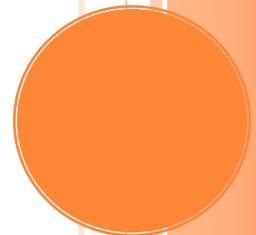


FAYETTE COUNTY DRUG
AND ALCOHOL
COMMISSION, INC.

Annual Report for Fiscal Year 2016-2017



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.

Fayette County Drug and Alcohol Commission, Inc.

Annual Report for Fiscal Year 2016-2017

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. It is unprecedented in the number of lives that are being lost and families destroyed due to the opioid/heroin epidemic. Any addiction can destroy the person who suffers from it, as well as those around them. However, what is different about this addiction is the misuse of opioids stops a person from breathing and without intervention, can cause death. As counter intuitive as it may seem, the risk of death is not enough to deter use. As one of the mechanisms to fight this local epidemic, FCDAC and the Fayette County District Attorney's Office procured funding from the Pennsylvania District Attorney's Association to bring seven medication collection boxes into Fayette County. These collection sites are located at police departments in Brownsville, Connellsville, Masontown, Perryopolis, Redstone, Uniontown as well as within Uniontown Hospital.

Additionally, during this fiscal year, The Fayette County Opioid Overdose Task Force was established by Fayette County Drug and Alcohol Commission, Inc, and Fayette County's District Attorney, Rich Bower, to address this growing public health crisis related to opioid overdoses. In the 2016 calendar year, Fayette County

reported 60 fatal overdoses, most of which can be attributed to opioids, including fentanyl and heroin. The number of overdose deaths increased 46% from 2015 to 2016. In order to comprehensively and effectively address this problem, the Fayette County Opioid Overdose Task Force was established. The specific focus of this coalition is to begin raising awareness throughout the county and reducing stigma and overdose deaths. This coalition will work to bridge public health and public safety in order to effectively engage stakeholders, utilize resources, and reduce overdose death and stigma. In May 2017, FCDAC hosted a town hall meeting to educate the community about addiction, opioid use, treatment and use of naloxone. There were 81 people in attendance.

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 2016-2017 fiscal year, FCDAC provided 48 hours of approved trainings directly related to substance abuse/use/misuse issues. These trainings covered such topics as Working with Difficult People, Opiate Abuse/Addiction, Cultural Competency, Behavioral Health and the LGBTQI Client, Mindfulness and Stress Reduction, Forensics and Addiction, Body Language and Family Recovery in Addiction.

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, other drug, and gambling (ATOD&G) prevention services for Fayette County. This broad task is carried out by four qualified staff members, each with at least eight years of experience in the drug and alcohol prevention field and overseen by a supervisor with over thirteen years in the field. The field of ATOD&G prevention focuses on employing different strategies to impact the use, misuse, and abuse of ATOD as well as preventing problem gambling. The methods Prevention Specialists use to tackle this task are many, including educating and providing information, bringing awareness to ATOD&G 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 are listed below.

The use of evidence based curriculum has continued to be a priority. During this fiscal year, staff members were given the opportunity to implement Botvin LifeSkills, a program for middle school students designed to prevent adolescent tobacco, alcohol and marijuana use, and violence. (During this fiscal year, 371 students in the 6th grade and 7th grades participated in the eighteen lesson program.)

Staff members also implemented a gambling prevention curriculum in several middle school classrooms. (During this fiscal year, 79 students participated in either a four lesson or six lesson program.) Eleven kindergarten and elementary classes participated in the Why Animals Don't Smoke (WADS) program which included nearly over 225 youth. Staff members also targeted senior citizens during the 2016-2017 fiscal year, providing presentations to 177 senior citizens at three senior centers on the topic of alcohol, prescription drugs and the use of medication collection boxes within the county.

During this fiscal year, Prevention Specialists once again used the evidence based tobacco cessation program, Freedom from Smoking, which is comprised of eight sessions. The classes were offered at FCDAC, Inc., Uniontown YMCA, Wesley Health Center, Another Way (men's halfway house) and at Mt. Macrina. Staff members also facilitated the Underage Curriculum for Adolescent Needs (UCAN) with an ongoing schedule of classes. Two classes were held during the fiscal year, with the majority of the youth being referred to the program from local magistrates due to some type of violation. Staff members also presented information to the staff at various organizations to increase their knowledge about ATOD. Organizations included Albert Gallatin School District, CYS, Laurel Highlands School District, Adelphoi Alternative School and to several of our local elected legislators.

Staff members also presented to CYS foster parents on prescription drug abuse. In an effort to help educate the local community about the laws related to gambling, staff members coordinated and hosted two workshops on the Small Games of

Chance Act, inviting local organizations that applied for that license. There were 26 total attendees.

This year, FCDAC, Inc. continued to work with 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, as well as build the CTC coalition with Community Board members and Workgroups. During this fiscal year, the CTC coalition was able to check off several tasks that needed completing in order to move into the next phases of the model.

The Prevention Unit works to bring awareness of ATOD&G topics by hosting events for multiple awareness days throughout the year, as well as coordinating awareness campaigns. Activities held are listed below, along with 2016-2017 highlights:

- *Red Ribbon Week (RRW) (October 23rd-31st, 2016)*: 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. Over 35,390 red ribbons were distributed to all Fayette County schools for students and staff to wear during the week, as well as various entities throughout the county. 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. Staff members worked with local businesses to offer a "Free with Ribbon" promotion to local youth. Wearing your Red Ribbon to any of the seventeen participating businesses throughout the county earned some type of treat (a free ice cream cone, a free order of French fries, etc.).
- *Great American Smoke Out (GASO) (November 17th, 2016)*: 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 and an informational table was hosted in the lobby where individuals were asked to give up tobacco for the day. Individuals that worked for an agency within the FCHCA that chose to participate in the day's events were entered into a drawing for a free turkey. In conjunction with this activity, staff members coordinated a food drive among all FCHCA tenants, where each agency was able to select one client/consumer to receive items for a complete meal for Thanksgiving. Staff members also provided information at the Uniontown YMCA and Dr. Douglas Smile, a local dentist.
- *Hand Over the Reins (winter holiday season 2016)*: 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 25th- 18th, 2017)*: Information on smokeless tobacco was distributed during this awareness week, and the Great American Spit Out (GASpO) was observed on February 18th, 2016. 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. Staff members also worked with the Fayette County Commissioners to have a proclamation regarding the week issued and shared information with local legislators.
- *Kick Butts Day (March 15th, 2017)*: Signage for this awareness day was distributed for the 2017 event and an informational table was hosted in the Fayette County Health Center lobby. A banner regarding the day was also hung outside for the entire week. Fayette County Commissioners prepared a proclamation for this date.
- *Problem Gambling Awareness Month (March 2017)*: Staff members distributed posters throughout the Fayette County Health Center to observe the month and hosted an informational table in the lobby. Information was also emailed to agency staff members. Training on the topic of Problem Gambling was held at Penn State, Fayette for local professionals and college students, with 19 people in attendance.

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 thirty SAP Teams across six school districts during the 2016-2017 fiscal year. Liaisons participated in 340 meetings during the school year and screened 27 students for potential D&A or mental health concerns. They also participated in 87 meetings with parents regarding the screening process.

FCDAC prevention staff worked with several local entities to educate them on the hazards of second hand smoke on young children. Through their efforts, Young Lungs at Play (YLAP) policies were adopted and implemented in all parks in Uniontown that are owned by the Redevelopment Authority of the City of Uniontown, as well as YLAP policies being adopted in Washington Township.

Prevention staff worked with several local community organizations and healthcare providers to educate them on FAX to QUIT, which is a means to refer patients for free tobacco cessation through the PA Quitline. The following organizations participated in trainings for this program:

- Pitts Endo/Diabetes Center
- Nurse Family Partnership
- Penn State Eberly Campus
- PROSPER
- CYS
- Uniontown Hospital
- East End United Community Center
- Fayette County Drug and Alcohol Commission

DRIVING UNDER THE INFLUENCE (DUI)

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 2016-2017 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.
- Below is a chart the displays the number of attendees that have been scheduled to attend sessions, as well as the number who have successfully completed the program:

<i>Service</i>	<i># Enrolled</i>	<i># Completed</i>	<i>% Completed</i>
AHSS Day Class	362	201	55.5%
AHSS Evening Class	265	131	49.4%
Multiple Offender Program	116	50	43.1%
Intervention Program	38	27	71.1%
Victim Impact Panel Program	320	248	77.5%

Total CRNs Completed : 609 (7.3% decrease over the previous fiscal year)

<u>Sex of Offenders:</u> <ul style="list-style-type: none"> 72.2%- Male 27.8%- Female 	Repeat Offenders- 20.4% Average Reported Income: \$28,059
<u>Age at Violation:</u> <ul style="list-style-type: none"> 0.3% Under 18 8.4% 18- 20yrs 14.9% 21-24yrs 14.6% 25-29yrs 11.7% 30-34yrs 22.0% 35-44yrs 17.7% 45-54yrs 10.3% 55 + yrs Average Age = 37	<u>Marital Status:</u> <ul style="list-style-type: none"> 43.7% Single 16.4% Married 21.0% Divorced 2.5% Widowed 4.8% Separated 11.7% Live- In
<u>Education:</u> <ul style="list-style-type: none"> 57.6% - High School Graduate 18.9% - Partial College 6.7% - Undergraduate 15.9% - 12th grade and below 	<u>Employment:</u> <ul style="list-style-type: none"> 63.5% - Employed 36.5% - Unemployed 12.5% - Disabled 2.5% - Retired
<u>Reason for Traffic Stop:</u> <ul style="list-style-type: none"> 18.9% Vehicle Violation 17.2% Weaving/Careless Driving 22.2% Moving Violation* 30.0% Crash * 11.7% Other 	<u>Reported Day/Time of Arrest:</u> <ul style="list-style-type: none"> 62.1% Arrested on Weekend (Fri,Sat,Sun) * 38.3% 5pm to Midnight 43.3% Midnight to 4am
<u>BAC:</u> <ul style="list-style-type: none"> 18.4% 0.20% and above 117.1% 0.16% to 0.19% 23.2% 0.10% to 0.15% 5.3% 0.08% to .09% 1.0% Below .08 	<u>Alcohol/Illicit Drug Profile:</u> <ul style="list-style-type: none"> 55.3% Severe Problem Drinker** 29.6% Social Drinker* 38.1% Controlled Substance** (Illicit/Non-prescribed) <ul style="list-style-type: none"> 30.2% Marijuana Use**

<ul style="list-style-type: none"> • 10.7% Refusals • 23.3% Drug Related • 1.1% Unknown <p>Average BAC - .17 (rounded off)</p>	<ul style="list-style-type: none"> • 8.0% Cocaine Use • 8.5% Narcotics Use** • 4.8% Depressant Use (Ilicit/Non-prescribed) • 33.5% Prescribed Controlled Substance Use** <ul style="list-style-type: none"> • 14.9% Narcotics Use • 9.2% Anti -Depressant Use
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DUI Victim Impact Panels which are court ordered for first-time ARD DUI offenders continue to be a successful and valuable asset to the Fayette County DUI Program. The panels that we host are modeled after the MADD and NHTSA(National Highway Traffic Safety Admin). We have held a total of seven sessions for Fiscal Year 2016-17, with a total number of 320 enrolled and 248 completing the panel session. This relates to a 77.5% show/completion rate. The evaluations that are required to be completed by the attendees continue to share valuable information. The first-time DUI offenders continually comment on the positive effect the message in which the speakers had on them. From the Victim Impact Panel, held on May 22, 2017, one of the participants stated: *“It is important to know every action you make has a consequence. I have learned my lesson and I am thankful I ended up arrested instead of something worse. Such as injuring myself, someone else, killing someone else or even myself.”*

The DUI Unit instructed 10 AM/morning DUI School sessions, as well as 7 PM/evening sessions of the 12 ½ hour curriculum. There were also a total of four Multiple Offender sessions instructed. There were also a total of four Intervention sessions completed. These educational pieces were facilitated with two full-time staff members.

The continuous goal of the DUI Unit is to attempt to increase the “Show Rate” of CRN evaluation appointments previously at a show rate of 58% for fiscal year 2015-16. For the fiscal year 2016-2017, the overall ‘show rate’ has been 58.8%. The DUI Unit makes many efforts to effectively reach clients at the earliest point after the DUI arrest/incident.

The DUI Unit continues to strengthen relationships and effective communication within the Fayette County Court system. The open line of communication and information helps to ensure the sentencing procedures are upheld for processing criminal cases through the court efficiently. This has proven effective to be actively involved in the process from start to finish.

Central Magisterial District Court has proven to be effective for scheduling DUI offenders for their CRN evaluation. This has increased the “show rate” for CRN evaluations. This approach is extremely effective with the DUI offender, as offering a genuine concern for helping them be successful in completion of DUI Program requirements.

The attendance of a DUI Program representative at the Central Court Preliminary hearings for PSP DUI arrests has been successful in numerous aspects. This interaction is typically the first one on one contact that a DUI offender has regarding information about the Fayette County DUI Program. CRN evaluations are scheduled as well as D&A Assessments for those that knowingly need to have one prior to the CRN making a recommendation.

CASE MANAGEMENT

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, overdose survivors and veterans 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.

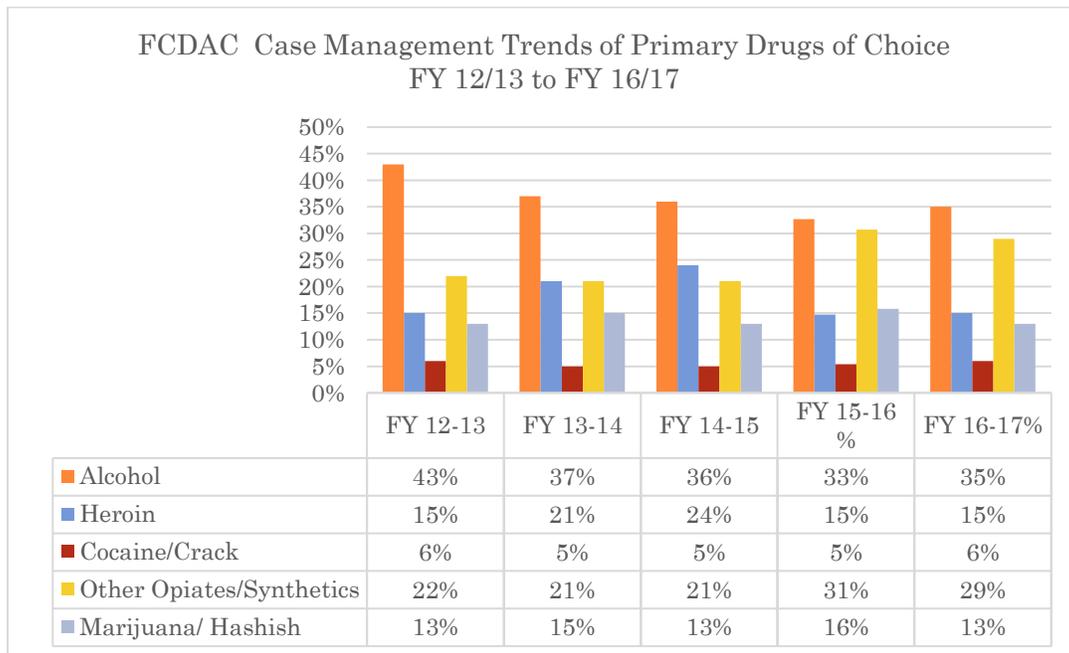
The Case management unit at FCDAC collaborated and coordinated services with many local entities such as Fayette County Prison officials as well as Fayette County probation Officers to establish a set prison assessment day in which referrals are made through probation contact and clients are assessed to see if they meet criteria for release to inpatient drug and alcohol facility.

The Case Management unit assessed 1,436 clients in the 2016-2017 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. Clients 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.

During fiscal year 2016 -2017, the case management unit at Fayette County Drug and Alcohol Commission assessed a total of 1436 clients. Of that number, 940 or 65.5% were male and 496 or 34.5% were female. In comparing the information from the previous fiscal year, the Case Management unit assessed over 9% more clients. The most commonly reported primary drugs of choice are alcohol, heroin, opiates (prescription drugs), marijuana and cocaine. For those persons seeking treatment services, these have been the top reported drugs of choice for the past three years. The following graph displays the primary abused substances as reported by those clients receiving assessments for the past five fiscal years:



Based on the above information, some of the following trends may be garnered in relation to the comparison of drugs of choice within designated fiscal years:

- Even though alcohol remains the most commonly reported abused substance, there has been an overall 8% decrease since fiscal year 2012/2013, even though there were slight fluctuations within this period.
- The reported abuse of heroin had steadily risen until fiscal year 2014/2015 and then decreased 9% the following year.
- The “other opiates/synthetics category of drugs has appeared to reach its highest level thus far in fiscal year 2015/2016 with almost a third of the persons presenting with issues with non-heroin opioid use.

- Collectively, the use of heroin and other opiates (including prescription drug abuse) has become the most commonly reported drugs of choice. This has surpassed the percentage of those seeking services for alcohol abuse. Alcohol decreased from 43% in FY 2012/13 to 35% while collectively, heroin/opiates went from 37% and increased to 44%.

The ratio of male versus female persons that has received case management assessments, the following trends have emerged:

- The percentage ratio of male versus female has basically remained the same for the past few years. In fiscal years 2012/13 and 2013/14, 68% of persons presenting for services were male, and 32% were female. There was a slight change in fiscal year 2014/15 in which 65% of those seeking treatment were male, and a small rise to 35% being female. Fiscal year 2015/16 showed 64% were male and 36% were female and there was a 2% change for fiscal year 2016/17 in that those seeking treatment services were 65.5% males and 34.5% were females.

Based on case management data from FCDAC's internal data collection system, some of the following trends appeared in relation to the male population:

- During the two fiscal years from 2015/16 and 2016/17, there was a 4.7% increase in the percentage of males seeking services with their primary drug of choice being Suboxone/Subutex, while the percentage of males seeking services due to heroin/opiate use remained unchanged.
- Alcohol remained the primary abused substance for men, with a 2% increase from fiscal year 2015/16 to fiscal year 2016/17.
- The reported abuse of crack/cocaine has remained the same, with an average of 5% of the men reporting this primary drug of choice.
- There has been a decrease noted in the percentage of males reporting marijuana as their primary drug of choice. It has changed from 17% of males reporting in FY 2015/16, decreasing to 13% in FY 2016/17.

Regarding the female population that has received case management assessments, the following trends have emerged:

- Comparing the trends within the past two fiscal years, there has been a documented increase in the reported abuse of heroin, crack/cocaine, and Suboxone/Subutex (not as prescribed) among females. For females, reported heroin use/abuse increased from 13% in FY 2015/16 to 17% in FY 2016/17. During the same time period, crack/cocaine went from 6% to 7%.
- Alcohol remains the mostly commonly reported drug of choice amongst the largest percentage of females seeking case management services, but has shown a slight decrease from 24.5% in FY 2015/16 to 23% in FY 2016/17.

- There has been a 4% decrease in the percentage of females reporting opiate use, which decreased from 24% in FY 2015/16 to 18% in FY 2016/17. Comparatively, the percentage of men reporting opiate use remained the same over the past two fiscal years.

Type of Treatment Client Referred to:

Detoxification	197
Inpatient Rehabilitation	94
Dual Diagnosis Inpatient Rehab.	0
Halfway House	0
Outpatient Treatment	987
Methadone Maintenance	6
Intensive Outpatient Treatment	0
Partial Hospitalization	0
Intervention Group (Education)	16
No Treatment	136

Type of Referral Source:

DUI Unit	396
Self	272
Probation or Parole	282
CYS	108
Courts/ Judge/ Attorney	59
Outpatient Providers	124
Jail	66
Juvenile Placement Facility / Schools	18
Hospital	28
Family	29
CRCSI	2
Physician	31
Clergy/Religious Organization	1
Employer/EAP	9
Child Custody	5
OVR	2

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 10 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 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.

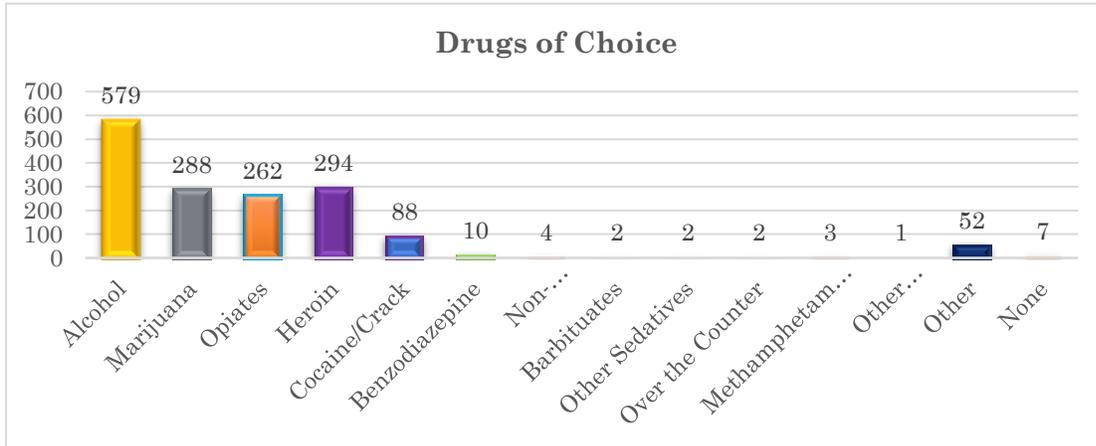
FCDAC provides Medication Assisted Treatment (MAT) for individuals who wish to participate in an outpatient detoxification program. This service is for individuals 18 years or older who suffer from opioid use disorders. FCDAC's treating physician prescribes low doses of Suboxone®, monitors each client's 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 FCDAC's 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 2016-2017 fiscal year, 51 clients participated in FCDAC's buprenorphine detoxification program and 43% were successfully discharged. Within the same year, 104 clients participated in medication assisted treatment using Vivitrol® (totaling 526 injections) and 65% were successfully discharged. 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 2016 to 2017 fiscal year, the treatment unit has provided outpatient services to 1,598 individuals, which is a 27% increase from the previous fiscal year. 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:

Primary Drugs of Choice:

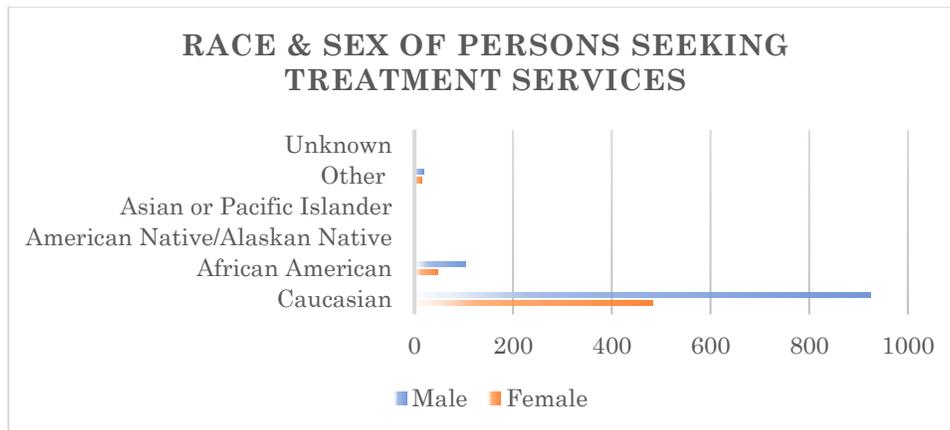


Of the above information, the number of persons accessing treatment due to alcohol was 4% decrease from the previous fiscal year. Of the remaining four most referenced drug of choice, there was a 17% increase in marijuana and a 6% increase in cocaine/crack while decreases were shown in heroin (18%) and opiates remained at 16% compared to the last fiscal year.

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

Referral Source	# of Persons
Community Service Agencies	94
Family/Friend	2
Clergy/Religious Organization	2
Courts/Criminal Justice	846
D/A Abuse Care Provider	119
Diversion Program	1
Employer/EAP	15
Hospital/Physician	33
Other Non-Voluntary	60
Other Voluntary	38
School/SAP	4
Self-Referral	379
Unknown	5

Race and Sex of Clients Seeking Treatment Services:



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

Reasons for Discharge :

Discharge Reason	# of Persons
Completed Treatment	418
Completed Treatment – Referred to a Lower Level of Care	1
Terminated by Facility	415
Relocation	5
Incarcerated	4
Referred to Another D&A Facility	16
Medical	16
Referred to Non- D&A Facility	2
Death	9
Other	9

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

Populations Served	# of Persons
Injection Drug Users	195
Pregnant Women	106
Veterans	24
Medication Assisted Treatment	155

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 prepares 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.

The following are the accomplishments for the Fiscal department during the 2016-2017 fiscal year:

- The annual audit report was completed by McClure & Wolfe with no exceptions noted.
- 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.
- Fiscal Office continued monitoring Client Charts for Fiscal Accountability in the Quality Assurance System Plan and reported discrepancies to the Treatment Supervisor.
- 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 as well as DDAP's Licensing Division.
- Maintained the use of a software program for the tracking of Prevention Specialist's time for accountability to all funding sources affiliated with the Prevention Unit.

EXPENSE REPORT for Fiscal Year 2016-2017

Salaries	\$1,520,906	52.75%
Benefits	429,758	14.90%
Staff Development	11,646	0.40%
Meeting and Conference Expenses	7,984	0.28%
Consultant	43,120	1.50%
Occupancy Expenses	162,601	5.64%
Insurance	40,544	1.41%
Communications	67,823	2.35%
Office Supplies	26,238	0.91%
Medical Supplies and Drugs	28,372	0.99%
Program Supplies	29,008	1.00 %
Staff Travel	20,419	0.71%
Inpatient	178,153	6.18%
Outpatient	0	0.00%
Client Services	249,253	8.64%
Equipment Maintenance	25,968	0.90%
Equipment Leases	14,712	0.51%
Other	26,054	0.90%
Staff Travel-Non BDAP Reimb.	348	0.01%
Shelter	600	0.02%
Total	\$2,773,465	100.00%

Expenditures by Categories

Administration	\$316,035
Problem Gambling	\$90,302
Prevention	\$187,586
Communities That Care Grant	\$28,121
DUI	\$313,370
Outpatient Treatment	\$1,416,112
Case Management	\$288,563
Inpatient/Outpatient	\$178,153
Shelter	\$600
Tobacco Grant	\$25,109
Active Shooter Grant	\$6,520
Project Toward No Drug Abuse Grant	\$33,036
Total	\$2,883,507

Revenues by Source

PA State Funds	\$442,315
Federal Prevention Block Grant	\$137,934
Federal Treatment Block Grant	\$391,017
Problem Gambling Funds	\$90,302
State Gaming Funds	\$28,806
BHSI Funds	\$307,070
Act 152 Funds	\$86,175
Human Services Development Fund	\$20,100
DUI Client Fees	\$290,870
Other Third Party Fees	\$886,508
Communities That Care Grant	\$28,121
Project Toward No Drug Abuse Grant	\$33,036
Restrictive Intermediate Punishment Grant	\$37,317
Tobacco Grant	\$47,192
Strategic Prevention Framework – Rx	\$7,104
Active Shooter Grant	\$6,520
Community Services Student Assistance Program	\$43,120
Total	\$2,883,507

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, 2017)

Officers

Vincent Weaver, Chairperson

Heath Randolph, Treasurer

Walt Lizza, Vice-Chairperson

Joseph D'Andrea, Secretary

Members

Joel Gish

Shujuane Martin

Richard Kasunic, II

Casey Nicholson

Ed Kolencik

Mike Rozgony

Shannon Kossar

Edward Zelich

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*

Leonard Jacoby, *IT Generalist II*

FCDAC STAFF

(as of June 30, 2016)

Case Management

Rebecca Britt, *Case Management Specialist*

Matthew Dean, *Case Management Specialist*

Teri Martin, *Case Management Specialist*
Trainee

Kathryn Roebuck, *Case Management*
Specialist

Clerical

Andrea Bliss, *Treatment Unit*

Kathleen Crayton, *DUI Unit*

Melissa Dubovich, *Case Management Unit*

Nanette Guittap, *Fiscal Dept.*

Robin Henderson, *Treatment Unit*

Janet Oberlechner, *Billing Dept.*

Linda Rable, *Treatment Unit*

Anita Stark, *Treatment Unit*

Lois Wilson, *Treatment Unit*

Brenda Wyne, *Treatment Unit*

Treatment

Brian Reese, *Treatment Supervisor*

Joseph Augustine, *Treatment Specialist*

Alexis Caromano, *Treatment Specialist*

Ann Hartman, *Treatment Specialist*

LaMar Hill, *Treatment Specialist*

Anna Korba, *Treatment Specialist*

Elizabeth Porterfield, *Treatment Specialist*

Angela Roll, *Treatment Specialist*

Elaine Stano, *Treatment Specialist*

Lynn Stone, *Treatment Specialist*

Angela Tiech, *Treatment Specialist*

DUI

William Miller, *DUI/Prevention Supervisor*

Charles Wortman, *Prevention Specialist*

Prevention

Erica Usher, *Prevention Supervisor*

Melissa Reese, *Prevention Specialist*

Kelly Reshenberg, *Prevention Specialist*

Lee Winterhalter, *Prevention Specialist*

Lorraine Yasenosky, *Prevention Specialist*

CONTACT INFORMATION:

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