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TWIN COUNTY RECOVERY SERVICES, INC. 2019 Report

Greene Co Legislature

Twin County Recovery Services, Inc. began delivering chemical dependency services in Greene County in 1981. We began with a 1.5 FTE information and referral center. Today we employ approximately 34 people in our Greene County Programs. I will outline the different programs that TCRS operates and tell you a bit about them.

Greene County Out-Patient Clinic

The Out-Patient Clinic is licensed and overseen by our State Office of Alcoholism and Substance Abuse Services in Albany, NY. They provide regulatory guidance, licensing and have provided some funding for our Clinic. The year of 2012 they will provide no State-Aid funding as we have become self-sufficient in 2011. Funding that Greene County has provided for many years will also be discontinued from this Program and given to the Prevention Program which has be under-funded for many years.

The Clinic provides evaluation, consultation, individual and group counseling to those persons in the community referred for an alcohol/substance abuse problem. Our referral sources are as follows:

Greene County Department of Social Services
Greene County Probation Department
Greene County Youth and Aging Bureau
Greene County Schools
NYS Parole
Impaired Driver Program
NYS Department of Motor Vehicles
Greene County Court System
Greene County Physicians
Columbia Memorial Hospital
Greene County Mental Health Clinic
Other rehabilitation programs throughout NYS
Family and Self Referrals

The average number of unique individuals seen in one year is approximately 450. The average number of units of service that our Staff produces annually is 12,000. We have strong working relationships with our referral sources and share necessary information with an appropriate Consent for Release.

The past few years we have seen a significant increase in adolescent referrals with serious chemical dependency problems. We work with children 12 y.o. and up at our Clinic and have a designated youth counselor to provide group and individual counseling. Problems seem to be starting at a younger age and are more severe than they have ever been with a lot of dangerous multi-drug use.

The Clinic has a Clinical Director, Counselors, and support staff. Administrative Staff is located at a separate site and employs persons who serve both Columbia and Greene Counties. The Clinic is also monitored by a Medical Director as per OASAS regulations. The Clinic has enjoyed receiving full, 3 year re-certifications from our State Office as a result of unannounced site visits by their staff.

One of the Staff previously stationed at our Clinic is now located full-time at the Department of Social Services providing much needed screening services for their applicants. This is for people applying for services.

We were able to have one of our substance abuse counselors embedded in the Child Protective Services Unit, (Department of Social Services), to assist their team with identification and referral of those persons impacted by substance abuse.

RESIDENTIAL SERVICES

TCRS has a Men's Community Residence in Hudson and a Women's Community Residence in Catskill. I mention both because both are charged with priority admissions from Columbia and Greene County Residents as opposed to other Counties. The Men's Residence is called the Red Door and houses 13 men. The Women's Residence is called Riverside Recovery Residence and houses 12 women and up to 4 pre-school aged children at one time. This Residence is applying for an expansion with our State Office as we consistently have a waiting list and the current location is quite crowded.

We accept pregnant women into the Residence and have had many drug-free babies born over the past several years. They may keep their babies with them at the Residence.

While these clients are in Residence with our Programs, they must attend out-patient treatment, examine their educational objectives, learn life skills to assist in preventing relapse, and obtain employment, hopefully before discharge. They are also charged with taking care of any physical health issues as well as Mental Health issues. The length of stay for Residential Programs is usually between 6 to 12 months. Childcare is provided for the women with children while they attend treatment.

I have been trying for several years to relocate and expand our Women and Children's residential program. I found an ideal spot in the Town of Cairo, but the community was absolutely opposed to having it in their town. Some very angry people told me at a Town Board meeting to "take the residence and put it in Columbia County...we don't want it here!". So, I will continue to look for property. We continue to look for property.

PREVENTION PROGRAM

Greene County's Prevention Program has been in existence for many years and has been able to grow this past year due to assistance in funding from the Greene County Rural Health Network. This funding reduced every year by \$10,000., and the school picks up an additional \$10,000. We are not sure how long this arrangement will continue as schools may have difficulty absorbing more of the cost every year. We ran out of space at our Clinic building this past year and have moved the prevention program to 388 Main Street. Because of the Dyson Grant ending this past year, we have had to lay off one prevention worker.

TCRS has also been the recipient of federal funding to create an off-site program called Greener Pathways. This Program allows staff to work in the community and is to especially target opioid problems.

TCRS was also fortunate enough to employ an Addiction Recovery Coordinator who organizes and promotes all opioid information in both Columbia and Greene Counties. This effort is funded equally by each County and we are very pleased it now exists.

What I have mentioned are the formal programs and services that TCRS provides. Throughout any given day we receive calls from many people looking for referrals for detox, rehabs and much other information that we disseminate as a matter of doing business.

Respectfully submitted,

Beth Schuster, CASAC, NCACII

Executive Director