



# COMMUNITY GUIDANCE CENTER

## Drug and Alcohol Department

### Annual Report

July 1, 2019 through June 30, 2020

#### DuBois

490 Jeffers St  
DuBois, PA 15801  
814-371-1100

#### Clearfield

600 Leonard St  
Clearfield, PA 16830  
814-765-5337

#### Northern Cambria

4205 Crawford Ave  
Northern Cambria, PA 15714  
814-420-8673



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## EXECUTIVE MANAGEMENT AND BOARD OF DIRECTORS

Table 1

*Executive Management Team*

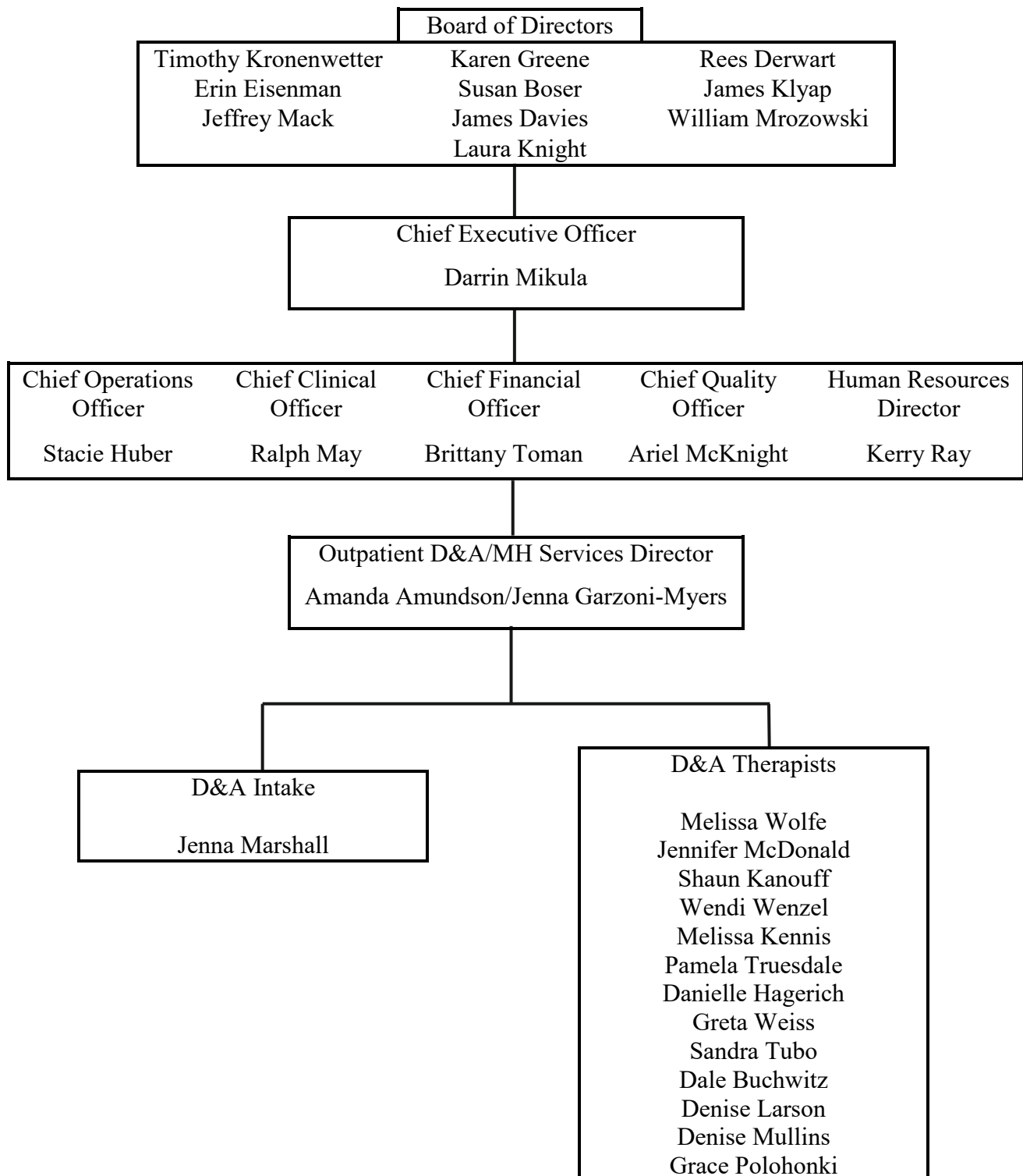
Name	Title
Darrin Mikula, CPA, MBA, FHFMA	Chief Executive Officer
Stacie Huber, MA, LPC	Chief Operations Officer
Ralph May, Psy.D.	Chief Clinical Officer
Brittany Toman	Chief Financial Officer
Ariel McKnight	Chief Quality Officer
Kerry Ray, BS	Human Resources Director

Table 2

*Board of Directors*

Name	Title
Timothy Kronenwetter	Chairperson
William Mrozowski	Vice Chairperson
Jeffrey Mack	Treasurer
James Klyap	Secretary
Susan Boser	Member
James Davies	Member
Karen Greene	Member
Rees Derwart	Member
Laura Knight	Member
Erin Eisenman	Member

Figure 1

*Organizational Leadership Chart: Drug and Alcohol Department*

## OVERVIEW OF CGC DRUG AND ALCOHOL DEPARTMENT

Community Guidance Center (CGC) is a private, non-profit 501(c)(3) corporation operating an Outpatient Drug and Alcohol Program (D&A). It is the Board of Directors' policy that D&A primarily serves residents of Clearfield, Jefferson, and Cambria Counties, although consumers from other counties can also be served if capacity allows. CGC is contracted with multiple Single County Authorities (SCA) to provide level-of-care assessments, drug and alcohol assessments as well as outpatient therapy. Referrals for D&A are accepted from any source, and there are currently no limitations for accepting consumers who are seeking drug and alcohol treatment. County Probation Offices and the Pennsylvania State Boards of Probation and Parole are CGC's main D&A referral sources (e.g. drug and alcohol evaluations and treatment are required for individuals to meet Act 122 standards to have their driver's license reinstated after a DUI).

The D&A program serves individuals of any age with clinically identified or observed substance abuse tendencies, patterns or problems. These individuals, along with their significant others and close family members who could benefit from outpatient therapy, are our primary consumers in this particular program. Furthermore, individuals who are court-ordered to undergo treatment for drug and alcohol services are accepted for treatment. CGC has identified the following populations as the highest priority for D&A: pregnant intravenous drug users, pregnant women, intravenous drug users, women with children, consumers with Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome (HIV/AIDS), discharges from more intensive treatment D&A programs, MISA patients, persons with co-existing medical conditions, adolescents, and veterans.

## CGC D&amp;A OFFICE LOCATIONS AND HOURS

The D&A program operates out of three office locations located in DuBois, Clearfield, and Northern Cambria, Pennsylvania. Each office is open Monday through Friday and closed on Saturday and Sunday. All CGC office locations are closed during most national holidays.

Table 3

*CGC Drug and Alcohol Program Office Locations and Hours of Operation*

CGC Office	Address	Phone Number	Hours
DuBois	490 Jeffers St DuBois, PA 15801	814-371-1100	Monday and Wednesday: 8 - 8 Tuesday and Thursday: 8 - 6 Friday: 8 - 5 Saturday and Sunday: Closed
Clearfield	600 Leonard St Clearfield, PA 16830	814-765-5337	Monday: 9-7 Tuesday: 9 - 6 Wednesday: 9-8 Thursday and Friday: 9-5 Saturday and Sunday: Closed
Northern Cambria	4205 Crawford Ave Northern Cambria, PA 15714	814-420-8673	Monday: 11 - 7 Tuesday and Thursday: 9 - 5 Wednesday: 9 - 6 Friday: 10 - 5 Saturday and Sunday: Closed

## D&A PROGRAM DESCRIPTION

Community Guidance Center offers site-based outpatient drug and alcohol services in our Clearfield, DuBois and Northern Cambria offices. These services include traditional outpatient therapy and intensive outpatient treatment. The foundation of the D&A program is predicated on the belief that people can and do recover from the impacts of substance use. The program is designed to instill hope and empower consumers to identify valued community roles and work toward gaining the skills and resources needed to support sobriety. To this end, the program offers an array of services including comprehensive evaluations, consultation, person-centered individualized treatment planning, individual, group and family therapy, and individualized aftercare planning. Treatment models utilized include Motivational Interviewing (MI), Dialectical Behavioral Therapy (DBT), Cognitive Behavioral Therapy (CBT), Rational Self Analysis (RSA) and Rational Emotive Behavioral Therapy (REBT).

## PROGRAM PHILOSOPHY

Community Guidance Center's D&A outpatient philosophy is that each consumer benefits from individual treatment plans tailored to their specific needs. The ultimate goal for each consumer is for them to realize and experience a full and rewarding lifestyle without the use of substances. D&A sets firm, realistic expectations for consumers while emphasizing self-accountability as an integral component of effective recovery. To accomplish this, the D&A program incorporates family involvement and multi-dimensional healing of the affected consumer.



## PROGRAM ACCOMPLISHMENTS

CGC's D&A program experienced several significant changes and important accomplishments during the fiscal year that include the following:

- Restructured the management team of the D&A project which provides this program with the seasoned leadership of Chief Operations Officer Stacie Huber, LPC as the Project Director as well as Amanda Amundson, LCSW as the Department and Facility Director until superseded by Jenna Garzoni-Myers.
- The DuBois office continues to be certified by the BHARP Trauma Initiative as a Trauma-Informed Care Center. This led to several staff being trained in different Evidenced-Based Practices (EBP's) in our system of care that will assist consumers in overcoming trauma. The principles implemented in the DuBois office have been expanded to the Clearfield and Northern Cambria locations to improve consumer care and staff employment experiences.
- Implementation of the Sanctuary Model® was reaffirmed, extensively revamped and expanded in consumer care in preparation for Sanctuary Institute certification. CGC was Sanctuary certified in the fall of 2019. This certification establishes and affirms CGC as a trauma-informed organization that meets the rigorous standards of The Sanctuary Institute for trauma-informed culture and care.
- The DuBois and Clearfield offices continue to offer School Based D&A Outpatient services to Clearfield School District, DuBois School District and Curwensville School District.
- Continued internal trainings in Crisis, Prevention and Intervention, CPR/First Aid, and the outcome measure DLA-20 to improve therapists' access to trainings and improve clinical service provisions.



- Two clinicians from the DuBois office have completed an intensive Dialectical Behavioral Therapy (DBT) training as part of BHARP's DBT Initiative. The clinicians are pursuing implementation of the DBT protocol for consumers facing a dual disorder.
- All clinicians are trained in and orientated with the Co-Occurring Model of Addiction and Mental Health Treatment.
- The D&A Program continues to work toward improved community relations with referral sources through meetings with key referral source representatives. Appreciation luncheons have been attended with top referral sources. Regularly scheduled meetings continue to occur with outside referral sources.
- CGC staff continue to attend and are active members of several community-based committees such as the Overdose Task Force, Heroin Task Force, Clearfield County Collaboration and Prevention Board, Jefferson County Collaboration and Prevention Board, and Drug Free Coalitions.

#### UPCOMING FISCAL YEAR (2020-2021) D&A TRAINING PLAN

As contemporary public health concerns over substance abuse evolve, so too does the D&A program at CGC. New research and treatment methods constantly provide new avenues for successful substance abuse treatment and recovery methodologies that counteract historically common conditions like alcoholism as well as more recent epidemics such as the opioid crisis. The upcoming fiscal year includes training and expansion items to adapt to these conditions as follows:

- Utilize the newly created training tracking system to ensure all staff complete their required DDAP trainings within the required time frames throughout the 2020/2021 training year.
- Complete a secondary needs assessment with the assistance of the CGC Public Relations Department and community partners to determine the benefit of further expanding adolescent drug and alcohol services as CGC seeks to increase the adolescent population served through

the D&A program. As adolescent populations and programs expand, trainings will be identified internally and externally to assist staff in meeting identified needs. This project will be completed throughout the 2020/2021 training year.

- Utilize the newly created training tracking system and partner with the Clearfield/Jefferson and Northern Cambria D&A Commissions to locate ASAM approved trainings to train all newly employed staff and ensure previously trained staff remain up to date on ASAM standards for implementation throughout the 2020/2021 training year.
- CGC has been approved by DDAP to offer Gambling Recovery Services at the DuBois office through therapist Shaun Kanouff. CGC will partner with DDAP to implement a Gambling Protocol and certify therapist Shaun Kanouff by July, 2021.
- Complete a needs assessment and work with DDAP to review the need for additional training and implementation of a Gambling Protocol at the Clearfield and Northern Cambria offices by January, 2021.
- Identify and implement additional trainings, both internal and external, to ensure the principles of BHARP and the Sanctuary Model® are upheld post-certification. This will be completed throughout the 2020/2021 fiscal year.
- CGC has recently obtained internal certified trainers in Crisis, Prevention and Intervention and CPR/First Aid as well as the implementation of the outcome measure DLA-20. CGC will utilize an internal training tracking system to ensure all appropriate staff are trained in the models and demonstrate proper implementation throughout the 2020/2021 fiscal year.
- CGC is engaged in the Heroin Task Force and Overdose Task Force within the community to better serve not only our consumers, but the community as a whole. Through these initiatives, trainings and community projects will be identified to better combat Pennsylvania's rising opiate epidemic. This will occur throughout the 2020/2021 fiscal year.

## D&amp;A REVENUE AND EXPENSES

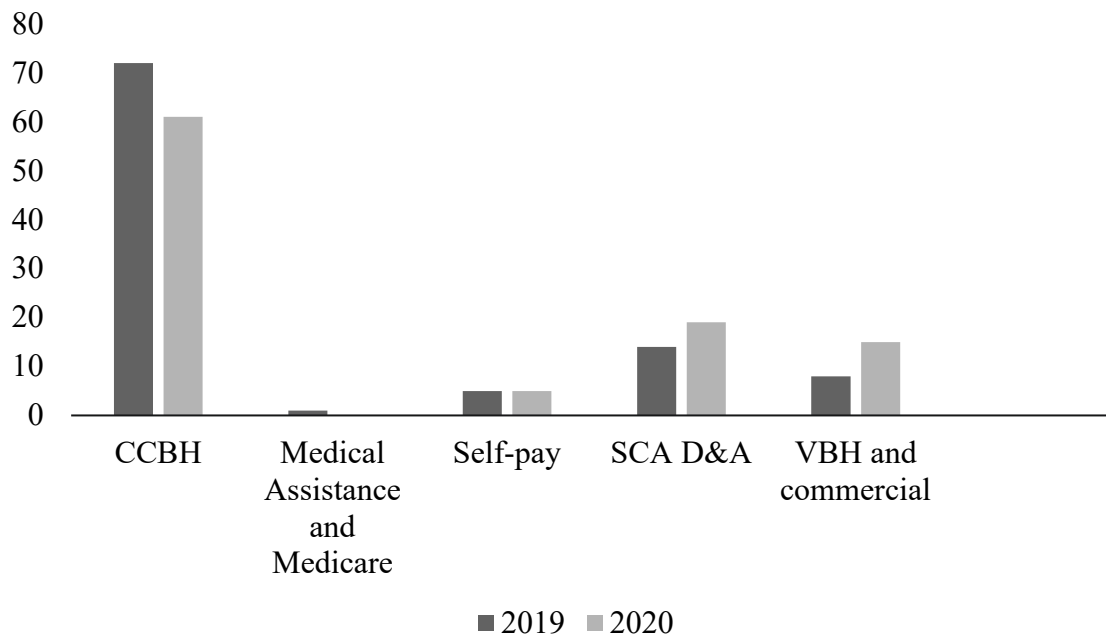
Funding and payment sources for D&A services at CGC include state and county-funded programs and resources such as Community Care Behavioral Health (CCBH, Clearfield County), Magellan Managed Care, Medical Assistance and Medicare, personal payments (self-pay), and the Single County Authority Drug and Alcohol (SCA D&A). Table 4 displays the results for revenue for the 2020 fiscal year compared to the 2019 fiscal year. CGC generated a 26% increase in its D&A revenue during the 2020 fiscal year. CCBH revenue increased from \$264,308 to \$285,755. This funding source now accounts for 61% of department revenue while it accounted for 72% the previous year. Medical Assistance and Medicare payments remained about the same as the previous year. Self-pay increased slightly from \$18,797 to \$21,333. This suggests some consumers are paying with some type of insurance or are enrolled in state/county funded programs. SCA D&A payments increased significantly at a 61% increase from \$52,940 to 86,974. Value Behavioral Health and commercial insurance payments also increased from \$28,912 to \$69,314. This suggests D&A consumers are increasingly relying on state/county funded resources for D&A treatment.

Table 4

*Revenue and Payment Sources*

	2019	2019%	2020	2020%	<i>Note. Values are in whole dollars.</i>
CCBH	264,308	72%	285,755	61%	
Medical Assistance and Medicare	2,823	1%	1,654	0%	
Self-pay	18,797	5%	21,333	5%	
SCA D&A	52,940	14%	86,974	19%	
VBH and commercial	28,912	8%	69,314	15%	
Total	367,780		465,031		

Figure 2

*Revenue and Payment Sources Percent*

Expenses for the D&A program this fiscal year rose at a similar rate to program revenue (see Table 4), which generated (\$97,251) more than the previous year. D&A expenses rose by 10% (\$35,196). As demonstrated in Table 5, expenses were quite similar to the previous year with salaries, wages and employee benefits increasing to 75% of the expended budget and other dropping to 25%.

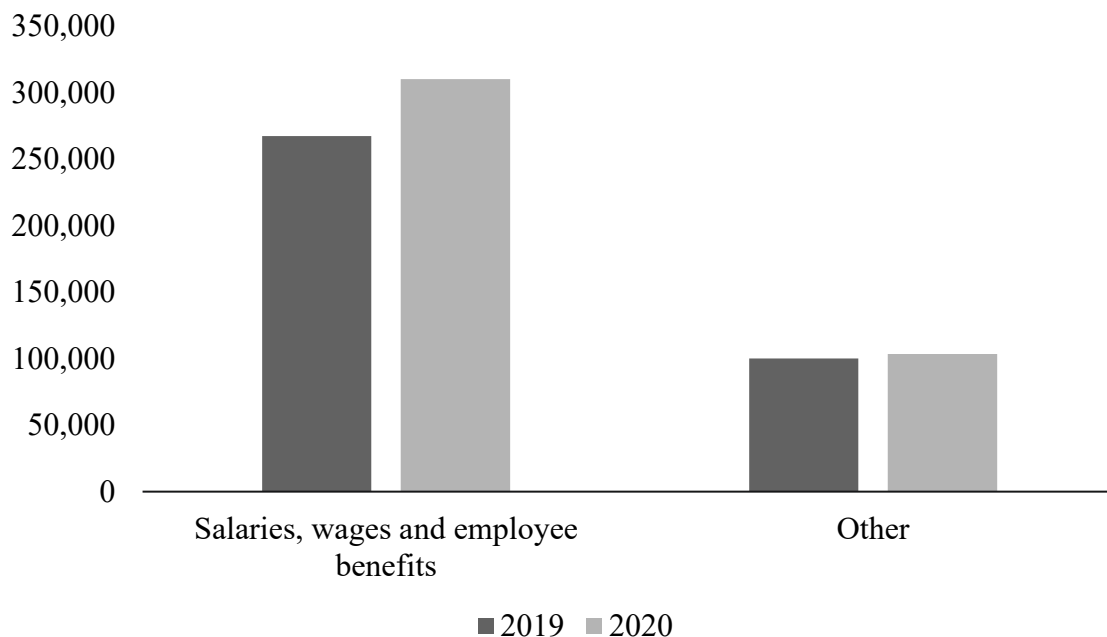
Table 5

*D&A Expenses*

Source	2019	2019%	2020	2020%
Salaries, wages and employee benefits	267,379	73%	310,371	75%
Other	100,273	27%	103,473	25%
Total	367,653	100%	413,877	100%

*Note.* Values are in whole dollars.

Figure 3

*D&A Expenses by Year***D&A ADMISSION STATISTICS**

The D&A program saw a considerable increase in admissions. There were 111 more admissions to the CGC D&A program this past year for a total of 525, whereas there were 414 during the previous fiscal year. This was a 27% increase in admissions that demonstrates, at least in the areas serviced by CGC, substance abuse increased, the number of people seeking treatment for substance abused increased, or both conditions existed concurrently. The most notable increase occurred in Clearfield County, which is serviced by CGC's Clearfield and DuBois offices. Here there was a 51% increase in admissions going from 275 in the 2019 fiscal year to 326 this past fiscal year. The D&A program opened at the Northern Cambria office during the last fiscal year, and thus all its respective statistics and data in this report are the seminal numbers from this location. Clearfield, Jefferson and Cambria Counties comprise the largest portion of admissions to the D&A program.

Table 6

*D&A Admissions 2019 Fiscal Year and 2020 Fiscal Year*

County	2019	2020	Increase	Decrease
Allegheny	1	1	0	
Armstrong	1	0	1	-1
Butler	0	1	1	
Cambria	31	44	13	
Cameron	1	1	0	
Centre County	1	0		-1
Clearfield County	275	326	51	
Elk County	10	11	1	
Indiana	3	3	0	
Jefferson County	92	137	45	
Unidentified	0	1	1	
Total Admissions	414	525		

The distribution of admissions by office remained comparatively similar. The DuBois office dropped from 73% of total program admissions to 68%, yet saw a 19% increase in admissions from 311 to 370. This 5 % drop correlates to the increases to Northern Cambria and Clearfield offices. D&A programs at the Northern Cambria office accounted for 9% of program admissions (47 admissions) while the Clearfield office increased to 23% from 21%, with an increase of 39 admissions compared to the previous year.

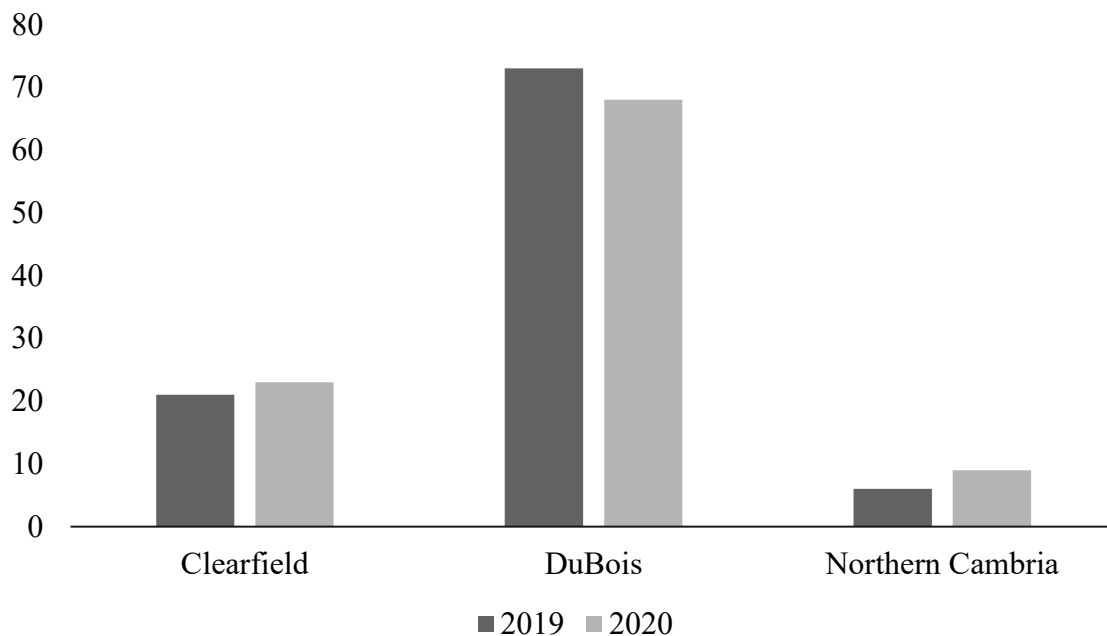
Table 7

*Admissions by Office*

Office	2019	2019 %	2020	2020 %
Clearfield	86	21%	125	23%
DuBois	311	73%	370	68%
Northern Cambria	34	6%	47	9%
Total	431		542	

*Note.* Admissions by office totals can vary from total admissions by county due to dual admissions, transfers and other variables.

Figure 4

*Admissions by Office Percent***D&A ADMISSION DEMOGRAPHICS**

Consumer demographics from the D&A program provide important evidence that helps mental and behavioral health professionals effectively identify what groups of people are at highest risk for substance abuse disorders and conditions. This data further allows these professionals to develop more specific treatment methodologies and approaches to suit the needs of these particular groups. The following data, tables and graphs provide a comparative summary of consumer demographics from the last two fiscal years.

Table 8 displays results for admission by gender. The 2020 fiscal year exhibited a substantial difference between male and female, with male being the larger of the two groups. Males comprised 60% of the serviced population for 2020 while females accounted for 40%.



Table 8

*Admission by Gender*

Gender	2019	2019%	2020	2020%
Female	152	37%	212	40%
Male	262	63%	313	60%
Total	414		525	

Age distribution is detailed in Table 9. Some notable changes occurred between fiscal years in this demographic. Admissions for 17 years and under remained at about the same proportion. Admissions aged 45 years and older increased by 3%. An important shift occurred for consumers admitted between the ages of 18-44. The 18-24 group saw a 3% increase to 15% with 26 more admissions program-wide. The largest age group of admissions includes individuals aged 25-44, which accounts for 178 admissions, or 34% of all admissions to the D&A program. Groups in segment, 25-34, 35-44, and 45-54 increased in admissions. These negatively skewed results (see Figure 5) demonstrate that older substance abusers are seemingly more likely to seek treatment or it could signify that substance abusers are more likely to be older individuals. This is a shift from the typically considered at-risk population 14 and under. These numbers only come from one agency, but they bear important weight for CGC and potentially for other institutions and organizations in the same region who provide similar D&A services.

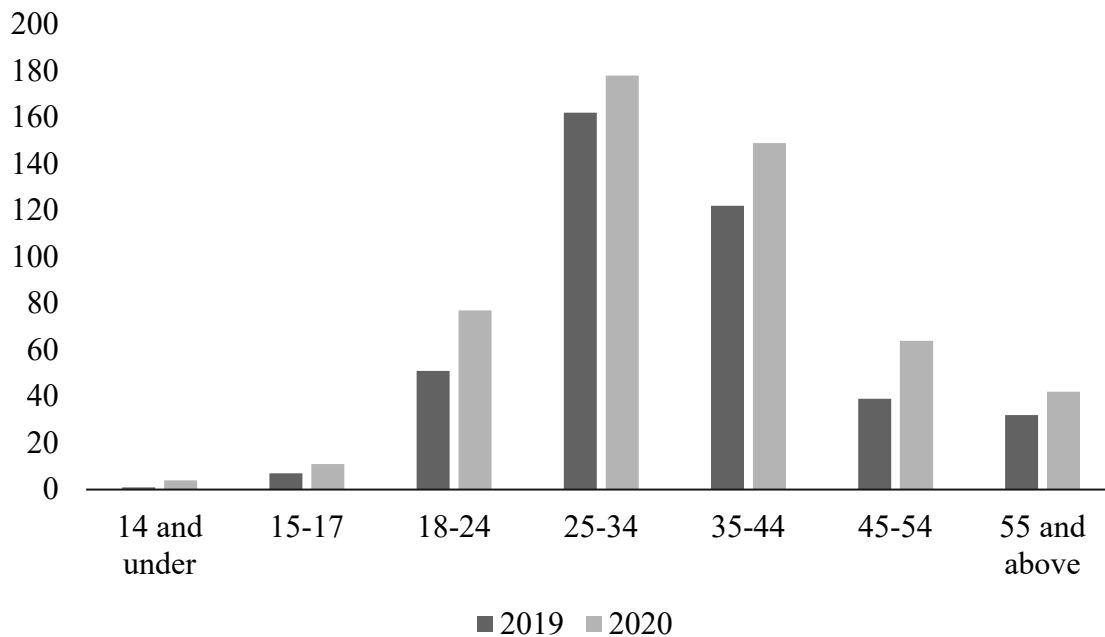
Table 9

*Age of Admitted D&A Consumers*

Age	2019	2019 %	2020	2020 %
14 and under	1	1%	4	1%
15-17	7	2%	11	2%
18-24	51	12%	77	15%
25-34	162	39%	178	34%
35-44	122	29%	149	28%
45-54	39	9%	64	12%
55 and above	32	8%	42	8%

Total	414	525
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Figure 5

*Age of Admitted D&A Consumers*

Race distribution is detailed in Table 10. The population served overwhelmingly identifies as White. This group saw an increase of 111 admissions and comprised 98% of D&A admissions. Black/African American was the second largest group with an increase from 4 to 6 accounting for 1% of total admissions. All other races documented accounted for less than 1%. When compared with age data listed in the table above, average D&A consumers tend to be white, middle-aged males.

Table 10

*Race of Admitted D&A Consumers*

Race	2019	2019 %	2020	2020 %
White	405	98%	516	98%
Black/African American	4	1%	6	1%
American Indian/Eskimo/Aleut	0	0%	0	0%
Asian	1	<1%	1	<1%
Native Hawaiian/Pacific Islander	1	<1%	0	0%
Unknown	2	<1%	1	<1%
Other	1	<1%	1	<1%
Total	414		525	

## SPECIAL CONCERN POPULATIONS

There are three consumer categories of special concern whose conditions receive high priority status. They include intravenous drug users, Hepatitis C referrals and pregnant women/women with children. The total number of these cases for the 2019 fiscal year numbered 142. The total number of these special concern admissions increased to 179 during 2020. All categories remained near the same percentage totals compared to the previous fiscal year.

Table 11

*Special Concern Population Admissions*

Condition	2019	2019%	2020	2020%
Hepatitis C referrals	8	6%	6	3%
Intravenous drug users	5	4%	6	3%
Pregnant women/women with children	129	90%	167	94%
Total	142		179	

## PRIMARY DRUG OF CHOICE

The D&A program at CGC identifies 6 substance groups as consumers' foundational drugs of choice. They include alcohol, opiates, marijuana/THC, heroin, amphetamines/methamphetamines and others. The most notable change was an increase in alcohol designations from 104 to 119, which was a 14%

increase program wide. Opiates had a total decrease from 90 to 78 consumers. The marijuana/THC total increased to 23% from 18% the previous year. Heroin showed a significant surge from 2019 to 2020 increasing from 38 to 51 respectively. Amphetamines/methamphetamines increased by 67% as selected drug of choice during 2020.

Table 12

*Drug of Choice for D&A Consumers*

Drug of Choice	2019	2019 %	2020	2020 %
Alcohol	104	25%	119	23%
Opiates	90	22%	78	15%
Marijuana/THC	73	18%	122	23%
Heroin	38	9%	51	10%
Amphetamines/methamphetamines	61	15%	102	19%
Other	48	12%	53	10%
Total	414		525	

Overall, drug of choice remained relatively proportionate and similar. Although opiates are down slightly it is noted that heroin experienced an increase. Furthermore, usage of one of these drugs often coincides with using the other (National Institute on Drug Abuse, 2019). For example, opiate usage from prescription medication can lead to subsequent heroin usage. Heroin comprised a larger portion of this figure than the previous year while opiates fell. These numbers support National Institute on Drug Abuse statistics and analyses mentioned above.

Table 13

*Opiate and Heroin Usage*

Drug of Choice	2019	2019%	2020	2020%
Opiates	90	70%	78	60%
Heroin	38	30%	51	40%
Total	128		129	

## CONCLUSION

Some generalized observations can be established from the descriptive statistics and analysis contained in this report. First, the overall size and capacity of the D&A program at CGC over the last year increased. The vast majority of admissions occurred in Clearfield County at the DuBois and Clearfield offices. The Northern Cambria office experienced a relatively large number of admissions in its second year and, based on trends and tendencies regarding increased substance abuse issues, is likely to grow in the coming fiscal year. Opioid-related admissions also grew in conjunction with general nationwide trends. Lastly, the average age of admitted substance abusers shifted towards an older demographic over the last year, suggesting that as substance abuse increases in our community, opioids are becoming a significant contributor to local substance abuse problems. Middle-aged and older individuals are more at risk for being affected by this condition than might have been previously expected.

## REFERENCES

National Institute on Drug Abuse. (n.d.). Heroin. Retrieved July 28, 2019, from <https://www.drugabuse.gov/publications/drugfacts/heroin>