

York County  
Commissioners

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**YORK/ADAMS  
DRUG & ALCOHOL COMMISSION**

*Recovery on the Horizon*

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Adams County  
Commissioners

Randy L. Phiel  
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Audrey L. Gladfelter, Administrator

**Provider Working Group Meeting  
June 16, 2014  
9:00am – 11:00am  
United Way Building**

**\*\* NOTICE: For the purposes of meeting notes, a digital recorder is in use \*\***

**1) Introductions**

- a. Providers (Providers may also *BRIEFLY* share any relevant program updates or changes.)

No updates shared.

- b. YADAC Staff

No updates shared.

**2) Guest Speaker: Donna Creager – Family Group Decision Making**

Donna shared about FGDM. FGDM is part of York County Human Services, and came to the county about three years ago from a private provider. The FGDM model comes from New Zealand in the 90's, and is defined to focus on family strengths, at a neutral location, with a neutral facilitator, over a meal, coming together to address problems and develop an action plan. It's not a therapeutic process, but rather an open and honest discussion with family members (with family being defined broadly) to develop a plan and if need be, a follow-up plan.

**3) Topics**

**Administration – Audrey Gladfelter, YADAC Administrator**

**1. 2014-2015 Budget Meetings have concluded:**

- a. Budget meetings are completed

Shared as an FYI.

- b. Highlights

In short, for Prevention, expand outreach into Adams county (Alder Health), work at expanding services into Adams County. Audrey also thanked providers for working on expanding into the middle schools as this was a noticeable gap in services. Audrey also noted that this continues to be an area that YADAC wants to focus on. Also, there is a focus on the provision of direct services and as a blanked reminder, especially for prevention explore other funding options besides our funding. She also thanked prevention providers for doing pre & posttests, even if not needed. The data is helpful and she would encourage providers to do them.

For Case management, Audrey tanked those providers for doing evidence based treatment and reminded providers to maintain fidelity to the model and to be consistent throughout the sessions and case notes that they are not piecing things together.

Audrey shared that she sits on the York County IP board and evidence based will be a focus as they work to develop an approved provider list.

On Medical Assistance, Audrey reminded providers that they need to have a process in place to follow up with clients and ensure that they are applying for MA. We do require the provider to

have a copy of the denial letter and in a worst case scenario; a provider without such a notice may be required to pay back funds.

Audrey also shared that Family First will help clients with the MA process.

Audrey reminded providers that people who are at risk of overdosing are now part of the YADAC priority population. Screening tools should be updated to include questions to identify people at risk of overdosing. Several providers expressed concerns that this change would lead individual's to use this as a means of accessing treatment. While validating these concerns, Audrey noted there will always be those who attempt to access services by alternative means. That said, YADAC wants to identify those individual's at risk of an OD.

Audrey also noted that we would be looking at the capacity notification requirements and maybe tweaking them as providers seem to be across the board on this topic.

She also shared that as a result of provider input, we would be giving providers a month to transition to new forms once we issue them before monitoring for their usage.

Audrey noted that TW Ponessa has contracted with a Spanish interpreter at both of their location with psychological services at both locations.

c. FY 14-15 Contracts

Audrey shared that the contract process is underway and they should be out shortly.

**2. Provider Monitoring update**

Billie shared that with the exception of one provider, all letters and citations are out and we are awaiting the CAP Response which are due back on June 24<sup>th</sup> after which they will be reviewed. There will also be 90 days follow-ups. Billie shared that she thought the process went well but there will be some changes next year.

**3. Prison Programs treatment programs/treatment coordination**

b. Adams County Adult Correctional Complex

Audrey followed up on this from the last meeting sharing that Pyramid holds the contract to perform LOCA at the prison. Now, they are working with the ACACC to possibly develop and pilot a two year program to provide outpatient treatment in the jail and see what impact that will have on their population and possibly expanding this beyond the two year mark.

c. York County Prison

Audrey shared with providers that YCP is undertaking treatment as well. Every inmate receives a Texas Christian University Screen to determine if clients have D&A issues. They have two certified addiction counselors, they are currently serving 100-120 clients, either one on one or groups.

Several providers raised concerns about this being "treatment". The counselors maintained their credentials prior to working for YCP. This is funded by the prison, not YADAC and is not subject to DDAP regulation.

Michele Britton also shared that WDR offers two mobile assessors who can travel to the prison or where they are needed.

d. Pleasant Acres Annex

Audrey shared that they have two "counselors" who provided CBT and employment skills programming. This is for parolees, work release, domestic relations clients and reentry inmates. They are looking into relapse prevention programs as well.

e. MA pilot program update

This is a follow up to the proposed pilot where YADAC was working with MA to start the MA process for clients while incarcerated to that when they are released that they are ready to access treatment. Secretary Tennis (DDAP) and Secretary Mackereth (PA Department of Welfare) have asked that this project be put on hold until there is a Memorandum of Operations in place between SCA's and local MA offices. This may take another month or two.

Michele Britton expressed concerns that we are catering to people who have done something wrong while people "on the street" are having to wait for services. While validating those concerns, Audrey noted that long term this will save funding. Unfortunately, there are no easy answers and entities are having to do the best they can with the resources available.

#### 4. **Overdose:**

Audrey attended the Summit the previous Friday. She shared some alarming statistics about addiction, such as a pa resident is 500 times more likely to die from an OD than a gun shot and that 1 in 4 will die from an OD. It was also shared that if you sum up all of the costs, lost productivity, etc., of "drugs" alone, it would total 8 Billion dollars. Additionally, for every \$1 invested in treatment, there is a savings of \$7.

It was also shared that for the first time, two of the top county priorities are related to drugs and alcohol.

DDAP has been charged with developing a state plan to address overdoses.

Audrey continued by sharing that we are number 3 in the state for opiate use and that PA is a gateway state for the delivery of drugs. Audrey noted that at this meeting it was shared that Prevention is effective. In an effort to get more "bang for the buck", we would be looking at identifying which prevention programs generate the most bang for the buck and then assign services to our providers rather than have them tell us what services they will perform.

At the meetings lunch break they had a video of Naloxone , a nasal medication from blocking opiates. That shared, it is still vital to call 911 when dealing with an OD.

Suboxone is the number 1 drug smuggled into jail.

Audrey shared that various counties shared about what is taking place in their county. Westmoreland is placing a mobile assessor in the ER during some non-traditional hours as a mobile assessor to do a warm handoff into treatment. Bucks shared that they had a very successful drug take back event, collecting more meds than any other county. They also worked out an agreement with a Movie Theater to do a PSA prior to a movie.

Audrey shared that York County Task force will be established. Steve Warren will be YADAC's representative. While there are currently no providers on the list, Audrey is hopefully that as things progress, that they will be included in a subcommittee.

Deb Bard shared about a task for that she went to in Dauphin County.

#### 5. **LOCA & Client continuum of care process**

Audrey reminded providers that the LOCA is only a starting point for entering care. The entry points, aka those who should be doing a LOCA, are the Detox providers, WDR York Assessment Center and the YADAC outpatient providers. These are the only entities should be performing a LOCA. At this point Audrey discussed a flowchart of the referral process (Attached).

Michele Britton (WDR/CRC) at this point shared that if there is a county funded client who has called the WDR National Resource Center (aka the "Call Center") and after a bed search, there is not a bed available, it is the client's responsibility to call again the next day. If they are waiting for a specific facility, they should notify them to be put on a waiting list for that facility. If there is a client who sincerely wants a bed, first available, and shares that they cannot get in, get them in contact with Michele, who will try to assist them in obtaining a bed. Her number is 717-968-3640.

Billie Kile shared that the Detox policy, limiting admissions has been lifted. A new policy is being drafted and will be released when finalized.

## 6. Human Services Plan

### a. Public meeting

Audrey shared as an FYI

### b. Advocacy

Audrey shared that staff from Human Services will be meeting with area legislators to discuss the budget and possible funding cuts. She also thanked providers for providing statistics to help with advocacy.

## 7. CCBH reinvestment initiatives update

Half-Way House proposal – Audrey shared that Gaudenzia has been chosen as the contracted provider. She also shared that there has been some delays in this process as the state has requested some revisions to the reinvestment plans. Health Choices is continuing to work on this and the required revisions in hopes of getting a contract in place. This will be a small York County based half-way house, some 14 beds.

## 8. PACDAA updates:

### a. Audrey shared that a Criminal Justice Subcommittee has been discussed.

### b. Healthy PA update – Audrey shared that there is no update. There has been now news from the Federal Government but it has been suggested that DPW hire nearly 700 additional staff members to help with this and processing claims.

### c. Recovery House Workgroup – Audrey shared that this workgroup, made of SCA members and chosen by the number of referrals made, has been tasked with reviewing expectations for DDAP funded Recovery houses and making recommendations.

### d. Advocacy

Audrey shared that PADAA has several items that may be good resources with advocating for D&A services & Funding – Please see handouts.

## 11. DDAP updates:

### a. DDAP Re-Structure

Audrey shared that because of various needs/issues, DDAP will undergo a major review and overhaul. They are currently focused on provider quality. As such, staff has been reallocated to better meet their needs. Special Assistant to the executive office. Moving SAP, SCA Management, Block Monitoring to the Bureau of Administration to better ground the fiscal side of things. Methadone Incident review section (Act 148 of 2013) will be added, however some positions won't be filled into the fy 15-16, which included a methadone fiscal year. It will be a process, with their changes, updating the manuals, and changes to PBPS. Training will remain the same. The focus is on quality of the providers, which means less program reps for SCA's.

### b. Deductible/co-pay waiver

Audrey and Lisa are working together to develop a protocol. However, if a provider has a client who has a client that is having a problem accessing treatment because of a high deductible to contact Lisa or Audrey. Lisa also asked providers for assist on the insurance side of things as this is an area that she is not familiar with.

### c. STAR - Remember that requirements need entered

Audrey shared this as a reminder. A memo will be sent but we will need PCPC and what DDAP requires.

## 12. Technology updates:

### a. Go to meeting

YADAC is in the process of updating some of its technology, and as such Audrey shared that we are working with IT to maybe attempt this in the future.

### b. HSS utilization for Client Management

Audrey shared that we are exploring this for both case management and to help streamline payments to providers.

Some providers expressed a concern that this would be an additional burden on providers. Lisa shared that one provider already uses the system and another may soon. Long term goal would be for YADAC Fiscal staff to be able to pull a report from STAR, upload it into HSS and pay the invoice.

## Case Management – Billie Kile, Case Management Supervisor

### 1. Staff Changes

Welcome Lori Smith who is in the DRC. Jessie Pitzer is the new Case Management Specialist for the DUI court.

### 2. RFA - specialty population

Reminder that there is a space on the RFA for specialty population. This is a federally mandated reporting statistics. Additionally, it allows Lisa to tap additional funding sources.

### 3. Treatment Court Updates

Billie shared the importance of submitting Treatment Court reports. They are a vital source of information and provide the information necessary to work with the various treatment court teams and enter into PAGES.

## Prevention/SAP/Training – Cynthia Dixon, Prevention Program Specialist

### 1. Training

#### a. Two new trainings added – Gambling and Motivational Interviewing

Cynthia shared that the Gambling will lead to a certification in Gambling Addiction – Start Sept 8<sup>th</sup>.

Motivational Interviewing – sometime in November

#### b. Collaboration with Colonial House for CRS training update – Cynthia shared that she is working with Colonial House and is waiting for some things from DDAP.

#### c. PCPC 3<sup>rd</sup> edition training clarification

Cynthia clarified the PCPC and Refresher PCPC. She shared that the PCPC “Refresher” was for those individuals who had taken PCPC v2. During the Refresher, the instructor will compare V2 and V3 to highlight the changes. For new staff, Audrey indicated that she had spoken with Amy at DDAP and her recommendation for then to take PCPC V2 and then the refresher. Audrey shared that while some of the training details was still up in the air, tentatively, the refreshers will start in July, PCPC V3 starts in September with hopes of having everyone using PCPC V3 by January 2015. The YADAC PCPC V3 training will be December 18<sup>th</sup> – this is a full course.

### 2. Systems of Care update

Cynthia shared about her recent Systems of Care Meeting (SOC). This is a committee Cynthia is involved with. Essentially, they work with adolescents who are utilizing county services and are in placement. They have two individuals who conduct a presentation on how these individuals can speak up and advocate for themselves. This involves a lot of peer to peer information and resources. She shared that this was an

excellent presentation and that she hopes to get them in to make a presentation to YADAC. Additionally she suggested that they reach out to YDC and CHOY.

### 3. **CAPOC update**

Cynthia shared that the group is focused on “getting the word out”, encouraging folks to become familiar with the laws and encouraging them to report abuse when they see it.

### 4. **Bus Shelter Advertisement**

These would be educational in nature with the call center number.

### 5. **Housing Recovery Summit**

Cynthia shared that they are looking at how to regulate these houses.

### 6. **Recovery Day Committee update**

Cynthia shared that the event is on September 14<sup>th</sup>, with events starting at 11 am and the Game at 2 pm. This is part of a larger weekend of events, starting on Saturday with an Event in Adams County, the Rase Project’s Event and then the Ballgame on Sunday. It’s a great time, with various events and activities, a health fair, food and a recovery circle. While a good time, the focus is on recovery, celebrating with those who have succeeded in their recovery, helping those looking for recovery and remembering those who have fallen to their addiction. In addition, it is a fundraiser which is a way to give back to the those needing assistance as the funds raised are used to help secure bus passes to get to appointments, clothing for clients looking to go to an interview etc.

### 7. **Radio PSA**

Cynthia shared that YADAC would be looking into doing a PSA and it will be aimed at how to talk to kids about drugs & alcohol.

### 8. **New Prevention policy – P-5 (Injection Drug Overdose Outreach)**

Cynthia shared that there is a new policy posted on the website dealing with YADAC and our outreach efforts.

We have contracted with Alder Healthcare for three levels of outreach for individuals that are at high risk of becoming substance abuse individuals and encouraging those individuals who are currently substance abusers to seek treatment. It also highlights the risks of substance abuse and communicable diseases.

Individual Outreach, without individual risk reduction component – One on one

Individual Intervention, with risk reduction component (Promise Program) which involves a verbal plan to deal with the addiction, a more intensive program (clear), which involves a written plan to deal with the addiction.

Group intervention, which is 2 or more individuals and a comprehensive risk reduction component.

In short these folks will be working on the streets, in the most at risk areas sharing information, bleach and cleaning kits. Audrey shared that the provider is currently working in York City but that they hope to expand, working in Hanover and areas of Adams County. Cynthia introduced Cameron, one of the two outreach workers. After the meeting, Cynthia worked to get the Adams/Hanover providers in contact with Cameron to discuss working in those areas.

They (Alder) will also be gathering statistics, demographic information on who they are seeing, trends, what they are using, why.

## **Fiscal - Lisa Ahmed, CFO**

1. **Fiscal Report** – Lisa shared a new fiscal report. It’s a spreadsheet that she will use in various forums to show where things stand. It is not meant to replace direct communication with providers but rather to give

everybody a general idea as to where things stand financially. Given that next year YADAC will transition to a “one pot” of funds, combining IOP, Partial and OP funding, this will help identify trends.

2. **End of year billing reminder** – All end of year billing for services through June 30<sup>th</sup> must be in by July 15<sup>th</sup>.
3. **DRC billing** – Reminder, if a provider gets a DRC client, that client must be billed separately

The referral will come from Lori Smith who will clearly indicate that the individual is a DRC client. A memo to that effect will be included in the referral paperwork.

#### **Open forum/Wrap-up**

**Note:** Next Meeting will be on: September 15, 2014