



SOAR CORP RECOVERY CENTER

Annual Report For 2021

Program Population

SOAR CORP is an outpatient substance abuse treatment center located in Lansdowne, Philadelphia Warminster and Levittown PA. Our mission is to provide comprehensive and holistic outpatient service to those suffering from addiction with a wide range of individualized services. The program is designed to assist people in recovery examine their lifestyles, learn how to make different decisions and for recovery to become a primary focus in an environment that is safe, supportive, and conducive to individual change. SOAR is a Medication Assisted Treatment (MAT) program that believes outpatient treatment is an effective mechanism to assist individuals in achieving their recovery and becoming productive members of our society. SOAR believes that individuals the use of specific medications such as methadone, for detoxification and maintenance purposes can ease the pain and discomfort of withdrawal symptoms. We operate a Person Served Multi-Disciplinary Team Approach to provide a holistic approach to treatment that includes balancing ones physical, mental, and spiritual stability. Our Treatment Team staff consists of highly trained professionals, with Bachelor and Masters level counselors, Licensed Nursing, Medical Doctors and APRN's. The clinical staff has specializations in marriage and family, addiction, co-occurring, and trauma to meet the needs of the patients. Soar offers educational Services on Relapse Prevention, HIV/AIDS, Hepatitis "C" STDs, life skills, educational and employment issues are offered through the group and individual services.

SOAR believes in treating people with respect, dignity and incorporates a member's lifestyle choices into the individualized treatment planning process. At Soar, person first individualized treatment plans are used to support recovery goals, personal growth, and development. Members are encouraged to be an active participant in their own recovery by collaborating with the treatment team to achieve personal goals. We make attempts to integrate and educate a member on local community activities such as religious organizations, library participation, job and educational resources along with 12 step / sober support networks. Family involvement is encouraged in the treatment process as Soar counselors will complete a couple or family session at the request of a member. Evidence based practices have been adapted into the programming at each site in order to assist members. Approaches such as the Matrix program, IMR (Illness Management and Recovery) and trauma informed care have been added and are in use at all sites of our corporation. Additionally, staff members have completed formal training in specific evidence based approaches such as EMDR and CBT. Soar shall continue to encourage its clinical staff to obtain training and certification in evidence based tracks to meet the needs of members being served.

In terms of program structure and staffing, Soar Lansdowne has a total of 7 counselors employed within the agency, 2 being male, 4 being female, the Levittown office has a total of 5 counselors, 1 being male, 4 being female, the Soar Philadelphia has a total of 14 counselors and the Warminster office has a total of 3 counselor 0 males and 3 female. Typically, fulltime counselors work a scheduled 40 hours week at various times of the day. Our current O.P. full time counselors have a caseload ratio that does not exceed 35 to 1, however soar attempts to keep the caseload ratio at 30 to one to meet the needs of the members. Our current I.O.P. full time counselors have a caseload ratio that does not exceed 20 to 1 to one to meet the needs of the members.

Soar was reviewed by outside inspection sources such as the Department of Drug and Alcohol Programs, contracted funding sources and other consumer satisfaction teams. Overall all of the feedback about the program has been positive and no significant issues in terms of patient care were found within the reviews and inspections. Soar has completed both a Consumer Satisfaction Team Reviews along with a review from the Network Improvement and Accountability Collaborative (NIAC) receiving a two year accreditation from NIAC. Additionally, the Philadelphia, Lansdowne and Warminster locations have been reaccredited by CARF receiving a 3 year continued accreditation till 2022. Our new site in Levittown has received a new 3 year accreditation from CARF till 2022.

2021 COVID-19

Due to the COVID-19 outbreak, Soar Corp suspended all group therapy sessions within all of its locations. This measure was taken in order to ensure social distancing guidelines and CDC guidelines for gatherings were followed during the 2021 calendar year. Additionally, programming and service delivery methods were modified to ensure patient care continued during the pandemic. Soar Corp expanded its take home dosing procedures for patients during the pandemic in order to minimize the risk for exposure and limit patient numbers within the facility. The agency also adapted the use of tele-health options such as video, phone and internet services for counseling services and medical services in the first quarter of the year and continued this practice throughout the calendar year.

Soar has experienced some turnover during the 2021 year as a result of the pandemic. Staff expressed the need to resign from their position due having school aged children being taught virtually with no means of childcare. Additional staffing needs were generated from expansion in the form of increased intake and admissions. The corporation continues to work to address its staffing needs by recruiting and nursing staff at all sites.

Quality Improvement

An annual quality improvement reports is being completed at this time to comment on some of the outcomes for each of the sites over the last calendar year. Soar shall use the following items to establish base line data for this quality improvement report, the patient satisfaction with the program, the effectiveness of the program, the efficiency of the program, the accessibility of the program and the retention of the program. Over the course of the year, Soar established and achieved several goals on these domains and feel which we feel increase the quality of services being offered.

Soar Philadelphia

Accessibility in simple terms is a measure of the persons and community members' abilities to procure services with relative ease. Members applying for admission must complete a 3 step process for admission, the initial presentation either a phone or face to face screening, the UDS screen and finally the intake. Soar will track and record the time elapsed between each step. The outbreak of COVID-19 proved to be a significant barrier for treatment accessibility. During the course of 2021, Soar Philadelphia modified its admission and intake process in order to continue services in a safe and efficient manner. Soar continued to provide in person admissions for all patients seeking treatment from the point of the initial contact to the medication induction. However, due to continued safety measures and protocols, the admission time period at time was extended at times from 24 hours to 48 hours. This was the result of a decrease at times of staff to process the request being generated.

Even with these barriers, Soar Philadelphia continued to grow and expand during the year of 2021. During the periods of growth and expansion, there appeared to be a significant trend of outside consumers and providers being interested in being admitted to SOAR for treatment. Over the course of 2021, it is estimated that our program has served around 625 persons this year, with persons being funded by CBH, BHSI and Magellan

behavioral health services. Soar estimates that 85% of the persons have been funded by CBH or BHSI. Over the course of 2021, a total of 405 individuals in the Northeast requested an intake and screening to the facility. Of the 405 individuals who have requested a screening at the Philadelphia location, a total of 285 individuals or 70% of the persons who were admitted into the program. Quarterly, it was seen that a total of 101 members inquired about admissions to the program and of those members it was seen that a total of 171 admissions were completed in the quarter.

A further review of the quarterly results showed a consistent request for an intake, screening, readmission or reinstatement across each quarter, with an average of 96 requests per quarter for Philadelphia and an average of 75 patients being admitted in each quarter. In regards to the retention of admissions, Soar Philadelphia showed an average rate of over 88% of its patients by the end of the calendar year.

During the course of the year, the program received requests from patients to transfer to another MMT provider within the area. Additionally, a review of the referral sources also indicated a large population of the admission request were patients who is not in treatment and continuing to use while on the street. Other referral sources included inpatient residential programs such as Kirk bridge, Aldie, CBH, Bucks County SCA and local hospitals.

Finally, a further review of the denials to admissions has been completed in order to identify trends that acted as a barrier to enrolling in treatment. First, it was found that 47% of the denials for enrollment in the MMT program were due to a patient being positive for illicit substance use that is contraindicated for this type of program. Specific examples include patients being positive for suboxone, alcohol and any type of benzodiazepines. Second, data on the denials also showed that patients were at times unwilling to allow Soar to contact their doctor who was prescribing the benzodiazepine prescription to coordinate care with our MMT program, resulting in an inability to proceed with an admission. Finally, 25% of the patients who did not show for a scheduled appointment. The patients who were willing to discuss their choice to not attend the program stated factors such as, being issued emergency take home dosing on admission at another provider, being able to obtain take homes with a medical marijuana card and being able to receive a higher number of emergency take homes from another provider. Others stated that they were not ready to enter treatment due to receiving stimulus and unemployment money and will seek treatment after they have exhausted this resource.

An annual review of the current drug monitoring reports is being completed by Soar located in Philadelphia in order to establish a sense of program effectiveness to the population being served. Soar Corp continues to import all urine drug screen results daily from Ammon Lab to our EMR system, Tower systems. Quarterly, reports showing the breakdown of the positive drug screens by substance, along with averages and percentages are generated and reviewed for trends. The breakdown of the trends are as follows.

The quarterly drug monitoring report was defined in the following manner

1. Consistent drug screen ----only the Rx drug was present (methadone)
2. No Drugs found-----negative for all including methadone
3. Additional drugs-----positive for other substances beside methadone

First since opening, Soar Philadelphia has had steady growth from new admissions, transfers and assessments. As a result of this growth, it is estimated that a total of 7131 urine screen samples have been collected for the calendar year. Of the uds screens collected, a total of 6% (close to 100) of the urine screens collected within a quarter were associated with new admissions or a request to be reinstated into the program. Admissions or a

request to be reinstated into the program appeared to be steady during the course of the year with a total of 419 inquiries by the close of the year.

Second, trends for existing patients are as follows. Soar Philadelphia remained unchanged with its urine screen results that are considered consistent, remaining at a 27% level by the end of 2021. Additionally, the rate of urine screens being negative for opiates also remained consistent the previous year with an annual average of 65% by the end of 2021. Out of the 35% of the urine screens being positive for opiates, 23% of them were positive for fentanyl. Soar Philadelphia also calculated that the total percentage of negative alcohol results equaled 99% for the calendar year and this was seen as an improvement from the previous year. Soar Philadelphia also saw a reduction in the amount of illicit benzo use. At the end of 2021, a total of 92% of the urine drug screens were negative for benzo use

Third, the with legalization of medical marijuana's, Soar Philadelphia saw an increase in the rate of prescription medical marijuana cards and also in the rate of positive drug screen results for this substance. By the end of the fourth quarter of 2021, it is estimated that 28% of the urine screen samples were positive for marijuana. Due to this issue, it is evident that the rate of consistent (or clean uds screens) has been affected as there are many patients who are only positive for marijuana. This variable will have to be planned for in 2022.

Fourth, Soar Philadelphia saw an increase in the rate of prescription and or illicit use of amphetamines during the calendar year. By the end of the fourth quarter of 2021, it is estimated that 9% of the urine screen samples were positive for an amphetamine Due to this issue, it is evident that the rate of consistent (or clean uds screens) has been affected as the patients who are only positive for an amphetamine This variable will have to be planned for in 2022

SOAR LEVITTOWN

An annual quality improvement reports is being completed at this time to comment on some of the outcomes of Soar LEVITTOWN for the 2021 calendar year. Soar shall use the following items to establish base line data for this quality improvement report, the patient satisfaction with the program, the effectiveness of the program, the efficiency of the program, the accessibility of the program and the retention of the program. Over the course of the year, Soar established and achieved several goals on these domains and feel which we feel increase the quality of services being offered.

The quarterly drug monitoring report was defined in the following manner

4. Consistent drug screen ----only the Rx drug was present (methadone)
5. No Drugs found-----negative for all including methadone
6. Additional drugs-----positive for other substances beside methadone

First since opening, Soar Levittown has had steady growth from new admissions, transfers and assessments. As a result of this growth, it is estimated that a total of 2817 urine screen samples have been collected for new admission request where 14% (close to 94) of the urine screens collected within a quarter were associated with new admissions or a request to be reinstated into the program. Admissions or a request to be reinstated into the program appeared to be steady during the course of the year with a total of 376 inquiries by the close of the year.

Second, trends for existing patients are as follows. Soar Levittown remained unchanged with its urine screen results that are considered consistent, remaining at a 30% level by the end of 2021. Additionally, the rate of urine screens being negative for opiates also improved from the previous year rising from 63% in 2020 to an annual average of 66% by the end of 2021. Soar Levittown also calculated that the total percentage of negative alcohol results equaled 99% for the calendar year and this was seen as an improvement from the 2019 calendar year. Soar Levittown also saw a reduction in the amount of illicit benzo use. At the end of 2021, a total of 94% of the urine drug screens were negative for benzo use as compare to 2020 where 92 % of the drug screens were negative for benzo use.

Third, the with legalization of medical marijuana's, Soar Levittown saw an increase in the rate of prescription medical marijuana cards and also in the rate of positive drug screen results for this substance. By the end of the fourth quarter of 2021, it is estimated that 27% of the urine screen samples were positive for marijuana. Due to this issue, it is evident that the rate of consistent (or clean uds screens) has been affected as there are many patients who are only positive for marijuana. This variable will have to be planned for in 2022

A review of the overall efficiency of treatment services for the 2021 year is being completed at this time for SOAR Corp located in Levittown, PA. Currently Soar is measuring the term "treatment efficiency" through the establishment of the following standard. First Soar will keep monthly, quarterly, and annual data on the number of treatment hours completed by the patient population for the specific time periods listed above. This data shall be compared to an established standard for "expected treatment hours" (#pts* 16 billable hrs.) for each specified time period that was previously listed. The expected treatment hours shall include the attendance of 4 hours of individual therapy a month and also a total of 12 hours of group therapy per month. A second measure will focus on the completion of a monthly individual session for all of the patients within the program. Soar shall keep data on a monthly, quarterly and annual basis of the total number of patients who did not complete at least one individual counseling session a month. Soar believes that measuring these two standards will give an accurate reflection of both the patients' engagement in treatment and of the quality of services being offered at the program.

Overall for the 2021 calendar year, Soar Levittown rate of service delivery was impacted due to the COVID-19 outbreak. Group therapy sessions remained cancelled for most of the 2021 calendar year due to social distancing requirements and concerns. Soar continued to complete individual sessions both in person and also by tele-health series. Patients reported mixed feelings regarding the tele-health services, and reported times of having to end sessions by this means early due to not being able to keep their home location confidential to continue the services. The patient census remained consistent with an average census of 180 patients per month.

During the 2021 calendar year, the patients attended a total of 5435 hours of individual therapy and Soar established a 91% rating for ensuring that all patients attended the minimum monthly standards of 1 session by regulations. During the calendar year the overall rate for the minimum monthly standards decreased to a low of 89%, resulting from staff shortages and difficulty hiring staff during the COVID-19 pandemic. By the close of the fourth quarter this rate rose back to 91% as the program became fully staffed.

Additionally, in terms of the expected rate for the individual sessions, it is estimated that the patients completed 63% of the expected individual treatment hours per month. It is calculated that overall the patients of the program attended on average 2.5 hours of individual sessions within a month. Again, during the calendar year the overall rate for the minimum monthly standards decreased to a low of 54% (2.0 hours) in the 3rd quarter, resulting from staff shortages and difficulty hiring staff during the COVID-19 pandemic. By the close of the fourth quarter this rate rose back to 65% as the program became fully staffed.

When examining some of the fluctuations in the completion of individual sessions from month to month, the following data points have been discovered. First, as mentioned earlier ongoing staff losses related to the COVID-19 pandemic affected the rate of treatment attendance. Second, the data also showed some difficulty in patients keeping telehealth appointments due to not having working phones or minutes, having to end sessions early or simply not answering the phone when a therapist calls at a scheduled time.

Finally, due to the COVID-19 restrictions the overall percent of treatment hour's expectations so far did not complete any group therapy sessions for the calendar year. As a result of this decision, there is no data to examine to compare actual; and expected totals for group therapy. Prior to the impact of COVID-19, at the close of 2019, it is calculated that the patients completed 74% of all of the expected treatment hours at the Levittown Office. This equates to each patient having on average 14 hours of counseling sessions per calendar month, being a mixture of both individual and group therapy sessions. At the close of 2021, it is calculated that the patients completed less than 16% of all of the expected treatment hours at the Levittown Office. This equates to each patient having completed less than 2.5 hours of counseling sessions per calendar month, being only individual therapy sessions.

The outbreak of COVID-19 proved to be a significant barrier for treatment accessibility. During the course of 2021, Soar Levittown modified its admission and intake process in order to continue services in a safe and efficient manner. Soar continued to provide in person admissions for all patients seeking treatment from the point of the initial contact to the medication induction. However, due to continued safety measures and protocols, the admission time period at time was extended from 24 hours to 48 hours.

Even with these barriers, Soar Levittown continued to grow and expand during the year of 2021. During the periods of growth and expansion, there appeared to be a significant trend of outside consumers and providers being interested in being admitted to SOAR for treatment. Over the course of 2021, a total of 239 patients in Levittown requested an intake, screening, readmission or reinstatements to the facility. Of the 239 patients who had requested a screening at the Levittown location, a total of 189 patients or 80% of those patients were admitted into the program.

Additionally, the data also suggested a slight decrease in admissions and request for admissions occurred in the 2nd half of the calendar year. During the first and second quarter an average of 69 requests per quarter for intakes was calculated and an average of 56 patients were admitted in each quarter. During the third and fourth quarter an average of 49 requests per quarter for intakes was calculated and an average of 40 patients were admitted in each quarter. In regards to the retention of admissions, Soar Levittown showed an average rate of over 88% of its patients by the end of the calendar year.

During the course of the year, the program received requests from patients to transfer to another MMT provider within the area. Additionally, a review of the referral sources also indicated a large population of the admission request were patients who is not in treatment and continuing to use while on the street. Other referral sources included inpatient residential programs such as Kirk bridge, Aldie, CBH, Bucks County SCA and local hospitals.

A further review of the denials to admissions has been completed in order to identify trends that acted as a barrier to enrolling in treatment. First, it was found that 54% of the denials for enrollment in the MMT program were due to a patient being positive for illicit substance use that is contraindicated for this type of program. Specific examples include patients being positive for suboxone, alcohol and any type of benzodiazepines. Second, data on the denials also showed that patients were at times unwilling to allow Soar to contact their doctor who was prescribing the benzodiazepine prescription to coordinate care with our MMT program, resulting in an

inability to proceed with an admission. Finally, 40% of the patients who did not show for a scheduled appointment. Data suggested that there appeared to be a spike in this behavior during the 3rd and fourth quarter of the year. Soar make attempts for engagement on the missed intake appointments but a response was limited from the attempts.

Finally in terms of feedback from internal and external stake holders, Soar Levittown appeared to receive positive reviews. During the calendar year, Soar Levittown completed audits from DDAP and also from the Bucks County Drug and Alcohol Commission. Due to COVID restrictions the inspections were facilitated in both an in person and virtual manner. The final results showed no significant deficiencies and resulted in the site's license being renewed as a full status.

Staff were also surveyed about the work environment and the facility. In the results staff expressed concern and stress over having to work in the office while the COVID-19 pandemic was ongoing. As a result the agency generated a hybrid schedule for the counseling staff to utilize that allowed the staff to split their work schedule between home and the office. To achieve this the agency purchased lap tops and had them configured to allow remote access to the EMR for staff.

Feedback from staff who resigned to take a new position at another agency focused on a few common themes. First, several staff stated that they have to option to work from home 100% of the time and have been offered a higher pay rate to do so. Feedback suggested the option to work at home is appealing due to childcare issues and the chance to reduce daily expenses associated with traveling to work daily. Second exit information also indicated that the workload and paperwork requirements appears at times to be demanding and the staff member is making a transition to a new position to reduce their level of personal stress.

Input was obtained from the patient population during the course of the year. To reduce the risk of transmission and follow precautions, soar elected to not two methods to collect patient feedback for this calendar year. For 2021, the patients gave patient survey feedback directly to a supervisor by the means of a phone or in person session or by the use of a paper survey form. Patients overall reported being happy with the program, but cited some concerns regarding COVID_19. Patients did state that they were happy with the steps that the program took over the course of 2021 to issue additional take home bottles to the patients who qualified in order to reduce the frequency of attendance. Other patients expressed the desire to have the telehealth options for individual sessions be a permanent option post the Pandemic as this helped help them be able to focus on child care, returning to work and school. Further feedback from the patient population suggested that they felt safe at the program and saw the staff as being accessible at every level in order to meet the needs of the patients.

Patient feedback focused on increasing the safety precautions and sterilization efforts within the facility. To address this feedback, the management team doubled its hours for cleaning services weekly, and has been making additional purchase of ppe's for both patient and staff use. On top of additional cleaning services, the agency hired an independent company "Germ Hero" to disinfect, and sanitize the facility with a hospital grade disinfectant to kills germs, viruses and bacteria.

Patient feedback also suggested the following areas for improvement, first, the patients expressed a desire and a frustration with the lack of group therapy sessions during the course of the year, but stated they understood the rationale for suspending this service. Patients have expressed a desire to have this service return as soon as it is deemed safe to do so, as many members have stated this helps to give structure in their day. Second, the patient feedback suggested that more action should be taken to include family support or education into the program. As a result of this, the site will look at ways to have a socially distance client appreciation event that can be held outside in the parking. The event will be offered sometime in the 2022 calendar year when it is deemed safe and appropriate to do so. Additionally, when deemed safe and appropriate, Soar will make attempts to have family session in person and the act of having family sessions over the phone can be reviewed for the 2022 calendar year

Soar Warminster

The outbreak of COVID-19 proved to be a significant barrier for treatment accessibility. During the course of 2021, Soar Warminster modified its admission and intake process in order to continue services in a safe and efficient manner. Soar continued to provide in person admissions for all patients seeking treatment from the point of the initial contact to the medication induction. Soar also continued to provide in person assessments for patients seeking an assessment to meet other demands such as a court referral or probation requirements.

Soar Warminster continued to grow and expand during the year of 2021. During the calendar year of 2021, Soar Corp Warminster received a total of 207 inquiries regarding entering treatment. Of the inquiries received a total of 78% (or 166 patients) completed an intake, screening, readmission or reinstatements to the facility. Of the 166 patients who had requested treatment at the Warminster location, a total of 100 patients or 60% were admitted into a MMT track. Of the 166 patients who had requested treatment at the Warminster location, a total of 66 patients or 40% of those patients were admitted into a drug free assessment only track. The rate of request for assessments only appeared to be steady over the year with a total of 20 request in the first quarter, 17 request in the second quarter, 15 request in the third quarter and 14 request in the further quarter. However, only 35% of the assessment requested were associated with MMT programming or a desire to engage in MMT programming.

Additionally, the data also suggested a slight decrease in admissions and request for admissions occurred in the 3rd quarter of the calendar year. During the first and second quarter an average of 69 requests per quarter for intakes was calculated and an average of 44 patients were admitted in each quarter. During the third and fourth quarter an average of 49 requests per quarter for intakes was calculated and an average of 35 patients were admitted in each quarter. In regards to the retention of admissions, Soar Warminster showed an average rate of over 88% of its patients by the end of the calendar year.

During the course of the year, the program received requests from patients to transfer to another MMT provider within the area. Additionally, a review of the referral sources also indicated a large population of the admission request were patients who is not in treatment and continuing to use while on the street. Other referral sources included inpatient residential programs such as Kirk bride, Aldie, CBH, Bucks County SCA and local hospitals.

A review of the overall efficiency of treatment services for the 2021 year is being completed at this time for SOAR Corp located in Warminster, PA. Currently Soar is measuring the term “treatment efficiency” through the establishment of the following standard. First Soar will keep monthly, quarterly, and annual data on the number of treatment hours completed by the patient population for the specific time periods listed above. This data shall be compared to an established standard for “expected treatment hours” (#pts* 16 billable hrs.) for each specified time period that was previously listed. The expected treatment hours shall include the attendance of 4 hours of individual therapy a month and also a total of 12 hours of group therapy per month. A second measure will focus on the completion of a monthly individual session for all of the patients within the program. Soar shall keep data on a monthly, quarterly and annual basis of the total number of patients who did not complete at least one individual counseling session a month. Soar believes that measuring these two standards will give an accurate reflection of both the patients’ engagement in treatment and of the quality of services being offered at the program.

Overall for the 2021 calendar year, Soar Warminster rate of service delivery was impacted due to the COVID-19 outbreak. Group therapy sessions remained cancelled for most of the 2021 calendar year due to social distancing requirements and concerns. Soar continued to complete individual sessions both in person and also by tele-health series. Patients reported mixed feelings regarding the tele-health services, and reported times of

having to end sessions by this means early due to not being able to keep their home location confidential to continue the services. The patient census remained consistent with an average census of 81 patients per month.

During the 2021 calendar year, the patients attended a total of 2234 hours of individual therapy and Soar established a 95% rating for ensuring that all patients attended the minimum monthly standards of 1 session by regulations. During the calendar year the overall rate for the minimum monthly standards decreased to a low of 83%, resulting from staff shortages and difficulty hiring staff during the COVID-19 pandemic. By the close of the fourth quarter this rate rose back to 98% as the program became fully staffed.

Additionally, in terms of the expected rate for the individual sessions, it is estimated that the patients completed 57% of the expected individual treatment hours per month. It is calculated that overall the patients of the program attended on average 2.3 hours of individual sessions within a month. Again, during the calendar year the overall rate for the minimum monthly standards decreased to a low of 53% (2.0 hours) in the 3rd quarter, resulting from staff shortages and difficulty hiring staff during the COVID-19 pandemic. By the close of the fourth quarter this rate rose back to 71% as the program became fully staffed.

When examining some of the fluctuations in the completion of individual sessions from month to month, the following data points have been discovered. First, as mentioned earlier ongoing staff losses related to the COVID-19 pandemic affected the rate of treatment attendance. Second, the data also showed some difficulty in patients keeping telehealth appointments due to not having working phones or minutes, having to end sessions early or simply not answering the phone when a therapist calls at a scheduled time.

Finally, due to the COVID-19 restrictions the overall percent of treatment hour's expectations soar did not complete any group therapy sessions for the calendar year. As a result of this decision, there is no data to examine to compare actual; and expected totals for group therapy. At the close of 2021, it is calculated that the patients completed less than 14% of all of the expected treatment hours at the Warminster Office. This equates to each patient having completed less than 2.0 hours of counseling sessions per calendar month, being only individual therapy sessions. It is evident that the inability to facilitate group therapy impeded on reaching the target goals for the expected treatment hours for patients

An annual review of the current drug monitoring reports is being completed by Soar located in Warminster in order to establish a sense of program effectiveness to the population being served. Soar Corp continues to import all urine drug screen results daily from Ammon Lab to our EMR system, Tower systems. Quarterly, reports showing the breakdown of the positive drug screens by substance, along with averages and percentages are generated and reviewed for trends. The breakdown of the trends are as follows.

The quarterly drug monitoring report was defined in the following manner

1. Consistent drug screen ----only the Rx drug was present (methadone)
2. No Drugs found-----negative for all including methadone
3. Additional drugs-----positive for other substances beside methadone

First since opening, Soar Warminster has had steady growth from new admissions, transfers and assessments. As a result of this growth, it is estimated that a total of 1468 urine screen samples have been collected for the calendar year. Of the uds screens collected, a total of 15% (close to 61) of the urine screens collected within a quarter were associated with new admissions or a request to be reinstated into the program. Admissions or a request to be reinstated into the program appeared to be steady during the course of the year with a total of 225

inquiries by the close of the year. Additionally, in terms of request for screening and assessment, it appeared a total of 6% of the urine screens collected were associated with a this request.

Second, trends for existing patients are as follows. Soar Warminster remained unchanged with its urine screen results that are considered consistent, remaining at a 20% level by the end of 2021. Additionally, the rate of urine screens being negative for opiates also remained consistent the previous year with an annual average of 67% by the end of 2021. Soar Warminster also calculated that the total percentage of negative alcohol results equaled 99% for the calendar year and this was seen as an improvement from the previous year. Soar Warminster also saw a reduction in the amount of illicit benzo use. At the end of 2021, a total of 94% of the urine drug screens were negative for benzo use as compare to 2020 where 92 % of the drug screens were negative for benzo use.

Third, the with legalization of medical marijuana's, Soar Warminster saw an increase in the rate of prescription medical marijuana cards and also in the rate of positive drug screen results for this substance. By the end of the fourth quarter of 2021, it is estimated that 32% of the urine screen samples were positive for marijuana. Due to this issue, it is evident that the rate of consistent (or clean uds screens) has been affected as there are many patients who are only positive for marijuana. This variable will have to be planned for in 2022.

Fourth, Soar Warminster saw an increase in the rate of prescription and or illicit use of amphetamines during the calendar year. By the end of the fourth quarter of 2021, it is estimated that 10% of the urine screen samples were positive for an amphetamine Due to this issue, it is evident that the rate of consistent (or clean uds screens) has been affected as there are patients who are only positive for an amphetamine This variable will have to be planned for in 2022

Soar Lansdowne

Soar Lansdowne continued to grow and expand during the year of 2021. During the periods of growth and expansion, there appeared to be a significant trend of outside consumers and providers being interested in being admitted to SOAR for treatment. Over the course of 2021, a total of patients in Lansdowne requested an intake, screening, readmission or reinstatements to the facility. Of the 200 patients who had requested a screening at the Lansdowne location, a total of 140 patients or 71% of those patients were admitted into the program. A further review of the quarterly results showed a consistent request an intake, screening, readmission or reinstatements across each quarter, with an average of 50 requests per quarter for Lansdowne and an average of 35 patients being admitted in each quarter.

In regards to the retention of admissions, Soar Lansdowne showed an average rate of over 83% of its patients by the end of the calendar year. During the course of the year, the program received requests from patients to transfer to another MMT provider within the area that did not offer the IOP level of care. Other patients requested transfers to another MMT provider within the area who only mandates 2.5 hours of therapy a month as opposed to our weekly requirements. Other patients cited the program hours, and treatment requirements being an issue that caused conflict with their ability to work resulting in their desire to attend another program. .

Additionally, reviewing the referral sources also indicates a large population of the admission request is patient who is not in treatment and continuing to use while on the street. Other referral sources included inpatient residential programs such as Kirk bride, Aldie, CBH, Bucks County SCA and local hospitals. The quarterly reviews also showed that the private commercially insure patient was a new funding source and trend that applied for admission to the Lansdowne location.

Finally, a further review of the denials to admissions has been completed in order to identify trends that acted as a barrier to enrolling in treatment. First, it was found that 47% of the denials for enrollment in the MMT

program were due to a patient being positive for illicit substance use that is contraindicated for this type of program. Specific examples include patients being positive for suboxone, methadone and any type of benzodiazepines. Second, data on the denials also showed that patients were at times unwilling to allow Soar to contact their doctor who was prescribing the benzodiazepine prescription to coordinate care with our MMT program, resulting in an inability to proceed with an admission. Finally, 12% of the patients who did not show for a scheduled appointment reported going to another provider instead of our program. The patients who were willing to discuss their choice to not attend the program stated factors such as, having to complete less treatment requirements elsewhere, being able to obtain take homes with a medical marijuana card and being able to dose earlier elsewhere. Additionally patients reported that other facilities also provide van service to and from the facility, and case management services making the competitor more appealing to them.

An annual review of the current drug monitoring reports is being completed by Soar located in Warminster in order to establish a sense of program effectiveness to the population being served. Soar Corp continues to import all urine drug screen results daily from Ammon Lab to our EMR system, Tower systems. Quarterly, reports showing the breakdown of the positive drug screens by substance, along with averages and percentages are generated and reviewed for trends. The breakdown of the trends are as follows.

The quarterly drug monitoring report was defined in the following manner

1. Consistent drug screen ----only the Rx drug was present (methadone)
2. No Drugs found-----negative for all including methadone
3. Additional drugs-----positive for other substances beside methadone

First since opening, Soar Lansdowne has had steady growth from new admissions, transfers and assessments. As a result of this growth, it is estimated that a total of 3717 urine screen samples have been collected for the calendar year. Of the uds screens collected, a total of 6% (close to 54) of the urine screens collected within a quarter were associated with new admissions or a request to be reinstated into the program. Admissions or a request to be reinstated into the program appeared to be steady during the course of the year with a total of 219 inquiries by the close of the year. However, an analysis of the data showed that there was a decrease in the number of requester in the 3rd and further quarter of the calendar year, which is associated with a new competitor opening a block away from the facility.

Second, trends for existing patients are as follows. Soar Lansdowne remained unchanged with its urine screen results that are considered consistent, remaining at a 34% level by the end of 2021. Additionally, the rate of urine screens being negative for opiates also remained consistent the previous year with an annual average of 69% by the end of 2021. Out of the 31% of the urine screens being positive for opiates, 23% of them were positive for fentanyl. Soar Lansdowne also calculated that the total percentage of negative alcohol results equaled 99% for the calendar year and this was seen as an improvement from the previous year. Soar Lansdowne also saw a reduction in the amount of illicit benzo use. At the end of 2021, a total of 96% of the urine drug screens were negative for benzo use as compare to 2020 where 93 % of the drug screens were negative for benzo use.

Third, the with legalization of medical marijuana's, Soar Lansdowne saw an increase in the rate of prescription medical marijuana cards and also in the rate of positive drug screen results for this substance. By the end of the fourth quarter of 2021, it is estimated that 22% of the urine screen samples were positive for marijuana. Due to this issue, it is evident that the rate of consistent (or clean uds screens) has been affected as there are many patients who are only positive for marijuana. This variable will have to be planned for in 2022.

Fourth, Soar Lansdowne saw an increase in the rate of prescription and or illicit use of amphetamines during the calendar year. By the end of the fourth quarter of 2021, it is estimated that 9% of the urine screen samples were positive for an amphetamine. Due to this issue, it is evident that the rate of consistent (or clean uds screens) has been affected as their patients who are only positive for an amphetamine. This variable will have to be planned for in 2022.

A review of the overall efficiency of treatment services for the 2021 year is being completed at this time for SOAR Corp located in Delaware County, PA. Currently Soar is measuring the term “treatment efficiency” through the establishment of the following standard. First Soar will keep monthly, quarterly, and annual data on the number of treatment hours completed by the patient population for the specific time periods listed above. This data shall be compared to an established standard for “expected treatment hours” (#pts* 16 billable hrs.) for each specified time period that was previously listed. The expected treatment hours shall include the attendance of 4 hours of individual therapy a month and also a total of 12 hours of group therapy per month. A second measure will focus on the completion of a monthly individual session for all of the patients within the program. Soar shall keep data on a monthly, quarterly and annual basis of the total number of patients who did not complete at least one individual counseling session a month. Soar believes that measuring these two standards will give an accurate reflection of both the patients’ engagement in treatment and of the quality of services being offered at the program.

Overall for the 2021 calendar year, Soar Lansdowne rate of service delivery was impacted due to the COVID-19 outbreak. Group therapy sessions remained cancelled for most of the 2021 calendar year due to social distancing requirements and concerns. Soar continued to complete individual sessions both in person and also by tele-health series. Patients reported mixed feelings regarding the tele-health services, and reported times of having to end sessions by this means early due to not being able to keep their home location confidential to continue the services. The patient census remained consistent with an average census of 270 patients per month.

During the 2021 calendar year, the patients attended a total of 6824 hours of individual therapy and Soar established a 93% rating for ensuring that all patients attended the minimum monthly standards of 1 session by regulations. During the calendar year the overall rate for the minimum monthly standards decreased to a low of 83%, resulting from staff shortages and difficulty hiring staff during the COVID-19 pandemic. By the close of the fourth quarter this rate rose back to 97% as the program became fully staffed.

Additionally, in terms of the expected rate for the individual sessions, it is estimated that the patients completed 52% of the expected individual treatment hours per month. It is calculated that overall the patients of the program attended on average 2.1 hours of individual sessions within a month. Again, during the calendar year the overall rate for the minimum monthly standards decreased to a low of 41% (1.6 hours) in the 1st quarter, resulting from staff shortages and difficulty hiring staff during the COVID-19 pandemic. By the close of the fourth quarter this rate rose back to 58% (or 2.3 hrs. a month) as the program became fully staffed.

When examining some of the fluctuations in the completion of individual sessions from month to month, the following data points have been discovered. First, as mentioned earlier ongoing staff losses related to the COVID-19 pandemic affected the rate of treatment attendance. Second, the data also showed some difficulty in patients keeping telehealth appointments due to not having working phones or minutes, having to end sessions early or simply not answering the phone when a therapist calls at a scheduled time.

Finally, due to the COVID-19 restrictions the overall percent of treatment hour’s expectations soar did not complete any group therapy sessions for the calendar year. As a result of this decision, there is no data to examine to compare actual; and expected totals for group therapy. Prior to the impact of COVID-19, at the close of 2019,

it is calculated that the patients completed 71% of all of the expected treatment hours at the Lansdowne Office. This equates to each patient having on average 14 hours of counseling sessions per calendar month, being a mixture of both individual and group therapy sessions. At the close of 2021, it is calculated that the patients completed less than 15% of all of the expected treatment hours at the Lansdowne Office. This equates to each patient having completed less than 2.5 hours of counseling sessions per calendar month, being only individual therapy sessions.

Community Involvement

During the 2021 calendar year, SOAR increased involvement in the Bucks County, Delaware County and Philadelphia County recovery community and offering education to outside agencies. Due to the issues related to the COVID-19 pandemic, community involvement continued to be limited. Soar made attempts over the calendar year to find ways to generate community inclusion for its members and shall highlight some key points below.

First, Soar has fostered a working relationship with its neighbors within the immediate community. Soar Corp has partnered with the 8th District Police Department, first responders, local vendors and community organizations. For example, we have offered information to the Holmesburg and Bustleton Civic groups in addition to the community at large. Soar Corp has also worked with local vendors to address any concerns that have arisen. Through this process we have now become a point of contact for these vendors to refer a member who is in need of assistance.

Second, to help promote leadership to the members receiving services, Soar will provide a safe environment for peer recovery support services to develop and enhance the treatment experience. Peer recovery support services are designed and delivered by people who, themselves, have experienced both substance abuse disorder and recovery. The purpose of peer recovery support services is to provide hope to those in recovery, and to help them maintain recovery, thus reducing the likelihood of relapse. Peer recovery support shall be formulated through the Client Advocacy Group and communicated to the program. Soar made an attempt to host a client appreciation picnic as a mechanism to foster peer recovery support services. The picnic was hosted in the parking lot of the facility where the clients and their families were invited. We also had a holiday party for the clients and families, pictures with Santa, presents and snacks. Due to COVID-19 restriction and safety concerns, all other activities were postponed by the management team and Soar will allow these activities to restart once deemed safe to do so.

Additionally, Soar feels that is creating an atmosphere of community inclusion for the member being served and for its staff. Our goal is to help expose persons to the benefits of recovery, to a network of recovering members, while challenging community stereotypes. Prior to the COVID-19 outbreak and restrictions, Soar sponsored members and its staff to take part in the recovery walks in Philadelphia and Delaware Counties. Soar has helped to complete additional work in all three counties for which it resides. For example, Soar has connected to recovery, housing, human trafficking, shelters/food drives among other events.

Third, the Bucks county programs participated in the We Care program at the Davisville Church, offering presentations on addiction one of their classes. The Bucks county sites also invited the We Care Program to the facility to present their services to our staff during the monthly staff meetings. The Bucks county programs also met with the Council of Southeast Pennsylvania at their facility and at our facility to discuss community resources and services for members to use. Connections to the Delphi Behavioral Group were also generated with our

clinical team. Meeting with Pyramid Healthcare Inc. also took place over the calendar year to discuss programming and community resources available at each program for the members to utilize. Meetings with the Malvern Institute also took place over the calendar year to discuss programming and community resources available at each program for the members to utilize. Soar also engaged in meetings with White Deere to discuss programming and community resources available at each program for the members to utilize.

Additionally, Soar Corp has increased its efforts to coordinate the physical, behavioral health, and case management care of an individual. Soar examines the prescription database entry for all of its members and identifies outside providers a member sees for medications. If an outside provider is identified, the member in treatment will sign releases for the outside MD who is prescribing a medication and our medical team makes an attempt to contact the provider to review the medication. The goal of the collaboration effort is to gather medical information on the treatment being provided, to discuss medications that maybe contraindicated for treatment and to reduce any potential diversion of medications within the community being serviced.

Finally in 2021, Soar has also met with the Aid Care Group based out of Delaware County and is in the final process of establishing a referral agreement / contract with their facility. Once established, the agreement will allow for patients of Soar Corp in Bucks County, Delaware County and Philadelphia County to receive counselling, education and testing for HIV. The services will also provide case management services to the patients as well to assist with housing vocational and other resources. The Aids care group will facilitate the services at each of the Soar's locations to increase rate of attendance and to minimize transportation issues being a barrier to treatment. As a result of the community outreach, Soar has increased connection to community providers will allow SOAR make referrals for necessary services, for prospective members and current members, which are not within the professional expertise or scope of services of offered by Soar. In addition, transition services referrals will be strengthened for all members transitioning from the program

To coordinate physical and behavioral health issues, Soar makes attempts to outreach to other providers a person maybe seeing to gather medical information on the treatment. Soar has all members signed a release of information to a primary care doctor on admission. Soar also has persons in treatment sign releases for any outside MD who is prescribing a medication and our medical team makes an attempt to contact the provider to review the medication. This outreach attempt is documented

Safety and Emergency Information

In Terms of health and safety outcomes, yearly review has been completed on the fire drills, disaster drills, and the grievances and incidents filed for the 2021 calendar year. It should be noted, there was one fire drill recorded for each month of the 2021 calendar year. Within Philadelphia, the drills combined showed a total of 6 problems that reported throughout the drills. There were 2 drills that the staff did not hear the alarm, 2 issues of staff being unsure of where to meet, and 2 issues relating to windows and doors being left open. Staff has met frequently in health and safety meetings to discuss all of the fire drills. There has been a new Safety Officer elected to improve fire drill issues reported for the upcoming year. All staff is responsible to take their fire safety test yearly to improve fire safety drill issues.

Soar Corp (Bristol) completed all of the assigned disaster drills for all of the 2021 calendar year. Different patterns and trends from the drills were recorded and examined in order to establish re-occurring trends and create new ways to improve the trends to increase our accuracy of all Disaster drills. Over the last 12 months, there were a total of 2 different issues reported. Each issue that was established within each drill was discussed as well as staff and patients being re-trained or reminded of what should occur throughout each drill which could contribute

to no issues being reported more than once over the calendar year of 2019. Staff will continue to meet and discuss the 6 specific types of drills and ensure all staff existing and new is properly trained and patients are being made aware of the drills procedures.

An annual review of the incidents that have occurred over the course of the 2021 year has been completed to identify trend and outcomes for the site. Overall 3 different incidents were reported over the year and this is an increase in the number of reports as compared to the 2019 calendar year however in 2016 the site was only open for 2 months with 2 incidents compared to 3 incidents in 12 months in the year 2017. Statistically 67% (2 incidents) of all of the reported incidences for the year fell within the category of medication/dosing related issues and 33% within the category of patient death (1 incident). In terms of dosing, reported incidents fell within this group due to issues of a dose being spilled by nursing staff and an inaccurate amount of medication was entered into the computer system. The medication spill was rectified by incorporating alternative storage in the nursing office in order to reduce clutter on the counter. The nurse that entered inaccurate information into the computer was written up for this behavior. The third incident was due to a patient who passed away in her sleep and was not medication or substance abuse related to our knowledge. Moving forward we will continue to advocate that our clients seek medical attention with their primary as needed and at least annually for an annual exam.

An annual review of the grievances that have occurred over the course of the 2021 year has been completed to identify trend and outcomes for the site. Overall 12 different incidents were reported over the year and this is an increase in the number of reports as compared to the 2016 calendar year where there were 0 grievances. Overall it appears that a large portion of the grievances centered on a patient filing an appeal to a decision of a detox that was started. Other grievances were filed including patients requesting new counselors (Other type specified), patient to patient confidentiality, policy and procedure questions/ concerns, and staff misconduct. We believe with more patients being added over the last year, the amount of grievances that have been received could have played a part in the increase of grievances as well as the change in leadership in the last quarter of the year which increased accountability by staff and subsequently patients.

Information from Outside Sources

Soar Corp has been reviewed by outside certification and licensure bodies during the course of 2021, and has been found to be in compliance with all standards. All four facilities have been reviewed by the PA Department of Drug and Alcohol and have received full licensure accreditation. Additionally, the consumer satisfaction teams have completed onsite reviews in the Philadelphia and Lansdowne locations, citing positive feedback from members being serviced and no recommendations for improvement. Finally, the DEA has completed their routine inspection of the Philadelphia site and Soar was found to be in full compliance with all regulations.

Information and Technology Systems

During the course of the 2021 year, several large improvement projects were done to the current IT systems for Soar ranging from hardware, software and network capabilities. Specific changes and upgrades were made in order to meet program changes related to the COVID-19 outbreak, to allow services to continue without interruption for the patients being served. Also as result of this shift other IT needs identified for the 2021 calendar year were only partially completed and shall be continued during the 2022 year.

First, as of June of 2021, Soar Corp has transitioned fully to Tower Systems EMR database and is now seen to be paperless. In order to use this program as a full electronic medical record system, Soar has worked with Tower systems to modify forms, settings and documentation requirements in order to meet PA state and funding regulations. Modifications included the addition of electronic signature pads, the use of “wet” signatures on treatment plans and intake documents, the ability to scan outside documents into the EMR system and the importing of urine screen results direly into the EMR system from the lab. Other modification and changes will

be planned for the next calendar year that include the modification of the MD physical portion of the EMR and the modification of the annual justification portion of the Emr.

Second, in terms of security and confidentiality, our IT vender has continued to work with Soar to revise the security level platforms within our existing computer system. Now all users are assigned a security level within the system which allows a user to only assess information within their job description. Additionally in terms of security, all computers automatically lock out after 3 minutes of inactivity and computer password for all users must be changed every 60 days. Additionally in terms of security, updated virus protection packages have been installed on each computer across all sites. Finally, in terms of security, all users have now been assigned their own pin number and password within the EMR system. The pin number and password must both be used when signing all electronic documents within the system

Third, during the calendar year of 2021, the issue of data speed and transmission was addressed by our IT vender in the following ways. First, the IT manager worked to redevelop, and organized DFS system (**Distributed File System**) to ensure instant mirroring has created across all sites. Within this process the group shares on the agencies multiple servers were reformatted to link shares into a single hierarchical system. . Second, the IT manager also worked on updating and locking down the firewall configurations across all locations while turning off all non-essential services on firewalls. Finally, the IT vendor decommissioned outdated servers while cleaning up unneeded virtual machines that were tasked with single server roles.

Fourth, in terms of equipment, Soar has invested in the purchase of 10 computers over the course of the calendar year. The new computers were used to replace outdated hardware in the nursing and dispensing stations, front desk and check in areas along with specific counseling offices. Soar also invested in and converted all existing computers to SSD drives as a mechanism to increase speeds and networking times. Other items were purchased during the year in order to aid in the action plan for COVID-19 include web cams, head sets, printers and other devices to help support remote / telehealth treatment for the patients.

Fifth, our IT vender has been working on creating a virtual environment between all of Soar's sites that will allow users to access their desktop from any location. Specific routers, switches, and firewalls were replaced or modified in order to increase the efficiency within the virtual environment. The data backup systems were converted to run daily at the close of business and are now stored in 2 separate locations. Cloud data backup systems are currently being reviewed as a method to eliminate server based systems for back up. By the end of the fourth quarter of 2021, data transfer rates within a site and between sites dramatically increased and there was an ability to localize specific users and limit wireless traffic within the system.

Additionally, issues around the reliability of the remote access system for the EMR system for outside auditors and reviewers to use for inspection purpose need to be addressed. A new system for the remote log in to the EMR system has been identified and is in operation but there continues to be some ongoing issues with the remote connection to the servers, resulting in failed attempts for remote logins. Other feedback from a funding source indicated that they could not use the remote system suggested to access the EMR due to it not being fully encrypted / protected. Our current IT vender is working on the issue and will have this resolved within 2022.

Finally, by the close of 2021, new information and technology policies were developed to address changes within the IT systems. Many of the policies developed were associated with the migration of the agency to an EMR system and others were a result of changes in procedure.

Financial Health

Finally, the financial health of the each site of the agency was examined to identify any issues and concerns. For the 2021 year Lansdowne generated a total of revenue in \$2,106,249 with a total operating expense

of \$1,800,000 dollars being generated for the 2021 Lansdowne site. For the 2021 year Philadelphia site generated a total of revenue in \$4,974,235 with a total operating expense of \$4,600,000 dollars being generated for the 2021 Philadelphia site. For the 2021 year Levittown generated a total of revenue in \$1,235,269 with a total operating expense of 750,000. For the 2021 year Warminster generated a total of revenue in \$500,000 with a total operating expense of 480,000.

Additional expenses with were generated computer and infrastructure upgrades, along with increasing security adding more full time guards and hiring a shift supervisor for the security personal. Other expenses included hiring additional staff (including an additional MD), computer and networking issues, along with additional furniture. Additional expenses were generated for improvements to the physical plant to increase safety. Items such as such external lighting, camera and security monitoring systems, along with other mechanical upgrades were completed in the 2019 year. Other physical upgrades expenses included building a new chart room to increase patient confidentiality of records, and upgrading the nursing dispensing stations to reduce accidental spills of medication by patient and staff. Soar also had additional expenses for computer and hardware upgrades to increase our efficiency and effectiveness for the services that are being delivered. A final additional expense included construction fees and cost to build a new 4th facility that will be opened in Warminster PA in 2019. In total these expenses totaled \$1,010,562

Conclusions and Future Goals

Philadelphia Recommendations for 2022

First in terms of accessibility, recommendations for 2022 shall be as following. First Soar will strive to complete a same day admission for patients in the next calendar year while holding a minimum standard to complete intakes within a 24 hour window for all inductions and inquiries. Soar shall monitor the turnaround time of urine screen analysis so ensure screens are completed within 24 hours. The intake department shall use instant test for the intake process to help expedite the process for all walk in admissions and screenings. Second, will continue to increase both its telehealth and in person services during the COVID-19 pandemic to give patients more options for treatment to meet their comfort levels. Finally, Soar shall explore the possibility of expanding the current services of the Psychiatrist to address the growing trend of patients using benzos at intake and during the course of treatment. Implementing this service expansion will accommodate the needs of the patients and provide more effective wrap around services to ensure patient stability.

Second in terms of treatment effectiveness, Soar PHILADELPHIA would like to set the following benchmarks for the 2022 calendar year. First for the overall consistent urine screens, Soar would like to increase its annual percentage to 40%. Second for the opiate negative results, Soar would like to achieve a 70% annual rate. Second, with the ongoing issue of medical marijuana and patients seeking out the prescription cards for this substance, Soar would like to define a protocol for managing prescription and illicit use of this substance. The current take home policy will need to be reviewed due to this issue and possible changes will need to be submitted to regulatory bodies for approval. Third, Soar will need to continue to monitor the current COVID-19 pandemic and adjust programming to meet the needs of the patients being served. A final recommendation shall be to reduce the total percentage for overall illicit substance abuse by 10%. These recommendations shall be achieved by continuing to specialize care to meet the needs of the members. Some of the specialized care shall focus on developing tracks of cocaine use, methamphetamine use and mental health needs

Third, in terms of treatment efficiency, the following recommendations for improvement shall be made for 2022. First, Soar shall continue to examine its programming and find ways to continue treatment for patients

during the COVID-19 restrictions. Soar shall start to explore ways to institute group therapy sessions for patients that desire this service in a means that practices social distance. The options of expanding telehealth to include groups by means of virtual services (zoom etc.) shall be explored. Second, Soar will examine its previous group therapy structure, group times and length of the groups to see if improvements can be made to this service. Finally, Soar shall ask for and examine feedback from the patients of the program on what therapy sessions should look like post COVID-19 to accommodate patient stated needs.

Warminster Recommendations for 2022

Recommendations for accessibility in 2022 shall be as following. First Soar will strive to complete a same day admission for patients in the next calendar year while holding a minimum standard to complete intakes within a 24 hour window for all inductions and inquiries. Soar shall monitor the turnaround time of urine screen analysis so ensure screens are completed within 24 hours. The intake department shall use instant test for the intake process to help expedite the process for all walk in admissions and screenings. Second, Soar shall increase the availability of both the MD and the intake staff to complete intakes and inductions during the year calendar year. The goal will be to expand this service so an induction may occur 5 days a week as opposed to 3 days a week. Third, Soar will continue to increase both its telehealth and in person services during the COVID-19 pandemic to give patients more options for treatment to meet their comfort levels. Third, Soar shall review its current benzo policy with the Medical Director and determine if the current policy is acting as a barrier to admissions and treatment. Any revisions to the policy shall be completed within the next calendar year. Finally, Soar shall explore the possibility of expanding the current services of the Psychiatrist to address the growing trend of patients using benzos and amphetamines at intake and during the course of treatment. Expanding this service expansion will accommodate the needs of the patients and provide more effective wrap around services to ensure patient stability.

Recommendation for efficiency shall be as follows for 2022. First, Soar shall continue to examine its programming and find ways to continue treatment for patients during the COVID-19 restrictions. Soar shall start to explore ways to institute group therapy sessions for patients that desire this service in a means that practices social distance. Second, Soar will return to the use of group therapy in person by the beginning of 2nd quarter of 2022. Soar will start groups on a voluntary attendance basis and will then transition to an expected status. Soar Corp will examine its current group practice of weekly status and the length of the group session. If deemed necessary modifications to group practice maybe formulated to meet patient needs and concerns for safety. Third, Soar will aim to achieve a 70% expected treatment level for the individual sessions to ensure that the patients are in compliance with state and regulatory standards. Finally, by the close of 2022 Soar Corp will aim for the program to be providing treatment at a 70% expected treatment level. If this level is achieved, the patients be receiving around 10 hours of therapy a month, being a mix of both group and individual sessions.

Finally Soar Warminster shall make the following recommendations for treatment effectiveness for the 2022 year. First for the overall consistent urine screens, Soar would like to increase its annual percentage to 40%. Second for the opiate negative results, Soar would like to achieve a 70% annual rate. Second, with the ongoing issue of medical marijuana and patients seeking out the prescription cards for this substance, Soar would like to define a protocol for managing prescription and illicit use of this substance. The current take home policy will need to be reviewed due to this issue and possible changes will need to be submitted to regulatory bodies for approval. Third, Soar will need to continue to monitor the current COVID-19 pandemic and adjust programming to meet

the needs of the patients being served. Fourth, Soar will examine the amphetamine use and trend at this facility and identify a treatment protocol if needs to address ongoing illicit use. A final recommendation shall be to reduce the total percentage for overall illicit substance abuse by 10%. These recommendations shall be achieved by continuing to specialize care to meet the needs of the members. Some of the specialized care shall focus on developing tracks of cocaine use, methamphetamine use and mental health needs

Levittown Recommendations for 2022

Recommendation for improvement shall be as follows for 2022. First, Soar shall continue to examine its programming and find ways to continue treatment for patients during the COVID-19 restrictions. Soar shall start to explore ways to institute group therapy sessions for patients that desire this service in a means that practices social distance. Second, Soar will return to the use of group therapy in person by the beginning of 2nd quarter of 2022. Soar will start groups on a voluntary attendance basis and will then transition to an expected status. Soar Corp will examine its current group practice of weekly status and the length of the group session. If deemed necessary modifications to group practice maybe formulated to meet patient needs and concerns for safety. Third, Soar will aim to achieve a 70% expected treatment level for the individual sessions to ensure that the patients are in compliance with state and regulatory standards Finally, by the close of 2022 Soar Corp will aim for the program to be providing treatment at a 70% expected treatment level. If this level is achieved, the patients be receiving around 10 hours of therapy a month, being a mix of both group and individual sessions.

Soar Levittown shall make the following recommendation for the upcoming calendar year. First, Soar Levittown will advocate to local funding source along with state regulatory bodies to allow the use of Telehealth options for individual session post the COVID-19 emergency orders. The agency is in agreement with patient feedback that this option allows a traditional MMT patient to have more freedom to meet the demands of treatment and within their personal life. Second, Levittown will advocate to local funding source along with state regulatory bodies to review the current state standards for take home order and to adjust the standards to meet the current needs of the members being served. Thirds Soar will started to develop a plan of action to develop a procedure to rescind the emergency take home status and to adjust current order to me the standard orders for takes homes as patient feedback as suggested this is a concern. Fourth, a plan of action shall be developed in order to return group therapy sessions. The agency shall continue to discuss this action with the county office of health and behavioral health to receive verification it is deemed safe. Fifth, the site will explore mechanisms to expand family and community involvement into the program and to offer further patient support. Finally, the program will explore a way to include and start a patient advocate group into the program and to include the feedback from this group into program development.

Lansdowne Recommendations for 2022

Recommendations for accessibility for 2022 shall be as following. First Soar will strive to complete a same day admission for patients in the next calendar year while holding a minimum standard to complete intakes within a 24 hour window for all inductions and inquiries. Soar shall monitor the turnaround time of urine screen analysis so ensure screens are completed within 24 hours. The intake department shall use instant test for the intake process to help expedite the process for all walk in admissions and screenings. Second the agency shall explore increasing services being offered at the facility in order to remain competitive with other facilities in the immediate area. Services shall include increase resources for case management, housing food and transportation for members. Finally the agency shall continue to seek out a contract from CBH for Philadelphia county residents to enter treatment who live within a block of the program. Seeking this contract will allow more treatment to seek treatment and reduce a barrier to treatment

Soar Lansdowne would like to set the following benchmarks for treatment effectiveness for the 2022 calendar year. First for the overall consistent urine screens, Soar would like to increase its annual percentage to 40%. Second for the opiate negative results, Soar would like to achieve a 70% annual rate. Second, with the ongoing issue of medical marijuana and patients seeking out the prescription cards for this substance, Soar would like to define a protocol for managing prescription and illicit use of this substance. The current take home policy will need to be reviewed due to this issue and possible changes will need to be submitted to regulatory bodies for approval. Third, Soar will need to continue to monitor the current COVID-19 pandemic and adjust programming to meet the needs of the patients being served. Fourth, Soar will examine the amphetamine use and trend at this facility and identify a treatment protocol if needs to address ongoing illicit use. A final recommendation shall be to reduce the total percentage for overall illicit substance abuse by 10%. These recommendations shall be achieved by continuing to specialize care to meet the needs of the members. Some of the specialized care shall focus on developing tracks of cocaine use, methamphetamine use and mental health needs

Recommendations for treatment efficiency shall be as follows for 2022. First, Soar shall continue to examine its programming and find ways to continue treatment for patients during the COVID-19 restrictions. Soar shall start to explore ways to institute group therapy sessions for patients that desire this service in a means that practices social distance. Second, Soar will return to the use of group therapy in person by the beginning of 2nd quarter of 2022. Soar will start groups on a voluntary attendance basis and will then transition to an expected status. Soar Corp will examine its current group practice of weekly status and the length of the group session. If deemed necessary modifications to group practice maybe formulated to meet patient needs and concerns for safety. Third, Soar will aim to achieve a 70% expected treatment level for the individual sessions to ensure that the patients are in compliance with state and regulatory standards Finally, by the close of 2022 Soar Corp will aim for the program to be providing treatment at a 70% expected treatment level. If this level is achieved, the patients be receiving around 10 hours of therapy a month, being a mix of both group and individual sessions.

IT Recommendations for 2022 shall be as followed.

First Soar Corp will need to improve the mechanisms and reliability of the remote access system for outside reviewers and auditors to use to access the new EMR system. During the curse of 2021, it became apparent that the current setup and system being used for remote auditing was not sufficient nor met the criteria for remote access of the EMR records. The agency shall explore the purchase of a business level meeting system such as Zoom or other platform for each location (4 in total) in order to improve remote auditing capabilities.

Seconds, Soar Corp will need to improve some hardware within of the local servers in order to improve the overall speed within the network. Since transitioning to the EMR system, there have been moments of slow response time or freezing within the application that need to be resolve. At the end of 2021, the source of the problem has been identified and shall be addressed within the 1st quarter of 2022

Third, in terms of the EMR system, the following modifications for improvement shall be facilitated in the 2022 calendar year. Soar shall work with Tower systems to create modification and changes to the MD physical section of the EMR. The modifications shall include the removal of information not being used by Soar Corp, adding data points required by our funding sources and improving the flow of the current format in the EMR. Additionally, modifications of the annual clinical justification section of the EMR shall be facilitated within the 2022 calendar year. Currently this section does not meet stat and funding requirements and needs to be expanded

Fourth in terms of data backup systems, Soar shall explore the ability to move to a full cloud backup system in the next calendar year. The hardware and software needs of this transition need to be review along with any cost associated with this. Additionally, the monthly / year fees associated with this process need to be explored and review. Once the full report on cost and upkeep is establish it needs to be review by the board for approval.

Finally, Soar shall work with the IT manager to develop an Electronic Human Resource department for employee records to be stored upon. The EHR shall include the development of all human resource forms, applications and records. The EHR system shall allow the ability to scan to a specific employee file / folder. The EHR will be developed with security level permissions and settings to minimize data breach. This new system should be ready for use by the close of the 3rd quarter of 2022

Community Outreach Recommendations for 2022

In the coming year we hope to continue to be involved in the community by attending local events sponsored by the Bucks County Drug & Alcohol Commission, Inc. and Magellan as well as local grassroots organizations that hold awareness events. We hope to strengthen our relationships with Children and Youth and Penn Foundation Mobile Engagement Services program as well as The Council of Southeast Pennsylvania and Family Services Center of Excellence program.

Second, Soar will continue its efforts to create an atmosphere of community inclusion for the member being served and for its staff. Our goal is to help expose persons to the benefits of recovery, to a network of recovering members, while challenging community stereotypes. Once the COVID-19 restrictions are lifted, Soar will resume its efforts to sponsor members and its staff to take part in the recovery walks in Philadelphia and Delaware Counties. Soar will also resume its efforts to support community event that promote providing housing, human trafficking awareness, and on the promotion of shelters and food drives.

Finally, Soar will work to re-establish the peer recovery support groups at each facility will have a peer leader, who provides support to its peers and act as a mentor or coach. The peer leader shall be nominated from the Client Advocacy Group. It is suggested that members of the Advocacy Group are compliant with their current treatment and in recovery from illicit use. The peer support group should be a diverse set of persons who have substance abuse disorders, HIV/AIDS, or those with the same or different cultural or religious backgrounds. The Peer Recovery Support Group will promote and establish its own values, a sense of self-direction, empowerment, choice, giving back to others, to keep recovery first and be a leader in the program. A Representative of Soar shall meet with the peer group on a quarterly basis to obtain feedback and information from the group. During the meeting, the peer support groups can and/or make suggestions to the Soar Representative ways the program can adapt to the needs of its' members being served, ways the program can involve in outside community events and establish further relationships with community providers.

SOAR Board of Directors

Mark Shvartsburd

Kira Zhivalyuk

Michael Avanisky