

## SUBSTANCE ABUSE SERVICES

### PROGRAM MISSION

To improve the biological, psychological and social functioning and prevent the continued deterioration and adverse social, legal, and medical consequences to individuals and the community resulting from alcohol and drug dependency.

This is accomplished by serving those most in need (individuals with severe problems who lack resources for services elsewhere), providing a continuum of care and services to meet client needs, and utilizing private, nonprofit agencies in the delivery of services. The following services are provided:

- **Outpatient Substance Abuse Services** seek to eliminate clients' alcohol and/or drug use in order to improve functioning, increase self-sufficiency and prevent continued legal, social and medical consequences. These services include: assessment, individual and group therapy, alcohol and drug education courses, relapse prevention services, psychological evaluations, urinalysis and introduction to community-based support groups. Substance abuse clients are referred primarily from the criminal justice system (Probation and Parole, Alcohol Safety Action Program, Juvenile and Domestic Relations Court) and from other programs in the Department of Human Services. A contract with the Alexandria Community Services Board provides for methadone treatment services for a limited number of narcotic-using adults.
- **Case Management and Contractual Substance Abuse Treatment Services** prevent the detrimental consequences of alcohol and drug dependency to individuals and society. They promote self-sufficiency through the elimination of drug use and improvement in functioning of seriously impaired chemically dependent individuals. Adults are evaluated by case management staff and placed in the appropriate level of treatment, provided by the nonprofit sector. The continuum of contractual treatment services includes social or medical detoxification, residential treatment (from two to nine months with varying levels of intensity), as well as transitional living placements to facilitate recovery from chemical dependency. Case managers monitor client services at contract agencies as well as the individual's overall progress, referring for ancillary services as needed. The primary recipients of residential services are Arlington residents with severe and chronic substance abuse problems, who require more intensive treatment than is available in an outpatient setting and who do not have the financial resources to pay for residential treatment. Pregnant women, intravenous drug users, and HIV positive individuals are priority populations in programs receiving federal Substance Abuse Prevention and Treatment Block Grant funds.
- **Detention Facility Jail-Based Services** provide assessment, early intervention, prevention, treatment, and case management services to program participants while they are incarcerated to prevent the continuation of biopsychosocial deterioration and the criminal activities that accompany it. Consolidated jail-based services include the **ACT Program** which serves to prevent further biopsychosocial deterioration and prepare individuals for recovery from alcohol and drug dependency. The **Mental Health Jail Treatment Unit** serves to prevent suicide, and facilitate psychiatric and behavioral stabilization for inmates who have an intellectual disability or experience mental health or adjustment difficulties while incarcerated. These programs also facilitate appropriate placement in outpatient or residential aftercare settings upon the release of clients from the Detention Facility.

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PROGRAM FINANCIAL SUMMARY

	FY 2007 Actual	FY 2008 Revised	FY 2009 Proposed	% Change '08 to '09
Personnel	\$2,588,372	\$2,791,849	\$2,844,878	2%
Non-Personnel	164,574	353,301	307,465	-13%
Nonprofits	2,405,013	2,421,071	2,053,649	-15%
Subtotal	5,157,959	5,566,221	5,205,992	-6%
Inter-Departmental Credit	-	(225,774)	(225,774)	-
<b>Total Expenditures</b>	<b>5,157,959</b>	<b>5,340,447</b>	<b>4,980,218</b>	<b>-7%</b>
Fees	48,491	56,813	56,813	-
State Share	1,340,338	1,037,033	1,126,685	9%
Federal Grants	1,231,757	1,420,334	835,761	-41%
Other Grants	422	-	-	-
<b>Total Revenues</b>	<b>2,621,008</b>	<b>2,514,180</b>	<b>2,019,259</b>	<b>-20%</b>
<b>Net Tax Support</b>	<b>\$2,536,951</b>	<b>\$2,826,267</b>	<b>\$2,960,959</b>	<b>5%</b>
Permanent FTEs	32.8	33.30	32.80	
Temporary FTEs	-	-	-	
<b>Total Authorized FTEs</b>	<b>32.8</b>	<b>33.30</b>	<b>32.80</b>	

Financial Details by Program

	FY 2007 Actual	FY 2008 Revised	FY 2009 Proposed	% Change '08 to '09
Administration	\$234,819	\$262,883	\$277,319	5%
Adult Outpatient Services	1,118,148	1,293,456	1,213,739	-6%
Case Management	376,956	517,034	572,977	11%
Contractual Services	2,280,318	2,421,270	2,088,867	-14%
Prevention and Outreach	109,904	82,623	-	-100%
Jail Based Services	1,037,814	988,955	1,053,090	6%
Subtotal	5,157,959	5,566,221	5,205,992	-6%
Inter-Departmental Credit	-	(225,774)	(225,774)	-
<b>Total Expenditures</b>	<b>5,157,959</b>	<b>5,340,447</b>	<b>4,980,218</b>	<b>-7%</b>
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<b>Net Tax Support</b>	<b>\$2,536,951</b>	<b>\$2,826,267</b>	<b>\$2,960,959</b>	<b>5%</b>

SIGNIFICANT BUDGET HIGHLIGHTS

- ↑ Personnel expenditures include normal salary increases, an increase in employer retirement contributions to maintain full funding of the retirement fund, and a ten percent increase in employer health insurance rates. A service reduction has been made which eliminates one Substance Abuse Therapist (\$83,817, 1.0 FTE). The caseload carried by this position will be spread among the remaining therapists. In addition, 0.5 FTE is transferred from the Mental Health Bureau to the Substance Abuse Bureau.
- ↓ Non-personnel expenditures decrease due to a service reduction that eliminates a contract that provides specialized psychological testing for substance abuse clients (\$30,000). In addition, non-personnel expenditures decrease as a result of decreased state and federal

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funding for specific HIV and substance abuse treatment projects. These decreases are partially offset by utility cost increases based on anticipated rate adjustments, and non-discretionary contractual increases.

- ↓ Nonprofits are decreased primarily due to the loss of HIV prevention funding and to the completion of a five-year grant cycle for federal funds associated with residential treatment. The nonprofit contracts funded by both are reduced accordingly. Other nonprofits received increases comparable to the increases given to existing County programs for personnel and non-personnel budgets.
- ↑ State share is increased by additional funds expected for residential treatment.
- ↓ Federal grants are reduced primarily by the loss of HIV prevention funding, and by expiration of the five-year federal Center for Substance Abuse Treatment (CSAT) grant at the end of the first quarter of FY 2009.

**PERFORMANCE MEASURES**

**Adult Outpatient Services**

Critical Measures	FY 2004 Actual	FY 2005 Actual	FY 2006 Actual	FY 2007 Actual	FY 2008 Estimate	FY 2009 Estimate	FY 2009 Target
Percent of clients surveyed who reported satisfaction with services received	90%	95%	84%	82%	90%	90%	90%
Percent of clients who report improved functioning as a direct result of services received	96%	92%	93%	93%	97%	97%	97%
Clients receiving outpatient services	915	765	735	777	800	800	800

Supporting Measures	FY 2004 Actual	FY 2005 Actual	FY 2006 Actual	FY 2007 Actual	FY 2008 Estimate	FY 2009 Estimate	FY 2009 Target
Of clients discharged, number/percentage of clients who met most or all of treatment plan goals	375/65%	403/70%	380/70%	391/71%	400/70%	400/70%	400/70%
Number of clients who achieve and maintain abstinence during treatment	349	372	317	331	300	300	300
Clients receiving methadone services	25	30	28	20	22	22	22
Individuals enrolled in alcohol/drug education courses	496	360	335	202	350	250	250

- Not all clients receive full treatment services. All supporting measures are subsets of the total number of clients receiving outpatient services.

**Case Management and Contractual Substance Abuse Services**

Critical Measures	FY 2004 Actual	FY 2005 Actual	FY 2006 Actual	FY 2007 Actual	FY 2008 Estimate	FY 2009 Estimate	FY 2009 Target
Number/Percentage staying in RPC detox three or more nights	298/84%	315/89%	327/88%	319/90%	327/84%	320/89%	328/90%
Number/Percentage of RPC detox clients discharged who were provided further treatment	149/55%	158/60%	140/52%	115/43%	180/60%	125/50%	137/55%
Number/Percentage of residential treatment clients discharged who successfully completed residential treatment	74/67%	70/68%	55/65%	54/63%	56/68%	59/68%	61/70%

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Critical Measures	FY 2004 Actual	FY 2005 Actual	FY 2006 Actual	FY 2007 Actual	FY 2008 Estimate	FY 2009 Estimate	FY 2009 Target
Number/Percentage of persons discharged who successfully completed Transitional living services	22/63%	34/71%	27/73%	10/60%	27/73%	20/71%	21/75%
Supporting Measures	FY 2004 Actual	FY 2005 Actual	FY 2006 Actual	FY 2007 Actual	FY 2008 Estimate	FY 2009 Estimate	FY 2009 Target
Clients served annually in case management services	216	274	250	195	280	280	285
Average length of stay in Residential Program Center (RPC) detox (days)	8	9	9	9	10	10	10
Total number of clients placed in residential treatment	132	122	108	115	103	108	110
Total number of clients placed in a recovery focused transitional living program	47	61	42	33	40	40	42
Number of client admissions: RPC- Social Setting Detox	354	354	370	354	390	360	365
Number of client admissions: Medical detoxification	0	1	2	0	1	1	1
Percent of clients surveyed reporting satisfaction with services received	89%	86%	85%	79%	85%	86%	89%
Percent of clients reporting improved functioning as a direct result of services received	94%	83%	88%	84%	88%	88%	89%

- Detox is for 3 to 14 days duration; the longer an individual stays the more likely a link with follow up treatment.
- All adults in need of and requesting residential treatment were placed in programs.
- Completion rates reflect clients who have achieved most or all of the goals of their treatment plan. The figures shown reflect outcome measures for clients who completed their treatment programs and are a subset of the number of clients in treatment.
- The projected decrease in residential treatment services in FY 2008 is the result of a \$120,000 decrease in funding; the decrease in clients placed in a transitional living program in FY 2007 was the result of the closing of the Demeter II program.
- The decrease in clients served by case management services in FY 2007 was due to staff vacancies.

Detention Facility Jail-based Services – ACT UNIT

Critical Measures	FY 2004 Actual	FY 2005 Actual	FY 2006 Actual	FY 2007 Actual	FY 2008 Estimate	FY 2009 Estimate	FY 2009 Target
Number/Percentage of participants completing program successfully	64/84%	61/67%	88/85%	84/85%	80/76%	80/76%	85/81%
Total clients served	76	91	103	99	105	105	105
Supporting Measures	FY 2004 Actual	FY 2005 Actual	FY 2006 Actual	FY 2007 Actual	FY 2008 Estimate	FY 2009 Estimate	FY 2009 Target
Number /Percentage of male participants completing program	50/93%	47/69%	62/90%	60/90%	65/87%	65/93%	65/93%
Number/Percentage of female participants completing program	14/64%	14/61%	26/76%	24/75%	25/71%	25/71%	25/71%
Number placed in follow-up treatment (Arlington residents only)	10	11	25	15	30	20	20

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Supporting Measures	FY 2004 Actual	FY 2005 Actual	FY 2006 Actual	FY 2007 Actual	FY 2008 Estimate	FY 2009 Estimate	FY 2009 Target
Client rating of program (based on 5 point scale) on satisfaction survey completed by inmates	4.6	4.0	5.0	4.5	5.0	5.0	5.0
Male clients served	54	68	69	67	75	70	70
Female clients served	22	23	34	32	35	35	35
Number of inmates assessed using High Intensity Drug Trafficking Areas (HIDTA) funded case management services	110	105	139	160	165	165	165

**Detention Facility Jail-based Services – Mental Health (MH) Unit**

Critical Measures	FY 2004 Actual	FY 2005 Actual	FY 2006 Actual	FY 2007 Actual	FY 2008 Estimate	FY 2009 Estimate	FY 2009 Target
Number of clients discharged with follow-up care in the community	112	119	N/A	105	100	100	100
Percent of Arlington clients receiving Mental Health, Intellectual Disability, or Substance Abuse Services 30 days after discharge	N/A	N/A	N/A	N/A	75%	75%	80%
Total number of clients served (MH case management unit)	673	700	870	683	675	675	675

Supporting Measure	FY 2004 Actual	FY 2005 Actual	FY 2006 Actual	FY 2007 Actual	FY 2008 Estimate	FY 2009 Estimate	FY 2009 Target
Client rating of program (based on 5 point scale) on satisfaction survey completed by inmates	N/A	N/A	N/A	4.4	4.0	4.5	4.5