



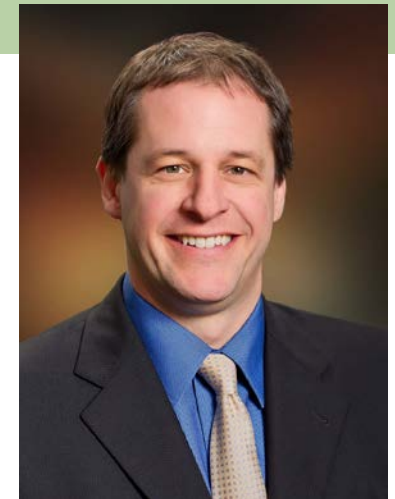
Northwest (HHS Region 10)

ATTC Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



Northwest ATTC presents
**Best Practices in Recovery
Oriented Systems of Care: The
Case of Pioneer Human Services**

Steve Woolworth, PhD
Vice President, Treatment & Re-entry
Services, Pioneer Human Services



ADAI

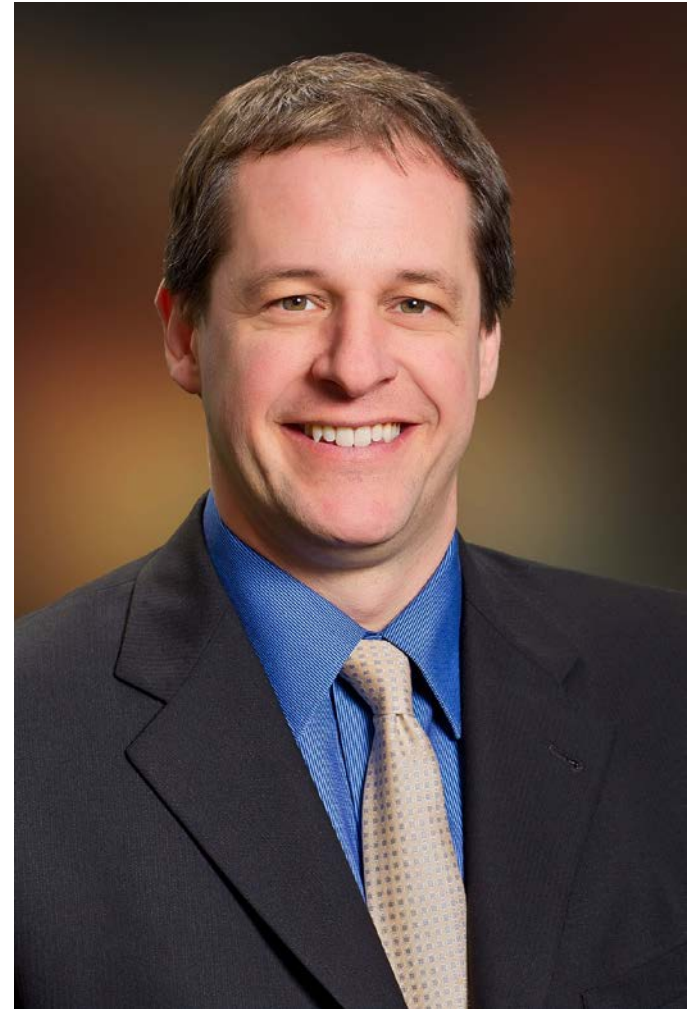
ALCOHOL &
DRUG ABUSE
INSTITUTE



Today's Presenter

Dr. Steve Woolworth

- Vice President, Treatment & Re-entry Services at Pioneer Human Services
 - Services for people overcoming challenges with criminal histories, chemical dependency, and mental illness
- Experience in research, policy, and practice
 - Behavioral health
 - Corrections
 - Education
 - Public health
 - Community-based services





P I O N E E R
H U M A N S E R V I C E S
A C H A N C E F O R C H A N G E

Best Practices in Recovery Oriented Systems of Care:
The Case of Pioneer Human Services in Washington State

May 30, 2018

Presentation Overview

Best Practices in Recovery Oriented Systems of Care

- Pioneer Human Services
- 1960s: Envisioning a Recovery Oriented System of Care
- 1970s-90s: Growing the Multi-Service Social Enterprise Model
- 2000s: The Scaling of System(s) of Care (1963-2013)
- 2018: Toward A 21st Century Recovery Oriented System of Care
- Diversion Services Continuum of Care

~Pioneer Human Services~

Pioneer Human Services

Organizational Profile

- Social enterprise organization founded in 1963
 - 501©3 mission-driven organization that marries social services with business and commercial ventures to achieve social impact and financial sustainability
 - *...provide individuals with criminal histories the opportunity to lead healthy, productive lives.*
- Based in Seattle but operate in 50+ locations across WA. State
- Serve Approx. 10,000 individuals per year
- Approx. 1,000 employees
- Annual revenue in excess of \$80 million

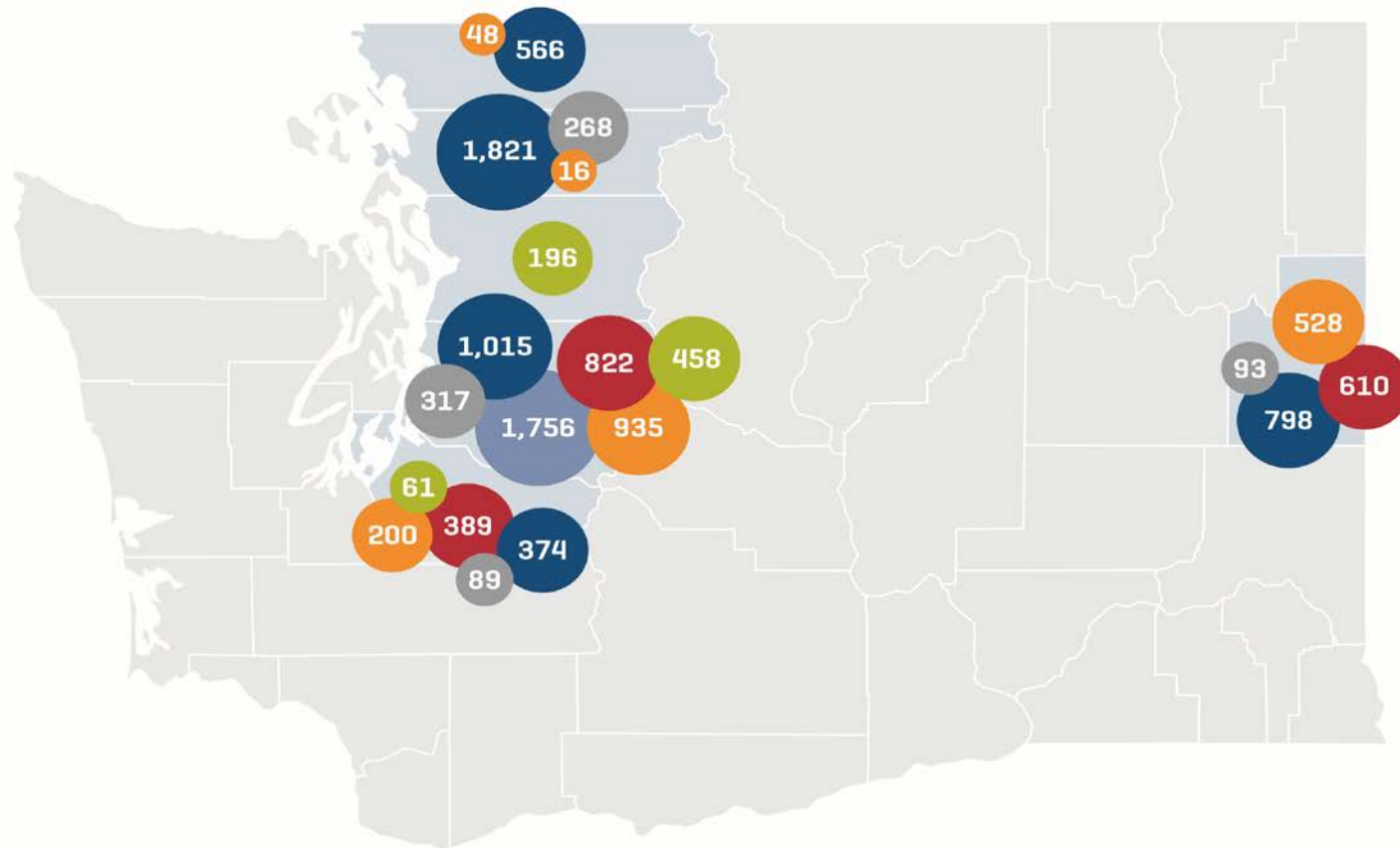


Pioneer Human Services Continuum of Supports

- Multi-Service Organization: Serve individuals across an array of different service types and models including:
 - In-custody behavioral health treatment
 - Residential reentry centers
 - Crisis, diversion and triage services
 - Detox and sobering centers
 - Residential and outpatient substance use disorder programs
 - Residential co-occurring and outpatient mental health
 - Community residential programs for youth and young adults
 - Parental and in-home counseling
 - Job readiness and pre-apprenticeship programs
 - Transitional, service enriched and permanent low-income housing



Number of People Served Across Washington State



● Treatment ● Sobering ● Housing ● Residential Reentry ● Job Skills Training ● Juvenile

Pioneer Enterprises

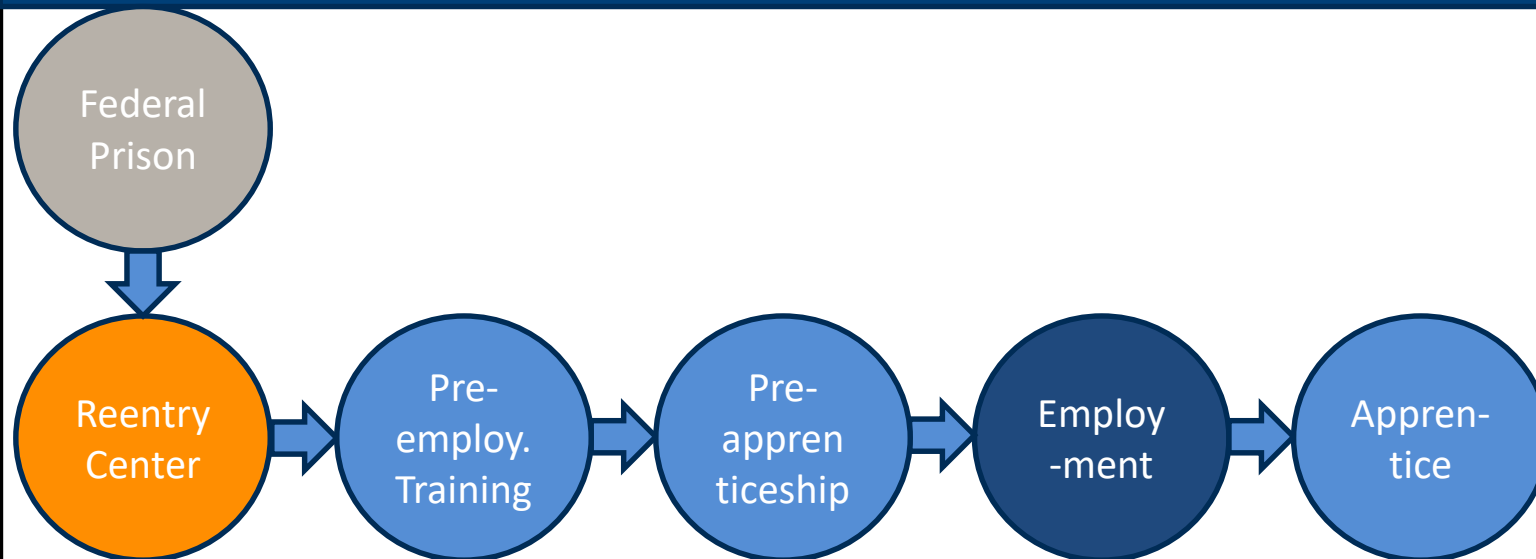
- Pioneer operates several commercial businesses including:
 - Pioneer Industries: Over 110,000 square feet of manufacturing space across 3 plants in Seattle making products for the aerospace and commercial industries
 - Capabilities include:
 - Sheet metal fabrication, machining, water jet, finishing and assembly services, and screen printing
 - Products include:
 - 1.7 million airplane parts (exterior & interior) per yr.
 - Ship directly to production lines for 737, 747, 767, 777, 787 programs
 - Commercial kitchen and construction equipment
 - Benefits include:
 - Employment and training for clients (Approx. 175 employees)
 - Self-sustaining revenue
 - Stigma reduction
 - Food Services
 - Institutional kitchen providing over 1,000 fully cooked meals per day
 - Distribution Services



Individual needs determine path: Meet Abram



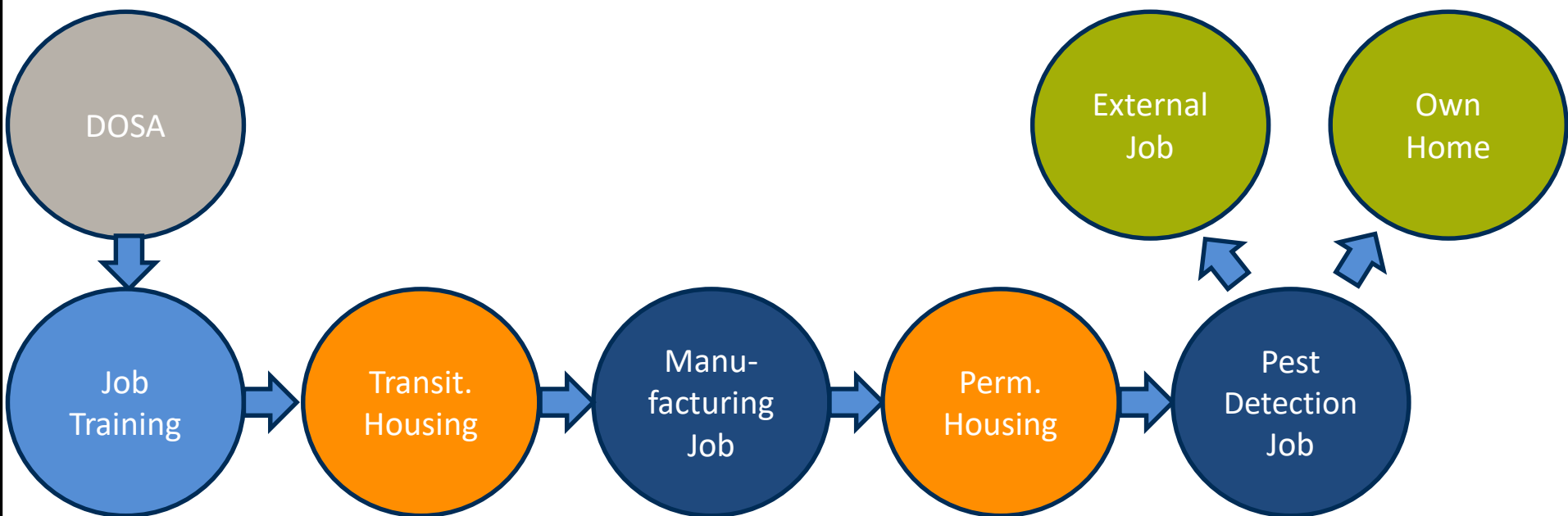
“When you are tired of something you need to stop. In prison I started to re-condition my brain that I needed to study and earn legal money. When Pioneer gave me a shot at the apprenticeship it all clicked – this is what I had been looking for. Now I had the chance to earn cash and move up in my life using my brains.”



Individual needs determine path: Meet Michele



“Pioneer helped me recover from drugs, provided me with safe and sober housing, and believed in me enough to train and employ me – even though I was a felon and recovering addict. They never gave up on me or stopped encouraging me. I learned to love myself again, forgive myself and I regained my dignity.”



~Envisioning a Recovery Oriented System of Care~

Pioneer Origins

Founded by Jack Dalton, a lawyer from a prominent family in Seattle.

- He struggled with alcoholism and was sent to prison for embezzlement in 1961.
- In Walla Walla Penitentiary, he learned many other men were struggling with alcohol and drugs
- Connected with an AA group from Seattle who sponsored meetings in the prison—started AA group at Walla Walla



Pioneer Founding

When Jack Dalton was released from prison, he returned to Seattle and opened Pioneer Fellowship House.

Pioneer thus started as a single halfway house in Seattle in 1963.

- 17 male residents
- Paid \$25 a week
- Were required to look for work
- Sobriety was required – most residents attended AA meetings

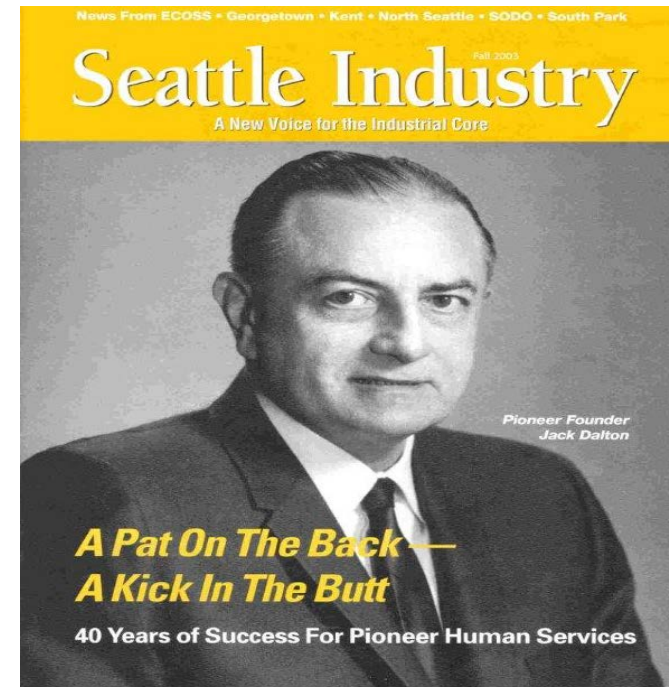


Pioneer Beginnings

Once housing with AA supports were initiated, the need for employment services quickly became apparent.

Even then many businesses wouldn't hire people with criminal records...

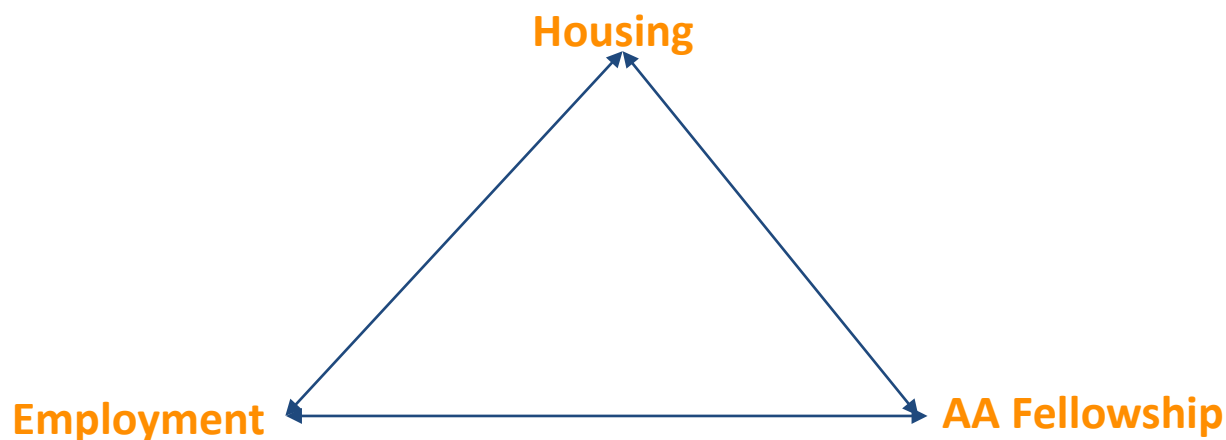
So Jack conceived of Pioneer Industries as a way to provide job opportunities for Pioneer's clients. In 1966 Jack applied and Pioneer was accepted as a member of the Boeing Philanthropic Workshop Program in 1966.



An Early Recovery Oriented System of Care

By the late 1960s the first iteration of Pioneer's recovery oriented system of care was thus envisioned and actualized upon three pillars:

- Housing upon release from prison
- AA meetings and fellowship
- Job training and employment through a sheltered workshop

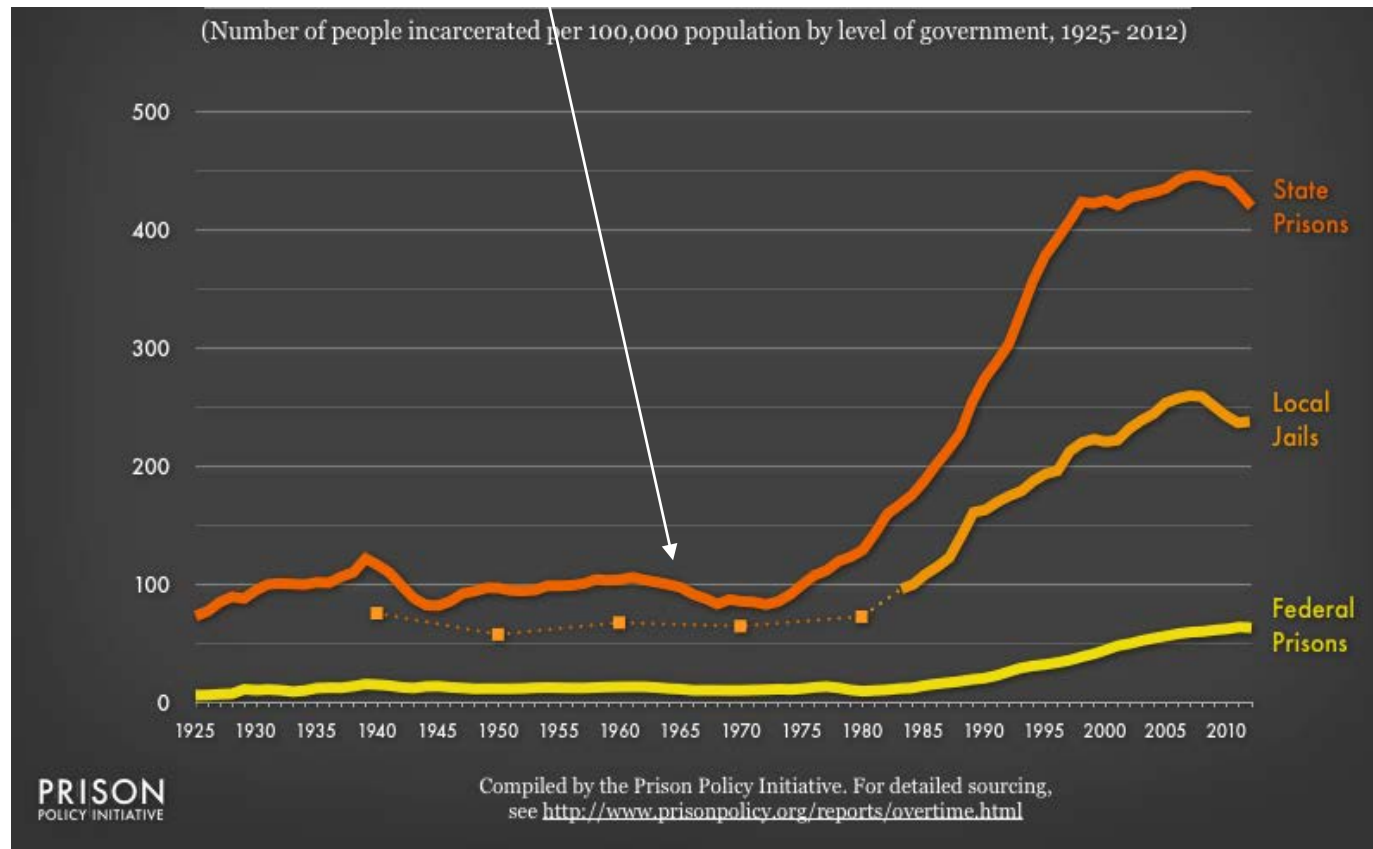


A Hand Up, Not a Handout....

Jack Dalton's vision was that people releasing from prison could become productive members of society if they had support to maintain sobriety, a roof over their head and a job.



A vision ahead of its time...



Turning the Corner

- The 1960s shifts in public policy drove non-profit service sector growth
 - 1962: White House Conference on Drug Abuse
 - Shift back toward addiction as a disease, away from punitive/law and order approach
 - 1963: Community Mental Health Act
 - Community mental health Centers
 - 1965: Social Security Act Amendments
 - Medicaid & Medicare
 - 1965: Housing and Urban Development Act
 - Expansion of federal housing programs
 - 1967: President's Commission on Law Enforcement Assistance and Administration
 - Funding of prison reentry halfway houses



~Growing the Multi-Service Social Enterprise Model~

The Expansion of Pioneer Services

- 1970s-1990s: Alignment to government funding and growth through service specialization
 - Work release and halfway houses
 - Residential treatment
 - Job training & employment
 - Juvenile justice programs
 - Clean and sober housing

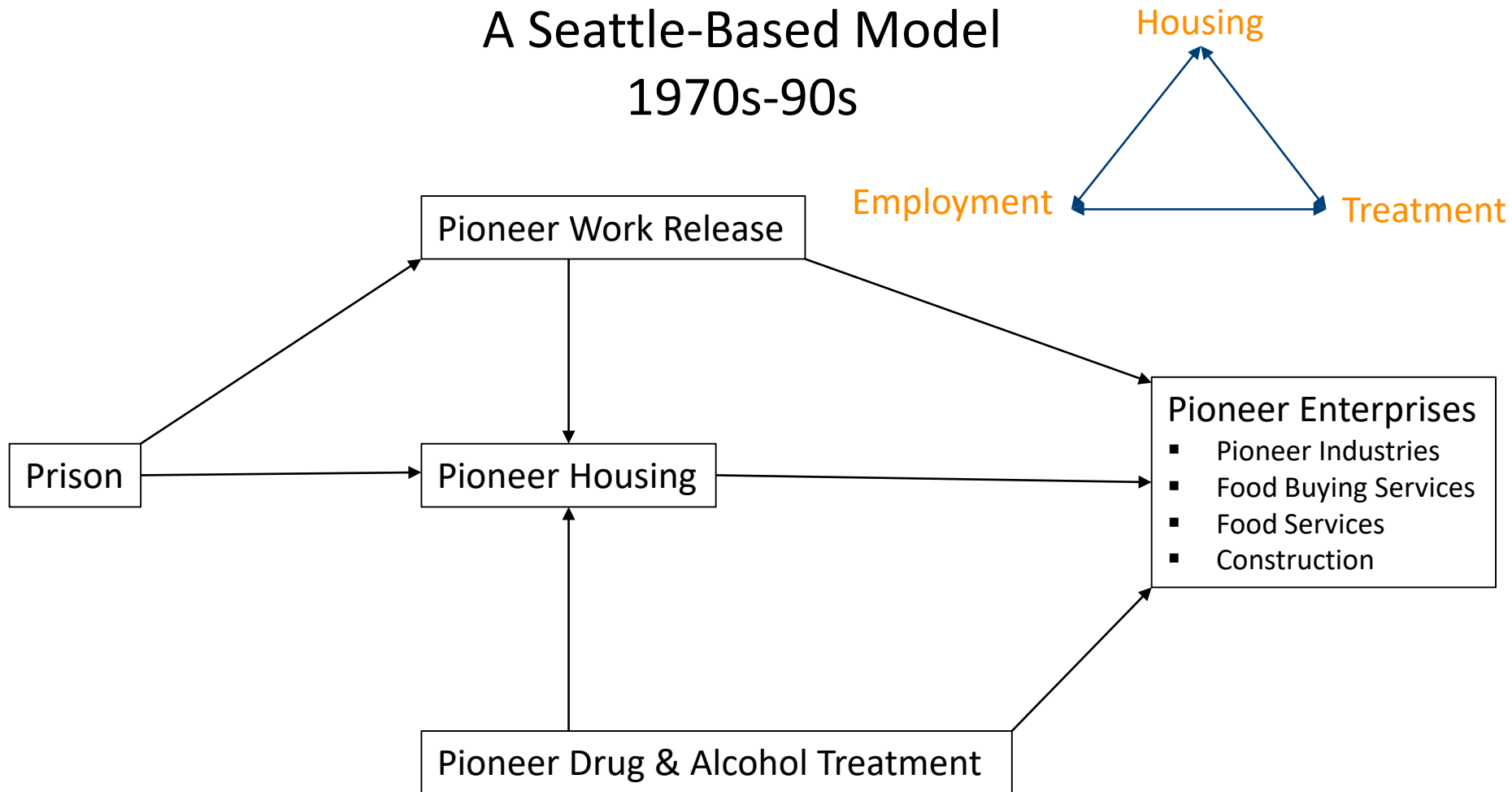


(Norm Chamberlain, Executive Director 1969-1984)



Community Reintegration

A Seattle-Based Model 1970s-90s



~The Scaling of System(s) of Care~
1963-2013

The Scaling of Government Funded Programs

50 Years of Growth

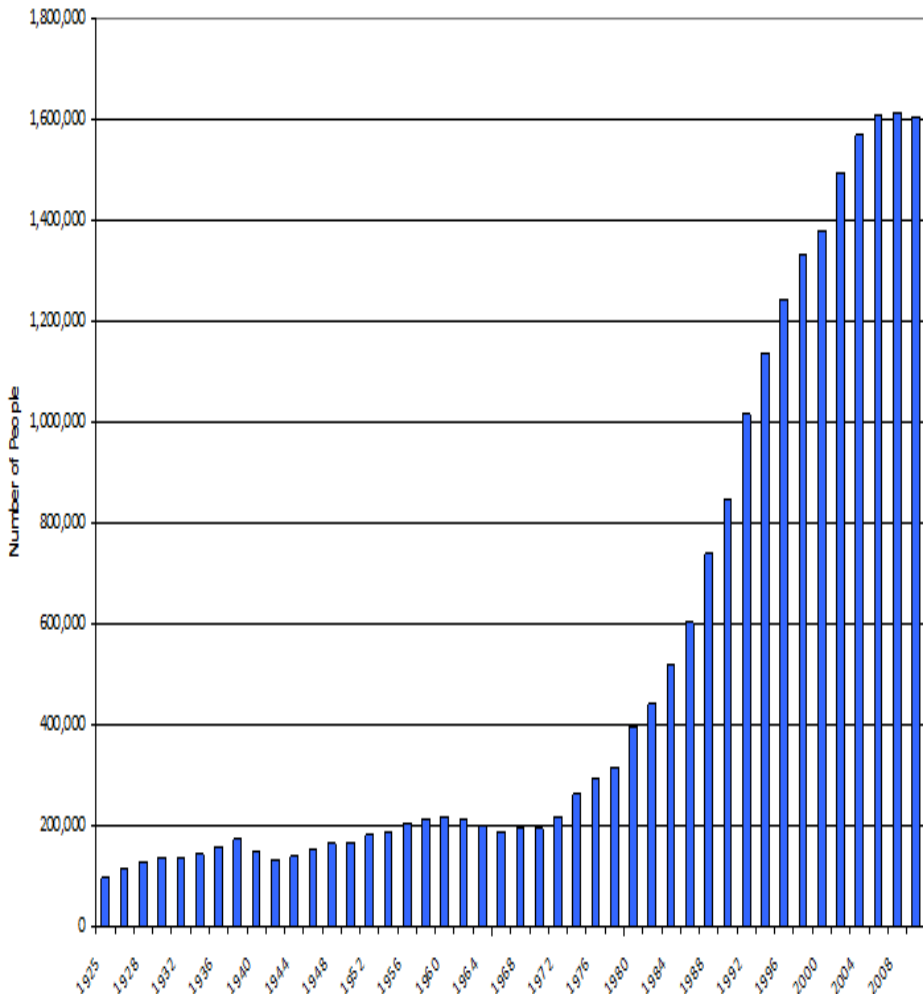
17 men in a single building to more than 10,000 men, women and youth in:

- Over 60 locations
- 1100 residential program beds
- Job readiness and training programs
- 750+ housing units
- Outpatient clinics

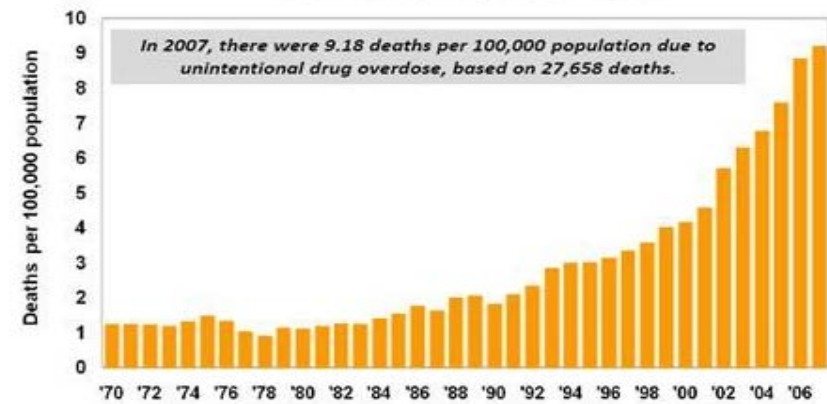


The Context Behind Pioneer Service Growth

State and Federal Prisoners
(1925-2010)

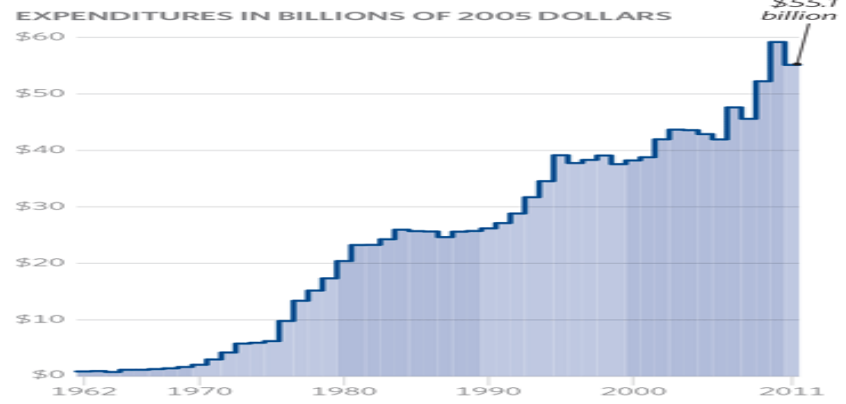


Unintentional Drug Overdose Deaths
United States, 1970-2007



Source: Centers for Disease Control and Prevention. *Unintentional Drug Poisoning in the United States* (July 2010).

Housing Assistance Near All-Time High



Source: Office of Management and Budget, *Historical Tables: Budget of the United States Government, Fiscal Year 2013*, 2012, Table 3.2, pp. 56 and 57, and Table 12.3, pp. 266 and 276.

The Context and Complexities of Growth

- Post 1960s government funding extended across institutional systems:
 - Criminal Justice (Courts and Corrections)
 - Mental health
 - Alcohol and Substance abuse
 - Homelessness continuum of care
 - Juvenile justice
 - Child welfare
- To address the following social problems:
 - Crime and recidivism
 - Addiction
 - Mental illness
 - Homelessness
 - Family crises and out-of-home placements



Contract Funding for Pioneer Rehabilitative Services

■ Federal

- Dept of Justice
- Dept of Health & Human Services
- Dept of Labor
- Dept of Housing & Urban Development
- Dept of Veteran Affairs
- Administrative Office of the Courts

■ WA State

- Dept of Corrections
- Dept of Social and Health Services
 - Behavioral Health Rehabilitation
 - Children's Administration
 - Juvenile Rehabilitation Administration

■ County

- Depts. of Human and Community Services
- Specialty courts
- Adult and Juvenile Detention
- Regional Support Networks



The Growth of the Pioneer Service Model

A Shifting System(s) of Care

1960s

- Local
- Privately Funded
- Undifferentiated Services
- Social Entrepreneurship



2000s

- Geographically Disperse
- Publicly Funded
- Differentiated Services
- Social Entrepreneurship & Professional

Differentiated Program Services & Categorical Funding

Residential reentry centers

Work release

Outpatient mental health treatment

Housing First

Low-income permanent housing

In custody treatment

Behavioral rehabilitation services

Subacute detox

Sobering center

Crisis and triage services

Transitional housing

Supportive housing for veterans

Outpatient substance abuse treatment

Residential SUD treatment

Involuntary commitment residential treatment

Clean and sober housing

Transitional residential services for unaccompanied and undocumented youth

Co-occurring residential program

Juvenile Basic Offender Training camp

Crisis residential Center

The Micro-Technologies of Differentiated Services

Mock interviewing Texas Christian University Criminogenic Thinking Scale UAS
Relapse prevention Level of Service/Case Management Inventory Interactive Journaling Reentry planning
Electronic monitoring Care coordination Trauma informed care
Discharge planning The Matrix Model Life Skills Women's Group
Twelve Steps Home visits Living in Balance Service enriched housing
Program for Assertive Community Treatment Motivational interviewing
Dialectical Behavior Therapy GAIN Short Screener Stages of Change
Independent living skills Criminogenic risk assessments Health Services
Mental health assessments Positive Parenting Program Thinking For A Change Aggression Replacement Training
On the job training Contingency Management Social service coordination
Peer Support Services Case management Substance Use Disorder assessments
Mentoring Permanent Supportive Housing Medication management
Moral Reconciliation Therapy Beck Depression Inventory Respite building
Parent Child Interaction Therapy Seeking Safety Medication Assisted Treatment Therapeutic communities
Treatment planning Massachusetts Youth Screening Inventory Parenting classes SafeCare Yoga
Achieving Your Potential

The Challenges of Service System Oversight

Contract Management and Fragmented Government Authority

- Compliance contracts
- Emphasis on service volume
- Limited and/or fragmented scopes of work
- Multiple data systems
- Legacy real estate

~Toward A 21st Century Recovery Oriented System of Care~

21st Century Recovery Oriented System(s) of Care

Pioneer's Evolving Program Service Architecture

- In custody behavioral health treatment
- Crisis/Diversion
 - Crisis/Triage
 - Subacute detox
 - Sobering Center
 - Diversion Center
- Residential Treatment
 - SUD treatment
 - Co-Occurring treatment
- Residential Reentry
 - Federal Bureau of Prisons
 - USPO & Pre-Trial
- Housing
 - Transitional
 - Service enriched
 - Low-income permanent
- Community Treatment (outpatient)
 - SUD Treatment
 - MH Treatment
 - PACT
 - Drug Court
- Youth & Young Adult
 - Behavioral rehabilitation services
 - Emergent placement Services
 - Diversion Services
 - Reentry Services
 - Transitional residential services
 - In-home parental counseling
- Community Services
 - Resource centers
 - Job readiness & pre-employment
 - Pre-apprenticeships
 - Case management

The Future is Here

The shifting landscape...

Diversion Services

- Specialty courts
- Harm reduction
 - Detox
 - Sobering

Criminal Justice Reform

Reentry Services

- Risk, need, strength based
- Responsive services

Private/Non Profit Workforce Development Partnerships

Population Health Reform

- Social determinants of health
- Whole person care
- Triple AIM (Integrated managed care and value-based purchasing)

Supportive and Affordable Housing Reform

- Coordinated entry
- Supportive Housing
- Service enriched housing

21st Century Recovery Oriented System(s) of Care

Key elements for CJ-involved populations

- Integrated continuum of services
 - Housing, treatment, employment supports, etc.
- Multiple service continuums from diversion to reentry
 - Low barrier harm reduction focused on engagement and motivation
 - Involuntary and/or intensive levels of care
 - Tapered services to support stabilization and community integration
- Levels of service and care based on risk, need and strengths
 - Assessment driven services
- Peer support, coaching, service navigation and care coordination
- Whole person care responsive to individuals
 - Culture, race/ethnicity, age, sex/gender, etc.
- Universal assumption of trauma

21st Century Recovery Oriented System(s) of Care

Additional Key Elements

- Contracts and statements of work that shift service delivery away from volume and toward outcomes and value
- Contracts that pay for quality assurance activities, staff development, outcomes tracking and fidelity requirements for research informed practices
- Integrated data systems

~Diversion Services Continuum of Care~

Addressing Opiate Use Disorder in North Sound Counties

- The Opiate Epidemic
 - 1999-2015: Over 10,000 overdose deaths in Washington State
 - 1999-2015: 257% increase in opiate related treatment admissions

North Sound Impact

County	Increase in drug caused deaths involving opiates between 2002-04 to 2011-13	Increase in crime lab cases involving opiates between 2002-04 to 2011-13
Snohomish	68.9%	-10.5%
Skagit	41.6%	182%
Island	77.4%	239%
Whatcom	22.8%	122%

Service Continuum Example



Office of Neighborhoods – will have offices onsite at SCDC for collaboration

A 44-Bed Diversion Center Pilot Program

- Short-term program designed to divert homeless individuals with significant substance use disorder (primarily opiates) away from incarceration and toward treatment & housing
- Residents referred by SC's Office of Neighborhoods – Law Enforcement Embedded Social Workers
- Medication Assisted Treatment (MAT) provided onsite through MOU with provider (Ideal Options)
- Three primary referrals at discharge:
 - Residential Treatment
 - Detox
 - Service Enriched Housing & OP Treatment

Operations & Outcomes

Operations

- Intakes take place 7am-7pm Mon-Fri through law enforcement social workers only
- Voluntary programming includes health/wellness, psycho/education, art, recovery processing, etc.
- Transportation to community appointments & referrals
- Case Management, community navigation & treatment/housing referrals
- Staff training prior to program start for acute population:
 - Motivational Interviewing
 - Recovery Principles & Practices
 - Opiate Use Disorder & Detox
 - Mental Health First Aid
 - CPR/First Aid

Outcomes

- Recidivism/Desistance:
 - Reduction in bookings and days spent in jail at 6 and 12-month intervals
- Service Engagement
 - Increased connection to the Carnegie Resource Center and the North Sound Behavioral Health Organization contracted services, 6 to 12-month intervals (pre/post measures, BHO enrollment data)
- Housing Stability
 - Continued movement toward housing stability along the continuum of care, 6 to 12-month intervals (pre/post measures)



Governor Inslee at SCDC site

Diversion Center → Resource Center

An initial service continuum takes shape



SCDC (bottom two floors)

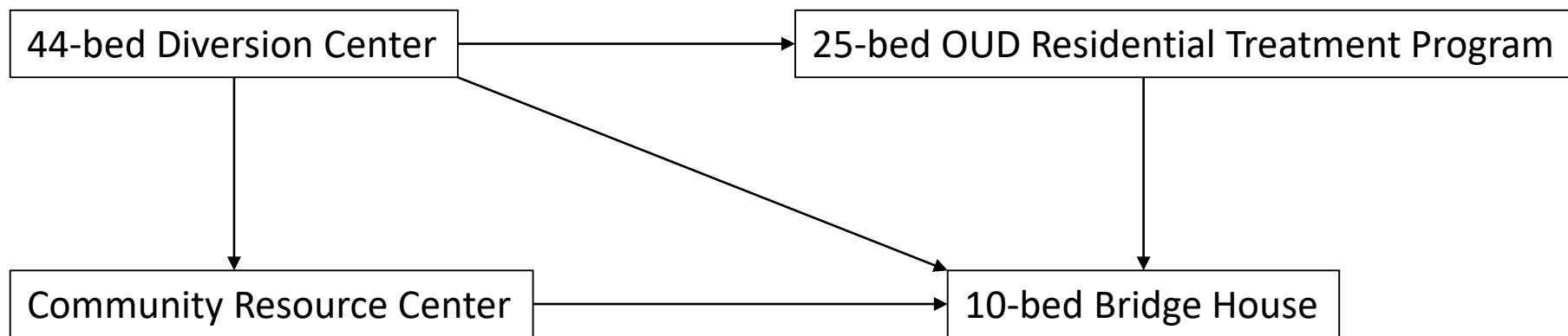
- 32 male beds top floor
- 12 female beds bottom floor

CRC (top floor)

- SCDC residents will access services at CRC once open, including:
 - IDs/licenses
 - SUD & MH assessments/referrals
 - Coordinated Entry Housing
- Active coordination between SCDC and CRC leadership & staff

ODU Residential 25-Bed Pilot Program

- MAT induction and maintenance protocols for Methadone, Suboxone and Vivitrol
 - Daily offsite Methadone dosing at the Swinomish Didgwalic Wellness Center
 - Daily Vivitrol dosing or extended-release injectable
 - Daily suboxone dosing up to 16mg.
- Treatment programming focused on relapse prevention, cognitive-behavioral treatment, chronic pain management, grief & loss, trauma and parenting
- Peer support and community care coordination & referral services
- Narcan kits at discharge



Thank You

Surveys

**Look for our surveys in your
inbox!**

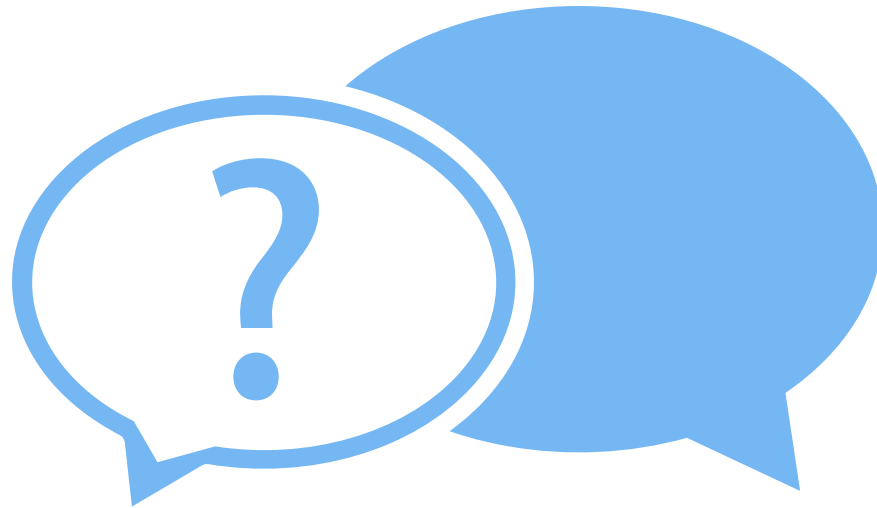
We'll send two short surveys:
one now, and
one in a month.



We greatly appreciate your feedback! Every survey we receive helps us to improve and develop our programming.

Q&A

Questions? Please type them in
the chat box!



Upcoming Events

Thank you for coming!

Join us for our next webinar:

Healing of the Canoe: Strengths-based Life Skills Curriculum for Tribal Youth

Dennis Donovan, PhD
June 27, 2018, 12-1pm