



## ANNUAL REPORT

### LICKING COUNTY ALCOHOLISM PREVENTION PROGRAM

2022

#### **Financial Position:**

In fiscal year 2022, the Agency showed a loss of \$25,898.74 and ended with a cash balance reserve after liabilities of \$192,688, a decrease of \$6,821 from its starting balance of \$199,509. Staff retention has been a challenge for the agency, reflecting the loss for the fiscal year. Nevertheless, the agency continues to be fiscally viable, at this time, keeping expenditure as low as possible. In addition, the Pataskala site in Western Licking County provided services to 133 individuals representing 10.2% of the 1,307 clients served by Licking County Alcoholism Prevention Program and generated \$31,031.04 in revenue. The Agency was able to draw down all the available funding of for treatment services (\$447,465) and an additional \$32,988 for treatment services for a total of \$480,453 in funding from Mental Health & Recovery for Licking and Knox Counties (MHR). To diversify revenue streams and provide integrated behavioral health services, the agency is State certified to provide mental health assessment and behavioral health counseling and therapy. This will help the agency in providing integrated behavioral health services to those individuals experiencing co-occurring disorders related to mental health and/or alcohol and other drug issues. The agency looks forward to continuing financial growth in the future through development of new services, as well as accurate collection of authorized receivables. The agency will continue its work on remedying the fiscal losses that have occurred in recent years and we look forward to financial growth in the future through development of new services, continuing work to expand on local partnerships, as well as continuing accurate collection of authorized receivable revenue.

#### **Agency Outcomes:**

In fiscal year 2022, there were 931(901 adult and 30 youth) admissions to the outpatient program and 167 admissions to the 72-hour, Driver Intervention Program. The 931 adult and youth admissions include 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. Over the past fiscal year, LAPP discharged a total of 444 clients, which also 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 444 total discharges, LAPP discharged 324 (73%),

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321 adult and 3 youth, clients assessed as appropriate for out-patient services. Of the 321 adult discharges, 145 (45.2%) were approved discharges and 176 (54.8%) were non-approved discharges. Also, of the 145 adult approved discharges, 127 (87.6%) were diagnosed as experiencing a substance use disorder, moderate to severe and 18 (12.4%) clients were assessed with a substance use disorder, mild. Of the 127 clients diagnosed with a substance use disorder, moderate to severe, 110 (86.6%) reported abstinence at the time of program completion. Of the 18 clients assessed with a substance use disorder, mild, 12 (66.6%) reported abstinence at the time of their discharge.

### **Adult General Program:**

In fiscal year 2022 there were 607 adult admissions to the Adult General Program, with 526 (87%) scheduled for their first clinical assessment session within 10 calendar days of their initial contact session. Of the 607 adult general program admissions, 361 (59.5%) were scheduled SUD treatment services, with 313 (86.7%) scheduled for their first treatment session within 20 calendar days of their initial contact session. Outpatient services were provided to 86 (23.8%) new Opioid using admissions with 78 (90.7%) scheduled for their first treatment session within 20 calendar days of their initial contact session. In fiscal year 2022, services were provided to 641 unduplicated clients through the Adult General Program.

In fiscal year 2022, LAPP discharged 188 Adult General Program clients assessed as appropriate for out-patient services. Of the 188 adult discharges, 91 (48.4%) were approved discharges and 97 (51.6%) were non-approved discharges. Of the 91 adult general program approved discharges, 77 (84.6%) were diagnosed as experiencing a substance use disorder, moderate to severe and 14 (15.4%) clients were assessed with a substance use disorder, mild. Of the 77 clients diagnosed with a substance use disorder, moderate to severe, 67 (87%) reported abstinence at the time of program completion. Of the 14 clients assessed with a substance use disorder, mild, 10 (71.4%) 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. Training on Motivational Interviewing continued to enhance our ability to use this approach successfully. Clinical leadership used Motivational Interviewing training to foster the development of our clinicians and assure this technique is consistent throughout all LAPP programming.

Stage specific groups and programming were implemented last year to meet the identified needs of the clients. Stage specific groups include our Road to Recovery Group (R2R) that addresses criminogenic needs and skills and Positive Direction Series

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(PDS) that teaches specific recovery and life skills. These groups were continued in FY22 and have been successful in expected outcomes. However, Breaking Free, a men's trauma group open to all male clients of the agency has not been active and was discontinued at this time. This is reflected by the number of men reporting significant trauma and staffing issues. This is also true for the Men's Grief Group; the number of clients and staff prohibit the success to continue this group.

In addition to providing typical outpatient alcohol and other drug 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. LAPP has a counselor that is stationed at Licking County Municipal Court for 20 hours to help assist with access to services and the ability to provide interventions earlier. The Day Reporting Program has continued to be a success and LAPP still provides education and assessment capabilities with this partnership. Adult Court Services is also committed to early intervention, grants the ability for LAPP's Outreach Service to be available to individuals getting released or placed on bond to ease the transition into the community.

It was identified that a gap in services provided in the community in regard to managing client's that would benefit from aggressive behaviors. Prior to the end of FY22, LAPP began a Co-Ed Anger Management Group that targets low level offenses that resulted in aggressive or threatening behaviors. Individuals that would benefit would be a first time misdemeanor domestic violence, assault, disorderly conduct, and menacing. This group would require an assessment to determine the need. Clients can be referred by the courts, attorneys, Job and Family Services, and/or self-referral.

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 2022 there were 294 admissions to the Adult Women's Program, with 274 (93.2%) scheduled for their first clinical assessment session within 10 calendar days of their initial contact session. Of the 294 admissions, 162 (55.1%) were scheduled SUD treatment services, with 148 (91.4%) scheduled for their first treatment session within 20 calendar days of their initial contact session. In fiscal year 2022, Gender specific services were provided to 331 unduplicated clients.

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There were 133 adult women discharged from the Adult Women's Program, with 54 (40.6%) approved discharges and 79 (59.4%) non-approved discharges. Of the 54 adult women approved discharges, 50 (92.6%) were diagnosed as experiencing a substance use disorder, moderate to severe and 4 (7.4%) clients were assessed with a substance use disorder, mild. Of the 50 clients diagnosed with a substance use disorder, moderate to severe, 43 (86%) reported abstinence at the time of program completion. Of the 4 clients assessed with a substance use disorder, mild, 2 (50%) reported abstinence at the time of their discharge.

The Women's Program continues to provide groups to address client needs and better match stage-wise treatment strategies. Currently we planning to expand our group offerings to include Let's Begin, which will be designed for women who are not aware of the extent of problems created by their use. Our Women's Addiction Recovery (WAR) Intensive Outpatient Treatment Program is a gender specific, closed group, intensive 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. The Love of Letting Go Group is a trauma focused group that educates and supports women who have experienced trauma and substance abuse in their lives. Love of Letting Go is a closed group. Lastly, our current group offerings include the Journey to Hope group that addresses mental health, specifically anxiety and depression. The GAD-7 and PHQ-9 are utilized as the pre/post measuring tool. This is also a closed group.

The women's program continues collaboration efforts with Behavioral Healthcare Partners, Mid-Ohio Counseling Services, and The Woodlands counseling Center and the staff are trained in community response to domestic violence. Prior to Covid-19 the program hosted an annual Women's Program Christmas party which involves both fellowship and the giving away of clothing and toys donated to LAPP by staff and other donors. One year a local bicycle shop donated a dozen bicycles for children. After the Christmas party all agency clients are invited to select clothing for themselves or to give as Christmas presents to other family members, and toys for their children and grandchildren. All left over clothing is then donated to one of the local charities (Goodwill, St. Vincent's, L.E.A.D.S., etc.). In addition, the program participates in fundraising activities with other community organizations whenever possible.

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### **Adolescent Program:**

There were 30 admissions to the Adolescent Program in fiscal year 2022, with 24 (80%) scheduled for their first clinical assessment session within 10 calendar days of their initial contact session. Of the 30 admissions, 23 (76.7%) were scheduled SUD treatment services, with 20 (87%) scheduled for their first treatment session within 20 calendar days of their initial contact session.

In fiscal year 2022, 35 youth clients received SUD services at this Agency. Of the 35 youth clients, 12 completed an assessment only and received no diagnosis, 2 never returned for services after completion of their initial contact session, and 21 were assessed as appropriate for out-patient services. Of the 21 assessed as appropriate for out-patient services, there were 3 discharges. Of the 3 discharges, 1 (33.3%) was an approved discharge, 2 (66.6%) were non-approved discharges, and 18 (85.7%) were carried over to fiscal year 2023. The 1 approved discharge was assessed with a substance use disorder, mild, and reported abstinence at the time of program completion. The 2 non-approved discharges were diagnosed with a substance use disorder, moderate to severe and they dropped out of the program. If we add the 12 youth completing an assessment only and discharged with no diagnosis or not in need of services, there were 13 (76.5%) approved youth discharges out of 17 youth discharges.

There still has been a substantial decrease in youth referrals to LAPP from the schools and 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 a more intensive level of care. However, after careful research and program review, we determined that offering an additional, more intensive level of care 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.

The adolescent primary adolescent counselor has also visited most, if not all, of the high schools in the County and provided presentations to staff and the students at several schools. This has also been a focus of the newly hired Director of Program Operations, based on professional experience. We have secured a new Memorandum of Understanding (MOU) with Juvenile Court to assist in streamlining the admission/referral services and bridge the communication barrier. We have also

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continued collaborations within new school districts that we weren't involved with before such as Lakewood High School, Lakewood Middle School, C-Tec Career and Technology, Liberty Middle School, YES Clubhouse, other community events (Rally in the Alley). Additionally, the later part of the year we have had significant inquiries by South-West Licking, Licking Heights, and Johnstown School Districts. In addition, the adolescent counselor participates in community Underage Town Hall meetings, is a member of the Licking County Prevention Partnership as a full committee member and the chairperson of the alcohol and other drug workgroup. 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 adult clients who are dependent on substances is a difficult task. This is an area of continued focus due to the nature of the population we serve. To improve accessibility and engage clients faster, we have continued to streamline the assessment process. 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 is contributed to moving to a central scheduling system, all clinical staff scheduling availability for assessments, and implementing a clinical receptionist with a CDCA credential to assist in prioritizing cases. This has proven to be successful in that our ability to involve clients in the treatment process more expediently has improved. Furthermore, we encourage all clients to attend a weekly outreach group at the Agency waiting for their first assessment session. Our belief is that identification of new/revised methods will not only reduce the time spent in multiple assessment sessions but serves to engage the client as an active participant in their own treatment from the onset and will continue to improve outcomes such as participation and successful discharge.

### **Partnerships:**

The program continues its primary mission as the major alcohol and drug 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 Behavioral Health Docket: Licking County Intervention For Treatment (L.I.F.T.) and the Licking County Common Pleas Court Drug Court program. 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, as previously mentioned, LAPP is an integral partner of the Licking County Common Pleas Court, Day Reporting program.

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

### **The Coming Year:**

The State of Ohio moved to a Managed Care model for Medicaid reimbursement in FY 2018, this resulted in several challenges for Licking County Alcoholism Prevention Program and continues to be an issue this year on top of the pandemic. LAPP developed a transition plan from the previous model of generating revenue to a Managed Care model of care in FY 2019. Unfortunately, the transition to the Managed Care model had an adverse effect the agency due to issues related to transitioning from the previous billing system to the current system billing software and today still poses risk to the agencies business financially. Goals and adjustments were made internally to accommodate these changes, getting the billing program up and running efficiently remained a problem until April 2018. Furthermore, the Ohio Medicaid Redesign of behavioral health services scheduled for implementation on July 1, 2017 did not occur until January 1, 2018 contributing to a loss of revenue potential. This still holds true as a contributing factor of loss. As we worked through many of the billing issues related to

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this past year of transition to the Managed Care model, LAPP still had issues but this did improve slightly in FY22 as many of our operations returned near to normal.

The community response to the program in fiscal year 2022 was favorable and positive in terms of client service delivery. By alleviating the financial strain on the Agency, LAPP will be able to increase its focus on improving client service delivery and facilitating more positive client outcomes. While the Agency has been able to establish some additional funding sources, we are still in need of establishing additional funding sources to decrease the Agency's reliance on Mental Health & Recovery for Licking and Knox Counties and continue to build upon our financial reserve. 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 year 2023 to meet future challenges. We will continue to review ways to enhance the Agency's visibility to see us through this difficult time 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 be exploring new staffing needs to develop programming to meet the needs of western Licking County, such as building a steady client base in our Pataskala location. The Director of Program Operations is a dedicated position to continue with agency involvement in the community, schools, and the growing industry in the area. 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 Agency 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 alcohol and other drug programming in fiscal year 2023. 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 by building stronger relationship with the network providers and the partnerships previously established.



## FISCAL YEAR 2022 STATISTICAL REPORT: OUTPATIENT

INTAKES	
MONTH	NUMBER
JULY, 2021	47
AUGUST, 2021	68
SEPTEMBER, 2021	72
OCTOBER, 2021	87
NOVEMBER, 2021	68
DECEMBER, 2021	57
JANUARY, 2022	66
FEBRUARY, 2022	77
MARCH 2022	84
APRIL, 2022	96
MAY, 2022	116
JUNE, 2022	93
<b>TOTAL INTAKES FY 2022</b> Youth = 30 Adult = 901	<b>931</b>

*DISCHARGES	APPROVED DISCHARGE	NON-APPROVED DISCHARGE	EVALUATION ONLY	INCARCERATED
<b>324</b>	<b>146 (45.1%)</b>	<b>178 (54.9%)</b>	<b>***20</b>	<b>25</b>
Adult 321 Youth 3	Adult 145 Youth 1	Adult 176 Youth 2	Adult 8 Youth 12	Adult 25 Youth 0
<b>**Total Discharges</b>	<b>NO DIAGNOSIS</b>	<b>DEPENDENT DX.</b>	<b>ABUSE DX.</b>	<b>DID NOT RETURN</b>
<b>**444</b>	<b>20 (4.5%)</b>	<b>***298 (67.1%)</b>	<b>***26 (5.9%)</b>	<b>100 (22.5%) Intake Only</b>
Adult 427 Youth 17	Adult 8 Youth 12	Adult 296 Youth 2	Adult 25 Youth 1	Adult 98 Youth 2
<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 2022 STATISTICAL REPORT: OPTIONS

<b>NUMBER OF PARTICIPANTS</b>			
<b>MONTH</b>	<b>NUMBER</b>		
JULY, 2021	Women 16	Men 0	Total 16
AUGUST, 2021		Men 13	Total 13
SEPTEMBER, 2021		Men 14	Total 14
OCTOBER, 2021		Men 13	Total 13
NOVEMBER, 2021	Women 14	Men 0	Total 14
DECEMBER, 2021		Men 13	Total 13
JANUARY, 2022		Men 10	Total 10
FEBRUARY, 2022		Men 12	Total 12
MARCH 2022	Women 14	Men 0	Total 14
APRIL, 2022		Men 17	Total 17
MAY, 2022		Men 13	Total 13
JUNE, 2022		Men 18	Total 18
<b>TOTAL: FY 2022</b>	<b>Women 44</b>	<b>Men 123</b>	<b>Total 167</b>

**REFERRALS BACK TO AGENCY  
FOR ASSESSMENT/SERVICES**

**34**

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

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Performance Targets	Results
<b>Service Utilization</b>	
Total number of initial calls from new clients or potential clients during the quarter (overall volume of calls).	In FY 2022 there were 944 initial calls and walk-ins for services from new clients or potential new clients. 864 were from Licking County, 6 from Knox County, and 74 from County of residence other or unknown. The 944 (calls and walk-ins) for services resulted in the completion of 931 initial contact sessions. All phone calls or walk-ins requesting services are tracked by hand.
<b>Adult Access to and Engagement in Services</b>	
<b>Hospitalization Follow-Up (Adults and Youth)</b>	
<b>MHR Performance Target</b> 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 2022 there were 7 (7) emergency board funded individuals referred from Shepherd Hill following detox services. Of those 7, each (7) were seen within five days. There were an additional 4 individuals that received detox services. Of those four (4), no contact was made as the referral was not made and the individuals did not follow through with referral to LAPP or refused services.
<b>MHR Performance Target</b> 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 2022, no youth clients were referred to this Agency for outpatient services following their discharged from Detox/AoD In-patient
<b>Access to Treatment Services—Adult</b>	
<b>MHR Performance Target</b> 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 20 working days or less (adult).	<p style="text-align: center;"><b>FIRST CLINICAL APPOINTMENT</b></p> <p>In FY 2022 there were 901 adult admissions (607 Adult General Program and 294 Women’s Program), with 800 (88.8%) being scheduled their assessment session within ten (10) working days or less. Of the 901 adult admissions 111 were seen for an assessment only, 242 never returned for assessment, and 29 were still in the assessment process at the close of the fiscal year. This resulted in 519 (357 Adult General Program and 162 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 7 days for all 901 FY 2022 admissions.</p> <p style="text-align: center;"><b>INITIAL CONTACT SESSION TO FIRST TREATMENT APPOINTMENT</b></p> <p>In FY 2022, 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 519 adult clients was 15.1 days (median=14). The average number of days for the 323 individuals in Adult General Outpatient was 15.2 days (median=15). The average number of days for the 34 individuals placed into adult IOP Level of care was 12.6 days (median=12). The average number of days for 131 Women's Outpatient clients was 16 days (median=15). The average number of days for the 31 women placed into Women's</p>

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	<p>IOP Level of care was 12.4 days (median=13). For the 86 adults with an opiate diagnosis the average number of days was 13.5 days (median=12) and for the 160 adults with a methamphetamine diagnosis the average number of days was 15.1 days (median=14). For the 25 individuals receiving mental health services only, the average number of days was 15.</p>
<p><b>Access to Treatment - IV Drug Users—Adults</b></p>	
<p><b>MHR Performance Target</b> 90% of adult IV drug users will be scheduled for an initial clinical assessment appointment within 10 calendar days of the initial call.</p>	<p>In FY 2022, there were 56 IV drug users admitted to the program. 52 were seen for an assessment session within 10 days and we know that 50 identified as IV drug users at first contact/intake, but the remaining 6 did not identify 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 7.1 days. (Median=7 days; Mode=10 days).</p> <p>Usually, when a client is not seen for their initial clinical assessment appointment within 10 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 10 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><b>Access to Treatment - Opiate Users—Adults</b></p>	
<p><b>MHR Performance Target</b> 90% of adult opiate users will be scheduled for an initial clinical assessment appointment within 5 working days of the initial call.</p>	<p>In FY 2022, there were 92 opiate users admitted to the program. However, only 51 (55.4%) identified as opiate drug users at first contact/intake and 46 (90.2%) were offered an assessment session within 5 days. 41 (44.6%) 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 46 (50%).</p> <p>If we used the same threshold of 10 calendar days for those individuals identified as IV drug users at first contact/intake then 82 of 92 (89.1%) of the opiate drug users would have been scheduled for an assessment within 10 calendar days even though only 51 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 51 identified as opiate drug users at first contact/intake was 3.4 days (Median=4 days). The average number of days from initial contact to initial clinical assessment appointment for all 92 was 6.1 days (Median=5.5 days; Mode=4 days).</p> <p>In addition, there were 167 methamphetamine users admitted to the program in FY 2022. Of the 167, 69 (41.3%) methamphetamine users were offered an assessment session within 5 days. 152 (91%) methamphetamine users were offered an assessment session within 10 days. The average number of days from initial contact to initial clinical assessment appointment for all 167 was 6.7 days (Median=7 days; Mode=7 days).</p>

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<b>Access to SUD Treatment - Pregnant Women</b>	
<b>MHR Performance Target</b> 95% of pregnant women receiving SUD treatment services during the period will be enrolled in gender-specific programming.	In FY 2022, 11 pregnant women were admitted to the program and all were enrolled in gender-specific programming.
<b>SUD Treatment Engagement - Jail Services</b>	
<b>MHR Performance Target</b> 56% of offenders assessed in the Justice Center and referred to SUD services as part of reentry planning, will engage in LAPP services within 10 working days of release.	In FY 2022, LAPP provided services to 49 adult jail clients. Of the 49 people in jail who accessed services, recommendations for further services were made on 41. 38 were released from incarceration, 38 engaged in services at LAPP, and at the end of FY 2022, none of the 38 have reoffended.
<b>Youth Access to Services</b>	
<b>MHR Performance Target</b> 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 20 working days or less (youth).	<p style="text-align: center;"><b>FIRST CLINICAL APPOINTMENT</b></p> There were 30 admissions to the Adolescent Program in fiscal year 2022, with 24 (80%) scheduled for their first clinical assessment session within 10 calendar days of their initial contact session. <p style="text-align: center;"><b>INITIAL CONTACT SESSION TO FIRST TREATMENT APPOINTMENT</b></p> Of the 30 youth admissions in fiscal year 2022, 1 was seen for an assessment only, 5 did not return for their assessment session, and 1 was still in the assessment process at the end of the fiscal year. This resulted in 23 (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 15.3 days (median=15) in FY 2022.
<b>Access to Treatment - IV Drug Users—Youth</b>	
<b>MHR Performance Target</b> 90% of youth IV drug users will be scheduled for an initial clinical assessment appointment within 10 working days of the initial call.	There were no youth IV drug users admits in FY 2022.
<b>Access to Treatment - Opiate Users—Youth</b>	
<b>MHR Performance Target</b> 90% of youth opiate users will be scheduled for an initial clinical assessment appointment within 5 working days of the initial call.	There was one (1) youth admit diagnosed with an opiate diagnosis in FY 2022 and the initial clinical assessment appointment was scheduled in 10 working days of the initial call. The number of days from initial call/first contact to first treatment appointment (the first appointment after the assessment has been completed) was 15 working days

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<p><b>SUD Treatment Program Completion—Adults</b></p>	
<p><b>MHR Performance Target</b> 50% of adult SUD clients assessed as appropriate for out-patient services will complete the program.</p>	<p style="text-align: center;"><b>Adult Outpatient and Women’s Outpatient Program</b></p> <p>In FY 2022 there were 321 adult discharges (188 Adult General Program and 133 Women’s Program) of adult SUD clients assessed as appropriate for out-patient services will complete the program. Of the 321 total adult discharges, 145 (45.2%) were approved discharges, of which 91 (48.4%) of the 188 Adult General Program discharges, were approved discharges and 54 (40.6%) of the 133 Women’s Program discharges, were approved discharges.</p> <p style="text-align: center;"><b>Adult General and Women’s Intense Outpatient Program</b></p> <p>In the Adult General Intense Outpatient Program, 104 individuals received services in FY 2022, with 74 (79%) of 94 successfully transitioning into the Adult General Outpatient Program and 10 being carried over into FY 2023. In the Women’s Intense Outpatient Program, 56 women received services in FY 2022, with 38 (79%) of 48 successfully transitioning into the Women’s Outpatient Program and 8 being carried over into FY 2023.</p> <p style="text-align: center;"><b>Opiate and Methamphetamine Use Clients</b></p> <p>In FY 2022 there were 76 discharges of individuals diagnosed with an opioid use disorder. Of the 76, all were diagnosed with opioid use disorder moderate/severe. 24 (31.6%) received approved discharges.</p> <p>In addition, there were 123 discharges of individuals diagnosed with a methamphetamine use disorder in FY 2022. Of the 123, 122 were diagnosed with methamphetamine use disorder moderate/severe and 1 was diagnosed with methamphetamine use disorder mild. 41 (33.3%) received approved discharges, with all 41 diagnosed with methamphetamine use disorder moderate/severe.</p> <p style="text-align: center;"><b>Adult Clients With A Moderate/Severe Diagnosis and Adult SUD Clients (Mild)</b></p> <p>In FY 2022 there were 296 discharges of individuals diagnosed with a substance use disorder moderate/severe. Of the 296, 127 (42.9%) received approved discharges. There were also 25 discharges of individuals diagnosed with a substance use disorder mild in FY 2022. Of the 25, 18 (72%) received approved discharges.</p>

## FY 2022 LAPP ANNUAL REPORT

<b>SUD Treatment Program Completion—Youth</b>	
<b>MHR Performance Target</b> 65% of youth SUD clients assessed as appropriate for out-patient services will complete the program.	<p style="text-align: center;"><b>All Adolescents</b></p> <p>In fiscal year 2022, 35 youth clients received SUD services at this Agency. Of the 35 youth clients, 12 completed an assessment only and received no diagnosis, 2 never returned for services after completion of their initial contact session, and 21 were assessed as appropriate for out-patient services. Of the 21 assessed as appropriate for out-patient services, there were 3 discharges. Of the 3 discharges, 1 (33.3%) was an approved discharge, 2 (66.6%) were non-approved discharges, and 18 (85.7%) were carried over to fiscal year 2023. The 1 approved discharge was assessed with a substance use disorder, mild, and reported abstinence at the time of program completion. The 2 non-approved discharges were diagnosed with a substance use disorder, moderate to severe and they dropped out of the program. If we add the 12 youth completing an assessment only and discharged with no diagnosis or not in need of services, there were 13 (76.5%) approved youth discharges out of 17 youth discharges.</p>
<b>SUD TREATMENT OUTCOMES</b>	
<b>Abstinence Outcomes—Adults</b>	
<b>MHR Performance Target</b> 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 style="text-align: center;"><b>Adult Outpatient</b></p> <p>In FY 2022 there were 188 Adult General Program discharges (91 approved and 97 non-approved). Of the 91 approved discharges, 77 (84.6%) were diagnosed with a substance use disorder moderate/severe and 14 (15.4%) were diagnosed with a substance use disorder mild. Of the 77 approved discharges diagnosed with a substance use disorder moderate/severe, 67 (87%) were abstinent (for at least the past 30 days) at program completion. Of the 14 approved discharges diagnosed with a substance use disorder mild, 10 (71.4%) were abstinent (for at least the past 30 days) at program completion. In total, 77 (84.6%) of the 91 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;"><b>Women’s Outpatient</b></p> <p>In FY 2022 there were 133 Women’s Program discharges (54 approved and 79 non-approved). Of the 54 approved discharges, 50 (92.6%) were diagnosed with a substance use disorder moderate/severe and 4 (7.4%) were diagnosed with a substance use disorder mild. Of the 50 approved discharges diagnosed with a substance use disorder moderate/severe, 43 (86%) were abstinent (for at least the past 30 days) at program completion. Of the 4 approved discharges diagnosed with a substance use disorder mild, 2 (50%) were abstinent (for at least the past 30 days) at program completion. In total, 45 (83.3%) of the 54 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;"><b>Adult General Intense Outpatient Program</b></p>

	<p>In FY 2022, 104 (10 being carried over into FY 2023) individuals received services in the Adult General Intense Outpatient Program and all 104 were diagnosed with a substance use disorder moderate/severe. 74 (79%) of 94 successfully transitioned into the Adult General Outpatient Program and 20 (21%) of the 94 received a non-approved discharge due to, either dropping out of services and/or incarceration. Of the 74 successfully transitioning into the Adult General Outpatient Program, 68 (92%) 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;"><b>Women's Intense Outpatient Program</b></p> <p>In FY 2022, 56 (8 being carried over into FY 2023) women received services in the Women's Intense Outpatient Program and all 56 were diagnosed with a substance use disorder moderate/severe. 38 (79%) of 48 successfully transitioned into the Women's Outpatient Program and 10 (21%) of the 48 received a non-approved discharge due to, either dropping out of services and/or incarceration. Of the 38 successfully transitioning into the Adult General Outpatient Program, all 38 (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;"><b>Opiate Clients</b></p> <p>In FY 2022 there were 76 discharges of individuals diagnosed with an opioid use disorder (24 approved and 52 non-approved). Of the 24 approved discharges, all 24 were diagnosed with opioid use disorder moderate/severe. Of the 24 approved discharges diagnosed with an opioid use disorder moderate/severe, 20 (83.3%) were abstinent (for at least the past 30 days) at program completion.</p> <p>In addition, there were 123 discharges of individuals diagnosed with a methamphetamine use disorder (41 approved and 82 non-approved) in FY 2022. Of the 41 approved discharges, all 41 were diagnosed with methamphetamine use disorder moderate/severe. Of the 41 approved discharges diagnosed with a methamphetamine use disorder moderate/severe, 34 (82.9%) were abstinent (for at least the past 30 days) at program completion.</p> <p style="text-align: center;"><b>Overall (All Adult Clients with Moderate/Severe Diagnosis)</b></p> <p>In FY 2022 there were 145 Adult "approved discharges," 127 clients were diagnosed with a substance use disorder moderate/severe diagnosis and 18 were diagnosed with a substance use disorder mild diagnosis. Of the 127 clients diagnosed with a substance use disorder moderate/severe diagnosis, 110 (86.6%) reported abstinence for at least 30 days prior to program completion. Of the 18 approved discharges diagnosed with a substance use disorder mild, 12 (66.7%) were abstinent (for at least the past 30 days) at program completion. In total, 122 (84.1%) of the 145 approved discharges diagnosed with a substance use disorder were abstinent (for at least the past 30 days) at program completion.</p>
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## FY 2022 LAPP ANNUAL REPORT

<p><b>Criminal Justice Outcomes</b></p>	
<p><b>MHR Performance Target</b> 98% of adults receiving services will have no new involvement with the criminal justice system</p>	<p style="text-align: center;"><b>Justice Center Services Clients</b></p> <p>In FY 2022, LAPP provided services to 60 adult jail clients. 60 clients were identified as needing services. Of the 60 people in jail who accessed services, recommendations for further services were made on 52. Of the 52, 41 (79%) were released, and 37 (90%) of the 41 were admitted and engaged in services within 10 days of release. 34 (92%) of the 37 that followed through have had no new charges and (8%) are unknown.</p> <p style="text-align: center;"><b>Opiate Use Clients</b></p> <p>In FY 2022, there were 206 adult opioid use disorder mild/moderate/severe clients engaged in outpatient SUD services during the period. 197 (95.6%) 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;"><b>All Adult Clients</b></p> <p>In FY 2022, there were 1,126 adult clients engaged in outpatient SUD services during the period. 1,081 (96%) of the 1,126 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><b>Functioning Outcomes</b></p>	
<p><b>MHR Performance Target</b> 73% of adults receiving services will demonstrate a higher level of functioning (using valid functional scale)</p>	<p>All clients were included in these results with minimal distinction between Justice Center or routine admissions. Difficulties with staffing, access to the Justice Center and the lack of data required a combination of information to provide the best sample possible. To show that LAPP is making a positive difference, data must be collected at multiple points, for adults &amp; youth, and compared over time to be meaningful. We must discover a consistent method to collect data whether the services are in person or remote. The collection need addressed. This will be accomplished by reviewing the Cross-Cutting Process policy with staff (with special attention to counselors, as they are the ones primarily interacting with clients at these points) to remind everyone to complete the information. This will be followed up with regular data entry monthly to ensure measures are being completed and turned in, and to ensure data collection is continuing to improve. 17 of those in services have done a functioning score sheet</p>

## FY 2022 LAPP ANNUAL REPORT

<b>Abstinence Outcomes—Youth</b>	
<b>MHR Performance Target</b> 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 style="text-align: center;"><b>All Adolescents</b></p> <p>In FY 2022 there were 3 (1 approved and 2 non-approved) Youth Program discharges of youth clients assessed as appropriate for out-patient services. The 1 approved youth discharge was diagnosed with a substance use disorder mild and was abstinent (for at least the past 30 days) at program completion. The 2 non-approved discharges were diagnosed with a substance use disorder moderate/severe. In total, when we add the 3 youth clients assessed as appropriate for out-patient services with the 12 youth that completed an assessment only and were discharged with no diagnosis or not in need of services, there were 13 (86.7%) approved youth discharges out of 15 youth discharges. Of the 13 total approved youth discharges, all 13 (100%) were abstinent (for at least the past 30 days) at program completion.</p> <p style="text-align: center;"><b>Opiate User Clients—Youth</b></p> <p>The one (1) youth with an opiate diagnosis discharged in FY 2022 was non-approved.</p>
<b>Criminal Justice Outcomes</b>	
<b>MHR Performance Target</b> 98% of youths receiving services will have no new involvement with the criminal justice system.	<p>In FY 2022 there were 31 youth clients engaged in outpatient SUD services during the period. To our knowledge, 29 of the 31 (93.5%) had no new involvement with the criminal justice system during the period.</p>
<b>Functioning Outcomes</b>	
<b>MHR Performance Target</b> 73% of youths receiving services will demonstrate a higher level of functioning (using valid functional scale)	<p>Please see the results above (MHR Performance Target - Functioning Outcomes). Within the sample, no youth clients completed functioning scales during two time periods in FY 2022.</p>
<b>Systems Evaluation, Quality Assurance</b>	
100% of Providers will formally assess client/ consumer satisfaction and referral source satisfaction a minimum of once a year	<p>In FY 2022, a sample of 188 anonymous client satisfaction surveys were received and reviewed following program completion. Of these, 91% of clients were satisfied with services received. 90% indicated appointment times were convenient. 88% felt the services provided to them were what they needed, and 91% would recommend our services to others. Clients gave much praise for counselors, services and support staff.</p> <p><b>REFERRAL SURVEYS</b> In SFY 2022, 20 referral source surveys were sent out and we received 7 (35%) of them back. 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>

**FY 2022 LAPP ANNUAL REPORT**

**PATASKALA SITE COMPARISON FY 2021 TO FY 2022**

<b>PATASKALA SITE FY 2021</b>	<b>PATASKALA SITE FY 2022</b>																																																												
<p><b><u>Unduplicated clients:</u></b> 83 individuals received services, representing 9% of the 923 clients served by LAPP.</p>	<p><b><u>Unduplicated clients:</u></b> 133 individuals received services, representing 11.1% of the 1,199 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 \$31,031.04 in FY 2022 (July 1, 2021 through June 30, 2022). This revenue generated is mostly through Medicaid and allocation.</p>																																																												
<p><b><u>Services provided at Pataskala site since July 2020:</u></b></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><b>TOTAL</b></td> <td><b>\$33,576.30</b></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		<b>TOTAL</b>	<b>\$33,576.30</b>	<p><b><u>Services provided at Pataskala site since July 2021:</u></b></p> <table border="0"> <tr> <td>Assessment:</td> <td>28.00 units</td> <td>\$3,111.08</td> </tr> <tr> <td>MH Assessment:</td> <td>5.00 hours</td> <td>\$555.55</td> </tr> <tr> <td>Case Management</td> <td>4.91 hours</td> <td>\$508.04</td> </tr> <tr> <td>Group:</td> <td>0.00 hours</td> <td>\$0.00</td> </tr> <tr> <td>Individual:</td> <td>148.03 hours</td> <td>\$15,033.41</td> </tr> <tr> <td>MH Individual:</td> <td>93.42 hours</td> <td>\$9,647.41</td> </tr> <tr> <td>Intervention:</td> <td>19.57 hours</td> <td>\$2,175.55</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><b>TOTAL</b></td> <td><b>\$31,031.04</b></td> </tr> </table>	Assessment:	28.00 units	\$3,111.08	MH Assessment:	5.00 hours	\$555.55	Case Management	4.91 hours	\$508.04	Group:	0.00 hours	\$0.00	Individual:	148.03 hours	\$15,033.41	MH Individual:	93.42 hours	\$9,647.41	Intervention:	19.57 hours	\$2,175.55	Crisis	0.0 hours	\$0.00	Outreach	0.0 hours	\$0.00		<b>TOTAL</b>	<b>\$31,031.04</b>
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<p><b><u>Programming:</u></b>                      LAPP Adult (General): men and women                      LAPP Adolescent: male and female</p>	<p><b><u>Programming:</u></b>                      LAPP Adult (General): men and women                      LAPP Adolescent: male and female</p>																																																												
<p><b><u>Providing two group:</u></b>                      Action or Aftercare Group: Wednesday night (As needed)                      Contemplation Group: Thursday night (As needed)</p>	<p><b><u>Providing one group:</u></b>                      Action or Aftercare Group: Thursday afternoon (As needed)</p>																																																												

**FY 2022 LAPP ANNUAL REPORT**

**PATASKALA SITE COMPARISON FY 2020 TO FY 2022**

<p><b>*Staffing:</b> 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><b>*Staffing:</b> One adult program counselor on site approximately 2-3 days a week. Other counselors staff the site as needed per appointment: Monday – Thursday, 8:00AM to 4:00 PM. Friday, 8:00AM to 2:00 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.