

Annual Report
2021/2022
Clearfield Jefferson Drug & Alcohol Commission



CLEARFIELD-JEFFERSON
**DRUG & ALCOHOL
COMMISSION**

Pointing the way to a drug free community.



*“Though no one can go back and make a brand-new start,
anyone can start from now and make a brand-new ending.”*

– Carl Bard

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SINGLE COUNTY AUTHORITY (SCA)

The Clearfield-Jefferson Drug and Alcohol Commission (CJDAC) was organized in 1977 as the local Single County Authority (SCA) for alcohol and other drug systems. The CJDAC is an independent, non-profit corporation authorized by the Pennsylvania Department of Drug and Alcohol Programs (DDAP) to plan, coordinate, and implement community alcohol and other drug and gambling prevention, intervention, treatment, and recovery services in the two-county area.

The main administrative office of the Commission is located at 480 Jeffers Street, DuBois, PA effective June of 2019. A satellite office was added during the 17/18 FY and is located at 476 Jeffers Street, DuBois, PA. Formal hours of operation are 8:30 a.m. to 4:30 p.m. Monday through Friday. The phone number is (814) 371-9002 or toll-free 800-892-9002. The Commission's website address is www.cjdac.org.

The Commission operates under a Governing Board of Directors made up of no fewer than eleven and no more than fifteen representatives of the population of the two-county area. Monthly public meetings are advertised on the Commission website and are held on the fourth Tuesday of each month at 6:00 p.m. The Board of Directors maintained eleven (11) members in the 2020/2021 and 2021/2022 fiscal years. The makeup of the Board of Directors includes a Chair, a Vice-Chair, and a Secretary/Treasurer. Each member serves a term of office for three years and may serve consecutive terms. The role of the Board of Directors is to manage the business affairs of the Commission. This includes executing contracts on behalf of the Commission, to include the PA Department of Drug and Alcohol Programs (DDAP).

The main responsibilities of the Single County Authority are:

- To review and evaluate drug and alcohol services, projects, and special problems in relation to the incidence and prevalence of drug and alcohol abuse.
- To ensure that a full continuum of treatment services is available to the residents of Clearfield and Jefferson Counties.

- **To efficiently and effectively manage financial resources allocated for drug and alcohol prevention, intervention, treatment, and recovery services.**
- **To leverage outside resources, monetary and in-kind, to enhance the current drug and alcohol prevention, intervention, treatment, and recovery system.**
- **To prepare, review and amend the annual Comprehensive Drug and Alcohol Treatment and Prevention Plans as directed by the DDAP.**
- **To recommend approval of projects and any other matters related to drug and alcohol services in the county.**
- **To serve and participate on local county boards and committees representing the field of drug and alcohol.**
- **To assist the DDAP in the evaluation of drug and alcohol treatment, intervention, prevention, case management, and recovery projects.**
- **To conduct unique evaluation of SCA funded projects in accordance with guidelines approved by the DDAP.**
- **To monitor compliance/performance of service providers relative to uniform policies, regulations, contractual obligations, and goals/objectives.**

The Clearfield-Jefferson Drug and Alcohol Commission provides several in-house services, including the following:

- **Administrative Unit:** The Administrative Unit is responsible for direct oversight, planning, and management of all day-to-day business affairs, ensuring compliance with all funding organizations, and developing partnerships with other organizations on local, county, state, and federal levels when necessary, to meet the needs of Clearfield and Jefferson County residents.
- **Prevention Unit:** The Commission maintains a functional Prevention Unit and is responsible for the direct delivery of all drug and alcohol prevention services within Clearfield and Jefferson Counties. This Unit oversees the planning, implementation and evaluation of all evidence-based drug and alcohol prevention programs, along with non-evidence-based program delivery. The Unit oversees the Jefferson County Communities that Care activities and Drug Free Communities Coalition activities.

- **Intervention Services:** The Student Assistance Program functions as a component of Intervention Services and is responsible for providing participation in SAP Core Team meetings, student screenings, Level of Care Assessments and Student Assistance Program training.
- **Case Management Unit:** The Case Management Unit is responsible for all client-related services in the SCA including Level of Care Assessments and Case Coordination services. The Center of Excellence Medication Assisted Treatment Program is also a function of the Case Management Unit and is responsible for provision of quality care managers for all individuals receiving Medication Assisted Treatment through the CJDAC/COE and contracted Medication Assisted Treatment Providers.
- **Treatment:** The Clearfield-Jefferson Drug and Alcohol Commission contracts with twenty-four providers for all level of care treatment services. This includes four in-county outpatient providers which includes three drug-free facilities and one methadone facility.
- **Recovery Support:** The SCA continues to promote a Recovery Oriented System of Care (ROSC) philosophy in all aspects of SCA programming, both in-house and with contracted providers. A ROSC is a coordinated network of community-based services and supports that are person-centered and builds on the strengths and resilience of individuals, families, and communities to achieve abstinence and improved health, wellness, and quality of life for those with or at risk of alcohol and drug problems. The CJDAC Certified Recovery Specialist Program employs full-time Certified Recovery Specialists to meet the needs of members. In addition, the SCA contracts with local providers for Certified Recovery Specialist services.

CJDAC BOARD OF DIRECTORS

Ruthanne Barbazzeni, ChairClearfield County
Brookville Area School District, K-12 Principal of Student Services

Denise Katchmarchi, Vice-ChairJefferson County
Lead Physician Educator, UPMC Health Plan, HCC Risk A

Dick Magolis, Secretary/TreasurerJefferson County
Retired, Liquor Control Enforcement, PA State Police

Debra Thomas, RN, BSN, MHAClearfield County
Vice-President of Patient Care Services/Chief Nursing Officer, Penn Highlands Brookville

Cheryl CraftJefferson County
Homeless Services Coordinator, Community Action Inc.

John YargarClearfield County
Retired Funeral Director, Mohney-Yargar Funeral Home

Ashley ShawClearfield County
Community Outreach/Events Coordinator, Domtar

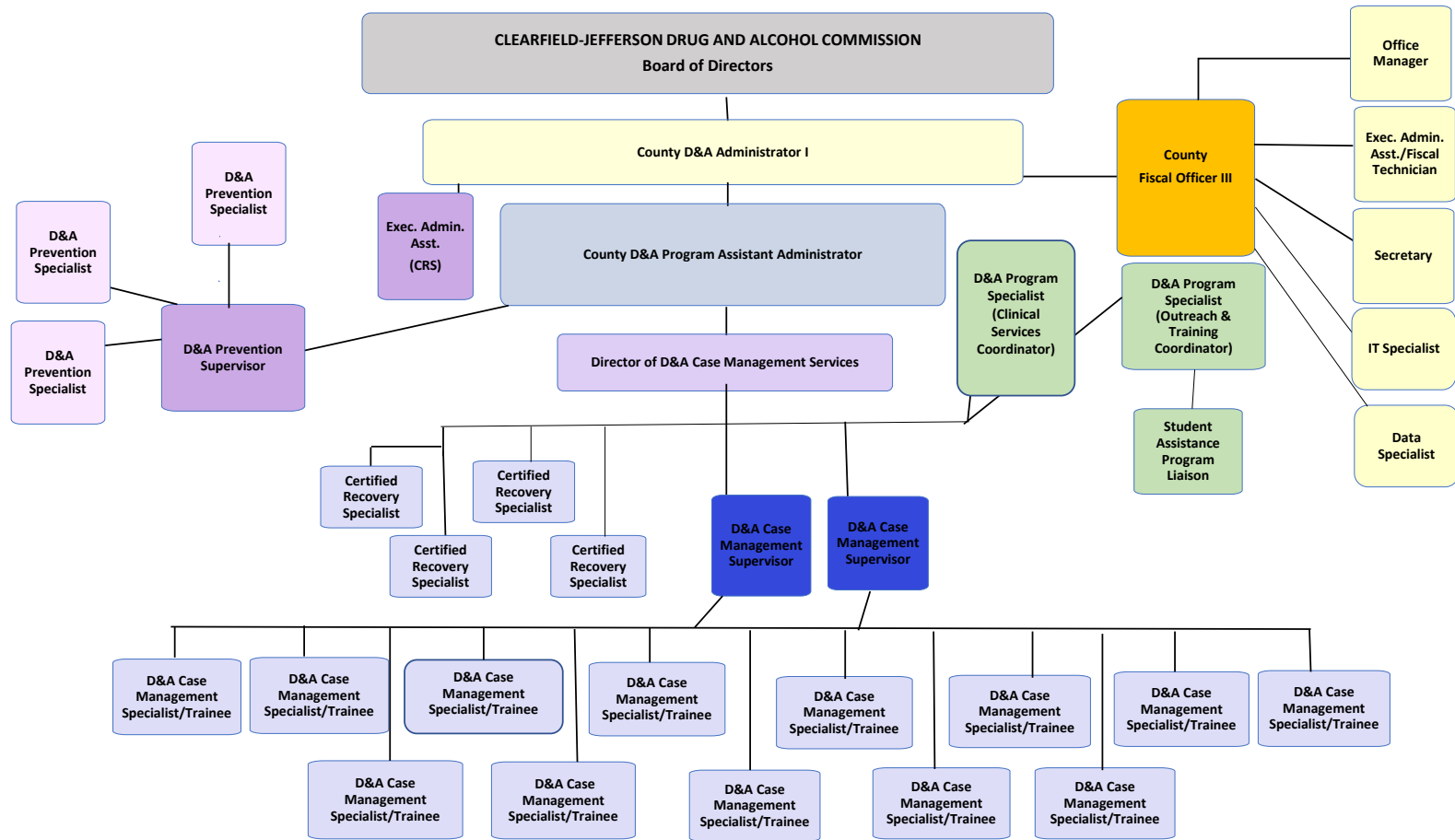
Thomas NovarioClearfield County
Semi-Retired, Loan Officer, Deposit Bank/Bartender

Paul RuffnerJefferson County
Retired Chief Probation Officer, Jefferson County Probation Department

Molly McNuttJefferson County
Executive Director, Jefferson County Area Agency on Aging

Beth PirnickClearfield County
Forensic Therapist, Nulton Diagnostic and Treatment Center

ORGANIZATIONAL CHART



STAFF MEMBERS

Administrative:

- Christopher Grunthaner, Executive Director
- Carol Jackson, Deputy Director
- Bonne Buck, Fiscal Officer
- Lora Holt, Office Manager
- Kari Fields, Executive Administrative Assistant/Fiscal Technician
- Laura Thompson, Clerk Typist

Prevention:

- Karen Orner, Supervisor
- Prevention Specialists: Stacey Risinger, Amberley Spicher

Student Assistance Program:

- Malissa Martino, Outreach and Training Coordinator/SAP Lead Trainer
- Jordan Rummel, SAP Liaison

Case Management:

- Aimee Craft, Case Management Supervisor
- Summer Nulf, Case Management Supervisor
- Destiney Cowder, Clinical Services Coordinator
- Case Management Specialists: Cassandra McAninch, Lauren Charles, Laura Ruane, Victoria Geist, Brittany Kirkpatrick, John McCullough, Julie Pierce-Klotz, Reba Fairbanks

Recovery Support Services:

- Certified Recovery Specialists: Jennifer Henry, Amanda Geer, Kurt Moore, Christina Kinder

ADMINISTRATION OVERVIEW

The Administrative Unit of the SCA is responsible for the assessment of needs, planning, capacity building and implementation of all drug and alcohol prevention, intervention, treatment, case management, and other specialized initiatives within the service area. The Commission contracts directly with the PA Department of Drug and Alcohol Programs (DDAP) to implement activities identified on the state and local level.

Accomplishments:

- The Commission remained in a five-year contract for continued services with the Pennsylvania Department of Drug and Alcohol Programs (DDAP). Contract monitoring was found to be compliant in all contractual obligations set forth by the DDAP.**
- In addition to primary funding through the DDAP, the Commission retained ongoing specialty funds and initiatives: Restrictive Intermediate Punishment funds through Jefferson County; Act 152 and BHSI funding through the Department of Human Services; Gambling Prevention; Rural Health Opioid Grant through Penn Highlands Healthcare; and State Opioid Response (Prevention, Case Management, Treatment and Recovery Services) through the Substance Abuse Mental Health Services Administration; and Tobacco Prevention funds.**
- The Commission successfully transitioned back to office-based services while continuing to offer client choice in preferred telehealth to continue to meet the challenges of the COVID-19 pandemic.**

PREVENTION UNIT OVERVIEW

The overall goal of the Prevention Unit is to further the advancement of not only substance misuse prevention programs, strategies, policies, practices, and procedures, but also those that promote primary prevention. Primary prevention efforts focus on every individual's ability to be a positive influence in the lives of others, especially our youth and those in recovery from Substance Use Disorder. The services provided throughout the CJDAC service area are based on proven methodologies. These methodologies are founded on research, local innovation, and other proven strategies within the substance misuse prevention field. In addition, prevention service delivery is based on the identified needs of communities served and consider both risk and protective factors present in local communities. The strategic goals and outcomes of the Prevention Unit are completed in collaboration with local and state partners and works with individuals who are identified as “not” in need of treatment services. Services are designed to empower individuals and the community to constructively deal with potential difficult life situations as well as enhance the strengths of at-risk individuals.

Accomplishments

- In November of 2022, the Prevention Unit completed a six-year process of strategic planning that culminated in a report detailing progress made towards four specific goals, two goals each for youth and adults, respectively, an inclusive outline of every service provided for SFY 20/21 and SFY 21/22, and the evaluation of short-term outcomes for many of these services.
- Despite the challenge of being understaffed, the Prevention Unit provided the ten-week life skills, alcohol, nicotine, and other drug use curriculum, *Too Good for Drugs*, to 605 students in 4th and 5th grades in 4 schools, as well as 11 students in an afterschool program provided by the Salvation Army.
- The Prevention Unit delivered 18 presentations on topics including current drug trends, tobacco/vaping, and Fetal Alcohol Spectrum Disorder (FASD) for schools, social service agencies, and community members.

- **An exciting addition to those services already provided by the Prevention Unit was the hosting of Sober Tailgate events held at two local high schools, a college game night held for students at Penn State – DuBois campus, and free bowling for Punxsutawney Area 4th and 5th grade students and their families.**
- **While participating in community events to include fairs and festivals, the Prevention Unit utilized this opportunity to secure valuable input from adults regarding attitudes toward, and the availability of, alcohol and other drugs within Clearfield and Jefferson Counties. This input will be utilized to assist in driving and building upon future prevention programming efforts.**
- **To raise awareness on Fetal Alcohol Spectrum Disorder (FASD), the Prevention Unit distributed drink coasters to ten local bars and restaurants, highlighting the fact that there is no safe amount and no safe time to consume alcohol during pregnancy.**
- **The Prevention Unit participated in Prescription Drug Take Back events where community members can bring in unused medications to ensure these medications are properly disposed of. During these events, the Prevention Unit distributes naloxone in the form of Narcan nasal spray, medication lock boxes, and medication deactivation kits to community members.**
- **In addition to the Prescription Drug Take Back events, the Prevention Unit distributed 1,170 medication-assisted treatment cards and pharmacy bags filled with information regarding proper disposal of unwanted medications, agency services, and so on to fifteen pharmacies and physician’s offices, as well as providing medication lock boxes and medication deactivation kits to our local agency on aging.**

CASE MANAGEMENT UNIT OVERVIEW

The Case Management Unit provides direct care to individuals with a past or present Substance Use Disorder (SUD). Primary case management services include screening, level of care assessment based on the American Society of Addiction Medicine III, case coordination, medication-assisted treatment, and recovery support services.

Accomplishments

- **The Case Management Unit successfully, despite swift capacity expansion, increased the number of individuals seeking services and met the complex needs of those individuals.**
- **488 screens and 382 level of case assessments were completed with case coordination services offered to anyone receiving one of these services. 171 individuals sought acceptance into the SCA's Medicated Assisted Treatment Program.**
- **The Case Management Unit effectively accomplished embedding a Case Manager in the Penn Highlands Healthcare Emergency Department to facilitate warm hand offs to treatment services.**
- **The Case Management Unit attained the transition of services from on-site and in-community services to remote telehealth services, as the result of the COVID-19 pandemic. Services were maintained in creative ways to provide specialized care and resources to individuals in need, demonstrating a highly adaptable staff.**
- **The Case Management Unit successfully, despite many challenges within the treatment system and the rise in Methamphetamine use, provided ongoing services for county residents with increasingly complex needs.**
- **The Law Enforcement Treatment Initiative (LETI), a diversionary program aimed at introducing treatment to individuals who may otherwise become criminal-justice involved, was kicked off on July 27, 2021 in Clearfield County. A designated case manager participated in the LETI training program and serves as the primary point of contact for LETI referrals in Clearfield County.**

- **During the 2021-2022 state fiscal year, the Pennsylvania Office of the Attorney General, the Jefferson County District Attorney's Office, and the Clearfield-Jefferson Drug & Alcohol Commission began discussions on expanding the Law Enforcement Treatment Initiative to Jefferson County.**

RECOVERY SERVICES OVERVIEW

Recovery Services are designed as a supportive peer-led service that engages the SUD individual in recovery activities designed to complement case management and treatment services.

Accomplishments

- **The Recovery Services Program has grown to the point that we now have four certified recovery specialists.**
- **The Certified Recovery Specialists participated in multiple recovery and overdose awareness events in the two-county area.**
- **The Recovery Services Program effectively provided support to drug court participants in Jefferson County and introduced individuals to the recovery community to seek out sponsors and other recovery supports.**
- **Relapse prevention groups were held in the Jefferson County jail. Interest in this program has grown substantially, so much so that an additional certified recovery specialist has been embedded in the jail to help meet the interest of individuals interested in recovery groups.**
- **The Recovery Services Program has successfully embedded a certified recovery specialist into the Dickinson Center to provide support groups.**
- **Two certified recovery specialists participated in the Workforce Development Program by participating in trainings and seminars.**
- **Recovery Specialists at the Commission continue to participate in various trainings and presentations. These offer the recovery specialists additional means of information with the intention of building upon our existing services offered.**

CENTER OF EXCELLENCE - MEDICATED ASSISTED TREATMENT PROGRAM

The SCA's Center of Excellence (COE) for Medication Assisted Treatment (MAT) provides access to Medication Assisted Treatment as one of the pathways to recovery. MAT is the use of medications in combination with counseling and behavioral therapies, which is effective in the treatment of opioid use disorders (OUD) and can help some people to sustain recovery. The SCA's Center of Excellence offers the following medications: Methadone, Buprenorphine (brand name: Suboxone/Subutex), and Naltrexone (brand name: Vivitrol). Methadone, Sublocade, and Suboxone are opiate-based replacement medications administered daily and prescribed under the supervision of a physician. Similarly, Vivitrol must also be administered under a doctor's supervision and requires a prescription. Vivitrol, however, is not opiate-based and works by blocking the opiate receptors in the brain. Vivitrol will block the effects of any opiate or alcohol consumed by the individual and is administered by injection every thirty (30) days. All medications are prescribed to individuals who are simultaneously attending drug and alcohol treatment services and working with the SCA's Center of Excellence MAT program. During the 2021-2022 state fiscal year, 242 individuals were referred for medication-assisted treatment as one of the pathways to recovery.

Accomplishments

- The SCA successfully maintained contracts with the necessary levels of care to ensure that choice in provider was offered to individuals seeking services. In addition, the SCA sought out additional providers for levels of care that were difficult to access.
- The SCA effectively and efficiently transitioned medication-assisted treatment (MAT) contracts in the 2021-2022 state fiscal year, to ensure that individuals on medication-assisted treatment may initiate or maintain their medication.
- The SCA successfully provided funding for individuals with private insurance, high deductibles, and co-pays. Additional funds allowed the SCA to divert funds to help the population.

- **The SCA successfully offered specialized treatment for pregnant women in conjunction with Life's Journey OB/GYN. Pregnant opiate users were managed effectively on medication to ensure safe deliveries. The SCA also has a designated case manager who works in conjunction with Life's Journey and the Substance Use Disorder Coordinator at Penn Highlands. This case manager also is active with Plans of Safe Care Meetings and the Neonatal Abstinence Syndrome Committee.**

STUDENT ASSISTANCE PROGRAM OVERVIEW

The Commonwealth of Pennsylvania's Student Assistance Program (SAP) utilizes a systematic team approach comprised of professionals from various disciplines within the school district to include, but not be limited to, school counselors, teachers, principals, and SAP liaisons from the Drug and Alcohol and Mental Health Categorical. In addition to being the drug and alcohol representative, the SCA's SAP liaison provides consultation to teams and families regarding the need for referral to community or school-based services and supports or referrals for assessment to determine the need for treatment.

The following provides data on the students referred to the SCA's Liaison's SAP teams for the 2021-2022 school year:

- During the 2021-2022 school year 49 SAP screens were completed by the SCA's SAP Liaison.**
- Of 49 SAP Screens it was determined that 40 students would benefit from services outside of the school.**
- 27 of the 40 students were referred to services within the mental health system.**
- 13 of the 40 students were recommended to complete a drug and alcohol level of care assessment with the SCA's SAP liaison.**
- The SCA successfully marked its 38th year for the Student Assistance Program (SAP) in Pennsylvania. The Clearfield-Jefferson Drug and Alcohol Commission employed one of the very first SAP liaisons in the state and the SCA continues to provide a quality program with efficient use of funds.**

Accomplishments

- The SCA successfully marked its 38th year for The Student Assistance Program (SAP) in Pennsylvania. The Clearfield-Jefferson Drug and Alcohol Commission employed one of the very first SAP Liaisons in the state and the SCA continues to provide a quality program with efficient use of funds.**

- **The SCA hired and trained a new SAP liaison during the 2021-2022 academic year. Despite the turnover in staff, the new SAP liaison was able to attend 167 SAP meetings of the 13 SAP teams served by the SCA's SAP liaison. The SCA's SAP liaison provides services to 8 of the 13 school districts in Clearfield and Jefferson Counties. Many of the districts operate both a high school and elementary SAP team.**
- **The SCA successfully maintained its designation as a Pennsylvania Approved Student Assistance Program Training Provider. In the 2021-2022 academic year, 45 teachers, counselors, and support staff were trained by CJDAC during 2 separate training sessions.**
- **The SCA continued to offer SAP Maintenance Sessions at the conclusion of the 2021-2022 academic year. SAP Maintenance allows SAP teams the opportunity to explore what went well during the school year, what didn't go so well, and set goals for the team to accomplish in the next academic year.**

OUTREACH & TRAINING OVERVIEW

The SCA's Training and Outreach Coordinator provided education on substance abuse trends, shared substance use data with the communities the SCA serves, organized requested trainings, and provided Narcan nasal spray to individuals and organizations throughout the 2021-2022 state fiscal year. The SCA sponsored numerous Pennsylvania Department of Drug and Alcohol Programs (DDAP) trainings for SCA and other provider staff throughout the year. This allowed the SCA and local providers to have staff adequately trained without incurring costs of long-distance travel.

The SCA recognizes the need for ongoing staff training and development and, as such, the Outreach and Training Coordinator planned the following training events for SCA staff in 2021-2022:

- **Active Shooter Training with PA State Police**
- **First Aid Training**
- **Mental Health First Aid**
- **Addictions 101**

All staff were able to complete these on-site trainings and gain new knowledge to assist the clients and communities we serve.

In an ongoing effort to reduce overdose deaths, the SCA is committed to providing Narcan to individuals and organizations of Clearfield and Jefferson Counties. The SCA developed a brief Naloxone training to present to these individuals and organizations prior to distributing Narcan nasal spray, a form of Naloxone, to them. In addition to ongoing training, the SCA also obtained grant funding to purchase 10 locking and 10 non-locking wall-mount Narcan boxes and 10 Narcan bags. These wall-mounted Narcan boxes and bags were distributed to local businesses, schools, county offices, and libraries in the two-county area served by the SCA. The Training and Outreach Coordinator will continue to work with these groups to replace the provided Narcan nasal spray as it expires.

Recognizing that social media is many individuals' main access point to local events, supports, and news, the SCA developed and maintained a Facebook page. The goal of the page is to share information that would be important to the clients and the community we serve. Upcoming events are highlighted, and general substance use information is shared. The page is maintained by the Outreach and Training Coordinator, along with the SCA's Prevention Department. The SCA hopes to continue to grow its Facebook page and expand its reach.

The Clearfield-Jefferson Heroin Overdose Task Force is a collaborative group, supported in part by the SCA, that strives to reduce overdose deaths in Clearfield and Jefferson Counties. The Task Force brings together agencies and individuals from various sectors in our community such as: faith, business, mental health, healthcare, drug/alcohol treatment, and recovery supports to work towards achieving the goals outlined in its strategic action plan. The SCA plays a vital role in the Task Force and is proud to work collaboratively with our partners to support the Task Force's mission.

TREATMENT OVERVIEW

It is the responsibility of the Single County Authority to ensure appropriate access to drug and alcohol treatment services for the residents of Clearfield and Jefferson Counties. Individuals in need assistance are provided a case manager who aids in this process. In addition, the Single County Authority provides funding that may be utilized for drug and alcohol treatment services provided income eligibility guidelines are met.

Accessing Treatment Services

Accessing treatment services occurs in a variety of ways. Self-referral is the primary mechanism of referral; however, the process can begin with a referral from an outside agency or family/friend or a loved one. Drug and alcohol treatment is a voluntary service in Pennsylvania and therefore the process must be self-directed. Individuals who utilize the SCA's Case Management Unit to access treatment are typically in need of funding, in addition to treatment services. Some individuals, who have funding/insurance available find the assistance of a case manager beneficial.

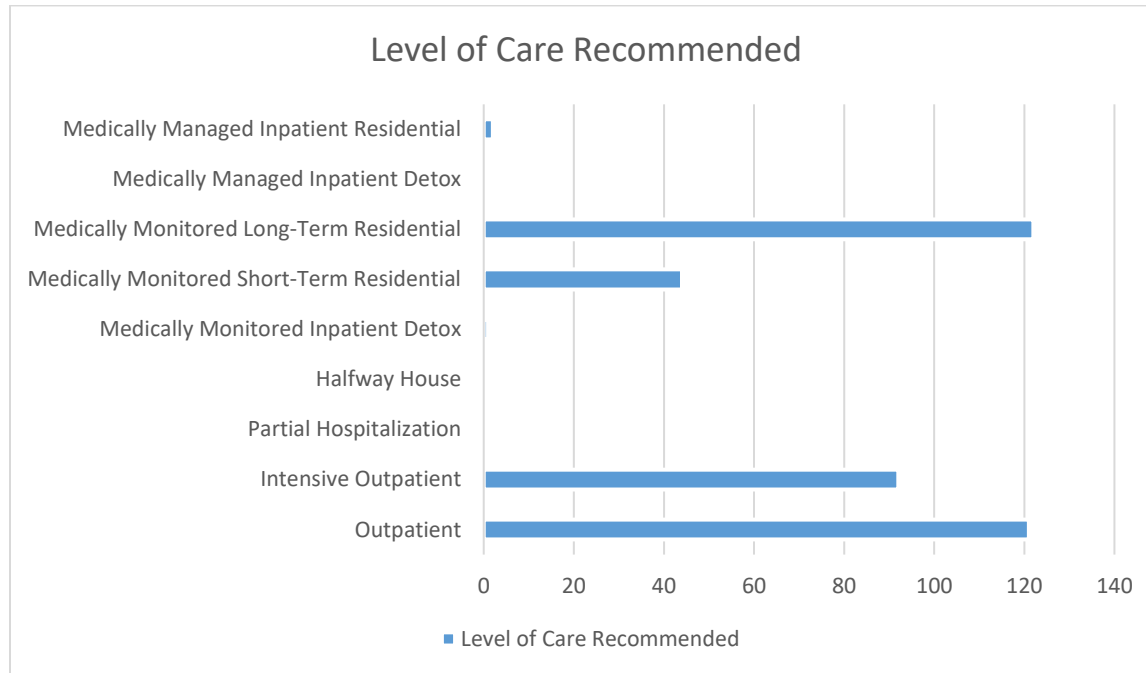
The drug and alcohol treatment system can be difficult to navigate and can create frustration on the part of those seeking services. Understanding the differences between the levels of care and navigating through those requirements can become overwhelming for a person in active addiction and/or people who are unfamiliar with the process. The SCA strives to reduce barriers by encouraging individuals to work with the Case Management Unit. Working through the SCA reduces the length of time between referral and admission to treatment and allows non-treatment needs to be addressed from the onset of engagement. Case Managers are trained in the process of immediate engagement and excel in quickly breaking down barriers to the accessibility of treatment services. As the SCA funds all levels of care, clients find that entering the system through the SCA reduces the number of times that they must repeat their drug and alcohol history and other life information.

Direct referral from the SCA is only one of the ways that an individual may access treatment services. Clients may also present at the provider level for care, as the SCA contract with providers to ensure that the individual can enter directly into a particular level of care. The SCA encourages providers to contact the SCA on behalf of clients regardless of whether the SCA is the payer of record. In this way, the SCA can engage an individual at the onset of the treatment process and begin recovery planning with the individual.

The SCA contracts with outside providers (physicians) to provide Medication Assisted Treatment (MAT) Services. A goal of the program is to facilitate access to MAT in a manner that is easy and comfortable for the individual. The screening and assessment process is identical to other levels of care, with the added request for medication and collection of information that aids the case manager in making appropriate referrals to the various medical models provided through the SCA. If the individual is interested in exploring medication options case management staff collect the necessary information and arrange for an appointment with a contracted provider. The treatment team (Care Management Supervisor, Nurse Manager, Care Manager, CRS's, and the Physician) review motivation, commitment to the treatment process along with attendance at appointments, an adequate support network, a determination is made for entry into the program. The SCA Care and Case Managers assist the individual in system navigation. The only requirement is that the individual must express a level of commitment and acceptance of the treatment recommendation to proceed with the process.

Level of Care Recommendations

All individuals receiving a level of care assessment are provided with a treatment recommendation at the conclusion of the appointment. Case Managers utilize the American Society of Addiction Medicine (ASAM) Criteria III tools to determine the level of care most appropriate for individuals. Below is the breakdown of assessments completed by the SCA from July 1, 2021 through June 30, 2022:

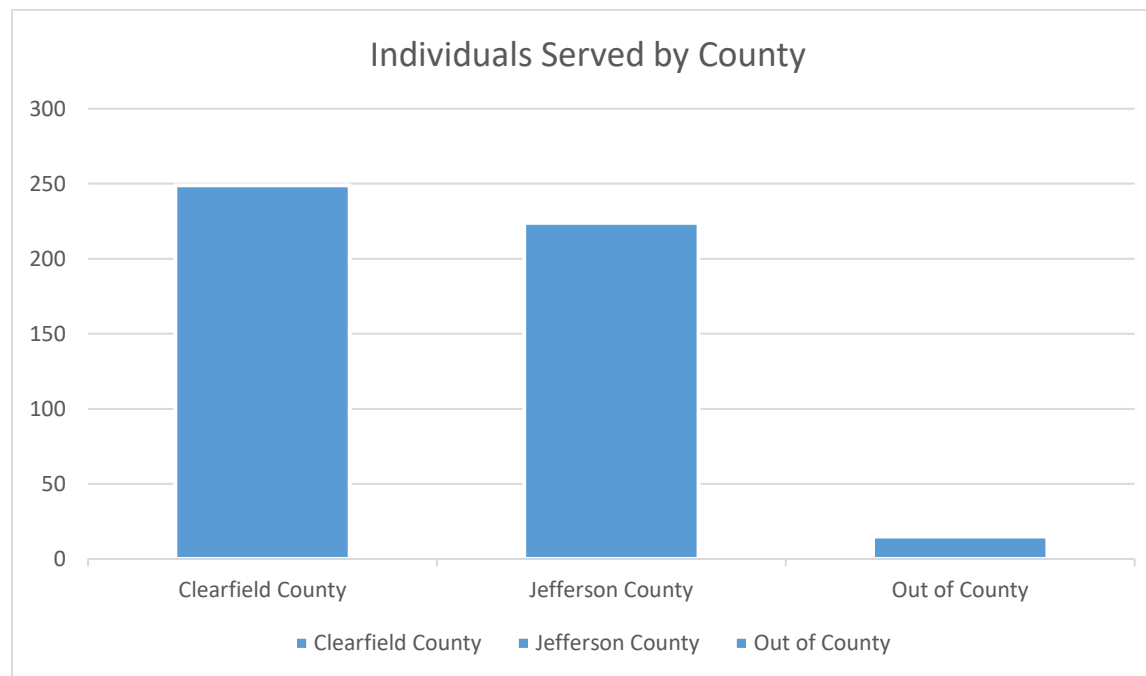


CLIENT DEMOGRAPHICS

In this section outlines the data collected on the individuals served by the Case Management Unit. Each graph addresses the primary questions posed to the SCA by community members. The data collected on SCA clients is quite extensive and is available upon request.

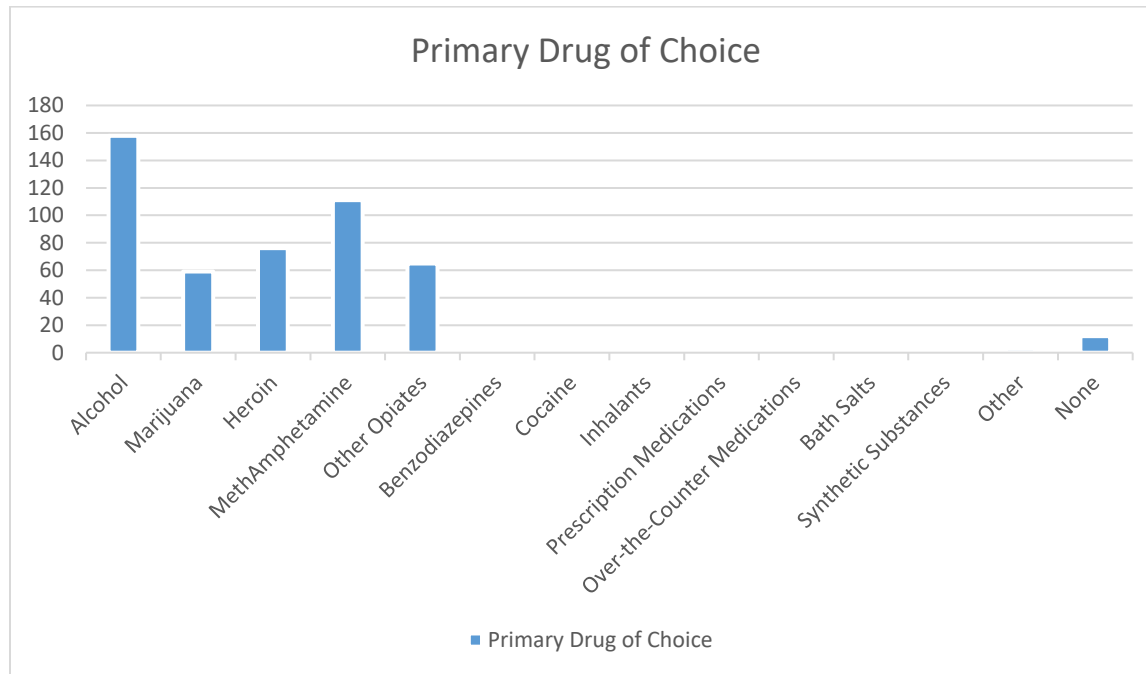
Clients Served by County

This Graph represents all the individuals who received services through the SCA during the 2021-2022 state fiscal year broken down by county.



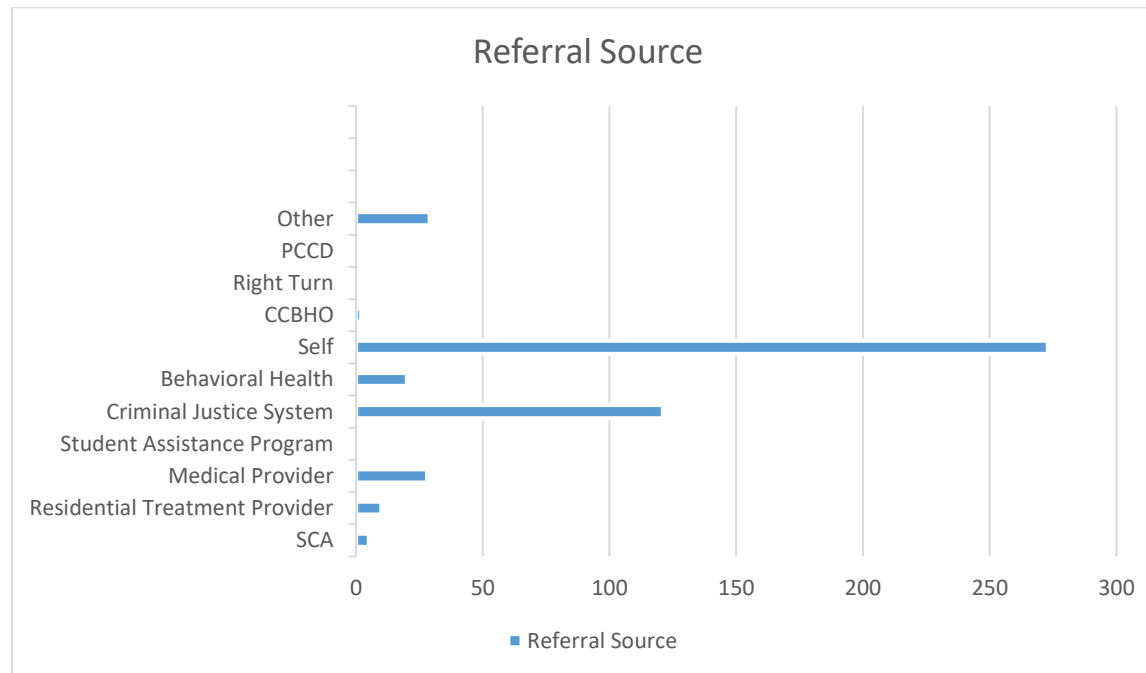
Primary Drug of Choice

All individuals receiving a level of care assessment identify their primary drug of choice. Consistently the top drugs of choice have been alcohol, marijuana, methamphetamine, and opiates.



Referral Source

Individuals are referred to the SCA through various sources. The SCA maintains a “no wrong door approach”. The top three forms of referral are self-referral, the criminal justice system, and medical provider/other. A self-referral is the preferred method as it tends to show motivation and an acceptance of the need for treatment. The SCA collaborates with the criminal justice system on several programs linking offenders to drug and alcohol treatment.



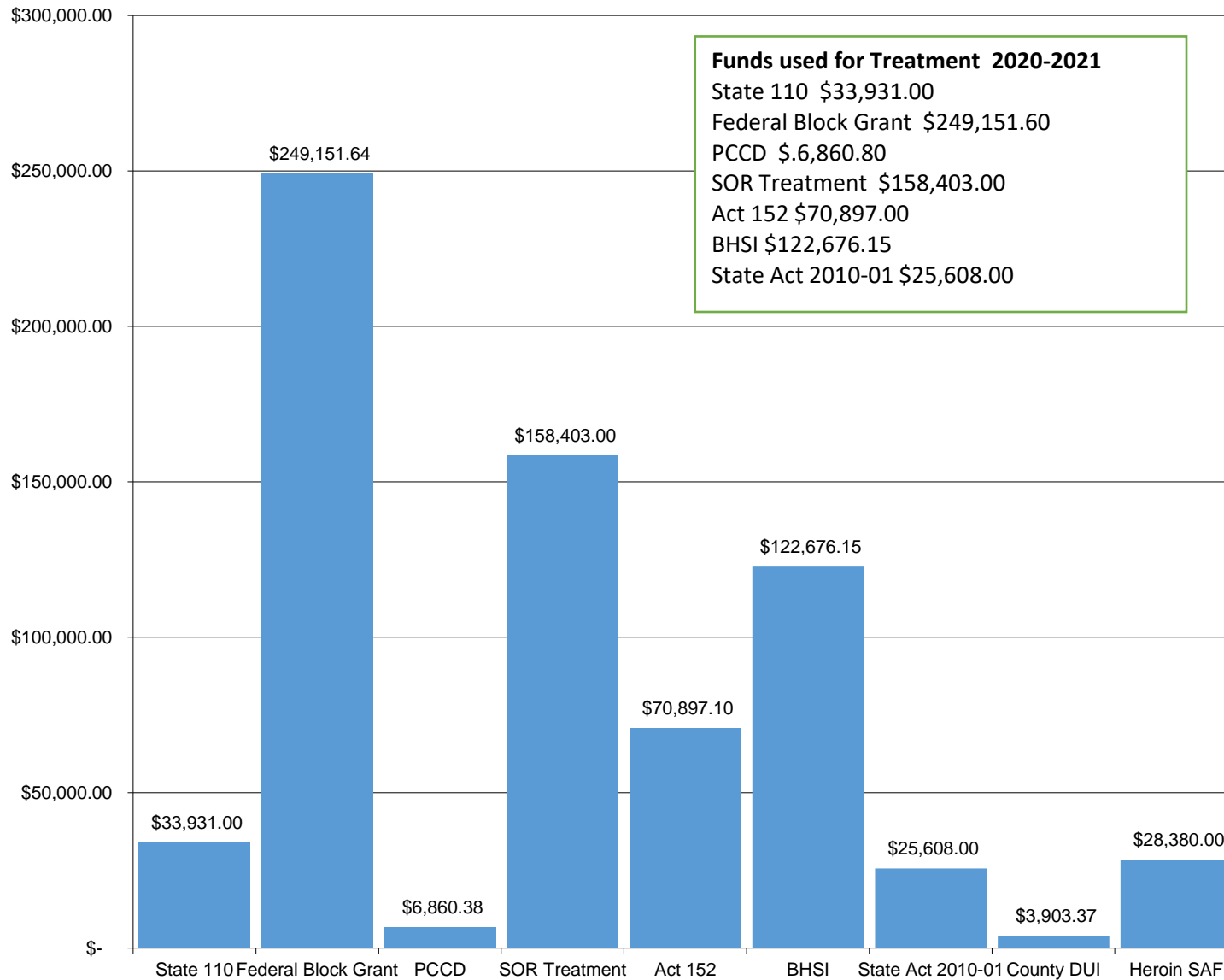
FISCAL OVERVIEW

Revenue

SCA State Revenues	352,799
Heroin SAF	28,380
Federal Revenue Block Grant Prevention	213,723
Federal Revenue Block Grant Treatment	441,100
Case Management Specialty	140,896
Race Horse Development	62,506
Gaming Treatment Act 2010-01	25,608
SOR Prevention	397,240
ACT 152 Funds	103,115
Behavioral Health Special Initiative	161,787
Opioid Use Disorder (OUD)	115,000
Human Services Development Funds HSDF	32,200
DUI Funds	66,790
Tobacco – Erie County	59,818
Student Assistance Programs	6,600
CCBHC	312,828
PCCD Jefferson Co. Grant	82,748
RHOP	41,495
Vital Strategies	20,332
SAEDR	36,976
Interest	562
Other Income	4,134
TOTAL	2,706,637

Expenses	
Program – Education/Intervention/Case Management	2,167,249
Management and General	418,187
TOTAL	2,724,224

**Clearfield-Jefferson Drug & Alcohol Commission
2020-2021 Treatment Expenses by Funding Stream**



Funds used for Treatment 2020-2021

State 110	\$	33,931.00
Federal Block Grant	\$	249,151.64
PCCD	\$	6,860.38
SOR Treatment	\$	158,403.00
Act 152	\$	70,897.10
BHSI	\$	122,676.15
State Act 2010-01	\$	25,608.00
County DUI	\$	3,903.37
Heroin SAF	\$	28,380.00
	\$	699,810.64



Drug & Alcohol
Single County Authority