



ANNUAL REPORT

LICKING COUNTY ALCOHOLISM PREVENTION PROGRAM

2021

In fiscal year 2021, based on final audit figures, the Agency showed a gain of \$185,331.96 and ended with a cash balance reserve after liabilities of \$236,821, a decrease of \$20,597 from its starting balance of \$257,418. The final payments in Medicaid advances to Managed Health Care organizations of \$13,000 and the remaining in capitalization expenditures. Nevertheless, the agency continues to be fiscally viable, at this time, keeping expenditures as low as possible and continuing to pay all accounts payable upon receipt. In addition, the Pataskala site in Western Licking County provided services to 83 individuals representing 9% of the 923 clients served by Licking County Alcoholism Prevention Program and generated \$28,817.25 in revenue. In order to diversify revenue streams and provide integrated behavioral health services, the agency continues to be State certified to provide mental health assessment and behavioral health counseling and therapy to continue integrated behavioral health services to those individuals experiencing co-occurring disorders related to mental health and/or alcohol and other drug issues. The agency received support from the Mental Health and Recovery Board for much needed server and workstation upgrades throughout the fiscal year so LAPP is better positioned to provide telehealth services. This had previously been a barrier to service and positions LAPP better moving forward with the uncertainty that Coronavirus has brought to the services provided to our clients. The agency looks forward to continuing financial growth through development of new services, as well as accurate collection of authorized receivables. The agency will continue its work to balance service delivery with costs and we look forward to the future of LAPP.

Agency Outcomes:

In fiscal year 2021 there were 923 (904 adult and 19 youth) admissions to the outpatient program and 120 admissions to the 72-hour, Driver Intervention Program. Over the past fiscal year, LAPP discharged a total of 274 (266 adult and 8 youth) clients. This includes those clients who were referred to LAPP for an evaluation only, those clients with no diagnosis, and those clients who completed an intake, but never returned for assessment. Of the 273 total discharges, LAPP discharged 207 (202 adult and 5 youth) clients assessed as appropriate for out-patient services. Of the 202 adult discharges, 96 (47.5%) were approved discharges and 106 (52.5%) were non-approved discharges. Also, of the

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96 adult approved discharges, 82 (85.4%) were diagnosed as experiencing a substance use disorder, moderate to severe and 14 (14.6%) clients were assessed with a substance use disorder, mild. Of the 82 clients diagnosed with a substance use disorder, moderate to severe, 70 (85.4%) reported abstinence at the time of program completion. Of the 14 clients assessed with a substance use disorder, mild, 11 (78.6%) reported abstinence at the time of their discharge.

Adult General Program:

In fiscal year 2021 there were 580 adult admissions to the Adult General Program, with 522 (90%) scheduled for their first clinical assessment session within 14 calendar days of their initial contact session. Of the 580 adult admissions, 386 (66.6%) were scheduled SUD treatment services, with 365 (94.6%) scheduled for their first treatment session within 28 calendar days of their initial contact session. Outpatient services were provided to 107 (18.4%) new Opioid using admissions with 102 (95.3%) scheduled for their first treatment session within 28 calendar days of their initial contact session.

In fiscal year 2021, LAPP discharged 131 Adult General Program clients assessed as appropriate for out-patient services. Of the 131 adult discharges, 75 (57.3%) were approved discharges and 56 (42.7%) were non-approved discharges. Of the 75 adult approved discharges, 63 (84%) were diagnosed as experiencing a substance use disorder, moderate to severe and 12 (16%) clients were assessed with a substance use disorder, mild. Of the 63 clients diagnosed with a substance use disorder, moderate to severe, 52 (82.5%) reported abstinence at the time of program completion. Of the 12 clients assessed with a substance use disorder, mild, 10 (83.3%) reported abstinence at the time of their discharge.

LAPP continues to provide Stage-Wise Treatment, using Motivational Interviewing techniques with all programming and all clinical staff utilizes this approach to individualize services for the client. Stage specific groups and programming were used to meet the identified needs of the clients. Stage specific groups include our Road to Recovery Group that addresses criminogenic needs and skills, the revised Positive Direction Series that teaches specific recovery and life skills, and Breaking Free, a men's trauma group open to all male clients of the agency.

In addition to providing typical integrated outpatient treatment services, LAPP also provides valuable assessment and intervention services to the criminal justice system at the Licking County Justice Center and through justice system grants through, both the Licking County Common Pleas Court and Licking County Municipal Court. During FY 2021, a contract was developed and implemented by the Licking County Municipal Court Probation Department to place a licensed LAPP clinician "on site" to serve the needs of their population. We have also increased our working relationship with The Main Place

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in a similar fashion. Our Outreach Case Manager provided an Outreach Group session weekly and completed intakes and assessments “on site”. Over the course of FY 2021 each of these has shown great promise in helping to educate and engage these individuals in further treatment at the Agency.

LAPP also continued its role as the gatekeeper for Mental Health & Recovery for Licking and Knox Counties (MHR) funds and the primary treatment provider for Medication Assisted Treatment (MAT) programming and detoxification level of care. LAPP also is the gatekeeper for MHR funds for residential and partial hospitalization levels of care, the State Opioid Response (SOR) Program, and the co-leader for the Quick Response Team (QRT).

Women’s Program:

In fiscal year 2021 there were 324 admissions to the Adult Women’s Program, with 269 (83%) scheduled for their first clinical assessment session within 14 calendar days of their initial contact session. Of the 324 admissions, 216 (66.6%) were scheduled SUD treatment services, with 193 (89.4%) scheduled for their first treatment session within 28 calendar days of their initial contact session. Gender specific services were provided to all 216 clients.

There were 71 adult women discharged from the Adult Women’s Program, with 21 (29.6%) approved discharges and 50 (70.4%) non-approved discharges. Of the 21 adult women approved discharges, 19 (90.5%) were diagnosed as experiencing a substance use disorder, moderate to severe and 2 (9.5%) clients were assessed with a substance use disorder, mild. Of the 19 clients diagnosed with a substance use disorder, moderate to severe, 18 (94.7%) reported abstinence at the time of program completion. Of the 2 clients assessed with a substance use disorder, mild, 1 (50%) reported abstinence at the time of their discharge.

The Adult Women’s Program continues to provide groups to address client needs and better match stage-wise treatment strategies. These groups range from the engagement stage to the maintenance stage on the stage-wise continuum. Due to the loss of staff, we were not able to provide a Contemplation Group. The Women’s Addiction Recovery (WAR) Intensive Outpatient program is a gender-specific, closed group offering an intense program for women diagnosed with a substance use disorder, moderate to severe, and assessed as needing a highly structured program to support the recovery process. Other groups such as the Women’s Action Group is designed for women identified with a substance use disorder, moderate to severe, but do not present with an overly lengthy history of use and are in the Action stage of change. This group is also for women who have completed Intensive Outpatient and will benefit from a structured atmosphere to work on the integrated recovery skills they have already

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learned. This Action stage group currently has evening sessions. The Thinking Healthy and Wellness group is an open group that addresses thinking errors leading to relapse in criminal and/or addictive behaviors. A representative from the Women's Program helped to create and then facilitated a group at the Action stage of change for clients on Conditional Release from Common Pleas court.

In addition to group interventions all clients are assigned to a primary counselor with whom they engage in individual sessions to further process information from the groups. Primary counselors also perform case management and other services beneficial to our clients.

The Women's Program continues collaboration efforts with Behavioral Healthcare Partners of Central Ohio, Mid-Ohio Counseling services, and The Woodlands counseling center. The program usually hosts an annual Christmas party which involves both fellowship and the giving away of clothing and household items donated to LAPP by staff and other donors. All leftover clothing and items are donated to one of the local charities such as Goodwill, St. Vincent's, or LEADS. In addition, the program participates in fundraising activities with other community organizations whenever possible.

With the recent addition of another Licensed Social Worker, The Women's Program is planning on expanding the services offered. Group sessions for addressing anxiety, depression, grief, and/or anger are to be added. These groups will likely be closed groups to assist in creating rapport and maximizing client benefit from participation.

Adolescent Program:

There were 19 admissions to the Adolescent Program in fiscal year 2021, with all 19 (100%) scheduled for their first clinical assessment session within 14 calendar days of their initial contact session. Of the 19 admissions, 16 (84.2%) were scheduled for SUD treatment services, with all 16 (100%) scheduled for their first treatment session within 28 calendar days of their initial contact session.

In fiscal year 2021, 19 youth clients received SUD services at this Agency. Of the 19 youth clients, 3 completed an assessment only and received no diagnosis and 16 were assessed as appropriate for out-patient services. Of the 16 assessed as appropriate for out-patient services, 4 (25%) were approved discharges, 1 (6.3%) was a non-approved discharge, and 11 (68.7%) were carried over to fiscal year 2022. Of the 4 approved discharges, 2 (50%) were diagnosed with a substance use disorder, moderate to severe and 2 (50%) clients were assessed with a substance use disorder, mild. Of the 4 youth clients receiving an approved discharge and diagnosed with a substance use disorder, all 4 (100%) reported abstinence at the time of program completion. If we add the 3-

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youth completing an assessment only and discharged with no diagnosis or not in need of services, there were 7 (87.5%) approved youth discharges out of 8 youth discharges.

There has been a decrease in youth referrals to LAPP from the Licking County Juvenile Court. Those youth that are referred are presenting with moderate to severe issues and very poor family support. Our current programming for this population is limited and has led to increased research to determine the feasibility of offering more intensive programming. However, after careful research and program review, we determined that offering an additional, more intensive programming is not fiscally feasible, at this time, due to the limited youth referrals made to LAPP. The number of referrals received does not justify the need to expand programming and/or obtain additional staff. Adjustments in current staffing patterns will be utilized, per need, to address any increase in adolescent referrals. The program continues to provide assessment, individual counseling, groups for adolescents diagnosed with a substance use disorder, mild, moderate, or severe, and a teen intervention group to provide education for adolescents exhibiting low intensity, experimental use of alcohol and/or other drugs.

Youth referrals from schools have been steady and consistent during the school year from high schools with some increase in referrals from the districts in the eastern portion of Licking County (Southwest Licking Schools). Vaping related referrals of Students have been on the rise in the past fiscal year. There has been some increase in activity across all districts from the middle schools, especially referrals related to vaping or cannabis use.

The Adolescent programmer and the Executive Director have been reaching out to the Juvenile Court to increase the number of referrals and potential new program development. This process has been slow, but steady and positive. Finally, to be responsive to community needs and, in an effort, to remain current with adolescent treatment trends, we continue to work on improving programming using evidence best practice programs.

Access to Services:

Providing timely treatment services for substance dependent adult clients is a difficult task. This is an area of continued focus due to the nature of the population we serve. During the latter half of FY 2021 we began developing a triage process to include an emergency clinician/receptionist to address any immediate crisis. This will help to improve accessibility and engage clients faster in times of crisis. We have continued to streamline the intake and assessment process by providing more mobile & off-site options. We continue to revise our staffing patterns and assessment methods to include a screening, diagnosis, treatment planning session by the first or second visit. This has proven to be successful in that our ability to involve clients in the treatment process

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more expediently has improved. Our belief is that identification of new/revised methods will not only reduce the time spent in multiple pre-treatment sessions, but immediately serves to mitigate potential crisis and engage the client as an active participant in their own treatment from the onset. This will continue to improve outcomes such as participation and successful discharge.

Partnerships:

The program continues its primary mission as the major SUD program resource for the criminal justice system locally. LAPP remains the major provider of specialized criminal justice services to both, Municipal Court and Common Pleas Court and continues to provide programming to Licking County Municipal Court Drug Court Docket: Licking County Intervention For Treatment (L.I.F.T.) and the Licking County Common Pleas Court Drug Court Docket: Addiction Recovery Court (A.R.C.). We continue to enhance our involvement with the criminal justice system through our presence on the steering committees of each of the specialized dockets and we are represented on the local Community Corrections Planning Board. We provide a 72-hour, Driver Intervention Program (Options) for first time OVI offenders and LAPP is an integral partner of the Licking County Common Pleas Court, Day Reporting program. LAPP also is involved Behavioral Health-Criminal Justice Linkage Project (Jail) Grant with Mental Health and Recovery for Licking and Knox Counties and in close collaboration with the Woodlands Behavioral Healthcare Partners, and the Licking County court system to provide trauma informed services and linkage to treatment services at the Licking County Justice Center.

LAPP is also involved in several community ventures such as the “Medication Assisted Treatment – Prescription Drug and Opioid Addiction (MAT-PDOA)” grant to enable Mental Health and Recovery for Licking and Knox Counties to undertake the Overdose Response Team Project to expand the use of medication assisted treatment in the Licking County improve access and retention to treatment and recovery services and reduce unintentional overdose deaths. Community/Clinical Linkages Project with Licking County Health Department, a project to enhance community and clinical linkages to prevent overdose in those reentering communities after being in a treatment facility. In this project, LAPP, in collaboration with Shepherd Hill, serves as one of the sites to 1) develop policies and procedures on the distribution of naloxone to applicable clients and 2) participate in meetings to identify barriers patients face when transitioning from inpatient to outpatient treatment and pilot a potential solution. We provide Employee Assistance Programming, Drug Free Safety Programming, and Department of Transportation assessment and evaluation services at the Agency. We are also involved with the United Way Agency, Licking County Addiction Taskforce, Licking County Re-Entry Taskforce, and the Family and Children’s First Council to name a few. While many of these programs serve a need to the criminal justice system, while generating additional

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revenue, the others are useful in helping LAPP remain committed to and visible in the community.

We are also pursuing working relationships with many of the new providers to the area. To date these include Lower Lights Christian Health and BrightView. As additional providers move into our service area, LAPP will continue to pursue these relationships to support the vision of a Recovery Oriented System of Care (ROSC).

Medication Assisted Treatment (MAT):

In fiscal year 2021 the Agency continued in its role as the gatekeeper for Medication Assisted Treatment (MAT) and the primary provider of treatment to this population. During the implementation phase of medication assisted treatment (MAT) there were two (2) primary short-term objectives: 1) Improve engagement rates of those individuals' accessing services at LAPP due to their use of opioid substances; and 2) Decrease the drop-out rates of those individuals' accessing services at LAPP due to their use of opioid substances. The goal is to increase the number of opiate addicted clients successfully completing treatment, returning to work, and reducing legal problems related to opiate addiction.

In SFY 2021 there were 22 adult referrals to Shepherd Hill for Medication Assisted Treatment (MAT) and 16 clients carried over from the previous year. Not all those referred received funding for MAT from MHR. Of the 22 MAT referred clients in SFY 2021, 12 received MAT funding for either, clinic visits and/or medication from MHR. Of the 12 clients receiving MAT funding, 4 (33.3%) received an Approved Discharge, 5 (41.7%) were carried over and were still active in treatment services in FY 2021, 2 (16.7%) either dropped out of services or were incarcerated, and 1 (8.3%) was admitted to residential treatment. Of the remaining 10 adult referrals to Shepherd Hill for Medication Assisted Treatment that did not receive MAT funding from MHR, 1 (10%) was funded by Addiction Treatment Program (ATP), 3 (30%) were carried over and were still active in treatment services in FY 2021, and 6 (60%) either dropped out of services or were incarcerated.

In SFY 2021, LAPP continued in its role as the Adult Opioid Residential Treatment Room and Board gatekeeper for the MHR Board in collaboration with Shepherd Hill. In this role LAPP will approve admissions to the program and authorize/approve a specific number of days, verbally, followed by written authorization. All services must be pre-authorized. Lengths of stay expected to exceed the authorized days must be recommended by LAPP and receive prior approval from the Agency. LAPP reserves the right to refuse to authorize, and the MHR Board reserves the right to refuse to pay for services provided to persons who exceed authorized lengths of stay. Both residential programs agree to work cooperatively with the MHR Board and LAPP in determining length of stay, treatment planning and developing aftercare services for the

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consumer. The programs will also work cooperatively with LAPP so that a discharge plan will be in place at least 24 hours prior to discharge.

Accomplishment:

In FY 2021, LAPP continued to improve our use of telehealth and other mobile services to assist our persons served. We began the process of developing an intake/admission triage process to reduce crisis potential at our front door and revised our crisis protocol(s). In addition, LAPP continued to provide services to both Licking County Common Pleas Court and Licking County Municipal Court in the form of contracts with them for services to their populations.

The organization continued to manage the COVID-19 pandemic by becoming flexible and willing to adjust to the needs of our community. New and revised program approaches were requested and provided to our referral sources. Many of these proved to be challenging due to the changes in obtaining and retaining staff. We successfully completed our new strategic plan and moved forward despite the pandemic. LAPP also received a new three-year accreditation from CARF. This allows LAPP to provide integrated behavioral health services to those individuals experiencing co-occurring disorders related to mental health and/or substance use disorder issues.

The organization also continued to provide a full array of integrated behavioral health services at the Pataskala site, while adding new service opportunities at The Main Place, LCMC Probation and LCCPC Adult Court Services.

The Coming Year:

The coming fiscal years of 2022 & 2023 will prove to be a challenge for the organization. There are many challenge points to continue our successes and abilities to provide services to our community. Our priority is to obtain, retain and secure staff to enable LAPP to continue with the new strategic plan. As we worked through many issues related to this past year, LAPP feels confident that we are on the upswing and will return to our previous level of financial stability.

The community response to the program in fiscal year 2021 was favorable and positive in terms of client service delivery. As a result, we are planning to add a new program, while growing another. By alleviating the financial strain on the organization and stabilizing our staffing patterns, LAPP will be able to increase its focus on improving client service delivery and facilitating more positive client outcomes. While the organization has been able to establish some additional funding sources, we are still in need of establishing additional funding sources to decrease the organizations reliance on Mental Health & Recovery for Licking and Knox Counties and continue to build upon our financial reserve.

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The staff wishes to thank the Board of Directors and other volunteers for their excellent and very important work during the year. This contribution to the agency and its clients is immeasurable.

We look for sustained growth and improvement in fiscal years 2022 & 2023 to meet future challenges. We will continue to review ways to enhance the organizations visibility to see us through these difficult times of economic uncertainty. Furthermore, we will continue improve service delivery in a cost-effective method and provide expanded services in western Licking County. We will also continue to work on accomplishing the identified goals in our Agency's strategic plan, our mission statement, and our vision statement by continuing to strengthen policies to help the organization become more effective.

LAPP remains committed to providing "safety net" services to the Licking County area and as such will continue to provide quality outpatient integrated behavioral health programming in fiscal year 2022 and beyond. Furthermore, we look forward to the continuation of our programs and to further improvement and development of our service components for Licking County in the coming year.

FISCAL YEAR 2021 STATISTICAL REPORT: OUTPATIENT

INTAKES	
MONTH	NUMBER
JULY, 2020	90
AUGUST, 2020	76
SEPTEMBER, 2018	91
OCTOBER, 2020	81
NOVEMBER, 2020	91
DECEMBER, 2020	64
JANUARY, 2021	71
FEBRUARY, 2021	58
MARCH 2021	69
APRIL, 2021	85
MAY, 2021	63
JUNE, 2021	84
TOTAL INTAKES FY 2021 Youth = 19 Adult = 904	923

*DISCHARGES	APPROVED DISCHARGE	NON-APPROVED DISCHARGE	EVALUATION ONLY	INCARCERATED
207	100 (48.3%)	107 (51.7%)	***26	37
Adult 202 Youth 5	Adult 96 Youth 4	Adult 106 Youth 1	Adult 23 Youth 3	Adult 36 Youth 1
**Total Discharges	NO DIAGNOSIS	DEPENDENT DX.	ABUSE DX.	DID NOT RETURN
274	19 (6.9%)	*189 (69%)	***18 (6.6%)	48 (17.5%) Intake Only
Adult 266 Youth 8	Adult 16 Youth 3	Adult 186 Youth 3	Adult 16 Youth 2	Adult 48 Youth 0
<p>* Assessed as appropriate for out-patient services and receiving Approved/Non-Approved Discharge</p> <p>** Includes evaluation only, no diagnosis, and intake only</p> <p>*** Breakdown of these categories are addressed in attached Performance Targets: Approved/Non-Approved Discharges</p>				

FISCAL YEAR 2021 STATISTICAL REPORT: OPTIONS

NUMBER OF PARTICIPANTS			
MONTH	NUMBER		
JULY, 2020	Women 16	Men 10	Total 26
AUGUST, 2020		Men 9	Total 9
SEPTEMBER, 2020		Men 8	Total 8
OCTOBER, 2020		Men 9	Total 9
NOVEMBER, 2020	Women 7	Men 0	Total 7
DECEMBER, 2020	Cancelled		Total 0
JANUARY, 2021		Men 8	Total 8
FEBRUARY, 2021		Men 10	Total 10
MARCH 2021	Women 5	Men 10	Total 15
APRIL, 2021		Men 10	Total 10
MAY, 2021		Men 8	Total 8
JUNE, 2021		Men 10	Total 10
TOTAL: FY 2021	Women 28	Men 92	Total 120

**REFERRALS BACK TO AGENCY
FOR ASSESSMENT**

35

**either referred to the Agency for
assessment or were already receiving
outpatient services**

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Performance Targets	Results
Service Utilization	
Total number of initial calls from new clients or potential clients during the quarter (overall volume of calls).	In FY 2021 there were 946 initial calls for services from new clients or potential new clients. 875 were from Licking County, 8 from Knox County, and 63 from County of residence other or unknown. The 946 (calls and walk-ins) for services resulted in the completion of 923 initial contact sessions. All phone calls or walk-ins requesting services are tracked by hand.
Adult Access to and Engagement in Services	
Hospitalization Follow-Up (Adults and Youth)	
MHR Performance Target Average (median) number of days between discharge from Detox/SUD In-patient and face-to-face outpatient services with follow-up contact will be 5 days or less. (For adult clients receiving ongoing services from MHR provider).	In FY 2021 there were thirteen (13) emergency board funded individuals who received detox services at Shepherd Hill. Of those 13, one individual received emergency board funded detox services on three (3) occasions. Eleven (11) were seen within five days. In addition, LAPP was also involved with services for individuals, who were in receiving Partial Hospitalization (2.5) at Shepherd Hill as part of MHR's Room and Board Initiative. During this time period, Licking Memorial Hospital (LMH) experienced a major change in their EHR systems. Presently, we cannot determine the complete accuracy of the above information. We continue to receive data from LMH regarding this, however, this data has not been accurate. As a result, we continue to determine accurate billing and other related data in this area.
MHR Performance Target Average (median) number of days between discharge from Detox/SUD In-patient and face-to-face outpatient services with follow-up contact will be 5 days or less. (For youth clients receiving ongoing services from MHR provider)	In FY 2021, no youth clients were referred to this Agency for outpatient services following their discharged from Detox/AoD In-patient
Access to Treatment Services—Adult	
MHR Performance Target Average (mean) number of days from initial call/first contact to first scheduled treatment appointment (the first appointment after the assessment has been completed) will be 28 days or less (adult).	<p style="text-align: center;">FIRST CLINICAL APPOINTMENT</p> In FY 2021 there were 904 adult admissions (580 Adult General Program and 324 Women's Program), with 791 (87.5%) being scheduled their assessment session within fourteen (14) calendar days or less. Of the 904 adult admissions 82 were seen for an assessment only, 210 never returned for assessment, and 10 were still in the assessment process at the close of the fiscal year. This resulted in 602 (386 Adult General Program and 216 Women's Program) individuals referred and scheduled a first treatment appointment. The average number of days from initial contact session to first clinical assessment session was 8.9 days for all 904 FY 2021 admissions. <p style="text-align: center;">INITIAL CONTACT SESSION TO FIRST TREATMENT APPOINTMENT</p> In FY 2021, the average number of days from initial call/first contact to first treatment appointment (the first appointment after the assessment has been completed) for all 602 adult clients was 16.7 days (median=15). The average number of days for the 343

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	<p>individuals in Adult General Outpatient was 16.4 days (median=15). The average number of days for the 43 individuals placed into adult IOP Level of care was 11.9 days (median=13). The average number of days for 187 Women's Outpatient clients was 18.4 days (median=16). The average number of days for the 29 women placed into Women's IOP Level of care was 16.1 days (median=17). For the 107 adults with an opiate diagnosis the average number of days was 16.3 days (median=16) and for the 169 adults with a methamphetamine diagnosis the average number of days was 17.6 days (median=17). For the 25 individuals receiving mental health services only, the average number of days was 15.5.</p>
<p>Access to Treatment - IV Drug Users—Adults</p>	
<p>MHR Performance Target 90% of adult IV drug users will be scheduled for an initial clinical assessment appointment within 14 calendar days of the initial call.</p>	<p>In FY 2021, there were 60 IV drug users admitted to the program. 47 were seen for an assessment session within 14 days and we know that 50 identified as IV drug users at first contact/ intake, but we are uncertain as to any others who identified as IV drug users at first contact/intake. The average number of days from initial contact to initial clinical assessment appointment for all IV drug users was 9.6 days. (Median=7 days; Mode=7 days).</p> <p>Usually, when a client is not seen for their initial clinical assessment appointment within 5 days it is because IV drug use was not initially reported until the time of their first assessment session or the client requests their assessment session be scheduled more than 5 days out. Additionally, all individuals are informed of the two weekly outreach groups provided to individuals waiting for their initial clinical assessment appointment and we strongly encourage them to attend.</p>
<p>Access to Treatment - Opiate Users—Adults</p>	
<p>MHR Performance Target 90% of adult opiate users will be scheduled for an initial clinical assessment appointment within 5 calendar days of the initial call.</p>	<p>In FY 2021, there were 111 opiate users admitted to the program. However, only 31 (27.9%) identified as opiate drug users at first contact/intake and 26 (83.9%) were offered an assessment session within 5 days. 80 (72.1%) opiate drug users did not identify at first contact/intake. The total number of opiate drug users admitted to the program offered an assessment session within 5 days was 26 (23.4%).</p> <p>If we used the same threshold of 14 calendar days for those individuals identified as IV drug users at first contact/intake, then 92 of 111 (82.9%) of the opiate drug users would have been scheduled for an assessment within 14 calendar days even though only 31 individuals identified as opiate users at first contact/intake.</p> <p>The average number of days from initial contact to initial clinical assessment appointment for those 31 identified as opiate drug users at first contact/intake was 3.5 days (Median=3 days). The average number of days from initial contact to initial clinical assessment appointment for all 111 was 9.1 days (Median=8 days; Mode=7 days).</p> <p>In addition, there were 181 methamphetamine users admitted to the program in FY 2021. Of the 181, 47 (26%) methamphetamine users were offered an assessment</p>

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	session within 5 days. 155 (85.6%) methamphetamine users were offered an assessment session within 14 days. The average number of days from initial contact to initial clinical assessment appointment for all 181 was 8.7 days (Median=7 days; Mode=7 days).
Access to SUD Treatment - Pregnant Women	
MHR Performance Target 95% of pregnant women receiving SUD treatment services during the period will be enrolled in gender-specific programming.	In FY 2021, 7 pregnant women were admitted to the program, and all were enrolled in gender-specific programming. However, due to COVID 19 there is no available, reliable, data for the second half.
SUD Treatment Engagement - Jail Services	
MHR Performance Target 56% of offenders assessed in the Justice Center and referred to SUD services as part of reentry planning, will engage in LAPP services within 14 days of release.	In FY 2021, LAPP provided services to 126 adult jail clients. Of the 126 people in jail who accessed services, recommendations for further services were made on 111. 41 were released from incarceration, 31 engaged in services at LAPP, and four (4) of the 31 have reoffended.
Youth Access to Services	
MHR Performance Target Average (mean) number of days from initial call/first contact to first treatment appointment (the first appointment after the assessment has been completed) will be 28 days or less (youth).	<p style="text-align: center;">FIRST CLINICAL APPOINTMENT</p> <p>In FY 2021 there were 19 youth admissions with all 19 (100%) being scheduled their assessment session within fourteen (14) calendar days or less.</p> <p style="text-align: center;">INITIAL CONTACT SESSION TO FIRST TREATMENT APPOINTMENT</p> <p>Of the 19 youth admissions, 1 was seen for an assessment only and 2 did not return for their assessment session. This resulted in 16 (84.2%) individuals referred for services and scheduled a first treatment appointment. The average number of days from initial call/first contact to first treatment appointment (the first appointment after the assessment has been completed) for all youth clients was 15.4 days (median=14) in FY 2021.</p>
Access to Treatment - IV Drug Users—Youth	
MHR Performance Target 90% of youth IV drug users will be scheduled for an initial clinical assessment appointment within 14 calendar days of the initial call.	There was no youth IV drug user admissions in FY 2021.
Access to Treatment - Opiate Users—Youth	
MHR Performance Target 90% of youth opiate users will be scheduled for an initial clinical assessment appointment within 5 calendar days of the initial call.	There was no youth admits with an opiate diagnosis in FY 2021.
SUD Treatment Program Completion—Adults	
MHR Performance Target 50% of adult SUD clients assessed as appropriate for out-patient services will complete the program.	<p style="text-align: center;">Adult Outpatient and Women’s Outpatient Program</p> <p>In FY 2021 there were 202 adult discharges (131 Adult General Program and 71 Women’s Program). Of the 202 total adult discharges, 96 (47.5%) were approved</p>

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	<p>discharges, of which 75 (57.3%) of the 131 Adult General Program discharges, were approved discharges and 21 (29.6%) of the 71 Women’s Program discharges, were approved discharges.</p> <p style="text-align: center;">Adult General and Women’s Intense Outpatient Program</p> <p>In the Adult General Intense Outpatient Program, 63 individuals received services in FY 2021, with 45 (78.9%) of 57 successfully transitioning into the Adult General Outpatient Program and 6 being carried over into FY 2022. In the Women’s Intense Outpatient Program, 59 women received services in FY 2021, with 40 (78.4%) of 51 successfully transitioning into the Women’s Outpatient Program and 8 being carried over into FY 2022.</p> <p style="text-align: center;">Opiate and Methamphetamine Use Clients</p> <p>In FY 2021 there were 48 discharges of individuals diagnosed with an opioid use disorder. Of the 48, all were diagnosed with opioid use disorder moderate/severe. 19 (39.6%) received approved discharges.</p> <p>In addition, there were 91 discharges of individuals diagnosed with a methamphetamine use disorder in FY 2021. Of the 91, 90 were diagnosed with methamphetamine use disorder moderate/severe and 1 was diagnosed with methamphetamine use disorder mild. 37 (40.7%) received approved discharges, of which 36 were diagnosed with methamphetamine use disorder moderate/severe and 1 was diagnosed with methamphetamine use disorder mild.</p> <p style="text-align: center;">Adult Clients With A Moderate/Severe Diagnosis and Adult SUD Clients (Mild)</p> <p>In FY 2021 there were 186 discharges of individuals diagnosed with a substance use disorder moderate/severe. Of the 186, 82 (44.1%) received approved discharges. There were also 16 discharges of individuals diagnosed with a substance use disorder mild in FY 2021. Of the 16, 14 (87.5%) received approved discharges.</p>
<p>SUD Treatment Program Completion—Youth</p>	
<p>MHR Performance Target 65% of youth SUD clients assessed as appropriate for out-patient services will complete the program.</p>	<p style="text-align: center;">All Adolescents</p> <p>There were 5 discharges of youth clients assessed as appropriate for out-patient services in FY 2021. Of the 5 youth discharges, 4 (80%) received approved discharges and 1 (20%) received a non-approved discharge. In addition to the 5 youth client discharges, 3 youth completed an assessment and were discharged with no diagnosis or not in need of services. When we add the 5 youth clients assessed as appropriate for out-patient services with the 3 youth that completed an assessment only and were discharged with no diagnosis or not in need of services, there were 7 (87.5%) approved discharges out of 8 youth assessed and/or receiving out-patient treatment services. 11 (68.7%) youth clients receiving out-patient treatment services were carried over to fiscal year 2022.</p> <p style="text-align: center;">Opiate User Clients—Youth</p> <p>There were no youth with an opiate diagnosis discharged in FY 2021.</p>

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<p>SUD TREATMENT OUTCOMES</p>	
<p>Abstinence Outcomes—Adults</p>	
<p>MHR Performance Target Of those with a substance use disorder (moderate/severe) diagnosis who completed, 75% of these adult clients will be abstinent (no use of drugs or alcohol for the past 30 days) at discharge</p>	<p style="text-align: center;">Adult Outpatient</p> <p>In FY 2021 there were 131 Adult General Program discharges (75 approved and 56 non-approved). Of the 75 approved discharges, 63 (84%) were diagnosed with a substance use disorder moderate/severe and 12 (16%) were diagnosed with a substance use disorder mild. Of the 63 approved discharges diagnosed with a substance use disorder moderate/severe, 52 (82.5%) were abstinent (for at least the past 30 days) at program completion. Of the 12 approved discharges diagnosed with a substance use disorder mild, 10 (83.3%) were abstinent (for at least the past 30 days) at program completion. In total, 62 (82.7%) of the 75 approved discharges diagnosed with a substance use disorder were abstinent (for at least the past 30 days) at program completion.</p> <p style="text-align: center;">Women’s Outpatient</p> <p>In FY 2021 there were 71 Women’s Program discharges (21 approved and 50 non-approved). Of the 21 approved discharges, 19 (90.5%) were diagnosed with a substance use disorder moderate/severe and 2 (9.5%) were diagnosed with a substance use disorder mild. Of the 19 approved discharges diagnosed with a substance use disorder moderate/severe, 18 (94.7%) were abstinent (for at least the past 30 days) at program completion. Of the 2 approved discharges diagnosed with a substance use disorder mild, 1 (50%) were abstinent (for at least the past 30 days) at program completion. In total, 19 (90.5%) of the 21 approved discharges diagnosed with a substance use disorder were abstinent (for at least the past 30 days) at program completion.</p> <p style="text-align: center;">Adult General Intense Outpatient Program</p> <p>In FY 2021, 63 (6 being carried over into FY 2022) individuals received services in the Adult General Intense Outpatient Program and all 63 were diagnosed with a substance use disorder moderate/severe. 45 of 57 successfully transitioned into the Adult General Outpatient Program and 12 of the 57 received a non-approved discharge due to, either dropping out of services and/or incarceration. Of the 45 successfully transitioning into the Adult General Outpatient Program, all 45 (100%) were abstinent for at least the 30 days prior to being stepped down into the Adult General Outpatient Program.</p> <p style="text-align: center;">Women’s Intense Outpatient Program</p> <p>In FY 2021, 59 (8 being carried over into FY 2022) women received services in the Women’s Intense Outpatient Program and all 59 were diagnosed with a substance use disorder moderate/severe. 40 of 51 successfully transitioned into the Women’s Outpatient Program and 11 of the 51 received a non-approved discharge due to, either dropping out of services and/or incarceration. Of the 40 successfully transitioning into the Adult General Outpatient Program, all 40 (100%) were abstinent for at least the 30 days prior to being stepped down into the Women’s Outpatient Program.</p> <p style="text-align: center;">Opiate Clients</p> <p>In FY 2021 there were 48 discharges of individuals diagnosed with an opioid use disorder (19 approved and 29 non-approved). Of the 19 approved discharges, all 19</p>

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	<p>were diagnosed with opioid use disorder moderate/severe. Of the 19 approved discharges diagnosed with an opioid use disorder moderate/severe, 16 (84.2%) were abstinent (for at least the past 30 days) at program completion.</p> <p>In addition, there were 91 discharges of individuals diagnosed with a methamphetamine use disorder (37 approved and 54 non-approved) in FY 2021. Of the 37 approved discharges, 36 were diagnosed with methamphetamine use disorder moderate/severe and 1 was diagnosed with methamphetamine use disorder mild. Of the 36 approved discharges diagnosed with a methamphetamine use disorder moderate/severe, 34 (94.4%) were abstinent (for at least the past 30 days) at program completion. Of the 1 approved discharge diagnosed with a methamphetamine use disorder mild, 1 (100%) was abstinent (for at least the past 30 days) at program completion. In total, 35 (91.9%) of the 37 approved discharges diagnosed with a methamphetamine use disorder were abstinent (for at least the past 30 days) at program completion.</p> <p style="text-align: center;">Overall (All Adult Clients with Moderate/Severe Diagnosis)</p> <p>In FY 2021 there were 96 Adult "approved discharges," 82 clients were diagnosed with a substance use disorder moderate/severe diagnosis and 14 were diagnosed with a substance use disorder mild diagnosis. Of the 82 clients diagnosed with a substance use disorder moderate/severe diagnosis, 70 (85.4%) reported abstinence for at least 30 days prior to program completion. Of the 14 approved discharges diagnosed with a substance use disorder mild, 11 (78.6%) were abstinent (for at least the past 30 days) at program completion. In total, 81 (84.4%) of the 96 approved discharges diagnosed with a substance use disorder were abstinent (for at least the past 30 days) at program completion.</p>
<p>Criminal Justice Outcomes</p>	
<p>MHR Performance Target 98% of adults receiving services will have no new involvement with the criminal justice system</p>	<p style="text-align: center;">Justice Center Services Clients</p> <p>In FY 2021, LAPP provided services to 126 adult jail clients. Of the 126 people in jail who accessed services, recommendations for further services were made on 111. Of the 111, 41 (36.9%) were released, and 31 (75.6%) of the 41 were admitted and engaged in services within 14 days of release. 27 (87.1%) of the 31 that followed through have had no new charges and 4 are unknown. However, due to COVID 19, there is no other available.</p> <p style="text-align: center;">Opiate Use Clients</p> <p>In FY 2021, there were 206 adult opioid use disorder mild/moderate/severe clients engaged in outpatient SUD services during the period. 191 (92.7%) of the 206 had no new involvement with the criminal justice system during the period. However, due to COVID 19, there is no other available data for the second half.</p> <p style="text-align: center;">All Adult Clients</p> <p>In FY 2021, there were 911 adult clients engaged in outpatient SUD services during the period. 875 (96%) of the 911 had no new involvement with the criminal justice system during the period. However, due to COVID 19, there is no other available data for the second half.</p>

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<p>Functioning Outcomes</p>	
<p>MHR Performance Target 73% of adults receiving services will demonstrate a higher level of functioning (using valid functional scale)</p>	<p>Data collection from the cross-cutting tool improved in FY21 with the return to in-person services, with a total of 167 Adult measures received for the entire year. However, 80% of these were Admission measures, with mid-treatment and discharge data lacking. Review of the Cross-Cutting Process policy with staff is being addressed, and a new point person is entering data monthly going forward, to ensure data is being collected at all three points.</p> <p>Sample size n=14 for clients with data collected at two or more points is small, and therefore may not be representative of the entire population of LAPP but does show improvement for most clients within the sample.</p> <p style="text-align: center;">Summary</p> <p>Nine (9) of the fourteen (14) clients included in the sample, completed the measure upon admission and mid-treatment. Of these:</p> <ul style="list-style-type: none"> •6 clients, or 66%, showed positive progress based upon a decrease in their cross-cutting scores from admission to mid-treatment. •2 client, or 22%, showed no positive progress as their scores increased from admission to mid-treatment. •1 client, or 11%, showed no change from admission to mid-treatment. <p>There was one (1) client that completed the measure at mid-treatment and discharge:</p> <ul style="list-style-type: none"> •1 client, or 100%, showed positive progress based upon a decrease in their cross-cutting scores from mid-treatment to discharge. <p>There were four (4) clients that completed the measure at admission and discharge. Of these:</p> <ul style="list-style-type: none"> •3 clients, or 75%, showed positive progress based upon a decrease in their cross-cutting scores from admission to discharge. •0 clients showed no positive progress as their scores increased from admission to discharge. •1 client, or 25%, showed no change from admission to discharge. <p>Overall, there were fourteen (14) clients that completed the measure at multiple points. Of these:</p> <ul style="list-style-type: none"> •10 clients, or 71%, showed positive progress based upon a decrease in their cross-cutting scores across time. •2 clients, or 14%, showed no positive progress as their scores increased across time. •2 client, or 14%, showed no change across time.
<p>Abstinence Outcomes—Youth</p>	
<p>MHR Performance Target 75% of youth who successfully complete the program will be abstinent (no use of drugs or alcohol for the past 30 days) at discharge.</p>	<p style="text-align: center;">All Adolescents</p> <p>In FY 2021 there were 5 (4 approved and 1 non-approved) Youth Program discharges of youth clients assessed as appropriate for out-patient services. Of the 4 approved youth discharges, 1 (25%) was diagnosed with a substance use disorder moderate/severe and 3 (75%) were diagnosed with a substance use disorder mild. Of the 1 approved youth discharge diagnosed with a substance use disorder moderate/severe, 1 (100%) was</p>

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	<p>abstinent (for at least the past 30 days) at program completion. Of the 3 approved youth discharges diagnosed with a substance use disorder mild, all 3 (100%) were abstinent (for at least the past 30 days) at program completion. In total, when we add the 4 youth clients assessed as appropriate for out-patient services with the 3 youth that completed an assessment only and were discharged with no diagnosis or not in need of services, there were 7 approved youth discharges. Of the 7 total approved youth discharges, 7 (100%) were abstinent (for at least the past 30 days) at program completion.</p> <p style="text-align: center;">Opiate Users—Youth</p> <p>There were no youth with an opiate diagnosis discharged in FY 2021.</p>
Criminal Justice Outcomes	
<p>MHR Performance Target 98% of youths receiving services will have no new involvement with the criminal justice system.</p>	<p>In FY 2021 there were 19 youth clients engaged in outpatient SUD services during the period. To our knowledge, 18 of the 19 (94.7%) had no new involvement with the criminal justice system during the period.</p>
Functioning Outcomes	
<p>MHR Performance Target 73% of youths receiving services will demonstrate a higher level of functioning (using valid functional scale)</p>	<p>Within the sample, no youth clients completed functioning scales during two time periods. Due to COVID 19, there is no other available data for FY 2021.</p>
Systems Evaluation, Quality Assurance	
<p>100% of Providers will formally assess client/ consumer satisfaction and referral source satisfaction a minimum of once a year</p>	<p>In FY 2021, a sample of 11 anonymous client satisfaction surveys were received and reviewed following program completion. Of these, 100% of clients were satisfied with services received. 100% indicated appointment times were convenient. 91% felt the services provided to them were what they needed, and 100% would recommend our services to others. Clients gave much praise for counselors, services, and support staff. With such a small sample size we've included results from the first half of FY 2020. In FY 2020, a sample of 76 anonymous client satisfaction surveys were received and reviewed following program completion. Of these, 94% of clients were satisfied with services received. 97% indicated appointment times were convenient. 97% felt the services provided to them were what they needed, and 93% would recommend our services to others.</p> <p>REFERRAL SURVEYS In SFY 2021 20 referral source surveys were sent out and we received zero back. In FY 2020 20 surveys were sent out and two of them returned. The results indicate an overall satisfaction with the organization and services provided. Responses included "easy scheduling-quick intake", "programs are very beneficial to the community", and "clients are very satisfied".</p>
Medication Assisted Treatment	
<p>MHR Performance Target Average (median) number of days for adults with an opiate diagnosis from initial call/first contact to first treatment appointment (the first appointment after the assessment has been completed) will be 28 days or</p>	<p>In SFY 2021 there were 111 individuals admitted with an opiate use disorder (moderate/severe) or subsequently diagnosed with an opiate use disorder (moderate/severe). Of the 111 individuals identified, 107 (96.4%) were scheduled a first treatment appointment with 102 (95.3%) scheduled in 28 days or less with the median number of days being 16.</p>

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less	In addition, there were 181 individuals admitted with a methamphetamine use disorder (moderate/severe) or subsequently diagnosed with a methamphetamine use disorder (moderate/severe). Of the 181 individuals identified, 169 (93.4%) were scheduled a first treatment appointment, with 154 (91.1%) scheduled in 28 days or less with the median number of days being 17.
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FY 2021 LAPP ANNUAL REPORT

PATASKALA SITE COMPARISON FY 2020 TO FY 2021

PATASKALA SITE FY 2020	PATASKALA SITE FY 2021																																																												
<p>Unduplicated clients: 81 individuals received services, representing 8.1% of the 994 clients served by LAPP. There were also 4 referrals for Medication Assisted Treatment.</p>	<p>Unduplicated clients: 83 individuals received services, representing 9% of the 923 clients served by LAPP.</p>																																																												
<p>The site generated \$33,597.06 in FY 2020 (July 1, 2019, through June 30, 2020). This revenue generated is mostly through Medicaid and allocation.</p>	<p>The site generated \$ 33,576.30 in FY 2021 (July 1, 2020, through June 30, 2021). This revenue generated is mostly through Medicaid and allocation.</p>																																																												
<p>Services provided at Pataskala site since July 2019:</p> <table border="0"> <tr> <td>Assessment:</td> <td>35.00 units</td> <td>\$3,888.85</td> </tr> <tr> <td>MH Assessment:</td> <td>1.0 hours</td> <td>\$111.11</td> </tr> <tr> <td>Case Management</td> <td>12.28 hours</td> <td>\$840.22</td> </tr> <tr> <td>Group:</td> <td>0.0 hours</td> <td>\$0.00</td> </tr> <tr> <td>Individual:</td> <td>231.80 hours</td> <td>\$23,657.35</td> </tr> <tr> <td>MH Individual:</td> <td>44.75 hours</td> <td>\$4,608.55</td> </tr> <tr> <td>Intervention:</td> <td>3.54 hours</td> <td>\$391.11</td> </tr> <tr> <td>Crisis</td> <td>0.0 hours</td> <td>\$0.00</td> </tr> <tr> <td>Outreach</td> <td>.72 hours</td> <td>\$99.87</td> </tr> <tr> <td></td> <td>TOTAL</td> <td>\$33,597.06</td> </tr> </table>	Assessment:	35.00 units	\$3,888.85	MH Assessment:	1.0 hours	\$111.11	Case Management	12.28 hours	\$840.22	Group:	0.0 hours	\$0.00	Individual:	231.80 hours	\$23,657.35	MH Individual:	44.75 hours	\$4,608.55	Intervention:	3.54 hours	\$391.11	Crisis	0.0 hours	\$0.00	Outreach	.72 hours	\$99.87		TOTAL	\$33,597.06	<p>Services provided at Pataskala site since July 2020:</p> <table border="0"> <tr> <td>Assessment:</td> <td>17.00 units</td> <td>\$1,888.87</td> </tr> <tr> <td>MH Assessment:</td> <td>3.00 hours</td> <td>\$333.33</td> </tr> <tr> <td>Case Management</td> <td>5.17 hours</td> <td>\$429.88</td> </tr> <tr> <td>Group:</td> <td>0.0 hours</td> <td>\$0.00</td> </tr> <tr> <td>Individual:</td> <td>230.83 hours</td> <td>\$23,494.42</td> </tr> <tr> <td>MH Individual:</td> <td>68.50 hours</td> <td>\$6,994.25</td> </tr> <tr> <td>Intervention:</td> <td>3.93 hours</td> <td>\$435.55</td> </tr> <tr> <td>Crisis</td> <td>0.0 hours</td> <td>\$0.00</td> </tr> <tr> <td>Outreach</td> <td>0.0 hours</td> <td>\$0.00</td> </tr> <tr> <td></td> <td>TOTAL</td> <td>\$33,576.30</td> </tr> </table>	Assessment:	17.00 units	\$1,888.87	MH Assessment:	3.00 hours	\$333.33	Case Management	5.17 hours	\$429.88	Group:	0.0 hours	\$0.00	Individual:	230.83 hours	\$23,494.42	MH Individual:	68.50 hours	\$6,994.25	Intervention:	3.93 hours	\$435.55	Crisis	0.0 hours	\$0.00	Outreach	0.0 hours	\$0.00		TOTAL	\$33,576.30
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PATASKALA SITE COMPARISON FY 2020 TO FY 2021

<p>*Staffing: One adult program counselor on site. Other counselors staff the site as needed per appointment: Monday – Thursday, 8:00AM to 4:00 PM. Friday, 8:00AM to 12:00 PM.</p>	<p>*Staffing: One adult program counselor on site. Other counselors staff the site as needed per appointment: Monday – Thursday, 8:00AM to 4:00 PM. Friday, 8:00AM to 12:00 PM.</p>
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Barriers/Issues to consider:

- Less Resources
- Transportation Barriers
 - No license
 - No car
- Still a lack of awareness that we are here
- Marketing to Community and Referral Sources
- Need to balance office vs. outreach
- Look at providing specialized recovery services for targeted population
- Staffing patterns
- Need to generate revenue that is not a portion of MHR allocation
- Minimal marketing efforts