3. Alcohol/Drug Care Services - Waterfront Recovery Services

CITIZEN’S ADVISORY COMMITTEE ON MEASURE Z EXPENDITURES

The Advisory Committee meets on each Wednesday in March to review applications and will make recommendations to the Humboldt County Board of Supervisors in April.

APPLICATION FOR FUNDING

Agency Name: Alcohol/Drug Care Services, Inc. / Waterfront Recovery Services

Mailing Address: 2413 2nd Street Eureka, CA 95501

Contact Person: John B. McManus
Title: Executive Director

Telephone: (707) 269-9590 ext.204 E-mail address: jbmadcsdirector@gmail.com

1. AMOUNT OF MEASURE Z FUNDING REQUESTED FOR FY 2020-2021: $438,000

2. ENTITY TYPE -- Please check appropriate box.

   a. Humboldt County Department
   b. Contract Service Provider to Humboldt County [x]
   c. Local Government Entity
   d. Private Service Provider
   e. Non-Profit Service Provider [x]
   f. Other, Describe: ________________________________

3. Describe how the scope of your proposal fits the intent of Measure Z. Specifically, how will it maintain and improve public safety and essential services, as described on the previous page?

   Access to substance use disorder (SUD) treatment is critical to the safety and wellbeing of our community. We have had a fantastic and fruitful partnership with Eureka Police Department bringing those suffering from homelessness, addiction, and co-occurring mental health issues to our doors and providing detoxification and residential treatment services when requested. The majority of crimes committed in our County are drug related. Arrest and incarceration are not a remedy to this situation, stabilization and treatment are. At Waterfront, we work with patients/residents to instill a strong foundation for long term recovery and positive reintegration with the community.

4. Please provide a brief description of the proposal for which you are seeking funding.

   Alcohol Drug Care Services, Inc. (ADCS) is requesting $438,000 in funding for fiscal year 2020/2021. This funding will be used to provide substance use disorder (SUD) treatment for those most at risk in our community at Waterfront Recovery Services (WRS) in Eureka, CA. We would be grateful for even partial funding of this request.
The requested funding will be used for both medically managed detoxification services and residential treatment services for those who are suffering from SUD and homelessness in Humboldt County. The funding will provide treatment for 4 patients per day (4 beds set aside) in our detoxification program, and for 4 patients per day (4 beds set aside) in our residential treatment program.

6. How have you developed a plan for sustainability, including diversification of funding sources, for your proposal to carry on without reliance on future Measure Z funds?

Waterfront Recovery Services was granted Drug Medi-Cal Certification in April of 2019, and certification was backdated to April of 2018. We now find our program in jeopardy due to continual delays in implementation of the Drug Medi-Cal –Organized Delivery System (DMC-ODS). Partnership Healthplan of California, who will be the third party administrator of the Medi-Cal funds and overseeing the DMC-ODS in the Northern Region, is working hard for a go live date before the beginning of the new fiscal year, but there are continual delays at the State level. Waterfront Recovery Services seeks contingency funding to provide service in the event that additional State or Federal approval delays in the implementation date occur.

Though the primary mission of Waterfront Recovery Services is to serve low /no income and homeless SUD clients in Humboldt County, our sustainability plan also includes broadening our payer mix. Our broader financial plan consists of having 15-20% of our clientele funded through private insurance or private pay and having our doors open to all in the community in need.

To date, we have contracted with the following private insurance companies and 3rd party administrators:

- Magellan Health
- Anthem Blue Cross
- TARP
- Humboldt IPA
- Tri-West
7. If this request is for the continuation or expansion of an existing program/service, what is the current source of funding for that program/service?

Current sources of funding include:

- Humboldt County Department of Health and Human Services (2 contracts)
- Humboldt County Probation Department
- Humboldt County Child Welfare Services
- Humboldt County Drug Court
- United Indian Health Services

Also includes:

- Magellan Health
- Anthem Blue Cross
- TARP
- Humboldt IPA
- Tri-West
- Private Pay

8. If you are awarded Measure Z funds, how do you plan to leverage these funds to secure additional grants, contributions or community support?

The funding requested is simply a stop-gap measure to maintain operations and provide service to those most in need in the community until implementation of the DMC-ODS in our County.

9. Will this proposal require new or expanded activity on the part of another entity to be fully functional and effective? If so, name that entity and describe what that participation would look like.

It will not.

10. Are there recurring expenses associated with this application, such as personnel cost? Please check yes or no: □ yes □ no

If you checked yes, detail those expenses here:
REQUIRED ATTACHMENTS — Be sure to include the following with your application

Proposal Narrative: Brief description of your request for Measure Z funds — Please explain how it is an essential service or improves public safety. (one page maximum)

Prior Year Results: If your request is a continuation of a program funded with Measure Z in prior fiscal years, please provide the results of implementation. (one page maximum)

Program Budget: Please utilize the template provided on the following pages. This will need to be updated if your agency is approved for funding.

I declare under penalty of perjury under the laws of the State of California that the above statements and all attachments are true and correct

DATE: 2/18/2020

SIGNATURE:

SUBMIT YOUR COMPLETE APPLICATION TO:

Humboldt County Citizens' Advisory Committee on Measure Z Expenditures
c/o County Administrative Office
825 Fifth Street, Suite 112
Eureka, CA 95501-1153
Waterfront Recovery Services Proposal Narrative

Alcohol Drug Care Services, Inc. (ADCS) is requesting $438,000 in funding for fiscal year 2020/2021. This funding will be used to provide substance use disorder (SUD) treatment for those most at risk in our community at Waterfront Recovery Services (WRS) in Eureka, CA. We would be grateful for even partial funding of this request.

WRS operates as a collaborative program with multiple partners including: Eureka Police Department Humboldt County Probation, AOD, Mental Health, Child Welfare, Local Tribal Communities, Open Door Community Health Centers, and St Joseph’s Hospital. We use an integrated approach to help empower and heal with multiple evidence based curriculum, as well as medical, psychological, and social model approaches, including medication assisted therapy.

WRS works hand in hand with the extraordinary Eureka Police Department CSET team and have had great success in getting those most in need the detoxification and residential SUD treatment services they need for stabilization. Officer Swanson in particular has been a godsend to those suffering from addiction, homelessness, and mental health issues in the City of Eureka. The relationships he has forged with those on the streets, and the trust they have in him is nothing short of extraordinary.

Substance use and addiction are an inseparable component of crime and homelessness in our area. WRS was designed to meet the many needs of those most at risk and those that put others most at risk in our community. Every addict that is stabilized and rehabilitated is one less person committing crimes, driving drunk, or neglecting their children in our community. Every parent stabilized and rehabilitated drastically improves their children’s chance at a productive and trauma free life. The majority of crimes committed in our County are drug related. Arrest and incarceration are a temporary remedy to this situation, stabilization and treatment a longer lasting one. At WRS, our goal is to stabilize, rehabilitate, and have our clientele reintegrate with the community in a healthy and productive way.

WRS, a 56 bed medically managed detoxification and longer term residential treatment program, opened its doors on November 1, 2017. We are an Incidental Medical Services and Drug Medi-Cal certified SUD program but are unable to submit claims at this time. We now find our program in jeopardy due to continual delays in implementation of the DMC-ODS. Partnership Healthplan of California, who will be the third party administrator of the Medi-Cal funds and overseeing the DMC-ODS in the Northern Region, is working hard for a go live date before the beginning of the new fiscal year, but there are continual delays at the State level. Waterfront Recovery Services seeks contingency funding to provide service in the event that additional State or Federal approval delays in the implementation date occur.
3. Alcohol/Drug Care Services-Waterfront Recovery Services

## ATTACHMENT II - EXHIBIT E

**Budget**

**Waterfront Recovery Services/ADCS**

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3. Alcohol/Drug Care Services-Waterfront Recovery Services
### ATTACHMENT II - EXHIBIT E
Budget
Waterfront Recovery Services/ADCS

**Invoice Date:** 2/6/20

**Invoice Period:** Fiscal Year 2020-2021

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**Total Transportation/Travel Costs:** 0

| **E. Fixed Assets** | | | |
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| Title: | | | |
| Description: | | | |

**Total Other Costs:** 0

**Invoice Total:** 438,000.00

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3. Alcohol/Drug Care Services-Waterfront Recovery Services
Measure Z #’s 2017-2018 (last year we received funding)

November – December 2017
- Detox: 21 Successful completion: 48%
- RTC: 11 Successful completion: 56%
- Both: 22 Successful completion: 64%

January – March 2018
- Detox: 4 Successful completion: 75%
- RTC: 1 Successful completion: 100%
- Both: 3 Successful completion: 33%

April 2018
- 16 residents were served – 13 in detox and 3 in RTC
- 54% (7) of those served in detox completed successfully and 46% (6) left AMA
- One resident from detox was discharged for medical reasons.
- The average length of stay for those who successfully completed detox was 6.43 days and the average length of stay for those that left AMA was 1.67 days.
- The 3 residents that received RTC level of care all successfully graduated and one of then went on to have a healthy baby that did not require treatment for neonatal abstinence syndrome. The average length of stay for these 3 residents was 54 days.

May 2018
- 15 residents were served – 14 in detox and 1 in RTC
- 58% (7) of those served in detox completed successfully and 42% (5) left AMA. There were two clients discharged from detox administratively and one for medical reasons.
- The average length of stay for those who successfully completed detox was 6 days and the average length of stay for those that left AMA was 2.4 days.
- One resident received RTC level of care and successfully completed 27 days.

June 2018
- 12 residents were served – 12 in detox and 2 of them stayed for RTC, one is still here
- 75% (9) of those served in detox completed successfully and 25% (3) left AMA.
- The average length of stay for those who successfully completed detox was 8 days and the average length of stay for those that left AMA was 1 day.
- Two residents received RTC level of care, one successfully completed after 37 days of RTC care.

July 2018
- 17 residents were served – 14 in detox and 3 in RTC
- 54% (8) of those served in detox completed successfully and 29% (4) left AMA
- One detox resident was discharged administratively and one detox resident was discharged for medical reasons.
- 67% (2) of those served in residential completed successfully with one AMA discharge from RTC.
- The average length of stay for those who successfully completed detox was 5.9 days and the average length of stay for those that left detox AMA was 2.8 days.
- The average length of stay for the three residents in RTC was 30.7 days.

August 2018
- 15 residents were served – 13 in detox and 2 in RTC
- 85% (11) of those served in detox completed successfully and 15% (2) left AMA.
- The average length of stay for those who successfully completed detox was 7.4 days and the average length of stay for those that left AMA was 4.5 days.
- Two residents admitted to detox successfully transitioned to residential.

September 2018
- 14 residents were served – 12 in detox and 2 in RTC, one is still here
- 75% (9) of those served in detox completed successfully and 17% (2) left AMA. One resident left detox due to medical reasons.

October 2018
- 16 residents were served – 11 in detox and 5 in RTC
- 91% (10) of those served in detox completed successfully and 1 left AMA
- 80% (4) of those served in residential completed successfully with one medical discharge.

November 2018
- 16 residents were served – 10 in detox and 6 in RTC
- 80% (8) of those served in detox completed successfully with 2 individuals leaving AMA and 1 administrative discharge
- 83% (5) of those served in residential completed successfully with one medical discharge.

December 2018
- 23 residents were served – 16 in detox and 7 in RTC, with one individual still in-house.
- 69% (11) of those served in detox completed successfully with 2 individuals leaving AMA and 3 administrative discharges
- 67% (4) of those served in residential completed successfully and 2 were administratively discharged
- The average length of stay for those who successfully completed detox was 6.3 days and the average length of stay for those that left AMA was 0.5 days.
- One resident left residential AMA. One completed detox successfully and transitioned into residential and still remains there at the time of this report.

*RTC = residential treatment, AMA = against medical advice, ASA = against staff advice