

Fayette County Drug & Alcohol Commission, Inc.

**Annual Report
Fiscal Year 2019/2020**

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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. It is unprecedented in the number of lives that are being lost and families destroyed due the opioid/heroin epidemic. Any addiction can destroy the person who suffers from it, as well as those around them. In 2017, Fayette County Drug and Alcohol Commission, partnered with Fayette County District Attorney Richard Bower in forming a task force, with the specific focus of raising awareness throughout the county and reducing stigma and overdose deaths. The Fayette County Overdose Taskforce has continued it's efforts to bridge various services facets, including public health and public safety, in order to effectively engage stakeholders, utilize resources, and reduce overdose death and stigma associated with substance use. The Fayette County Overdose Taskforce has offered free Naloxone (Narcan) training and distribution, has developed and disseminated a survey to gauge any stigma related to substance use and/or the use of naloxone, as well as training our local fire and police first responders.

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.

Few people will forget the year 2020. The COVID-19 pandemic drastically affected many areas of our lives such as work, school, family, social activities and health concerns.

However, the seriousness of the COVID-19 pandemic does not diminish the significance of the devastating effects of substance use disorders. The pandemic has negatively affected persons experiencing a substance use disorder. People continue to suffer from alcohol and other drug use problems. Nevertheless, we maintain hope and optimism as we know that prevention works, treatment is effective and people can and do recover.

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 planning, delivering and coordinating alcohol, tobacco, other drug, and gambling (ATOD&G) prevention services for Fayette County. The field of ATOD&G prevention focuses on employing different strategies to affect 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. As a whole, services delivered by the Prevention Unit attempt to follow the principals of effective prevention as compiled by National Institute on Drug Abuse (NIDA) from current research. Some of those principles (as taken from the Department of Drug and Alcohol Programs (DDAP) Division of Prevention and Intervention's Guidance Document) are as follows:

- **Prevention programs should enhance protective factors and reduce or reverse risk factors.** Programs should be tailored to address the specific type of drug abuse problems and risk and protective factors identified for each individual community or population.
- **Family Based Prevention Programs** should enhance family bonding and relationships, in addition to providing education and information about alcohol and other drugs. These programs should also teach parenting skills and provide practice in developing, discussing, and enforcing family policies on substance abuse.
- **School Based Prevention Programs** for elementary school children should target improving academic and social-emotional learning and build skills such as communication and problem solving. Prevention programs for middle or junior high and high school students should increase academic and social competence with skills such as healthy peer relationships and drug resistance skills.
- **Community Based Programs** that combine two or more effective programs, such as a family-based and school-based program, can be more effective than a single program alone. Programs that are implemented in multiple community settings—for example, schools, clubs, faith-based organizations, and the media—are most effective when they present consistent messages in each setting.
- **Prevention Program Delivery** should be ongoing and long-term with repeated interventions (i.e., booster programs). Prevention programs are most effective when they use interactive techniques that allow for active involvement in learning and reinforcing skills.

Prevention services are each categorized into one of six federal strategies: Information Dissemination, Education, Alternative Activities, Problem Identification & Referral, Community Based Process & Environmental. A comprehensive prevention plan will include services in all federal strategies.

Information Dissemination: These services provide awareness & knowledge on the nature & extent of alcohol, tobacco, other drugs and gambling (ATOD&G), addiction, and the effects on individuals, families and communities. Information Dissemination is characterized by one-way communication from the source to the audience. It can be in the form of print, visual, audio and/or by word of mouth. A few examples of these services delivered by FCDAC, Inc. Prevention Unit staff are listed below.

- Shared printed information at various community events and health/wellness fairs throughout the county.
- Shared digital information on FCDAC website and Facebook page.
- Facilitated informational presentations to local school district staff, employees of local human service providers, church congregations, foster parents, and youth.
- Disseminated campaign materials for Recovery Month, Fetal Alcohol Spectrum Disorders (FASD) Awareness Day, Red Ribbon Week, Great American Smoke Out, Hand Over the Reins, Through with Chew Week, Kick Butts Day, Problem Gambling Awareness Month and Alcohol Awareness Month. This included receiving proclamations from Fayette County Commissioners for many of these awareness days/months.

A few highlights from this category include

- Hosting a radio talk show on WMBS, entitled "**What You Need to Know**". The show aired the first Friday of every month from July through June and included topics ranging from upcoming awareness days/months to FCDAC, Inc. services to evidence based prevention programs and the Pennsylvania Youth Survey (PAYS).
- Work was done towards the development of Communities that Care of Fayette County to host a Family Fun Day at the YMCA, where participants learned about evidence based prevention programs, communication skills and the Communities that Care model. This event was postponed due to the COVID-19 pandemic.
- Facilitating presentations about Red Ribbon Week in local elementary schools.
- Displaying the Care Enough Not to Share & Don't Add to the Numbers media at the State Theatre Center for the Arts prior to the showing of classic movies.
- Displaying Care Enough Not to Share media on shopping carts at Martin's and Giant Eagle.
- Displaying Care Enough Not to Share images on coffee sleeves at Sullivan Brothers Coffee Company in Uniontown.
- Displaying gambling prevention media on shopping carts at Martin's Grocery in Connellsville.
- Hosted the Power of Parents (PoP) program in various locations and reached approximately 70 persons. One program was held virtually due to the pandemic.
- FCDAC was awarded a PCCD grant to implement Strengthening Families (for children 10yrs – 14 yrs). FCDAC was one of 5 awardees across the state. Work was begun to getting and obtaining facilitators and families to participate in the program. Information was disseminated at various locations.

- Proclamation in awareness of Fetal Alcohol Spectrum Disorder was given by the Fayette County Commissioners.
- Tobacco/Nicotine awareness information were disseminated in many ways including a webinar hosted by the Fayette Chamber of Commerce geared to businesses on establishing a nicotine-free policy; vaping presentations were conducted to 15 persons; included nicotine information to 78 attendees of Alcohol Highway Safety School.
- In cooperation with the PA State Police, conducted 2 informational meetings regarding the laws and requirements for "Small Games of Chance". A total of 46 persons attended these sessions.
- Collaborated with Washington, Westmoreland & Greene County counterparts to host a regional drug summit at Waynesburg University. 65 persons attended this event.

Education: These services involve two-way communication. Interaction between the educator/facilitator and the participants is the basis of these activities. Activities under this category are to affect critical life and social skills, including decision-making, refusal skills, critical analysis and systematic judgment abilities. All services under this strategy are recurring, meaning a set number of activities are conducted with the same group of participants and has a measureable outcome. A few examples of these services delivered by FCDAC, Inc. Prevention Unit staff are listed below.

- Facilitated Freedom from Smoking, an evidence-based tobacco cessation program, in multiple locations throughout Fayette County.
- Facilitated the Underage Curriculum for Adolescent Needs (UCAN) program for underage youth with an AOD violation.
- Facilitated Too Good for Drugs, an evidence-based drug prevention program for elementary students.
- Facilitated We Know BETter, an evidence-informed gambling prevention program for middle school students.
- Facilitated Botvin LifeSkills Training (LST), an evidence-based drug prevention program for middle school students.
- Supported the delivery of Project Toward No Drug Abuse (PTNDA), an evidence based drug prevention program for high school students.

A few highlights from this category include:

- Freedom from Smoking helped 71 people learn ways to quit or cut down on their tobacco use.
- Utilized the two on-site trainers for the Botvin LifeSkills Training (LST) program, so ongoing training can be offered to local school districts to expand the program. A total of 32 school-related personnel were trained representing 5 school districts and

one social service provider. With FCDAC Prevention Unit staff support, LST was offered to middle school students in five Fayette County School districts.

- A gambling prevention program – We Know BETter, which is a program geared to middle school students was provided to 150 students.
- In partnership with the Connellsville Area School District, FCDAC was one of five sites across PA to be awarded the Opioid Misuse Prevention Project (OMPP) from the PA Commission on Crime & Delinquency (PCCD). This five year project will work to establish the Botvin LifeSkills program in the Connellsville Area Middle School, the Strengthening Families 10-14 Program in the surrounding community, as well as utilize the Social Development Strategy to educate adults on how to best interact with youth. This was the second year of the program and 23 families participated in the program this fiscal year.

Alternatives: These services operate under the premise that healthy activities will deter participants from the use of ATOD or the participation in gambling activities. The premise is that constructive and healthy activities offset the attraction to, or otherwise meets the needs usually filled by ATOD-G and would, therefore, minimize or eliminate the use of ATOD-G. These activities must be directly linked to an educational or skill building activity. A few examples of these services delivered by FCDAC, Inc. Prevention Unit staff are listed below.

- Offering a youth mentoring opportunity for local high school students through the Youth Advisory Board (YAB), a part of the Communities that Care of Fayette County coalition.
- Worked with local school districts to establish Tobacco Resistance Unit (TRU) groups in Fayette County schools.
- Planning for the Family Fun Event in collaboration with the YMCA was postponed due to the COVID pandemic

Problem Identification & Referral: These services target those persons who have experienced first use of illicit/age inappropriate use of tobacco and those individuals who have indulged in the first use of illicit drugs & alcohol in order to assess if their behavior can be reversed through education. An example of the service delivered by FCDAC, Inc. Prevention Unit staff in this category is listed below.

- Providing SAP Liaison services to SAP Teams and eSAP Teams across the county.

A few highlights from this category include:

- Serving twenty-six teams with SAP Liaison services throughout the course of the 2019-2020 school year, which included 214 SAP Team meetings. Due to the COVID pandemic, SAP team meetings were suspended due to virtual learning.
- Screening 13 students referred to the Student Assistance Program to determine if a referral to a mental health or drug and alcohol treatment provider would be beneficial.
- Participating in 65 meetings with families regarding SAP.

- Collaborating with a Commonwealth Approved Trainer for the Student Assistance Program to offer local SAP Team training. 15 persons were trained.

Community Based Process: These services aim directly at building community capacity to enhance the ability of communities to more effectively provide prevention and treatment services for ATOD&G disorders. Activities include organizing, planning, enhancing efficiency & effectiveness of services, inter-agency collaboration, coalition building and networking. A few examples of these services delivered by FCDAC, Inc. Prevention Unit staff are listed below.

- Serving on local wellness committees
- Participating in local coalitions

A few highlights from this category include:

- Supporting the Communities that Care of Fayette County coalition with a Community Board Co-Chair. This position has given leadership to the coalition and enabled the collective work to stay focused and moving in a forward direction.
- Participating in the Fayette Living Well Coalition (formerly Fayette County Community Health Improvement Partnership), providing guidance related to addressing tobacco use in Fayette County.
- Participating in both the Fayette County & MonValley Overdose Taskforces.
- Trained 18 persons to become facilitators for the Strengthening Families Program.
- Presented Social Development Strategy training to 392 persons, representing schools, social service agencies, and churches.
- Met with local elected officials regarding tobacco related issues and information.

Environmental: These services establish or change written and unwritten community standards, codes, ordinances, and attitudes thereby influencing incidence & prevalence of the abuse of ATOD&G. A few examples of these services delivered by FCDAC, Inc. Prevention Unit staff are listed below.

- Changing worksite policies regarding tobacco use
- Working to increase the legal purchase age of tobacco products in PA to 21 years of age
- Changing company practices to include referrals to the PA Free Quitline
- Changing business practices to include messaging on beer regarding the legal consequences of purchasing alcohol for minors.

A few highlights from this category include:

- Establishing worksite tobacco policies at three locations.
- Establishing smoke-free multi-unit housing policies at two locations.

- Passing Young Lungs at Play in four locations.
- Conducted PA Quitline training to 35 persons in two locations.
- Working with twenty-two businesses to participate in the Free With Ribbon promotion during Red Ribbon Week. Each business offered a special incentive to elementary students that visited their establishment wearing a Red Ribbon during Red Ribbon Week.

The staff members dedicated to delivering these high quality services regularly seek out relevant training opportunities to enhance their skill level. During the course of the 2019-2020 fiscal year, all Prevention Unit staff members exceeded the established training requirements set by DDAP, while also maintaining all certifications they each hold. A few achievements to note include:

- Two staff members becoming facilitators for the evidence-based program, Positive Action.
- Four staff members maintained DUI Association certification to offer the UCAN program as a recognized underage drinking program in Fayette County.
- Three staff members maintained DUI Association certifications to serve as Alcohol Highway Safety Instructors and CRN Evaluators.
- Two staff members attended Strengthening Families program training to become facilitators.
- One staff was trained to deliver Botvin LifeSkills program.
- Two staff members became trainers in the Social Development Strategy (SDS).

Two staff members became trained to be Power of Parents facilitators.

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.

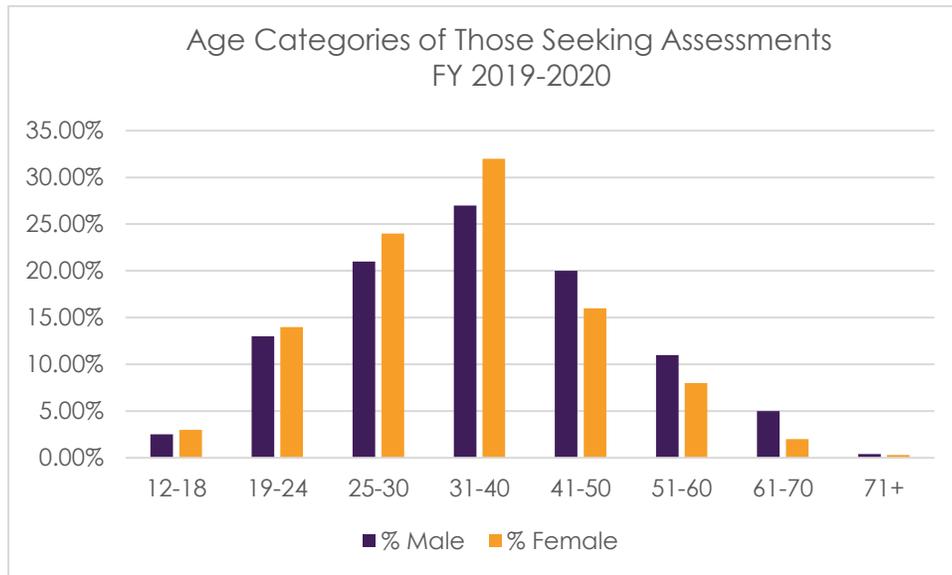
The Case management unit at FCDAC collaborated and coordinated services with many local entities such as Fayette County Prison officials as well as Fayette County probation Officers to establish a set prison assessment day in which referrals are made through probation contact and clients are assessed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

The Case Management unit assessed 1,180 clients in the 2019-2020 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 approved guidelines. 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.

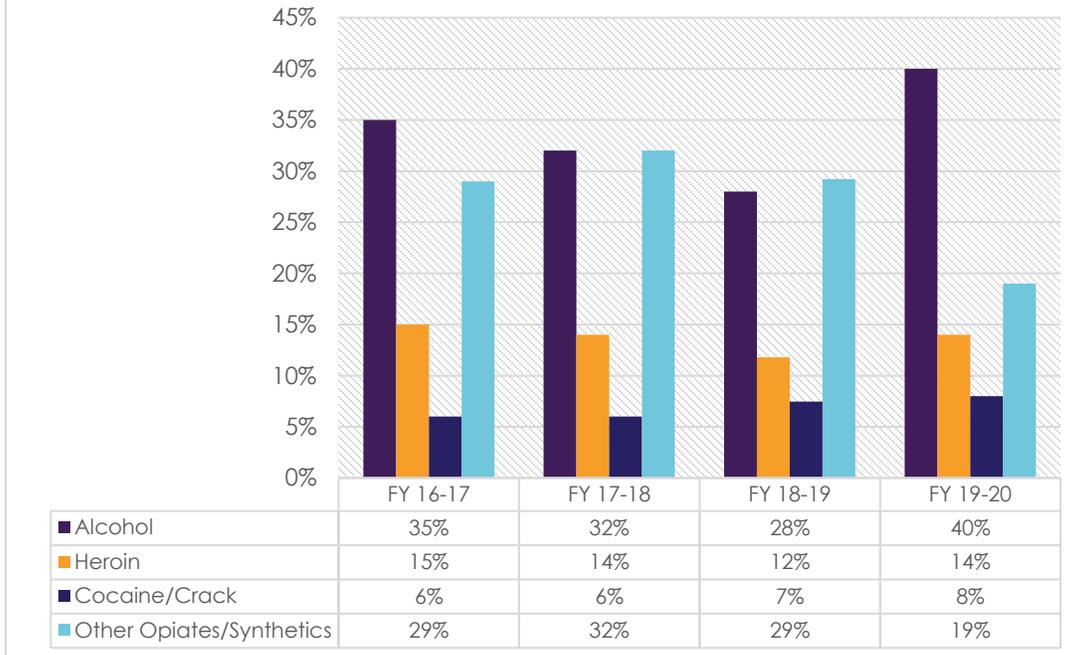
The following graphs and tables display the breakdown of substances used by male and female clients, various levels of care that clients seen by case management staff can be referred to for treatment, sources of referrals, as well as the ages of clients assessed by case management staff members.

During fiscal year 2019 -2020, the case management unit at Fayette County Drug and Alcohol Commission assessed 1180 clients. Of that number, 786 or 67% were male, 393 or 32% were female and <1% were transgender. Below is a graph that displays the age categories of the males and females who received assessments during this fiscal year, of which the highest concentration of those seeking assessments were those in the 25-30 year old and 31-40 year old categories.



Of persons receiving assessments during this fiscal year, the most commonly reported primary drugs of choice are alcohol, heroin, cocaine, and cocaine. For persons seeking treatment services, these have been the top reported drugs of choice for the past several years. The following graph displays the primary abused substances as reported by those clients receiving assessments for the past seven fiscal years:

FCDAC Case Management Trends of Primary Drugs of Choice FY 16/17 to FY 19/20



Above is a chart that shows the primary drugs of choice over the last four fiscal years. Alcohol remains the number one primary drug of choice at 40%, which was an increase from the previous year. Cocaine had stayed steady as the fourth primary drug of choice. The second and third primary drugs of choice were Other Opiates and Heroin at 19% and 14% respectively.

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:

- Alcohol has remained one of the top primary drugs of choice over the past four fiscal years. In fiscal year 2017/2018, it tied for the top drug of choice and then saw a 12.5% decrease in the following fiscal year. However, for fiscal year 2019/2020, alcohol increased nearly 43% as the most commonly reported primary drug of choice.
- Heroin has remained fairly steady and showed a small decrease of 14% in Fiscal Year 2018/2019, but returned to fiscal year 2017/2018 numbers.
- Other Opiates/Synthetics has shown a 34% decrease in fiscal year 2019/2020, when previously, it had stayed fairly steady for the prior three fiscal years.

The top six primary drugs of choice for males and females are as follows:

Drugs of Choice	% of Males	% of Females
Alcohol	28%	24%
Cannabis	15%	15%
Heroin	12%	10%
Suboxone	8%	9%
Opiates	6%	8%
Cocaine	6%	8%

Type of Treatment Client Referred to:

Detoxification	77
Inpatient Rehabilitation	82
Dual Diagnosis Inpatient Rehab.	2
Halfway House	0
Outpatient Treatment	585
Methadone Maintenance	3
Intensive Outpatient Treatment	1
Partial Hospitalization	1
Intervention Group (Education)	16
No Treatment	111

Type of Referral Source:

DUI Unit	388
Self	147

Probation or Parole	130
CYS	83
Courts/ Judge/ Attorney	30
Outpatient Providers	4
Jail	77
Juvenile Placement Facility / Schools	8
Hospital	14
Family	6
Social Services	3
Physician	50
Employer/EAP	1
Employer/EAP	9

Driving Under the Influence

DUI Victim Impact Panels:

There were a total of 6 DUI Victim Impact Panels conducted in Fiscal Year 2019-20. The show rate increased from 68% in the previous fiscal year to 78% of the individuals scheduled during this period to attend completed the one time session. This program is very impactful for the court ordered first time DUI offenders. The panels add humanizing and heartfelt value to the required 12 ½ hours of DUI education. Due to the COVID-19 pandemic, one Victim Impact Panel was cancelled in March 2020 and the remaining three programs were held virtually.

<i>DUI Victim Impact Panel Enrollment Total</i>	<i>DUI Victim Impact Panel Completion Total</i>	<i>DUI Victim Impact Panel Completion %</i>
274	213	78%

CRN Evaluation Appointments:

During Fiscal year 2019-2020, 714 CRNs were completed, which was higher than the 687 CRN evaluations from the previous fiscal year. The show rate of 58% is commendable given COVID-19 pandemic that began in mid-March 2020. This show rate is only slightly lower than the 60% from fiscal year 2019-2020. During the pandemic, the DUI Unit staff quickly adjusted the CRN process from in-person screenings to using a virtual platform.

AHSS, Multiple Offender Program, Intervention Group:

The DUI Unit instructed twelve morning Alcohol Highway Safety School (AHSS) sessions, as well as nine evening sessions of the 12 ½ hour curriculum. There were also a total of 4 Multiple Offender sessions, as well as a total of 4 Intervention sessions instructed during Fiscal Year 2019-2020. The successful completion rate of participants that are scheduled, satisfy payment, and attend all sessions involved in these educational programs has remained steady. Prior to the COVID-19 pandemic, all educational groups/classes were held in person, however these programs were transitioned to be held virtually so that participants could complete their requirements. These individuals are also successful in completion of their ACT 122 Treatment that is a requirement from PennDot prior to the end of their last session of the DUI School. This increase is in relation to obtaining access to the defendants early in the court appearances and having D&A Assessments completed prior to their plea/sentence or ARD admission date as required by law. These educational pieces were facilitated with 2 full-time staff members.

The following displays the participation rate for each of the DUI group programs:

Total Persons Enrolled	Total Persons Completed	Total Completion %
Day Class – 451	Day Class – 253	56%
Evening Class - 349	Evening Class - 180	52%
MOP - 99	MOP - 32	32%
Intervention Group - 25	Intervention Group - 14	56%

Drug Testing:

The DUI unit continues as the direct administrative unit of the Drug Screening process from FCDAC clients and outside entities. During this fiscal year, a total of 78 hair drug testing appointments were scheduled and 57 hair drug screenings were conducted. Additionally, a total of 630 urine specimens were collected for processing. We continue to foster relationships with the Fayette County Child Custody offices, civil and criminal attorneys, as well as Children & Youth Services. These efforts help to increase the amount of Hair Drug test samples collected, analyzed, and billed.

CRN & D&A Assessment Spreadsheet:

The CRN & D&A Assessment spreadsheet that contains the notation of compliance or non-compliance information has been utilized more. The Central Court MDJ staff have familiarized themselves with the spreadsheet due to sentencings occurring at that jurisdiction level. We have further added additional Adult probation officers to the distribution list, as we are obtaining additional compliance from them for sentencing purposes. There is continuous communication maintained weekly with Adult Probation so they may report to the sentencing judge if a defendant is compliant with completing the CRN & D&A Assessment prior to plea/sentencing or admission into ARD.

Below is a compilation of the DUI Arrests during FY 2019-2020:

Total CRNs:	715
Male	73%
Female	27%

Previous DUI Violations on Driver History	32%
Average Reported Income	\$34,802

Marital Status

Education	
12th grade & below	20%
High School Graduate	52%
Partial College	19%
Undergraduate	8%

Reported Day/Time of Arrest:	
Arrested on Weekend	59%
5:00PM to Midnight	30%
Midnight to 4:00AM	53%

Age at Violation	
Under 18	<1%
18-20 yrs	5%
21-24 yrs	13%
25-29 yrs	17%
30-34 yrs	13%
35-44 yrs	23%
45-54 yrs	16%
55+ yrs	12%
Average Age	38 years old

Blood Alcohol Content (BAC)	
Reminder: Legal limit is 0.08%	
0.20% & Above	12%
0.16%-0.19%	13%
0.10%-0.15%	18%
0.08%-0.09%	4%
Below 0.08%	1%
Refusals	20%

Single	47%
Married	17%
Divorced	16%
Widowed	3%
Separated	7%
Live-In	12%

Employment	
Employed	62%
Unemployed	22%
Disabled	11%
Retired	2%

Reason for Traffic Stop	
Vehicle Violation	24%
Weaving/Careless Driving	22%
Moving Violation	22%
Crash	20%
Other (Asleep @ wheel; Domestic; Disabled vehicle, etc..)	13%

Alcohol/Illicit Drug Identification	
Severe Problem Drinker	56%
Social Drinker	32%
Controlled Substance Use (Illicit/Non-prescribed)	77%
Marijuana Use	39%
Narcotics Use	10%
Cocaine Use	16%
Prescribed Controlled Substance Use (Narcotics, Stimulants, Anti-Depressants, Depressants)	30%

Treatment

The treatment staff at FCDAC consists of six 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

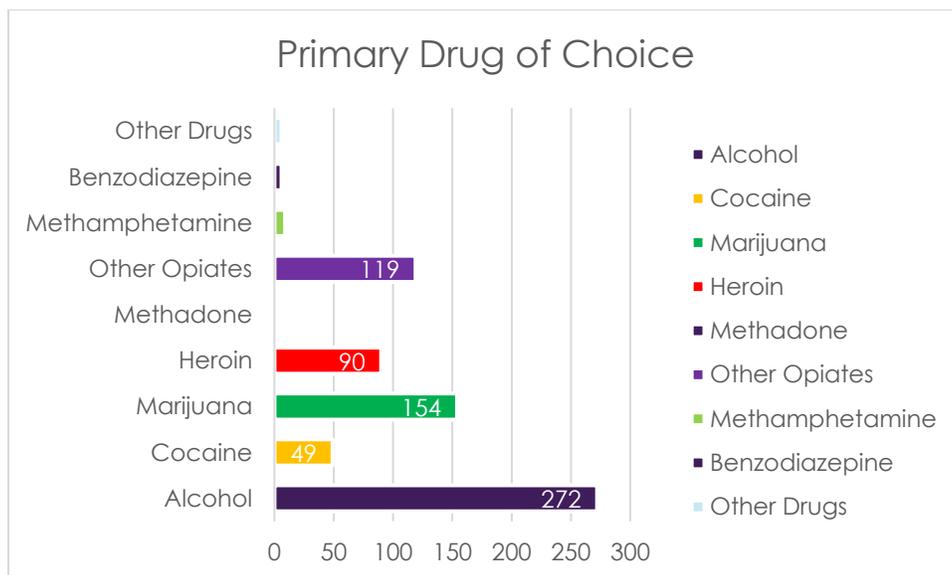
prescribes low doses of buprenorphine, monitors each client's individual progress, and then slowly titrates the individual off the medication in an effort to reduce withdrawal symptoms and increase psychosocial supports. MAT is most effective when paired with psychotherapy in an effort to address the psychosocial factors that can contribute to or compromise long-term recovery.

In addition to FCDAC's outpatient detoxification program, many clients benefit from prescribed oral or injectable naltrexone. These medications are both FDA approved to help prevent opioid relapse. During the 2019-2020 fiscal year, a total of 298 naltrexone injections were administered 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 many federal agencies.

During the 2019-2020 fiscal year, the treatment unit has provided outpatient services to 708 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:

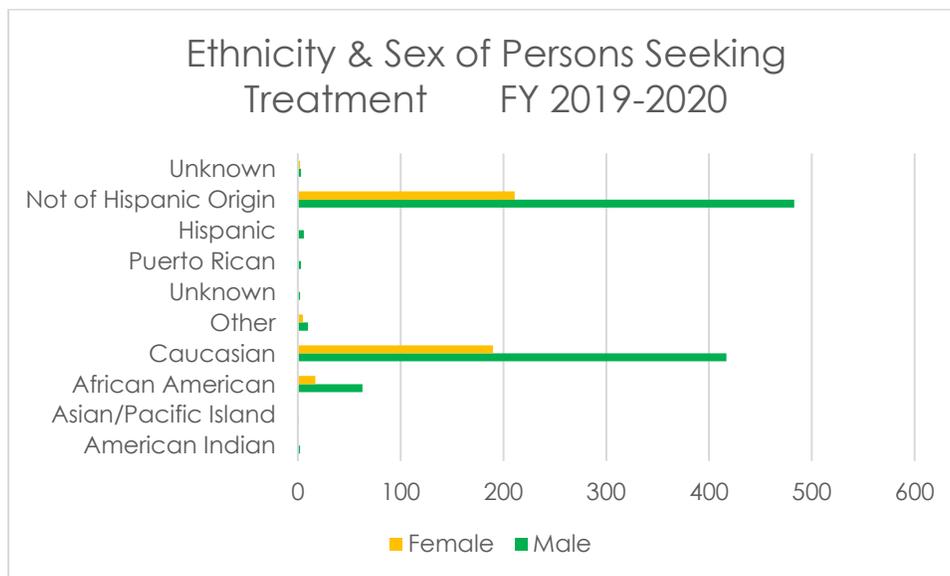
Primary Drugs of Choice:



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

Referral Source	# of Persons
Community Service Agencies	79
County Probation/Parole	172
Courts/Legal	474
D/A Care Provider	29
DUI	290
Clergy	4
Employer/EAP	6
Family	2
Federal Probation	6
Hospital/Physician	6
Juvenile Probation	14
Other Non-Voluntary	6
Other Voluntary	25
School	2
Self-Referral	110
State Parole/State Probation	36

Ethnicity 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:

Discharge Reason	# of Persons
Completed Treatment - No Drug Use	294
Completed Treatment – Referred to Lower LOC	4
Left with Facility Advice	10
Left Against Facility Advice	10
Terminated by Facility	248
Incarcerated	7
Referred to Another D&A Facility	43
Other	30
Referred to Non- D&A Facility	5
No Show	165

EXPENSE REPORT for Fiscal Year 2019-2020

Salaries	\$1,517,801	43.03%
Benefits	\$525,515	14.90%
Staff Development	\$10,512	0.30%
Meeting and Conference Expenses	\$156,366	4.43%
Consultant	\$172,087	4.88%
Occupancy Expenses	\$165,035	4.68%
Insurance	\$45,463	1.29%
Communications	\$219,102	6.21%
Office Supplies	\$39,935	1.13%
Minor Equipment & Furniture	\$36,232	1.03%
Program Supplies	\$85,521	2.42%
Staff Travel	\$8,329	0.24%
Inpatient	\$282,318	8.00%
Outpatient	\$180,670	5.12%
Client Services	\$360,357	10.22%
Equipment Maintenance	\$21,930	0.62%
Equipment Leases	\$24,564	0.70%
Other	\$35,711	1.01%
Staff Travel-Non DDAP Reimb.	\$41	0.00%
Shelter	600	0.02%
Total	\$3,527,132	100.00%

Expenditure by Categories

Administration	\$335,165
Prevention	\$990,862
DUI	\$291,665
Outpatient Treatment	\$1,263,231
Case Management	\$360,357
Inpatient Treatment	\$285,252
Shelter	\$600
TOTAL	\$3,527,132

Revenues by Source

PA State Funds	\$473,654
Federal Prevention Block Grant	\$137,934
Federal Treatment Block Grant	\$391,017
Problem Gambling Funds	\$64,515
State Gaming Funds	\$29,766
BHSI Funds	\$537,928
Act 152 Funds	\$86,175
Human Service Development Fund	\$27,180
DUI Client Fees	\$102,011
Other Third Party Fees	\$789,429
SPF-Rx Grant	\$317,110

Opioid Crisis Tx Grant	\$11,363
State Opioid Response Funds	\$144,184
Tobacco Grant	\$40,337
Staunton Farm Grant - Strategic Plan Consultant	\$25,000
Staunton Farm Grant - Prevention Emergency SAP Grant	\$8,275
PCCD - Opioid Misuse Prevention Program Grant	\$166,459
Community Services - SAP	\$48,745
PCCD - Restrictive Intermediate Punishment Grant	\$25,233
Community Action Housing Grant	\$77,538
PCCD - Treatment Services in County Jail	\$23,279
TOTAL:	\$3,527,132

:

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, 2020)

Officers

Jo Ann Jankoski, D.Ed
Chairperson

Shujuane Martin, MBA
Vice-Chairperson

Garnet Gordon, Esq.
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Vincent Weaver

Edward Zelich, D.Ed

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

Wade Riess, Chief Fiscal Officer

Valarie Barnhart, Administrative Assistant

Leonard Jacoby, *IT Generalist II*

FCDAC STAFF

(as of June 30, 2020)

Case Management

Matthew Dean
Case Management Specialist

Melissa Dubovich
Case Management Specialist

Joyce Kurnot,
Case Management Specialist

DUI

William Miller
DUI/Prevention Supervisor

Charles Wortman
DUI/Prevention Specialist

Treatment

Sarah Stone, *Treatment Supervisor*

Joseph Augustine
Treatment Specialist

Lynn Stone
Treatment Specialist

Amanda Miller
Treatment Specialist

Angela Tiech
Treatment Specialist

Lacey Sawyers
Treatment Specialist

Malory White
Treatment Specialist

Prevention

Erica Usher, *Prevention Supervisor*

Melissa Brownfield
Prevention Specialist Trainee

Lee Winterhalter
Prevention Specialist

Melissa Reese
Prevention Specialist

Lorraine Yasenosky
Prevention Specialist

Kelly Reshenberg
Prevention Specialist

Clerical

Kathleen Crayton
DUI Unit

Anita Stark,
Treatment Unit

Chelsea Mastowski
Fiscal Dept.

Pam Watts
Case Management Unit

Janet Oberlechner
Billing Dept.

Robin Wiles
Treatment Unit

Linda Rable
Treatment Unit

Lois Wilson
Treatment Unit

Brenda Wyne
Treatment Unit

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