

DELAWARE COUNTY

OFFICE OF BEHAVIORAL HEALTH

DIVISION OF DRUG AND ALCOHOL



FY 18/19

TREATMENT PLAN

MAY 2018

SCA TREATMENT NEEDS ASSESSMENT

TREATMENT PLAN

I. Background

Delaware County's Single County Authority (SCA) is a division in a larger department known as Delaware County's Office of Behavioral Health (OBH).

The 2018 Drug and Alcohol (D&A) Treatment Plan was designed and implemented by the D&A Administrator, assisted by the D&A Assistant Administrator, Case Management Supervisor, and Fiscal Officer. The objectives listed in this plan were identified by the Department of Drug and Alcohol Programs (DDAP).

The process began with the distribution of Treatment Plan directions to all SCA staff. This was then followed up by a unit meeting of all relevant staff which included a review of the guidelines and discussion on objective assignments. Additional meetings were held with key staff to discuss particular parts related to this plan.

The primary opportunities for input were to review the current needs assessment and comment on the status of each individual objective. The narrative sections of the Plan were assigned to supervisory level D&A staff responsible for completing assigned sections.

This plan consists of a narrative that reflects information that was gathered through our provider network, community meetings, OBH Quality Improvement (QI) staff, Heroin Task Force (HTF) Coalition and Delaware County's Problem-Solving Courts. Additional collaborations include the Department of Human Services, first responders, hospitals, and probation officers. The narrative explains how the SCA and stakeholders have analyzed the data and developed a plan to address the trends that were identified in the needs assessment.

The last stage for completion involved the SCA team convening again to discuss and review each completed objective before submitting the final version to DDAP.

The final version of this Treatment Plan was reviewed by the OBH Administrator and placed on Delaware County's Department of Human Services webpage for public review and distributed to our Drug and Alcohol Advisory Council.

II. Executive Summary

Delaware County (Delco) is located in the Southeastern region of Pennsylvania. There are 12 colleges and universities, as well as 15 school districts and 49 municipalities within its borders. According to the census bureau, Delco is the fifth

most populous county in Pennsylvania, and the third most compact. Delco is categorized as a Second Class (2-A) County with a population ranging from 500,000 to 799,999.

The Division of D&A has developed many resources and initiatives to help meet our local needs to address the opioid crisis in our community:

- Allocated funds to providers to purchase Narcan (Naloxone) and offer community education and demonstration
- Allocated funds for startup costs of opening a residential program
- Hosted 4 Community Day/Drug Take Back events
- Submitted reinvestment plans for program expansion
- Established relationships with our seven Emergency Departments to provide warm handoff. Services
- Continued to provide funding to Priority Populations without restrictions.
- Continued to allocate additional funding to combat the overdose epidemic by providing additional services to avert and address heroin and opioid addiction

Overdose survivors are considered a priority population. It is the policy of the Delco SCA to provide priority access to assessment, referral, and treatment services to overdose survivors. Through our Certified Recovery Specialist Program, these services are provided to overdose survivors, non-overdose individuals and their families. The Prospect Chester Crozer Medical Center administers the 24/7 Warm Hand-Off service, utilizing a 24/7 hotline (610-497-7287) and a team of CRS's under clinical supervision. This program started on October 1, 2016. There are three Hospital Systems and seven emergency departments in our county.

10/1/16-2/28/18): Outcome of Engagements

Individual Engagements	Type of Case	Entered Treatment	Refused
1481	491 Overdose 990 Non-Overdose	509	972

Our community access to NARCAN continues to grow. Narcan is currently carried by all 41 police departments and the Pennsylvania State Police. As of February 2018, there have been 1050 Narcan saves by law enforcement since the program's inception in November 2014. Delaware County Adult Probation and Parole and Treatment Court staff are also equipped with Narcan. All of these agencies have been provided kits through funds from the Delaware County District Attorney's office.

Delaware County SCA has provided funds for local contracted providers to have Narcan on site at their organizations. Prospect Crozer Chester Medical Center,

Community Hospital Division, offers monthly community naloxone trainings and all attendees receive a Narcan kit upon completion of the training. Key Recovery offers community naloxone trainings every other month and all attendees receive a Narcan kit upon completion of the training.

Delaware County continues to address capacity concerns by expanding our provider network. We currently have 59 provider contracts to ensure that a full D&A continuum of care is offered to our residents. Our bed capacity for residential levels of care are listed below.

Level of Care	Total Bed Access
Hospital Detox	69
Hospital Rehab	98
Detoxification	341
Rehabilitation	2321: ST 1799, LT 522
Halfway House	332
Recovery Housing	102

A reinvestment plan has been approved for the expansion of Halfway House services here in Delaware County. The new facility will have a capacity of 16 beds and hereto be referred to as Harwood House II. Harwood House II will be licensed by DDAP, as required, to provide halfway house services which are evidence-based for substance use disorders and co-occurring disorders. Due to issues, relative to zoning and community opposition, this project has been delayed.

Prospect Crozer Keystone Health Systems is currently pursuing opening a second residential detox and rehab facility at another hospital in our community. Leadership discussions are underway and once finalized, a reinvestment plan will be submitted for approval for expansion of these services.

Crozer Keystone's Access Center will be moving to their main hospital in the near future. Delaware County is very supportive with this move for it will expand our access hours to a 24/7 delivery system. The Access Center provides screening and assessments to our Drug and Alcohol population. The use of our opioid crisis funds and perhaps reinvestment funds will be used to support this provider's decision to move their assessment site.

Delaware County's Court of Common Pleas currently offers four specialty problem solving courts to help reduce criminal offending through therapeutic and interdisciplinary approaches that address addiction and other underlying issues, without jeopardizing public safety and due process.

- Drug Treatment Court (Inception 2008)
- Veteran Court (Inception 2012)

- Mental Health Court (Inception 2014)
- Second Chance Court (Inception 2017)

Medicaid expansion has brought more residents into the substance use treatment system. This has created an influx of individuals seeking services who are in need of a detoxification level of care. SCA's continue to strategize ways to expand services. Delaware County has a valued partnership with Magellan, our BH-MCO and together we collaborate on ways to address the opiate epidemic that plagues our county.

The Department of Drug and Alcohol Programs (DDAP) has awarded Delaware County federal funds through the Opioid State Targeted Response (STR) Grant. These dollars are intended to assist uninsured and underinsured individuals with an opioid use disorder (OUD) and may include the delivery or enhancement of outreach, treatment, case management and recovery support services to both categories of recipients. Awards consisted of general treatment and treatment related services and an additional amount to be used for Drug Treatment court enhancements.

The Pennsylvania Youth Survey (PAYS) was administered during the fall of 2017 to youth in grades 6, 8, 10, and 12, resulting in 253,566 valid surveys statewide. Delaware County's demographics showed 49.8% of participants were female, and 50.2% were male. 6th graders were the best represented, with an estimated 93.5% participation rate based on most recent enrollment. Overall, 50.8% of students surveyed in Delaware County were white or Caucasian, 27.2% of students were black or African American, and the remainder were a combination of the remaining categories. 9.5% of students identified as being of Hispanic, Latino, or Spanish origin.

The most common early initiation/higher prevalence substance used was alcohol (39.9% of students in Delaware County, compared to 43.3% at the state level). The next most frequent drug used was marijuana, with 19.2% indicating lifetime use (compared to 17.7% at the state level).

Delaware County will host a Town Hall releasing PAYS data to the community in the fall of 2018.

Child and Family Focus, one of Delaware County's prevention providers, will host a Marijuana Summit to educate the community about the risks of marijuana use and the implications of the legalization of medical marijuana in 2019. In addition to these prevention activities, Key Recovery offers Marijuana-only treatment for adolescents and Child and Family Focus offers to Teen Intervene as an early intervention program for youth who have engaged in first use of alcohol and/or marijuana.

Delaware County residents have three access points that allow quick entry into the D&A treatment system. The SCA subcontracts with three providers, at convenient locations throughout the county, who are responsible for the

assessment and placement of substance abusers. The SCA has a case management unit that authorizes all D&A treatment funding. One of the three anchor providers will perform the assessment, determine the LOC needed, and secure a bed for the client at the appropriate facility.

Delaware County's Quality Improvement (QI) Department, Single County Authority (SCA) and Magellan jointly developed an annual Quality Improvement Strategic Work Plan Meeting to review service effectiveness, assess goals achievement, evaluate the deployment of resources, and identify opportunities for improving the ongoing provision of safe high-quality care and service to individuals who seek D&A treatment services.

The County's Single County Authority (SCA) has developed an efficient partnership with Magellan Behavioral Health, resulting in the addition of several supplemental services. The SCA has also formulated relationships with the local County Assistance Office (CAO) and other community resources, which has given the SCA the ability to address some unmet needs through other systems. In addition, the SCA has developed a strong provider network that works well together and participates together on many initiatives, which address unmet demands and development of resources.

Delaware County continues to use reinvestment plans to expand access and received additional funding to combat the opioid epidemic by expanding case management services and allocating funds for the purchasing of Naloxone. Our reinvestment funds will be allocated to local providers to increase capacity/ access in our community.

In 2017, there were a total of 7464 Delaware County residents who received public funds for treatment services. This number includes both County funded and Magellan funded individuals (741 County, 6723 MBH).

Delaware County is the third highest Medicaid County in the state of Pennsylvania. Our managed care organization (MCO) is Magellan Behavioral Health. Since the beginning of 2015, Medicaid expansion has brought more residents into the substance use treatment system.

Delaware County continue to use every available resource and strategizes with our stakeholders to address the needs of our community. Heroin and prescription drugs continue to overwhelmingly be the drugs of choice. Although the SCA continues to contract with several providers for detox services, tracking shows that approximately 97% of available detox beds are occupied on a daily basis.

III. Needs Assessment Results and Corresponding Plans of Action

Objective 1: Obtain an estimate of the prevalence of substance use disorder in the total population of an SCA.

Treatment Needs Assessment
 Estimates of the Prevalence of Substance Abuse Disorders (Dependence or Abuse)
 Pennsylvania, Single County Authorities and State
 Based on 2015&2016 National Survey on Drug Use and Health (NSDUH), 2016
 County Population Estimates
www.samhsa.gov

Single County Authority	2016 NSDUH	Age 12+		Age 12-17		Age 18-25		Age 18+		Age 26+	
SCA	Total Population	Population	Prevalence Rate=7.44 %	Population	Prevalence Rate=3.55 %	Population	Prevalence Rate=16.61%	Population	Prevalence Rate=7.80 %	Population	Prevalence Rate=6.42 %
Delaware	563,402	481,487	35,823	43,904	1,559	103,570	17,203	437,583	34,131	374,012	24,012
Statewide	12,784,227	11,041,700	821,502	930,549	33,034	2,186,151	363,120	10,111,151	788,670	8,748,097	561,628

Substance use and abuse is a significant problem in Delaware County. According to the 2016 National Survey on Drug Use and Health (NSDUH), Delaware County had a total population of 563,402. The number of residents aged 12 and older totaled 481,487. The survey indicates that the prevalence rate of Substance Use Disorders (both dependence and abuse) in the total population is 7.44%. The estimated number of Delaware County residents aged 12 and older with substance use disorders was 35,823.

The total population of Delaware County residents aged 12 to 17 was 43,904 and the prevalence rate of substance use disorders in this population was 3.55%, for a total of 1,559. The number of Delaware County residents aged 18-25 equaled 103,570. The prevalence rate of substance use disorders in this population was 16.61%. The estimated number of residents in this age range with substance use disorders was 17,203.

The number of Delaware County residents aged 26 and older equaled 374,012. The prevalence rate of substance use disorders in this population was 6.42% and the estimated number of residents in this age range with substance use disorders was 24,012.

The illicit drug use includes the misuse of prescription psychotherapeutics or the use of marijuana, cocaine (including crack), heroin, hallucinogens, inhalants, or methamphetamine. Psychotherapeutics is defined as use in any way not directed

by a doctor, including use without a prescription of one's own. Prescription psychotherapeutics do not include over-the-counter drugs.

Delaware County continues to explore and expand their services to address the need in our county. This includes partnering with Magellan, BH-MCO, to strategize on ways to meet our demands.

There are a number of Special Populations which have been identified by NSDUH as having a higher proportion of persons with substance use disorders compared to the general population. The total number of persons arrested for possession of controlled substances in Delaware County in 2017 was 2,302 according to the Pennsylvania Uniform Crime Reporting Program. There were 3,295 arrests for offenses including Driving under the Influence, Violation of Liquor Law, and Drunkenness also in 2017. It is estimated that 100% of persons arrested in these categories had substance abuse concerns. According to the Pennsylvania Board of Probation and Parole CAPP report, there were 19,695 residents supervised by County Adult Probation and Parole (CAPP) in Delaware County in 2017. It is estimated that 70% of those persons had substance abuse problems for a total of 13,787.

Delaware County has a collaborative relationship with our court related departments. In October 2016, the Criminal Justice Advisory Board held a 400-person Summit at Widener University on Mental Health and the Heroin Epidemic in the Criminal Justice System.

Delaware County Council, the District Attorney and Delaware County agencies formed the Delaware County Heroin Task Force (HTF) in 2012 to address this public health concern. Task force goals include: Reduce the demand for heroin and illegally used prescription drugs; Educate citizens about the resources available to prevent and treat addiction; and reduce drug-related crime in the community through public education and law enforcement.

Objective 2: Identify emerging substance use problems by type of chemical, route of administration, population, availability, and cost, etc.

Heroin and Fentanyl seem to be the most abused substance for individuals in Delco. The population percentage is among young adults between the ages 18-25. Of all the adult admissions into treatment facilities in Delco, 49.9% of them are heroin users. Treatment providers report that heroin is easily accessible and is low cost in Delco.

The heroin/opioid user continues to access the majority of treatment services and funding resources. To keep up with the demand, Delaware County continues to expand our continuum of care network.

Levels of Care (LOC): Contracted Providers (^ indicates non-contracted providers)

LOC	# of Providers	# of Providers Located In-County	Special Population Services**
Inpatient Hospital Detox	4	1	Pregnant Women, Injection drug user, overdose survivors, veterans, co-occurring
Inpatient Hospital Rehab	3	1	Pregnant Women, Injection drug user, overdose survivors, veterans, co-occurring
Inpatient Non-Hospital Detox	18	3 ^1	Pregnant Women, Injection drug user, overdose survivors, veterans, co-occurring
Inpatient Non-Hospital Rehab	33	3 ^1	Pregnant Women, Women with children Injection drug user, overdose survivors, veterans, co-occurring, *only one provider serves adolescents
Partial Hospitalization	1	0	Injection drug user, overdose survivors, veterans, co-occurring,
Intensive Outpatient	9	9 ^2	Pregnant Women, Injection drug user, overdose survivors, veterans, co-occurring, adolescent, gender specific
Outpatient	11	11 ^3	Pregnant Women, Injection drug user, overdose survivors, veterans, co-occurring, gender specific
Halfway House	12	1	Injection, drug user, overdose survivors, veterans, co-occurring, gender specific, *only one provider serves Pregnant Women and women with children

Level of Care	Total Bed Access
Hospital Detox	69
Hospital Rehab	98
Detoxification	333
Rehabilitation	1784
Halfway House	332
Recovery Housing	102

Objective 3: Identify local, state, and national trends that may impact the SCA.

Delaware County’s Court of Common Pleas currently offers four (4) specialty problem solving courts to help reduce criminal offending through therapeutic and interdisciplinary approaches that address addiction and other underlying issues without jeopardizing public safety and due process. Below is a brief description of these court programs.

The Treatment Court program is a program to help address addiction, make positive lifestyles changes, and avoid serving lengthy jail sentences. This program consists of three tracks of offenders.

Level 1&2 Offenders: Targets non-violent offenders with substance addiction and/or co-occurring disorders who have been arrested on new criminal charges and/or violation of county probation/parole.

Level 3&4 Offenders: The Prison Alternative Drug and Alcohol Program (PADAP) also known as State Intermediate Punishment (SIP) offers non-violent level 3 and 4 offenders the opportunity to undergo treatment and relapse prevention instead of incarceration.

Young Adult Offenders: Targets first time young adult offenders that are currently charged with a felony marijuana drug case. The young offenders program was recently established in March 2016.

Treatment Court currently has 112 participants; 38 of which are young adult offenders and has held twenty-one (21) commencements. Since the inception of this court in 2008, there have been 26 drug free babies born to recovering mothers and two hundred seventeen (217) graduates of this program.

Veterans Treatment Court is a program that serves defendants who have served in a branch of the military. This court assists veterans who are struggling with addiction, mental illness, or co-occurring disorders and come in contact with the criminal justice system. This court currently has 20 participants and has held 11 graduations. Since the inception of this court in 2014, there have been 32 graduates of this program.

Mental Health Court Program is a program that serves offenders with a serious mental illness (SMI) diagnosis (schizophrenia, major mood disorder, psychoses NOS, borderline personality disorder, substance use) which is related to their current criminal justice involvement. This court currently has 15 participants and has held 11 graduations. Since the inception of this court in 2014, there have been 32 graduates of this program

Second Chance Court is a program that serves defendants aged 18 and older who have been arrested for possession of drugs or some other minor offense arising out of drug addiction, such as minor theft. The requirements for Second Chance Court are: (1) Delaware County resident, (2) with opioid abuse/addiction, and (3) charged with a low-level, non-violent offense related to opioid abuse/addiction. This court currently has 29 participants. Since the inception of this court in 2017, there have been 20 graduates of this program.

Delaware County's Problem Solving Courts provide intense supervision totaling a minimum of 18-30 months. Each participant remains in treatment services until the completion of the program. The length of time in the program depends on how well participants progress. The demand for services continues to grow as this population comes with complex issues that need to be addressed. Despite this challenge, these courts continue to produce positive outcomes towards recovery.

Delaware County SCA continues to have an active role as a team member for our Treatment Court. The SCA attends weekly review sessions and court hearings. This team also attends the annual Pennsylvania Drug Court Professional (PADCP) conference and schedules team meetings throughout the year to discuss current barriers and trends of the program.

The Criminal Justice Behavioral Health Subcommittee (CJBHS) continues to meet quarterly to review behavioral health issues affecting the offender population and includes: collaboration on fiscal and resources; barriers to treatment; identification of new resources; and re-entry.

It is the plan of the SCA to continue the above collaboration with our court related departments to ensure a smooth transition between systems.

In addition to the above collaboration, Delaware County has created four (4) Behavioral Health Forensic Liaison positions. The liaison's role is to provide screening of offenders and linkage to community-based services and who are involved with our specialty courts. These liaisons are located in George Hill Correctional prison.

DUI

Delaware County has seen a significant decrease in DUI evaluations. This may change due to the legalization of medical marijuana, so collaboration with our DUI

Task Force members will continue to occur, and annual training will continue for community stakeholders on current trends and processes.

Increase in Overdose Deaths

Delaware County has seen an increase in overdose deaths from 2016. Delaware County SCA continues to be an active member of the Heroin Task Force and funds community Narcan® trainings at two providers. At the completion of training, attendees are given a dose of Narcan®. The frequency of these trainings will continue to be assessed and will occur more often as necessary.

Underage Alcohol and Drug Use

Per the 2017 PAYS, Delaware County did see a slight increase in alcohol and marijuana use. This increase could be because of an increased participation in the survey. In FY17/18, Delaware County SCA added two new ATOD Prevention Providers and increased the services of our existing Prevention providers. This expansion has increased evidence-based programming available to all 15 school districts. In 2018, Delaware County will host a Town Hall releasing PAYS data to the community. In 2019, Child and Family Focus, one of Delaware County's prevention providers, will host a Marijuana Summit to educate the community about the risks of marijuana use and the implications of the legalization of medical marijuana. In addition to these prevention activities, Key Recovery offers Marijuana-only treatment for adolescents and Child and Family Focus offers to Teen Intervene as an early intervention program for youth who have engaged in first use of alcohol and/or marijuana.

Objective 4: Identify the demand for substance use disorder treatment.

Delco has had a significant increase in heroin abuse, which has reached epidemic proportions. Throughout the 2017 fiscal year, 250 individuals were admitted to a 3A detox level of care. Additionally, 86 individuals were admitted for inpatient non-hospital 3B level of care. In 2017, there were a total of 7464 Delaware County residents who received public funds for treatment services. This number includes both County funded and Magellan funded individuals (741 County, 6723 MBH).

There is a high demand for inpatient as well as outpatient treatment services, especially for those individuals using heroin. Several treatment providers report that wait times are not an issue at their respected sites, but more so the availability of detox beds. Delco obtained a contract with a 52-bed inpatient provider, which will increase our capacity of available detox beds. The SCA plans on solidifying more contracted providers to address the demand in this area.

The SCA has also encouraged several provider facilities to increase their overall access hours for individuals to be able to have after-hours assessment treatment services.

Objective 5: Identify issues and systems barriers that impede the ability to meet the assessment and treatment demand in the SCA.

The SCA shall continue to meet with providers and collaborate on ways to address barriers that impede Delco resident's access to behavioral health services within the county.

There are three areas of concern that present as barriers for individuals who seek treatment. The barriers to treatment are lack of detox beds, lack of available MAT resources post-discharge, and lack of Partial Hospitalization provider facilities.

Delco's providers report the lack of available detox beds has created a barrier for getting people into treatment. The need for the detox beds to meet the individuals request for treatment at the time of assessment is imperative in order to continue to meet the treatment demands and ensure the individual is receiving adequate treatment when they are interested in being referred to a treatment facility. To keep up with the demand for treatment services, Delco will continue to execute additional contracts, which will increase our access to detox beds and additional levels of care.

To address the need for MAT resources, the SCA will continue to collaborate and partner with provider agencies to assure that all available information has been distributed to the community. This will be done via the distribution of the D&A Treatment Guide and Directory.

Objective 6: Identify assets or resources in the county or region to help respond to treatment demand.

Delaware County continues to have a highly collaborative relationship with our BH-MCO, Magellan Behavioral Health of Pennsylvania. This collaboration has led to new initiatives, such as DBT training, as well as expansion of services, such as Prospect Crozer Chester Medical Center's First Steps Treatment Program.

Delaware County SCA fully supports the expansion of SOAR Corp's expansion to a larger facility and increased access to Medication Assisted Therapies. SOAR currently offer Methadone Maintenance Treatment and Suboxone. They intend to add Vivitrol to their continuum and have expressed an interest in providing Screening and Assessment and Recovery Housing.

The SCA continues to work collaboratively with our warm hand-off CRS program through Prospect Crozer Chester Medical Center. SCA staff assist with collaboration with our seven emergency rooms through three health systems in identifying barriers and solutions to the delivery of the CRS program.

The Delco STOP Coalition engages community members and stakeholders to end the stigma of substance use disorders and aims to increase awareness of available resources in Delaware County. The STOP Coalition will begin “lunch and learns” for various stakeholder groups to increase membership and ensure that all partners’ voices are heard in the Coalition. The Coalition utilizes the principles of the Strategic Prevention Framework to assess community needs, identify goals and objectives, plan activities, and evaluate the effectiveness of strategies. The Coalition has begun to obtain baseline data from the community regarding level of stigma and will use this information to create educational materials regarding the disease of addiction and treatment availability.

The SCA works collaboratively with Prospect Crozer’s Center of Excellence. Crozer staff are active members of Treatment Court and Second Chance Court as well as the Delco STOP Coalition.

Through STR funds, the SCA has been able to contract assist a provider to add second shift assessment to their continuum. The SCA will continue this expansion and support one of the anchor providers to move to 24-hour assessment. This will increase access to screening and assessment and eliminate the wait time for individuals attempting to access treatment. The SCA will continue to provide up to 90 days of rental assistance for individuals unable to afford recovery housing. Additional days of recovery housing are assessed on a case-by-case basis.

Objective 7: Identify evidence-based programs and practices in the county or region to help respond to emerging trends and treatment demand.

Delaware County treatment providers offer evidence-based programming (EBP) and practices to both adults and adolescents. There are a total 16 EBP being offered across providers that are contracted with the SCA. These EBP include:

- Assertive Adolescent and Family Treatment
- Cognitive Behavioral Therapy
- Dialectical Behavior Therapy
- Matrix Model
- Medication-Assisted Treatment
- Relapse Prevention
- Twelve-Step Facilitation
- Illness Management and Recovery
- Teen Intervene
- Certified Recovery Specialist Program
- Trauma Informed Anger Management
- Seeking Safety
- Solution Focused Brief Therapy
- Naloxone Trainings
- Psychodrama

- EMDR

These EBP and practices will continue to be offered by Mirmont Outpatient Center, Keystone Center, Soar Corporation, Merakey, Crozer-Keystone Recovery Center, and Child and Family Focus.

The SCA has room to offer trainings on other EBP and practices not offered by the providers in Delaware County. These trainings or seminars could include EBP such as Community Reinforcement Therapy, Motivational Interviewing, and Therapeutic Community. The SCA could choose which training would be most beneficial, to not only the providers, but the individuals they serve, by assessing and gauging their interest in specific forms of therapy, or what they think their facility could utilize the most with clients.

Objective 8: Identify and quantify the resources necessary to meet the estimated treatment demand (identified in Objective 4) and any emerging trends that impact demand.

The heroin/opioid epidemic continues to place a high demand for detox beds in our county as well across the commonwealth. Delco continues to use State Targeted Response funds to expand access while combatting the opioid epidemic.

The Department of Drug and Alcohol Programs has awarded Delaware County \$576,812 and an additional \$108,783 that has been used for Drug Treatment Court.

As stated earlier, STR funds have allowed the SCA to implement and address training needs across the county, to obtain two second shift assessors at provider sites, and to enhance warm hand-off efforts by adding staffing, to include a CRS and a mobile assessor.

These changes will increase access to assessment services and will allow more individuals the opportunity enter treatment.

Treatment Court Specific STR Funds Program Enhancements

- Enhanced Peer Panel -Added a Full Time Certified Recovery Specialist (CRS) to engage with any new participants at the point of admission through completion.
- Enhanced Alumni/Family Program -Added Master's Level Social Worker that would have the primary role of supporting the participants enrolled in the Delaware County Drug Treatment Court Program and their families

Delaware County was awarded Heroin Opioid Crisis funds from the Department of Drug and Alcohol Programs in the amount of \$206,703. These funds will be utilized in conjunction with reinvestment funds to expand a local provider's capacity/access in our community. Allotted funds will be used to expand case management

services, as well additional access to inpatient Treatment services. This program expansion will be offering non-hospital-based services.

The Substance Abuse Detoxification and Rehabilitation units at Prospect Delaware County Memorial Hospital (PDCMH) will be serve eligible adults who have Substance Abuse Disorders (SUD) and/or Co-occurring Disorders (COD) who are at high risk of overdose, or have experienced a recent overdose, IV drug users, pregnant females, and individuals that have struggled with chronic relapse, including individuals with chronic medical and mental health complications. The services will be designed to treat patients at the 3A, and 3B levels of care in accordance with the Pennsylvania Client Placement Criteria (PCPC). The facility will have a total of 27 licensed beds as follows:

- Inpatient Nonhospital Short-Term Detox (3A) = 7 beds
- Inpatient Nonhospital Residential Treatment and Rehabilitation (3B) = 20 beds

We anticipate that approximately 350 to 400 individuals will receive services in 3A and 3B levels of care in this new facility annually.

In addition to 3A and 3B levels of care, this Plan will also support the startup of outpatient (1A) and Intensive outpatient services (1B) located at the same site, PDCMH, for 140 individuals. Suboxone and Vivitrol will be used in conjunction with D&A treatment protocols. As an adjunct to treatment, the treatment and prescription will be maintained and monitored by a psychiatrist. The prescribing of Suboxone and Vivitrol will be monitored by the psychiatrist, Nurse Practitioner, or Registered Nurse, along with the treatment team, which will include a psychiatrist, director, supervisor, and counselor.

SOAR Corp. Inc. has recently relocated to a new location in Delaware County. This move has increased their capacity to treat more individuals who have Opioid Use Disorder (OUD) seeking MAT services.

IV. Fiscal Impact

This section of the plan requires the SCA to describe their internal process to allocate funding to the various levels of care, case management activities, recovery support services, and other support services.

The plan should also discuss the impact the action plans, described in Section III of the Treatment Plan, may have on their budget.

In the last several years, two main occurrences resulted in a positive effect on Delaware County's SCA financial resources.

The first being the inception and continuation of Medicaid Expansion that has allowed not only increased funds as well as expanded flexibility with non-categorical funds that were previously used exclusively for critical treatment.

The second would be the State and Federal Governments concentrated efforts to fight the Heroin Epidemic with the awarding of specific strategic grants to the Counties.

Both resulted in a phase of introspective thought and stimulated considerations in developing the SCA's approach to the communities needs in respect to substance prevention and treatment.

To implement the proposed treatment plan, the SCA in collaboration with our community partners including Magellan Behavioral Health, Delaware County Courts, Delaware County STOP Coalition, Delaware County QI, our local Center of Excellence, as well as the Heroin Task Force were able to assess the need in the community and create a unified plan to address those needs.

During the last several years, the Heroin Opioid Crisis funds allowed us to remove treatment barriers by funding the start-up of a new facility, managed by the Center of Excellence grantee that offers a full continuum of care. Our hope for this year is to replicate this with an additional facility on the opposite end of the County to ensure those clients have access in their neighborhood. We have and will continue to utilize these funds for Narcan trainings and fund the purchase of Narcan for providers, constituents and community partners.

The STR funds in the first year funded longer more unique, diversified, and specialized treatment plans for clients. In addition, we expanded our Assessment Center to become a 24-hour facility, expanded our CSR Warm-Hand-Off program, and initiated a new Treatment Court Case Management and Recovery Support Program. STR funds also funded a Student Assistance Training. This year we can continue these efforts as well as fund new initiatives such as expanding our Methadone services as well as adding Vivitrol as an alternative option.

To create an effective Prevention Plan, which is essential to the community, Medicaid dollars previously used for treatment, were funneled to find additional providers and new effective evidence based programs. Delaware County contracted with two new prevention providers as well as an evaluator to consistently assess, recommend and improve the new plan. Additionally, since we have been a SPF grant recipient in the last several years, we are able to sustain some of those programs as well. Another use of these funds was to initiate a viable WWC prevention program to fund through the SAPT Block Grant.

Treatment and prevention cost reimbursement contracted services and prior year FFS expenses are the base for the Fiscal Year Budgets. During the year, Case Managers authorize treatment along with eligible funding streams for each client.

In an effort to achieve our plan goals, the SCA Administrator and Fiscal Officer collaborate throughout the year to evaluate spending trends. All decisions and revisions required adhere to the DDAP guidelines and regulations as contained in the DDAP Fiscal Manual.

V. Quality Assurance and Outcome/Performance Measures

A quality management process should provide a framework to operationalize a data driven, outcome-focused approach to the SCA planning process. This section should summarize the SCA's quality management initiatives.

Describe how, if at all, the SCA evaluates the quality of services provided. Describe how, if at all, the SCA is utilizing outcome and performance measures (e.g. policy formation, performance based contracting, client satisfaction surveys, etc.). Identify what type of strategies the SCA will use to ensure that its providers will be able to meet state and national outcome measures.

Delaware County Quality Improvement (QI) Department has and continues to work collaboratively with the Single County Authority (SCA) as well as the Health Choices (HC) Managed Care Organization (MCO) to carry out a comprehensive Continuous Quality Improvement (CQI) process to monitor Drug & Alcohol Programs. The core goal of the CQI plan is to ensure that the availability, structure, processes, and outcomes of service delivery are measured, analyzed, and improved in such a way that planning is meaningful and produce better outcomes for Delaware County individuals. QI, SCA and MCO meet frequently (bi monthly, quarterly, semiannually) in various capacities to review data including outcomes, updates on current programming, network needs, new initiatives, community events, as well as quality and compliance initiatives. SCA and QI participate in Area of Responsibility (AOR) meetings quarterly to review several areas related to SCA funding, programming, quality, new initiatives, network needs etc. SCA, QI and MCO participate in Quality Oversight Committee (QOC) meetings held bi-monthly to review elevated level of care data, new initiatives, gaps in services, barriers to treatment etc. SCA and QI participate in a quarterly HC meeting to provide updates on new HC initiatives occurring over the quarter as well as updates on HC strategies to enhance the continuum of care.

Performance evaluation and measurement assess how well practitioners' actions conform to practice guidelines, medical necessity criteria, and standards of quality. Several methods can be used to improve access to treatment and the quality of treatment for people with alcohol and other drug challenges. Delaware County Quality and MCO Quality departments collaborate to monitor SCA/MCO funded Drug and Alcohol programs across the network. The Quality Program at both the County and MCO levels require ongoing assessments of quality, compliance and claims via a site visit, electronic claims review and chart audit. Site visits to D&A providers are scheduled in advance and documents are submitted ahead of time to ensure a representative sample of data to review. After the site visit is complete

a formal report is generated and if applicable, an action plan can be requested to address needs because of site visit. A written action plan is completed by the provider, reviewed by QI/MCO and if technical assistance is required or requested, it is provided. Once the action plan is approved, 90 days' post, another site visit will occur to assess the actions laid out. This cycle continues until all deficiencies are addressed satisfactorily.

Delco QI, SCA and MCO meet regularly to review and analyze data as well as outcome indicators related to D&A programming to maintain an open line of communication for planning in real time. Currently, with the Opioid epidemic significantly impacting the community at large, the Delco Network of providers has been strained. Fortunately, funding opportunities have been ample via state Grants and allocations as well as Health Choices funding. To ensure that data is as close to real time as possible and consistently available for analyzing, QI, SCA and MCO have worked closely with providers to pull meaningful data. Performance data and outcomes include: Quarterly/Annual review of substance abuse 30 day inpatient hospital readmission rates, 7 day follow up after hospitalization, access to evaluation within 7 days, Quarterly review of detox, rehab, halfway house, level of care for number of admissions and average length of stay, Substance Abuse Rehab appointment kept, Monthly review of Certified Recovery Specialist (CRS) Warm Handoff data related to engagements, treatment acceptance, and referrals with in the Physical Health Hospital Emergency Room, Medication Assisted Treatment (MAT) outcomes such as number of prescription, follow up appointment for MAT, MAT referrals to ancillary services, identification of needed trainings such as moving from the PCPC to the ASAM as well as evidenced based practices, HC member services stakeholder workgroup to obtain feedback on current services, gaps and initiatives, network needs/requests and non-participating provider utilization tracking. The resulting trends, gaps in care and needs are addressed within the bi-annual Delaware County Strategic Planning Meeting, last held on April 12, 2018. The goals developed below are ongoing because of the CQI process discussed above.

Delaware County's CQI process lends itself to a highly-regarded stakeholder input, inclusive of Community and Provider Network stakeholder feedback. SCA conducts ongoing meetings with contracted providers to maintain updates and feedback on initiatives/needs at the Provider level. Through close monitoring of and adherence to the Pennsylvania Quality Strategy for the Office of Mental Health and Substance Abuse as well as the National Drug Strategy for 2017-2026, Delco has been able to push forward a quality agenda that continues to enhance the network of providers. To continue to comprehensively address the needs of the D&A community, in addition to needs identified through local data, state and national quality guidelines are adopted. Below you will find quality goals adopted and actions developed to enhance the D&A continuum of care.

National Drug Strategy for 2017-2026

- Enhance access to evidence-informed, effective, and affordable treatment services and support;

- Develop and share data and research, measure performance and evaluate outcomes;

Pennsylvania Quality Strategy for the Office of Mental Health and Substance Abuse

- Reduce readmission rates
- Increase 7 day follow up for substance abuse
- Initiation and Engagement of Alcohol and Other Drug Dependence Treatment

VI. Eligibility and Access

This section of the Treatment Plan looks at how the SCA defines the individuals it serves and how services are accessed. At minimum, the following information must be included in this section:

- A description of how individuals access screening and assessment services during regular business hours, after hours, weekends and holidays. Also, describe any protocols the SCA has in place to ensure the system is working.
- A description of eligibility criteria and treatment restrictions (e.g. number of treatment episodes per year/lifetime, level of care limitations, etc.).

Delco provides D&A treatment services for adolescent and adults, primarily through contracts with six in-county provider agencies. Services include: screening and assessment; outpatient counseling for adolescents and adults; opioid treatment, including methadone maintenance; continuous treatment team programs for individuals with long-term disabling alcohol and drug dependence disorders; less intensive case management services offered through the outpatient counseling agencies; detoxification; and residential services.

Delco residents have three access points that allow quick entry into the D&A treatment system. The SCA subcontracts with three providers, at convenient locations throughout the county, who are responsible for screening, assessment, and placement determination for individuals seeking treatment. All three anchor providers operate during usual business hours except for Delco's detox provider, which delivers services after hours and weekends. The anchor providers offer walk-in access for assessments during business hours of operation.

The County's anchor providers publicized their locations, hours of operation, and program services on brochures which are made available through various locations in the county.

Effective as of October 1, 2017, the Delaware County Office of Behavioral Health (OBH) Division of Drug and Alcohol removed all restrictions pertaining to residential treatment stay. There have been no barriers to treatment services provided to individuals who are in need. Eligibility requirements continue to be restricted to Delaware County clients who are uninsured and or underinsured.

Private/Commercial Insurance

Documentation that an individual's private/commercial insurance plan does not cover the requested level of care and/or the individual has used their allotted days provided by their coverage carrier, will be needed at time that the referral packet request is sent to SCA case management staff for review.

PCPC Review Dates/Authorization Request Approvals- All residential requests for services and documents are received and reviewed by CM staff. Letters of approval and/or denial will be sent out to the provider. Delco does not provide approval letters for outpatient treatment. Providers will complete all DDAP-EFM forms and retain them in the individuals' chart. The SCA's fiscal officer receives invoices from providers and services are verified through authorization before payment is rendered. All providers are monitored annually by the SCA staff to ensure compliance with the Department of Drug and Alcohol Programs (DDAP) treatment manual. This process evaluates the efficiency and effectiveness of the overall delivery of services to gauge the impact to individuals receiving these services.

The table below shows the approval time frames per the PCPC 3rd edition guidelines. The SCA will utilize these guidelines when approving treatment. Inpatient continued stay PCPC's are due per the below table. Please contact SCA case management staff for additional time approvals on any inpatient level of care, as everyone will be reviewed on a case to case basis.

PCPC Level	Service Level	Timeframes/ Total days	Initial Approval	Additional Approval
1A	Outpatient	60-180 days	N/A	N/A
1B	Intensive Outpatient	30-120 days	N/A	N/A
2A	Residential Partial	60 days	30	30
2B	Halfway House	120 days	30	30
3A	Medically Monitored Detox	7 days	4	3
3B	Medically Monitored Short Term Rehab	28 Days	14	Every 7
3B	Short Term Rehab (Dual)	28 Days	14	Every 7
3C	Medically Monitored Long Term Rehab	90-180days	30	30
3C	Long Term Rehab (Dual)	90-180 days	30	30
4A	Medically Managed Detox	6	4	2
4B	Medically Managed Residential	14 Days	7	7
4B	Medically Managed Residential (Dual)	14 Days	7	7

NOTE: The SCA expects all providers to request only the clinically appropriate amount of care needed for each individual case and that the provider is adhering to the PCPC 3rd edition guidelines. Continued stay PCPC's and authorization request forms are due to Case Management staff per these guidelines.

All individuals need to be substance free at least 72 hours prior to any psychiatric evaluation when requesting a dual diagnosis level of care.

Waiting Period

There will be no waiting period restriction once an individual discharge from an inpatient level of care. If an individual needs an additional residential treatment stay, he/she must present at one of the SCA's contracted Anchor Providers for an assessment.

Off Hours Admission Guidelines

Delco residents are informed of the SCA's after hour access via voice message on the office's answering service. During after hours, Delco's Anchor Providers use an answering service, voice mail. Individuals who call these providers are informed of hours of operation and that all calls will be returned on the next business day. Individuals who are experiencing a Psychiatric or a Substance Use Emergency will be referred to the County's 24-Hour Detox Provider or the County's Crisis Centers. The Crisis Centers also have all the information needed to refer a client, who may need Detox during afterhours.

During SCA off-hours procedures, individuals can be screened and admitted into a detox level of care, due to emergent care needs. Providers are required to follow additional level of care approval guidelines beginning on the next business day following admission.

Halfway House/Long Term Treatment/Additional Requests~

If an individual is determined to need additional treatment, the provider shall send the appropriate clinical information and treatment history to SCA Case Management staff, either via email or phone in a timely fashion for review. It is encouraged that all 2B requests should be made as early as possible in the treatment episode, due to lengthy waits for interviews and bed placements.

Once the SCA approves a request, the provider shall fax or email any necessary consents to SCA Case Management staff and provide updates regarding bed placement and date of transfer, etc. All requests will be reviewed on a case to case basis.

Intensive Outpatient/Outpatient Requests

Providers are required to submit all documents and forms for anyone who is receiving County funded Intensive/outpatient program services. Outpatient Packets will either be faxed or emailed to Case Management Staff and all documents will be submitted to Case Management Staff on a monthly basis.

D&A Recovery House Requests

Any individual receiving recovery house funding must be screened and, if appropriate, receive a level of care assessment. There will be no formal treatment

(e.g., counseling, psychotherapy) taking place at the recovery house. A referral to the SCA must come from one of its contracted providers. The provider agency will send the required admission documents and related DDAP-EFM forms. Once all forms have been received, the SCA will send the Recovery House an approval letter for services and funding will be limited to 90 days per individual per state fiscal year. The SCA may grant additional funding assistance to individuals on an, as need, case by case basis.

Conclusion

The heroin/opioid user continues to access the majority of treatment services and funding resources. Heroin and prescription drugs continue to overwhelmingly be the drugs of choice. Although the SCA continues to contract with several providers for detox services, tracking shows that approximately 97% of available detox beds are occupied on a daily basis. Delco continues to utilize every available resource and explore new initiatives to address the heroin/opioid epidemic, which has grown out of control.