



Drug & Alcohol Services



Annual Quality Review
July 1, 2020 – June 30, 2021

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Service Description

- The Drug and Alcohol Program provides level of care evaluations, individual counseling, and Medication Assisted Treatment. Referrals into the program come from several sources including probation offices, physical health providers, human services organizations, self-referrals, hospitals, and other treatment providers.
- Treatment and intensity of services are tailored to the needs, strengths, supports, and recovery progress of the individual. Drug and Alcohol Services are a core service required by the Certified Community Behavioral Health Clinic grant.
- A component to Drug & Alcohol Services is Medicated Assistance Therapy. Suboxone is an evidence-based, FDA approved treatment medication for Heroin or other opioid addiction. Suboxone treatment is provided at The Guidance Center through the outpatient department at the Bradford clinic in McKean County.

Overview

- The Guidance Center continues to monitor the COVID-19 pandemic and adhere to CDC guidelines and the Pennsylvania Department of Health guidelines along with the program guidelines and the agency's policies and procedures. As we have endured many changes throughout the pandemic, client safety and their well-being has remained a top priority while serving our clients. Although majority of sessions were delivered via telehealth, some sessions were held face to face in the home or a school setting following CDC guidelines and recommendations.
- In 2017, The Guidance Center was one of eight clinics in Pennsylvania to be designated as a Certified Community Behavioral Health Clinic (CCBHC) due to the agency's commitment to staff credentialing and clinical excellence, use of evidence-based practices, availability and timely access to services, care coordination, behavioral and health service integration, and continuous quality improvement. As Pennsylvania withdrew from this federal pilot program in December 2019, The Guidance Center began providing services as an Integrated Community Wellness Center in January 2020. Also in 2020, The Guidance Center was awarded the Certified Behavioral Health Clinic (CCBHC) Expansion Grant for two years to support the work already started.
- Referrals into the program come from several sources including probation departments; physical health providers; human service organizations; other treatment providers; self-referrals and local hospitals. Drug and Alcohol Services are a core service required by the Certified Community Behavioral Health Clinic grant.
- The program is staffed by psychiatrists, a registered nurse, and therapists.

Team Members

The following staff provide services within the Drug and Alcohol Department:

- Dr. Dezo Halbauer: Medical Director / MAT Prescriber / Consulting Psychiatrist
- Dr. Alexander Welge: MAT prescriber / consulting psychiatrist

- Briana Jones: Project/Facility Director
- Nina Lau: Registered Nurse
- Denise Seagren-Peterson: Therapist
- Tania Geist: Therapist
- Michael Gallina: Therapist
- Daniel Potter: Therapist

The Guidance Center Board Members providing oversight include:

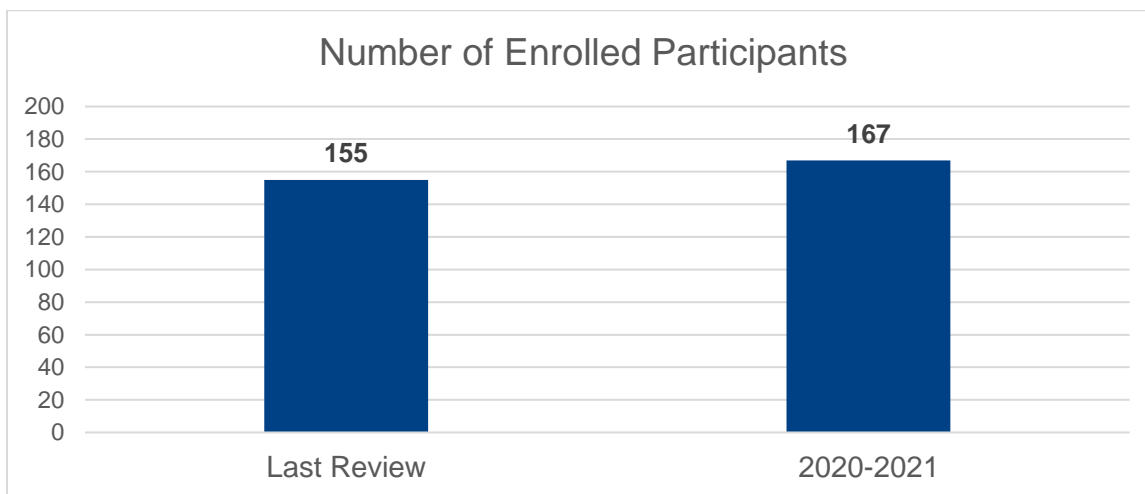
- Pastor Rob Klouw, President
- Mr. Shane Oschman, Vice President
- Mr. Sam Johnson, Secretary
- Mr. John Sullivan, Treasurer
- Mr. Sal Luzzi
- Ms. Stacy Wallace
- Mr. Jim Keltz
- Ms. Alcherrie Williams
- Mr. Raymond Douglass
- Mrs. Christy Clark

Drug & Alcohol Services information contained in this report is for July 1, 2020 through June 30, 2021.

Demographics

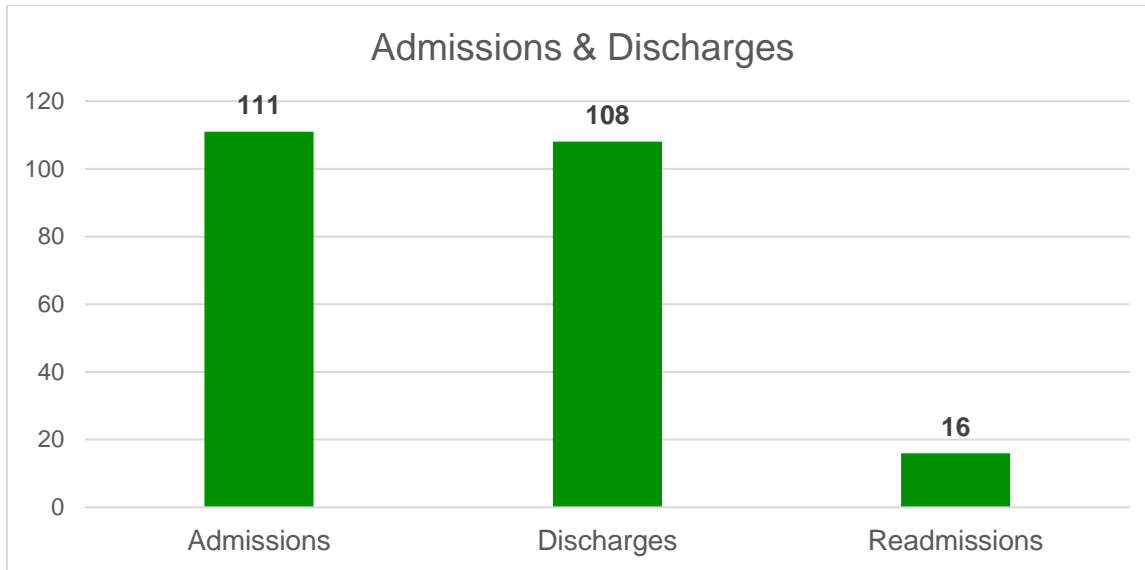
Number of Enrolled Participants

There were 167 participants receiving Drug & Alcohol Services during this review which was a slight increase from the last review.



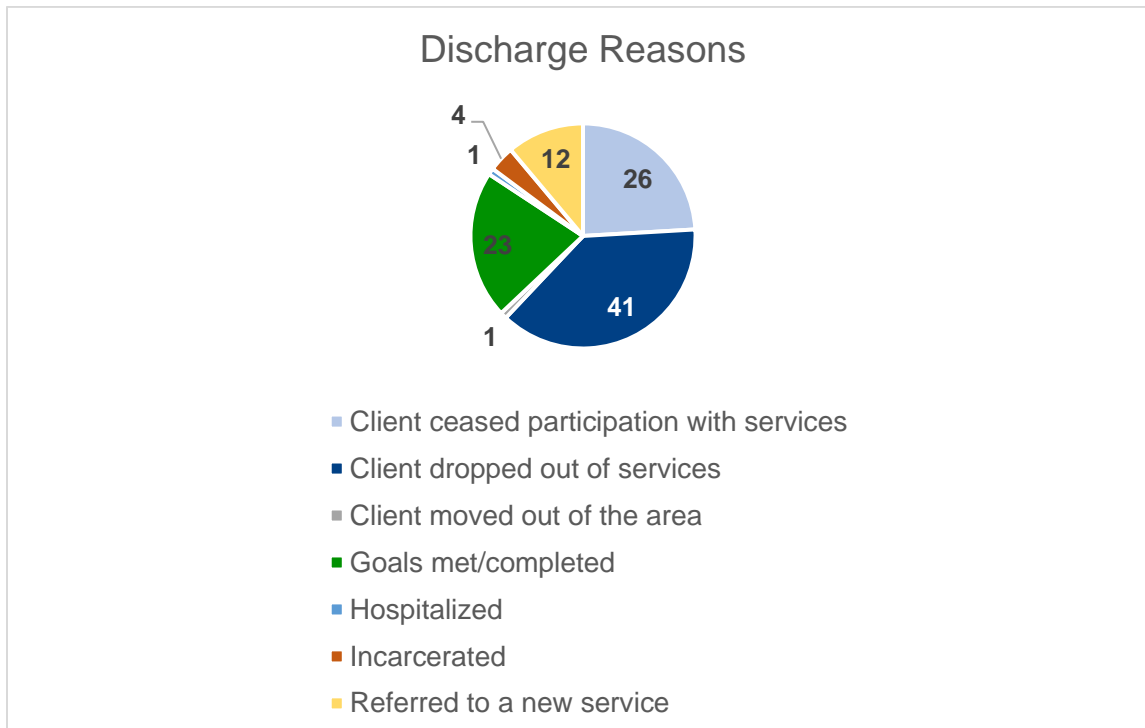
Admissions & Discharges

During this review, there were 111 admissions and 108 discharges. In addition, there were 16 participants who were admitted into the program more than once during this period of review.



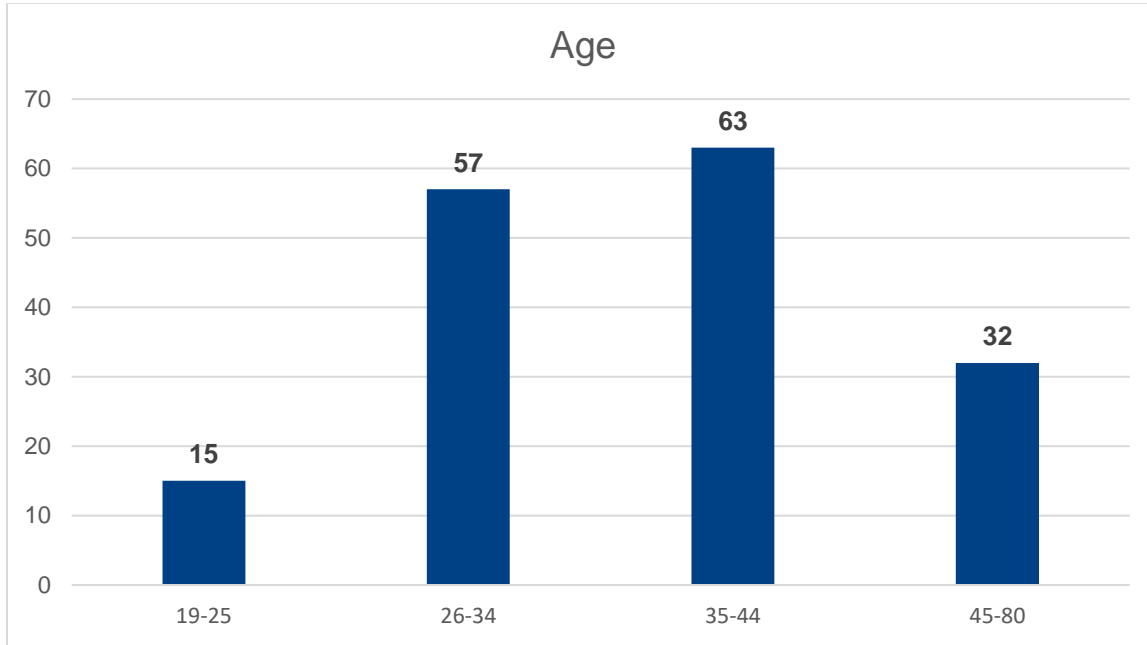
Discharge Reasons

Of the 107 discharges, majority of clients dropped out of services. However, 23 participants closed with services because they met their treatment goals and services were no longer necessary.



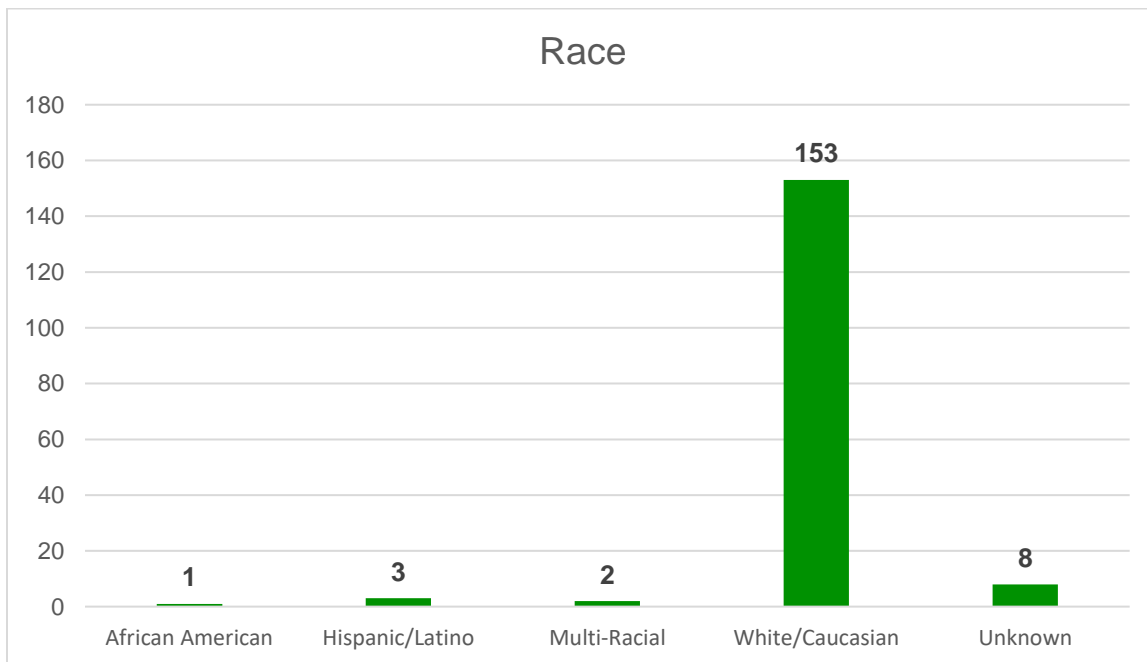
Age

Ages of individuals range from 19 to 80 years. The graph below depicts the number of participants in each age group.



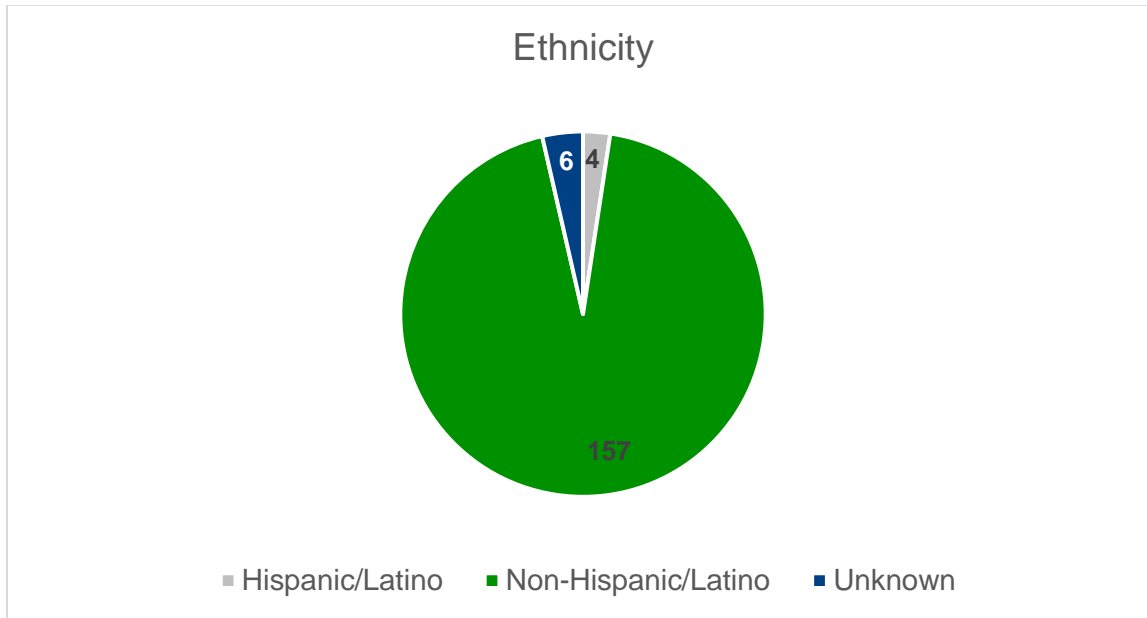
Race

Majority of the participants enrolled in Drug & Alcohol Services are Caucasian. The graph below depicts the race of the individuals served in the program during this review.



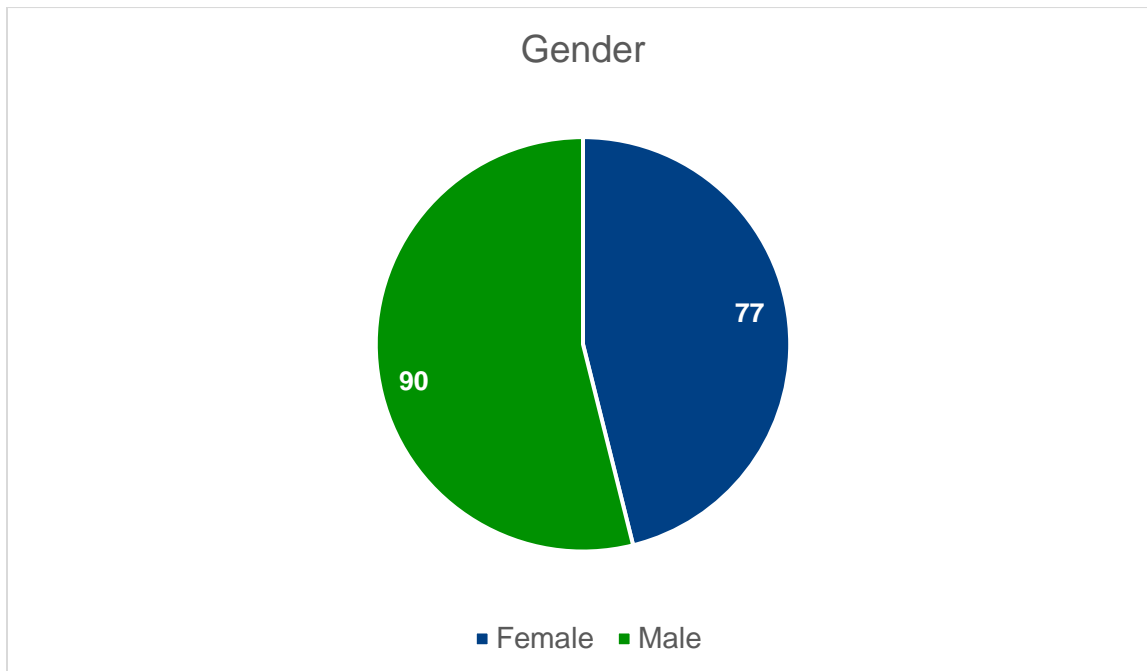
Ethnicity

Majority of the participants enrolled in Drug & Alcohol Services are non-Hispanic or Latino. The graph below depicts the ethnicity of the individuals served in the program during this review.



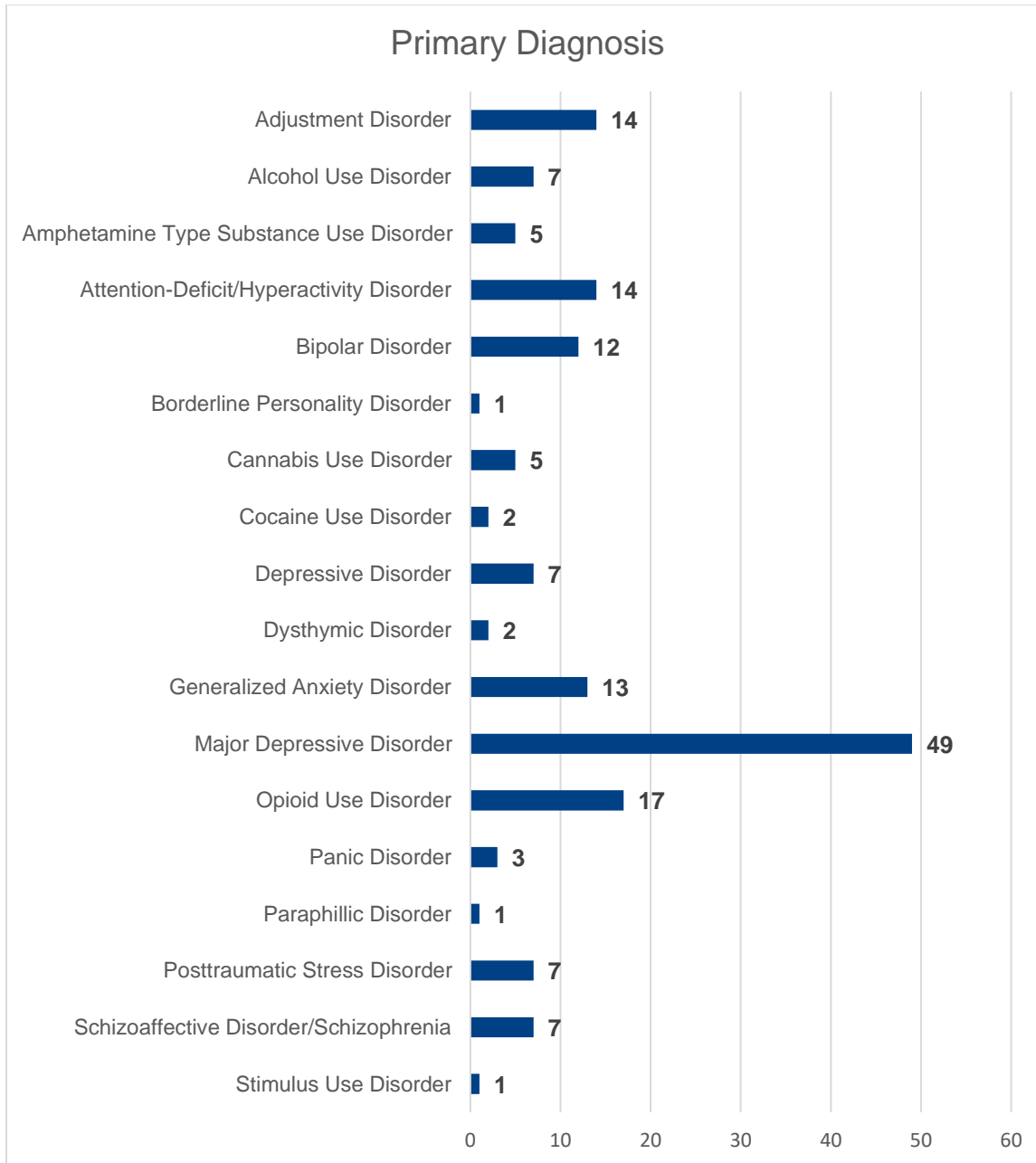
Gender

Majority of individuals served in the program are male.



Primary Diagnosis

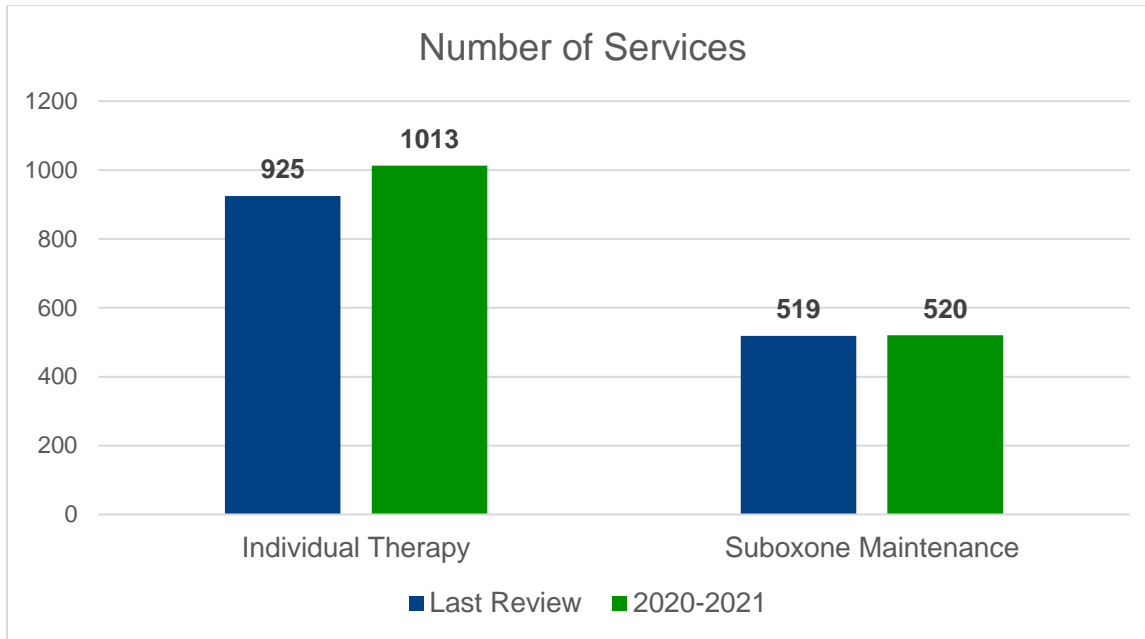
The primary diagnosis of individuals enrolled in Drug & Alcohol Services is Major Depressive Disorder with 49 individuals. A complete breakdown of the primary diagnosis is found below.



Service Data

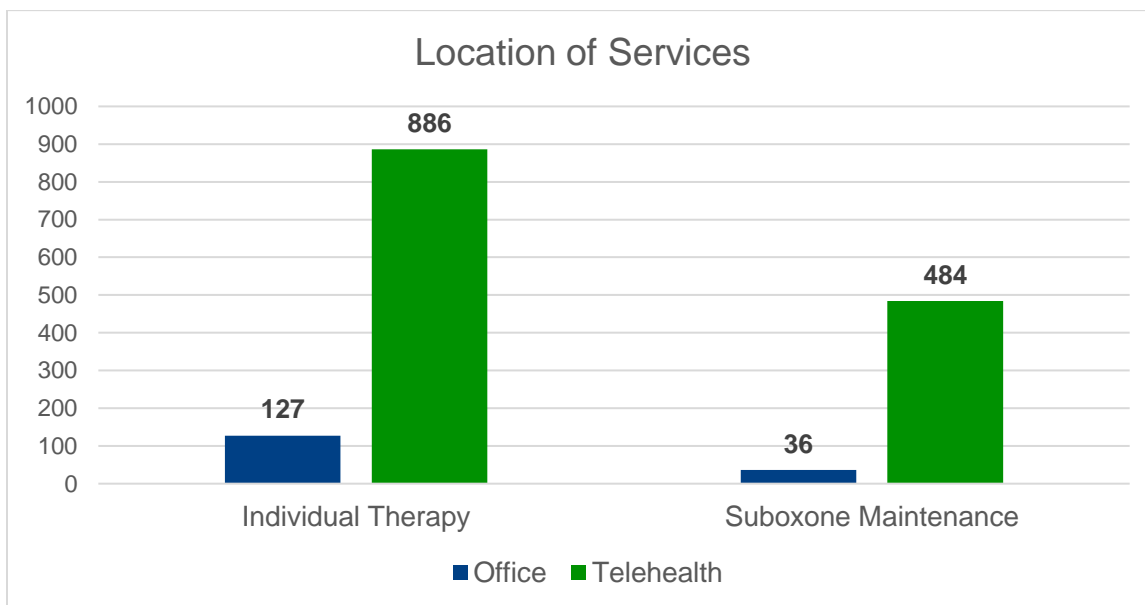
Number of Services

There was an increase in both individual therapy and suboxone maintenance sessions during this review. There were 1,013 individual therapy sessions and 520 suboxone maintenance sessions.



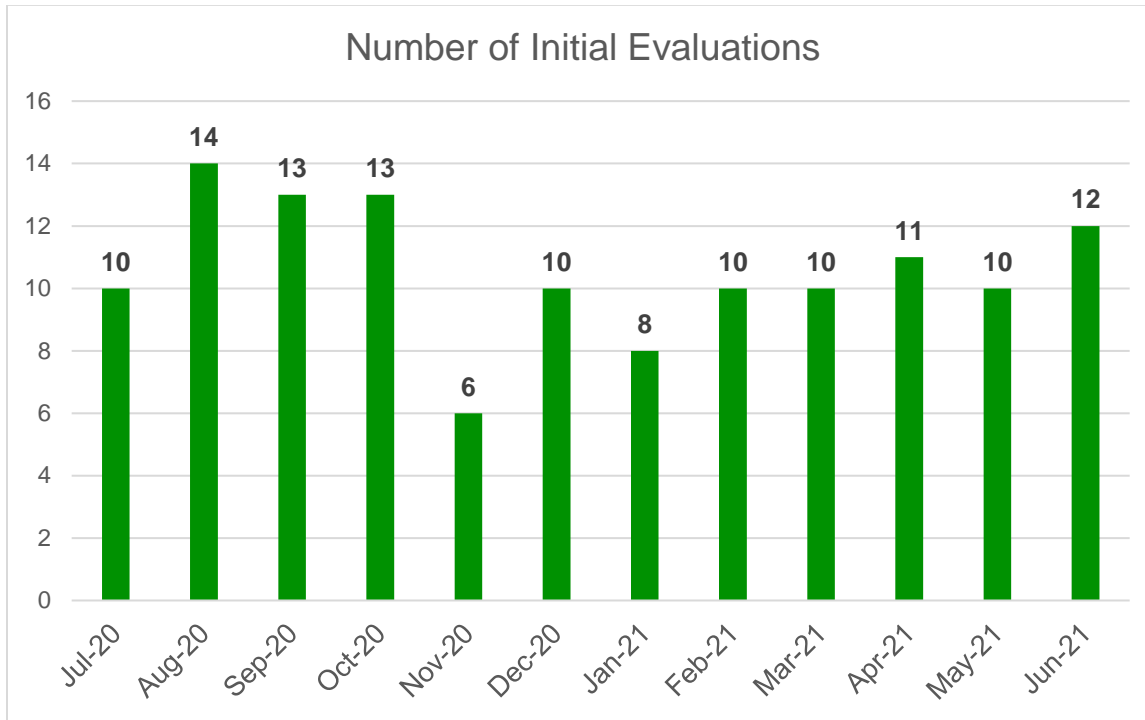
Location of Services

Majority of services were held via telehealth during this review.



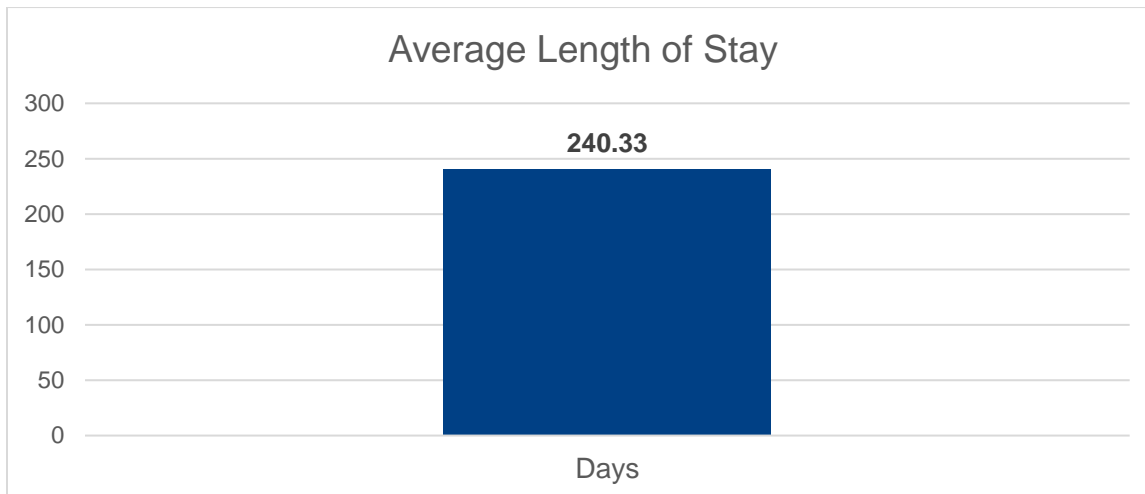
Number of New D&A Evaluations

There were a total of 127 initial D&A Evaluations completed during this review. A complete breakdown of number of initial evaluations completed per month is indicated in the graph below.



Length of Stay

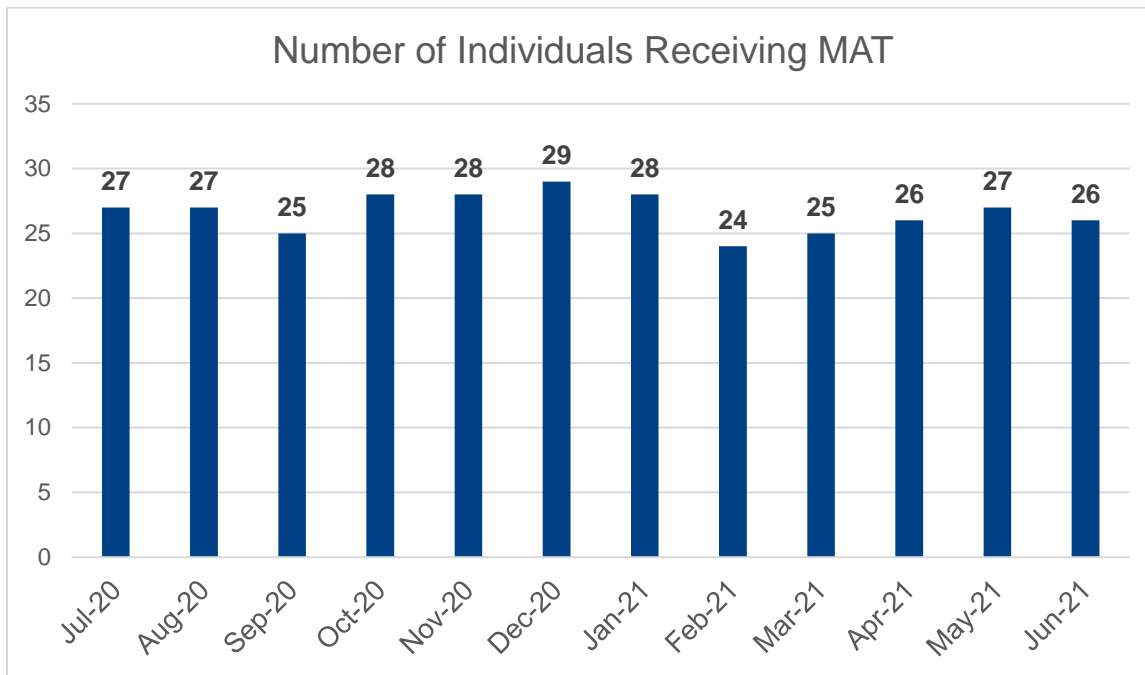
The average length of stay for individuals participating in the program is 240.33 days.



Evidence Based Programming

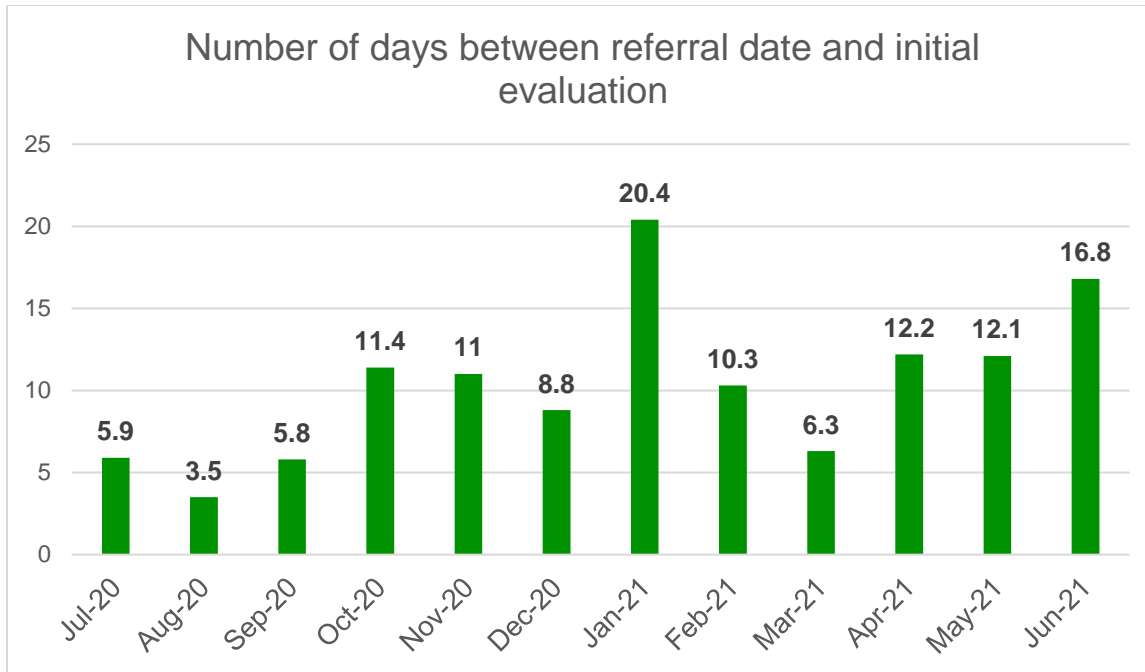
- Motivational Interviewing remains as the primary treatment modality used in Drug and Alcohol Treatment Services.
- For treatment of those with Opioid Use Disorders, Medication Assisted Treatment (MAT) is the recommended Evidence-Based Practice. During this review, there were two psychiatrists trained to treat individuals with Medication Assisted Treatment options.

There were 34 participants who received MAT during this review. The following table depicts the number of individuals who received MAT by each month.



Outcomes

A specific goal of the Drug and Alcohol Program is to complete the initial evaluation within 7 days of referral. Quick initiation of treatment yields more positive outcomes for individuals with substance use disorders. On average, individuals are seen within 10.37 days which is a slight increase from our last review. This area remains as a program goal to decrease the time between the request for services to the initial evaluation. A Plan Do Check Act (PDCA) was enacted for this area.



Program Adherence

To ensure that the Drug & Alcohol Services is adhering to the program regulations and agency policies, routine record audits as well as regular supervision is utilized.

Audits

Regular audits are completed by members of the Drug & Alcohol staff including Program Director, Clinical Supervisors, Quality & Compliance Department, and regulatory agencies.

The following auditing methods are completed in the program:

1. CCBH Fraud Waste and Abuse Audits
2. CCBH annual benchmarking reviews
3. Annual DDAP licensing review
4. Monthly Chart reviews completed by Program Director
5. Quarterly internal audits by Compliance Coordinator
6. Quality reviews by Quality Director

Methodology

Charts are internally audited by the Agency Compliance Coordinator on a biannual basis. In addition to internal audits by the Compliance Coordinator, the Facility/Project Director reviews all charts on a regular basis.

For the internal audits completed by the Compliance Coordinator, charts are selected at a random sample. There were 2 internal audits conducted during this review. The results of the internal audits are as follows:

Internal Compliance Audits

On February 2, 2021, 15 Drug and Alcohol Counselling Charts were reviewed for 27 CCBH Quality Indicators and Program Specific Indicators.

Results for 15 Charts:

Category	Score	Goal
Intake and Assessment	97%	80%
Treatment Planning	99%	80%
Care Coordination	97%	80%
Physical Health	100%	80%
Discharge Planning	100%	80%
Smoking Cessation	100%	80%
Key Indicators	86%	80%
Optional Additional Indicators	97%	80%

On May 17, 2021, 20 Drug and Alcohol Counselling Charts were reviewed for 27 of The Guidance Center Quality and Compliance Indicators and 11 Program Specific Indicators.

Results for 20 Charts:

Category	Score	Goal
Intake and Assessment	97%	80%
Treatment Planning	92%	80%
Care Coordination	91%	80%
Physical Health	91%	80%
Discharge Planning	100%	80%
Smoking Cessation	100%	80%

Key Indicators	83%	80%
Optional Additional Indicators	94%	80%

Program Goals

- Participants will have an initial evaluation within 7 days of the request for services to ensure timely treatment is being implemented.
- The agency plans to implement a Substance Use Awareness Campaign
- Increase Engagement of D&A participants – the no show rate for Drug and Alcohol Services remains to be about 50%. Developing strategies to engage individuals to stay involved in services remains as an initiative for the department.
- Continue to formulate the department’s annual training plan that is unique to each employee. Training goals for 2022-2023 include the following:
 - Inspiring parents and caregivers to replace unhealthy behaviors around substance use with healthy behaviors for higher likelihood of recovery and a healthy family unit.
 - Engage parents and caregivers through identifying their personal values and problem-solving barriers to treatment.
 - Minimizing the risk of shame associated with seeking substance use treatments.
 - Increase knowledge of Vivitrol and the benefits for sustainable recovery.
 - Increase education and awareness of Naloxone administration including low barrier access to the medication.
 - Encourage and educate members of the benefits of receiving preventative and routine medical, dental, and vision care.

Staff Supervision

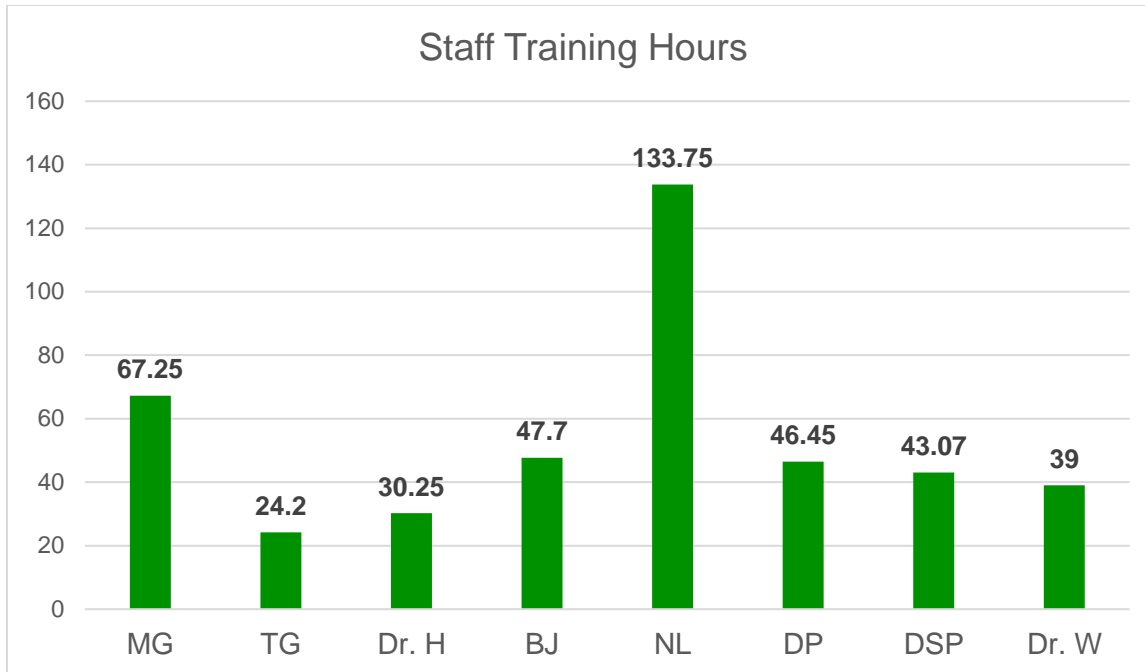
Ensuring that participants receive optimum care, staff receive appropriate supervision.

Therapists receive one-hour individual supervision per week. Additionally, therapists receive group supervision for two hours per month with a Psychiatrist for MAT clients.

Supervision records are kept by the Project/Facility Director. Individual training plans are reviewed and updated on a regular basis.

Staff Trainings

The table below represents training hours for each staff member. Staff members are listed by initials.



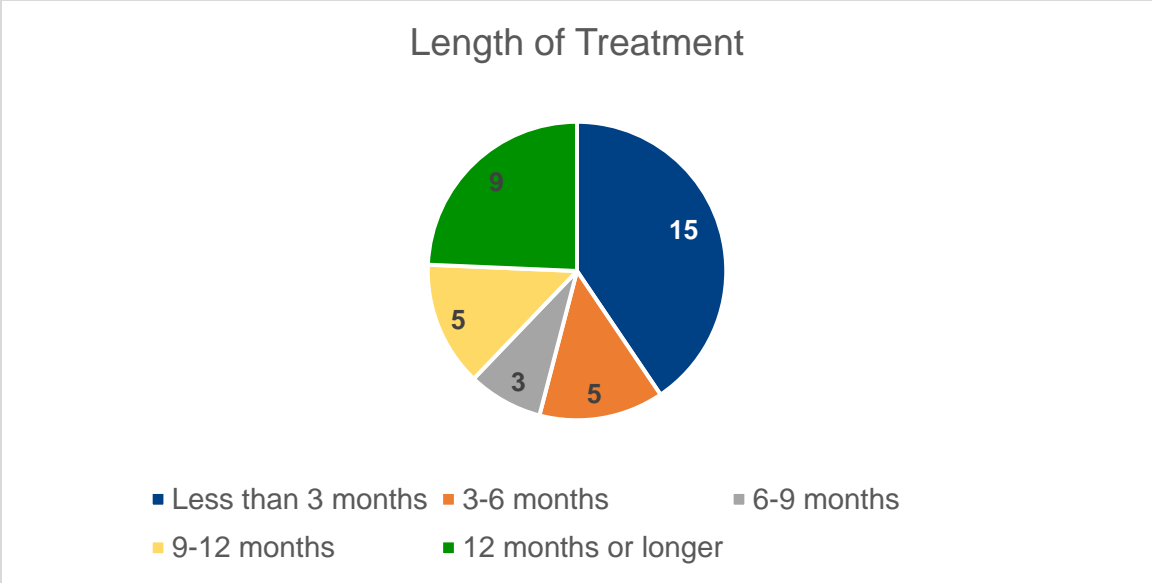
Satisfaction Surveys

Survey Results

All participants are offered a follow-up survey when they are discharged from Drug & Alcohol Service. The Agency Quality Director contacts discharged participants and offers them a feedback survey via telephone or by mail.

During this review, there were 37 surveys completed which is an increase of responses of 26 surveys from the last review.

The length of treatment was recorded in survey responses. The pie chart below indicates how long individuals were involved with Drug & Alcohol Services.



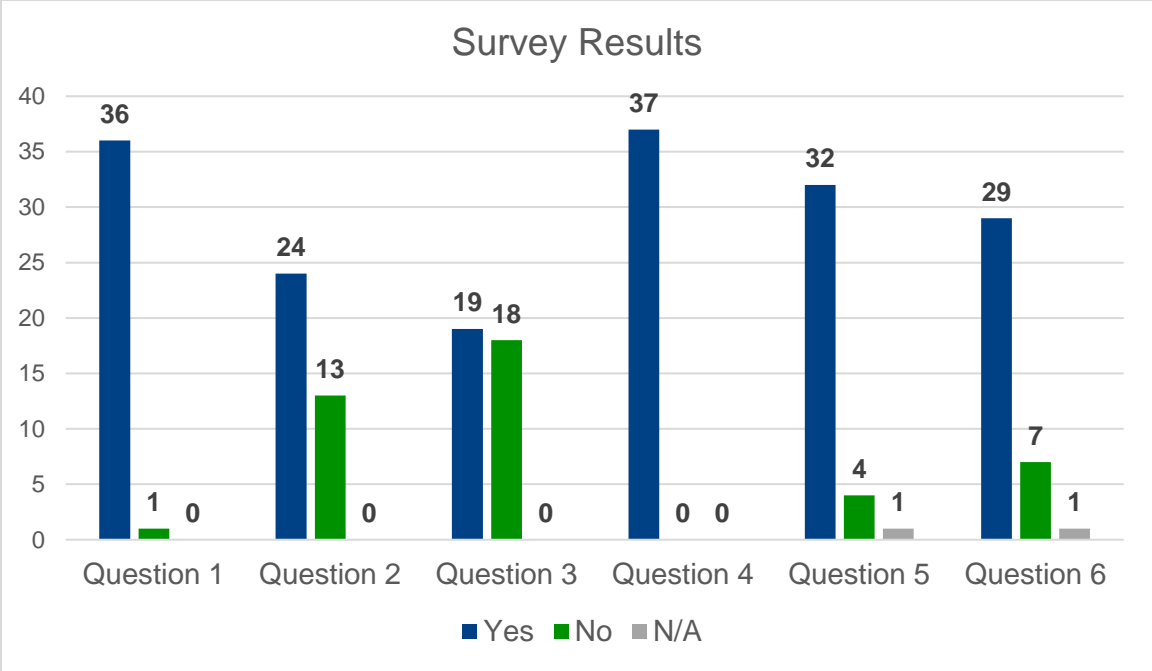
Majority of participants participated in services for less than 3 months.

Participants were asked several questions regarding their treatment. The questions are as follows:

Question 1	Were you satisfied with the frequency of your Drug & Alcohol appointments?
Question 2	Did you successfully complete treatment?
Question 3	Are you using any self-help group, spiritual, or mental health services to aid recovery?
Question 4	Do you understand the disease concept of addiction?
Question 5	Are you following your relapse prevention plan?
Question 6	Did you follow through with any scheduled appointments?

Results

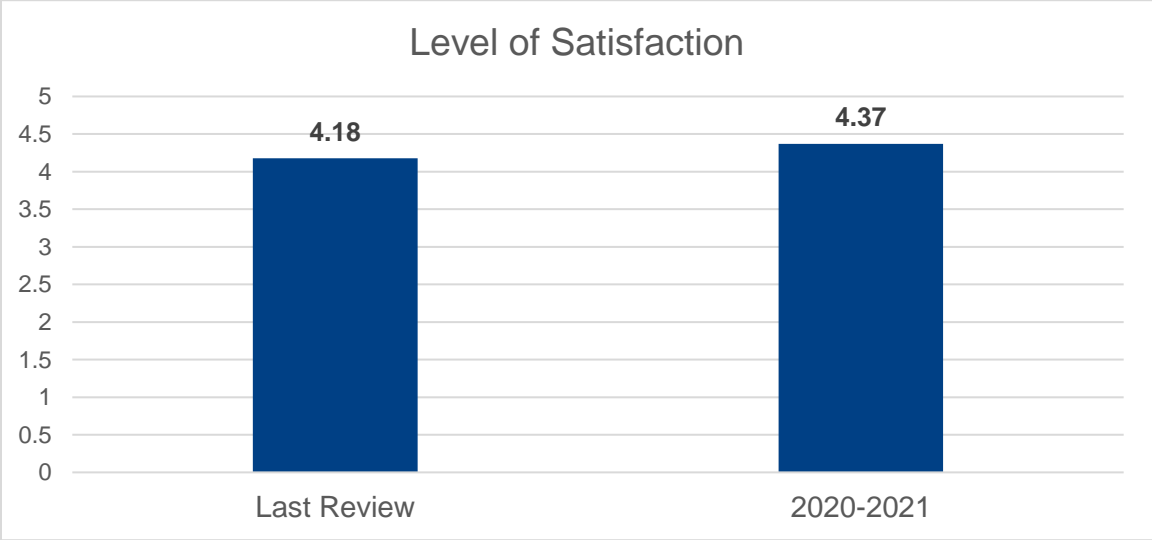
Results of the follow-up surveys are captured in the following graph.



Overall, majority of the participants were satisfied with their services. When a participant indicates they are not following their prevention plan and want to continue services, they are connected with the intake department to re-enroll in services.

Additionally, participants were asked to report on their satisfaction with their treatment experience.

Participants responded based on a Likert Scale whereas 1 represents not at all satisfied and 5 represents very satisfied. The average of satisfaction during this review has a slight increase from the last review. The results are captured in the chart below.



Comments

Participants were given the opportunity to provide additional feedback in their own words. The word cloud below depicts some of the comments that were shared.



Report Respectfully Submitted:

Briana Jones
Project/Facility Director, Drug and Alcohol Services