Clark County Substance Abuse Advisory Board Annual Briefing to the Board of County Councilors

March 23, 2016



INTRODUCTIONS

- Karen Kaiser, Chair
- Lt. Kathy McNicholas, Vice Chair
- Joey Smith, Executive Committee Designee
- Jessica DeFrees
- Julie DeWitt-Kamada (Past-Chair)
- Lisa Elsasser
- Shane Gardner (Past Chair)
- Armando Herrera (Past-Chair)
- Candis Oliver
- Roy Pulver (Past-Chair)
- Dr. Marcia Roi
- Donnie Rychart
- Philip Sheridan
- Michael Ware

CLARK COUNTY

- Addiction is NOT a choice, it's a chronic brain disease
- Detox, Inpatient Residential and Sobering Unit
- Primary and Secondary Drug Use Youth & Adults
- Cost Benefit Overview
- Budget

LIFELINE CONNECTIONS DETOXIFICATION ADMISSIONS FY 2014-2015 ANALYSIS

In Fiscal Year 2014-2015, there were 1,888 admissions to the Detoxification unit by 1,634 clients

GENDER			
Male	Female		
1038	596		
64%	36%		

NUMBER OF ADMISSIONS PAID BY				
Private Pay	County	Medicaid		
396	589	649		
24%	36%	40%		

	TYPE OF SUBSTANCE IDENTIFIED AT INTAKE					
HEROIN	ALCOHOL	METH	OTHER	OPIATES	COCAINE	THC
889	547	259	96	91	5	3
47%	29%	13%	5%	4%	1%	1%

LIFELINE CONNECTIONS DETOXIFICATION ADMISSIONS FY 2014-2015 ANALYSIS

DISCHARGE OUTCOMES				
	AGAINST			
SATISFACTORY	STAFF			
COMPLETION	ADVICE	OTHER		
1201	576	111		
64%	30%	6%		

Half of the clients present with addictions to multiple substances. This can complicate both the detoxification process and their ability to successfully navigate additional treatment. This chart reflects report the highest usage across the range of substances, regardless of which was reported as the primary, secondary, or tertiary substance of choice at intake.

	DISCHARGED TO					
				Not		
Lifeline	Lifeline Pre	Lifeline	Self Help	amendable to	DSHS	Other
Inpatient	Bed	Outpatient	Groups	treatment	Application	Providers
553	358	319	238	39	347	34
29%	19%	17%	12%	2%	19%	2%

Discharge: Lifeline Connections detox staff refers clients for follow-up services at the time of discharge. Referrals are made in dialogue with the client based on the client's stated wished or intent. "Lifeline Pre-Bed" refers to clients who wish to access inpatient treatment, but who must wait until a bed opens; they participate in weekly outpatient services while waiting. "Not Amendable" is usually associated with clients who left against staff advise, where no discharge plan was in place. "DSHS Application" refers to clients to apply for state insurance so they can pursue further treatment.

LIFELINE CONNECTIONS RESIDENTIAL ADMISSIONS FY 2014-2015 ANALYSIS

In Fiscal Year 2014-2015, there were 642 admissions to the Residential unit by 620 clients

GENDER		
Male	Female	
674	246	
60%	40%	

DISCHARGE OUTCOMES				
Completed				
or	Against Staff	With Staff		
Transferred	Advice	Advice	Other	
395	136	26	85	
62%	21%	4%	13%	

	TYPE OF SUBSTANCE IDENTIFIED AT INTAKE					#115
ALCOHOL	HEROIN	OPIATES	METH	COCAINE	THC	OTHER
219	204	25	139	8	22	3
35% 33% 4% 22% 1% 4% 1%						1%

NUMBER OF ADMISSIONS PAID BY				
Self Pay				
Insurance	STATE	COUNTY		
24	93	304		
3%	13%	41%		

SOBERING UNIT

2015 - 3,122 admissions for a total of 27,000 hours of sobering services

What is the purpose of the sobering unit?

- Engage people to encourage continued treatment and other supports
- Coordinated care
- Overflow for detox
- Relieve emergency department and jails
- Provide a safe environment for individuals while intoxicated
- Reduce public intoxication crimes

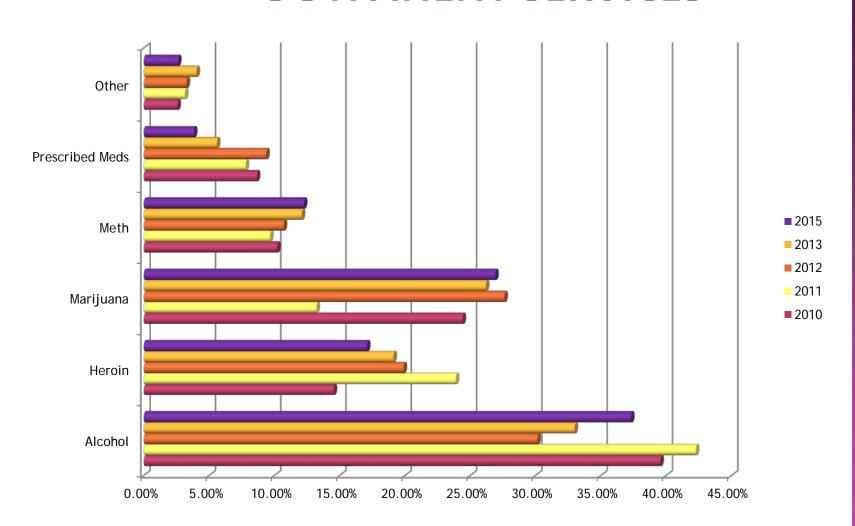
What does the program design look like?

- Similar to Portland, Seattle and Spokane sobering units
- 24 hour medical and support staff
- Case management provided
- 12 hour maximum stay
- Substance use, mental health and community resources offered

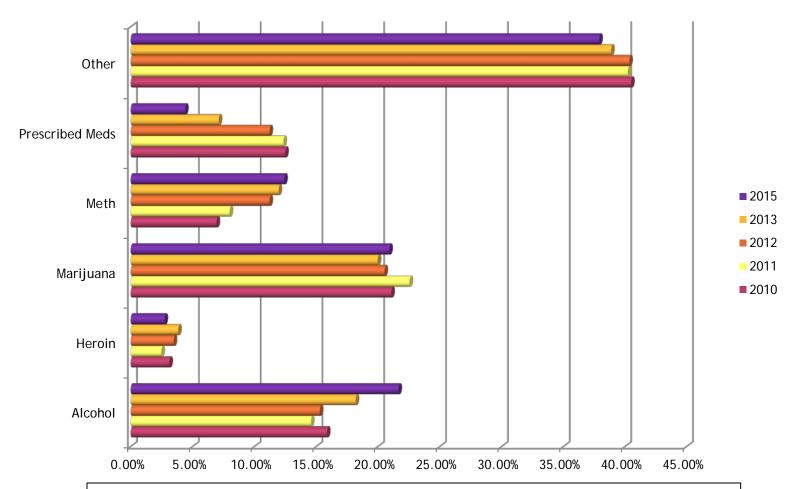
Who qualifies for the service and how do people get a bed?

- Must be currently under the influence of alcohol or drugs
- 18 years and older
- No cost to WA State residents
- Funded by WA State Division of Behavioral Health and Recovery

PRIMARY DRUG USE OUTPATIENT SERVICES



SECONDARY DRUG USE OUTPATIENT SERVICES



Other includes: Amphetamines, Barbiturates, Benzodiazepines, Cocaine, Hallucinogens, Inhalants, Major Tranquilizers, No Substance Abuse, Other, Other Sedatives or Hypnotics, Over the Counter, PCP, Substance Unknown, and Tobacco Products.

COST BENEFIT OVERVIEW

Every \$1 spent on addiction treatment produces \$12 in savings related to health care, crime and criminal justice costs (www.samhsa.gov).

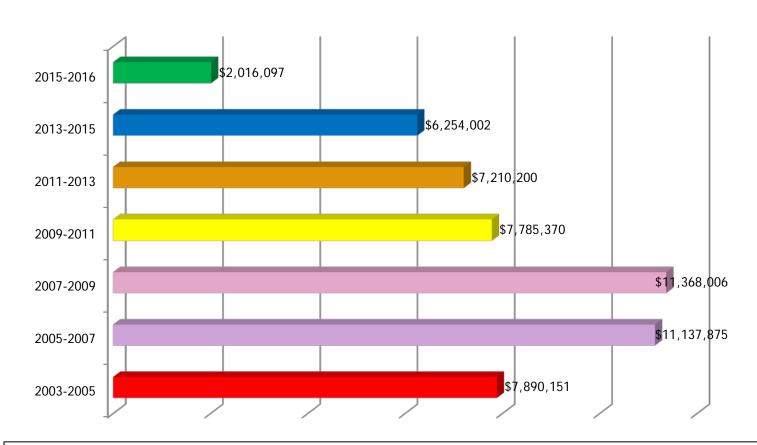
2003-2015 \$50,746,775 Federal/State

2008-2015 <u>\$18,846,724</u> Local

Total \$69,593,499 X \$12 =

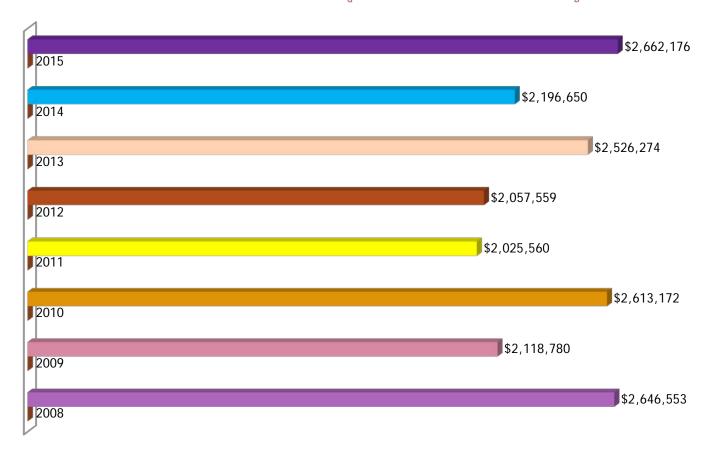
\$835,121,988 in SAVINGS

BUDGET FEDERAL/STATE (FISCAL YEAR)



*2015-2016 budget reflects Early Adopter implementation on 4/1/16

BUDGET LOCAL REVENUE (CALENDAR YEAR)



Treatment funds included: Law and Justice, DCS Community based (Non-Mental Health), COACHES, and School Based Youth Treatment.

DRUG TRENDS









THEN & NOW

- Expanded Prevention Efforts
- Re-entry program Clark County Jail
- Oxford Houses
- Center for Community Health
- 1/10 of 1% Tax
- Treatment expansion



Teamwork
Fiscal Responsibility
Results











JUVENILE RECOVERY COURT GRADUATE

Dylan

PREVENTION UPDATES

- Prevent Together: Battle Ground Prevention Alliance
- PREVENT! Coalition
- Strong Teens Against Substance Hazards & Abuse (STASHA) Peer Education Program
- Unite! Washougal Community Coalition
- West Van for Youth



PROGRESS AND ACCOMPLISHMENTS

For the past 12 months, Prevent Together has been focused on building the foundation of the coalition including: **Identify, recruit and maintain representatives from 12 sectors of the community as specified by CADCA**

Establish office space in Battle Ground at Dixon Square

Review and refine goals, strategies, work plan and timelines to reduce underage drinking and marijuana use

Promote Prevent Together

Build website; increase social media presence; create and distribute coalition promotional items
Participate in Community Events including Harvest Days, Give More 24 and other Battle Ground Chamber of
Commerce events

Train Staff, Leadership and Youth

Training completed includes: CADCA Mid-Year Institute and National Forum, Montana Summer Institute, Positive Community Norms Campaign training, ASIST (Applied Suicide Intervention Skills Training); six youth completed CADCA's National Youth Leadership Essentials training at the National Prevention Conference

Establish critical community partnerships

The Battle Ground community has several critical initiatives that will provide support and services to youth. Prevent Together is working closely with these partners to coordinate our efforts and activities.

Involve Youth in Prevention Strategies

Work with youth who attended training, as well as coordinate with newly hired Prevention Intervention Specialists in the Battle Ground School District to support youth lead prevention initiatives.



• 2016 GOALS

Increase community awareness of Prevent Together

Spring Coalition Meeting, scheduled March 29, 2016 at Battle Ground High School

Plan two community events to reduce perception of substance abuse at Kiwanis Park and the Skate Park

National Night Out, August 2nd event at Kiwanis Park

Skate Park Event: Saturday, June 18th

Schedule Community Service project date at both parks, partnering with Rock Solid Teen Center

Reduce marijuana use and underage drinking

Create media campaign regarding the low perception of harm of marijuana use and underage drinking by adolescents -- targeted to youth and adults (parents)

Hold an Underage Drinking Town Hall – date to be determined

Increase coalition capacity

Establish recruitment work group to identify individuals for leadership, steering committee and work group positions



The Substance Abuse Prevention Coalition of Clark County

- History: Established 2007 at Educational Service District 112 in Clark County
- Our Vision: A Healthy Thriving Clark County Free of the Effects of Substance Abuse
- Substances: Underage Marijuana Use, Prescription Drug Abuse, Underage Alcohol Use
- <u>Recent Accomplishments:</u> Teens Care Too 2016, Vaping Ordinances, Drug Paraphernalia Ordinances, and Mentoring of three new coalitions within Clark County.
- <u>Current Projects</u>: The Cannabis Conversations, Youth Now, Point of Purchase Campaign, Prescription Drug Take Back Event
- New <u>Funding</u>: Washington State Department of Health Marijuana Prevention Grant for Clark & Skamania Counties



STASHA: PEER EDUCATION PROGRAM

History

- Established in 2008
- Clark County citizen request

Mission

 Our mission is to help prevent substance use and encourage Clark County youth to make healthy decisions through nonjudgmental, youth-to-youth advice and/or suggestions.

Demographics

- 7th grade Freshmen in college
- Clark County school districts

Youth Driven Projects

- Policy Makers Education Day
- Advise and support local coalitions (PREVENT'S D.P.O., STASHA Liaisons)
- Provide education to other youth organizations
- PREVENTION IS A PARTY!



• Established: 2012

Focused: Washougal

- Mission: Building a community that is connected and involved, empowered by healthy choices and strong family units
- Substances: Underage drinking, marijuana use and prescription drug abuse
- Coordinator: Margaret McCarthy



WEST VAN FOR YOUTH

- Established: 2011 Community Prevention Wellness Initiative
- Community: West Vancouver
- Mission: West Van for Youth builds community to promote healthy choices and reduce substance abuse among youth so that our young people can grow into thriving and productive adults.
- Substances: Alcohol and marijuana
- Strategies: Direct Services & Environmental
- Current Effort: Point of Purchase Campaign

RE-ENTRY PROGRAM

In-Custody Substance Abuse Programming

- Alcoholics Anonymous
- Narcotics Anonymous
- Xchange Recovery Group (Faith-based 12-step)
- Xchange Recovery Faces of Hope (Mentoring)
- Xchange Recovery Relapse Prevention Group
- Celebrate Recovery Inside (Faith-based 12-step)
- Moral Reconation Therapy (MRT) Cognitive Behavioral Therapy (CBT)
- Drug Court Alumni (Mentoring)

GRANTS

- Access to Recovery (ATR)
- Drug Court Enhancement
- Juvenile Recovery Court Enhancement
- Project REACH Too

ACCESS TO RECOVERY (ATR) GRANT

Clark County has served over 6,500 individuals since 2004

- ATR I 2004 2007
- ATR II 2007 2010
- ATR III 2010 2014
- ATR IV 2015 Present
 - ATR IV:
 - Priority population includes Veterans/National Guard & Parenting/Pregnant Women
 - Since 2004, ATR has served 260 Veterans
- For almost 12 years, Clark County Department of Community Services has worked in close collaboration with Washington State's Division of Behavioral Health and Recovery (DBHR) to develop ATR into its current, *nationally* acclaimed program model
- We have established linkages with faith-based organizations, Veterans Administration, Department of Corrections, drug courts, veteran courts, Oxford Houses, and other local non-profit agencies to provide clientdirected treatment and recovery support service options

ACCESS TO RECOVERY (ATR) GRANT

- The Access to Recovery (ATR) program started in 2004 with a federal grant through the State of Washington from the Substance Abuse and Mental Health Services Administration. The focus of the grant was to remove the common barriers that prevent individuals from succeeding in recovery.
- A review of the existing data from October 2011 through July 2014 indicates exceptional rates of positive change in the primary areas that have the greatest impact on people continuing to be clean and sober. The data looks at 1,177 individuals who have received Access to Recovery support services since 2011.
- Each of those individuals has a baseline established at intake and a review of the access to recovery supports at a 6-month follow up point.

ACCESS TO RECOVERY (ATR) GRANT

- The rate of change specific to individuals being employed or enrolled in school or a job training program at the 6-month point is an increase of 419.7%.
- The rate of homelessness decreased by 71.7% and the overall rate of change for individuals living in semi-permanent (ex. Oxford Housing, Faith-Based Housing and/or transitional housing) and permanent housing (owning or renting - also includes living in a dorm or college residence) increased by 44.6%.
- In 2015, Clark County received ATR IV for three more years.
- Local funds were utilized to support services in 2015; thank you for approving the decision packet to sustain ATR.

DRUG COURT ENHANCEMENT GRANT

- Three year, Joint Enhancement Grant = BJA/SAMHSA
- BJA = \$300,000 SAMHSA = \$325,000 per year
- The Clark County, WA Drug Court Enhancement Grant programs aim to fill critical criminal justice (community policing and supervision) and substance abuse (Opiate Medication and co-occurring trauma informed) treatment needs in the adult criminal substance abuse Therapeutic Specialty Courts (TSC) programs.
- Three programs are joining together to efficiently collaborate on resources to address previous system expansions. The proposal aims to serve adult felony and misdemeanor substance abusers in the TSC programs; Felony Drug Court, Misdemeanor Substance Abuse Court and Veteran's Treatment Court.
- The interventions and proposed service goals/objectives: include 200 participants per year (600 over three years) receiving sheriff home checks and automated curfew calls, 10 people per year (30 over three years) receiving Suboxone Opiate Medication Therapy, and 75 participants (225 over three years) receiving co-occurring treatment services, along with a process, cost-benefit, and outcome evaluation.
- This program follows all Key Components of Drug Courts and the seven evidencebased design features.

JUVENILE RECOVERY COURT ENHANCEMENT GRANT

- Three year SAMHSA Grant \$325,000 Per year
- The Clark County Juvenile Recovery Court (JRC) Enhancement Grant serves youth with substance abuse and dependence diagnosis in the Clark County Juvenile Court aged 15 and 17.
- The proposal enriches the JRC program through data driven enhancements.
 Enhancements include adding 1) Co-occurring treatment 2) Recovery Support Services;
 job readiness skills and training 3) Community based mentoring.
- Program goals and objectives include A) assess 90% of youth in JRC with the Global Appraisal of Individual Need (GAIN), B) enhance services by providing 20 youth per year (60 over life of grant) co-occurring treatment B) expand existing mentoring by matching 35 youth per year (105 over life of grant) in community-based Project COMBINE, C) enhance job training and life skills by having 20 youth per year participate the YouthFirst program D) conduct comprehensive program evaluation by Dr. Clay Mosher, Washington State University Vancouver. Based on individual need, youth may participate in multiple activities. Therefore, it is expected the JRC enhancement grant will serve 50 youth per year, 150 over the life of the grant.

JUVENILE RECOVERY COURT ENHANCEMENT GRANT

- Anticipated outcomes include an increase in program retention, decrease in
- recidivism and expedience in matching clients to appropriate treatment and services.
- Co-occurring treatment will be provided by hiring a full time psychologist for Juvenile Court to implement evidence-based services.
- Community mentoring will build upon an expiring pilot mentoring program, Project COMBINE. Project COMBINE uses two evidence-based programs, A-CRA treatment and Aftercare for Indiana Mentoring (AIM).
- Job readiness training and life skills will be provided by Partners in Careers (PIC), through their promising practice YouthFirst job readiness program.

COMMUNITY VOICES ARE BORN (CVAB) REACH TOO PEER TO PEER MENTORING PROGRAM FUNDED THROUGH TCE-PTP SAMHSA GRANT

REACH Too provides recovery support through one on one mentoring, support groups and prosocial activities, to Clark County Therapeutic Court Participants.

All REACH Too mentors are alumni of the Clark County Therapeutic Courts.

Mentors are assigned to incoming court participants and provide recovery support through one on one sessions and by connecting participants to community resources as well as introducing them to others in recovery and attending support group meetings and prosocial activities with them.

REACH Too Groups, Classes and Activities

Peer Support groups and classes:

- Process Groups
- Study Hall
- Walking Group
- Speaker Meeting
- Cooking Class
- Pottery Class
- Art Class
- Alumni Group

Peer Support groups and classes:

- Game Night
- Disc Golf
- Swimming
- Movies
- Softball
- Summer BBQ
- Holiday Parties

Grant #'s for Year 1 and 2:

- REACH Too assigned mentors to 307 incoming Therapeutic court participants
- 189 participants made initial contact with their mentor
- 98 participants have engaged with their mentor past the initial contact period and have built positive prosocial relationships with their mentor and are active in the recovery community
- REACH Too has trained 51 Therapeutic Court Alumni as mentors and currently has 22 active mentors.

REACH Too has applied for a second round of the TCE-PTP SAMSHA Grant and if awarded will expand services to include persons who are releasing from the Clark County Jail that have engaged in treatment services while incarcerated.

Our intention is to provide peer support to this at risk population to encourage continued outpatient treatment, and provide support in finding stable housing and employment.

Our hope is to increase positive outcomes of the 4 dimensions of recovery: health, home, purpose and community and decreased substance use and criminal behavior.

RECOMMENDATIONS

- Continue to support clients utilizing Local Sales Tax funding when Medicaid funding isn't applicable
- Continue to support the marijuana dispensary moratorium (includes operating producers, processors/manufacturing and retailers)
- Support the drug paraphernalia ordinance
- Support prevention efforts
- Support HB 2313; raise the legal age to buy tobacco from 18 to 21

COLLABORATING WITH COMMUNITY PARTNERS

- Clark College Addiction Counseling Education Students (ACES) Club;
 http://www.clark.edu/campus-life/student-life/clubs/list.php
- Healthy Youth Survey;
 http://www.doh.wa.gov/DataandStatisticalReports/DataSystems/HealthyYouthSurvey/UsingtheData
- PREVENT! Coalition; http://www.preventclarkcounty.org
- Prevent Together: Battle Ground Prevention Alliance; https://www.facebook.com/PreventTogether/
- Strong Teens Against Substance Hazards & Abuse (STASHA);
 https://www.clark.wa.gov/community-services/substance-abuse-prevention
- SW WA Recovery Coalition; https://www.facebook.com/South-West-Washington-Recovery-Coalition-811168042267165/
- Unite! Washougal Community Coalition; http://www.unitewashougal.org
- Washington Recovery Alliance (Statewide Organization);
 https://www.facebook.com/warecoveryalliance/
- West Van for Youth; http://westvanforyouth.com/

THANK YOU

- Zone changes for Daybreak Youth Services
- Harm Reduction Center (HRC)/Needle Exchange Program; <u>https://www.clark.wa.gov/public-health/needle-exchange</u>
 - Syringe Access. HIV Testing. HCV Services. Hepatits A and B vaccinations, ear needling, Emergency Contraceptive Pills, safer injection education
- Naloxone Distribution at Harm Reduction Center; http://stopoverdose.org/ClarkCoStandingOrder.pdf

2016 Substance Abu	se Advis	ory Board Members		
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Expiration 03/31/16		Expiration 03/31/16		
Lisa Elsasser	Dr. M	arcia Roi		
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Expiration 03/31/16	Expira	ation 03/31/16		
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Appointed 01/10/05, 12/31/07, 01/01/11, 01/01/14	Appoi	nted 06/02/15		
Expiration 03/31/16	Expira	ation 03/31/166		
Armando Herrera, Past Chair		Sheridan		
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Candis Oliver				
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Appointed 06/02/15		The board shall consist of not less than		
Expiration 03/31/16		seven (7) members and not more than 15.		

Clark County Department of Community Services (DCS) Alcohol & Drug (A&D) Program Staff:

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QUESTIONS & ANSWERS

Thank you Council Chair Marc Boldt, and Councilors David Madore, Tom Mielke, Julie Olson, and Jeanne Stewart for your support and time!