

CHESTER COUNTY

DEPARTMENT OF DRUG AND ALCOHOL SERVICES



**ANNUAL REPORT
FY 2003/04**

The Department of Drug and Alcohol Services was established by the Chester County Commissioners as a public Executive Commission. The Department serves as the Single County Authority (SCA) for Chester County, responsible for the planning, coordination, and administration of community alcohol and other drug prevention, intervention, and treatment services. This is accomplished with the assistance of the Chester County Advisory Board, whose members are appointed by the Commissioners.

Chester County Drug and Alcohol Advisory Board Fiscal Year 2003/04

An advisory board of community volunteers is appointed by the County Commissioners to advise them on the most effective management of services to prevent addiction in the County and to intervene and treat addicted county residents.

Advisory Board Members

Casey Duffy, Chairperson
Joyce Lundquist, Vice Chairperson
Heidemarie G. Bryan, Secretary/Treasurer
Norman J. Pine, II
Michele L. Tucker
Jeffrey Toalton
Holly W. Acosta
Ralph J. Burton
Elizabeth Dean
Andrew Bruton
Denise Bivens
Elizabeth Walls, Ex-Officio
Angela Linden, Provider Representative
Maureen Neff, Provider Representative

Department Staff

Kim P. Bowman, Executive Director
Vince H. Brown, Deputy Director

Administrative Unit

Linda Morris Zonetti, Fiscal Director
Geri Thomas, Administrative Officer
Larry Harrison, Program Analyst
Meg Polvino, Prevention Specialist/Program Monitor
Cathy Vaul, Program Representative
Nathan Pillai, Accountant
Connie Jones, Fiscal Technician
Betty Wade, Administrative Assistant
Gloria Anderson, Secretary

Case Management Unit

Jamie Johnson, Case Management Supervisor
Kate Blonsky, Case Manager
Rebecca Harkins, Case Manager
Karen Strojan, Case Manager
Lee Edmonds, Secretary
Sheila Thomas, Secretary

Chester County Department of Drug and Alcohol Services

Government Services Center, Suite 325
601 Westtown Road, P.O. Box 2747
West Chester, PA 19380-0990

VISION

Promote alcohol and other drug policies and programs that improve the quality of life and reflect the cultural and economic diversity of the community.

MISSION

Ensure that quality alcohol and other drug intervention and treatment, as well as alcohol, tobacco and other drug prevention programs are provided for citizens in an efficient and cost-effective manner.

GOALS

The service delivery system for county residents has been designed to provide comprehensive and accessible care for both adolescents and adults in need of treatment or intervention services and assistance to communities trying to prevent addiction. There are several overriding goals that the Department tries to achieve in the design and delivery of prevention, intervention, case management, and treatment services as listed below:

- Assist communities in becoming their own change agents.
- Increase community recognition of alcohol and tobacco as drugs.
- Prevent the continuation of intergenerational family dysfunction due to substance abuse.
- Promote understanding of the disease concept and the hereditary risk factors associated with addiction.
- Assist clients in creating self-sufficient lives.
- Continuously evaluate the services provided to insure that they are accessible, high quality, effective, cost-efficient and best meet the needs of the citizens of Chester County.

DESCRIPTION OF DEPARTMENT SERVICES

PREVENTION

Prevention services focus on decreasing the risk factors and increasing the protective factors associated with the development of unhealthy behaviors. During the 2003/04 fiscal year, the Chester County Department of Drug and Alcohol Services supported alcohol, tobacco and other drug (ATOD) prevention efforts in the six (6) federal prevention strategies (Information Dissemination, Education, Alternative Activities, Problem Identification & Referral, Community Based Process, and Environmental) via contracts with licensed prevention providers.

By sharing knowledge and providing technical assistance, the community prevention provider assists individuals and neighborhoods in strengthening their resistance to alcohol and other drug usage by using a variety of strategies, including the Communities That Care model. The main provider subcontracted as a community-based prevention resource was:

The Coad Group Exton, PA	(610) 363-6164
-----------------------------	----------------

Two other subcontracted prevention providers specializing in interacting with children in the context of their home communities in order to establish a foundation for building refusal skills later in life were:

Holcomb Behavioral Health Systems Exton, PA	(610) 363-1488
--	----------------

The Lincoln Center Bridgeport, PA	(610) 277-3715
--------------------------------------	----------------

The following prevention provider conducted a peer leadership program for youth ages 12 to 16. Program participants were trained in a variety of topics including drug education, HIV/AIDS, family education, social problems, self-esteem, and life skills:

Community Youth and Women's Alliance Coatesville, PA (formerly Coatesville YWCA)	(610) 384-9591
---	----------------

INTERVENTION

Intervention services are designed to identify individuals abusing alcohol or other drugs, and support their engagement in treatment. Intervention services may seek to identify early symptoms of substance abuse and intervene to prevent progression, or they may be designed to utilize a crisis or problem an individual is experiencing to engage them in needed treatment. The Department, via a subcontractor, provided the following intervention program in fiscal year 2003/04:

Student Assistance Programs (SAP): SAP programs identify middle and high school students experiencing problems in school that may be due to the use of alcohol or other drugs. The SAP program provides a point of intervention, assessment and referral to treatment.

The subcontracting agency for the SAP fiscal year 2003/04 was:

The Coad Group
Exton, PA

(610) 363-6164

CASE MANAGEMENT

The Department's Case Management Unit provides two forms of case management services: Administrative Care Management and Intensive Case Management. Administrative Care Management is responsible for coordinating and managing funding resources for the most intensive levels of addiction treatment. Administrative Care Managers insure that appropriate levels of care and lengths of stay are authorized for clients in non-hospital and inpatient treatment services. They follow the client throughout the county-funded treatment system to insure that services are appropriately provided, that there is continuity of care, and that aftercare planning is completed.

Intensive Case Management is a direct service designed to assist in determining and obtaining needed support services. This could include, but is not limited to, housing, employment, education, and medical services. Intensive Case Managers may assist clients both during their treatment involvement, as well as when they are not in treatment. They also act as client advocates when necessary.

Prison-based Assessment:

The Case Management Unit also provides drug and alcohol assessments at Chester County Prison. Referrals for assessment include both pre- and post-trial clients.

The Case Management Unit is part of the Department and has offices in West Chester, at the Government Services Center. The phone number is listed below:

Department of Drug and Alcohol Services Case Management Unit (CMU):

West Chester, PA

(610) 344-5630

TREATMENT

Treatment services provide assistance to people whose lives have been negatively affected by their own or another's use of alcohol and/or drugs. The majority of the County's drug and alcohol funds are utilized to purchase treatment services for addicted individuals to begin the path of recovery and self-sufficiency.

Assessment:

The addiction treatment system uses several "points of entry" for individuals seeking treatment. Each of these sites uses a standard procedure and instruments to assess the severity of addiction and determine the level of care needed. The points of entry during fiscal year 2003/04 are listed below:

Center for Addictive Diseases (CAD), Exton, PA	(610) 648-1130
Department of D&A Services CMU, West Chester, PA	(610) 344-5630
Gaudenzia Outpatient, West Chester, PA	(610) 429-1414
Northwestern Human Services (NHS), Kennett Square, PA	(610) 444-0555
Northwestern Human Services (NHS), Phoenixville, PA	(610) 933-0400
Riverside Care, Coatesville, PA	(610) 383-9600

After assessment, the individual is referred to the most appropriate level of care in the treatment continuum, which could be one or more of those listed below:

Detoxification:

Detoxification provides clinical supervision and assistance in the management of withdrawal for drug or alcohol dependent or intoxicated persons. Detoxification can be medically monitored or medically managed. Fiscal Year 2003/04 subcontractors located in the county are listed below; a complete list of subcontracted detoxification resources is available at the Department office.

Bowling Green Brandywine, Kennett Square, PA	(610) 268-3588
Malvern Institute, Malvern, PA	(610) 647-0330

Residential Non-Hospital:

Often called "rehab", this is an intensive live-in therapeutic environment. The specific program and length of stay (varying from 14 to 180 days) is based on individual needs. Treatment subcontracts include a variety of programs, ensuring that clients' special needs will be met, whether they are adolescents, women, women with children, Spanish speaking only, have co-occurring drug and alcohol and mental health or health disorders, or are involved in the criminal justice system. The complete list of fiscal year 2003/04 subcontracted agencies is available at the Department office. Following are those located in Chester County:

Bowling Green Brandywine, Kennett Square, PA	(610) 268-3588
CYWA Samara House, Coatesville, PA	(610) 384-9591
Gaudenzia House, West Chester, PA	(610) 399-6929
Gaudenzia Kindred House, West Chester, PA	(610) 399-6571
Malvern Institute, Malvern, PA	(610) 647-0330

Halfway House:

This live-in combination of therapy and support is offered to recovering person(s) having completed prior treatment, who may be homeless or near homeless and unemployed or in need of intensive support for successful transition to sober independent living. Self-sufficiency is the goal. While there are no halfway houses located in the

county, the Department contracts with a number of halfway houses outside of Chester County. The fiscal year 2003/04 Half-way House Subcontractor list is available at the Department office.

Partial Hospitalization:

Partial hospitalization is intensive treatment provided on an outpatient basis for clients with serious addiction problems that have sufficient supports to engage in treatment in the community. Services are provided according to a planned regimen consisting of regularly scheduled sessions at least 3 days per week with 10 or more therapeutic hours per week. Following is a list of fiscal year 2003/04 subcontracted providers:

Center for Addictive Diseases, Exton, PA	(610) 648-1130
NHS Kennett Square, Kennett Square, PA	(610) 444-0555
NHS Phoenixville, Phoenixville, PA	(610) 933-0400
Riverside Care, Coatesville, PA	(610) 383-9600

Intensive Outpatient:

Intensive outpatient consists of group-based therapy provided at least three (3) days a week plus individual counseling once a week for a total of 6–9 hours therapy. There was one provider of this service for fiscal year 2003/04:

Gaudenzia Outpatient, West Chester, PA	(610) 429-1414
--	----------------

Outpatient Drug-Free:

Counseling is provided one or two hours per week and may be primary care, aftercare from rehab, or utilized as an intervention to encourage individuals to enter more intensive services. Initial assessment to determine referral to the appropriate level of care is also provided. Treatment is also provided for family members affected by another's alcohol or drug abuse. The outpatient subcontractors in fiscal year 2003/04 are listed below:

Center for Addictive Diseases, Exton, PA	(610) 648-1130
Gaudenzia Outpatient, West Chester, PA	(610) 429-1414
NHS Kennett Square, Kennett Square and Oxford, PA	(610) 444-0555
NHS Phoenixville, Phoenixville, PA	(610) 933-0400
Riverside Care, Coatesville, PA	(610) 383-9600

Spanish speaking services are available by a bilingual and bicultural therapist at NHS Kennett Square.

Outpatient Methadone Maintenance:

Methadone, a medication to prevent withdrawal associated with opiate dependence, is provided in conjunction with individual and group therapy. The subcontractor for this service in fiscal year 2003/04 was:

Advanced Treatment Systems, Coatesville, PA	(610) 466-9250
---	----------------

Rental Assistance/Life Skills:

Rental assistance and counseling in budgeting, job seeking, and related skills are provided to recovering homeless or near homeless persons who are actively involved in treatment. The goal is to assist these individuals in obtaining stable housing. The subcontractor for this service in fiscal year 2003/04 was:

Coatesville CYWA, Coatesville, PA

(610) 384-9591

NOTE: Due to state budget cuts at the onset of fiscal year 2003/04, this service was only rendered during the period July 1 – September 30, 2003 then ended.

Advocacy:

The provider listed below assists Chester County residents having difficulty identifying and accessing drug/alcohol treatment benefits/services via their insurance company. The provider works directly with individuals or families to assist them in filing grievances and appeals, case management, and follow up.

Bucks County Council on Alcoholism
and Drug Dependence, Inc.

1 (800) 221-6333

Correction/Detention Services:

Recognizing the role alcohol and other drug abuse plays in the criminal justice system, the Department supports intervention services at the Chester County Prison and the Juvenile Detention Center.

At Chester County Prison, CiviGenics, Inc., using a psycho-educational model, provides intervention services for inmates. Additionally, assessments to determine post release treatment recommendations are conducted by the Department's Case Management Unit.

At the Juvenile Detention Center, intervention and treatment services are provided by Abonnir Counseling Associates.

FISCAL YEAR 2003/04 ACCOMPLISHMENTS AND SIGNIFICANT EVENTS

ADMINISTRATION

- Maintained full range of treatment services while threatened with budget cuts equaling 60% of treatment funding during state drug and alcohol budget crisis. Crisis was not resolved until late in December 2003, with full restoration of funds.
- With provider system, developed and implemented major changes in screening and assessment process in response to new BDAP requirements.
- Developed and distributed Treatment Policy and Procedure Manual to all points of entry to system.
- Chester County SCA, through it's Case Management Unit, assumed responsibility for all drug and alcohol assessments in County prison.
- Participated in development of competitive selection plan and process for Managed Care Organization (MCO) subcontractor for HealthChoices program.
- Transitioned to new MCO subcontractor, Community Care Behavioral Health Organization (CCBHO), in January 2004.
- Participated in development of competitive selection plan and process for County Mental Health contract for new adult full service mental health provider that includes integrated service for MISA population.
- Conducted a subcontractor satisfaction survey, with a 57% response rate. The survey indicated a 95% overall satisfaction rate for Department drug and alcohol functions.
- Member of Chester County Human Services, Systems of Care initiative, a practice model that results in an integrated service plan with the family as a primary partner in the development of the plan.
- In collaboration with Chester County Prison, undertook competitive selection process for prison-based drug and alcohol services to male and female inmates.
- Updated drug and alcohol outreach to Intravenous Drug Users (IDUs) and females, among others, via collaboration with Chester County Health Department HIV nurse/educator and the street outreach worker from the primary HIV/AIDs services provider in Chester County.
- Underwent Quality Assurance Assessment follow-up from the Bureau of Drug and Alcohol Programs.

- Team member for Department of Human Services' Community Collaborative. This endeavor is complimentary to the Systems of Care and seeks to develop an umbrella community collaborative to help inform, coordinate and evaluate the many efforts from prevention through treatment that are focused on strengthening children and families.
- SCA representatives are active team members on multiple intersystem projects including, but not limited to: Juvenile Detention Center Screening and Assessment Project; Juvenile Probation Mental Health Project; Drug Court; Mental Health Forensic Committee; Children and Youth Multi-Disciplinary Team; Mental Health Forensic Diversion Committee; CASSP Administrative Review Team; and the Local Housing Option Team.
- Participated in a Tri-State Workforce Development Summit convened by the Northeast Addiction Technology Transfer Center and Single State Agency Directors of Pennsylvania, New York and New Jersey.
- Continued partnership with Corrections and Adult Probation/Parole to monitor and modify prison-based drug and alcohol services, if necessary.
- Trained 93 people in the following topics: Confidentiality, Pennsylvania Client Placement Criteria, Adolescent Problem Severity Index, Adolescent Level of Care Placement Criteria, Treating the Mentally Ill Substance Abuser, and Case Management of Publicly Funded Clients.
- Continued partnership with Chester County Courts in the ongoing operation of Drug Court, maintaining assessment/treatment/intensive monitoring functions, and also reinforcing mental health protocol.
- Maintained routine assessment of client satisfaction with services, via quarterly surveys, but transitioned responsibility for the survey process from Client Satisfaction Team (CST) to SCA due to state budget cuts at onset of fiscal year.
- Participated on human services project team developing mechanisms for uniform monitoring/reporting of subcontracted providers.
- Managed 17 revenue sources, 33 subcontractors, and 8 agreements encompassing over 94 programs to insure that a comprehensive prevention, intervention, and treatment system was available to county residents.

CASE MANAGEMENT

- Managed a total of 584 unduplicated clients in residential treatment, including detox, rehab, and halfway house.
- Provided Intensive Case Management (ICM) services to 47 Chester County residents.

- Continued participation in the Child Adolescent Service System Program Administrative Review Team (CART) with Children, Youth and Families (CYF), Mental Health/Mental Retardation (MH/MR), Juvenile Probation Office (JPO) and Community Care Behavioral Health (CCBH), in a collaborative effort of child-serving systems to identify and eliminate barriers to the client.
- SCA Case Management Supervisor participated in BDAP workgroup tasked with drafting case management screening, assessment, supervision, and staff development requirements for SCA and subcontracted providers.
- Continued participation on the multi-disciplinary team meeting held by Chester County Assistance Office for the “Maximizing Participation Project” for Temporary Assistance for Needy Families (TANF) clients approaching the time limit on benefits.
- In March 2004, participated in the National Alcohol Screening Day by providing an Alcohol Problems Screening Questionnaire. Provided direction and guidance to treatments services, if appropriate. Also, provided literature and brochures.
- In September 2003, hosted local National Drug and Alcohol Awareness month by providing informational literature, program brochures, and 12-step meeting lists to the public.
- Participated in the Local Housing Options Team (LHOT) housing project. Participants included the Department of Human Services, Community Develop, Self Determination, Veterans Affairs, Human Services, Inc., Residential Living Options, MH/MR, and Cerebral Palsy of Chester County. The LHOT was formed in response to needs identified via multi-disciplinary meetings.
- Continued participation in the multi-disciplinary trainings to new County, human service employees on how to “Access Child-Serving Systems”; workgroup includes Children, Youth and Families, Juvenile Detention, Drug and Alcohol, and Mental Health.
- Continue to participate in the “Weed & Seed” project coordinated by Coatesville Community Development.
- Case Management staff participated in a total of 131.25 training hours, through trainings offered by the State, County and various other organizations. The trainings included such topics as Respectful Work place, Understanding Dual Diagnosis, Confidentiality and Pharmacology.
- Completed 220 assessments at Chester County Prison.

TREATMENT

- Provided treatment, funding assistance for an unduplicated total of 2,278 Chester County residents.

- Subcontracted outpatient providers acting as “points of entry” implemented changes in screening, assessment, supervision, and training in response to new Bureau of Drug and Alcohol Programs (BDAP) requirements.
- Maintained minimum credentialing standards for therapists providing level of care assessments.
- In conjunction with the County Mental Health Office, maintained a drop-in support group in the West Chester area for individuals with co-existing mental illness and addictive disorders.
- A high percentage of outpatient/intensive outpatient/partial survey respondents expressed satisfaction with their experience: 93% believed their therapist knew what they were doing; 90% believed coming to their therapist was helpful; and 89%, if they had it to do all over again, would return to the agency for services.
- Began work on designing a form for the comprehensive assessment of clients at points of entry to the treatment system with the goal of having one tool that will satisfy the requirements of case management and clinical bio-psychosocial assessment.
- Under subcontract with Gaudenzia, arranged for assessment/referral services for homeless population on-site at the St. Agnes day shelter in West Chester.

PREVENTION

Alcohol, tobacco and other drug (ATOD) prevention services and activities for fiscal year 2003/04 targeted risk factors that were identified via a countywide needs assessment conducted in 2002. Risk factors are defined as characteristics in the community, family, school, and individual’s environments that are known to increase the likelihood that a person will engage in one or more problem behaviors. Based on community input, as well as various other data sources, we identified and prioritized the following two (2) risk factors:

- Favorable Attitudes Toward the Problem Behavior
- Friends Who Engage in the Problem Behavior

Indicators were selected to measure each risk factor. Baseline data was collected at the end of fiscal year 2003/04 and will continue to be monitored and reported.

ATOD prevention services were provided in each of the following six (6) federal prevention strategies: Information Dissemination, Education, Alternative Activities, Problem Identification, Community Based Process, and Environmental. Listed below are highlights from programs funded during fiscal year 2003/04:

- Provided awareness and knowledge of the nature and extent of substance abuse and addiction, and its effects on individuals, families, and communities via the services identified below. Services were provided upon request to a variety of civic, business, faith based and community organizations:

- Personal and confidential, 24 hours/7 days a week telephone information and referral line – responded to 796 calls
 - Speaking Engagements – 23
 - Health Fairs – 21
 - Health Promotion – on an ongoing basis, disseminated ATOD information/articles to 131 Parent/Teacher Organizations (PTO)
 - Maintained Resource Library
 - Satellite Resource Centers – 10
 - Printed Material Dissemination – 57,447
 - Audiovisual Materials Disseminated – 22
 - Insurance Advocacy Service – served 23 individuals
 - Newsletters Developed – 13
 - Newsletters Disseminated – 5,094
- Particular emphasis was placed on community mobilization efforts; this includes grassroots coalitions, as well as more formalized coalitions known as Communities That Care (CTC). Coalitions were provided with the skills, tools and resources needed to move toward self-sufficiency. Services provided to 15 unduplicated coalitions includes, but is not limited to:
 - Technical Assistance – Responded to a total of 180 technical assistance requests; with provider staff attending over 70 individual coalition meetings
 - Trainings and Workshops – Four (4) trainings were conducted. Areas included: Risk-Focused Prevention, CTC Basic Training, CPR for CTC and Fundraising.
 - Surveyed Coalition Members on Future Training and Resource Needs – Data used for fiscal year 2004/05 planning purposes.
 - Systematic/Strategic Planning – Supported the costs of strategic planning in three (3) CTC sites.
 - Caring Communities Consortium – Held two (2) networking/in-service training opportunities specific to CTC sites.
 - “Umbrella” Organizations – Four (4) CTC sites successfully partnered with existing organizations to better leverage resources and respond to the needs of the communities they serve.
- Beginning Alcohol and Addictions Basic Education (BABES) – prevention education program served 851 children, ages 4 to 8, with a seven (7) session, school-based program addressing the following topic areas: peer pressure, coping skills, decision-making, self-image and basic ATOD prevention education.
- Peer Leadership Programs/Activities
 - Trained 29 youth, ages 12 to 16 as peer leaders. Youth went out into their community and schools as peer educators, following training in such areas as: ATOD prevention education, HIV/AIDS, Self-Esteem, Social Problems and Life Skills. Youth sponsored two (2) dances that were open to the community.
 - Trained 85 high school and college age youth in peer leadership skills to work as positive role models for at-risk youth.

- Provided financial support and technical assistance for the annual Students Against Destructive Decisions (SADD) conference. A total of 170 students, active in their local SADD chapter, attended a one-day conference with motivational speakers and a presentation by Mothers Against Drunk Drivers (MADD). Workshops on related topics were also offered.
 - Provided financial support and technical assistance for a leadership training weekend retreat for youth. A total of 120 youth representing six (6) school districts attended.
- After School Enrichment Program – partnered with local elementary school and community coalition to provide academic, social and recreational opportunities for 34 “at-risk” youth through trained volunteers.
 - Post Prom Activities – provided ATOD prevention education information and funding to 11 community coalitions planning post-prom activities. Post-prom planning committees attended two (2) information sharing/networking meetings, and were provided ATOD prevention information via an email distribution list. Approximately 4,256 students attended post-prom activities.
 - Supported the Chester County Health Department’s Tobacco-Free Coalition in its mission to: promote educational opportunities that discourage tobacco use advocating for smoke-free environments and reducing the rate of tobacco sales to minors. Technical assistance was provided to the coalition and helped to achieve the following results: 6.7% decrease in tobacco sales to minors from fiscal year 2002/03, 100% increase in the number of smoke-free dining establishments in Chester County.
 - Youth Survey – conducted a survey of 16,725 youth in grades 6,8,10 and 12, representing 12 school districts and one (1) technical school on their behavior, attitudes and knowledge concerning alcohol, tobacco and other drugs, as well as other antisocial behaviors and risk and protective factors. Survey results provide a benchmark for ATOD use (as well as comparison with statewide data) and helps assess whether current prevention and intervention services are achieving desired outcomes. Results are used by the SCA, as well as school districts and community coalitions for planning purposes.

INTERVENTION

Student Assistance Program:

The Student Assistance Program (SAP) identifies and refers secondary level students for whom substance abuse and/or mental health issues may be a barrier to their achieving academic success. County-funded SAP services included the following:

- District Council - monthly networking/information sharing meetings for SAP professionals. Membership includes public, private/parochial schools, charter

- schools and alternative education programs. Meeting format included in-service trainings highlighting various local organizations and resources.
- Provided technical assistance to 39 SAP Teams.
 - Sponsored two (2) workshops for SAP professionals: Engaging Resistant Parents and Teens (45 attendees) and Substance Use and Abuse presented by the PA Attorney Generals Office (45 attendees).
 - Developed and published nine (9) newsletters targeting over 460 SAP professionals per issue. Newsletters addressed issues relevant to the SAP process.

SAP Statistics

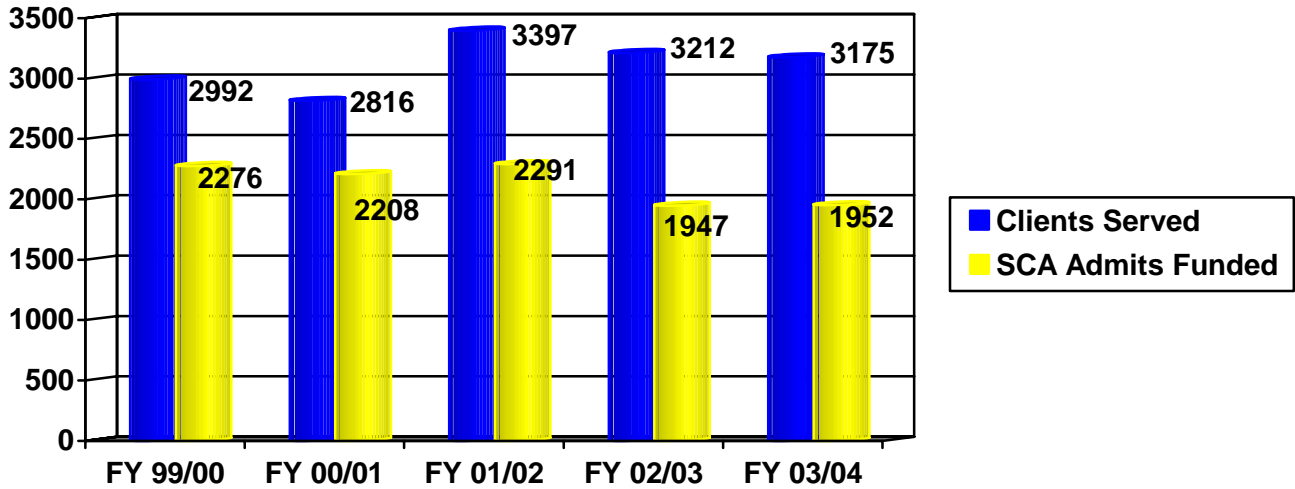
The following statistics reflect students seen by county-funded SAP liaisons and is not representative of the entire SAP program in Chester County:

- 768 students were seen for problem identification and referral.
- 248 students were assessed for behavioral health services (drug and alcohol and/or mental health issues).
- 126 students were referred for school-based alcohol and other drugs (AOD) Intervention Groups; 55 (44%) students completed the group.
- 155 students were referred to AOD treatment:
 - 135 students were referred to community-based outpatient treatment
 - 20 students were referred to inpatient AOD treatment

Treatment

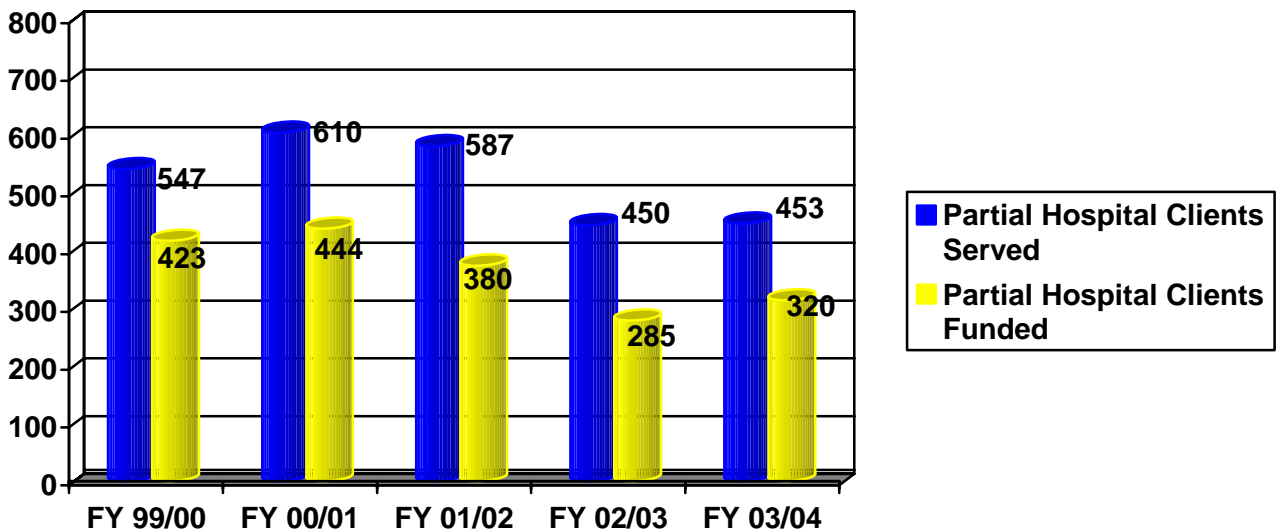
Outpatient: 3,175 clients were served in the county contracted outpatient system of care during fiscal year 2003/04. Of those admitted, 1,952 or 61% were funded to some degree by the SCA.

Outpatient Clients FY 99/00 – 03/04 (Unduplicated)



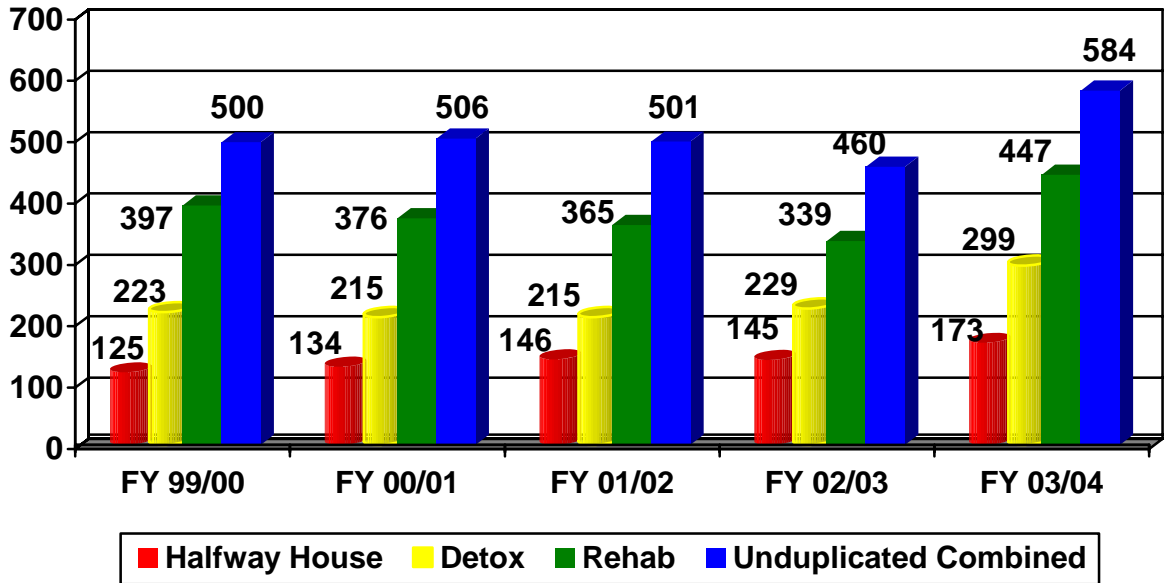
Partial Hospitalization: 453 clients were served in the county contracted partial system of care during fiscal year 2003/04. Of those admitted, 320 or 71% were funded to some degree by the SCA. While the total served remained fairly stable, there was a 12% increase in those needing county funding assistance.

Partial Hospital Clients FY 99/00 – 03/04 (Unduplicated)



Residential: A total of 584 unduplicated citizens participated in SCA funded residential treatment services during fiscal year 2003/04. This was 124 more than the previous fiscal year. An increase was experienced at all residential levels of care. This is the highest number of residential clients served in 5 years.

Residential Services Over Time



Special Populations and Services

HIV Testing & Counseling:

HIV prevention counseling/testing continued at the six (6) existing drug and alcohol outpatient clinics sites: Northwestern Human Services Phoenixville, Kennett Square, and West Chester; Riverside Care and Community Youth and Women's Alliance (both in Coatesville) and Advanced Treatment Systems in Thorndale. The chart below provides statistics for this program at 5-year intervals since fiscal year 1991/92.

Fiscal Year	# Pre-test Counseled	# Tested	# and % Testing Positive	
91/92	272	132	4	3%
96/97	154	86	1	1%
01/02	131	119	0	0
02/03	160	127	0	0
03/04	129	121	0	0

Injection Drug Users (IDUs):

Fiscal Year	Clients Served	IDUs Served	% of Clients Served
99/00	3,460	163	5%
00/01	3,487	192	6%
01/02	3,380	190	6%
02/03	3,273	173	5%
03/04	3,486	168	5%

Pregnant Women/Women with Children:

Fiscal Year	Total Served	Women Served	% of those Served	Pregnant, Parenting Served	% Served
99/00	3,460	898	26%	275	31%
00/01	3,487	851	24%	113	13%
01/02	3,380	885	26%	62	7%
02/03	3,273	837	26%	152	18%
03/04	3,486	781	22%	84	11%

SERVICES DESIGNED SPECIFICALLY FOR TARGETED POPULATIONS

Latinos:

One outpatient subcontractor (NHS Kennett Square) provides bilingual, bicultural treatment services for Latino clients. Residential rehab services for Latinos were available through contracts with Nuestra Clinica in Lancaster PA, CURA in Newark, New Jersey, and Valley Forge Medical Center/Hospital in Norristown, PA. Detox services for Latinos are available via subcontract with Valley Forge Medical Center/Hospital, as well.

Women with Children/Pregnant Women:

Two (2) residential treatment programs for pregnant women/women with children are located in Chester County. Samara House, a program of the Coatesville CYWA, and Kindred House, a Gaudenzia program, both provide specialized treatment services for pregnant women and women with young children. In addition to the treatment services for the women, on-site prevention programming occurs for the children. Chester County also contracted with five (5) additional agencies located outside of the County for residential rehab treatment for pregnant women/women with children and one (1) halfway house service.

All subcontractors give intake priority to pregnant women. Outreach targeting pregnant women/women with children is required of all ambulatory care subcontractors.

Children and Adolescents:

All outpatient providers serve adolescents on site. NHS Kennett Square/Oxford also provides treatment at public schools in their geographic areas.

Abonnir Associates, based in West Chester, assess and treat juvenile offenders at the Detention Center in Lima.

Chester County also subcontracted with four (4) out of county agencies for residential rehab treatment, which exclusively serve adolescents.

Elderly:

Center for Addictive Diseases, a subcontracting agency, operates an outpatient group therapy program specifically for the elderly person experiencing problems with alcohol and/or other drugs.

Criminal Offenders:

The SCA continues to be involved in the Chester County Drug Court, both as a member of the management team and through contracts for treatment services. In fiscal year 2003/04, this included treatment representation in Court by NHS of West Chester, Gaudenzia West Chester Outpatient, and Riverside Care.

During fiscal year 2003/04, Civigenics, based in Reading PA, continued providing ongoing group and individual services to male and female prison inmates at the County Prison. In collaboration with the correctional center at the prison campus, the SCA also participated in the monitoring of CiviGenics pre-release intensive recovery program.

Effective July 1, 2003, the Department's Case Management Unit assumed responsibility for the assessment, referral, and case management for the incarcerated addicted offender.

HIV Infected:

Gaudenzia People With Hope in Philadelphia, a specialized residential rehab program exclusively for adult, HIV infected clients was available via contract.

Injection Drug Users:

All treatment providers give intake priority to injection drug users. In the event of a waiting list, a plan is in place to insure that interim services are provided to the addict.

Mentally Ill:

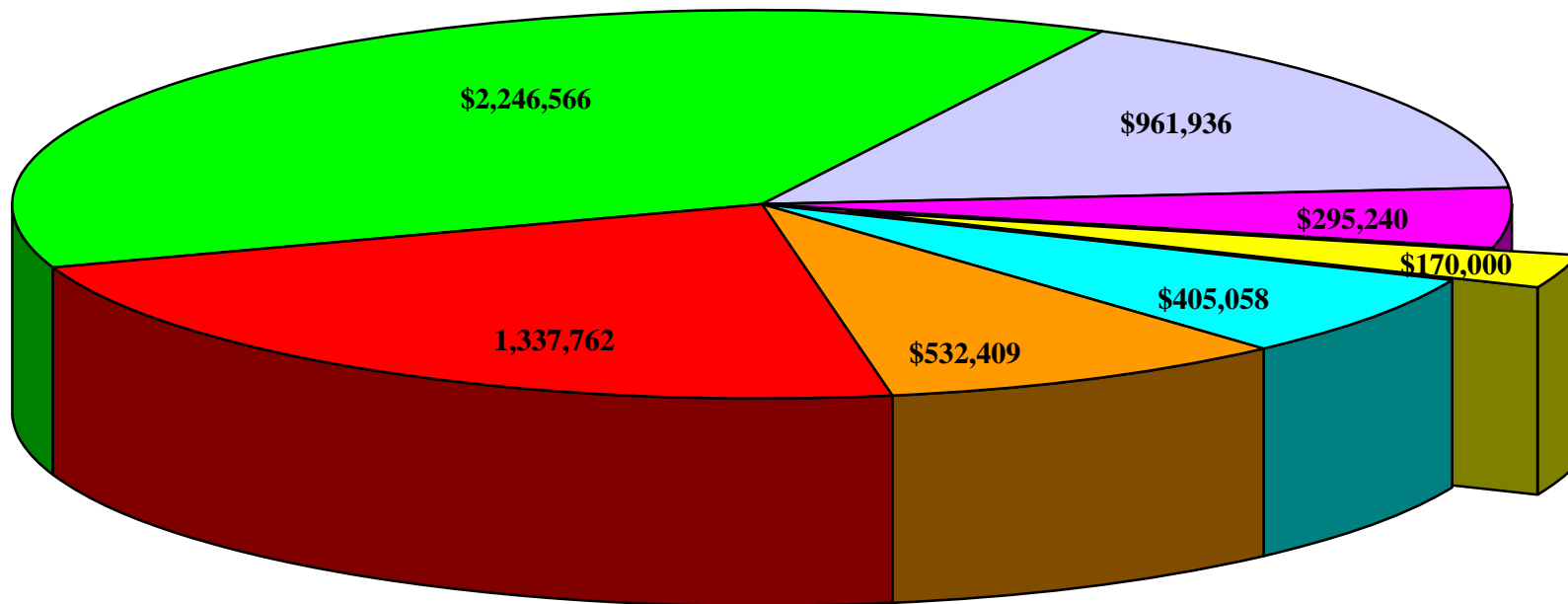
The SCA jointly funded with the County Mental Health Office supportive group therapy service, which operated on an open-ended "drop-in" type basis to clients diagnosed with both drug/alcohol dependence and mental illness. This service was co-facilitated by Gaudenzia West Chester Outpatient. Additionally, six (6) contracts for short-term inpatient, non-hospital treatment are in place for mentally ill substance abusers (MISA).

FISCAL INFORMATION

Total Revenue for the Chester County Department of Drug and Alcohol Services for fiscal year 2003/04 was \$5,948,971. Revenue Sources Included federal funding streams, PA Department of Public Welfare funding, PA Department of Health State Base, PA Commission on Crime & Delinquency (PCCD), Human Services Development Fund (HSDF), Chester County matching funds, and other miscellaneous sources (DUI Fines, Interest Income, Reinvestment, Children, Youth and Families Funding).

A Chart showing the breakdown of these funding sources can be found below.

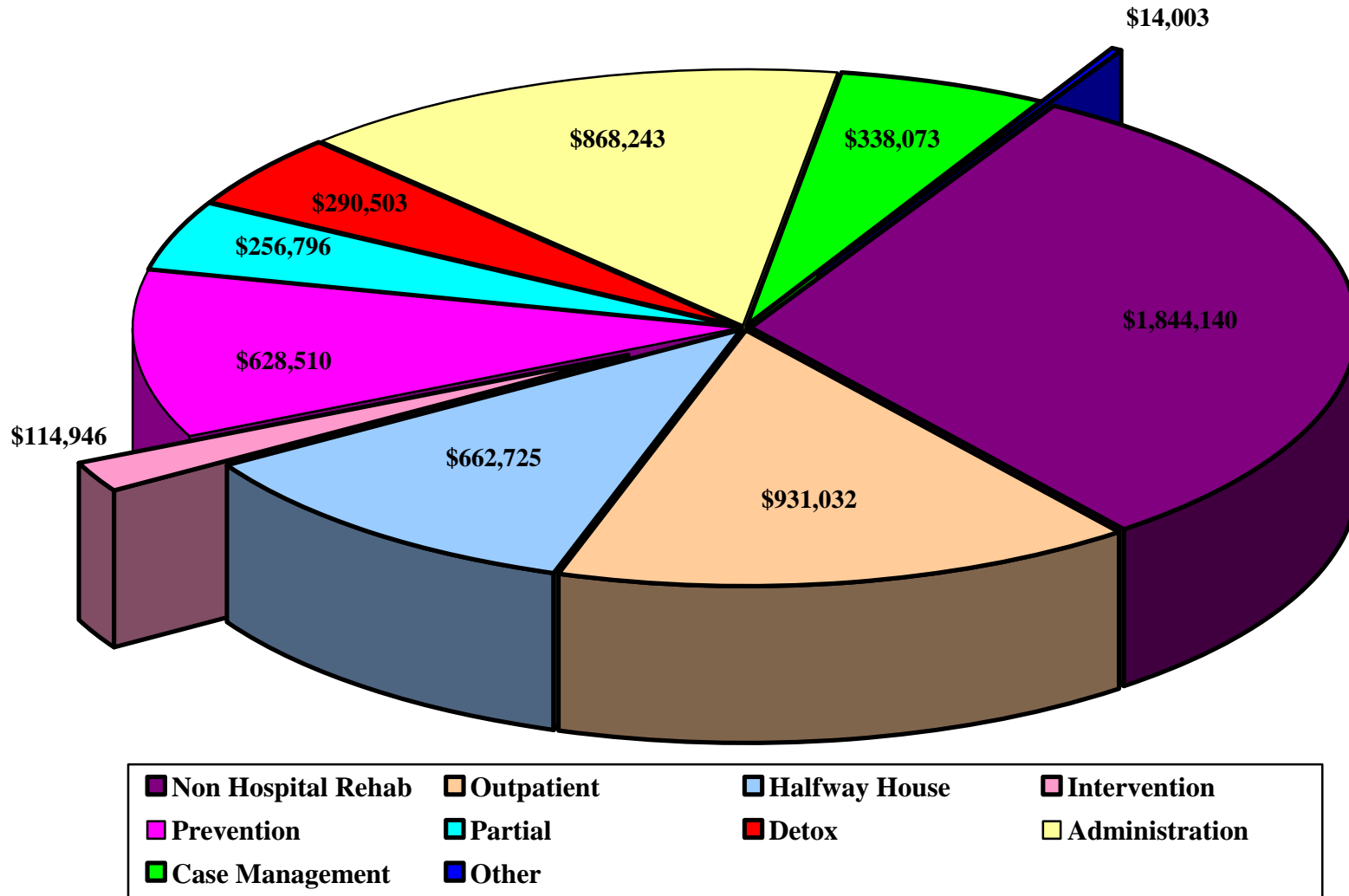
Total Revenue FY 2003/04 - \$5,948,971



■ Federal ■ BHSI ■ STATE ■ PCCD ■ HSDF ■ County ■ Other

Total Expenditures Fiscal Year 2003/04

\$5,948,971



DEMOGRAPHIC DATA FOR CLIENTS SERVED 2003/04

Treatment Client Profile:

The typical client admitted to outpatient treatment in fiscal year 2003/04 was a Caucasian male who primarily abused or was addicted to alcohol. Fifty-two percent of these clients fell between the ages of 18-34; another thirty-nine percent fell between the ages of 35 and 54.

The typical client admitted to partial hospitalization treatment was male African American, with the largest group falling into the 35 - 54 age range (52%). While the primary substance used by the largest percentage of partial clients was alcohol, there was a greater percent of other drug use (cocaine, crack, heroin) for partial clients (38%) than for outpatient clients (19%).

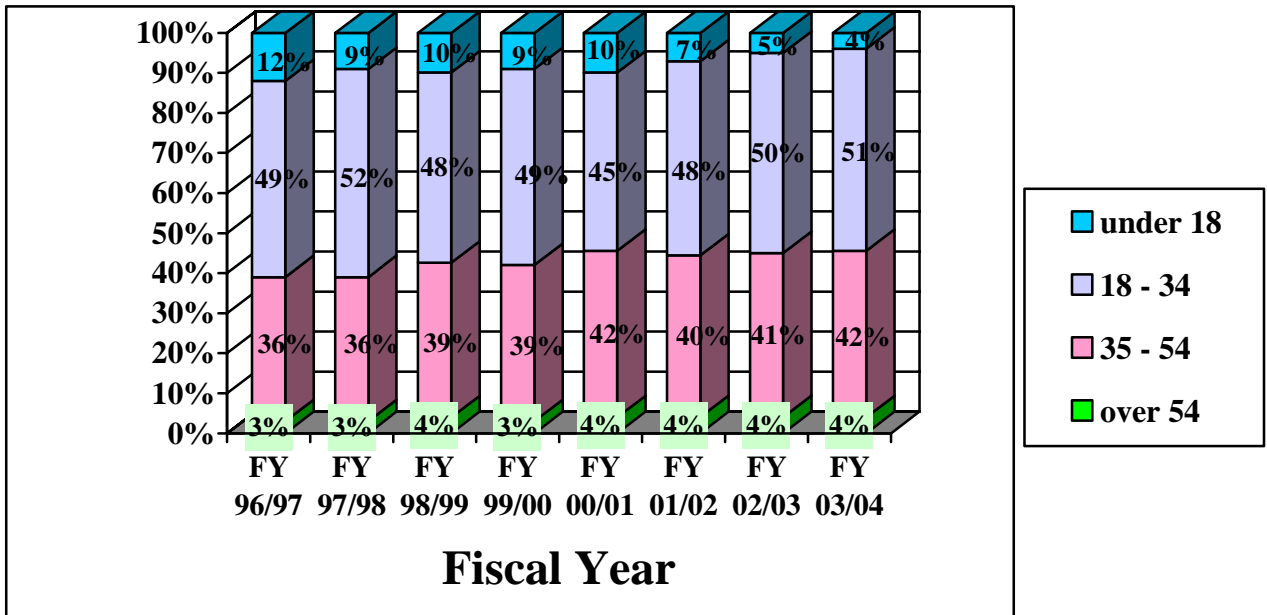
The typical client admitted to county-funded residential treatment was a male Caucasian; African Americans and Latinos as a combined percentage represented 28% of residential clients. A smaller proportion of residential clients primarily used alcohol and a higher proportion (53%) primarily abused cocaine, crack, and heroin when compared to partial. Residential clients also tended to fall more heavily into the 35 to 54-age range (51%).

Charts:

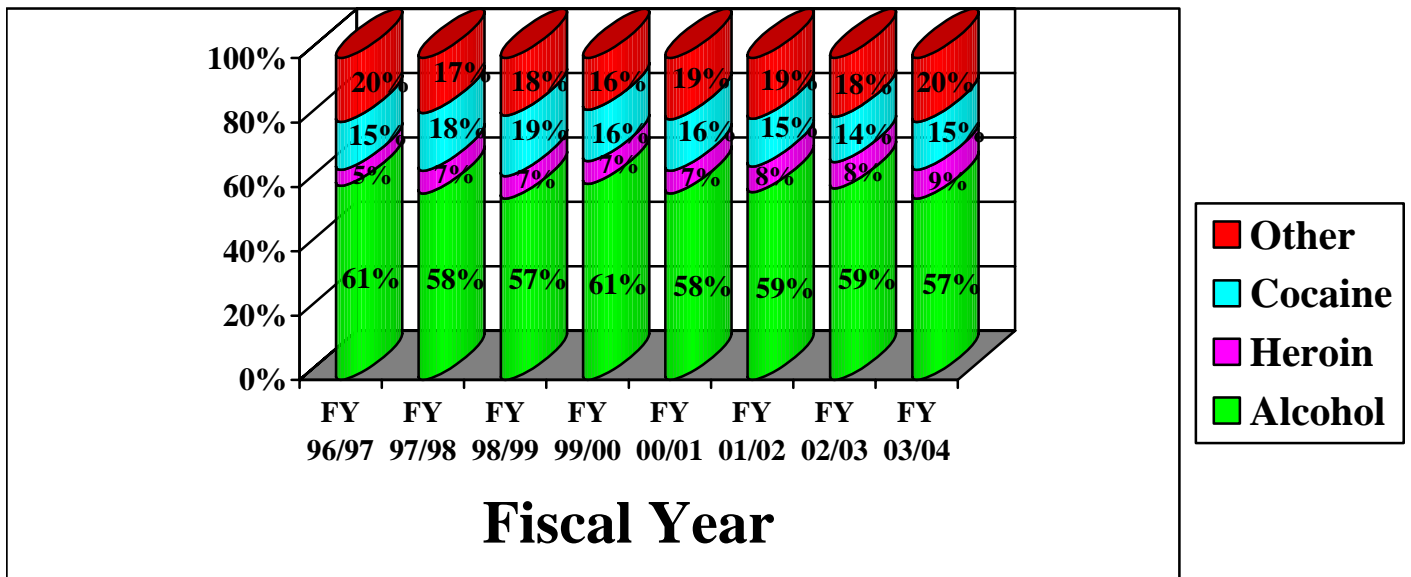
The charts on the following pages illustrate the overall demographic nature of the clients treated in county funded programs. The data includes all clients served at funded outpatient/IOP and partial hospitalization treatment providers regardless of funding source, and only clients funded at residential treatment providers (i.e. detoxification, rehab, and halfway house).

"Clients Served" includes all clients active in treatment at the beginning of the fiscal year, as well as those admitted during the subsequent twelve months to county funded facilities. The client count is unduplicated within each activity (i.e., outpatient, residential).

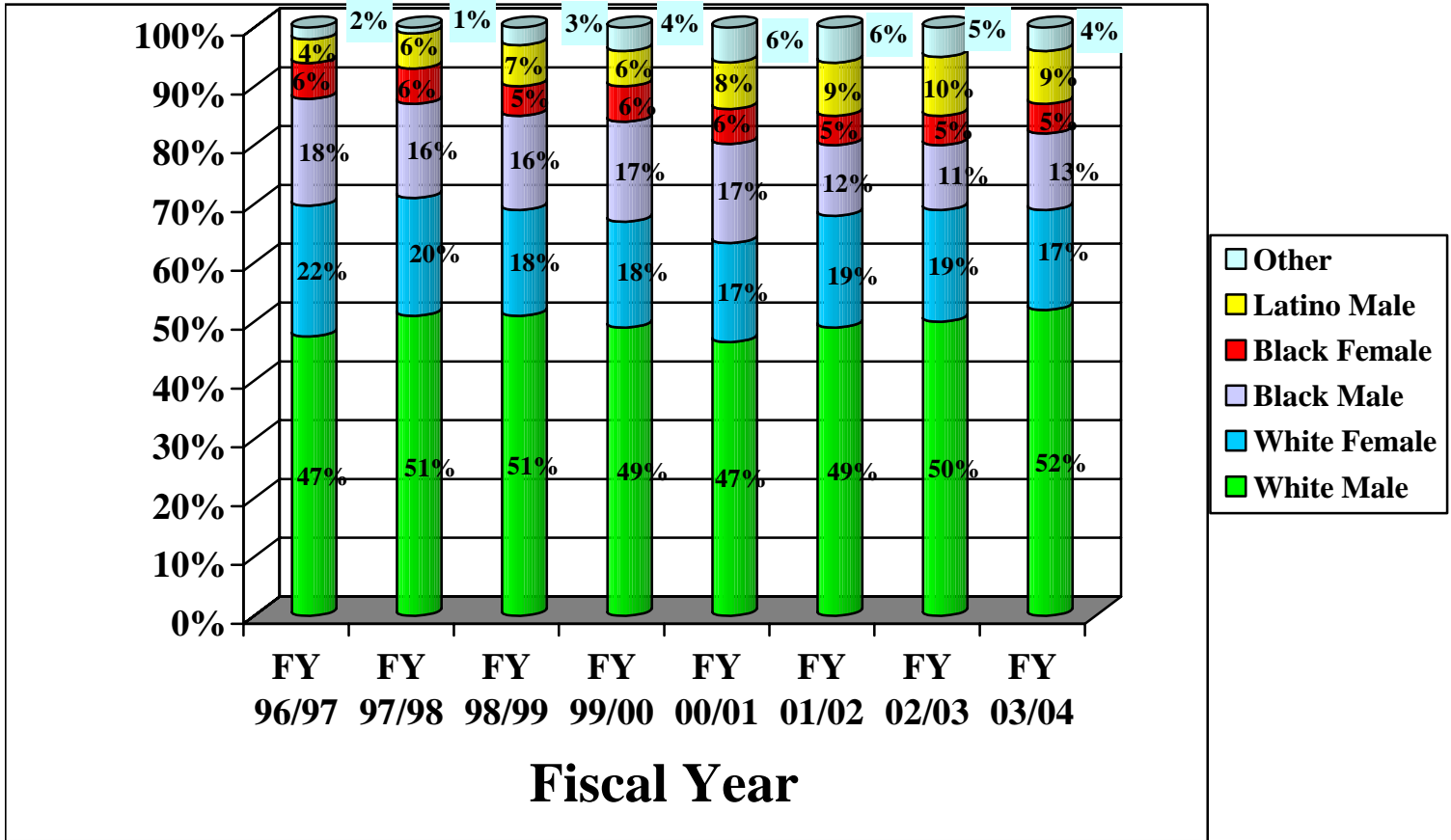
Age Over Time - Fiscal Years 96/97 - 03/04



Primary Drug at Admission FY 96/97 - 03/04



Gender and Race/Ethnicity of Clients FY 96/97 - 03/04



CHESTER COUNTY COMMISSIONERS 2004

*Carol Aichele
Andrew E. Dinniman
Donald A. Mancini*

These services are made possible by the Chester County Commissioners, Pennsylvania Department of Health, Bureau of Drug and Alcohol Programs, and the United States Department of Health and Human Services. Some data for use in this report were obtained through the county's contract with the Pennsylvania Department of Health. The Pennsylvania Department of Health specifically disclaims responsibility for any analysis, interpretations, or conclusions therein.

*Edward Rendell, Governor
Commonwealth of Pennsylvania*

*Calvin B. Johnson, Secretary
Department of Health*

Subcontracting agencies also receive contributions from local United Way chapters, foundations, and private donations.