

Greenville County Commission on Alcohol and Drug Abuse – The Phoenix Center

Priority Service Areas and Goals

Fiscal Year 2020



Environmental Prevention Strategies

Activities:

1. Implement Alcohol Enforcement Team, including alcohol compliance checks, media around checks/results, shoulder taps, controlled party dispersals, and bar checks. Identify and monitor high buy areas.
2. Implement server training through Palmetto Retailers Education Program (PREP).
3. Implement SYNAR Study to monitor tobacco access in Greenville County. Identify and monitor high buy areas.
4. Implement ECHO prescription drug prevention strategies including reduction in retail access, reduction in social access, and media/awareness activities.

Fiscal Year 2015 Actual	Goal	Fiscal Year 2016 Actual	Fiscal Year 2017 Actual	Fiscal Year 2018 Actual	Fiscal Year 2019 July-December
Prescription Drug Drop Boxes in Greenville	Decrease social access to prescription drugs for non-medical use	Prescription Drug Drop Boxes in Greenville	Prescription Drug Drop Boxes in Greenville	Prescription Drug Drop Boxes in Greenville	Prescription Drug Drop Boxes in Greenville
1	Maintain Rx Disposal Sites	1	6	7	9
Youth Alcohol Buy Rate in Greenville	Maintain a youth alcohol buy rate at or below 10%	Youth Alcohol Buy Rate in Greenville	Youth Alcohol Buy Rate in Greenville	Youth Alcohol Buy Rate in Greenville	Youth Alcohol Buy Rate in Greenville
7.9%	< 10%	7.9%	7% (105 buys out of 1,484 attempts)	4.1% (77 buys out of 1,878 attempts)	4.6% (42 buys out of 920 attempts)
Youth Tobacco Buy Rate in Greenville	Maintain a youth tobacco buy rate at or below 10%	Youth Tobacco Buy Rate in Greenville	Youth Tobacco Buy Rate in Greenville	Youth Tobacco Buy Rate in Greenville	Youth Tobacco Buy Rate in Greenville
5%	< 10%	6.9%	2.6% (3 buys out of 117 attempts)	3.8% (5 buys out of 132 attempts)	4.9% (9 buys out of 181 attempts)

Treatment Completion and Outcomes

Activities:

1. Implement evidence based practices as appropriate for the specific program.
2. Incorporate a variety of therapeutic interventions into all programs.
3. Utilize gender-specific programming in a consistent manner across all programs as appropriate.
4. Maintain relationships with community recovery partners and provide on-site access to recovery resources.
5. Obtain consistent feedback from clients, patients, staff, and other community partners to identify issues related to access, retention, effectiveness, and satisfaction.
6. Increase partnerships with community recovery programs to assist in housing, employment, community support groups, etc.

Fiscal Year 2015 Actual	Goal	Fiscal Year 2016 Actual	Fiscal Year 2017 Actual	Fiscal Year 2018 Actual	Fiscal Year 2019 July-December
Completion of Services	Completion of Services	Completion of Services	Completion of Services	Completion of Services	Completion of Services
62%	65%	61%	64%	61% (2,899/4,663)	58% (1,327/2,280)
Reduction in Alcohol Use from Admission to 90 Days Post Discharge	Reduction in Alcohol Use from Admission to 90 Days Post Discharge	Reduction in Alcohol Use from Admission to 90 Days Post Discharge	Reduction in Alcohol Use from Admission to 90 Days Post Discharge	Reduction in Alcohol Use from Admission to 90 Days Post Discharge	Reduction in Alcohol Use from Admission to 90 Days Post Discharge
66% Reduction	40% Reduction	56% Reduction	46% Reduction	83% Reduction	54% Reduction
Reduction in Other Drug Use from Admission to 90 Days Post Discharge	Reduction in Other Drug Use from Admission to 90 Days Post Discharge	Reduction in Other Drug Use from Admission to 90 Days Post Discharge	Reduction in Other Drug Use from Admission to 90 Days Post Discharge	Reduction in Other Drug Use from Admission to 90 Days Post Discharge	Reduction in Other Drug Use from Admission to 90 Days Post Discharge
67% Reduction	40% Reduction	74% Reduction	87% Reduction	91% Reduction	60% Reduction

Fiscal Year 2015 Actual	Goal	Fiscal Year 2016 Actual	Fiscal Year 2017 Actual	Fiscal Year 2018 Actual	Fiscal Year 2019 July-December
Reduction in Tobacco Use from Admission to 90 Days Post Discharge	Reduction in Tobacco Use from Admission to 90 Days Post Discharge	Reduction in Tobacco Use from Admission to 90 Days Post Discharge	Reduction in Tobacco Use from Admission to 90 Days Post Discharge	Reduction in Tobacco Use from Admission to 90 Days Post Discharge	Reduction in Tobacco Use from Admission to 90 Days Post Discharge
46% Reduction	25% Reduction	62% Reduction	10% Increase	29% Reduction	46% Reduction
Reduction in Arrests from Admission to 90 Days Post Discharge	Reduction in Arrests from Admission to 90 Days Post Discharge	Reduction in Arrests from Admission to 90 Days Post Discharge	Reduction in Arrests from Admission to 90 Days Post Discharge	Reduction in Arrests from Admission to 90 Days Post Discharge	Reduction in Arrests from Admission to 90 Days Post Discharge
91% Reduction	75% Reduction	92% Reduction	6% Increase	96% Reduction	78% Reduction
Increase in Employment from Admission to 90 Days Post Discharge	Increase in Employment from Admission to 90 Days Post Discharge	Increase in Employment from Admission to 90 Days Post Discharge	Increase in Employment from Admission to 90 Days Post Discharge	Increase in Employment from Admission to 90 Days Post Discharge	Increase in Employment from Admission to 90 Days Post Discharge
83% Increase	50% Increase	95% Increase	98% Reduction	87% Increase	76% Increase
Reduction in Homelessness from Admission to 90 Days Post Discharge	Reduction in Homelessness from Admission to 90 Days Post Discharge	Reduction in Homelessness from Admission to 90 Days Post Discharge	Reduction in Homelessness from Admission to 90 Days Post Discharge	Reduction in Homelessness from Admission to 90 Days Post Discharge	Reduction in Homelessness from Admission to 90 Days Post Discharge
89% Reduction	40% Reduction	98% Reduction	10% Reduction	80% Reduction	79% Reduction
Percentage Attending Self-Help Activity at 90 days Post Discharge	Percentage Attending Self-Help Activity at 90 days Post Discharge	Percentage Attending Self-Help Activity at 90 days Post Discharge	Percentage Attending Self-Help Activity at 90 days Post Discharge	Percentage Attending Self-Help Activity at 90 days Post Discharge	Percentage Attending Self-Help Activity at 90 days Post Discharge
6%	35%	Unavailable in EHR	Unavailable in EHR	25% (284/1,162)	23% (111/476)
Reduction in Emergency Department Visits	Reduction in Emergency Department Visits	Reduction in Emergency Department Visits	Reduction in Emergency Department Visits	Reduction in Emergency Department Visits	Reduction in Emergency Department Visits
Unavailable in EHR	40% Reduction	Unavailable in EHR	Unavailable in EHR	82% Reduction	49% Reduction

State 301 Average for Completion of Services is 46%
National Average for Completion of Services is 43%
State Average for Reduction in Alcohol Use is 69%
State Average for Reduction in Other Drug Use is 88%
State Average for Reduction in Arrests is 20%
State Average for Increase in Employment is 84%
State Average for Reduction in Homelessness is 57%

Preschool Age Children

Activities:

1. Implement Master Plan to enhance the therapeutic environment for individuals in the Infant and Child Program.
2. Complete a child developmental screening or child assessment on all children under the age of seven who are living in the home of an adult with an open DSS case.
3. Complete a child developmental screening or child assessment on all children under the age of seven who are living in the home of an adult who is participating in a Phoenix Center program.
4. Implement ongoing Motivational Interviewing training for all staff who interact with parents and children during the screening and assessment process.
5. Designate a staff member to attend regularly scheduled meetings with partner agencies including DSS, pediatric service providers, and OB/GYN clinics to collaborate on referrals.

Fiscal Year 2015 Actual	Goal	Fiscal Year 2016 Actual	Fiscal Year 2017 Actual	Fiscal Year 2018 Actual	Fiscal Year 2019 July-December
Preschool Age Children Served	Preschool Age Children Served	Preschool Age Children Served	Preschool Age Children Served	Preschool Age Children Served	Preschool Age Children Served
49	10% Increase	63 (29% Increase)	49 (0% Increase)	72 (47% Increase)	53

School Age Children and Adolescents

Activities:

1. Designate a staff member to attend regularly scheduled meetings with partner agencies including DSS and DJJ to collaborate on referrals.
2. Complete an assessment on any student who is suspended from school due to an incident related to alcohol or other drugs.
3. Complete an assessment on any individual under the age of eighteen who appears in front of a magistrate due to an alcohol or other drug related incident.
4. Utilize evidence based programs specifically for children and adolescents under the age of eighteen.
5. Continue with Prevention and Early Intervention programs such as Why Try, Alcohol Education Program, and Tobacco Education Program as described in Prevention Impact Work Plans.
6. Provide direct service in schools, group homes, detention center and any other area in which access is available.
7. Provide training to teachers and other community members who work with children and adolescents.

Fiscal Year 2015 Actual	Goal	Fiscal Year 2016 Actual	Fiscal Year 2017 Actual	Fiscal Year 2018 Actual	Fiscal Year 2019 July-December
School Age Children and Adolescents Served	School Age Children and Adolescents Served	School Age Children and Adolescents Served	School Age Children and Adolescents Served	School Age Children and Adolescents Served	School Age Children and Adolescents Served
462	10% Increase	642 (39% Increase)	637 (38% Increase)	577 (25% Increase)	373
Residential Utilization at WHA (16 beds maximum)	Residential Utilization at WHA (16 beds maximum)	Residential Utilization at WHA (16 beds maximum)	Residential Utilization at WHA (16 beds maximum)	Residential Utilization at WHA (16 beds maximum)	Residential Utilization at WHA (16 beds maximum)
97%	95%	96%	95%	87%	56%

Pregnant and Parenting Women

Activities:

1. Continue to provide Motivational Interviewing training and proficiency training for all direct care staff.
2. Implement Motivational Interviewing training for non-direct care staff who interact with individuals during the screening and assessment process.
3. Continue ASAM training for clinical staff to ensure that individuals are admitted to the appropriate level of care and to increase success with the Managed Care Organizations' prior authorization process.
4. Initiate weekly contact with individuals who are on the waiting list and offer interim services as needed.
5. Maintain trauma informed care and gender specific services in planned regimen along with other evidence based practices.
6. Implement Master Plan to include improvements to the facility which provide increased privacy for services and increased living space for each family unit.
7. Designate a staff member to attend regularly scheduled meetings with partner agencies including DSS and Adult Probation to collaborate on referrals.
8. Complete an assessment on any pregnant woman with an open DSS case where there is suspicion of alcohol or other drug use.

9. Complete an assessment on any pregnant woman who appears in front of a magistrate due to an alcohol or other drug related incident.
10. Complete an assessment on any pregnant woman who is on probation due to an alcohol or other drug related incident and/or where there is suspicion of alcohol or other drug use.

Fiscal Year 2015 Actual	Goal	Fiscal Year 2016 Actual	Fiscal Year 2017 Actual	Fiscal Year 2018 Actual	Fiscal Year 2019 July-December
Pregnant Women Served	Pregnant Women Served	Pregnant Women Served	Pregnant Women Served	Pregnant Women Served	Pregnant Women Served
105	10% Increase	116 (10% Increase)	103 (2% Decrease)	116 (10% Increase)	66
Residential Utilization at SP (16 beds maximum)	Residential Utilization at SP (16 beds maximum)	Residential Utilization at SP (16 beds maximum)	Residential Utilization at SP (16 beds maximum)	Residential Utilization at SP (16 beds maximum)	Residential Utilization at SP (16 beds maximum)
90%	90%	97%	96%	93%	97%
Drug Free Births (excluding MAT during pregnancy)	Drug Free Births (excluding MAT during pregnancy)	Drug Free Births (excluding MAT during pregnancy)	Drug Free Births (excluding MAT during pregnancy)	Drug Free Births (excluding MAT during pregnancy)	Drug Free Births (excluding MAT during pregnancy)
100%	100%	95% ¹ (18/19)	100% ²	75% ³ (15/20)	92% ⁴ (11/12)

Access and Retention

Activities:

1. Monitor the point of entry process to ensure accessibility and efficiency.
2. Publicize priority admission status for pregnant and intravenous substance users.
3. Provide access to interim services to individuals placed on a waiting list.

Fiscal Year 2016 Actual	Goal	Fiscal Year 2017 Actual	Fiscal Year 2018 Actual	Fiscal Year 2019 July-December
Assessment Within 2 Days of Entry	Assessment Within 2 Days of Entry	Assessment Within 2 Days of Entry	Assessment Within 2 Days of Entry	Assessment Within 2 Days of Entry
79%	75%	89%	78%	72%
Treatment Within 6 Days of Assessment	Treatment Within 6 Days of Assessment	Treatment Within 6 Days of Assessment	Treatment Within 6 Days of Assessment	Treatment Within 6 Days of Assessment
46%	50%	30%	29%	47%
Service Gaps >30 Days	Service Gaps >30 Days	Service Gaps >30 Days	Service Gaps >30 Days	Service Gaps >30 Days
4%	<1%	6%	2%	2%

¹ In Fiscal Year 2016, 4 of 19 babies tested positive for drugs at birth. However, 3 of the 4 were born to a mother who was on a medication assisted therapy protocol during pregnancy and was closely monitored by her physician throughout pregnancy. Upon birth, the baby began a withdrawal protocol.

² In Fiscal Year 2017, 2 of 15 babies tested positive for drugs at birth. However, the babies who tested positive were born to a mother who was on a medication assisted therapy protocol during pregnancy and was closely monitored by her physician throughout pregnancy. Upon birth, the babies began a withdrawal protocol.

³ In Fiscal Year 2018, 7 of 20 babies tested positive for drugs at birth. However, 2 of the 7 babies who tested positive were born to a mother who was on a medication assisted therapy protocol during pregnancy and was closely monitored by her physician throughout pregnancy. Upon birth, the babies began a withdrawal protocol.

⁴ In the first six months of Fiscal Year 2019, 4 out of 12 babies tested positive for drugs at birth. However, 3 of the 4 babies who tested positive were born to a mother who was on a medication assisted therapy protocol during pregnancy and was closely monitored by her physician throughout pregnancy. Upon birth, the babies began a withdrawal protocol.

Detoxification Services

Activities:

1. Implement community education campaign to increase referrals and access of services.
2. Implement Motivational Interviewing training for all direct care staff who interact with individuals during the screening and assessment process.
3. Continue ASAM training for staff to ensure that individuals are admitted to the appropriate level of care and to increase success with the Managed Care Organizations' prior authorization process.
4. Initiate daily contact with individuals who are on the waiting list and offer interim services as needed.
5. Maintain trauma informed care and gender specific services in planned regimen along with other evidence based practices.

Fiscal Year 2015 Actual	Goal	Fiscal Year 2016 Actual	Fiscal Year 2017 Actual	Fiscal Year 2018 Actual	Fiscal Year 2019 July-December
Administrative and APA Discharges	Decrease Detoxification Administrative and Against Professional Advice Discharges	Administrative and APA discharges	Administrative and APA discharges	Administrative and APA discharges	Administrative and APA discharges
38%	10% Reduction	39% (3% Increase)	36% (5% Reduction)	28% (301/1,091) (18% Reduction)	31% (170/542) (8% Reduction)
Detoxification Utilization (16 beds maximum)	Detoxification Utilization (16 beds maximum)	Detoxification Utilization (16 beds maximum)	Detoxification Utilization (16 beds maximum)	Detoxification Utilization (16 beds maximum)	Detoxification Utilization (16 beds maximum)
92%	90%	86%	81%	80%	77%
Engagement Following Discharge	Greenville County Engagement Following Detoxification Discharge	Engagement Following Discharge	Engagement Following Discharge	Engagement Following Discharge	Engagement Following Discharge
Unknown	50%	Unknown	Unknown	43% (261/596)	26% (63/239)
Contact to Intake	Contact to Intake	Contact to Intake	Contact to Intake	Contact to Intake	Contact to Intake
Unknown	≤24 hours from first contact to intake	Unknown	Unknown	Unknown	2 Days Average

Interim Housing at Serenity Village

Activities:

1. Provide stable housing for women and their children following completion of residential services at Serenity Place as they prepare for self-sufficiency.
2. Maintain partnerships with community housing resources to provide stable housing to active clients who are participating in treatment or graduates of a Phoenix Center program.

Fiscal Year 2016 Actual	Goal	Fiscal Year 2017 Actual	Fiscal Year 2018 Actual	Fiscal Year 2019 July-December
Families Served	Families Served Per Year	Families Served	Families Served	Families Served
28	25	24	25	25

Financial Stability and Diversity

Activities:

1. Maintain a Risk Management Plan which is reviewed at least annually and updated as needed.
2. Achieve fiscal solvency.
3. Maximize community financial support and engagement through The Family Effect.
4. Strengthen cash management and investment control.
5. Maintain a Capital Spending Plan which is reviewed at least annually and updated as needed.

6. Develop and implement a plan to better utilize facility space.
7. Monitor client payments and require compliance with fee agreement based on ability to pay.
8. Monitor direct service productivity.
9. Investigate benefits package for staff to allow more choice in retirement options.

Fiscal Year 2015 Actual	Goal	Fiscal Year 2016 Actual	Fiscal Year 2017 Actual	Fiscal Year 2018 Actual	Fiscal Year 2019 July-December
Budget to Operating Net Surplus	Budget to Operating Net Surplus	Budget to Operating Net Surplus	Budget to Operating Net Surplus	Budget to Operating Net Surplus	Budget to Operating Net Surplus
+4%	+/- 4%	-4%	-0.54%	-0.91%	-10.29%
End of Year Operating Cash and AR	End of Year Operating Cash and AR	End of Year Operating Cash and AR	End of Year Operating Cash and AR	End of Year Operating Cash and AR	End of Year Operating Cash and AR
\$1,404,000	\$1,500,000	\$504,000	\$910,000	\$954,000	\$464,000
Debt to Asset Ratio	Debt to Asset Ratio	Debt to Asset Ratio	Debt to Asset Ratio	Debt to Asset Ratio	Debt to Asset Ratio
Unknown	≤10%	16%	15%	14%	15%
Direct Service Productivity	Direct Service Productivity	Direct Service Productivity	Direct Service Productivity	Direct Service Productivity	Direct Service Productivity
Unknown	80 hours per month	Unknown	Unknown	60 hours per month	62 hours per month

Staff Development and Training

Activities:

1. Maintain a comprehensive Training Plan which is reviewed at least annually and updated as needed.
2. Maintain a Cultural Competence and Diversity Plan which is reviewed at least annually and updated as needed.
3. Implement a strong workforce development plan.
4. Develop a comprehensive succession plan.
5. Maintain an equitable incentives plan.

Fiscal Year 2015 Actual	Goal	Fiscal Year 2016 Actual	Fiscal Year 2017 Actual	Fiscal Year 2018 Actual	Fiscal Year 2019 July-December
Staff Turnover	Staff Turnover	Staff Turnover	Staff Turnover	Staff Turnover	Staff Turnover
27%	<19%	24%	43%	22% (40/174)	15% (27/171)
OSHA Incidents	OSHA Incidents	OSHA Incidents	OSHA Incidents	OSHA Incidents	OSHA Incidents
3%	<5%	3%	3%	2% (3)	1% (1)

National Average for Staff Turnover is 19%

National Average for OSHA Incidents is 9%

Community Level Input

Activities:

1. Complete annual partner survey.
2. Maintain Substance Abuse Directory on the Phoenix Center website.
3. Lead community training events to increase education and awareness of substance use related issues.
4. Participate in local and statewide coalitions related to substance use disorders.
5. Plan and implement town hall meetings, lunch and learn sessions, and focus groups to obtain input from community.

Goal	Fiscal Year 2019 July-December
Implement 1 Partner Survey Per Year	1
Implement 1 Training/Education Session Per Month	31
Implement 3 Community Forum Events Per Year	4

Marijuana Legislation

Activities:

1. Distribute Commission Marijuana Position Statement to other 301 agencies, legislators, lobbyist, etc.
2. Seek opportunities to educate residents and law makers on the public health issues surrounding legalization of marijuana (Op Ed Articles, Community meetings, County Council meetings, Legislative Delegation meetings, etc.).
3. Monitor status of marijuana related bills in the SC Legislature.
4. Keep information updated on website regarding proposed legislation, GCCADA Position Statement, and concerns about proposed legislation.

Goal	Fiscal Year 2019 July-December
Assist 3 other state 301 agencies and/or community partners in the development of position statements which advocate against legalization of marijuana.	DAODAS, BHSA, The Blunt Truth, Greenville County Council, Prevention Subcommittee, Appalachian Council of Governments, Greenville County Sheriff's Office, Greenville City Police, 13 th Circuit Solicitors Office, Greenville County Coroner's Office, Spartanburg County Coroner's Office Office of US Senator Lindsey Graham, Office of US Senator Tim Scott SC House Representative Bobby Cox, FAVOR, Greenville Family Partnership, GHS, St. Francis Bon Secours, Furman University, WYFF News 4 – TV, WGTK "The Answer" - Radio, EUDL Coalition – list attached, ECHO Rx Coalition - list attached, SC DHEC, SC SLED, SC Underage Drinking Action Group. Numerous Community Health Fairs, United Way Behavioral Health Coalition, Augusta Heights Baptist Church
Conduct at least 10 strategic speaking engagements related to advocacy against legalization of marijuana.	Weekly radio campaign on WGTK, billboard on I-385
Prevent legalization of marijuana in SC in FY 2019.	Introduced but not passed