



PLANT THE SEED YOUTH TREATMENT SERVICES

www.planththeseedyouthtreatmentservices.org

PROPOSAL

9/20/17

Michael Y. Davis
mdavis@ptsyts.org

Board of Zoning Adjustment
District of Columbia
CASE NO.19677
EXHIBIT NO.33

The National Institute on Drug Abuse (NIDA) has reported that 41% of juvenile arrestees tested positive for marijuana (NIDA, 2013).

In response to this growing statistic, the District of Columbia Department of Behavioral Health has begun to take steps to close an important health services gap and has issued an RFP to establish residential treatment services to youth for substance abuse disorders.

As a credentialed practitioner in the field of Helps, Michael Y. Davis has gathered his own resources, financial as well as professional, to open Plant The Seed Youth Treatment Services (PTSYTS), a program for residential youth substance abuse treatment in the District's Ward 7, the community where he and his family reside. Drawing from a broad professional experience, he envisions the site at 5212 Astor Place, SE, as ideal in its homelike setting to create an environment that fosters the holistic approach he wishes to provide for each individual's 28-day treatment. A brief and preliminary canvass of the surrounding community has assured that Plant The Seed Youth Treatment Services is poised for the right place, the right time.

Demographically, Ward 7 presents some particularly striking characteristics as pertains to children, youth and young adults in the District of Columbia, and the Ward statistically stands as a community dire in need of the services that are being proposed by Plant The Seed Youth Treatment Services. Services representing health care options heretofore unavailable in Ward 7, and that do present strong possibility as a contributing factor underlying the myriad of concerns involving the community's youth and the community's health as a whole. While it is that Plant The Seed Youth Treatment Services is seeking to make the initial moves in addressing this current health crisis, the hope is that, as a health services Provider, we will be leading the way towards closing this gap for needed services to the community.

The following pages describe Plant The Seed Youth Treatment Services as an organization, its mission, treatment approach, professional qualification, and business concerns as part of the Ward 7 SMD E06 community. Data is gathered as context to provide a basis that highlights the status and conditions, both social and societal, that served to generate the District of Columbia initiative to begin to offer services to youth for residential substance abuse treatment.

DC YOUTH DEMOGRAPHICS

Youth	1 in every 5 DC residents is an adolescent between the ages of 10-24
Poverty Level	Consistently more children live in poverty in the District compared to the rest of the nation, particularly Wards 7 and 8
Juvenile Delinquency	The rate of youth placed in juvenile detention and correctional facilities is also consistently higher than the national average - In 2010, residential placements were twice as high as the nation
Health Indicators	1 in 100 youth in the District is HIV positive
	Teen pregnancy rate is 45.4 per 1000 girls
Death rate	Homicide/assault is the leading cause of death (55%) among 10-24 year olds

Among High School students, these rates are consistently higher than the national average

Used marijuana for the first time before age 13	11%
Have used marijuana during lifetime	43%
Used marijuana during last 30 days	26%
Had at least 1 drink of alcohol 1 or more days of their lives	65%

Youth access to substance abuse treatment in DC

<u>OUTPATIENT SERVICES</u>	<u>RESIDENTIAL SERVICES</u>
Ward 1 - Latin American Youth Center	Baltimore, MD <ul style="list-style-type: none"> - Distance: 40 miles - Restrictive for family support - Limits to transitioning/continuity of care
Ward 4 – Riverside Treatment Center	
Ward 6 - Federal City Recovery Services	
Ward 8 – Hillcrest Children’s Center	

DEMOGRAPHICS: WARDS 7 AND 8

- **53% of DC children, youth and young adults reside in Wards 7 and 8**

Nearly 1/3 of students do not graduate High School:

Graduation Rates	Ward 7	72%
	Ward 8	69%

Decrease in young adult male population (2010 Census)

Ward 7	Age 15 -19	9.3%	Ward 8	Age 15 - 19	10.2%
	Age 20 - 24	7.0%		Age 20 - 24	8.7%
		25% ↓			15% ↓

Youth access to substance abuse treatment

<u>OUTPATIENT SERVICES</u>
Ward 8 – Hillcrest Children’s Center
Ward 7 – None

<u>RESIDENTIAL SERVICES</u>
Baltimore, MD
<ul style="list-style-type: none"> - Distance: 40 miles - Restrictive for family support - Limitations to transitioning/continuity of care

PLANT THE SEED YOUTH TREATMENT SERVICES

Founder/Clinical Director: Michael Y. Davis, LPC

- Long-time Resident of the District of Columbia
- Current Residency: Ward 7 (Since 1990)
- Current Profession: Clinical Director, local Substance Abuse Service
- Education: Master's Degree in Human Services
- Certification: Licensed Professional Counselor
- Background: 12 years of experience in substance abuse treatment

Professional Staff Qualifications

- All Clinical Staff have received In-House Training on the Evidence-Based Treatment Modalities the program utilizes, i.e.:
 - Co-Occurring Disorder Competency
 - Person-Centered Treatment Planning
 - ACRA Reinforcement Approaches
 - Motivational Interviewing
 - “The Matrix”
 - Living In Balance
- Clinical Care Coordinator: Licensed Professional Counselor (20 years)
- Program Administrator: MS Community Health, Certified Health Educator
- Program Director: Current Residential Specialist, Baltimore, MD
- Certified Addictions Counselors
- Social Worker (Consultant)
- Case Management (Consultant)

Program Description

- **Mission:**

Plant The Seed Youth Treatment Services adheres to the disease concept of alcohol and drug abuse and believes that the addictive process, when left untreated, is progressive and fatal.

Our mission is to provide comprehensive treatment /recovery and related services over a 28-day residential period to adolescents and youth who have chronic issues that result in devastating consequences inclusive of mental and medical issues, homelessness and/or incarceration. To treat these chronic substance abusers and return them to the community chemical free and with the support they need.

- **Clinical treatment vs. Residential placements (Group Homes)**

In accordance with Department of Behavioral Health Policies, treatment services are provided via an individualized treatment plan that provides for:

- Assessment/Diagnostic and Treatment Planning
 - Comprehensive Assessment, as required
 - Ongoing assessment, Required within seven (7) days of admission
 - Brief assessment as required
- SUD Counseling as a clinically appropriate combination of individual, Family, and Group Counseling, and Counseling-Psycho-education, in accordance with the client's assessed needs.
- Person-centered approach to care:
 - Targeting the root causes of substance abuse and a step further to address the spiritual component of addiction as well.
 - Core-influence issues, i.e., peer pressure, environmental influences, individual self-esteem and awareness development
- Clinical Care Coordination, which establishes the frequency of the ongoing assessments and updates to the treatment plan. Performed for a minimum of 3 hours per week.
- Case Management – a minimum of sixteen units (4 hours) of Case Management is performed every twenty-eight days unless otherwise required and approved by CCC.
- Drug Screening is required at admission and as clinically indicated throughout the course of treatment.
- Crisis Intervention is performed as needed.
- Medication Management is performed (supervised by a qualified Practitioner) and documented for appropriate clients.

Continuity of Care

Collaboration of Services

- Transition to Outpatient, Recovery support services
- Department of Behavioral Health Services
- DC Hospitals/Other Health services
- Core Services to address Co-occurring Disorders
- Child and Family Services Agency
- Court and Family Services
- DC Public Schools – Client academic support
- MPDC Programs
- Community Literacy Programs
- Vocational support
- Community Mentorship Programs

Community Considerations

- **Homelike Setting vs. Institutional environment**

- **24-hour monitoring / supervision**

- **Facility perimeter surveillance**

- **Client-Community Engagement**
 - Family Counseling (Required)
 - Scheduled Visitations
 - Visitor Orientation Session Provided
 - Client accountability

References

DOH District of Columbia Community Health Needs Assessment Feb. 28, 2014

District of Columbia Office of Planning Demographic & Housing Profiles 2010 by Ward

DC Department of Behavioral Health (DBH) Report: *Behavioral Health for Children, Youth and Families in the District of Columbia: A Review of Prevalence, Service Utilization, Barriers, and Recommendations*, May 2014