case-by-case basis through STAR. This program has allowed us to provide more of a team approach as we work together with MMC to provide a broader support system from the suboxone physician, case manager, recovery specialist and counselor. Our STAR program continues to do well, as we continue all of our collaborative programs with them. The clinic expanded their program to provide Vivitrol as an alternative MAT within this past fiscal year. We continue to have clients achieve success in their recovery efforts with MAT, where they had historically struggled.

Ongoing work with COMPASS, Commonwealth of Pennsylvania Application for Social Services, provides clients with the ability to apply for Medical Assistance/VBH benefits online by going to the COMPASS website. Our Case Coordinator and RIP (Restrictive Intermediate Punishment) Caseworker assist our clients in completing this application online. This allows our clients to apply for cash assistance, childcare subsidy, energy assistance, food stamps, healthcare benefits and other services. We have also started completing COMPASS applications with clients who are in the Crawford County Correctional Facility and being released to rehab. We have five other case managers who also work within the COMPASS system and assist clients with expediting their Medical Assistance/VBH benefits.

RIP (Restrictive Intermediate Punishment) continues to provide for Level 3 and 4 DUI offenders who are pre-approved for this program through the court. The RIP caseworker monitors these clients more extensively while working with the legal system to help increase client success in treatment, strengthen their stability and lower their recidivism. Our RIP Case Manager provided support for an estimated 45 clients this fiscal year. She also assisted approximately 15 clients in applying for Medical Assistance via COMPASS.

Linking clients with community resources and providing for our clients' non-treatment needs is the expertise of the Case Coordinator (CC) formerly Intensive Case Management and Resource Coordination. Services, such as referrals for housing, childcare, transportation, vocational training, and other non-treatment needs. These services are voluntarily accessed and assist our clients in removing barriers to treatment. We have expanded this CC service into every case manager position to better accommodate

the clients' needs with any case manager. Additionally, our case managers are providing more services and support to our clients within the community, in their homes, at other facilities and in various locations within the community.

The Case Management Supervisor or other designee attends a bimonthly Multi-Disciplinary Team (MDT) meeting at Crawford County Human Services. This team consists of a variety of professionals from other agencies within Crawford County to review abuse cases from Children and Youth Services to determine if everything was done appropriately, adequately and efficiently, and to make recommendations for current and/or future cases. The Case Management Supervisor and/or Prevention Supervisor also sits in Act 33 fatality and/or near fatality reviews as needed with Crawford County Human Services, as part of the community team to review such cases in a similar manner.

We have begun to branch out into more community case management this year, providing for the needs of our clients at various locations and facilities within our county. We have established a presence to provide case management services at Alpine Springs, Family Services and Children's Aid Society, Stepping Stones and Turning Point treatment facilities, as well as CHAPS and Women's Services. We are meeting with clients in their homes and other locations within their community per clients' choice for both case management services and recovery support.

Licensing and QAA

CCDAEC successfully met the requirements of Licensing and had no findings during the Quality Assurance review by DDAP. The annual licensing visit focuses on Administration, Treatment and the licensed portion of Case Management, whereas the Quality Assurance review also includes Care Coordination, Recovery and Prevention Services.

Barriers and Trends

Geographically, Crawford County is 1,013 square miles and has a population density of 89 per square mile – 65% of the county is classified as rural. This is important to our clients that are without transportation and living outside the Meadville and Titusville cities and where public transportation is either non-existent or very limited. CCDAEC has been able to provide transportation for eligible clients accessing treatment; however, this service does not include accessing recovery programs or other natural supports.

The lack of 'drop in' childcare makes it difficult for our clients to access formal childcare in order to attend their D&A appointments. CCDAEC offers childcare services to eligible clients while in treatment or receiving case management/recovery support services. There are several childcare facilities in our area who are licensed providers. However, they will not provide this care for just a couple hours a week or bi-weekly. They require full day of childcare or half day care 4-5 days per week. This does not meet the needs of our clients who have children.

Insurance deductibles are a barrier for our clients who have private insurance with high deductibles. These clients are often working in minimum to moderate wage jobs and it is a hardship for the client to pay the required deductible upfront before the insurance begins to pay. Lack of overall enough funding precludes the SCA addressing this gap in funding. However, we have begun to offer some assistance in these situations, case by case.

Stigma surrounding persons in recovery continues and can impede individuals from seeking out treatment and recovery services. To help counter this, the SCA hosts an annual recovery celebration in September. CCDAEC also participates in several collaborative efforts with other providers throughout the county. While important, the collaborative efforts require staff dedication and expenses. Our prevention department has developed more collaborative efforts in this, which are in the prevention section of this report.

Currently the process used by DDAP to deliver to the SCAs completed, approved, contract amendments that enable the release of funds often takes a few months. Precious time is lost in which services could have been provided along with the funding that would have supported those lost services. The Compulsive and Problem Gambling Treatment Grant is the most recent example. A good deal of time in which services could have been provided was lost while the SCA's waited for the contract amendment to be finalized and funding released.

One of the most challenging tasks for us this year has been the implementation of the new PA Web Infrastructure for Treatment Services (PA WITS). This has proven to be a difficult process, because it requires duplicate data entry for all our case management data from screening to assessment, service plan, ASAM and notes. The little training that has been available to both SCA and Provider users does not sufficiently instruct us in the navigation of the PA WITS system nor the volume of data which needs to be entered. The administrative burden placed on users both at this agency and as the SCA charged with helping our providers learn this new system, has been overwhelming at times. We believe that more in-depth trainings would be a benefit to the users of PA WITS as well as the ability to utilize an upload option, which has not been presented as an option.