



Community Guidance Center

Drug & Alcohol Department
Annual Report
Fiscal Year 2020 - 2021
(July 1, 2020-June 30, 2021)



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EXECUTIVE MANAGEMENT AND BOARD OF DIRECTORS

Table 1

Executive Management Team

Name	Title
Darrin Mikula, CPA, MBA, FHFMA	Chief Executive Officer
Shawn Brisbane, MA	Chief Operations Officer
Reece Rahman, Psy.D.	Chief Clinical Officer
Brittany Toman	Chief Financial Officer
Ariel McKnight	Chief Quality Officer
Kerry Ray	Human Resources Director

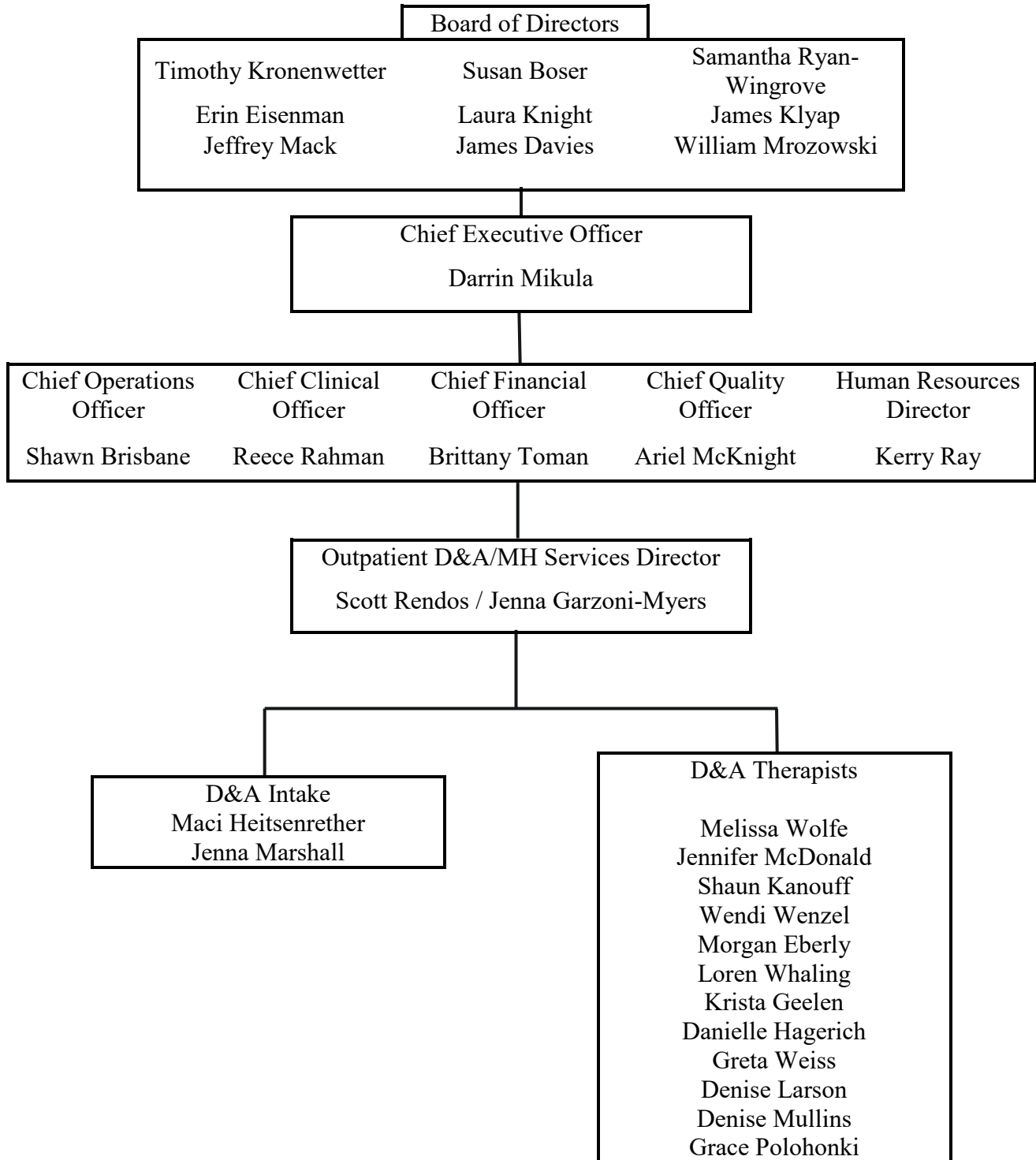
Table 2

Board of Directors

Name	Title
Timothy Kronenwetter	Chairperson
William Mrozowski	Vice Chairperson
Jeffrey Mack	Treasurer
James Klyap	Secretary
Susan Boser	Member
James Davies	Member
Laura Knight	Member
Samantha Ryan Wingrove	Member
Erin Eisenman	Member

Figure 1

Organizational Leadership Chart: Drug and Alcohol Department



OVERVIEW OF CGC DRUG AND ALCOHOL DEPARTMENT

Community Guidance Center (CGC) is a private, non-profit 501(c)(3) corporation operating an Outpatient Drug and Alcohol Program (D&A). It is the Board of Directors' policy that D&A primarily serves residents of Clearfield, Jefferson, and Cambria Counties. However, consumers from other counties can also be helped by CGC if capacity allows. CGC is contracted with multiple Single County Authorities (SCA) to provide level-of-care assessments, drug and alcohol assessments, and outpatient therapy.

Referrals for D&A will be accepted from any source. There are currently no limitations for taking consumers seeking drug and alcohol treatment. County Probation Offices and the Pennsylvania State Boards of Probation and Parole are CGC's primary D&A referral sources (e.g., a requirement for individuals to meet Act 122 standards to have their driver's license reinstated after a DUI include drug and alcohol evaluation and treatment).

The D&A program serves individuals of any age with clinically identified or observed substance abuse tendencies, patterns, or problems. Along with their significant others and close family members who could benefit from outpatient therapy, these individuals are our primary consumers in this particular program. Furthermore, accepted into the treatment program are individuals who are court-ordered to undergo treatment for drug and alcohol services. CGC has identified the following populations as the highest priority for D&A: pregnant intravenous drug users, pregnant women, intravenous drug users, women with children, consumers with Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome (HIV/AIDS), discharges from more intensive treatment D&A programs, MISA patients, persons with co-existing medical conditions, adolescents, and veterans.

CGC D&A OFFICE LOCATIONS AND HOURS

The D&A program operates out of three office locations located in DuBois, Clearfield, and Northern Cambria, Pennsylvania. Each office is open Monday through Friday and closed on Saturday and Sunday. All CGC office locations are closed during most national holidays.

Table 3

CGC Drug and Alcohol Program Office Locations and Hours of Operation

CGC Office	Address	Phone Number	Hours
DuBois	490 Jeffers St DuBois, PA 15801	814-371-1100	Monday and Wednesday: 8 - 8 Tuesday and Thursday: 8 - 6 Friday: 8 - 5 Saturday and Sunday: Closed
Clearfield	600 Leonard St Clearfield, PA 16830	814-765-5337	Monday and Wednesday: 9-6 Tuesday: 9 - 7 Thursdays: 9-5 Friday: 10-5 Saturday and Sunday: Closed
Northern Cambria	4205 Crawford Ave Northern Cambria, PA 15714	814-420-8673	Monday: 11 - 7 Tuesday, Thursday and Friday: 9 - 5 Wednesday: 9 - 6 Saturday and Sunday: Closed

D&A PROGRAM DESCRIPTION

Community Guidance Center offers site-based outpatient drug and alcohol services in our Clearfield, DuBois, and Northern Cambria offices. These services include traditional outpatient therapy and intensive outpatient treatment.

The foundation of the D&A program predicated the belief that people can and do recover from the impacts of substance use. The program design instills hope and empowers consumers to identify valued community roles and gain the skills and resources needed to support sobriety. To this end, the program offers an array of services, including comprehensive evaluations, consultation, person-centered individualized treatment planning, individual, group, and family therapy, and individualized aftercare planning.

Treatment models utilized include Motivational Interviewing (MI), Dialectical Behavioral Therapy (DBT), Cognitive Behavioral Therapy (CBT), Rational Self Analysis (RSA), and Rational Emotive Behavioral Therapy (REBT).

PROGRAM PHILOSOPHY

Community Guidance Center's D&A outpatient philosophy is that each consumer benefits from individual treatment plans tailored to their specific needs. The ultimate goal for each consumer is to realize and experience a full and rewarding lifestyle without the use of substances. D&A sets firm, realistic expectations for consumers while emphasizing self-accountability as an integral component of effective recovery. The D&A program incorporates family involvement and multi-dimensional healing of the affected consumer to accomplish this.

PROGRAM ACCOMPLISHMENTS

CGC's D&A program experienced several significant changes and important accomplishments during the fiscal year that include the following:

- Management developed and implemented a new Intensive Outpatient Drug and Alcohol position.
- The Center successfully achieved the ASAM alignment requirements which directed individuals increase from 5 to 9 hours per week of treatment in IOP.
- Relationships were strengthened with our local Drug Courts in Jefferson County.
- The CGC D&A program is attracting Employee Assistance Program referrals from other employers/companies/organizations.
- During this year we began the CGC D&A credentialing process for drug and alcohol therapists in CADC. Shaun Kanouff received his CACD license.
- Our Medical Assisted Treatment group is up and running and generating momentum.
- The CGC D&A plans for a co-occurring disorder group, slated to roll out in 2022.
- CGC staff continue to attend and are active members of several community-based committees such as the Overdose Task Force, Heroin Task Force, Clearfield County Collaboration and Prevention Board, Jefferson County Collaboration and Prevention Board, and Drug Free Coalitions.

UPCOMING FISCAL YEAR (2021-2022) D&A TRAINING PLAN

As contemporary public health concerns over substance abuse evolve, so too does the D&A program at CGC. New research and treatment methods constantly provide new avenues for successful substance abuse treatment and recovery methodologies that counteract historically common conditions like

alcoholism as well as more recent epidemics such as the opioid crisis. The upcoming fiscal year includes training and expansion items to adapt to these conditions as follows:

- Utilize the newly created training tracking system to ensure all staff complete their required DDAP trainings within the required time frames throughout the 2021/2022 training year.
- Complete a secondary needs assessment with the assistance of the CGC Public Relations Department and community partners to determine the benefit of further expanding adolescent drug and alcohol services as CGC seeks to increase the adolescent population served through the D&A program. As adolescent populations and programs expand, trainings will be identified internally and externally to assist staff in meeting identified needs. This project will be completed throughout the 2021/2022 training year.
- Utilize the newly created training tracking system and partner with the Clearfield/Jefferson and Northern Cambria D&A Commissions to locate ASAM approved trainings to train all newly employed staff and ensure previously trained staff remain up to date on ASAM standards for implementation throughout the 2021/2022 training year.
- Complete a needs assessment and work with DDAP to review the need for additional training.
- Identify and implement additional trainings, both internal and external, to ensure the principles of BHARP and the Sanctuary Model® are upheld post-certification. This will be completed throughout the 2021/2022 fiscal year.
- CGC has recently obtained internal certified trainers in Crisis, Prevention and Intervention and CPR/First Aid as well as the implementation of the outcome measure DLA-20. CGC will utilize an internal training tracking system to ensure all appropriate staff are trained in the models and demonstrate proper implementation throughout the 2021/2022 fiscal year.
- CGC is engaged in the Heroin Task Force and Overdose Task Force within the community to better serve not only our consumers, but the community as a whole. Through these initiatives,

trainings and community projects will be identified to better combat Pennsylvania's rising opiate epidemic. This will occur throughout the 2021/2022 fiscal year.

D&A REVENUE AND EXPENSES

Funding and payment sources for D&A services at CGC include state and county-funded programs and resources such as Community Care Behavioral Health (CCBH, Clearfield County), Magellan Managed Care, Medical Assistance and Medicare, personal payments (self-pay), and the Single County Authority Drug and Alcohol (SCA D&A). Table 4 displays the results for revenue for the 2021 fiscal year compared to the 2020 fiscal year. CGC experienced a substantial decrease in its D&A revenue during the 2021 fiscal year. CCBH revenue decreased from \$290,014 to \$245,624 in correlation with decreased admissions from Clearfield County. This funding source accounts for 72% of department revenue. Medical Assistance and Medicare payments in 2021 were \$588 and \$1,684 in 2020. Self-pay dropped significantly from \$21,333 to \$4,907, a 76% decrease from the previous year. This decrease suggests consumers are paying more often with insurance or enrolling in state/county-funded programs. SCA D&A payments decreased significantly at a 51% drop from \$86,399 to \$42,170. Value Behavioral Health and commercial insurance payments also decreased from \$52,793 to \$38,482, a 27% drop for this particular source. This statistic suggests D&A consumers increasingly rely on state/county-funded resources for D&A treatment.

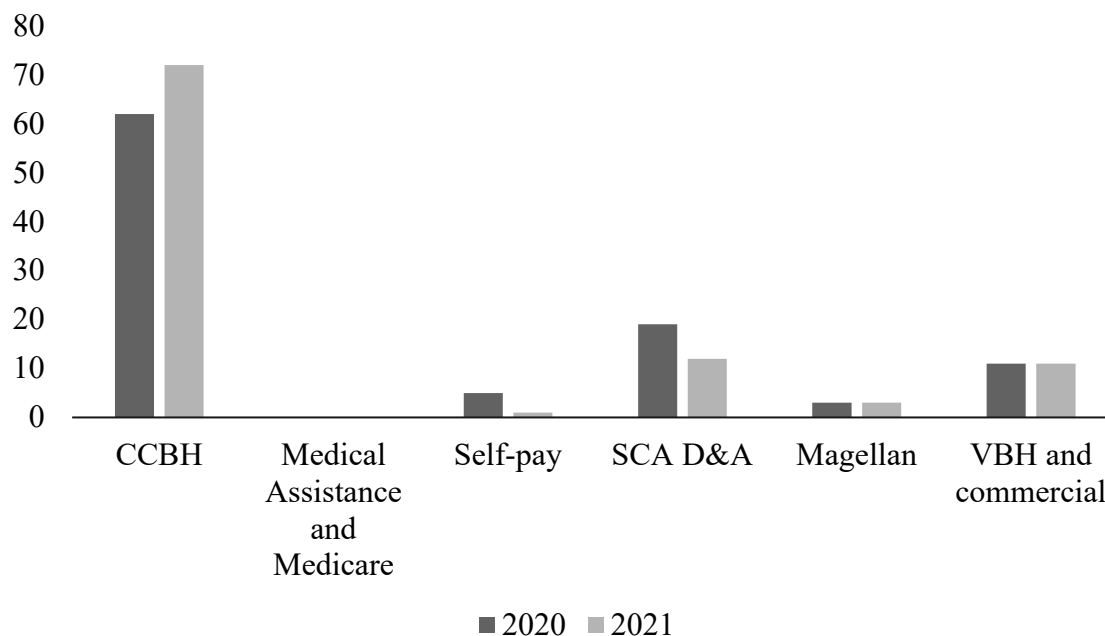
Table 4
Revenue and Payment Sources

	2020	2020%	2021	2021%
CCBH	290,014	62%	245,624	72%
Medical Assistance and Medicare	1,684	0%	588	0%
Self-Pay	21,333	5%	4,906	1%
SCA D&A	86,399	19%	42,170	12%
Magellan	12,373	3%	11,445	3%
VBH and Commercial	52,793	11%	38,481	11%
Total	464,596		343,216	

Note. Values are in whole dollars.

Figure 2

Revenue and Payment Sources Percent



Expenses for the D&A program this fiscal year rose at a similar rate to program revenue (see Table 4), which generated \$14,331 more than the previous year. D&A expenses rose by 2% (\$5,473). As demonstrated in Table 5, expenses were quite similar to the previous year with salaries, wages and employee benefits increasing to 73% of the expended budget and other dropping to 27%.

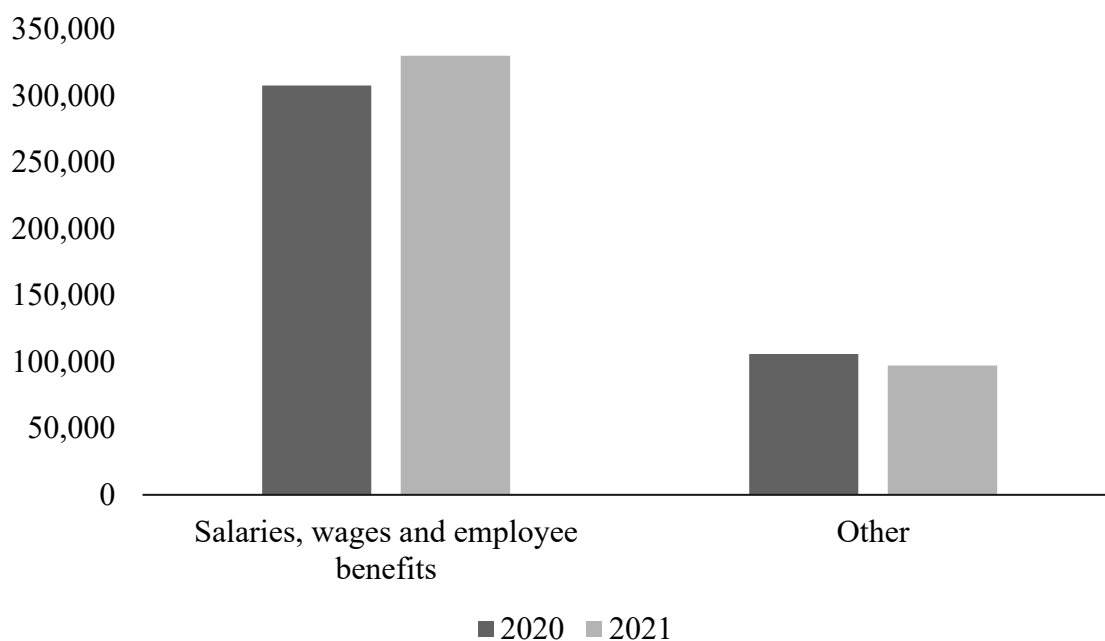
Table 5

D&A Expenses

	2020	2021
Salaries	237,656	255,514
Employee benefits	70,326	74,768
Other	105,862	97,262
Total	413,844	427,544

Note. Values are in whole dollars.

Figure 3

D&A Expenses by Year

D&A ADMISSION STATISTICS

The D&A program saw a decrease in admissions. There were 90 fewer admissions to the CGC D&A program this past year (435), whereas 525 during the previous fiscal year, showing a 17% decrease in admissions. That figure demonstrates (at least in the areas serviced by CGC), substance abuse decreased, the number of people seeking treatment for substance abuse decreased, or both conditions existed concurrently. The most notable changes occurred in Clearfield County, serviced by CGC's Clearfield and DuBois offices. There was an 18% decrease in admissions from 326 in the 2020 fiscal year to 266 this past fiscal year, similar to admissions two years ago. Notably, the Cambria location also experienced a 13% reduction in admission in 2021 over 2020.

Table 6

D&A Admissions 2020 Fiscal Year and 2021 Fiscal Year

County	2020	2021	Increase	Decrease
Allegheny	1	0	0	-1
Armstrong	0	0		
Butler	1	0	1	-1
Cambria	44	28	0	-16
Cameron	1	0		
Centre	0	1	1	
Clearfield	326	266		-60
Elk	11	4		-7
Indiana	3	4	1	
Jefferson	137	131	0	
McKean	0	1	1	
Unidentified	1	0		-1
Total Admissions	525	435		-90

The distribution of admissions by office remained comparatively similar to the previous year. The DuBois office remained at 68% of total program admissions. While Clearfield decreased in admissions, this office increased in overall distribution of admissions from 23% in 2020 to 25% in 2021. D&A programs at the Northern Cambria office accounted for 7% of program admissions (30 admissions).

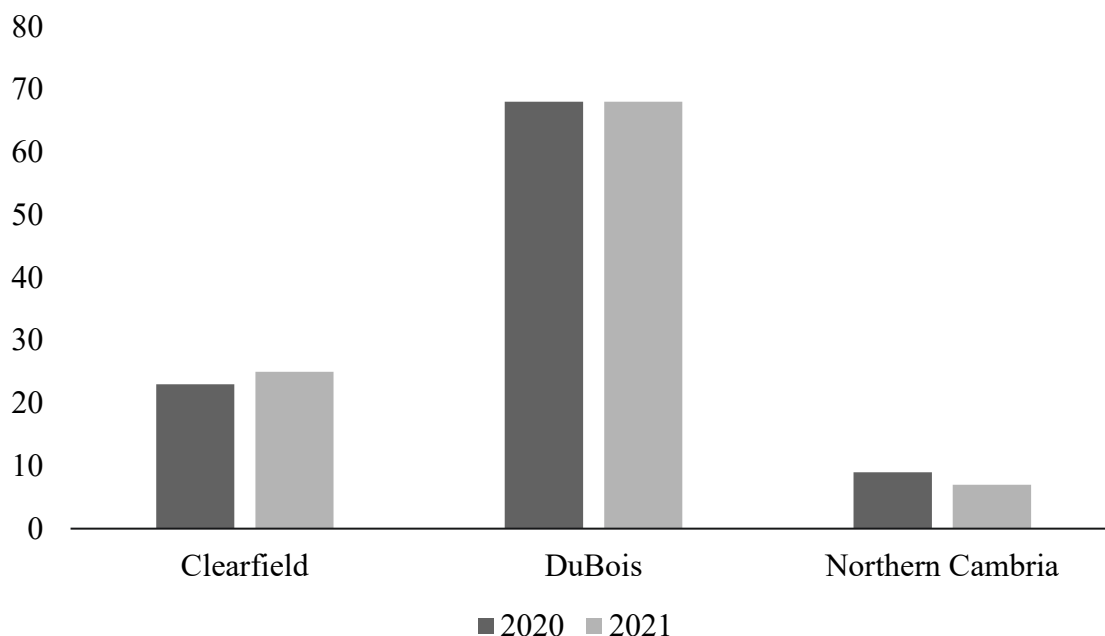
Table 7

Admissions by Office

Office	2020	2020%	2021	2021%
Clearfield	125	23%	109	25%
DuBois	370	68%	298	68%
Northern Cambria	47	9%	30	7%
Total	542		437	

Note. Admissions by office totals can vary from total admissions by county due to dual admissions, transfers and other variables.

Figure 4

Admissions by Office Percent

D&A ADMISSION DEMOGRAPHICS

Consumer demographics from the D&A program provide essential evidence that helps mental and behavioral health professionals effectively identify the groups at highest risk for substance abuse disorders and conditions. This data further allows these professionals to develop more specific treatment methodologies and approaches to suit the needs of these particular groups. The following data, tables, and graphs provide a comparative summary of consumer demographics from the last two fiscal years.

Table 8 displays results for admission by gender. The 2021 fiscal year exhibited a substantial difference between males and females. The male was the larger of the two groups.

Males comprised 59% of the serviced population for 2021, while females accounted for 41%.

Table 8

Admission by Gender

Gender	2020	2020%	2021	2021%
Female	212	40%	179	41%
Male	313	60%	258	59%
Total	525		437	

Detailed in Table 9 is age distribution. Some notable changes occurred between fiscal years in this demographic. Admissions for individuals 17 years old and under decreased from 15 in 2020 to 8 in 2021. Admissions aged 45 years and older decreased by 6%. A significant shift occurred for consumers admitted between the ages of 18-44. The 18-24 group saw a 45% reduction in admissions over last year. The largest age group of admissions includes individuals aged 35-44, which accounts for 152 admissions, or 35% of all admissions to the D&A program. These negatively skewed results (see Figure 5) demonstrate that substance abusers are more likely to be older individuals than those typically considered at-risk populations such as 14 years of age and younger. These numbers only come from one agency, but they bear substantial weight for CGC and potentially other institutions and organizations in the same region that provide similar D&A services.

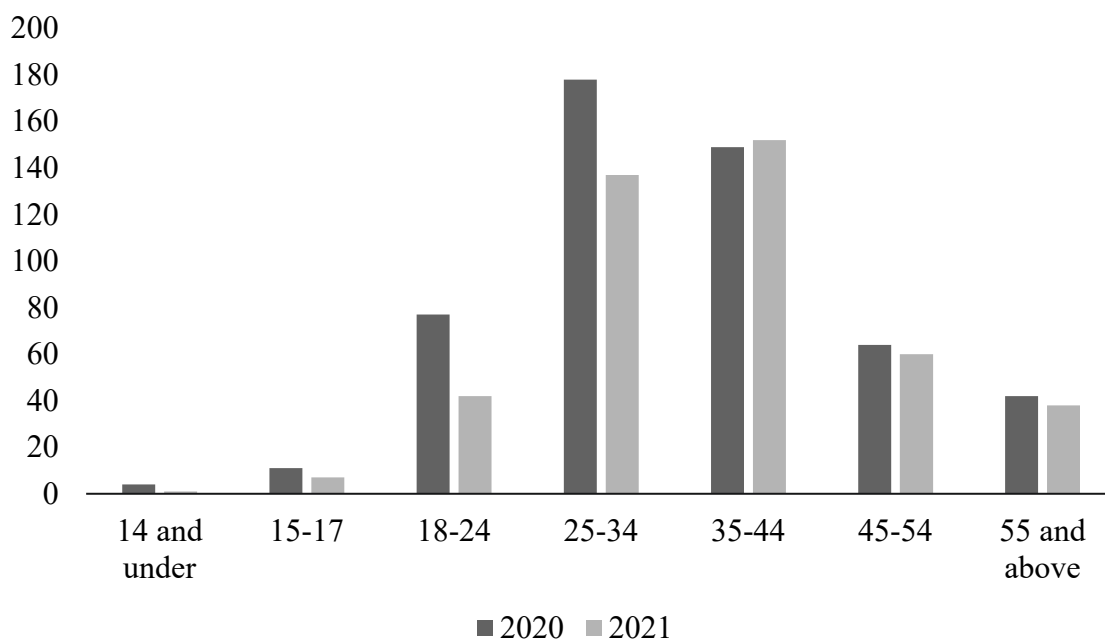
Table 9

Age of Admitted D&A Consumers

Age	2020	2020 %	2021	2021 %
14 and under	4	1%	1	0%
15-17	11	2%	7	2%
18-24	77	12%	42	10%
25-34	178	39%	137	31%
35-44	149	29%	152	35%
45-54	64	9%	60	14%
55 and above	42	8%	38	9%
Total	525		437	

Figure 5

Age of Admitted D&A Consumers



Race distribution details in Table 10 show the population served overwhelmingly identifies as White. This group saw a decrease in admissions and still comprised 98% of D&A admissions. Black/African American was the second largest group, decreasing from 6 to 5, accounting for 1% of total admissions. All other races documented account for less than 1%. Compared with age data listed in the table above, average D&A consumers tend to be white, middle-aged males.

Table 10

Race of Admitted D&A Consumers

Race	2020	2020 %	2021	2021 %
White	516	98%	427	98%
Black/African American	6	1%	5	1%
American Indian/Eskimo/Aleut	0	0%	0	0%
Asian	1	<1%	0	<1%
Native Hawaiian/Pacific Islander	0	<1%	1	0%
Unknown	1	<1%	2	<1%
Other	1	<1%	2	<1%
Total	525		437	

SPECIAL CONCERN POPULATIONS

There are three consumer categories of special concern whose conditions receive high priority status. They include intravenous drug users, Hepatitis C referrals, and pregnant women/women with children. The total number of these cases for the 2021 fiscal year numbered 158. The total number of these special concern admissions decreased to 158 during 2021 from 179 in 2020. Categories remained nearly identical with totals except pregnant women/women with children; this consumer category percentage increased from 90% to 96%.

Table 11

Special Concern Population Admissions

Condition	2020	2020%	2021	2021%
Hepatitis C referrals	6	6%	3	2%
Intravenous drug users	6	4%	3	2%
Pregnant women/women with children	167	90%	152	96%
Total	179		158	

PRIMARY DRUG OF CHOICE

The D&A program at CGC identifies six substance groups as consumers' foundational drugs of choice. They include alcohol, opiates, marijuana/THC, heroin, amphetamines/methamphetamines, etc. Alcohol continues to be the most reported substance, although observed is a slight decrease in 2021 (112 admissions) from 2020 (119 admissions). The marijuana/THC total accounted for 23% of admissions in 2021. Heroin remained similar to the previous year although decreased slightly from 51 to 49 respectively. Amphetamines/methamphetamines were also reduced from 102 in 2020 to 96 in 2021. The remainder or the other substances of choice were combined and accounted for 6% of total admissions.

Table 12

Drug of Choice for D&A Consumers

Drug of Choice	2020	2020 %	2021	2021 %
Alcohol	119	25%	112	26%
Opiates	78	22%	51	12%
Marijuana/THC	122	18%	99	23%
Heroin	51	9%	49	11%
Amphetamines/methamphetamines	102	15%	96	22%
Other	53	12%	30	6%
Total	525		437	

Overall, the drug of choice remained relatively proportionate and similar. While opiates continue to decrease, note that heroin remains somewhat steady. Furthermore, using one of these drugs often coincides with using the other (National Institute on Drug Abuse, 2019). For example, opiate usage from prescription medication can lead to subsequent heroin usage. These numbers support National Institute on Drug Abuse statistics and analyses mentioned above.

Table 13

Opiate and Heroin Usage

Drug of Choice	2020	2020%	2021	2021%
Opiates	78	60%	51	51%
Heroin	51	40%	49	49%
Total	129		100	

CONCLUSION

This report's descriptive statistics and analysis can establish some generalized observations. First, the overall size and capacity of the D&A program remained about the same as last year; however, COVID-19 impacted D&A admissions in 2021, reducing the overall number of individuals seeking D&A services, at least with this organization. The vast majority of admissions continue to occur in Clearfield County at the DuBois and Clearfield offices. The Northern Cambria office experienced a decline during 2021 and Covid-19 but, as stated in last year's report, is likely to grow in the coming fiscal year. Amphetamines/ Methamphetamines experienced a slight increase this year and are the second only to alcohol.

Lastly, the average age of admitted substance abusers shifted towards the 35-44 demographic this past year. This data suggests that as usage increases in our community, methamphetamines /amphetamines are becoming a significant contributor to local substance abuse problems. Further, this could be a substantial concern with this demographic.

REFERENCES

National Institute on Drug Abuse. (n.d.). Heroin. Retrieved July 28, 2019, from <https://www.drugabuse.gov/publications/drugfacts/heroin>