

#### **NJATOD MEMBERS**

AMERICAN HABITARE & COUNSELING ARS OF RIO GRANDE ARS OF SOMERS POINT BURLINGTON COUNSELING (NBCCC) CAMDEN TREATMENT ASSOCIATES CROSSROADS TREATMENT CENTER - TOMS RIVER EAST ORANGE SATP HABIT OPCO - CENTRAL JERSEY CTC. INTEGRITY HOUSE INTERCOUNTY COUNCIL ON D&A JOHN BROOKS RECOVERY JSAS HEALTHCARE, INC. KHALEIDOSCOPE H.P.C. INC. MORRIS COUNTY AFTERCARE NEW BRUNSWICK COUNSELING CENTER NEW HORIZON TREATMENT SERVICES NORTH EAST LIFE SKILLS ORGANIZATION FOR RECOVERY PATERSON COUNSELING CENTER PINNACLE TREATMENT CENTERS SOMERSET TREATMENT SERVICES SOUTH JERSEY DRUG TREATMENT SPECTRUM HEALTHCARE SUNRISE CLINICAL SERVICES THE LENNARD CLINIC

TRENTON TREATMENT CENTER

URBAN TREATMENT ASSOCIATES

October 1, 2020

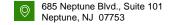
#### 2020 Follow up COVID-19 Impact on OTPs Survey

NJATOD recently conducted a follow-up to its survey on the impacts of COVID-19 on OTPs to better understand the continued challenges faced as the crisis evolves. From the responses we received, challenges remain with reduced revenues, decreased patient censuses and all are uncertain about their path forward. Federal financial programs associated with COVID-19 have provided stopgap support but may ultimately offer limited relief as the public health crisis looms large in the minds of providers.

#### The survey covered 6 categories:

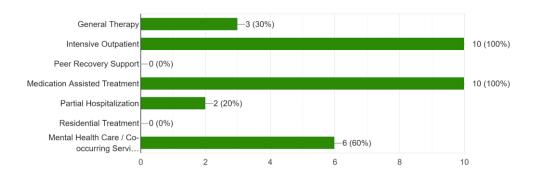
- COVID-19 Pressures
- COVID-19 Infections
- Personal Protective Equipment
- Medical Operations
- Telehealth/Telecommunications
- Staffing and Service Capacity
- Revenue and Cost Impacts

The online survey was conducted in late September, by a total of twelve (12) provider agencies which represents approximately 50% of the total number of member providers. Only one (1) survey per organization was required to be completed.

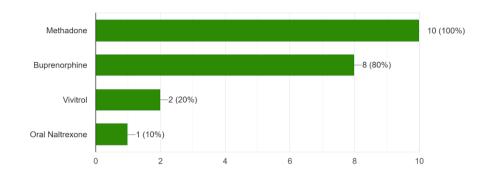


## **Participation by Provider Type**

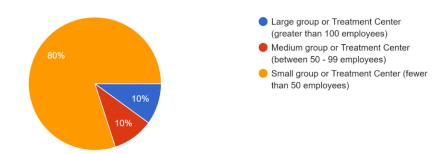
Please indicate the service represented (check all that apply)



For agencies providing MAT, select the type of medication offered (check all that apply)

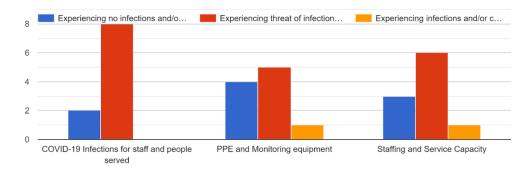


Provider Size



#### **COVID-19 Pressures**

Please rate the levels of pressure due to COVID-19 in the following areas; Column 1: Experiencing no infections and/or no shortages in these areas; Column 2: Experiencing threat of infection and/or threat of shortages, and Column 3: Experiencing infections and/or current shortages

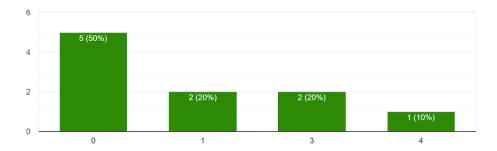


#### Please use this space to share any other pressures you are experiencing due to COVID-19.

- Currently there is a shortage on THB Caps
- Threat of infection of Medical staff causing shortages.
- Patient's not taking advantage of tele-health technology resources.
- Adaptation of daily services, i.e. quarantining patients returning from travel; some tele-health sessions; concerns about patients with multiple medical problems; constant efforts to get some patients to understand & consistently practice social distancing/masks, etc.; concerns about funding and how burden of COVID spending in the State will impact behavioral health programs; patients who aren't engaged in full coordination of care services at other programs, i.e. partial MH program, are regressing.
- Increased MH issues with patients as well as staff.
- At this time we have sufficient PPE's but this can change at any time. Staff and patients naturally concerned that an outbreak could occur

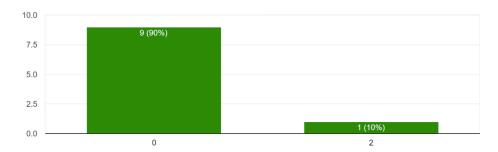
#### **COVID-19 Infections**

How many direct care staff have confirmed COVID-19 infections with positive tests? (Enter 0 if none)

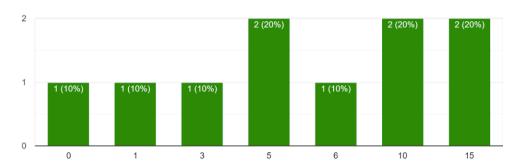


#### COVID-19 Infections cont'd

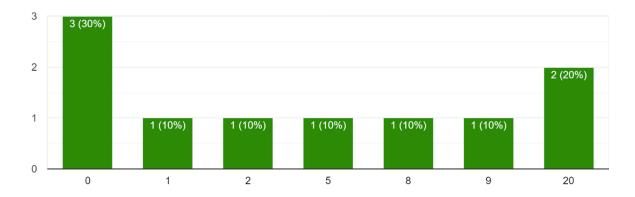
How many direct care staff are symptomatic and/or have suspected COVID-19 infections? (Enter 0 is none)



How many people you serve have confirmed COVID-19 infections with positive tests? (Enter 0 if none)



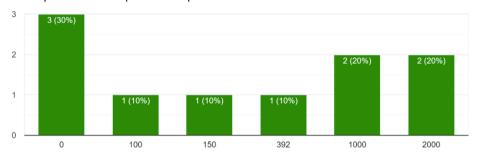
How many people you serve are symptomatic and/or have suspected COVID-19 infections? (Enter 0 is none)



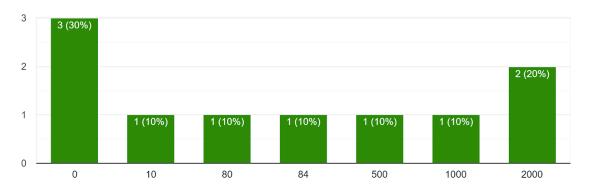


## Personal Protective Equipment (PPE)

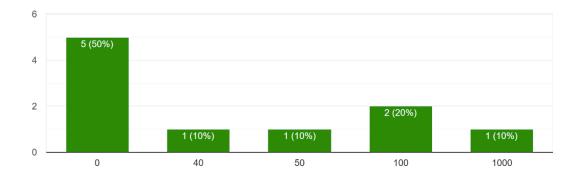
How many GLOVES do you need to provide optimal services?



How many MASKS do you need to provide optimal services?

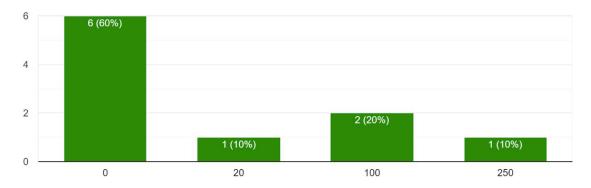


How many FACE SHIELDS do you need to provide optimal services?

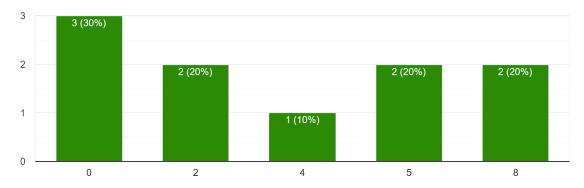


### Personal Protective Equipment (PPE) cont'd

How many GOWNS do you need to provide optimal services?



How many INFRARED THERMOMETERS do you need to provide optimal services?

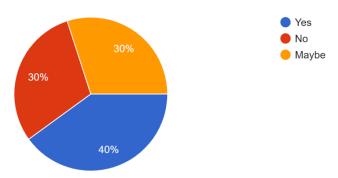


Please use this space to share any other PPE or Monitoring Equipment you are having difficulty ordering due to COVID-19.

- Clorox wipes and sprays
- Hand Sanitizer (specifically "bag" refills for dispenser)
- Hand Sanitizer
- Given that we don't know how long this pandemic will last these are all conservative estimates- the key concern is whether we will be able to replace our present stock when it is starting to deplete
- Disinfectant supplies such as Clorox wipes, Lysol spray, and hand sanitizer. Also shortage on takehome bottle caps

### **Medical Operations**

Illustratively, have there been any reported overdoses, relapses or other incidents as a result of the pandemic?

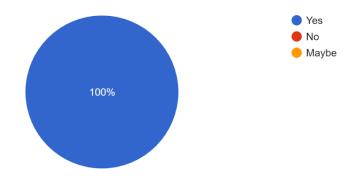


If yes, please indicate details:

- Several patients' reports relapse due to COVID-19 stressors
- Not specified directly but inpatient referrals have increased the past two months for but SA and co-occurring. I believe the stresses from the continued effects are really starting to get to people.
- Increase use of Opioids/Fentanyl and other drugs.
- WE have had a number of patients who had been doing well, relapse and we have also had a number of patients who were actively using, stop out of their concern about the virus. We have not had a single overdose to date

### Telehealth/Telecommunications

Does your agency use telehealth or telecommunications?





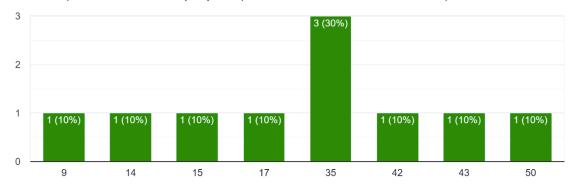
#### Telehealth/Telecommunications cont'd

If yes, please provide details on the level of satisfaction of telehealth services by the persons you serve and staff, any barriers or challenges your agency experiences in the provision of telehealth services and any other information you feel would be helpful.

- Individual and group counseling is currently being provided via telehealth, we have received positive feedback regarding the use of telehealth.
- Initial setup of virtual systems was/is frustrating. IOP staff and patients really enjoy the sessions-- excellent compliance/attendance
- Overall patients have adapted well and have complied with ZOOM online group therapy and individual therapy via telephone. Biggest barrier is no access to phones, computers and/or internet provider.
- Our clients are satisfied with how we are providing services at the current time
- We try, but many of our patient's do not have the technology or do not follow-up on referrals to obtain it. Other challenges is compliance with counseling as patient's will just not answer their phones then refuse an in person session. I don't believe it's ethical at this time to force a patient into a situation they do not feel comfortable. But you can also tell that patients are using these excuses to try their best to dodge services.
- Currently offer both telehealth and on-site services; barriers include patient's limited capacity to engage
  in some services, i.e. Zoom meetings, limited minutes on government issued or other phones. Patients
  need face-to-face contacts.
- We have received positive feedback from both staff and clients regarding the use of telehealth services, however we struggle to meet contacts because many clients do not have minutes and or phones.
- Patients seem okay with it, some have no phones
- The patients by and large have appreciated the constant contact they are receiving form their counselors- having telehealth availability has made it easier for patients to be treatment compliant. The only issues have been: Patients who do not have a phone and patients who have limited minutes on their phone. As of 9/20, all counselors are coming into the office at least 1x a week
- Slow or unstable internet connections impact delivery of services, patients may not have smartphones or computers

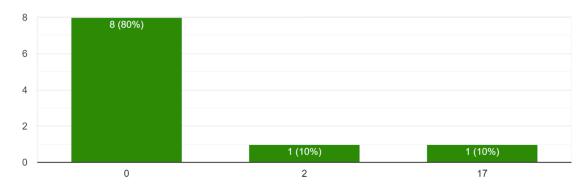
### **Staffing and Service Capacity**

On average, how many direct care staff (FTE) did you have before the COVID-19 pandemic?



## Staffing and Service Capacity cont'd

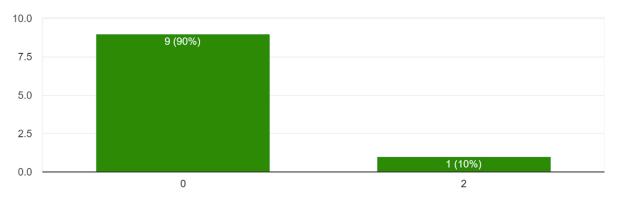
On average, how many open direct care positions (FTE) did you have before the COVID-19 pandemic? (Enter 0 if there were no open positions prior to COVID-19)



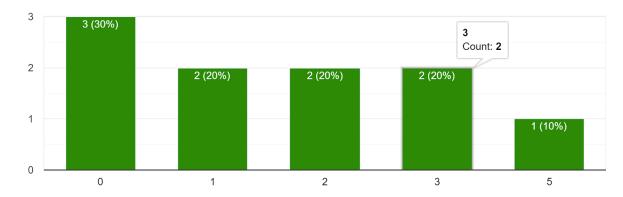
How many direct care staff do you have today? (FTE, including those on leave)

1, 9, 10, 12, 17, 32, 33, 34, 42, 48

How many direct care staff (FTE) are on leave related to COVID-19? (Enter 0 if none)



How many more direct care staff do you need to provide optimal services? (Enter 0 if none)

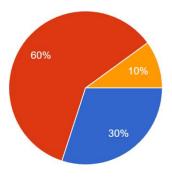




# Staffing and Service Capacity cont'd

How has COVID-19 affected the number of people your program or agency serves (including census,

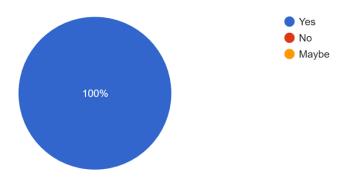
caseloads, and referrals)?



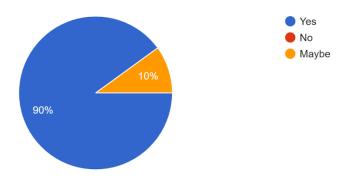
Serving more peopleServing about the same number of people

Serving fewer people

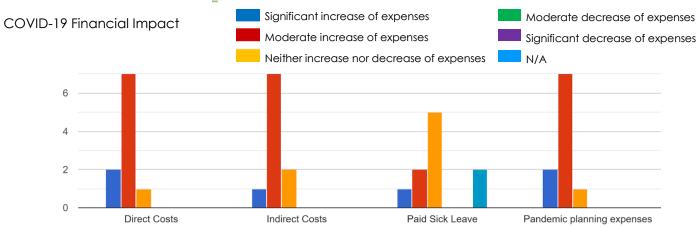
Do you currently have capacity to serve more people than you are serving today?



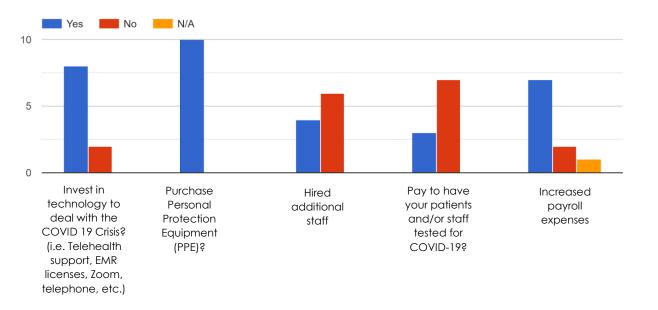
Are your staff and people you serve able to access COVID-19 testing in your community?



### **Revenue and Cost Impacts**



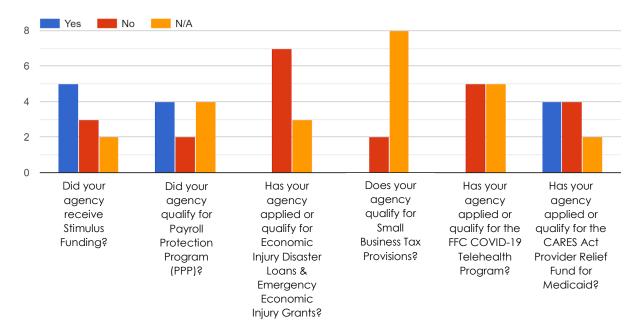
Have you experienced added costs resulting from the COVID crisis? Answer Yes or No.





#### Revenue and Cost Impacts cont'd

Coronavirus Aid, Relief, and Economic Security (CARES) Act



Please provide details on revenue or cost impacts your agency has encountered as a result of the pandemic.

- Since we were able to obtain a PPP loan, the costs to retain staff remained the same but costs to acquire PPE was increased.
- \$2400 on testing for employees per month. PPE has since slowed but it was costing about \$200-\$500 per month up until June
- Being a Division of municipal government some funds mentioned above may have been applied for via our HR/payroll division.
- Basically increase in PPE and staff cost related to the pandemic.
- Loss of half of revenue
- The greatest costs have come from the purchase of PPE's, additional cleaning and an additional security guard
- Difficulty with getting staff certified.