

LACKAWANNA COUNTY HUMAN SERVICES BLOCK GRANT PLAN

FISCAL YEAR 2018 - 2019

LACKAWANNA COUNTY COMMISSIONERS

PATRICK M. O'MALLEY JERRY NOTARIANNI LAUREEN A. CUMMINGS

Appendix A Fiscal Year 2018-2019

COUNTY HUMAN SERVICES PLAN

ASSURANCE OF COMPLIANCE

COUNTY OF: Lackawanna

A. The county assures that services will be managed and delivered in accordance with the county Human Services Plan submitted herewith.

B. The county assures, in compliance with Act 80, that the county Human Services Plan submitted herewith has been developed based upon the county officials' determination of county need, formulated after an opportunity for public comment in the county.

C. The county and/or its providers assures that it will maintain the eligibility records and other records necessary to support the expenditure reports submitted to the Department of

Human Services.

D. The county hereby expressly, and as a condition precedent to the receipt of state and federal funds, assures that in compliance with Title VI of the Civil Rights Act of 1964; Section 504 of the Federal Rehabilitation Act of 1973; the Age Discrimination Act of 1975; and the Pennsylvania Human Relations Act of 1955, as amended; and 16 PA Code, Chapter 49 (Contract Compliance regulations):

 The county does not and will not discriminate against any person because of race, color, religious creed, ancestry, origin, age, sex, gender identity, sexual orientation, or disability in providing services or employment, or in its relationship with other providers; or in providing access to services and employment for individuals with

disabilities.

2. The county will comply with all regulations promulgated to enforce the statutory provisions against discrimination.

COUNTY COMMISSIONERS/COUNTY EXECUTIVE

	Signatures	Please Print	-
Pax			Date 27-17
PATRICK	O'MALLEY,	CHAIRMAN	Date:
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FY 2018-2019 LACKAWANNA COUNTY HUMAN SERVICES BLOCK GRANT (HSBG) PLAN

COUNTY PLANNING PROCESS

The planning and leadership team for Lackawanna County is comprised of the Executive and Assistant Director, Lackawanna County Department of Human Services, Chief Administrative Officer, Lackawanna County Department of Human Services, Administrator, Lackawanna-Susquehanna Behavioral Health/Intellectual Disabilities/Early Intervention Program and the Director, Lackawanna-Susquehanna Office of Drug & Alcohol Programs. While the categorical program leadership serves as the core planning team, many other stakeholders are involved and have input into the process which evolves continuously throughout the year.

The Lackawanna County Department of Human Services has built a framework for the County Planning process which utilizes the expertise of various stakeholders, providers, family members, consumers, consumer groups and partners from other systems to assist in the planning and delivery of services. Input is solicited from these groups through committee membership, focus groups, provider networks and advisory boards.

Representatives from the various human service categorical programs are members of the Center for Family Engagement, Interagency Council, Continuum of Care, Housing Coalition, Criminal Justice Advisory Board, Reentry Committee, Pretrial Initiative and Recovery Oriented System of Care (ROSC) which meet at varying intervals throughout the year. In addition, the Executive Director of the Lackawanna County Department of Human Services is the Chair of the Northeast Behavioral Health Care Consortium (NBHCC), the Health Choices Managed Care Program for Lackawanna, Luzerne, Wyoming and Susquehanna Counties. Additionally, the Lackawanna County Department of Human Services and its categorical agencies maintain close working relationships with the PA Department of Human Services, the Scranton-Lackawanna Human Development Agency and the United Way of Lackawanna/Wayne Counties.

These various boards, focus groups and committees have diverse membership in addition to county representation. All input received through these forums is brought to the attention of the appropriate categorical department head and ultimately to the human services executive director for further research, evaluation, discussion and consideration in the planning for services.

The Human Services Block Grant Plan is developed by the Executive Director, Human Services and the core leadership team based upon a comprehensive system review in addition to the input received throughout the year from the above referenced sources, input received at the two public hearings, review of county and program data, expenditure and

service levels from the previous fiscal year as well as identified emerging trends and increased need among programs.

In Lackawanna County, the BH/ID and D&A Programs are part of a Local Collaborative Arrangement (LCA) with Susquehanna County. Through the Susquehanna County Systems of Care Initiative, the Programs receive planning input and system performance indicators from community stakeholders and build on the efforts of the Susquehanna Human Services planning group, which provides an ongoing forum to discuss human service needs in Susquehanna County.

In addition to the above ongoing opportunities for participation in the planning process, the stakeholders along with the public were given the opportunity to provide input into the planning process at two public hearings. An announcement of the hearings was published twice in the legal section of the Scranton Times and the Susquehanna Independent, local general circulation newspapers in Lackawanna and Susquehanna Counties and was posted on the Lackawanna County website.

For providers, consumers, family members, etc. who were unable to attend either of the hearings, the option was available to submit written comments via mail or email to the Lackawanna County Department of Human Services.

- Advisory boards involved in the planning process were the Lackawanna-Susquehanna Behavioral Health/Intellectual Disabilities/Early Intervention Program and the Lackawanna-Susquehanna Office of Drug and Alcohol Programs.
- Across categorical program areas every effort is made to provide services in the least restrictive setting appropriate to an individual's needs. In the Behavioral Health/Intellectual Disabilities Program numerous strategies are implemented to support service recipients in gaining access to the most integrated setting (least restrictive) including the choice of willing and qualified providers and developing capacity across systems to address complex support needs (ex. dual diagnosis). Procedures are also implemented to divert services and supports to lower levels of care when indicated; including the incorporation of natural supports in the planning process. Funds will be allocated in Behavioral Health to provide outpatient and partial hospitalization services in place of inpatient services where appropriate. Targeted case management, community residential, housing and family support services will be utilized to assist individuals in accessing services that enable them to reside within the community. Also, Community Hospital Integration Project Program (CHIPP) funding will assist with the discharge of individuals from the Clarks Summit State Hospital to community settings. The Intellectual Disabilities Program will allocate funding for Case Management, Community Residential and Community Based Services to offer services in the least restrictive setting.

The Lackawanna-Susquehanna Office of Drug and Alcohol Programs offers a full continuum of care to individuals of all ages who are in need of substance use disorder treatment services including: outpatient counseling, intensive outpatient counseling, partial hospitalization, halfway house, non-hospital detoxification, non- hospital inpatient rehabilitation (short term / long term), hospital based detoxification, hospital based rehabilitation, medication assisted treatment, case management and recovery support.

Lackawanna and Susquehanna Counties developed their plans based on the existing allocations from the commonwealth with no substantial program or funding changes. The availability of funding will be closely monitored during the year and adjustments will be made to provider allocations based on spending patterns and changing needs.

PUBLIC HEARING NOTICE

As required for counties participating in the Human Services Block Grant, Lackawanna County held two public hearings. The first hearing was held on Monday, April 30, 2018 and the second hearing was held on Monday, May 7, 2018.

The public hearing notice was published in the Scranton Times for Lackawanna County residents and in the Susquehanna Independent for Susquehanna County residents on Wednesday, April 25, 2018 and on Wednesday, May 2, 2018.

Included as attachments in the Plan are:

- The actual newspaper advertisement of the public hearing notice
- Proof of publication for each public hearing notice
- The sign-in sheet from each public hearing

CROSS-COLLABORATION OF SERVICES

HOUSING

In September 2015, Lackawanna County established the position of Housing Coordinator within the Department of Human Services. This position is designed to work in cooperation with the county categorical program agencies, Aging, Adult Services, Office of Youth and Families, Behavioral Health/Intellectual Disabilities and Drug & Alcohol and their respective clients in resolving individual concerns, i.e. eviction, rental assistance, as well as working toward resolution of identified system issues, i.e. housing for homeless youth ages 18-24, helping older adults with Aging in Place and rapid rehousing for individuals/families with an addiction.

In Lackawanna County there are numerous agencies that provide housing services which range from case management, rental assistance through emergency shelter to permanent housing. The Housing Coordinator has established professional relationships with these agencies and works with them on an individual case basis as well as on a community basis to identify and resolve system issues. A majority of the ongoing working relationships with the housing service providers were developed and continue to evolve through committee membership. Committees on which the housing coordinator serves are:

The Scranton/Lackawanna County Continuum of Care which is a coalition of social service organizations working together to improve services for the homeless in the region. The CoC meets monthly to discuss the programs currently operated by each agency and to identify

ways to expand services to better meet the needs of the community. Goals of the CoC are to prevent and end homelessness, support the needs of the homeless population and help individuals achieve self-sufficiency. In addition to being a member of the CoC, a representative from the Lackawanna County Department of Human Services holds a position on the CoC Board. The CoC submits a consolidated application for HUD funding yearly which in the 2017 HUD CoC competition resulted in \$2,586,130 being awarded for services in Lackawanna County.

The Lackawanna County Housing Coalition is made up of over 30 different local organizations and agencies seeking to provide housing opportunities and empowerment towards self-sufficiency for all persons. This is accomplished through the sharing of information and coordination of resources among non-profit, public and private entities, responding to unmet needs and advocating for safe, affordable housing.

The Housing Coordinator serves as the chairman of the Housing Authority Task Force. This group was established to bring representatives of the three housing authorities, Scranton, Lackawanna and Carbondale, together for quarterly meetings with service providers to discuss ways in which each system can work together to expedite securing housing for clients and to assist the housing authorities with services to keep residents stably housed.

Other committees on which the Housing Coordinator serves are the Youth and Education and Chronic Homeless subcommittees of the CoC, the Re-Entry Task Force and its Housing subcommittee and the Independent Living Collaborative which assists youth transitioning into adulthood with services needed to live independently.

The Housing Coordinator also oversees the Permanent Supportive Housing (PSH), Rapid Rehousing and Post Foster Care programs, assisting with entry into and follow up on program clients. Monthly meetings are also facilitated by the Housing Coordinator with Women's Resource Center, Catherine McAuley Center and the Lackawanna County Office of Youth and Family Services to coordinate case management services for mutual agency clients.

Utilization of the county's Homeless Management Information System (HMIS) also assists in the coordination of services by allowing service providers to access information regarding services that an individual/family has received.

In April 2018, the Lackawanna County Office of Youth and Family Services created and staffed the position of Housing Aide. The Housing Aide is working with families active with the Office of Youth and Family Services to help them secure and maintain stable housing. Supportive services provided are assistance with completing housing and/or financial aid applications, apartment searches, employment searches, budgeting and resource referral. Once housing is secured, the Aide assists families with obtaining furnishings for the home, teaching and modeling homemaking skills and monitoring to prevent eviction/removal.

Housing services available to adult and aging Lackawanna County residents include case management, rental assistance, bridge housing and emergency shelter services funded through the Homeless Assistance Program. Additional services available include day shelter, rapid rehousing and permanent supportive housing. Until recently, services for the youth population aged 18-24 were limited to Post Foster Care Services. In February 2018, a service

provider established a presence in Lackawanna County to serve this population through a rapid rehousing program.

The Lackawanna-Susquehanna Behavioral Health/Intellectual Disabilities Program administers several housing programs and services including:

Supported Living Program which provides housing and community supports for individuals with mental illness who reside in their own apartment.

Housing Initiative for the Homeless Population, in partnership with HealthChoices, developed and rehabilitated four apartments to support lower income persons/families with behavioral health needs who are MA-eligible and are homeless or at risk of becoming homeless.

The Autism Spectrum Disorder Residential Supports Program includes both an enhanced supported living model and a more traditional supported living program. In FY 2017-2018, the Office of Developmental Programs included an "autism only" eligibility criteria within the Consolidated and Person/Family Directed Waiver. The Program is working with local service providers to develop additional resources for individuals in need of housing supports.

The Lackawanna-Susquehanna Behavioral Health/Intellectual Disabilities Program also contracts with Catholic Social Services for community residential rehabilitation services (CRRS), Scranton Counseling Center which manages a personal care home to serve individuals with serious mental illness, Step by Step to manage a location to support individuals with co-occurring needs and a supported housing program in Susquehanna County and UNC which manages five apartments for individuals/families with serious mental illness.

Through a Block Grant reinvestment plan, the Program implemented a Re-entering Citizens Program; which provides residential services in an 8-unit program designed to help meet an urgent need for Lackawanna County re-entry population that suffers from mental illness and substance use disorder. The forensic re-entry housing program supports incarcerated people with behavioral health needs to re-enter into the community. The release to a behavioral health supported program will allow individuals to secure employment, permanent housing, and reunification with family. In addition to housing, the program will provide case management, support with daily activities and provide a safe and secure environment. All clients receiving services in the program are encouraged to participate in community treatment options such as psychiatric rehabilitation, outpatient, medication management and peer supports, to name a few. For individuals involved with the Mental Health Treatment Court; a weekly synopsis is submitted by the Program Director to provide additional support and communication regarding the individuals' progress with recovery. The program is staffed 24 hours a day/7 days a week.

Our drug and alcohol system has the capacity to provide emergency shelter and housing assistance to homeless or near homeless individuals who agree to participate in drug and alcohol treatment, self-help groups, or other recovery supports. In partnership with the drug and alcohol system, the Behavioral Health/Intellectual Disabilities Program also refers individuals in need of recovery houses in which residents in recovery live together as a community in a safe and supportive environment.

In addition to emergency and recovery housing, the Lackawanna-Susquehanna Behavioral Health/Intellectual Disabilities Program and Office of Drug and Alcohol Programs has partnered with the Lackawanna County Problem Solving Courts and the United Neighborhood Centers (UNC) on a housing program for families involved in the criminal justice system with identified mental health and substance use disorders. Four scattered housing units are available throughout Lackawanna County to serve this population. UNC provides case management and wraparound services for all individuals and families in the units. Individuals and families in the program are participants in the Lackawanna County Problem Solving Courts, are involved in mental health and substance use disorder services and are referred to or connected to supportive services as needed such as child care, transportation, employment, medical or dental care. The program is transitional in nature and the case manager through UNC connects individuals with permanent housing if available.

On a community level, The Lackawanna County Department of Planning and Economic Development is the administering agency for federal, state and local funded housing rehabilitation assistance programs for 38 municipalities in the County. Programs administered by the department include:

The First Time Homebuyer Assistance Program funded through Lackawanna County's Act 137 Affordable Housing Program. The primary objective of this program is to increase the availability and affordability of quality housing to median and lower income individuals/families by providing down payment and closing cost subsidies.

Housing Rehabilitation Programs, funded through the U.S. Department of Housing and Urban Development, the Pennsylvania Department of Community and Economic Development and/or the County of Lackawanna. The primary objective of the housing rehabilitation programs is to provide tangible, financial assistance to individuals/families who, due to limited financial means, are forced to reside in homes which are unsafe, unsanitary and generally lacking in energy efficiency. The programs are designed to refurbish homes with deficiencies that pose health and safety threats to the occupants.

The Emergency Repair Assistance Program, funded through Lackawanna County's Act 137 Affordable Housing Program, provides financial assistance to individuals and families who reside in homes which are unsafe and unsanitary, i.e. structural, electrical, plumbing and roofing problems.

EMPLOYMENT

The Lackawanna County Department of Economic Development (DCED) oversees the county's Business Development mission to effectively promote and attract job creating businesses to the area. DCED can offer and coordinate grants, incentives and low-interest financing which will make relocation or expansion to Lackawanna County cost effective. Programs administered through DCED to promote business and employment opportunities in the county are:

Wireless Technology Infrastructure Initiative provides county-wide carrier-grade wireless network that will reduce start-up and ongoing technology costs for businesses and will improve emergency management telecommunications. The project provides businesses with sustainable, reliable and redundant high-bandwidth data pipelines.

Small Business Administration Loan Fee Waiver Program provides qualified businesses working with qualified lenders a check from Lackawanna County in the amount of the SBA loan fees incurred.

Land Development and Construction Fee Waiver Program is a job-creation incentive program targeted toward businesses looking to expand or relocate operations in Lackawanna County. The County will reimburse a portion or all municipal fees and construction permit expenses for businesses creating ten permanent jobs in Lackawanna County within two years of approval.

Lackawanna County Revolving Loan Program was created to provide below market interest rate revolving loans to small businesses and entrepreneurs to start or expand their business. The loan may be used to cover operating capital, upgrade of facilities, expansion of existing firms, acquisition of land, buildings and equipment and the startup of new businesses within Lackawanna County to promote and spur economic development within the private sector.

In addition to the programs administered by DCED, Lackawanna County sponsored its 6th Lackawanna County Job Fair, May 24, 2018, 1p.m. – 5 p.m. at PNC Field, Montage Mountain Road. The fair is open to all employers in Lackawanna County and provides an opportunity for individuals seeking employment to submit resumes and interview for open positions.

Many of our adult clients who are active with the Office of Youth and Family Services and the Office of Drug and Alcohol Programs utilize services through PA CareerLink and the Scranton-Lackawanna Human Development Agency when seeking assistance with securing employment. The Office of Drug and Alcohol Programs contracts with the Employment Opportunity Training Center (EOTC) for recovery support programming. EOTC has a series of workforce development initiatives including an employment and job search group and when appropriate, the Office of Drug and Alcohol Programs will refer clients to the EOTC employment programs for assistance.

A majority of the employment programs and services for adults in Lackawanna County are administered by PA CareerLink, which is an initiative of the PA Department of Labor and Industry to assist job-seekers in finding family sustaining jobs and employers to find skilled candidates. Services offered to job seekers include: resume workshops, career counseling, job search assistance, interview skills training, skills assessment, job fairs, training opportunity exploration, career exploration and free computer lab access. Employers are offered the following services: job posting, candidate screening and referral, on-site job recruitments, job fairs, identifying training needs and resources, recruitment services, access to labor market data, out-of-area recruitment assistance and on-the-job training.

The Scranton-Lackawanna Human Development Agency (SLHDA) also administers programs to assist individuals in securing employment. Individuals who have enrolled in CareerLink and have had unsuccessful job searches can apply for funding from the Workforce Investment Act (WIA). This Act provides customized job training and resources to aid unemployed or underemployed individuals in seeking employment with family sustaining wages. The Scranton-Lackawanna Human Development Agency in cooperation with the County Assistance Office administers the Work Ready and EARN Programs for TANF participants.

For eligible individuals aged 55 or older who are at or below 125 percent of the federal poverty level and are serious job seekers, referrals can be made to the Senior Community Service Employment Program (SCSEP) by the Lackawanna County Area Agency on Aging. This program, authorized under Title V of the Older Americans Act is funded by the U.S. Department of Labor and administered by the AARP Foundation, provides an array of training, skill enhancement and skill assessment for participants.

The Lackawanna-Susquehanna Behavioral Health/Intellectual Disabilities Program has an Employment Coalition which facilitates an employment workgroup designed to disseminate information and provide a forum for planning for various county and community stakeholders. The Coalition has hosted trainings on employment and prevailing legislation such as The Workforce Innovation and Opportunity Act (WIOA). The Coalition is comprised of behavioral health, intellectual disabilities, child welfare, supported employment providers, the Chamber of Commerce, the Office of Vocational Rehabilitation and school districts. By partnering with community stakeholders, the County Human Services offices work together to enhance services, engage in a dialogue with peers, encourage networking, increase awareness of the opportunities and challenges associated with community employment for individuals with disabilities.

Another initiative administered by The Lackawanna-Susquehanna Behavioral Health/Intellectual Disabilities Program is Benefits Counseling to create additional opportunities for individuals with disabilities to navigate employment and benefits. The Work Incentive Planning and Assistance (WIPA) initiative is authorized by Social Security and provides free benefits counseling to Social Security disability beneficiaries to help them make informed choices about work. WIPA counselors provide individuals with the information needed to decide whether work is right for them and understand how work may affect their benefits. Once a person begins working, WIPA can provide information and support to help make a successful transition to financial independence.

Two additional programs in Lackawanna County assist youth transitioning to adulthood. The Cross Systems Transition Conference is a meeting with a youth who is involved with multiple systems. The conference participants can include the youth, their family and various service provider representatives from the child and adult systems. Utilizing Child and Adolescent Service System Program (CASSP), the goal of the conference is to identify strengths in the transition process and barriers to a successful transition. The meeting results in the youth developing a coordinated plan to transition into adulthood successfully. Employment and post education skill development is an important part of developing a plan for transitioning youth.

The Independent Living Collaborative is a group of approximately 30 agencies and organizations including schools, community agencies, intellectual disability, mental health and substance abuse providers who are serving youth ranging in age from 14 through 21 years old. The goal of the Independent Living Collaborative is to improve communication and service delivery between providers for youth in transition to support a successful transition into adulthood. The IL Collaborative focuses on resources for developing employment opportunities for youth.

HUMAN SERVICES NARRATIVE

MENTAL HEALTH SERVICES

a) Program Highlights:

The goal of The Lackawanna-Susquehanna Behavioral Health / Intellectual Disabilities / Early Intervention Program is to apply the Program's mission and vision for the development of services that are planned and delivered in a manner that promotes recovery, facilitates the individuals' recovery process, is least restrictive/most appropriate and transforms the existing system of care. The Program has increasingly emphasized natural and community-based services, the improvement of consumer and advocacy initiatives, peer specialist initiatives, recovery education for providers of services and increased opportunities for engagement and decision making by those persons receiving services.

The Lackawanna-Susquehanna Behavioral Health / Intellectual Disabilities / Early Intervention Program has been successful in engaging persons with serious mental illness, persons in recovery, family members, advocacy organizations, providers of behavioral health care services and other community stakeholders in successfully moving our Program forward and embracing the concept of "Recovery" for persons active within our system of care. To accomplish this, the Program has actively sought participation from individuals in recovery on both its Advisory Board and three (3) active committees. The program has expanded access to peer support services in the community and is continually developing forensic peer support services in both the Lackawanna and Susquehanna Correctional Facilities.

Susquehanna County stakeholders including; the Board of County Commissioners, county human service departments, provider agencies, consumers and families provide ongoing input regarding the needs outlined within this plan. The primary exchange for assessing needs within Susquehanna County is the Systems of Care Committee which meets on a monthly basis in Montrose, PA.

Information is collected and evaluated through a **Consumer and Family Satisfaction Team** process conducted annually through the Northeast Behavioral Health Care Consortium (NBHCC), the County's oversight organization for managed behavioral health care services. Individual reports are generated in five (5) focus areas (levels of care) including, partial hospitalization, inpatient services, crisis, mobile crisis and telephone crisis. A complete copy of this report for Lackawanna and Susquehanna Counties is available upon request.

The Northeast Behavioral Health Care Consortium (NBHCC) annually conducts **focus groups within both Lackawanna and Susquehanna Counties** soliciting input from persons with mental illness and those in recovery. A complete copy of this report is available upon request. In addition, the Lackawanna-Susquehanna BH / ID / EI Program participates in public hearings in Lackawanna County conducted by the Lackawanna County Department of Human Services for the purpose of soliciting input on service delivery efforts in Lackawanna County. The Lackawanna-Susquehanna BH / ID / EI Program conducts a **public hearing**

annually soliciting input from the public at large related to the delivery of services within Susquehanna County.

The Program continues to promote the recruitment, training and ultimate hiring of **Certified** Peer Specialists throughout our Joinder Program. In collaboration with various stakeholders including the provider network, advocacy organizations and HealthChoices; the Lackawanna-Susquehanna BH / ID / EI Program was able to support an increase in the reimbursement rate for agencies that employ Certified Peer Specialists, which has allowed more agencies to participate in the Peer Specialist initiative and may increase the employment of Peer Specialists. In addition to increasing the reimbursement rates, the Joinder has worked with the Northeast Behavioral Health Care Consortium (NBHCC) to expand local training opportunities for individuals who wish to become Peer Specialists. Currently, the Scranton Counseling Center (SCC) employees seven (7) certified peer specialists; four (4) certified peer specialists assigned to staff the Decision Support Center and three (3) certified peer specialists are working with individuals in recovery in community-based settings. NHS of NEPA currently has two (2) CPSs working in the community. Peerstar has specifically been addressing the needs of the local forensic population by participating with coordinating care via the Re-entry Program that has been implemented at the Lackawanna County Correctional Facility.

The Program has expanded community services to include **forensic case management**. In this role, the forensic case manager will support the efforts of the Lackawanna County Re-Entry Program by assisting reentering citizens to connect with needed treatment services including: housing, employment, outpatient therapy, medication management, psychiatric rehabilitation, primary care and peer support services.

The Lackawanna County **Criminal Justice Advisory Board** continues to be an active community planning forum for the assessment and future development of services, supports and policies that enhance the quality of lives for individuals living with mental illness and substance use disorders. For example, the Program has been working with community partners to develop a plan aimed at reducing incarceration rates and increasing mental health and drug and alcohol treatment.

A **Pre-Trial Services Initiative** has been implemented in Lackawanna County, which is a result of cross systems collaboration including other county departments: Judiciary, Probation, Youth and Families, Drug and Alcohol, District Attorney's Office, Public Defenders and Court Administration. This Initiative will help reduce costs at the jail and provide opportunities for treatment and increased focus on support services such as housing and employment.

As part of the Pre-Trial Services Initiative, NBHCC has developed a program entitled, Intercept Model: Early Diversion (IMED). This program will target Medical Assistance eligible adults 18 years of age and older residing in Lackawanna County. Building on the Sequential Intercept Model that currently exists within the adult county judicial systems, a goal of this team-delivered service will be to build upon the existing resources (for example, Crisis Intervention Teams, specialty treatment courts, etc.), cultivating a criminal justice system that is more responsive to the needs of individuals with mental health and substance use disorders. Utilizing the evidence-based practice of Critical Time Intervention (CTI), team

members will increase their involvement during critical time intervals such as the transition of care between the discharge from inpatient/non-hospital rehabilitation/jail/diversionary settings and return to the community and recommended aftercare treatment services such as D&A case management, outpatient, IOP or PHP services. NBHCC will be tracking outcomes to include the following areas:

- outreach and engagement for individuals at the magisterial level;
- increase in individuals in the target population being diverted from jail and treatment courts, and entering appropriate treatment;
- increase in follow-up with treatment and support services.

The Program is highly engaged in planning for children at risk of an out-of-home placement or in need of a higher level of care. Through cross-systems planning with families, HealthChoices, Youth and Family Services, case management, school districts and other stakeholders. By embracing and applying **Child and Adolescent Service System Program (CASSP)** principles, the program has seen progress in reducing the number of out—of-home placements while linking children and families with community supports. Additionally, the Program has been participating in Family Team Conferences with the Lackawanna County Office of Youth and Families; which organize team members to concentrate efforts in developing support plans for children and families.

As the Program continues to grow into a **recovery oriented system of care**, we will continue to see growth in peer supported initiatives throughout both Lackawanna and Susquehanna Counties. Additionally, our service providers will be given the tools and support necessary to transform their services to more recovery oriented services. As leaders in the recovery transformation in Lackawanna-Susquehanna Counties, the Lackawanna-Susquehanna BH / ID / EI Program will continue to constantly reinforce the recovery vision and recovery system standards.

The Program continues to support a mental health **WARMLINE** as a frontline, low cost support to individuals in need of someone to talk to about their concerns. In 2016-2017, nine-hundred and seventy-five (975) individuals used the WARMLINE during the reporting period. The majority of the individuals were female (698) and most were from Lackawanna County (965). A majority of the callers (658) indicated the WARMLINE kept them from having a crisis. Additional efforts will be made to increase awareness of the WARMLINE in Susquehanna County.

The Program has seen positive outcomes related to the **integrated health and wellness teams** implemented to improve health outcomes for adults with serious mental illness (SMI) and a co-existing chronic physical health disorder by combining the technological infrastructure, data management, and clinical expertise of a behavioral health managed care organization and a behavioral health provider-based care coordination model. Behavioral health providers serve as the health home for individuals with SMI and coordinate physical health needs to improve overall health.

In accord with community partners including Scranton Counseling Center, the Wright Center and the University of Scranton, a study was conducted to determine the "Process and Outcome Evaluation of the Integrated Primary Care Clinic into a Behavioral Care Setting." A cost analysis was conducted for three-hundred and sixty-two (362) members for

a six month period and projected an average cost savings of approximately \$816,662. Savings were attributed to lower emergency care costs and coordinated care (e.g. diabetes management).

The Program continues its collaboration with the Office of Mental Health and Substance Abuse Services (OMSHAS) with the implementation of mental health screening for children in the school setting. The **Garrett Lee Smith Grant** will focus on screening for suicide and depression with the aim of early recognition and treatment. The Program is implementing a three (3) tiered strategic training initiative that (1) promotes wide public awareness, (2) increases consistency within crisis response efforts and (3) increases clinical competency of Joinder clinicians. Training efforts focus on Suicide Risk Assessment and Collecting Valid Data, Safety Planning and Family Engagement.

The Program is working with various stakeholders including the Lackawanna County Criminal Justice Advisory Board to develop a position in the community to support the **Crisis Intervention Training (CIT)** initiative. The CIT program helps train law enforcement and first responders on productive ways to approach citizens experiencing a mental health emergency. The CIT coordinator position is critical to sustaining this important training program.

The Program has been working with various school districts, along with our HealthChoices partners to develop services and supports within school settings. More specifically, working to implement highly qualified clinical staff as part of a **Community and School Based Behavioral Health (CSBBH) Team** within a school district. CSBBH services have been widely supported by school administration and families alike and provide ongoing clinical support both at school and the child's home.

The Program is working with community partners to implement a **Family Intersystems Team** (FIT) using a conceptual model based on a specialized Family-Based Mental Health (FBMH) team within Lackawanna County. The Program is targeted to serve youth ages 14 to 21 whose families are currently active with the Office of Youth and Family Services and/or the Juvenile Probation Office. The youth will meet the diagnostic criteria of seriously mentally ill or emotionally disturbed, at high risk for out of home placement, in addition to being involved with multiple systems impacting their permanency and safety needs. The Team will incorporate the following areas of practice: Trauma informed care, Engagement skills, Cooccurring competency and cultural competency.

The Program has a well-established **Quality Management process** which includes many community stakeholders. The Program's Quality Council has been in operation for approximately twelve (12) years and focuses the work in the following areas:

- Determine the strategic direction and vision for Quality Management.
- Oversee and monitor all activities related to Quality Management within the Program.
- Establish organizational performance indicators, review trends and recommend actions as necessary.

- Evaluate the effectiveness of Program-wide quality improvement initiatives at least annually and review Program-wide trends and actions related to the evaluation of the quality of services.
- Recommend Program performance improvement activities.

The following table is a summary of the focus areas, goals, objectives, performance baseline and current performance. In addition to this information, the Program develops and manages specific action steps for each goal.

BH Table #1 - Mental Health Quality Management Goals and Objectives for 2017-2019

Plan Area	Goal	Objective	Beginning Performance	Target objective/ current performance
1. Employment	Persons who receive Psychiatric Rehabilitation BH Services have access to Employment Options	Increase by 10%	Establish Baseline	10% increase
2. State Hospital-LOS	Persons receiving BH Services have access to community supports to reintegrate to the community and prevent relapse	Services have access to community supports to eintegrate to the community and prevent 5%the number of persons with LOS over 2 years.		5% decrease
3. Suicide Prevention	Communities receive education regarding suicide prevention, wellness and recovery	six school districts participate in a public education campaign	Establish Baseline	six districts receive education/ information
4. CIT Initiative	CIT is fully functional and incorporated into the community	150% increase in the number of persons trained	139 trained to date	additional 209 Individuals trained
5. Re-Entering Citizens Program	incarcerated persons who receive substance abuse services or BH services have access to services and supports to facilitate the recovery process	Develop new housing resources that support re- entry and recovery	Establish Baseline	40 persons benefit from a new housing opportunity

6. Peer Support	Develop a dedicated	Development of a	Establish Forum	Considerations
/Recovery	forum for peer supports	"considerations"	and Develop	document
	and certified recovery	document to	document	
	specialists to share	support joinder		
	information and identify	capacity needs		
	areas for system			
	improvements			

b) Strengths and Needs:

Target population groups to be served within fiscal year 2018-2019 by the Lackawanna - Susquehanna BH / ID / EI Program are as follows:

Older Adults (ages 60 and above):

The Lackawanna-Susquehanna BH / ID / EI Program has a close working relationship with both the Lackawanna and the Bradford, Susquehanna, Sullivan and Tioga (BSST) County Area Agency on Aging program offices. The Lackawanna-Susquehanna BH / ID / EI Program maintains a written agreement which includes services provided by both the mental health program as well as the aging program. In addition, the agreement identifies agency liaison staff and protocols for conflict resolution.

In addition to maintaining a working agreement between the parties, cross systems meetings (i.e. Aging, Mental Health, Drug and Alcohol) are convened six (6) times a year to discuss opportunities for policy development and case coordination. The Program continues to work collaboratively with the local Area Agenc(ies) on Aging to coordinate the **Mental Health Procedures Act** and **Adult Protective Services Act**.

Mental Health services for adults within the Joinder Program include, but are not limited to the following: Case Management, Inpatient, Outpatient including evaluation and medication management, Partial Hospitalization, Psychiatric Rehabilitation, Crisis including telephone, walk-in, mobile and residential, housing support, community residential and Peer Support. *Needs* in services for older adults have been identified to include mobile outpatient services, housing support services, specialized long-term housing services and social rehabilitation / recreation services.

Adults (ages 18 and above):

The Lackawanna / Susquehanna BH / ID / EI Program provides a wide range of services to adults with mental illness and those in recovery throughout the Joinder Program. Specifically, services include, but are not limited to the following: Case Management, Inpatient, Outpatient including evaluation and medication management, Partial Hospitalization Services, Psychiatric Rehabilitation, Crisis including, telephone, walk-in, mobile and residential, housing support, community residential and Peer Support.

The Program continues to expand Peer Support Services, has focused on engagement strategies for citizens re-entering the community from incarceration to gain access to mental health and substance use services.

Needs in services identified for adults have been identified to include mobile outpatient services, housing support services, social rehabilitation / recreation services and employment.

Transition-Age Youth (ages 18 through 26):

Targeted case management services are used to connect transition aged youth with adult services including but not limited to: housing supports, treatment services, employment services and social and recreational services. Housing and employment services for this population continue to be an area of need for this population group. Typically, housing services for this population are provided through supported housing initiatives which provide assistance in seeking and securing safe and affordable housing options as well as financial assistance in the form of furniture acquisition, rental and utility cost assistance. Employment services are limited for transition aged youth. Typically, supported employment providers serve an older population but do provide employment services for transitional aged youth once a referral for service is initiated. The Lackawanna-Susquehanna BH/ID/EI Program will be working closely with contracted employment providers to identify specific training needs for staff who will be identified to work with transition aged youth referred for employment services.

A need exists within the Joinder Program related to the availability of non-treatment options including but not limited to psychiatric rehabilitation services for transition aged youth. The program will work closely with contracted providers within the joinder Program to develop non-treatment alternatives for this population in fiscal year 2018-2019. Finally, social and recreational services for transitional aged youth are very limited and will need to be developed in fiscal year 2018-2019. The Program will work closely with the targeted case management service provider within Lackawanna County to specifically identify the transition age youth in the County and develop an individualized service plan to meet their needs.

Services for this population group are a high priority for the Program. Specifically, targeted case managements services are used to connect transition aged youth with adult services including but not limited to: housing supports, treatment services, employment services and social and recreational services. The Program will work closely with the targeted case management service provider within Lackawanna County to specifically identify the transition age youth in the County and develop an individualized service plan to meet their needs.

The Program's CASSP coordinator and Intellectual Disabilities Director (for children with an ID diagnosis) facilitate treatment and transition planning for all children aging out of a RTF setting. This is accomplished by collaborating with families and other natural supports, HealthChoices partners and local service providers to create a coordinated service transition plan.

Children (under 18):

Targeted case management services are used to connect children and youth to a wide range of services offered this population within the Joinder Program area. The Joinder Program will continue to work closely with crisis service providers to develop mobile crisis services specifically targeted at children and youth. Mobile crisis services have consistently been identified as a gap in service delivery within the Joinder Program. Treatment foster options have been identified as a gap in services within the Joinder Program. The Lackawanna / Susquehanna BH/ID/EI Program will be working closely with the Northeast Behavioral Health Care Consortium (NBHCC) and Community Care Behavioral Health Organization (CCBHO) to develop treatment foster care options for children and youth as a step down from inpatient and residential services.

The Joinder Program recognizes the need to further develop mental health evidence-based practices including but not limited to Multi-Systematic Therapy (MST) and Parent Child Interactive Therapy (PCIT). Efforts are underway through the Northeast HealthChoices Program to expand PCIT services during fiscal year 2018-2019.

The Program continues to work closely with NBHCC, school districts and providers as we work to expand **Community and School Based Behavioral Health** (CSBBH) Teams.

For children and adolescents under the age of eighteen (18), access to **Student Assistance Programs** is available through the various school district buildings within Lackawanna County and Susquehanna County. Student Assistance Program referrals are reviewed by the SAP Team and should a need be identified to warrant an evaluation for mental health services an appointment is scheduled with a mental health professional.

Special / Underserved Populations:

Individuals transitioning out of Clarks Summit State Hospital:

The Program has an active CHIPP planning process which focuses on the discharge planning process for individuals targeted for discharge from Clarks Summit State Hospital (CSSH). This process has been successful in providing services and supports to individuals who are discharged from CSSH that have been identified on the individual's Consumer Support Plan (CSP). Patient population numbers are consistently monitored at CSSH.

The Lackawanna / Susquehanna BH / ID / EI Program employs CSSH liaison staff through the Scranton Counseling Center and NHS of Northeastern Pennsylvania who work closely with CSSH staff to ensure a successful transition of patients from the Hospital to community-based settings. The County Office also staffs a CHIPP Committee which meets quarterly and involves county office staff, provider agencies, advocacy organizations, including the Advocacy Alliance and NAMI Scranton Office and CSSH staff. The purpose of this meeting is to identify any barriers that would prohibit the movement of individuals from CSSH to community based alternatives as well as service options to divert individuals from admission to CSSH.

Since its implementation, the Assertive Community Treatment (ACT) Team has been a

significant resource in supporting individuals transitioning to the community from CSSH. ACT Team members have taken an active role in in the CSP process and have helped individuals to establish permanent housing, implement CSPs, connect physical-behavioral health and support recovery.

The Joinder Program implemented a highly successful CHIPP Initiative for fiscal year 2013-2014, which annualized in fiscal year 2014-2015. The Program initially supported eight (8) patients at Clarks Summit State Hospital to maintain stability community based options and continue on their path of recovery. The cornerstone of this plan was the expansion of housing options in both Lackawanna and Susquehanna Counties; safe affordable housing has consistently been identified as need within the local mental health system. Since the implementation, the program was able to expand intensive housing and supported housing options which have assisted fifteen (15) individuals from CSSH to return to the community with supports and services.

Several needs have been identified through the local behavioral health system as well as the CSSH Service Area Planning (SAP) Council; including: coordination of physical health and behavioral health services, specialized housing and ongoing engagement efforts from case management services. Members of the advocacy community have identified the need for additional synchronization between hospital and community psychiatrists. As described, there are circumstances when community psychiatrists are not willing to continue medication plans developed by hospital psychiatrists. This topic will be addressed at future SAP meetings to develop additional solutions.

Co-Occurring Mental Health/Substance Use Disorder:

A strength within Lackawanna and Susquehanna County for persons with a co-occurring (MH / DA) disorder who are involved within the criminal justice system in Lackawanna County may have access to a Co-Occurring Problem Solving Court. This Problem Solving Court provides support, guidance and assistance to individuals seeking treatment, housing and employment opportunities. A participant in this program receives MH case management services to assist them in participating in the program and supporting them in their recovery.

In addition, the Program collaborates with The Lackawanna-Susquehanna Office of Drug and Alcohol Programs to identify systems improvement opportunities to enhance service coordination for individuals coping with co-occurring issues. Planning efforts have included cross systems training, provider engagement, resource analysis and systems mapping.

Organizationally, the Program supports the Lackawanna-Susquehanna Office of Drug and Alcohol Program under a planning council model. This allows for additional coordination with traditional D&A and Mental Health providers, opioid Centers of Excellence; including integrated care efforts (ie. dual licensure, behavioral health/physical health integration).

The two primary *needs* for the co-occurring population is housing support services and the coordination of treatment between mental health and drug and alcohol services. The community continues to work towards increased coordination of services using a Recovery Oriented Systems of Care model; which has been successful in bringing various stakeholder to the planning table to explore solutions to identified needs for this population.

Justice Involved Individuals:

Individuals with mental illness who are involved with the criminal justice system in Lackawanna County have access to one of the best **problem-solving court systems** in the Commonwealth of Pennsylvania. The Lackawanna-Susquehanna Behavioral Health / Intellectual Disabilities / Early Intervention Program, in cooperation with the Lackawanna County Judicial System developed a Mental Health Problem Solving Court and a Co-Occurring (MH / DA) Problem Solving Court. Annually, more than forty (40) unduplicated individuals participate in each Problem Solving Court Program. Mental Health supports for both Problem Solving Courts are provided through case management staff who are members of the Court Team. In addition to the case management staff, clinical staff participates in Court Team meetings which are used to staff each individual involved within the Program.

Individuals with mental illness who are in the County jail system have access to mental health staff within the prison. In addition to access to mental health support services, psychiatric services are provided in both county prisons. Mental Health staff located within the County prison system support the connection of inmates released from the County prison who need mental health services to the appropriate community-based service.

(Needs) Individuals involved with the justice system continue to have ongoing needs in the areas of housing and employment. Despite efforts to bring stakeholders together, planning and progress remain slow. Through the Lackawanna County Prison Re-Entry Task Force, sanctioned by the Criminal Justice Advisory Board, housing and employment are addressed through a multidisciplinary team approach. Several housing and employment initiatives are in progress.

The Program, in collaboration with the Carbon-Monroe-Pike and Luzerne-Wyoming Counties, proposed to develop a 16 Bed Long-Term Structured Residence (LTSR) to be located within one of the seven counties. The proposal was supported by the Office of Mental Health and Substance Abuse Services and planning will begin in fiscal year 2018-2019. The anticipated outcomes of the LTSR include: (1) Increased regional capacity to support individuals with SMI as they transition from county corrections, Norristown State Hospital and Clarks Summit State Hospital; (2) diverted incarceration of individuals with a serious mental illness and forensic involvement; (3) reduce or eliminate the unnecessary incarceration of individuals with a serious mental illness who commit crimes, and (4) reduced stress on the forensic system both in the realm of corrections and forensic units. Lackawanna-Susquehanna was approved to utilize five (5) beds of the sixteen (16).

In fiscal year 2018-2019, the Program is planning to expand its **forensic case management services** by adding a case management supervisor and two case managers to meet the needs of both Lackawanna and Susquehanna Counties. With additional training, the FCMs will assist individuals involved with the criminal justice system to seek treatment, establish housing and locate employment. The expanded forensic case management unit will increase its capacity to assist individuals who are incarcerated with an SMI and support the development of community support plans.

Veterans:

Veterans with mental illness in both Lackawanna and Susquehanna Counties have access to a full range of services and supports offered through the Joinder Program. In addition, in Lackawanna County, veterans with mental illness have access to a Veterans Problem Solving Court which provides the individual participant with structure and assistance in accessing services.

Efforts need to continue within the Joinder to reach out to Veterans Groups to ensure that they are aware of the various mental health services and supports and also know how to access them.

Lesbian / Gay / Bisexual /Transgender / Questioning / Intersex (LGBTQI) Consumers:

The LGBTQI population brings many strengths to the community and has organized at the grassroots level. Through these grassroots efforts, community members have organized support groups; a local "It Gets Better" campaign targeting youth and young adults that may be struggling with bullying, family relations or their identity; organized a local event "Pridefest" to raise awareness for the community and have partnered with an organization to make HIV/STI testing available. Additionally, local colleges and universities provide seminars and other educational opportunities for the community.

The Joinder Program continues to work with its HealthChoices partners including the Northeast Behavioral Health Care Consortium (NBHCC) and Community Care Behavioral Health (CCBH) to expand the local outpatient clinical capacity of mental health clinicians skilled at engaging and supporting treatment needs of the LGBTQI community.

There is an ongoing need for additional opportunities for education for the general public on matters related to the LGBTQI community. The Program remains engaged with community partners and providers to promote education, support and treatment.

Racial / Ethnic / Linguistic minorities:

The Joinder Program continues to promote access to mental health services and supports to diverse populations.

Strengths exist within various local ethnic and cultural groups including Nepalese, Bhutanese and Spanish speaking community members. Efforts continue to link local mental health advocacy organizations to develop outreach strategies. The Program has had preliminary discussions with community stakeholders about expanding access to Spanish speaking clinicians, including network management via HealthChoices.

The Program has participated in two (2) community events hosted by Senator John Blake's Office, including a Cultural and Ethnic Diversity Roundtable discussion and an Inclusion Initiative Summit. Both events addressed the need for additional engagement of community members in which language and cultural barriers may exist. The Program will continue efforts to develop resources and evaluate service needs.

A primary barrier that is linked to an identified need within racial, ethnic and linguistic minorities is the availability of clinicians and other mental health professionals that speak the language fluently as well as understand the nuance of a given culture.

Is the county currently utilizing Cultural and Linguistic Competence (CLC) Training? Yes X No The Joinder is currently not implementing the Cultural and Linguistic Competence (CLC) Training. For this upcoming planning year, the Program will explore training strategies with community partners including; HealthChoices, Children and Youth Services and Drug and Alcohol services.

Does the county currently have any suicide prevention initiatives?

\boxtimes	Yes	No
\triangle	1 62	110

The Program has organized and participated in several suicide prevention initiatives and activities, including:

- The Program is working with the Office of Mental Health and Substance Abuse Services (OMHSAS) to develop additional capacity for local mental health call centers to field calls made to the National Suicide Lifeline (NSL). A Mental Health Provider in Northeastern Pennsylvania has been identified as an agency to address northeast regional capacity. Currently, 100% of calls to the NSL from Lackawanna and Susquehanna Counties are being answered by an "out of state" call center. By building local capacity, OMHSAS and the Joinder plan to enhance connections between individuals experiencing a mental health crisis and local services and supports.
- The Program has met with several school districts to aid in coordinating **Act 71 Training** resources.
- The Program has been working with OMHSAS and community stakeholders over the past six years implementing several initiatives supported through Garrett Lee Smith grants. Several outcomes included: "gatekeeper" training, implementation of a mental health screener at two primary care centers and a school district, implementation of an Attachment-Based Family Therapy clinical training model for practicing clinicians designed to target family and individual processes associated with adolescent suicide and depression.
- As part of the Minding your Mind educational series, a presentation on mental health and suicide prevention for students and faculty was organized at two high schools, reaching approximately 800-900 students. Students took advantage of meeting with the speaker and asking questions. The administration at both schools were very welcoming and supportive of the program. There are additional plans to make this and similar presentations available for the public.

- In March 2016, the Program concluded a six-month community study addressing suicide in Susquehanna County. The Suicide Awareness Initiative (SAI) mission was to identify resources and gaps in services to prevent the incidence of youth suicide and suicidal behavior in Susquehanna County. SAI gathered information and knowledge about community services, solicited input from committee members and the broader provider community, and put forth recommendations for prevention, intervention and post intervention resources and services.
- The Program, in working with a local mental health agency hired a Community-based Suicide Prevention Coordinator. The Coordinator position was part of the implementation and sustainability plan of the SAI. The Coordinator has focused on community outreach efforts, school district collaboration, information dissemination and systems resource development.

c) **Supportive Housing:**

SUPPORTIVE HOUSING ACTIVITY *Includes Community Hospital Integration Projects Program (CHIPP), Reinvestment, County base funded or other projects that were planned, whether funded or not. Include any program activity approved in FY 16-17 that is in the implementation process. Please use one row for each funding source and add rows as necessary.*

1. Capital Pi	rojects for Beha	vioral Health		Check if availal	ble in the cour	ity and comple	ete the section.		
Capital financing is	used to create ta	argeted perma	nent supporti	ve housing un	its (apartments	s) for consume	rs, typically, fo	r a 15-30 year	period.
Integrated housing				abilities being	in units (apart	ments) where	people from the	e general popι	ılation
also live (i.e. an apa	artment building (or apartment o	complex.						
Project Name	*Funding	Total\$	Projected \$	Actual or	Projected	Number of	Term of		Year
	Sources by	Amount for	Amount for	Estimated	Number to	Targeted BH	Targeted BH		Project
	Type	FY 16-17	FY 18-19	Number	be Served in	Units	Units		first
	(include grants,	(only County	(only County	Served in FY	FY 18-19		(ex: 30		started
	federal, state &	MH/ID	MH/ID	16-17			years)		
	local sources)	dedicated	dedicated				,		
		funds)	funds)						
Bridge Rental Subsidy Program for Behavioral Health			havioral	☐ Check if available in the county and complete the section.					
Short term tenant b	pased rental subs	idies, intende	d to be a "brid	lge" to more pe	ermanent hous	ing subsidy su	ıch as Housing	Choice Vouch	ners.

						T	_				
	*Funding	Total\$	Projected \$		Projected	Number of	Average	Number of	Year		
	Sources by	Amount for	amount for	Estimated	Number to	Bridge	Monthly	Individuals	Project		
	Type (include	FY 16-17	FY 18-19	Number	be Served in		Subsidy	Transitioned	first		
	grants, federal,			Served in FY	FY 18-19	FY 16-17	Amount in	to another	started		
	state & local			16-17			FY 16-17	Subsidy in			
	sources)							FY 16-17			
	3. Master Leasing (ML) Program for Behavioral Health				☐ Check if available in the county and complete the section.						
	nrivate owners a	nd then suble:	asing and sub	 sidizing these	units to consu	imers					
	asing units from private owners and then subleasing and sub										
	*Funding	Total\$	Projected \$	Actual or	Projected	Number of	Number of	Average	Year		
	*Funding Source by Type	-	Projected \$ Amount for	Actual or Estimated	Projected Number to	Number of Owners/	Number of Units	Average subsidy	Year Project		
		-	_		_			subsidy			
	Source by Type	Amount for	Amount for	Estimated	Number to be Served in	Owners/	Units	subsidy	Project		
	Source by Type (include grants,	Amount for	Amount for	Estimated Number	Number to be Served in	Owners/ Projects	Units Assisted with	subsidy amount in FY	Project first		
	Source by Type (include grants, federal, state &	Amount for	Amount for	Estimated Number Served in FY	Number to be Served in	Owners/ Projects Currently	Units Assisted with Master Leasing in	subsidy amount in FY	Project first		
	Source by Type (include grants, federal, state &	Amount for	Amount for	Estimated Number Served in FY	Number to be Served in	Owners/ Projects Currently	Units Assisted with Master Leasing in	subsidy amount in FY	Project first		
	Source by Type (include grants, federal, state &	Amount for	Amount for	Estimated Number Served in FY	Number to be Served in	Owners/ Projects Currently	Units Assisted with Master Leasing in	subsidy amount in FY	Project first		
	Source by Type (include grants, federal, state & local sources)	Amount for FY 16-17	Amount for FY 18-19	Estimated Number Served in FY	Number to be Served in	Owners/ Projects Currently	Units Assisted with Master Leasing in	subsidy amount in FY	Project first		
4. Housing	Source by Type (include grants, federal, state &	Amount for FY 16-17	Amount for FY 18-19	Estimated Number Served in FY 16-17	Number to be Served in FY 18 –19	Owners/ Projects Currently Leasing	Units Assisted with Master Leasing in	subsidy amount in FY 16-17	Project first		
	Source by Type (include grants, federal, state & local sources)	Amount for FY 16-17	Amount for FY 18-19	Estimated Number Served in FY 16-17	Number to be Served in FY 18 –19	Owners/ Projects Currently Leasing	Units Assisted with Master Leasing in FY 16-17	subsidy amount in FY 16-17	Project first		

*Funding	Total\$	Projected \$	Actual or	Projected		Number of	Year
Source by Type	Amount for	Amount for	Estimated	Number to		Staff FTEs in	Project
(include grants,	FY 16-17	FY 18-19	Number	be Served in		FY 16-17	first
federal, state &			Served in FY	FY 18-19			started
local sources)			16-17				

5. Housing Support S	5. Housing Support Services for Behavioral Health			X Check if available in the county and complete the section.				
HSS are used to assist consulafter move-in.	ımers in transitions t	o supportive h	nousing and/o	r services need	ded to assist in	dividuals in su	staining their h	nousing
*Fund	ling Total\$	Projected	Actual or	Projected			Number of	Year
Source	s by Amount for	\$ Amount	Estimated	Number to			Staff FTEs	Project
Тур	e FY 16-17	for	Number	be Served			in FY 16-17	first
(include	grants,	FY 18-19	Served in	in FY 18-19				started
federal, s	tate &		FY 16-17					
local sou	ırces)							
Lackawa Block G	ant	04.400	7	7				
Only	81,162	81,162	/	7				
Susquet Block G	ant	4.4.400						
Only	14,139	14,139	1	1				
Susqueł CMHBG		81,882	7	7				
Susqueł Behavio		9,773	1	1				
Susqueł CHIPPS		209,111	19	19				

12

12

Susquehanna

127,251

127,251

BASE

Susquehanna R&R	13,990	13,990	1	1		
BG BHSI	40 457	40.457	4	4		
Match	48,457	48,457	4	4		
BG MHSBG						
No Match	406,010	406,010	37	37		
BG BASE						
10255 Match	1,794,025	1,794,025	164	164		
Room and						
Board	595,300	595,300	54	54		

6. Housing Health	Health				☐ Check if available in the county and complete the section.					
lexible funds for one-time and emergency costs such as security deposits for apartment or utilities, utility hook-up fees, furnishings etc.										
	*Funding Sources by Type (include grants, federal, state & local sources)	Total \$ Amount for FY 16-17	Projected \$ Amount for FY 18-19	Actual or Estimated Number Served in FY 16-17	Projected Number to be Served in FY 18-19			Average Contingency Amount per person	Year Project first starte	

7. Other: Identify the program for Behavioral Health	☐ Check if available in the county and complete the section.

Project Based Operating Assistance (**PBOA** is a partnership program with Pennsylvania Housing Finance Agency in which the County provides operating or rental assistance to specific units then leased to eligible persons); **Fairweather Lodge** (**FWL** is an Evidenced Based Practice where individuals with serious mental illness choose to live together in the same home, work together and share responsibility for daily living and wellness); **CRR Conversion** (as described in the CRR Conversion Protocol), **other.**

	*Funding	Total\$	Projected \$	Actual or	Projected		Year
	Sources by	Amount for	Amount for	Estimated	Number to		Project
	Type (include	FY 16-17	FY 18-19	Number	be Served in		first
	grants, federal,			Served in	FY 18-19		started
	state & local			FY 16-17			
	sources)						
Notes:							

Additional Housing Information:

The Program contracts with five (5) primary housing providers that serve individuals with mental illness within Lackawanna and Susquehanna Counties, including: Allied Services, Catholic Social Services, SCC, Step by Step and United Neighborhood Centers. Each Program addresses a housing need within the community.

Catholic Social Services currently manages several apartments via a community residential rehabilitation services (CRRS) program at St. James Manor, with the capacity for eight (8) individuals. Additionally, the agency is working with the Program to develop a separate program that focuses on the "re-entry" population within the county. This program aims to increase social determination, skill building, employment, recovery and residential stability.

Scranton Counseling Center manages Harrison House, a 54-bed personal care home, developed to serve individuals with serious mental illness. During the CSP process the Program will work with Harrison House to establish practices to reduce bed utilization.

Step by Step manages a location in Carbondale specifically designed to support individuals with co-occurring needs. Additionally, they manage a supported housing program in Susquehanna County with the capacity to serve approximately 50 individuals in supported housing, with two, 2-person transitional apartments in the town of Susquehanna.

United Neighborhood Centers manages five (5) apartments for individuals and families with SMI. The Program was part of a collaborative effort with HealthChoices and is included in the agency's "Cedar Avenue" initiative. The agency also works with local mental health and physical health providers to locate housing options for individuals and families experiencing mental illness within the Joinder. This is accomplished with housing specialists and case management services.

Co-Occurring Housing

With our drug and alcohol partners, we have the capacity to provide emergency shelter and housing assistance to homeless or near homeless individuals who agree to participate in drug and alcohol treatment, self-help groups, or other recovery support services.

In partnership with the local SCA, the Program refers individuals in need of recovery house services. Recovery Houses are a safe and supportive environment where residents in recovery live together as a community. Several assurances are made by the SCA including, protocols regarding appropriate use and security of medication, residency requirements and lease agreements upon admission, a policy in place which promotes recovery by requiring resident participation in treatment, self-help groups, or other recovery supports and have procedures to handle relapse.

The Program has a strong working relationship with the four (4) local housing authorities within the Joinder including: The Lackawanna County Housing Authority, the Scranton Housing Authority, the Carbondale Housing Authority and the Susquehanna Housing Authority. Additionally, the Program participates with the Lackawanna Human Services Housing Coalition; which is represented by service providers, housing authorities, county human services (ie. Children and Youth, Drug and Alcohol, Aging, Behavioral

Health). The Program has also identified United Neighborhood Centers of NE PA as the Local Lead Agency (LLA).

The Program plans to continue to work with our HealthChoices Partner, the Northeast Behavioral Health Care Consortium (NBHCC), and other community partners, to identify a Local Lead Agency in Susquehanna County.

d) Recovery-Oriented Systems Transformation:

The Lackawanna-Susquehanna County BH / ID / EI Program is proposing the following Recovery-Oriented Systems Transformation Initiatives:

1. Family Intersystems Team

- Narrative -The Program continues to work with its human services partners via HealthChoices and the Lackawanna Office of Youth and Families to develop a specialized Family-Based Mental Health (FBMH) team within Lackawanna County. The Program is targeted to serve youth ages 14 to 21 whose families are currently active with the Office of Youth and Family Services and/or the Juvenile Probation Office. The youth will meet the diagnostic criteria of seriously mentally ill or emotionally disturbed, at high risk for out of home placement, in addition to being involved with multiple systems impacting their permanency and safety needs. The Team will incorporate the following areas of practice: Trauma informed care, Engagement skills, Co-occurring competency and cultural competency.
- **Timeline** The timeline for the completion of this recovery initiative is June 30, 2019.
- Fiscal Resources This program will be funded by HealthChoices and the Office of Youth and Families.
- **Initiative Tracking** Services will be reimbursed through a fee-for-service arrangement; the Joinder will be tracking this initiative through claims reported available via HealthChoices as well as quality indicators. Information will be gathered and used to determine implementation outcomes with cross-systems stakeholders.

2. Intercept Model: Early Diversion Program

- Narrative -To implement services designed to engage and treat individuals with serious mental illness and substance use disorder that have been identified by the criminal justice system, the Program continues to work within a cross systems team including: HealthChoices partners, the Judiciary, Probation, Youth and Families, Drug and Alcohol, District Attorney's Office, Public Defenders and Court Administration. This Initiative will continue to help provide additional opportunities for treatment and increased focus on support services such as housing and employment. Additionally, the local system is working with individuals who are arrested with an OUD and linking them to medically assisted treatment via the Centers of Excellence.
 - **Timeline** The timeline for the completion of this recovery initiative is June 30, 2019.

- **Fiscal Resources** HealthChoices Reinvestment, County Probation. Lackawanna County Human Services is part of the program sustainability plan.
- Initiative Tracking The IMED Program will be tracked by the Program via the HealthChoices Reinvestment reporting process along with additional quality metrics to be determined. Tracking activities will lead to quality indicator and program implementation discussions amongst stakeholders. Program attributes, policies, staffing resources may be adjusted based on initiative tracking indicators and outcomes.

3. Crisis Intervention Training (CIT)

- Narrative -The Joinder Program presented plans to fund a CIT coordinator. Since this plan was last submitted, a large grant was awarded to a local provider to train approximately 300 law enforcement officers, first responders, probation officers, corrections officers and other professionals. In addition to identifying co-leads for the local CIT Initiative, the grant funds overtime and other personnel costs associated with a 40 hour training; incentivizing law enforcement participation and eliminating barriers. The grant also provides funding for Mental Health First Aid training to a range of stakeholders.
- **Timeline** The timeline for completion of this initiative is January 2019.
- **Fiscal Resources** none at this time due to a large grant award.
- **Initiative Tracking** The Program will be working closely with local law enforcement departments, first responders, probation officers, corrections officer, mental health crisis services and the Board of Scranton CIT. Statistics will be shared with stakeholders on training numbers.

e) Existing County Mental Health Services:

Please indicate all currently available services and the funding source or sources utilized.

Services By Category	Currently Offered	Funding Source (Check all that apply)
Outpatient Mental Health	Х	X County X HC □ Reinvestment
Psychiatric Inpatient Hospitalization	Х	☐ County X HC ☐ Reinvestment
Partial Hospitalization	X	X County X HC □ Reinvestment
Family-Based Mental Health Services	Х	X County X HC □ Reinvestment
ACT or CTT	X	☐ County X HC ☐ Reinvestment
Children's Evidence Based Practices	X	☐ County ☐ HC ☐ Reinvestment
Crisis Services	Х	X County X HC □ Reinvestment
Telephone Crisis Services	\boxtimes	⊠ County ☐ HC ☐ Reinvestment
Walk-in Crisis Services	\boxtimes	⊠ County ☐ HC ☐ Reinvestment
Mobile Crisis Services	\boxtimes	⊠ County ☐ HC ☐ Reinvestment
Crisis Residential Services	\boxtimes	☐ County ☒ HC ☐ Reinvestment
Crisis In-Home Support Services		☐ County ☐ HC ☐ Reinvestment
Community Residential Services	Х	X County ☐ HC X Reinvestment
Psychiatric Rehabilitation	Х	X County X HC □ Reinvestment
Children's Psychosocial Rehabilitation		☐ County ☐ HC ☐ Reinvestment
Adult Developmental Training	Х	X County ☐ HC ☐ Reinvestment
Facility Based Vocational Rehabilitation	Х	X County ☐ HC ☐ Reinvestment
Social Rehabilitation Services	Х	☐ County ☐ HC ☐ Reinvestment
Administrator's Office	Х	X County ☐ HC ☐ Reinvestment
Housing Support Services	Х	☐ County X HC ☐ Reinvestment
Family Support Services	Х	X County ☐ HC ☐ Reinvestment
Peer Support Services	Х	X County X HC X Reinvestment
Consumer Driven Services		☐ County ☐ HC ☐ Reinvestment
Community Services	X	X County X HC □ Reinvestment
Mobile Mental Health Treatment	X	X County X HC □ Reinvestment
BHRS for Children and Adolescents	Х	X County X HC □ Reinvestment
Inpatient D&A (Detoxification and Rehabilitation)	Х	☐ County X HC ☐ Reinvestment
Outpatient D&A Services	Х	☐ County X HC ☐ Reinvestment
Methadone Maintenance	Х	☐ County X HC ☐ Reinvestment
Clozapine Support Services	Х	X County ☐ HC ☐ Reinvestment
*HC- HealthChoices		

^{*}HC= HealthChoices

f) Evidence Based Practices Survey:

Evidence Based Practice	Is the service available in the County/ Joinder? (Y/N)	Number served in the County/ Joinder (Approx)	What fidelity measure is used?	Who measures fidelity? (agency, county, MCO, or state)	How often is fidelity measured?	Is SAMHSA EBP Toolkit used as an implementation guide? (Y/N)	Is staff specifically trained to implement the EBP? (Y/N)
Assertive Community Treatment	Yes	35	The ACT Fidelity Scale	Agency, MCO	Annual	Yes	Yes
Supportive Housing	Yes	245	None	Agency	Ongoing, annually	No	No
Supported Employment	Yes	50	Provider Monitoring	Agency, County	Ongoing, annually	No	No
Integrated Treatment for Co- occurring Disorders (MH/SA)	No	N/A	N/A	N/A	N/A	N/A	N/A
Illness Management/ Recovery	No	N/A	N/A	N/A	N/A	N/A	N/A
Medication Management (MedTEAM)	No	N/A	N/A	N/A	N/A	N/A	N/A
Therapeutic Foster Care	Yes	5	unknown	Agency	Ongoing, annually	No	No
Multisystemic Therapy	Yes	22	unknown	Agency	Ongoing, annually	No	No
Functional Family Therapy	No	N/A	N/A	N/A	N/A	N/A	N/A
Family Psycho-Education	No	N/A	N/A	N/A	N/A	N/A	N/A

^{*}Please include both county and Medicaid/HealthChoices funded services.

To access SAMHSA's EBP toolkits:

http://store.samhsa.gov/list/series?name=Evidence-Based-Practices-KITs

g) Additional EBP, Recovery Oriented and Promising Practices Survey:

Recovery Oriented and Promising Practices	Service Provided (Yes/No)	Current Number Served (Approximate)	Additional Information and Comments
Consumer Satisfaction Team	Yes	300	The Joinder works with community partners including HealthChoices to
Family Satisfaction Team	Yes	300	The Joinder works with community partners including HealthChoices to
Compeer	No	N/A	N/A
Fairweather Lodge	No	N/A	N/A
MA Funded Certified Peer	Yes	300	The Joinder has partnered with three (3) agencies to provide CPS services
Other Funded Certified Peer	Yes	20	The Joinder has partnered with three (3) agencies to provide CPS services
Dialectical Behavioral Therapy	No	N/A	The Program is evaluating opportunities to develop local capacity
Mobile Meds	No	N/A	N/A
Wellness Recovery Action Plan	Yes		Decision Support Center,
High Fidelity Wrap Around	No	N/A	N/A
Shared Decision Making	Yes		The Joinder has three (3) Psychiatric Rehabilitation Service locations
Psychiatric Rehabilitation Services	No	N/A	N/A
Self-Directed Care	No	N/A	N/A
Supported Education	No	N/A	The Program will evaluate treatment needs and opportunities to partner
Treatment of Depression in Older	Yes	300	The Joinder works with community partners including HealthChoices to
Competitive/Integrated	Yes	15	Employment workgroup
Consumer Operated Services	No	N/A	N/A
Parent Child Interaction Therapy	Yes	50	The Joinder has partnered with three (3) agencies to provide
Sanctuary	Yes	300	One (1) contracted provider has been certified in the Sanctuary Model
Trauma Focused Cognitive	Yes	20	Several outpatient providers have clinicians on staff that are
Eye Movement Desensitization	Yes	20	Several outpatient providers have clinicians on staff that are
First Episode Psychosis	No	N/A	N/A
Other (Specify)	No	N/A	N/A

^{*}Please include both County and Medicaid/HealthChoices funded services.

**Do not include numbers served counted in Supported Employment on Evidenced Based Practices Survey above [table (f)]

Reference: Please see SAMHSA's National Registry of Evidenced Based Practice and Programs for more information on some of the practices at the link provided below.

http://www.nrepp.samhsa.gov/AllPrograms.aspx

h) <u>Certified Peer Specialist Employment Survey:</u>

"Certified Peer Specialist" (CPS) is defined as:

An individual who has completed a 10-day Certified Peer Specialist training course provided by either the Institute for Recovery and Community Integration or Recovery Innovations/Recovery Opportunities Center.

Please include CPSs employed in any mental health service in your county/joinder including, but not limited to:

- case management
- inpatient settings
- psychiatric rehabilitation centers
- intensive outpatient programs
- drop-in centers

- Medicaid-funded peer support programs
- consumer-run organizations
- residential settings
- ACT, PACT, or FACT teams

Total Number of CPSs Employed	31
Number Full Time (30 hours or more)	14
Number Part Time (Under 30 hours)	22

INTELLECTUAL DISABILITY SERVICES

Continuum of Services to Enrolled Individuals

The Lackawanna-Susquehanna Behavioral Health/Intellectual Disabilities/Early Intervention Program served approximately one thousand two hundred (1200) children and adults with intellectual disability/autism in fiscal year 2017-2018. The Program implemented a breadth of base and waiver-funded services to eligible participants including: residential habilitation, lifesharing, supported living, community participation support, small group employment, supported employment, respite care, in-home and community support, companion services, nursing services, transportation, behavioral support, home and vehicle accessibility adaptations, Family Support Services (FSS) and supports coordination.

Individuals with intellectual disability/autism and their families receive person centered support from their initial contact with the Program via our Intellectual and Developmental Disability/Independent Eligibility (IDD/IET) Team. Since its' inception in 2016 the IDD/IET has been the initial point of contact for individuals with ID/A seeking support and guidance to navigate systems and achieve an Everyday Life. The IDD/IET supports the individual through the initial contact, intake and eligibility process and provides an introduction to Everyday Lives Values and the LifeCourse Framework. The Team is mobile, meeting each individual in the location most convenient, thereby eliminating barriers related to transportation. The Team is also responsible to assist and support the acquisition of documentation required for eligibility determination. The most important function of the team is to introduce individuals with ID/A to the LifeCourse Framework as the foundation for all future contact with the ID/A system. The focus is a strengths and community-based approach to supporting individuals and families. In addition, the team provides all individuals who do not meet eligibility criteria with tools and community resource information for additional support.

Upon eligibility determination and SCO Choice individuals with ID/A who are added to the waiting list have an opportunity to receive the support of a "Community Specialist". The Community Specialist works with individuals with ID/A registered with The Lackawanna-Susquehanna BH/ID/EI Program and receiving Supports Coordination through Service Access & Management, Inc. (SAM, Inc.). The Program collaborates with SAM, Inc. to identify individuals who may benefit from Community Specialist services. These individuals are generally those who have been determined eligible for ID/A services and who are waiting for waiver funded services OR individuals who are receiving SC Service Only because they do not have an identified need for formal supports/services.

The Community Specialist has the following responsibilities:

- Focus on individual and family engagement; community navigation; developing resources; building social capital.
- Link individuals/families to available community resources/community networks, by providing education about various human service systems including but not limited to educational needs, medical needs, mental health needs, and intellectual disability needs.
- Utilize the LifeCourse Framework and Tools to develop a LifeCourse portfolio with the individuals assigned to their caseload

- Utilize the LifeCourse Portfolio and person-centered planning to locate and coordinate community-based supports with a focus on employment and supporting individuals so that they can be as independent as possible throughout the lifespan.
- Build relationships with community partners and identify areas of need within communities so that unmet needs can be achieved.
- Refer back to the Supports Coordinator if formal supports are required or when waiver funding is identified

Individuals with ID/A who are not working with the Community Specialist or who require formal services receive ongoing Supports Coordination services. Supports Coordinators provide information about available services and providers within Lackawanna and Susquehanna Counties; giving individuals with ID/A the resources to make an informed decision about the type of supports that are needed for each individual. Support needs are determined by the treatment team through formal and informal assessment.

Individuals Served

	Estimated Individuals served in FY 17-18	Percent of total Individuals Served	Projected Individuals to be served in FY 18-19	Percent of total Individuals Served
Supported Employment	4	1.1%	2	0.6%
Pre-Vocational	7	1.9%	5	1.4%
Community participation	19	5.2%	12	3.4%
Base Funded Supports Coordination	162	44.0%	162	46.0%
Residential (6400)/unlicensed	9	2.4%	4	1.1%
Life sharing (6500)/unlicensed	0	0.0%	0	0.0%
PDS/AWC	7	1.9%	5	1.4%
PDS/VF	0	0.0%	0	0.0%
Family Driven Family Support Services	97	26.4%	92	26.1%

Supported Employment:

The Lackawanna-Susquehanna BH/ID/E Program is committed to "Employment First" for all individuals with intellectual disabilities. The Program has been gathering employment data since

FY 15-16 to track our efforts to increase the number of individuals with ID who are working in competitive, integrated settings.

The Program's Employment Workgroup, convened in September 2014, and has consistently grown in size and scope. We currently have representation from ID service providers, school districts, intermediate units, transition coordinators, ID employment providers, The Office of Vocational Rehabilitation, The Chamber of Commerce, ODP and other community stakeholders. The Employment Workgroup meets quarterly to share information, stay informed on ODP and OVR initiatives, and network with providers and other stakeholders on best practices and innovative approaches to enhancing opportunities for employment. The Program currently authorizes supported employment career assessment, job finding/ development, job coaching/ support.

		FY 15-16				FY 16-17				FY 17-18			
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	PART TIME	42	40	42	42	44	46	43	41	41	42	19	
Employed with	FULLTIME	1	1	1	1	- 1	- 1	1	1	1	0	0	
ODP Supports	SGE	N/A			N/A			N/A			N/A	40	
	TOTAL	43			43			44		42	42	59	
Sandandorf.	PART TIME	36	40	44	48	50	48	47	46	47	44	48	
Employed w/o	FULL TIME	- 5	6	7	9	8	8	8	8	8	10	12	
ODP Supports	TOTAL	41	46	51	57	58	56	55	54	55	54	60	
Total People Employed		84	87	94	100	103	103	99	96	97	96	119	
Job Finding with Supports			3	3	2	0	1	1	0	0	0	1	
	Grand Total:	87	90	97	102	103	104	100	96	97	96	120	

The Program initiated an Employment Capacity Grant in February 2018. We extended the opportunity for each of our six (6) supported employment providers to participate in Discovery Certification through Marc Gold and Associates. Five (5) supported employment providers accepted the grant and designated an employment specialist within their agency to attend an initial three-day training on Discovery. Following the initial three-day training all five supported employment providers have committed to proceeding through the twenty-week Discovery Certification.

The Program intends to continue the capacity grant with all five provider agencies who successfully complete Discovery Certification and will fund their certification in Job Development and Systematic Instruction. Providers will be required to provide the Program with an action plan indicating how they will incorporate the concepts of Discovery; Job Development; Systematic Instruction into their current practice to increase employment for individuals with ID/A registered with The Lackawanna-Susquehanna BH/ID/EI Program.

Supports Coordination:

Supports Coordination Organizations that serve individuals registered with the Program are members of the Lackawanna-Susquehanna BH/ID/EI Program's Community of Practice Regional Collaborative. The SCOs also participate at Regional and Statewide Community of Practice meetings. The Program provides SCOs with LifeCourse tools necessary to engage families in discussions about community based, integrated supports as well as assisting families in building a

natural support system that will be a strong foundation for their LifeCourse trajectory. The Program will continue to assist SCOs through additional training and access to the PA Family Network Advisor and the Program's LifeCourse Specialist.

In August 2017 the Program provided training to Supports Coordination Organizations on utilizing the LifeCourse Framework to support individuals and families registered with ID/A services. The training focused on facilitating discussions with individuals and families to access community and natural supports in pursuit of a vision of an "Everyday Life". SCO staff are currently identifying individuals who are interested in the LifeCourse philosophy and have initiated use of the tools with interested families.

The Program is currently piloting a project in collaboration with a Supports Coordination Organization, Service Access & Management, and has imbedded a "Community Specialist" within the SCO who will work with individuals and families on the wait list.

The Community Specialist has the following responsibilities:

- Focus on individual and family engagement; community navigation; developing resources; building social capital.
- Link individuals/families to available community resources/community networks, by providing education about various human service systems including but not limited to educational needs, medical needs, mental health needs, and intellectual disability needs.
- Utilize the LifeCourse Framework and Tools to develop a LifeCourse portfolio with the individuals assigned to their caseload
- Utilize the LifeCourse Portfolio and person-centered planning to locate and coordinate community-based supports with a focus on employment and supporting individuals so that they can be as independent as possible throughout the lifespan.
- Build relationships with community partners and identify areas of need within communities so that unmet needs can be achieved.
- Refer back to the Supports Coordinator if formal supports are required or when waiver funding is identified

The Program is currently working to identify resource materials that SCOs can use to introduce families to self-direction.

Lifesharing and Supported Living:

The Program has a LifeSharing subcommittee to our Quality Council which has a primary goal of supporting LifeSharing providers and expanding LifeSharing services within the joinder. As part of the Program's Quality Management Plan, in FY 2017-2018, we began working on a Public Service Announcement (PSA) to inform the public about LifeSharing. The objective of the PSA is to both increase the number of individuals with ID/A participating in LifeSharing by generating interest, and to increase the number of host families who provide the service. The PSA was completed in March 2018 and is currently posted to the Program's website, the websites of participating LifeSharing agencies and is running on local television, radio and launched on Facebook.

The Program has assessed that the current barrier is a lack of information on the availability of the service. Additionally, we have identified the following barriers: 1) the difficulty in recruiting host families 2) the reluctance of biological or natural families to see lifesharing as a viable option 3) the

increasing medical and behavioral needs of individuals which make it difficult for them to remain in lifesharing as they age due to their care needs.

We have been successful in maintaining the number of individuals participating in lifesharing. We have had marginal success in increasing the number of individuals receiving this service.

Public awareness and education on lifesharing would be valuable. Many individuals and families do not have a clear understanding of lifesharing. Public Service Announcements done at the state level would be helpful.

Cross Systems Communications and Training:

The Program has routinely provided individuals with access to "Support in a Medical Environment" when individuals are hospitalized or residing in short term rehabilitation facilities to support their return to the community. The Program will continue to budget base funding to ensure individuals who require hospitalization or nursing facility level of care have access to individual staff support, behavior support and other specialized services in addition to Supports Coordination.

Local school districts and intermediate unit staff are members of the Programs Community of Practice Regional Collaborative and participate in collaborative meetings. Additionally the Program conducts continuing outreach activities through our LifeCourse Specialist to school districts and the districts routinely invite the LifeCourse specialist to IEP meetings, transition meetings and transition fairs. The Program has developed a strong working relationship with many school districts in the joinder who refer students to our Independent Eligibility Team for early eligibility determination.

The Program has a strong working relationship with the Lackawanna County Office of Youth and Family Services and Susquehanna County Children and Youth Services. Program staff participate in county Systems of Care committees and representatives of both counties children and youth agencies participate in the Regional Collaborative. The Lackawanna County Area Agency on Aging participates in the Regional Collaborative. The Program works in concert with these sister agencies to ensure coordination and continuity of care for individuals across the life span. The Program has developed a strong partnership with The Lackawanna County Office of Youth and Family Services and we collaborate on many complex, shared cases as well as collaborating to ensure the successful transition of youth in the OYFS Independent Living Program. The Program also participates in the Cross Systems Transition Conference (CSTC), which is a joint effort of the Lackawanna County Department of Human Services and The Lackawanna-Susquehanna BH/ID/EI Program. The CSTC works to ensure a successful transition to adulthood for youth involved in multiple systems. Similarly we have a close working relationship with the Area Agency on Aging and participate in joint committees to address service gaps. Our ongoing relationship with our community based mental health partners ensures collaboration on multiple dually diagnosed high-risk cases.

Emergency Supports:

The Program will continue to use Base funds, as appropriate and available, to support individuals who require emergency placement in residential settings.

The Program does not "reserve" block grant funds to address emergencies but we review all new requests for service to ensure that requests are based on need, and we closely monitor utilization and budget encumbrance to ensure that funds are utilized commensurately throughout the year and available for new requests as they are identified.

Mental Health Mobile Crisis services are available to individuals experiencing a mental health emergency. Mobile crisis is available in both Lackawanna and Susquehanna Counties. Many of the staff who work the mobile crisis after hour's team have a background in intellectual disability services.

Both the Supports Coordination Organizations and the AE Director of ID Services are available after hours should needs arise which require immediate attention. The Program responds to emergencies during business and non-business hours. Emergencies during business hours are directed to Supports Coordination Organizations (SCOs). SCOs alert the Program to emergencies that require additional funding, waiver capacity, or authorization of services. Calls are directed to the Director of Intellectual Disability Services and/or the Waiver Coordinators; the Quality Management Coordinator is available during business and non-business hours for emergencies that are discovered through Enterprise Incident Management and/or Adult Protective Services (APS). In the event an emergency occurs after-hours, individuals and families contacting a SCO are directed to the on call SCO Director. SCO Directors have access to Program staff 24 hours/day. The Director of Intellectual Disability Services is available to provide technical assistance and emergency service authorization or funding authorization. Emergencies that require unanticipated waiver or base funding are assessed by the Director of Intellectual Disability Services for approval and authorization.

Administrative Funding:

The Program is engaged with The PA Family Network and representatives from PA Family Network participate on the Lackawanna-Susquehanna Regional Collaborative. Additionally, representatives from PA Family Network collaborate with program staff to provide training and technical assistance to families via established committees such as Right to Education Task Force, Systems of Care, and Early Intervention Local Interagency Coordinating Council.

The Program supports a LifeCourse Specialist imbedded within our Intellectual and Developmental Disability/Independent Eligibility Team who is trained on the LifeCourse philosophy and educates families on the life course philosophy and materials throughout the initial contact and intake process. In addition, the Specialist will be a liaison to community stakeholders throughout the joinder. The Specialist will provide training and technical assistance to:

- Connect and Network--establish parent support groups or support existing parent support and advocacy groups to implement the Life Course Framework
- Discovery and Navigation--conduct outreach to community stakeholders on the life course framework (i.e. pediatricians, school districts, Boys and Girls Clubs, YMCAs, Scouting, etc.)
- Goods and services--refer individuals and families for eligibility determination and/or formal supports when necessary

The Life Course Specialist is responsible for both individual and group training and technical assistance.

With the support of ODP, the Program would benefit from continued support of the PA Family Network and Regional and statewide meetings. Community of Practice Meetings are excellent opportunities to network with other Regional Collaboratives and share strategies for success.

The Program has a strong relationship with the **Northeast PA Health Care Quality Unit (HCQU)**. We work collaboratively with the HCQU to support individuals with complex medical and behavioral needs. The HCQU is a resource to provide support, training, and advocacy on both an individual and system wide level. The HCQU is an excellent resource for training and support for provider agencies, individuals and families. Additionally, the HCQU serves as a member of our Quality Council and Risk Management subcommittee to the Quality Council. Historically the HCQU is a member of the Quality Council and contributes to the development, review and analysis of the QM plan. Current objectives on the QM plan that include action steps related to the HCQU involve Participant Safeguards: Risk Management and Ensuring Individuals are Free from Abuse.

Currently a representative from the Independent Monitoring for Quality (IM4Q) Program participates on the Program's Quality Council and contributes to the development, review and analysis of the QM plan. The Program works closely with the local IM4Q vendor to identify individual and systemic considerations for improvement that are reported through the IM4Q surveys. Any major concerns that are shared during the monitoring process will continue to be immediately reported to the Program for follow-up. Also, individual considerations will continue to be data entered into HCSIS for follow-up by the supports coordination organization and monitoring by Program staff

The Program has historically utilized the HCQU and Regional Positive Practices as resources to increase the competence and capacity of providers. The joinder has a strong network of providers who have a long history of serving individuals with complex medical and behavioral health needs.

ODP can assist the Program's efforts by ongoing training for providers on new and innovative approaches to service delivery to include incorporating technology to streamline service delivery, assure quality documentation and collect data.

The Risk Management subcommittee to the Quality Council currently meets quarterly to review Incident Management data and address risk. Standing members include the HCQU and the Incident Management Contractor, members of the Human Rights and Restrictive Procedure Review Committees and representatives from ODP. The Program routinely invites providers to participate in follow-up meetings to complete case reviews for individuals who have four or more incidents during an identified interval, or when we identify trends in the Incident Management data. We routinely engage the HCQU to follow-up on medication errors or provide chart review for individuals who have multiple illnesses, ER visits, hospitalizations. The HCQU supports the ISP team with understanding medical diagnoses and treatment and advocating with primary care physicians and specialists.

The Program presently interacts with all aforementioned entities with the exception of individuals and families. The Program will be evaluating how to best include individuals and families in risk management activities.

All service providers currently have emergency response plans in accordance with Chapter 51 requirements. Emergency response plans are verified during the Quality Assessment & Improvement Process. In the event that an individual requires services, residential or other, outside working hours Supports Coordination Organizations contact the Director of Intellectual Disability Services who works in conjunction with the SCO and provider emergency point persons to coordinate a response.

Participant Directed Services (PDS):

Participant directed services are discussed with families when they begin the eligibility process and again at registration. SCOs discuss participant directed services with family's as part of the initial and annual Individual Support Plan Process. The Program will continue to promote participant directed services as an option for families.

The Program will research and disseminate information to families of training opportunities related to participant directed services. ODP can support efforts by hosting training opportunities for families.

Community for All:

The Program currently has two (2) individuals residing in State ICFs/ID. The Program will continue to work with the individual guardians to plan for a return to community-based settings for these individuals.

HOMELESS ASSISTANCE SERVICES

An individual or family that becomes homeless in Lackawanna County has multiple services at their disposal to assist them with rapid rehousing. The Lackawanna County Continuum of Care (COC) works closely with the Lackawanna County Department of Human Services and the Lackawanna County Office of Youth and Family Services to constantly improve and refine practice in order to provide efficient services and interagency communication allowing the county to better assist the homeless and chronically homeless.

Through effective case management, clients complete a comprehensive intake screening and are directed to the service that best fulfills their need. At this level the need for rental assistance, mental health services, drug and alcohol services and child protective services, etc. are considered in an effort to build on the client's strengths and give the additional support and guidance they need to maintain permanent housing.

Clients completing the intake phase at any of the human service agencies working with our homeless may be directed to Bridge Housing, a shelter for women and small children, a shelter for single individuals, family shelter units, and a shelter for individuals experiencing domestic violence. In some instances brief hotel stay vouchers are issued to help keep families intact.

In addition to the emergency services listed above the homeless and chronically homeless in Lackawanna County also are referred to Permanent Supportive Housing and Rapid Rehousing Programs based upon identified need. Through collaborative case management, families and individuals receiving these services quickly stabilize and are the most successful. In most cases the clients are closed out of services after one year. The majority of successful discharges do not reopen for services at a later date.

Lackawanna County Department of Human Services continues to maintain a positive relationship with service providers in the community. In addition to establishing consistent guidelines for all case managers to follow, the county clearly defines its expectations for the providers and works to guarantee consistent service delivery regardless of which agency provides the service.

In an effort to provide a single point of communication and to support the improvement initiative the Lackawanna County Department of Human Services created a Housing Coordinator position. In September 2015, the county hired an individual to coordinate services for homeless families and individuals working with the following county departments; Office of Youth and Family Services, Area Agency on Aging, Office of Drug and Alcohol Programs and the Behavioral Health/Intellectual Disabilities/Early Intervention Program. This individual refers clients directly to shelters, case management and rapid rehousing programs while monitoring the progress the client is making with multiple providers. In April 2018, the Lackawanna County Department of Human Services created and staffed the position of Housing Aide. This position works in cooperation and collaboration with the Housing Coordinator to assist families who have active cases with the Office of Youth and Family Services to obtain and maintain permanent housing. The Housing Aide assists clients with completing applications for housing and financial assistance, locating available housing, conducting job searches and transportation to agencies for housing supportive services. Once housing is obtained, the Housing Aide will assist with furnishing the home, teaching and modeling

homemaking skills, provide assistance with budgeting and nutrition and monitoring to insure that housing is maintained.

Lackawanna County has an ongoing shortage of affordable housing units. Homeless families continue to contact the agency daily to seek assistance. Lackawanna County has taken a proactive approach in its attempt to coordinate the necessary services for these families and individuals. In addition to the monthly meetings held by the COC and Housing Coalition, the county sponsors an emergency call line that follows the practice of both the M.D.T. and the C.A.S.S.P. models. This call helps community providers coordinate efforts and maximize resources. The county also holds monthly meetings with the local housing authorities and providers to help bridge the service gaps and encourages collaboration before emergency situations develop. The county Housing Coordinator and Housing Aide also meet monthly with other housing providers to discuss and coordinate services for mutual clients.

Young adults between the ages of 18 and 21 still attending high school and facing homelessness remain a major challenge to the community. The county Housing Coordinator works closely with the Lackawanna County Independent Living Collaborative to find creative solutions that school districts, consumers and providers can utilize in these circumstances. In February 2018, a service provider established a presence in Lackawanna County to serve this population through a rapid rehousing program.

The county continues to model collaborative projects, solutions and approaches to problem solving for the community and providers. The efforts that have been made are shown in the improving outcomes and the changes in the human service community.

Bridge Housing

The Bridge Housing Program provides transitional help for women and children who are homeless and in need of assistance to reach their goal of self-sufficiency. Before acceptance into the program, each client is interviewed by two staff members. Upon acceptance, each family is set up in an apartment with furniture and other needed household items. The Bridge Housing Program offers stable, affordable housing with the advantage to the women that they can remain in their apartments when the program is over. In the course of the year long program, the women receive intensive case management, linkage to necessary referrals and weekly educational sessions promoting real time life skills such as parenting, communication and conflict resolution skills, budgeting and planning and preparation of nutritious meals. The program also provides support and assistance in finding employment, as well as encouragement to begin saving money. Recreational activities are scheduled for each holiday with the goal of increased socialization and family bonding. The program is monitored by a caseworker who tracks the client's participation in the above activities aimed at improving their self-confidence and self-esteem as they move toward self-reliance and independence.

The success of the program is evaluated by the following goals:

- The number of women and children who are permanently housed at the end of the program
- The number of women working or increasing their income by program end

Follow up with the client is done 60 days after leaving the program while many clients remain in contact with the agency beyond that time frame. Additional follow ups at 6, 9 and 12 month intervals will be performed by the agency in FY 2018-19 to assess the client's status and housing stability.

Case Management

The Case Management Program works with homeless families and/or individuals who lack a fixed, regular and adequate residence and/or are coming from a shelter which provides temporary living accommodations and families and/or individuals who are being threatened homeless and are looking to stay stably housed. The case manager meets with the client to assess their needs and works with them to secure affordable, safe housing along with other resources. Short and long term goals are set in the following areas: basic life skills, health needs, financial management, parenting skills, home maintenance, job preparation skills, employment training and helping the client to access the agencies and programs that can help them achieve their goals. Since each case varies depending on the needs of the individual/family, all goal plans are individualized. After closure of the case, clients receive a 90 day follow up to determine their status.

We are working together with the Continuum of Care, Housing Coalition and Independent Living Committee members to collaboratively work on the cross systems training that educates direct service professionals and line staff to best provide Case Management services. In FY 2016-17, we required providers to do more in depth and intensive case management by immediately developing goal plans with the clients and requiring follow up appointments on a weekly and/or biweekly basis depending on the client's needs. We continue to implement this requirement and are working toward the goal of keeping more of the population from being repeat clients and raising the number of clients stably housed.

The success of the program is evaluated by the following goals:

- The number of homeless/near homeless individuals/families assisted with securing and/or maintaining housing
- The number of homeless/near homeless individuals/families assisted with an individualized service plan to meet short and long term goals including basic life skills, health needs, financial management, home maintenance and employment.

Rental Assistance

The Rental Assistance Program provides the client, who is homeless or threatened homeless, with both monetary and supportive help including advocacy, referral and guidance to ensure this is a onetime barrier to keeping their housing. Individuals needing this service will meet with staff to discuss the reason they are in this situation, what prevented them from having funds to pay the rent, guarantee of affordability in the future and offer case management and referral services. Staff collect photo ID, Social Security card, proof of income, eviction notice or letter from referring

program showing homelessness, any bills they have and leases (if applicable). All clients complete a budget to not only show the guarantee they can afford the rent in the future but also their other living expenses. Clients are also screened to see if they are eligible for the Emergency Shelter Allowance (ESA) from the Pennsylvania Department of Human Services. If eligible, they are referred to that program first to see how much assistance can be provided. After Rental Assistance is provided, clients receive a 90 day follow up to determine their status.

Rental Assistance is an ongoing need in our county. Service providers continue to increase their focus on engaging clients, who seek rental assistance, in case management and supportive services to provide them with help to maintain their self-sufficiency. We believe that increasing this focus will keep more of the population from being repeat clients and raising the number of clients stably housed.

The success of the program is evaluated by the following goals:

- The number of near homeless individuals/families whose evictions were prevented
- The number of homeless individuals/families able to obtain permanent housing

Emergency Shelter

Emergency Shelter provides for persons who are homeless with no alternative means of housing and in immediate need of shelter. HAP funding will be allocated to provide hotel stays of a maximum of 45 days for families in need of emergency shelter. These families will be actively involved with the Lackawanna County Office of Youth and Family Services and/or the Lackawanna County Department of Human Services. Upon placement in the hotel, case management services will begin immediately to help the family identify the reasons for their homelessness and to develop a plan to address these issues and to obtain the services needed to enable the family to become stably housed. Desired outcomes of funding this service will be that families remain intact, obtain permanent housing and remain stably housed.

The success of the program is evaluated by the following goals:

- The number of families prevented from becoming street homeless
- The number of families able to remain intact
- The number of families exiting to permanent housing

Coordination will be maintained between the HAP Emergency Shelter component and the Local Emergency Food and Shelter Assistance Board that administers FEMA funds as the Lackawanna County Department of Human Services and the Lackawanna County Office of Youth and Family Services are members of the Local Board of the EFSP.

Other Housing Supports

Due to limited HAP funding, the identified priority service areas were funded. No funding was available to provide Other Housing Supports.

HMIS

Lackawanna County works with the HAP provider, United Neighborhood Centers, who maintains the HMIS. We certify the information is generated by a HMIS database.

Administration

Administration in the amount of \$8,621.00 has been allocated for the Homeless Assistance Program.

SUBSTANCE USE DISORDER SERVICES

The Lackawanna-Susquehanna Office of Drug and Alcohol Programs (the Program) is a joinder program of the former Lackawanna and Susquehanna Single County Authorities. Formed in 2010/11, the mission of the Lackawanna-Susquehanna Office of Drug and Alcohol Programs is to prevent the onset of substance abuse and substance use disorder (SUD) and to mitigate its harmful effects on individuals, families, and the community. The Program provides comprehensive, qualitative, and cost-effective approaches to prevention, intervention, and treatment services. The Program organizes and coordinates services for individuals with substance use disorders in a manner that promotes recovery while elevating and transforming the existing system of care. For this caliber of transformation to take place, the Program engages and empowers individuals to take an active role in the recovery process while educating providers and the community about current, effective, and evidence-based approaches to prevention, intervention, and treatment.

As a County Drug and Alcohol Program, we are charged with a commitment to our local community, and to individuals with substance use disorder, to streamline eligibility and access to services and to enhance the quality and coordination of those services. Funding limitations, capacity issues, and widespread stigma associated with substance use are persistent and considerable impediments that the Program faces daily. Despite barriers, the Program works, arduously, to promote the highest degree of functioning and quality of life for all individuals in our system.

The Program has management and direct service responsibilities in the following areas:

Administration—programmatic and fiscal oversight of the substance abuse system within its county jurisdictions. This includes, but is not limited to, planning, development, support, and maintenance of a comprehensive substance abuse system of care which is responsive to local community needs; contract negotiation; provider monitoring; and ensuring compliance with state and federal regulations and guidelines. The Program places primary importance on maximizing the search and procurement of all available monies from diverse funding sources.

Prevention—primary source of most school-based and community-based programming in Lackawanna County and oversight responsibility in Susquehanna County. Activities include, but are not limited to, curricula training in substance abuse, violence prevention

and tobacco cessation; Student Assistance Program for the northeast school districts; support-group facilitation at elementary, middle and high school levels; in-service training for school faculties and social service agency staff; community organization and development initiatives; parenting programs; conference sponsorships, organization of multi-media campaigns, and presentation of diversified education and informational programs to the general public.

Intervention- The Program contracts with local providers for outreach and hotline services, targeted primarily towards individuals who suffer from opioid use disorder. The hotline service provides screening, referral, and emergency detox placement after regular Program work hours and weekends.

The Program supports a recovery resource center at the Community Intervention Center (CIC) that specifically targets persons who have substance use disorder and provides person centered, strength-based, and self-directed strategies for change.

Case Management—A point of entry into the substance abuse system of care for clients who are Medicaid eligible, under-insured, or uninsured in both Lackawanna and Susquehanna county. Program Case Management services include comprehensive screening, assessment, level of care determination referral and placement in the provider network, care management, case coordination, and recovery support services.

Treatment — the Program is responsible for the oversight of substance use treatment services and systems of care in both Lackawanna and Susquehanna County. The Program monitors licensed and contracted treatment providers within its geographic jurisdiction, sets rates for local outpatient treatment providers and, as a member of the Northeast Regional SCA Consortium (Region D), sets rates for inpatient treatment providers throughout the region. The Program supports programs which can meet a documented need for service and which demonstrate both fiscal and programmatic responsibility.

Recovery Support Services – Recovery Support Services are non-clinical services (transportation, housing, child care, employment, recreational) provided by trained peers in the recovery community that assist individuals and family members overcome environmental and personal barriers to recovery.

The Program receives funding from a variety of sources to deliver services, including: state and federal block grants through the Commonwealth Department of Drug and Alcohol Programs (DDAP), local County matches, grants and awards targeted for various special initiatives, Act 152 and BHSI awards from the Department of Human Services

(DHS). DHS funds are utilized to provide treatment, case management and recovery support.

A full continuum of care is offered to individuals, of all ages, who need treatment services, including: outpatient counseling, intensive outpatient counseling, partial programming, halfway house, non-hospital detoxification, non- hospital inpatient rehabilitation, hospital-based detoxification, hospital-based rehabilitation, medication assisted treatment, case management and recovery support.

The method by which the Program determines clinically appropriate levels of care for individuals is the central organizing component, which legitimizes its coordinated Program's Management Unit approach. Specifically. the Case comprehensive screenings and standardized level of care assessments. Individuals who seek Program funding must demonstrate that they are uninsured and income insufficient while meeting the clinical guidelines for a particular level of care, as specified by the American Society of Addiction Medicine (ASAM) Criteria for both adults and adolescents. A liability determination is administered by the Program's Case Management Unit to effectuate access to treatment services. Once eligibility is determined and authorization granted, the Program works closely with its contracted provider network for referral and placement into substance use treatment services.

The Program consistently explores and exhausts all avenues which may result in the acquisition of appropriate health care coverage for individuals. This includes intensive coordination and communication with the local County Assistance Office (CAO) as well as the region's Certified HealthCare Navigator for the Affordable Care Act. The Program is a Community Partner on the COMPASS website.

Throughout the course of the year, the Program observed multiple funding opportunities that offered extended lengths of stay in residential and halfway house services as well as medically assisted treatment for individuals. The Program continues to make every effort to partner or otherwise pursue these funding opportunities as the identified gaps in services are realized at a local level. For the upcoming year, the Program intends to continue to redirect a considerable amount of its allocation to treatment-based programming as a direct result of the heroin and opioid epidemic affecting the area.

Act 152 funding routinely diminishes prior to the end of each fiscal year. The Program utilizes alternative funding sources and accesses Health Choices for individuals to avoid placing individuals on waiting lists. When the Program is compelled to generate waiting lists, for individuals requiring services, the Case Management Unit, initially, determines if individuals meet criteria for emergent detoxification. If individuals do not meet criteria then the Case Management Unit provides interim services such as outpatient counseling, information regarding local recovering communities, 12-Step meeting lists, and recovery support services.

The Prevention efforts of the Program are the primary source of school-based and community-based programming in the Lackawanna and Susquehanna counties. Activities include, but are not limited to, curricula training in substance abuse, violence prevention and tobacco; PDE SAP trainers to school districts; support group facilitation at elementary, middle and high school levels; in-service training for school faculties and social service agency staff; community organization in the development of "Partners in Prevention" initiative; parenting programs; the sponsoring of various community conferences, the organization of semi-annual multi-media campaigns, and diversified education and informational programs to the general public.

The Program contracts with the Department of Education as the approved and designated Pennsylvania Student Assistance Program (SAP) training provider. The Prevention Unit for the Program is responsible for training school personnel in identifying issues, including substance use and mental health, which pose a barrier to a student's learning and school success. SAP trained personnel ensure that students experiencing barriers to learning, related to substance use and mental health, are linked to appropriate supportive services in the school and community. Four annual SAP trainings are conducted each school year.

The Program works closely with the entire human services system to coordinate efforts that maximizes and streamline services for individuals. The Program is an active participant in numerous cross systems initiatives, such as, the Family Engagement Team Meetings, IDTA Core Training Initiative, Systems of Care, the Independent Living Initiative, the Criminal Justice Advisory Board, the County Re-entry Initiative. The Program is committed to resource sharing amongst the integrated human services system. Opportunities for information dissemination, ad hoc work groups and committees, and specialized trainings, are continuously offered, by the Program to the human services system and community agencies alike.

The opioid epidemic (i.e. prescription opioid medication and heroin abuse) prevails as the major challenge for the Program. The Program observes alarming trends pursuant to opioid use disorder such as an increased number of individuals in need of formalized substance use treatment services (for either heroin or opioid prescription medication); substantial opioid overdose deaths; an increase in the number of persons who transition from prescription opioid to heroin abuse. This trend is evidenced in Program's data systems as well as in anecdotal reports from treatment and case management providers and front-line law enforcement officials.

The Program is committed to enhancing efforts to implement a comprehensive and coordinated approach that addresses key risks involved in opioid use disorder. The major objectives of these efforts include: extending lengths of stay for long term residential and halfway house services; identifying appropriate individuals for medically assisted treatment, including those involved the criminal justice system. For these objectives to be achieved and sustained the Program will cultivate key relationships and establish formalized protocols with vested entities.

By way of diversion control, several drop boxes are located at police municipalities and Courthouses in both Lackawanna and Susquehanna County. Prescription "Take Back Events" and "Safe Medication Disposal Days" are conducted throughout the year at area personal care homes, hospice agencies, pharmacies, and police departments.

1. Waiting List Information:

Detoxification Services
Non-Hospital Rehab Services
Medication Assisted Treatment
Halfway House Services
Partial Hospitalization
Outpatient

# of Individuals	Wait Time (days)**
0	0
0	0
0	0
0	0
0	0
0	0

In most cases, Lackawanna/Susquehanna County residents are not placed on waiting lists for any substance use disorder services. All Lackawanna/Susquehanna County residents requiring a level of care assessment are assessed within days (Department of Drug and Alcohol Programs requires seven days from date of first contact) and placements in the appropriate level of care occur within days (DDAP requires 14 days after LOC for a placement to be made). The only level of care that has a wait list is Non-Hospital Residential Long-term Treatment or a 3C placement. Wait lists for this level of care can range from a week to a month depending on some factors such as gender and mental health diagnoses. Unfortunately, there are not enough 3C beds within the system to accommodate the need. All other levels of care do not currently have wait lists.

2. Overdose Survivors' Data:

# of Overdose Survivors	# Referred to Treatment	# Refused Treatment	# of Deaths from Overdoses		
81 (reported to the	Program has	Accurate number	88 for Lackawanna		
CCE)	referred 35 to	not available	5 for Susquehanna		
	treatment		·		

The information included in the boxes above may not reflect the true number of overdose survivors or the number of overdose survivors referred to or refusing treatment. The Program suspects that the number of overdose survivors is much higher than reflected in the box above as there has not been a central entity to report such data. The number of reported fatal overdoses in Lackawanna County (88) in 2017 has been confirmed by the Lackawanna County Coroner. The number of fatal overdoses in Susquehanna County (5) in 2017 was confirmed by the Susquehanna County Coroner. The warm handoff process outlined below will help with accuracy of the overdose survivor data. The warm handoff process below will require the hospitals

and EMS to report overdose survivor data to the Program as well as to PA Ambulance, the CCE. This requirement will ensure that the data acquired for FY 2018-2019 is accurate.

The Department of Drug and Alcohol Programs (DDAP) requires the Program to report on overdose survivor data including the number of overdose survivors accessing treatment services and the number of overdose survivors refusing treatment services. This data should be reported to the Program by the local hospital emergency departments and other law enforcement/emergency management services (EMS) agencies. Overdose survivors and individuals suffering from an opioid use disorder can access treatment in the traditional way through the Lackawanna/Susquehanna Office of Drug and Alcohol Programs screening, assessment, and referral to treatment process through the Case Management Unit during normal business hours or after hours or these individuals can access services through a newly planned hospital system.

Currently, when the Program gets a referral the screening is completed either in one of the two Program offices or by telephone by after-hours staff. If detox services are indicated, a placement is made <u>immediately</u> to one of the contracted providers. If detox is not indicated, an assessment is scheduled with an Case Manager the first business day after the request. Every effort is made to place the applicant in the appropriate level of care as soon as possible.

The Program is piloting a warm handoff program with the three hospitals in Lackawanna County (Geisinger Community Medical Center, Commonwealth Health Regional Hospital and Commonwealth Health Moses Taylor) and the two in Susquehanna County (Barnes Kasson and Endless Mountain Health System). The program will roll out first at Geisinger Community Medical Center. The Program has partnered with the Scranton Counseling Center, the already established crisis provider at the hospital, to embed Certified Recovery Specialists (CRS) in the hospital Emergency Department 24/7. When an overdose survivor (especially one revived by Narcan), arrives at the hospital, an alert for the CRS service will be made. A standing order has been created and will be used to ensure that all overdose survivors can access this service. Once the client is medically cleared, the CRS will begin the engagement, screening and hopeful referral to treatment process. The CRS through the Scranton Counseling Center will handle the screening and referral to treatment and the Program will continue to handle the full level of care assessment and will follow the client through the continuum of care to ensure that client receives the appropriate course of treatment. The Program will staff all cases arriving in the hospital on the next business day to ensure client transitioned appropriately. The Program will hire a case manager for this purpose. All treatment options will be available to an overdose survivor, including the use of medication assisted treatment (MAT) through a contracted provider or through a Centers of Excellence (COE). Clients who refuse treatment (including those who refuse transportation to the hospital) will be scheduled with the CRS at the Program on the next business day and will be given information about treatment options. This program should be operational by June 2018 at Geisinger Community Medical Center.

The Program and community partners hope to expand this program to the two other hospitals in Lackawanna County post June 2018. The Program is working to roll out a similar program in the two hospitals in Susquehanna County. Until that happens, all overdose survivors can call the on call, after hours, number for the Program's Case Management Unit and the case manager on call will assist with a placement immediately. Susquehanna County residents can call the on-call number for the Program's case management unit or call the on-call number for TREHAB. An on-call CRS can and will be dispatched to the hospital to assist with a placement if the client is struggling. The screening, assessment, referral to treatment and care coordination piece will remain the same and the Program Case Management Unit will follow up to ensure the client transitioned appropriately to treatment.

The Program's Case Management Unit will track all data from all hospitals. The data will be shared monthly with DDAP via survey money as required.

3. Levels of Care (LOC):

LOC	# of Providers	# of Providers Located In- County	Special Population Services**
Inpatient Hospital Detox	1	0	Co-occurring
Inpatient Hospital Rehab	1	0	Co-occurring
Inpatient Non-Hospital	15	2	Co-occurring and women
Detox	. •	_	with children
Inpatient Non-Hospital	29	2	Co-occurring and women
Rehab	29	2	with children
Partial Hospitalization	12	8	Adolescents
Intensive Outpatient	14	9	Adolescents
Outpatient	14	9	Adolescents
Halfway House	13	1	
	(3 additional	(3 additional	
	pending)	pending)	

4. Treatment Services Needed in County:

The Program contracts with a variety of treatment providers to ensure residents of Lackawanna and Susquehanna Counties have access to all levels of care. As noted, the only level of care with a waiting list is residential long-term treatment and currently, this waiting list is short. While access to clinical treatment is available to county residents in need, access to recovery support services including housing and transportation are lacking.

The Program continues to see the benefit of Recovery Oriented Systems of Care (ROSC) in both Lackawanna and Susquehanna County. In this system, individuals

and families are presented with more options with which to make informed decisions regarding their care, services are better designed for accessibility and easier to navigate, and whole person/community health and wellness thrives at the forefront of care management. One ROSC initiative is the introduction and training of Certified Recovery Specialists (CRS). CRS are currently placed within the provider network in the counties. These individuals are in recovery from a substance use disorder and can provide lived experience for clients. HealthChoices Reinvestment funds allowed the community treatment providers to hire CRS to enhance their agencies. The Reinvestment funds are coming to an end and the Program has included resources in the 2018-2019 provider contracts to continue this important service.

In addition to the infusion of CRS workers into the system, Program continues to partner with the Northeast Behavioral Healthcare Consortium (NBHCC) on a HealthChoices Reinvestment plan for Recovery Centers. Recovery Centers are a place for individuals suffering from a substance use disorder to go to receive peer-based recovery support services. The Centers should promote not only recovery but also promote wellness, education, housing and employment related activities. TREHAB was awarded the Reinvestment funds to open a Recovery Center in both Susquehanna and Wyoming County. The RFP for the Recovery Centers for Lackawanna and Luzerne should be released in the fall of 2018. Once the Reinvestment funds expire, the Program plans to provide additional resources to the provider agencies selected to continue the service.

Through a Block Grant reinvestment plan, the Program partnered with the Lackawanna/Susquehanna Office of Behavioral Health and Intellectual Disabilities Program to implement Re-entering Citizens Program; which provides residential services in an 8-unit program designed to help meet an urgent need for Lackawanna County re-entry population that suffers from mental illness and substance use disorder. The forensic re-entry housing program supports incarcerated people with behavioral health needs to re-enter into the community. The release to a behavioral health supported program will allow individuals to secure employment, permanent housing, and reunification with family. In addition to housing, the program will provide case management, support with daily activities and provide a safe and secure environment. All clients receiving services in the program are encouraged to participate in community treatment options such as psychiatric rehabilitation, outpatient, medication management and peers supports, to name a few. For individuals involved with the Mental Health Treatment Court; a weekly synopsis is submitted by the Program Director to provide additional support and communication regarding individuals progress with recovery. The program is staffed 24 hours a day/7 days a week.

The Program has the capacity to provide emergency shelter and housing assistance to homeless or near homeless individuals who agree to participate in drug and alcohol treatment, self-help groups, or other recovery supports. In partnership with the drug and alcohol system, the Behavioral Health/Intellectual Disabilities Program also refers individuals in need of recovery houses in which residents in recovery live together as

a community in a safe and supportive environment. The Program has not provided funding for housing related services in the past but intends to expand the contract with the Crisis Intervention Center (CIC) to provide housing assistance to clients in need.

In addition to emergency and recovery housing, the Lackawanna-Susquehanna Behavioral Health/Intellectual Disabilities Program and Office of Drug and Alcohol Programs has partnered with the Lackawanna County Problem Solving Courts and the United Neighborhood Centers (UNC) on a housing program for families involved in the criminal justice system with identified mental health and substance use disorders. Four scattered housing units are available throughout Lackawanna County to serve this population. UNC provides case management and wraparound services for all individuals and families in the units. Individuals and families in the program are participants in the Lackawanna County Problem Solving Courts, are involved in mental health and substance use disorder services and are referred to or connected to supportive services as needed such as child care, transportation, employment, medical or dental care. The program is transitional in nature and the case manager through UNC connects individuals with permanent housing if available.

Transportation continues to be a barrier to individuals accessing substance use disorder services. The Program intends to contract with Colts to provide transportation services for individuals in need. Bus passes will be available for clients in need. Knowing that bus services are not available at certain times, the Program will work with Colts and other transportation providers to ensure clients have access to transportation during non-traditional hours. For those that qualify, the Program's Case Management Unit will work with the client to determine eligibility for the Medical Assistance Transportation Program (MATP).

5. Access to and Use of Narcan in County:

The Program partnered with PA Ambulance Services and the Lackawanna and Susquehanna County District Attorney's Offices to implement a community-based Naloxone (Narcan) program. This program has been up and running since 2015. In 2017, PA Ambulance applied for a Pennsylvania Commission on Crime and Delinquency (PCCD) grant to become the Central Coordinating Entity (CCE) for Lackawanna and Susquehanna County. PA Ambulance received word they received this designation and has already begun the work necessary to get these doses out into the community.

All law enforcement and emergency management services (EMS) agencies within Lackawanna and Susquehanna counties except for 7 agencies have been trained in the administration of Naloxone and have access to doses. According to data collected by PA Ambulance, approximately 1,000 individuals have been trained in the administration of Naloxone. 75 law enforcement/emergency management services (EMS) agencies have been trained in the administration of Naloxone and have access to it. In addition, 38 community partners including treatment facilities and school districts have been trained in the administration of Naloxone and have access to it. According to data from Pa Ambulance, 85 doses of Naloxone were used in 2017. 81

overdoses were reversed via Naloxone. Dunmore Borough and Scranton city had the highest use of Naloxone in Lackawanna and Susquehanna counties. Actual Naloxone usage and overdose reversal data may be higher as the Pennsylvania State Police have not provided their data to PA Ambulance. Numbers will be updated once that data is received.

The Program, in conjunction with PA Ambulance, plans to expand access to Naloxone kits and doses as well as provide training in the administration of Naloxone to any community partner or law enforcement/EMS agency interested. The Program hopes to provide kits and training to all community partners in 2018-2019.

6. **ASAM Training**:

	# of Professionals to be Trained	# of Professionals Already Trained		
SCA	7	6		
Provider Network	150	100		

The Department of Drug and Alcohol Programs (DDAP) is transitioning from the Pennsylvania Client Placement Criteria (PCPC) to the American Society of Addiction Medicine (ASAM) 's level of care assessment tool. The Change Companies is the organization providing the training. The Program reached out to the provider network to determine the training need. The Program projects that approximately 150 individuals need to be trained in ASAM in Lackawanna and Susquehanna County.

The Northeast Behavioral Health Care Consortium (NBHCC) and Community Care Behavioral Health (CCBH) have partnered with Lackawanna/Susquehanna and Luzerne/Wyoming SCAs on the trainings. NBHCC drafted a HealthChoices Reinvestment plan to cover the cost of the ASAM trainings in the northeast. The Reinvestment Plan was approved by the State and approximately four trainings have taken place. Four more trainings are scheduled for the coming months. By July 1, 2018, approximately 106 individuals in Lackawanna and Susquehanna Counties will be trained in ASAM. Approximately 44 individuals will still need the ASAM training by the July 1 deadline. These remaining individuals will be placed in two trainings scheduled for July 2018. All individuals will be trained by September 2018. The Program will begin using the ASAM level of care assessment in July 2018.

HUMAN SERVICES AND SUPPORTS/ HUMAN SERVICES DEVELOPMENT FUND

Adult Services:

Program Name: Allied Services, Inc.

Description of Services: Services are provided by trained, supervised direct care workers (homemakers) to physically disabled adults between the ages of 18-59 who reside in Lackawanna County. Homemaker services provided in the individual's home include basic care and management of the home to ensure safe and sanitary conditions and non-medical personal care services. To be eligible an individual must be unable to perform these activities on their own or have no other family member or responsible person available and willing to provide assistance. Following determination of financial eligibility and need, the training manager makes a home visit to identify the individual's specific needs. Once assigned, the direct care worker receives written instructions with a detailed service plan and schedule. Supervisory reviews are performed at a minimum annually or as needed based upon a change in the client's condition and /or needs. Direct care worker evaluations are performed annually by supervisory staff and the client.

Orientation and training is provided to direct care workers in addition to ongoing inservice trainings throughout the year. Individual client records are maintained including information pertaining to eligibility, intake, assessment, evaluations, service plan, service delivery and service notes.

Service Category: Homemaker - Activities provided in the person's own home by a trained, supervised homemaker if there is no family member or other responsible person available and willing to provide the services, or relief for the regular caretaker.

Adult Services:

Program Name: Jewish Family Service of NE PA

<u>Description of Services</u>: – Following the eligibility determination, an initial assessment of the client's problem is made and the social worker and client agree to a counseling plan with goals for resolving the presenting problem. Depending on the needs of the client, the client and worker will determine the use of individual, couple or family counseling. Counseling is provided to assist in problem solving and coping skills, intra-or inter-personal relationships, development and functioning and adjustment difficulties. When indicated, the counselors work in conjunction with medical doctors, psychologists and psychiatrists to assure specialized and individualized treatment for each client. Individuals receiving this service will be adults who meet HSDF eligibility criteria and have no alternate source of funding for counseling service.

All clinical social workers and the agency Executive Director have Master of Social Work degrees and are licensed clinical social workers in the State of Pennsylvania. The agency is also accredited in its counseling service for families and children by the Council on Accreditation (COA).

Service Category: Counseling - Nonmedical, supportive or therapeutic activities, based upon a service plan developed to assist in problem solving and coping skills, intra- or inter-personal relationships, development and functioning.

Adult Services:

Program Name: Meals on Wheels of NE PA, Inc.

<u>Description of Services</u>: The case manager receives referrals for service from individuals, family members, physicians, social workers, etc. Upon referral, the case manager schedules an appointment and meets with the individual to determine their eligibility for service based upon financial, residency, age and need criteria. Eligible individuals receive one hot meal daily, Monday through Friday, delivered to their home. Meals are prepared in a centralized kitchen that has the capacity to produce up to 1,500 meals each day. In addition to the standard menu, special diets are also available upon request of a physician. The agency utilizes a combination of paid staff and volunteers to prepare and deliver the meals. In addition to the adult population, the agency also serves the in-home elderly and prepares congregate meals for senior centers in Lackawanna County. This allocation is to provide service to the Adult Population, aged 18-59 years of age.

Service Category: Home-Delivered Meals - Provides meals, which are prepared in a central location, to homebound individuals in their own homes. Each client is served a minimum of one but no more than two meals daily, up to 7 days a week.

Aging Services: No Aging Services funded in FY 2018-2019.

Children and Youth Services: No Children and Youth Services funded in FY 2018-2019.

Generic Services: No Generic Services funded in FY 2018-2019.

Specialized Services: No Specialized Services funded in FY 2018-2019.

Interagency Coordination

This fiscal year, funding in the amount of \$66,883.00 has been allocated to Interagency Coordination.

Funding in the amount of \$41,865.00 will be used as partial reimbursement of the salary and benefits for the position of Assistant Director, Human Services. This position will work with all categorical programs, provider agencies, service recipients, public and private organizations in the planning and management of services to design a responsive, cost efficient and effective delivery system. The job description for the position of Assistant Director, Human Services is included as an attachment to the Plan.

A new unit within the Lackawanna County Department of Human Services was created in FY 2017-2018 to focus on program quality, training and recruitment of staff. By focusing on these issues, services will be more effective and delivered by more highly trained professional staff. The unit has two staff positions, the Director and the Curriculum Developer/Higher Education Liaison which work with all categorical program offices in the Department of Human Services; Aging, Adult Services, Office of Youth and Families, Drug and Alcohol and Behavioral Health/Intellectual Disabilities/ Early Intervention Programs. Job descriptions for these two positions are attached.

Eleven percent (11%) of the Director's salary and benefits, \$8,284.00 is being allocated to Interagency Coordination. The Director will build and maintain relationships with local universities to construct internship and job placement programs for students seeking social service degrees to assist with the recruitment of employees for the Department of Human Services. The Director will also review social service programs directly administered by and funded through the Department of Human Services for Quality Assurance/Quality Improvement. This position will also be available to consult with and assist agency directors from the Department of Human Services with program planning and development.

Twenty-six percent (26%) of the Curriculum Developer/Higher Education Liaison's salary and benefits, \$16,734.00, is being allocated to Interagency Coordination. The Curriculum Developer will assess the training needs and develop training for the staff of the Department of Human Services. Additionally, they will develop cross-systems training for categorical Human Service Departments, service providers, volunteers, the courts and law enforcement. The Curriculum Developer will coordinate job placement opportunities with universities and direct internship programs for the Department of Human Services. This position will also conduct needs assessment and gap analyses for the Department.

Administration

\$5,320.00 has been allocated to Administration from the Human Services Development Fund/Human Services and Supports for salary and benefits for the position of Assistant Director, Human Services. The Assistant Director administers the HSDF and provides assistance in the administration of the Block Grant through coordination and preparation of the HSBG Plan and fiscal reports.

Funding in the amount of \$2,800.00 has been allocated as membership dues for the Lackawanna County Department of Human Services in PACHSA. The membership in this professional organization will assist the county in the planning and management of human services.

Funding in the amount of \$1,000.00 has been allocated for the publishing of the legal ad in two local general circulation newspapers for the announcement of the HSBG plan hearings. Since Lackawanna County is part of a local collaborative arrangement (LCA) with Susquehanna County, the public hearing notice is published in two local papers, the Scranton Times and the Susquehanna Independent.

Other Services

Mental Health Services

As in the previous fiscal year, funding has been allocated to Mental Health Services. Family Support Services will be provided to an estimated 90 clients with an allocation of \$41,595.00.

Substance Use Disorder Services

As in the previous fiscal year, funding has been allocated to Substance Use Disorder Services. Other Intervention will be provided to an estimated 37 clients with an allocation of \$19,567.00.

Homeless Assistance Services

As in the previous fiscal year, funding in the amount of \$21,000.00 has been allocated to the Homeless Assistance Program, to provide Emergency Shelter to an estimated 30 clients.

PLAN ATTACHMENTS

The Scranton Times (Under act P.L. 877 No 160. July 9,1976)

Commonwealth of Pennsylvania, County of Lackawanna

LACKAWANNA CO HUMAN SERVICES/GAYLE SENSI 200 ADAMS S AVE. SCRANTON PA 18503

Account # 65045 Order # 82202647 Ad Price: 492.30

PO Number: 2018 -- 0000 1326 ANNOUNCEMENT OF PUBLIC HE

Ann Marie Fortese

Being duly sworn according to law deposes and says that (s)he is Billing clerk for The Scranton Times, owner and publisher of The Scranton Times, a newspaper of general circulation, established in 1870, published in the city of Scranton, county and state aforesaid, and that the printed notice or publication hereto attached is exactly as printed in the regular editions of the said newspaper on the following dates:

04/25/2018 05/02/2018

Affiant further deposes and says that neither the affiant nor The Scranton Times is interested in the subject matter of the aforesaid notice or advertisement and that all allegations in the foregoing statement as time, place and character or publication are true.

Sworn and subscribed to before me this 2nd day of May A.D., 2018

(Notary Public)

Commonweath of Pennsylvania - Notary Seal Sharon Venturi, Motary Public Lackbean na County My commission explore Fabruary 12 dags

My commission expires February 12, 2022 Commission number 1264228 Member, Pernaylwana Assertation of Motories ANNOUNCEMENT OF PUBLIC HEARINGS

PUBLIC HEARINGS

The Lackawarra County Department of Human Services on behalf of the Lackawarna County Board of the Lackawarnas County Board of Commissioners, is crosloging the HUMAN SERVICES BLOCK GRANT PLAN and budgets for the Real Year 2018 - 2019. In order to easist the County in completing his task, the Lackawarna Sourcy Department of Human Services in cooperation with the Lackawarna-Susquahenna Behavioral Healthin selecting house the Bathaman Susquahenna Behavioral Healthin selecting house the Bathama Office of Ding and Allohop Progers, Furnan Services Davelopment Fund and Humaless Assistance Progers, are requesting in four from all incerested residents and capandy raps secundariors for this Plan.

Public nearings with the half- ac fell.

Public hearings will be held as feliows:
Monday, April 30, 2018 at 11:00
A.M. at the Lackawanne County
Administration Building, 200
Admin Avenua, 5th Floor,
Scranton, PA 18503 and
Monday, May 7, 2018 at 1:00
Monday, May 7, 2018 at 1:00
Adams Avenue, 5th Floor,
Scranton, PA 18503

If we can help you with any special needs you may have, to enable you to ettend, ploase contact:

William Browning. Executive Director Leckswamma County Department of Human Services 200 Adiems Avenue, 4th Floor Scranton, PA 18503 Phone: 570-963-6790

Susquehanna County Commonwealth of Pennsylvania

Kelly M Russell, being duly sworn, says she is the designated agent of the of The Susquehanna County Independent, of general circulation, published in Susquehanna County, county aforesaid, and that the notice hereto attached is exactly as was printed in said paper once a day on the following dates:

25th of April 2018
2nd of May 2018
Kelly M Russell, Accounting

Kellym Russell

Sworn and subscribed before me this

COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL

Busan M. Rought, Nolary Public Towards Bore Brettland County My Commission Expires Aug. 8, 2021 KELIZAR PERIAPULANAA AASOCAMIDY OF NOTABLES

ANNOUNCEMENT OF EXPLIC

The Lacksynania County Depart-The Lecksyanna County Department of Human Services to be-half of the Lecksyanne, County Board of Opening Human Services HUMAN SERVICES BLICK GRANT PLAN AND BUTS -18 TO THE FRESH YOT 2018 -2019: Involder to spejet the Counevia. mureur to apply the Control of the special of with the language of the supplemental supple put liroin all'interested residents and or ememory representatives the transfer.

Public headings will be held as folloyer Monday, April 30, 2018 at 11:00 A.W. at the Lectowine or Cautay Adjustmenton Validates, 200 materia Avenue. Bij Phioty Serimtor, PA 19608 and Handay May 7, 2012 at 150 P.M. at the Legislaviana County Administration Build-ing, 200 Adams Arrenne, Eth Roge Saranton, Ph. 18403

g we can help you with any sto-dal watch would may black to en-the watch would have been something.

William Browning. Epiculiya Misater Epiculiya Misater Nacimosyya Calumy Department of Human Services 200 Adama Avenue, 4th Floor Secondary, PA 18808 Phone: 570-983-5766 17,18



April 30, 2018

In compliance with the FY 2018-2019 County Human Services Plan guidelines, the Lackawanna County Department of Human Services will be hosting two public hearings to solicit input on the plan for services. Today's hearing represents the first of the two hearings. The second hearing will be held Monday, May 7, 2018, 1 PM at the Lackawanna County Administration Building, 200 Adams Avenue, 5th Floor, Scranton, PA.

On March 26, 2018, the Commonwealth of Pennsylvania, Department of Human Services issued the FY 2018-19 County Human Services Plan Guidelines which will assist the county in the completion of our consolidated County Human Services Plan. Service areas included in the plan are Mental Health Community Base Funded Services, Behavioral Health Services Initiative (both MH and D&A), Intellectual Disabilities Community Base Funded Services, Act 152 Funding (D&A), Homeless Assistance Services and Human Services Development Fund.

As in the current fiscal year, Lackawanna County will continue to be a Block Grant county for FY 2018-19. The designation as a Block Grant county allows the county some flexibility in allocating service dollars based upon identified need as opposed to solely upon categorical funding levels. In previous fiscal years, this flexibility enabled us to reallocate funds to the Drug and Alcohol System to increase treatment services, to the Homeless Assistance Program to increase rental assistance and provide Emergency Shelter and to the Behavioral Health System to provide residential services. This fiscal year, the flexibility has enabled us to reallocate funds to the Area Agency on Aging for Personal Care Services to assist older adults remain independent in their own home.

For purposes of completing the county plan and budget, we have been advised to use Lackawanna County's primary allocation for FY 2017-18. Lackawanna County's proposed allocation is \$11,112,194 comprised of \$9,688,684 State funds and \$1,423,510 Federal funds.

The county share (4.40%) for the State portion of this allocation is \$426,302.

Based upon the current flat level funding for FY 2018-19, it is not anticipated that there will be significant changes in the categorical allocations from the current fiscal year. For your reference, attached is a chart detailing the proposed categorical allocations for FY 2018-19.

As in the previous years, any reallocation of service dollars will be made during the fiscal year based upon recognized administrative savings or an underutilization of services. However, this may change based upon the effect that the enacted FY 18-19 state budget may have upon human services, which at present is unknown.

Written comments will be received by the Lackawanna County Department of Human Services by email to humanservices@lackawannacounty.org or by mail to 200 Adams Avenue, 4th Floor, Scranton, PA 18503 no later than Monday, May 14,2018.

On behalf of the Lackawanna County Department of Human Services and its categorical agencies, allow me to extend our appreciation to our community partners for the services they provide to our residents.

Sincerely,

William J. Browning Executive Director



May 7, 2018

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Sincerely,

William J. Browning Executive Director

Sheet No.:

PUBLIC HEARINGS FOR LACKAWANNA COUNTY DEPARTMENT OF HUMAN SERVICES

BLOCK GRANT PLAN- FISCAL YEAR 2018-2019 MONDAY APRIL 30, 2018 AT 11:00 A.M. 5TH FLOOR, 200 ADAMS AVENUE

SCR	ANTO	DN. PA	18503

NAME AGENCY TELEPHONE #											
<u> PANE</u>		27.23.11.21.23.11.23									
JEREMY YA/E	BH-IDEI Program	570 346-5741									
Barbara Dhirkin	COC-Susa Drugand Allahol	570-963-6315									
PHROCES SACE	Human Sus.	576-963-6790									
Kerry Browning	Office of Yorkh & Family Provies	570 - 963-6781									
Gray (+ Sing)	DHS	510 943619C									
William Browning	HUMAN SERVICES	5709636790									
Ö											

Shret No.:

PUBLIC HEARINGS

FOR LACKAWANNA COUNTY DEPARTMENT OF HUMAN SERVICES BLOCK GRANT PLAN- FISCAL YEAR 2018-2019 MONDAY MAY 7, 2018 AT 1:00 P.M. 5TH FLOOR, 200 ADAMS AVENUE SCRANTON, PA 18503

NAME SCI	AGENCY	TELEPHONE#				
MICHAEL BERHATOUTCH	STEP BY STEW INC	570-829-3477				
PARRICIA SACE	LACKA Co. Homan Ses.	570-963-6790				
Barbara Dunkin	LSODAR	570-963-6315				
William Browning	HUMEN SERVICES	5709636790				
)						

Assistant Director Human Services

DEFINITION:

The Assistant Director is a professional administrative supervisory position under the direct supervision of the Executive Director of Human Services.

This position provides administrative support to the Executive Director in carrying out the management and administrative responsibilities of the department which include planning, organizing, directing and coordinating a comprehensive human services system comprised of the following categorical programs, Area Agency on Aging, Office of Youth and Family Services, Office of Drug & Alcohol Programs and Behavioral Health/Intellectual Disabilities/Early Intervention.

The Assistant Director is directly responsible for the administration of the Human Services Development Fund, Human Services Block Grant and the services of the former Office for the Physically Disabled.

This position assists the Executive Director in grant submission and administration.

The Assistant Director represents the Executive Director and the Department at various meetings, events, etc.

RESPONSIBILITIES:

In conjunction with the Executive Director:

Plan, organize, direct and coordinate a comprehensive human service system including categorical program offices and grant programs.

Establish a comprehensive system for coordinating, planning and service delivery that maximizes the use of existing funds while minimizing duplication of services.

Assist in the annual RFQ process for human service agencies.

Assist the Executive Director in the development and implementation of agency policy and procedures.

Administer the services of the former Office for the Physically Disabled including eligibility determination/redetermination, service coordination, fiscal oversight and information/referral services.

Administer the Human Services Development Fund and Human Services Block Grant including the RFQ process, plan submission, contract development, processing monthly invoices, submitting financial reports, fiscal reconciliation and subcontractor monitoring.

Assist in the preparation and administration of grant applications.

Assist in the daily functions of the department.

Attend meetings and be available to represent the department as needed.

Perform related work as required.

REQUIRED KNOWLEDGE, SKILLS, AND ABILITIES:

Knowledge of the principles and practices of program planning, organization, direction and coordination of a comprehensive human service system.

Knowledge of the methods and procedures necessary to research, develop, and coordinate funding sources and resources.

Knowledge of fiscal and budgetary management practices and procedures and statistical reporting methods.

Knowledge of community organization and current social, economic and health issues and the resources available to meet these needs.

Ability to review, analyze, monitor, and evaluate a variety of human service programs and contracted services.

Ability to work effectively with people in establishing working relationships with other members of the staff, outside agencies and the general public.

Ability to plan and organize work, set priorities and meet deadlines.

Ability to adequately express ideas orally and in writing.

MINIMUM EXPERIENCE AND TRAINING:

A Bachelors Degree and/or Masters Degree and five years progressive responsible experience in such areas as social work, sociology, public health, public administration, or any equivalent combination of experience, training, and education.

JOB DESCRIPTION

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Requirements

Applicant must meet minimum experience and training requirements of the Pennsylvania State Civil Service Commission for a ______. The candidate for this position should exhibit a great deal of clinical knowledge as well as child welfare program knowledge a general human services knowledge. In addition, this position requires an understanding of statistics as well as an understanding of research standards and methods. It would be desirable to possess an advanced degree in Social Work (MSW) or another closely related field, though not mandatory.

Responsibilities

This is responsible professional work of a nature involving program planning, analysis, evaluation, monitoring and coordination of the County's children, youth and families programs. Specifically, this position will administer the Lackawanna County Social Services Quality Assurance and Training Department which will be responsible for ensuring that both public and private agencies funded by the Agency that provide services to children and families are trained on core elements of human services such as critical thinking, family engagement, interviewing skills, assessment, and cultural competence as well as core supervisory competencies. This will be provided to local service providers as well as county staff. Where existing training programs are active such as child welfare training, the training academy will provide coordination and transfer of learning consistent with the family engagement model practiced by the Office of Youth and Family Services.

^{7.} DESCRIBE IN DETAIL THE WORK YOU DO. LISTING THE MOST IMPORTANT DUTIES FIRST. TRY TO EXPLAIN YOUR WORK IN A WAY THAT SOMEONE UNFAMILIAR WITH YOUR JOB CAN UNDERSTAND. (IF YOU USE MACHINES OR EQUIPMENT, PLEASE LIST THEM AND THE APPROXIMATE AMOUNT OF TIME YOU USE THEM). USE AS MUCH ADDITIONAL PAPER (8 ½ x 11) AS YOU NEED:

This position will also ensure that social service programs funded by the County are developed and delivered with fidelity that are consistent with needs and findings derived from Continual Quality Improvement/Quality Assurance practice. In addition, this position will build and maintain relationships with local universities to construct an internship and job placement program for students seeking undergraduate and graduate social service degrees. In addition to local universities, this position will function as a central point of contact for our existing research partners such as the University of Pittsburgh and Chapin Hall as well as developing research partners as needed.

This employee will review, analyze, evaluate, monitor and coordinate all existing evidence based practices within the county related to the delivery of services to children and families. In addition, this employee will seek opportunities for collaboration with other agencies and providers to implement programs beneficial to youth and families while preventing needles duplication of services.

The employee will provide administrative services, support and direction to agency staff including the existing Quality Assurance Unit of OYFS (One Program Specialist 1 and one clerk) 1 Curriculum Developer/Higher Education Liaison (Program Specialist 1), 1 Caseworker, and 1 Clerk Typist as well as providing site supervision for employees from other Human Service Departments (e.g., Aging, General Human Services, etc.)

The employee will provide consultation and direction to agency staff concerning program planning and development; and multi-tiered, cross system approaches to children, youth and family systems.

This position will report directly to the Agency Administrator. In the absence of the Agency Administrator and Court and Community Services Director (Program Specialist 2), the person in this position will serve as agency administrator.

Examples of Work:

- Coordinate with the Court and Community Services Director, the Clinical Director, and other Human Service Departments to analyze and evaluate program effectiveness and recommend changes to agency policy and operational methods as needed for cost effective program effectiveness.
- 2. Will liaison with HealthChoices to identify performance standards consistent with the Agency's mission.

- 3. Will provide direct supervision to Quality Assurance leadership
- 4. Will implement and maintain a system of value based recruiting
- 5. Will provide coordination of all elements of research and analysis related to human service delivery in partnership with other agencies.
- 6. Develop reports related to agency and interagency Quality assurance.
- 7. Identify data needs of agency.
- 8. Administer in conjunction with the Curriculum Developer/Higher Education Liaison, the existing program of University collaboration which coordinates, collaborate and manages all undergraduate and graduate student practicum and intern placements, service projects and class assignments in cooperation with CWEB and CWEL, University of Pittsburgh, Marywood University, University of Scranton, Misericordia University, Lock Haven University and any other college or university.
- 9. Independently evaluates (through aggregate data) current assessments developed and implemented by the State, Agency, and Clinical Department.
- 10. Responsible for Total Clinical Outcome Management for the agency

Required knowledge, skills and abilities

- Advances knowledge of professional casework principles / social work practices and methods.
- 2. Advanced knowledge of the principles and methods applied to collecting, reviewing, analyzing, and interpreting statistical data.
- 3. Advanced knowledge of physical, mental and emotional illness/problems and their impact on risk and safety to children.
- 4. Advanced knowledge of child development and family dynamics.
- 5. Advanced knowledge of preparing treatment plans specifically addressing areas of attachment and bonding and parenting abilities.
- 6. Advanced knowledge of current social, physical, emotional, psychiatric treatment methods.

- 7. Advanced knowledge of community based social services.
- 8. Ability to maintain confidentiality.
- 9. Ability to establish and maintain effective working relationships with other staff, court officials, and other ancillary professionals.

JOB DESCRIPTION

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Requirements:

The candidate for the Curriculum Developer/Higher Education Liaison must meet minimum experience and training requirements of the Pennsylvania State Civil Service Commission for a _______. The candidate for this position should exhibit a great deal of clinical knowledge as well as child welfare program knowledge and general human services knowledge. In addition, this position requires an understanding of teaching and learning models as well as an understanding of research standards and methods. It would be desirable to possess an advanced degree in Social Work (MSW) or another closely related field, though not mandatory. This position will report directly to the program director. Excellent oral and written communications skills are mandatory.

Responsibilities:

This position will be responsible for designing, developing and delivering curriculum content, training materials, training modules, teaching aids, and manages all aspects of curriculum development programs to include, but not limited to technical skills, management and leadership development, best practice, evidence based practice and new technology in the implementation of social service programs. This position will also train providers on agency and county practice relative to child welfare and social service delivery consistent with the agencies mission and current research. This position will also be responsible for developing and maintaining transfer of learning functions relative to the Pennsylvania Child Welfare Resource Center curriculum. This position will serve as the primary liaison with area universities to develop and maintain an active internship program as well as assist in values based recruiting. This position will function as the program director in the program director's absence.

^{11.} DESCRIBE IN DETAIL THE WORK YOU DO. LISTING THE MOST IMPORTANT DUTIES FIRST. TRY TO EXPLAIN YOUR WORK IN A WAY THAT SOMEONE UNFAMILIAR WITH YOUR JOB CAN UNDERSTAND. (IF YOU USE MACHINES OR EQUIPMENT, PLEASE LIST THEM AND THE APPROXIMATE AMOUNT OF TIME YOU USE THEM). USE AS MUCH ADDITIONAL PAPER (8 ½ x 11) AS YOU NEED:

Examples of Work:

Coordinates training needs for OYFS and Human Services. This will include scheduling and conducting staff meetings, arranging for staff trainers, developing agency training along with field testing, and conducting staff training.

Develop benchmarks and deliverables related to training

Develop accredited cross training with other Human Service Departments, service providers, volunteers courts, law enforcement.

Will participate in the Center for Family Engagement Meetings and assist the administrator assigned to the meeting with coordination of the meeting

Conducts and/or participates in meetings to train members of the public on the functions of the agency

Identify resources required to develop and deliver training projects

Conduct research with key informants for curriculum development purposes

Function as OYFS spokesperson

Assists in the recruitment of trainers.

Develop and maintain a value based model for the agency

Coordinate social service job placement with universities

Direct OYFS participation in the CWEB and CWEL program

Direct Human Service internship program

Responsible for coordinating needs assessments and gap analyses for OYFS and Human Services

Will review/approve tuition reimbursement eligibility for non CWEB and CWEL programs consistent with OYFS policy

Maintain individual records of training

Publishes a training schedule

Liaison for the Pennsylvania Child Welfare Resource Center

Research evidence based practice and, in conjunction with the Program Director, will determine the viability of implementation within the County

Will develop and maintain routine and ad hoc meetings with area universities' department heads or their designates

Any other duties as required.

APPENDIX C-1 : BLOCK GRANT COUNTIES HUMAN SERVICES PROPOSED BUDGET AND INDIVIDUALS TO BE SERVED

County:	1.	2.	3.	4.	5.	6.	
LACKAWANNA	ESTIMATED INDIVIDUALS SERVED	HSBG ALLOCATION (STATE & FEDERAL)	HSBG PLANNED EXPENDITURES (STATE & FEDERAL)	NON-BLOCK GRANT EXPENDITURES	COUNTY MATCH	OTHER PLANNED EXPENDITURES	
MENTAL HEALTH SERVICES							
ACT and CTT	-		\$ -	\$ -	\$ -	\$ -	
Administrative Management	3,825		\$ 182,352	\$ 264,415	\$ 34,233	\$ -	
Administrator's Office			\$ 121,025	\$ 11,565	\$ 6,610	\$ 9,400	
Adult Developmental Training	-		\$ -	\$ -	\$ -	\$ -	
Children's Evidence-Based Practices	23		\$ 28,065	\$ -	\$ 1,235	\$ -	
Children's Psychosocial Rehabilitation	39		\$ 110,632	\$ -	\$ 4,868	\$ -	
Community Employment	29		\$ 206,500	\$ -	\$ -	\$ -	
Community Residential Services	80		\$ 1,281,068	\$ 43,512	\$ 58,225	\$ -	
Community Services	3,825		\$ 333,195	\$ 21,010	\$ 17,005	\$ -	
Consumer-Driven Services	636		\$ 21,657	\$ 1,190	\$ 953	\$ -	
Emergency Services	4,500		\$ 212,203	\$ 10,494	\$ 10,503	\$ -	
Facility Based Vocational Rehabilitation	7		\$ 32,040	\$ 18,765	\$ 3,495	\$ -	
Family Based Mental Health Services	12		\$ 9,387	\$ -	\$ 413	\$ -	
Family Support Services	224		\$ 105,189	\$ 21,858	\$ 5,993	\$ -	
Housing Support Services	343		\$ 2,307,494	\$ 583,303	\$ 84,260	\$ -	
Mental Health Crisis Intervention	1,535		\$ 167,525	\$ 8,284	\$ 7,371	\$ -	
Other	1		\$ -	\$ -	\$ -	\$ -	
Outpatient	926		\$ 228,899	\$ 193,829	\$ 10,072	\$ -	
Partial Hospitalization	14		\$ 42,337	\$ -	\$ 1,863	\$ -	
Peer Support Services	11		\$ 29,028	\$ 1,595	\$ 1,277	\$ -	
Psychiatric Inpatient Hospitalization	-		\$ -	\$ -	\$ -	\$ -	
Psychiatric Rehabilitation	37		\$ 144,502	\$ 7,940	\$ 6,358	\$ -	
Social Rehabilitation Services	1,958		\$ 243,506	\$ 12,041	\$ 12,053	\$ -	
Targeted Case Management	300		\$ 329,042	\$ 16,270	\$ 14,478	\$ -	
Transitional and Community Integration	553		\$ 206,380	\$ 11,339	\$ 9,081	\$ -	
TOTAL MENTAL HEALTH SERVICES	18,877	\$ 6,300,431	\$ 6,342,026	\$ 1,227,410	\$ 290,346	\$ 9,400	

INTELLECTUAL DISABILITIES SERVICES

Administrator's Office			\$ 1,770,735	\$ 391,464	\$ 66,542	\$ 5,500
Case Management	148		\$ 121,945	\$ 14,301	\$ 6,954	\$ -
Community-Based Services	436		\$ 1,428,725	\$ 158,291	\$ 80,787	\$ -
Community Residential Services	16		\$ 354,133	\$ 177,021	\$ 13,349	\$ -
Other	160		\$ 21,285	\$ 4,480	\$ 1,434	\$ -
TOTAL INTELLECTUAL DISABILITIES SERVICES	760	\$ 3,696,823	\$ 3,696,823	\$ 745,557	\$ 169,066	\$ 5,500

APPENDIX C-1 : BLOCK GRANT COUNTIES HUMAN SERVICES PROPOSED BUDGET AND INDIVIDUALS TO BE SERVED

County:	1.	2.	3.	4.	5.	6.
LACKAWANNA	ESTIMATED INDIVIDUALS SERVED	HSBG ALLOCATION (STATE & FEDERAL)	HSBG PLANNED EXPENDITURES (STATE & FEDERAL)	NON-BLOCK GRANT EXPENDITURES	COUNTY MATCH	OTHER PLANNED EXPENDITURES
HOMELESS ASSISTANCE SERVICES						
Bridge Housing	6		\$ 29,330		\$ -	\$ -
Case Management	591		\$ 118,582		\$ -	\$ -
Rental Assistance	205		\$ 86,724		\$ -	\$ -
Emergency Shelter	30		\$ 21,000		\$ -	\$ -
Other Housing Supports	-		\$ -		\$ -	\$ -
Administration			\$ 8,621		\$ 11,628	\$ -
TOTAL HOMELESS ASSISTANCE SERVICES	832	\$ 243,257	\$ 264,257		\$ 11,628	\$ -
npatient Hospital npatient Non-Hospital Medication Assisted Therapy Other Intervention Outpatient/Intensive Outpatient Partial Hospitalization Prevention Recovery Support Services	53 - 37 - - - 4,472 1,860		\$ - \$ - \$ 19,567 \$ - \$ - \$ 340,379 \$ 54,000	\$ 59,373 \$ - \$ - \$ - \$ - \$ - \$ - \$ -	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	\$
Administration	-/		\$ 94,000	\$ 15,346		\$ -
OTAL SUBSTANCE USE DISORDER SERVICES	6,857	\$ 674,827			•	Ċ
HUMAN SERVICES DEVELOPMENT FUND	,	0.1,02.		100,000		
Adult Services	43		\$ 38,691	-	\$ -	\$ -
rging Services Children and Youth Services	-		1	_		
	-			_	T .	+ <u>'</u> .
Generic Services	-		\$ -	-	T .	1
pecialized Services	-		\$ -	-	т	<u>'</u>
nteragency Coordination			\$ 66,883		\$ -	\$ -
Administration			\$ 9,120		\$ 5,047	
OTAL HUMAN SERVICES DEVELOPMENT FUND	43	\$ 196,856	\$ 114,694		\$ 5,047	\$ -
RAND TOTAL	27,369	\$ 11,112,194	\$ 11,112,194	\$ 2,109,063	\$ 506,640	\$ 14,9