City of Lawrence Outside Agency Annual Report For Calendar Year 2017

Reports on activity should be submitted electronically to Danielle Buschkoetter, at <u>dbuschkoetter@lawrenceks.org</u> by Thursday, February 15th 2018 at 5:00pm. For the following questions please refer back to your <u>2017 application for funding</u>.

Reporting Period: Calendar Year 2017

Agency Name: DCCCA First Step at Lake View

1. Refer to the program in which your agency received funding; provide a participant success story that helps demonstrate the accomplishments of the program.

"Lisa" was referred to First Step at Lakeview by a local community agency. She participated in the full continuum of available treatment services, including short term residential and intensive outpatient with supportive housing. Lisa reported a great deal of anxiety, past trauma, and low self-esteem as issues that influenced her substance use. She participated in both group and individual sessions throughout her treatment at First Step and successfully completed residential, outpatient and aftercare services. Lisa did experience relapse following her transition from residential treatment, however she reported that to her counselor immediately, enabling her to process through the relapse and make choices that supported her continued recovery. Lisa obtained employment while engaged in treatment services and has remained with this employer. She lives independently in stable housing. Lisa reports she continues to be actively involved in the local recovery community including having a home group and sponsor with whom she works the 12 steps.

2. Refer to your 2017 application for funding; provide a <u>brief</u> narrative of the activities funded with City funds.

First Step at Lake View provided non-medical detox, short term residential, intensive outpatient and outpatient substance use disorder treatment services for women, pregnant women, and women with small children in 2017. The extensive array of services focused not only on their substance use, but incorporated an integrated continuum including physical and mental health care; domestic violence and sexual assault interventions; case management for housing, employment and other social services; and an array of community based support strategies incorporating exposure to persons with lived experience in recovery. Children living with their mothers while in treatment benefited from First Step's licensed child care center and referrals to local early childhood service organizations.

Details about the types of services offered reflects:

- 91 women stabilized in non-medical detox.
- 407 women participated in the short term residential program.
- 94 women remained after residential in the intensive outpatient program with supportive housing.
- 34 women received aftercare support in outpatient groups.
- 3. Refer to your 2017 application for funding; provide <u>specific</u> detail (use supportive documents, if needed) to demonstrate what progress was made toward your proposed outcomes.

The following outcomes were identified in the 2017 funding application. Annualized results are offered along with detailed analysis of progress and barriers to achieving those outcomes. Data was gathered from DCCCA's electronic medical record, client satisfaction surveys, and funder data reports.

Outcome	Target	Actual
Women served annually.	450	407
Children living with their mothers while in treatment.	50	40
Percentage of uninsured women served.	50%	66%
Women will report a decrease in substance use at program completion.	85%	97%
Women and women with children will have safe, supportive living conditions.	80%	62%
Women will be employed at treatment completion.	60%	15%
Women will successfully complete treatment.	60%	66%

<u>Numbers Served</u> – Licensed treatment programs are required to maintain staff to client ratios according to state standards. First Step experienced a therapist vacancy during the first four months of the calendar year. That vacancy required a reduction in client capacity, thus impacting the total number of women served in 2017. The staffing team has been consistent in numbers since the summer. This also impacted the number of children that could be admitted with their mothers, however First Step served 48% more children in 2017 than in 2016.

<u>Employment and Safe Housing</u> - The profile of women involved in treatment continues to reflect the complex needs of individuals with substance use disorders. A growing number of our clients remain precariously housed after treatment, meaning they do not live independently or dependently on a permanent basis. Rather, these clients live at Lawrence Community Shelter, Willow Domestic Violence Center, or are transient among friends and family. Access to the limited low income housing options is exacerbated by personal barriers experienced by many in treatment. These barriers include criminal and poor credit histories that make them ineligible for many housing options. DCCCA continues to work closely with community partners, including the Lawrence Douglas County Housing Authority and local Oxford Houses to facilitate options for women leaving our services.

The employment percentage is lower than we believe accurate data would reflect. We are reviewing our discharge documentation workflows to ensure we are capturing timely and accurate information. We do believe, however, that full or part time employment for our client population remains difficult. Personal challenges, including criminal backgrounds and poor employment histories create barriers to accessing living wage opportunities. A growing percentage of women we serve have chronic physical and mental health issues that make them eligible for temporary or permanent disability benefits in lieu of working. The DCCCA team continues to work closely with our Americorp member, Kansas Works, and partnering employers to increase employment options.

4. Refer to the line-item budget provided in your 2017 application for funding; is this accurate to how your allocation was actually spent? If no, what changed and why?

The 2017 allocation was used in full to support designated personnel costs. The Peer Support Specialist was vacant for a period of time, however other staff positions were reallocated to perform similar functions, ensuring continuity of treatment services.