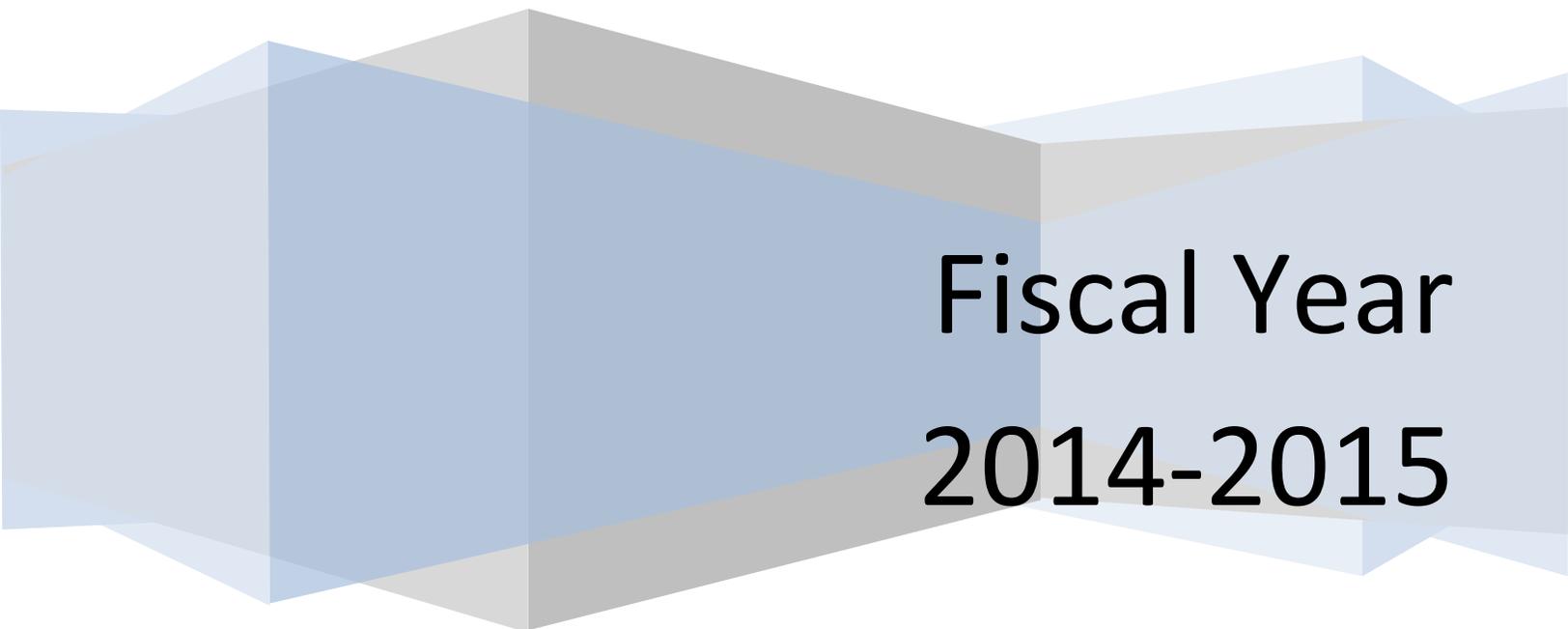


Fayette County Drug and Alcohol Commission, Inc.

Annual Report



**Fiscal Year
2014-2015**

MISSION STATEMENT

Enhancing our community's quality of life by promoting
addiction free living.

VISION STATEMENT

Fayette County Drug and Alcohol Commission, Inc. strives to be the premiere substance abuse service provider in Fayette County by recognizing the changing needs of the community and offering exceptional services to meet those needs.

DIVERSITY STATEMENT

Diversity refers to the various ethnic, cultural and demographic differences that exist among employees in our workforce. Diversity includes personal characteristics such as age, race, color, gender and disability as well as differences in backgrounds, values and beliefs. The

Fayette County Drug and Alcohol Commission recognizes the importance of cultural diversity in the workplace, and is committed to enhancing our diversity and to demonstrating its commitment to our
clients

Administration

Fayette County Drug and Alcohol Commission, Inc. (FCDAC) is a non-profit organization governed by a volunteer Board of Directors. Since 1974, Fayette County Drug and Alcohol Commission, Inc. (FCDAC) has served as the Single County Authority (SCA) for Fayette County, as designated by the Commonwealth of Pennsylvania. responsible for the administration and management of publicly funded alcohol, tobacco, drug and gambling services within the county.

Fayette County Drug and Alcohol Commission, Inc. is an independent commission that offers the following direct care services:

- Prevention services
- Driving Under the Influence services
- Case Management services
- Treatment services
- Contracts for the provision of detoxification, inpatient and outpatient services

The foundation for our approach to prevention, intervention and treatment services is based on consideration for the dignity of the people we serve and the belief that addiction is a treatable disease. Over the past several years, FCDAC's role and mission have expanded to include other addictions that, if left untreated, would have devastating outcomes similar to those of alcohol and drug addiction.

The Prevention Unit provides prevention programs that are designed to reduce those factors that place our youth at risk for alcohol, tobacco and other drug use, and that actively engage the youth, family and community members in a variety of prevention activities in both school and community settings. Additionally, the Prevention Unit works with each of the public school

districts within Fayette County to provide intervention services for each school's Student Assistance Program.

The Driving Under the Influence (DUI) Unit offers services for those offenders who have been arrested for driving under the influence of alcohol or other (prescription, over the counter or illegal) substances that caused an impairment to their driving ability.

The Case Management Unit at FCDAC works to help ensure access to treatment, support services and promote the recovery process. Case Management is the point of entry into all drug and alcohol abuse services and is driven by client need. The aim is to provide the least restrictive level of care necessary so that the client's life is disrupted as little as possible. Any person needing drug and alcohol services may contact FCDAC, Inc. for an assessment and an individual referral to meet his/her needs for service. FCDAC will work with each person to access the most appropriate and available funding source to meet their treatment needs. FCDAC serves all clients regardless of their ability to pay.

FCDAC is a fully licensed provider of drug-free outpatient and medication assisted outpatient treatment services. These services are geared to those persons who are experiencing problems with gambling or substance abuse; for those who have a relationship with someone who is a substance abuser; and for children and adolescents who are children of substance abusers or addicts. Each person who accesses treatment services has active input into developing their own comprehensive and custom tailored individual treatment plan. This plan is used to guide each person through their outpatient treatment and aftercare process. The treatment unit is fully staffed and is able to accept most insurances for payment of services. Even though a sliding scale for payment is available, FCDAC strives to eliminate as many barriers as possible for a person to access treatment.

As with many other counties within the Commonwealth, Fayette County has been affected by the insurgence of opiate and prescription drug abuse. During the 2014/15 fiscal year, 44% of the persons seeking case management services identified opiates or heroin as their primary drug of choice. Additionally, during the 2014/15 fiscal year, 30.5% of those persons participating in outpatient treatment stated that opiates or heroin was their primary drug of choice. Compared to the noted increases in opiate use, those seeking treatment for alcohol use has decreased 6.5% from the previous year, while those seeking treatment services for marijuana use has increased 2.2%.

Persons presenting for DUI services have historically maintained the same/near same demographical make-up over the past several years. It appears that there has been a increase in the number of persons who have been arrested for driving under the influence of drugs.

During the fiscal year, FCDAC's Administrative Unit provided administration and oversight of all services provided onsite. As funding sources have become more restrictive, FCDAC's Administration has ensured that funds were maximized so that quality substance abuse prevention, intervention and treatment services were provided to the citizens of Fayette County.

Fayette County Drug and Alcohol Commission, Inc. is dedicated to providing or supporting quality educational training programs to both our staff and professionals working within the community. This goal is achieved through in-house trainings, co-sponsored by the Department of Drug and Alcohol Programs and the PA DUI Association trainings, as well as collaboration with other social service providers. During the 2014-2015 fiscal year, FCDAC provided 24 hours of approved trainings directly related to substance abuse/use/misuse issues. These trainings covered such topics as Cultural Competency, Alcohol Challenge Test, Alcohol 101, High Alcohol

Content Beverages, and Non-Suicide Self Injury. Additionally, FCDAC offered Self Defense, CPR/First Aid, Tobacco and Stress Management trainings to internal staff.

Finally, I would like to take this opportunity to thank Fayette County Drug and Alcohol Commission's Board of Directors for their ongoing support and dedication during the year. They, along with the entire team at FCDAC are always impressive in their commitment to make a difference to people, families and communities that are affected by alcohol and other drug issues.

Prevention:

The FCDAC, Inc. Prevention Unit is responsible for delivering and coordinating alcohol, tobacco, and other drug (ATOD) prevention services for Fayette County. This broad task is carried out by four qualified staff members, each with at least seven years of experience in the drug and alcohol prevention field and overseen by a supervisor with over twelve years in the field. The field of ATOD prevention focuses on employing different strategies to impact the use, misuse, and abuse of ATOD. The methods Prevention Specialists use to tackle this task are many, including educating and providing information, bringing awareness to ATOD issues, providing ideas on ways the community can support prevention efforts, and offering insight on ways ATOD use, misuse and abuse are inadvertently encouraged by social norms as well as community practices. The highlights of our efforts from the 2014-2015 fiscal year are listed below.

The program *Too Good for Drugs* has been utilized to educate elementary students across the county the past several years. (During this fiscal year, 523 students participated in the seven and a half hour program, which is broken up into ten lessons.) Another program, *The Media Straight Up*, was once again offered this year. It focuses on ways that the media can influence our decisions about ATOD use, targeting middle school students. Two teachers welcomed the program into their class, with 27 students participating. Multiple kindergarten classes participated in the *Why Animals Don't Smoke (WADS)* program, as well as a few local pre-schools. Nearly 170 youth participated. Programs were also presented at Laurel Business Institute, as well as Pennsylvania Institute for Health and Technology, with over 165 students receiving information. Staff members also targeted senior citizens during the 2014-2015 fiscal year, providing presentations to 375 senior citizens at twelve senior centers on the topics of alcohol and tobacco. During this fiscal year, Prevention Specialists once again used the evidence based tobacco cessation program, *Freedom from Smoking*. There were three AM classes and three PM classes, each eight sessions in length, offered at FCDAC, Inc. Five classes

were also offered on location at the Fayette County Courthouse and Another Way. Staff members also facilitated the Underage Curriculum for Adolescent Needs (UCAN) with an ongoing schedule of classes. Three classes were held during the fiscal year, with the majority of the youth being referred to the program from local magistrates.

Expanding and building upon partnerships was again a focus of the 2014-2015 fiscal year. Prevention Specialists worked with other organizations to bring in speakers for the community on ATOD topics. Mr. Bill Cousins, a speaker for the American Cancer society, shared the story of his son's tobacco use and death with two secondary school buildings. The Prevention Unit also offered advice to the local newspaper on stories addressing various ATOD topics. Prevention Unit staff members worked to train other professionals on referring individuals to the PA Free Quitline. Five organizations had staff trained on the Fax to Quit program, as well as local tobacco cessation options. Staff members also provided technical assistance to four businesses working to adopt or revise their current tobacco free worksite policies. Staff members worked with Fayette County Children and Youth, facilitating programs for foster parents on a variety of relevant topics. Plans are for the programs to occur quarterly, on an ongoing basis. Staff members also partnered with Careerlink, offering information as part of their programs for youth and with Fayette County Community Action Agency, providing information to staff about drugs in the workplace.

This year, FCDAC, Inc. become the grantee for Fayette County's Communities that Care program, with the Prevention Supervisor serving as the CTC Mobilizer. Work was done to present the Communities that Care model to individuals in the community and to encourage participation in the CTC initiative.

The Prevention Unit works to bring awareness of ATOD topics by hosting events for multiple awareness days throughout the year, as well as coordinating awareness campaigns. Activities held are listed below, along with 2014-2015 highlights:

- ***Fetal Alcohol Spectrum Disorder*** (FASD) Awareness Day (September 9th, 2014): This day is designed to promote the message there is no safe amount of alcohol for a woman to consume while pregnant.
- ***Red Ribbon Week*** (October 23rd-31st, 2014): This national drug prevention campaign is locally coordinated by Prevention Unit staff and encourages the community to celebrate the choice to live a drug free lifestyle. Red ribbons were distributed to all Fayette County schools for students and staff to wear during the week. Packets of information were created for all schools, featuring ideas of activities they could participate in throughout the week. These packets are compiled by Prevention Specialists and include suggested building wide announcements, fun group activities to promote drug free choices, ATOD information and additional resources. During this week, FCDAC, Inc. also hosted the 9th Annual Red Ribbon 5K Run/ Walk, where 47 individuals came together at Penn State Fayette to participate in a healthy, drug free activity.
- ***Great American Smoke Out*** (November 20th, 2015): This is a day where individuals can give up smoking for the day, with the hope that change will be long lasting. Signage for this day was distributed throughout the Fayette County Health Center, as well as Uniontown Hospital. Staff members also worked with the Fayette County Commissioners to have a proclamation regarding the day issued.
- ***Hand Over the Reins*** (winter holiday season 2014): This campaign ran from Thanksgiving until New Year's Day, highlighting the importance of using a designated driver. Local participating liquor serving establishments hung posters, set up signage on their tables, and had staff wear buttons encouraging patrons to refrain from drinking if driving and/or using a designated driver.

- ***Through with Chew Week*** (February 15th- 21st, 2015): Information on smokeless tobacco was distributed during this awareness week, and the Great American Spit Out (GASpO) was observed on February 19th, 2015. FCDAC, Inc. staff members were asked to wear buttons recognizing the day, featuring an internally developed mascot and slogan idea that was also featured on posters given to local medical and dental offices. The awareness week was used as a kick off to engaging local dentists in the Fax to Quit initiative, where health professionals can sign up patients for free tobacco cessation support via the PA Free Quitline.
- ***Kick Butts Day*** (March 19th, 2015): Signage for this awareness day was distributed for the 2015 event.
- ***Parents Who Host Lose the Most*** (spring 2015): This campaign centers on Project Sticker Shock, held in May, 2015. Prevention Unit staff members worked with local school district partners coordinating the events at five beer distributors in the county, affixing stickers with the “Parents Who Host” logo to 6,000 cases of beer. The logo reminds adults it is illegal to provide alcohol to minors.

Another way Prevention Unit staff members support ATOD prevention is by serving as Liaisons to the Student Assistance Program (SAP). SAP is a state mandated program that schools are to utilize to address barriers to student learning. The Liaison’s role is to help SAP teams when the issues are beyond the scope of the school and may require outside services, like drug & alcohol or mental health. As SAP Liaisons, Prevention Unit staff members serviced twenty-six SAP Teams across six school districts during the 2014-2015 fiscal year. Liaisons participated in 428 meetings during the school year and screened 39 students for potential D&A or mental health concerns. They also participated in 65 meetings with parents regarding the screening process.

Driving Under the Influence (DUI) Unit:

DUI Process

According to Act 3802 of the Pennsylvania Vehicle Code, DUI Programs across the Commonwealth of Pennsylvania are mandated to follow the requirements of a three tier Grading and Sentencing Guideline for DUI Offenses.

The first mandatory condition is that everyone arrested for DUI in the state of Pennsylvania must undergo a self-reporting Court Reporting Network (CRN) evaluation. Offenders are mandated to comply with the following requirements as set forth by the CRN:

- Alcohol Highway Safety School (AHS),
- A full drug and alcohol assessment, depending upon the results of CRN,
- Mandatory license suspension,
- Payment in full of all fees and costs,
- Probation, restitution, and any other condition established by the Court.

Alcohol Highway School/Education

A required 12.5 hour class utilizing an approved Pennsylvania AHS curriculum is available in several venues. During the 2014-2015 fiscal year, the following educational classes were offered:

- Day Class- held 2.5 hrs a day for one week (Monday through Friday).
- Evening Class- held 2.5 hours per class, one evening a week for five consecutive weeks.
- Multiple Offender Program (MOP)/Phase II-Intervention Group-offered to provide treatment oriented/intervention services to those who have had more than one DUI arrest and/or need more than AHS, according to the CRN and DUI Assessment. MOP and Intervention groups are held on a quarterly basis..

Fayette County Drug and Alcohol Commission received a grant from the Pennsylvania Commission on Crime and Delinquency to establish Victim Impact Panels. Beginning in

January 2015, DUI Victim Impact Panels were introduced within the DUI program. Participants are DUI offenders who are court ordered as a part of the Accelerated Disposition Program (ARD). The panels that are hosted are modeled after the Mothers Against Destructive Decisions (MADD) and the National Highway Traffic Safety Administration (NHTSA). Four sessions were held during the fiscal year from January through June 2015, with a total number of 141 enrolled and 112 completing the sessions. This relates to a 79% show/completion rate, and the evaluations that are completed by the attendees share the impact that the panels have had on them.

Another new endeavor during this fiscal year has been participation with the Central Court process. During this fiscal year, the Court of Common Pleas has introduced a Central Court program which handles preliminary hearings in all criminal cases charged as misdemeanors and felonies by the PA State Police. DUI personnel are in attendance during the hearings for those charged with DUI and are able to assist those defendants with accessing the mandated services that are required to meet the DUI requirements.

One of the goals of the DUI Unit was to increase the "Show Rate" of CRN evaluation appointments. During this fiscal year the show rates was increased from a rate of 37.6% (based on information ending September 2014) to a rate of 46% by the end of June 2015. This goal was accomplished by increasing the show rate to an average rate of 58.6% for the months of October 2014 through June 2015. This was accomplished in part due to clients being seen at Central Court and ARD hearings, as well as not scheduling appointments for clients prior to any contact with them.

The DUI unit continues to see an increase of urine drug screens and remains as the direct administrative and collection unit of the Drug Screening process from outside vendors/clients. These numbers have increased at a relatively steady rate during fiscal year 2014-15. The total

number of urine specimens collected and billed for was 1,809 specimens. This was a 23.65% increase in comparison to FY 2013-2014. The largest collection was in June 2015 with 197 specimens for said month. We continue to look for other ways to offer these services to other workplaces for an increased revenue stream.

Service	# Enrolled	# Completed	% Completed
AHSS Day Class	322	200	62%
AHSS Evening Class	307	189	59%
Multiple Offender Program	143	43	30%
Intervention Program	65	35	54%

Total CRNs Completed : 536

<u>Sex of Offenders:</u> <ul style="list-style-type: none"> • 78%- Male • 22%- Female 	Repeat Offenders- 33% Average Reported Income: \$34,453
<u>Age at Violation:</u> <ul style="list-style-type: none"> • 1% Under 18 • 5% 18- 20yrs • 19% 21-24yrs • 13% 25-29yrs • 12% 30-34yrs • 19% 35-44yrs • 21% 45-54yrs • 10% 55 + yrs Average Age = 37	<u>Marital Status:</u> <ul style="list-style-type: none"> • 48% Single • 14% Married • 16% Divorced • 6% Widowed • 5% Separated • 11% Live- In
<u>Education:</u> 58% - High School Graduate 17% - Partial College 10% - Undergraduate 15% - 12 th grade and below	<u>Employment:</u> 68% - Employed 32% - Unemployed 7% - Disabled 1% - Retired

<p><u>Reason for Traffic Stop:</u></p> <ul style="list-style-type: none"> • 14% Vehicle Violation • 18% Weaving/Careless Driving • 24% Moving Violation • 32% Crash • 12% Other 	<p><u>Reported Day/Time of Arrest:</u></p> <ul style="list-style-type: none"> • 61% Arrested on Weekend (Fri,Sat,Sun) • 33% 5pm to Midnight • 54% Midnight to 4am
<p><u>BAC:</u></p> <ul style="list-style-type: none"> • 20% 0.20% and above • 20% 0.16% to 0.19% • 28% 0.10% to 0.15% • 3% 0.08% to .09% • 1% Below .08 • 8% Refusals • 18% Drug Related • 2% Unknown <p>Average BAC - .17 (rounded off)</p>	<p><u>Alcohol/Illicit Drug Profile:</u></p> <ul style="list-style-type: none"> • 47% Severe Problem Drinker • 40% Social Drinker • 24% Controlled Substance (Illicit/Non-prescribed) • 21% - Marijuana Use • 20% Prescribed Controlled Substance Use • 9% Cocaine Use • 6% Narcotics Use • 4% Depressant Use

Case Management Unit:

FCDAC, Inc.'s Case Management unit typically is the first point of interaction with clients seeking assistance with substance use disorders. Clients can be self-referred to these services or come from various other referral sources. Assistance is given to clients in the form of screening, level of care assessments and case coordination services. Certain populations, i.e. pregnant injection drug users, pregnant substance users, injection drug users, overdose survivors, women with dependent children, adolescents, and individuals who have recently been discharged from an inpatient facility, receive priority scheduling in these appointments. Upon completion of the appointments clients will have a better understanding of treatment options available, funding sources that could assist in their accessing of treatment options, and assistance with accessing help for other non-substance abuse related issues such as housing, mental health treatment, and GED/career related services. Resource coordination appointments are also a component of the Case Management unit. During these appointments client can be seen for additional information gathering, referrals to appropriate outside agencies, and even placement to various facilities if the client has insurance and is unable to participate fully in the assessment.

The Case management unit at FCDAC has went through several changes over the past fiscal year with a new staff member, increased relationship building and in-services with local hospitals and agencies, and frequent meetings with parole and probation. Case Management team members also met with representatives from the District Attorney's office as well as Fayette County Probation Officer's to assist with the magistrate referral process. Monthly meetings were also held with state parole officers to provide necessary feedback on clients involved with the criminal justice system. Case Management staff utilized outreach services to reach out to local pharmacies to see if they currently are or plan to carry Naloxone which can be administered to reverse an opiate overdose. Case management staff established in coordination with Fayette County Prison officials as well as Fayette County probation Officers a

set prison assessment day in which referrals are made through probation contact and clients are assessed to see if they meet criteria for release to inpatient drug and alcohol facility.

The Case Management unit had several goals for the 2014-2015 fiscal year that improved upon the strengths of the unit. The first goal was tracking the referrals given to clients to outside agencies that can assist with non-substance abuse issues such as housing, WIC, mental health, utilities, medical assistance, schooling, and career opportunities. This tracking served to identify additional needs of our clients and increase supports to assist with recovery efforts. The top two needs of our assessed clients were medical assistance and DUI to complete needed DUI requirements. Secondly the case management unit also reached out to both Uniontown Hospital and Highlands Health Care Center to provide in-services to various units to increase awareness and the likelihood of referrals to substance abuse treatments opportunities. In-services were scheduled and held with social workers, LECOM students, and birthing unit staff at Uniontown Hospital and social worker/case mgmt. staff at Highlands Healthcare Center. During these in-services the “warm hand-off” was further explained in regards to outside agencies, specifically hospitals, making referrals to FCDAC for clients who have survived overdoses. By alerting our staff members, assessments and placement can be done quickly and directly from the hospital as to increase the client’s chances of successful recovery and stabilization.

The Case Management unit assessed 1163 clients in the 2014-2015 fiscal year. Both male and female clients were assessed with a varied array of substance use issues and needs. After the assessment or case coordination is complete the client is referred to a specific level of care placement in accordance with the Pennsylvania Client Placement Criteria (PCPC). These levels of care can range from hospital and non-hospital detox and inpatient rehabilitation facilities to outpatient services or even no treatment for the client due to placement criterion met.

Clients seeking assistance with substance abuse issues can be referred from various outside agencies and contacts. Although many of our clients seek treatment independently on their own accord, there are many that are referred from their contact with other local agencies in Fayette County. Client who have been seen by case management represent varied ages and racial identities.

The following tables display the breakdown of substances used by male and female clients, various levels of care that clients seen by case management staff can be referred to for treatment, sources of referrals, as well as the ages and races of clients assessed by case management staff members.

Primary Substance Abused by Client:

	Male (758 or 65%)	Female (405 or 35%)
Alcohol	313 (41%)	106 (26%)
Crack/Cocaine	39 (5%)	19 (5%)
Cannabis	93 (12%)	58 (14%)
Heroin	178 (23%)	98 (24%)
Opiates	124 (16%)	116 (29%)
Benzodiazepines	11 (1%)	8 (2%)

Compared to the previous fiscal year, during the 2014-2015 fiscal year, there was a 1% decrease in those reporting alcohol as their primary drug of choice and a 2% decrease in those reporting marijuana as their primary drug of abuse. Even as those who reported that their primary drug of abuse was prescription drug abuse, other opiates and cocaine has remained unchanged from the previous fiscal year, there was a 3% increase in those who reported heroin as the primary drug of abuse.

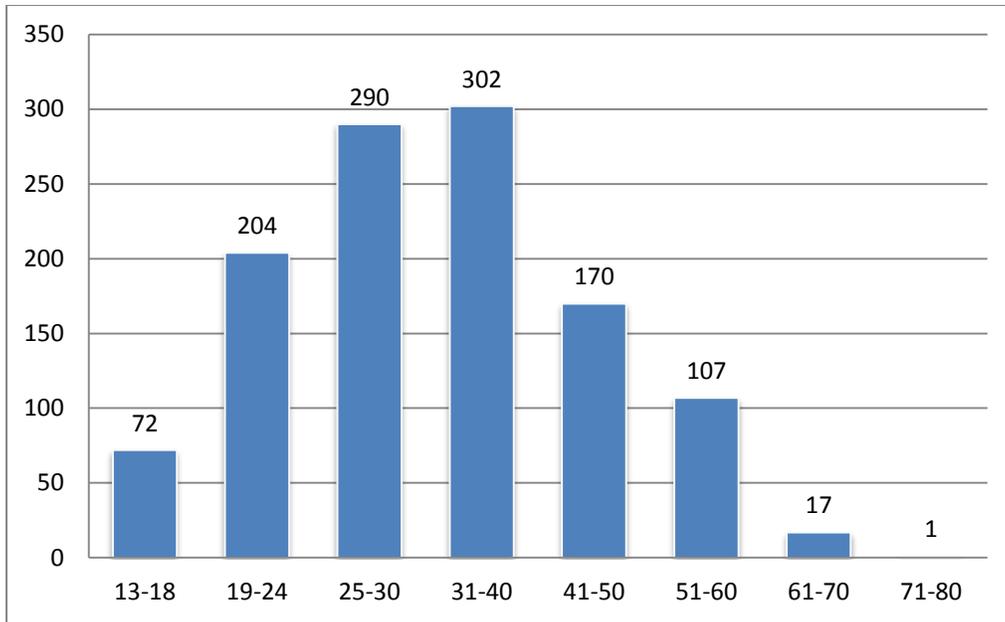
Type of Treatment Client Referred to:

Detoxification	211
Inpatient Rehabilitation	67
Dual Diagnosis Inpatient Rehab.	6
Halfway House	2
Outpatient Treatment	794
Methadone Maintenance	0
Intensive Outpatient Treatment	0
Partial Hospitalization	0
Intervention Group (Education)	19
No Treatment	64

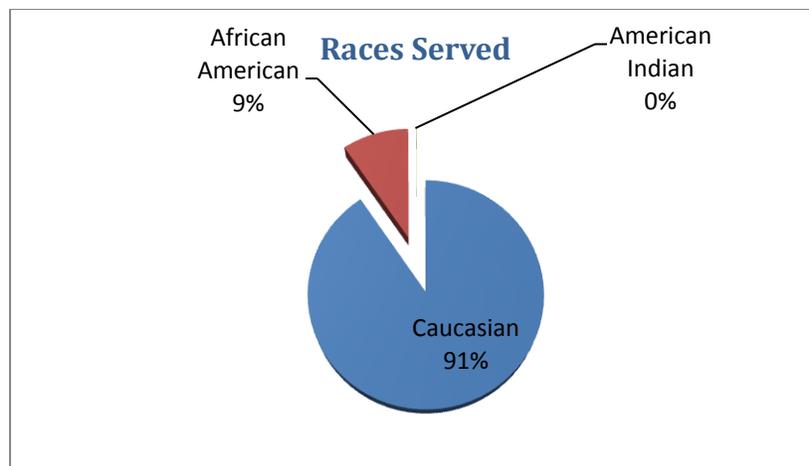
Type of Referral Source:

DUI Unit	325 (28%)
Self	287 (25%)
Probation or Parole	246 (21%)
CYS	105 (9%)
Courts/ Judge/ Attorney	54 (5%)
Outpatient Providers	46 (4%)
Jail	42 (4%)
Juvenile Placement Facility / Schools	25 (2%)
Hospital	19 (2%)
Family	7 (.1%)
CRCSI	7 (.1%)

Ages Served



Races Served



Treatment Unit:

The mission statement of FCDAC commission is “enhancing our community's quality of life by promoting addiction free living.” The treatment staff at FCDAC makes every effort to uphold this mission statement by translating its words into practice. Below describes the multiple ways in which the treatment staff at FCDAC has made a difference on both personal and community levels by providing effective treatment.

The treatment staff at FCDAC consists of 8 counselors who each have a unique and vast educational and occupational history. Three of the counselors in the treatment unit are licensed professional counselors, and two additional counselors are currently seeking licensure. Some counselors have also earned and maintain professional certifications, including addictions counselors, co-occurring counseling, and compulsive gambling counseling. It is with these credentials that the treatment unit remains aware of evidence-based treatment approaches to best treat each client. Though each counselor is responsible for providing the treatment for each of his or her clients, the treatment staff at FCDAC often utilizes a team-approach in developing the most clinically-appropriate treatment intervention for each client. This team approach affords each client the ability to benefit from each counselor’s expertise and insight through the treatment that is provided at FCDAC.

The treatment staff at FCDAC understands that each client seeking services needs unique and tailored services to accommodate the variety of demands that each client has in his or her life. Treatment appears to be far more effective in the client seeking services is able to coordinate treatment appointments into their already busy daily routine. The treatment staff at FCDAC strives to offer accessible services that accommodate the needs of each client who seeks services. This philosophy affords the client the opportunity to rehabilitate the many areas of his or her life that were affected by drug use, which can promote long-term and holistic recovery.

There are many barriers that may inhibit some individuals from seeking treatment. These barriers often include feelings of shame, anger, fear of judgment, and a number of misconceptions about the experience of treatment. Though addiction was once viewed as a sign of a moral weakness, the treatment staff at FCDAC strives to endorse the medical model and to celebrate the bravery and strength in each client. It is the objective of the treatment staff at FCDAC to assist each client in overcoming those barriers in an effort to expose each client to the services he or she may need, while empowering each client in his or her choices.

The treatment team offers a number of services that are designed to meet each client's treatment needs based on a careful assessment and conceptualization of the client's needs. Each service is designed to promote structure and support for the client in an effort to increase the strengths that he or she may need to maintain long-term recovery. These services include individual, group, family counseling, and services for family members at the frequency decided by the client and counselor. In addition, the treatment team at FCDAC strives to collaborate with other community agencies in an effort to allocate all the support an individual may need for holistic recovery.

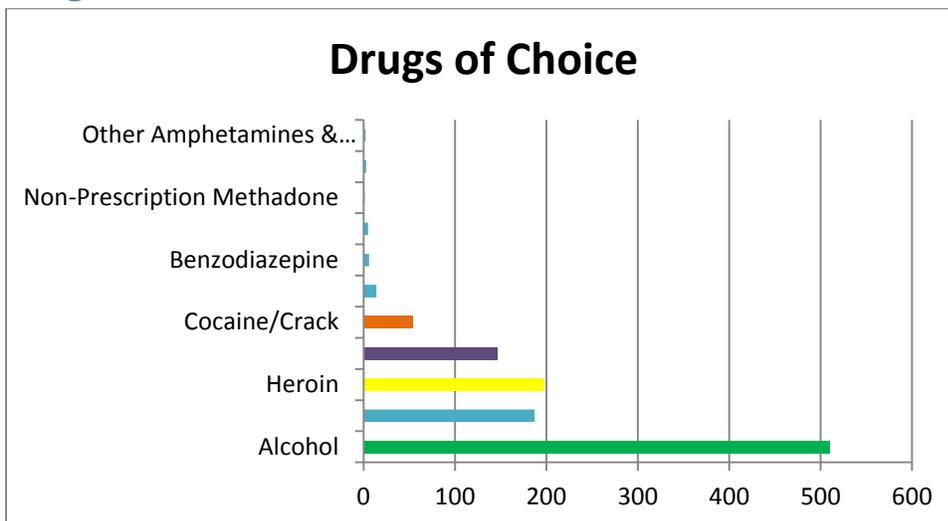
FCDAC provides Medication Assisted Treatment (MAT) for individuals who wish to participate in an outpatient detoxification program. This service is for individuals 18 years or older who suffer from opioid use disorders. FCDAC's treating physician prescribes low doses of Suboxone®, monitors each client's individual progress, and then slowly titrates the individual off of the medication in an effort to reduce withdrawal symptoms and increase psychosocial supports within a twenty week period. MAT is most effective when paired with psychotherapy in an effort to address the psychosocial factors that can contribute to or compromise long-term recovery.

In addition to outpatient detoxification program, many clients benefit from prescribed Vivitrol® injections or oral naltrexone. These medications are both FDA approved to help prevent opioid relapse. During the 2014-2015 fiscal year, a total of 208 injections were given to individuals. Like the outpatient detoxification program, counseling is paired with MAT in order to address the myriad of factors that can contribute to long-term recovery. This combination of treatment has been shown to be effective by scientific research and is supported and recommended by the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA), the National Institute on Drug Abuse (NIDA).

During the 2014 to 2015 fiscal year the treatment unit has provided outpatient services to 1,128 individuals. The following categories relate to referral sources, sex and race, drugs of choice, target populations, veterans served reasons for discharged numbers of individuals readmitted into outpatient and the total number of individuals who received Vivitrol injections and attended the Outpatient Detoxification Program.

Below is a listing of the most commonly stated drugs of choice for those seeing treatment services at FCDAC:

Drugs of Choice:

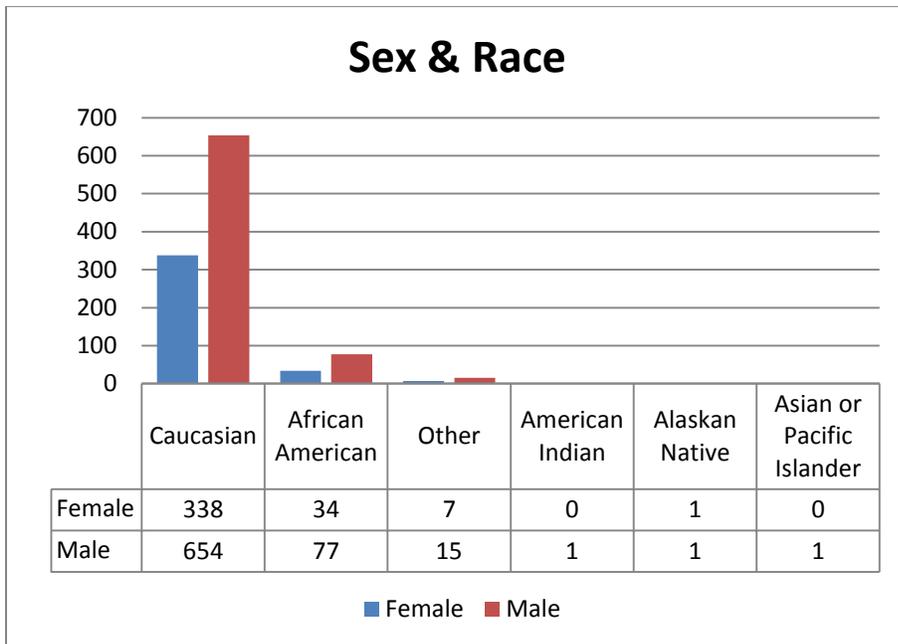


Individuals access treatment services from a wide array of sources. Below are the most common sources that provide referral to treatment:

Referral Sources:

- 430 - County Probation
- 221 - Self-referral
- 129 - Court (Judge)
- 109 - State Parole
- 64 - Other Non-Voluntary
- 55 - Community Service Agencies
- 33 - County Parole
- 24 – Other Voluntary
- 21 – D/A Abuse Care Provider
- 11 – Employer/EAP
- 9 - Hospital/Physician
- 5 - State Probation
- 5 – School
- 3 – Federal Probation
- 5 – Family/Friend
- 4 – Diversion Program
- 1 – Federal Parole

Race and Sex:



There are many reasons why an individual may be discharged from outpatient services. Listed below are the most common discharge reasons:

Reasons for Discharge :

466 – Non-compliance

413 – Completed treatment

109 – Completed treatment w/some drug use

47 – Left against facility advice

37 – Left with facility advice

17 – Referred to another D/A facility

8 - Relocation

5 – Jailed

5 – Referred to non D/A facility

3 - Administrative

2 - Medical

1 – Death

The following are a listing of the populations of individuals who presented for outpatient treatment services:

Target Population:

- 730 – Unknown
- 113 – Adult with other MH Disorders
- 118 – Pregnant woman or women w/children
- 95 – Intravenous drug user
- 29 – Adult with serious mental illness
- 23 – Adolescents w/co-occurring mental health
- 20 – Severe medical condition

Readmitted into Outpatient Treatment:

- 76- Individuals

Detoxification Program:

- 46 – Individuals

Veterans Served:

- 20 - Individuals

Fiscal Unit

The Fiscal Department of the Fayette County Drug & Alcohol Commission, Inc. is responsible for maintaining a complex computerized accounting system with three functional programs including an Outpatient Treatment Program. This system includes general ledger, accounts receivable, accounts payable, banking records, payroll records, inventory control records, cash receipts, cash disbursements, and other necessary subsidiary ledgers. The Fiscal Department is responsible for developing the annual agency budget and monitoring the expenses pursuant to the budget category.

The Fiscal Department prepared monthly reports of agency expenses for each budgetary unit for review by the Executive Director, Finance Committee of the Board of Directors, and the Supervisors of each unit. Additionally, the Fiscal Office prepares and remits semiannual financial reports on a cumulative basis to the Commonwealth of Pennsylvania, Department of Drug and Alcohol Programs. Fiscal Department continued to monitor the completion and transmission of various reports to DDAP on a monthly basis. All reports were submitted to DDAP in a timely manner. The annual audit report was completed by McClure & Wolfe with no exceptions noted.

The Fiscal Office continued monitoring Client Charts for Fiscal Accountability in the Quality Assurance System Plan and reported discrepancies to the Treatment Program Supervisor. There were 285 charts monitored during the Fiscal Year.

Expense Report for Fiscal Year 2014-2015

Salaries	\$1,390,161	52.28%
Benefits	416,532	15.67%
Staff Development	3,294	0.12%
Meeting and Conference Expenses	3,692	0.14%
Consultant	36,457	1.37%
Occupancy Expenses	128,294	4.83%
Insurance	25,757	0.97%
Communications	44,965	1.69%
Office Supplies	41,839	1.57%
Minor Equipment & Furniture	2,962	0.11%
Medical Supplies and Drugs	15	0.01%
Program Supplies	1,150	0.04%
Staff Travel	18,432	0.69%
Inpatient	256,942	9.66%
Outpatient	0	0.00%
Client Services	211,985	7.97%
Equipment Maintenance	41,505	1.56%
Equipment Leases	15,542	0.59%
Other	18,404	0.69%
Staff Travel-Non DDAP Reimbursement	618	0.02%
Office Equipment & Furniture	0	0.00%
Shelter	600	0.02%
Total	\$2,659,146	100.00%

Expenditures by Categories

Administration	\$234,044
Problem Gambling	\$57,955
Prevention	\$236,311
Communities That Care Grant	\$18,696
DUI	\$240,360
Victim Impact Panel Grant	\$49,633
Outpatient Treatment	\$1,233,820
Electronic Health Record Grant	\$24,940
Case Management	\$250,831
Inpatient/Outpatient	\$256,942
Shelter	\$600
Tobacco Grant	\$55,014
Total	\$2,659,146

Revenues by Source:

PA State Funds	\$462,717
Federal Prevention Block Grant	\$133,656
Federal Treatment Block Grant	\$369,603
Problem Gambling Funds	\$57,955
State Gaming Funds	\$28,806
BHSI Funds	\$307,070
Act 152 Funds	\$86,175
Human Services Development Fund	\$20,100
DUI Client Fees	\$191,004
Other Third Party Fees	\$853,777
Communities That Care Grant	\$18,696
Victim Impact Panel Grant	\$49,633
Electronic Health Record Grant	\$24,940
Tobacco Grant	\$55,014
Total	\$2,659,146

The Fiscal Office maintained a system of personnel credentialing including training records and certifications of attendance, documentation of professional credentials, documentation required by the agency's policies and procedures, documentation required by the DDAP staffing regulations and requirements, and documentation required by the Bureau of Licensing for Drug and Alcohol facilities.

Fayette County Drug and Alcohol Commission, Inc. is governed by a volunteer board of directors. Members of the board of directors are representative of the community and are individuals who demonstrate experience, knowledge, or interest in serving the needs of substance abusing individuals.

EXECUTIVE BOARD MEMBERS

(as of June 30, 2014)

Officers

Edward Zelich, Chairperson	Sharon Crissman, Treasurer
Dr. Justine Blout, Vice-Chairperson	Amy Lizza, Secretary

Members

Dr. Angela Braun	Mike Rozgony
Garnet Crossland, Esq.	Lester Ward
Joseph D’Andrea	Dr. George Wilhelm
Richard Kasunic	Lance Winterhalter
Heath Randolph	

Fayette County Drug and Alcohol Commission, Inc. utilizes the services of a physician certified in addiction medicine to provide oversight of the medical aspects of FCDAC’s outpatient treatment services.

MEDICAL DIRECTOR

Dr. Robert Woolhandler

EXECUTIVE DIRECTOR

Jana L. Kyle

ADMINISTRATION

Melissa Ferris, Assistant Executive Director

Carl Casurole, Chief Fiscal Officer

Valarie Barnhart, Administrative Assistant

STAFF

(as of June 30, 2015)

Information Technology

Leonard Jacoby, *IT Generalist II*

Case Management

Jennifer Warrick, *Case Management Supervisor*

Kathryn Roebuck, *Case Management Specialist*

Rebecca Williams, *Case Management Specialist Trainee*

Treatment

Brian Reese, *Treatment Supervisor*

Joseph Augustine, *Treatment Specialist*

Angela Cramer, *Treatment Specialist*

Anna Korba, *Treatment Specialist*

Christie Mazza, *Treatment Specialist*

Angela Roll, *Treatment Specialist*

Elaine Stano, *Treatment Specialist*

Lynn Stone, *Treatment Specialist*

DUI

William Miller, *DUI/Prevention Supervisor*

Charles Wortman, *Prevention Specialist*

Prevention

Erica Usher, *Prevention Supervisor*

Matthew Dean, *Prevention Specialist*

Melissa Reese, *Prevention Specialist*

Kelly Reshenberg, *Prevention Specialist*

Clerical

Kathleen Crayton, *DUI Unit*

Melissa Dubovich, *Treatment Unit*

Nanette Guittap, *Fiscal Dept.*

Robin Henderson, *Treatment Unit*

Rebecca May, *Case Management Unit*

Janet Oberlechner, *Billing Dept.*

Linda Rable, *Treatment Unit*

Anita Stark, *Treatment Unit*

Lois Wilson, *Treatment Unit*

Brenda Wyne, *Treatment Unit*

CONTACT INFORMATION:

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