COUNTY OF YORK HUMAN SERVICES BLOCK GRANT PLAN



2018-2019

Appendix A Fiscal Year 2018-2019

COUNTY HUMAN SERVICES PLAN

ASSURANCE OF COMPLIANCE

COUNTY OF: York

- 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):
 - 1. 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

Susan Byrnes, President Commissioner	Date: May 2, 2018
Doug Hoke, Vice President Commissioner	Date: May 2, 2018
Christopher Reilly, Commissioner	Date: May 2, 2018

Introduction

Background: York County has a long tradition of providing for the needs of its citizens. A county's prime responsibility, according to the County Code and Commonwealth Law, is to act in concert with the commonwealth to carry out a variety of services to meet the needs of its citizens. As a result of the state government shifting programs from the state to county level, the York County Commissioners developed and assigned the management of human service programs to a central administrative office, the York County Human Services Department.

The York County Human Services Department oversees the following human services related agencies:

- York/Adams Drug and Alcohol Commission
- York/Adams HealthChoices Management Unit
- York/Adams Mental Health-Intellectual and Developmental Disabilities Program
- York County Area Agency on Aging
- York County Office of Children, Youth & Families
- York County Youth Development Center

It is the mission of the York County Human Services Department to provide equal access to services for the safety and well-being of all eligible residents, in a timely and cost effective manner. In order to accomplish this mission, York County strives to protect vulnerable children and adults, support communities and families in raising children who develop to their fullest potential, meet the basic needs within our community, and build healthy communities and self-reliant individuals.

Part I. County Planning Process

Stakeholder Involvement

The York County Human Services Division conducts a great amount of outreach in its planning efforts which include the funding streams incorporated in the York County Human Services Plan. A critical piece of the planning process involves assessing the needs within the community through collaboration with many other groups. The stakeholder groups that are involved in York County's planning processes are enumerated below.

HS Coordinated Planning Team: The York County Human Services Division has engaged a group of individuals, including critical stakeholders, to act as the group who initiates the planning activities for the HS Coordinated Plan. This group is comprised of county staff and service providers that solicit consumer feedback and recommendations. Consumers have been invited to participate in the process, but there has not been much interest for full participation at a meeting. Planning Team members also participate in many other committees and activities in an effort to gather additional stakeholder input. Further information about these stakeholder groups is listed in detail under Part III: Cross Collaboration of Services.

System of Care: A primary vehicle for coordinated planning for the York County Human Services Plan continues to be the System of Care initiative, which York County began in 2011. The System of Care is a philosophy that builds on the benefits of systems integration and the strengths of youth and families. York County currently holds a monthly meeting to discuss needs of consumers and to share funding plans. This is an excellent resource to gather feedback from consumers of services. In addition to the Human Service Department leads, the group is comprised of family representative and youth representatives.

County-Wide Planning and Outreach: The York County Human Services Division is highly visible within the community and is involved in a great deal of systems outreach and networking. Department members frequently meet with consumers, residents, local officials, state officials, members of the judicial and legislative branches of government, non-profit providers, and many other entities to gather feedback and share plans for various funding streams. Feedback gathered from these engagements is valuable in determining and prioritizing the needs of the community.

The York County Human Services Division departments are able to assess community needs through regular contact with contracted providers. In-depth program monitoring and monthly reporting assist departments with understanding the specific needs of providers and consumers. Additionally, York County continues to assess data and use the findings in the decision making process.

Stakeholder Participation in Planning

York County Human Services leadership and staff consistently discuss human services programming and funding with the groups previously listed. During the conversations, feedback regarding identified needs, and barriers /gaps in services is solicited and incorporated into planning processes. The various collaborative groups discussed in Section III are also utilized to discuss and prioritize needs based on the data they may provide as well as through regular discussion.

York County tries hard to ensure that all populations (MH, IDD, homeless, low-income, aging, substance abuse, youth, etc.) are engaged during the planning process. Outreach occurs in a variety of ways including: public hearings, monitoring of programs, and through the various stakeholder groups discussed throughout the plan. From a geographic standpoint, outreach is conducted to ensure that all areas of the county are taken into consideration during the planning process. York County has also taken measures to ensure that the needs of our most rural residents are involved in planning processes through various collaborations, including both the southern end and northern end of the county. Details of these collaborative efforts are included in Part III.

Advisory Board Involvement

The formal advisory boards that were involved in the planning process include:

- York/Adams Mental Health/Intellectual and Developmental Disabilities and Drug and Alcohol Commission Advisory Board
- System of Care Governance Council
- York County/City Continuum of Care

Least Restrictive, Appropriate Settings

York County believes in the practice of maintaining the individuals we serve in the least restrictive, most appropriate environment as possible. In the mental health system, we offer many housing programs and supportive services for people with serious and persistent mental health issues in order to safely maintain them in our community. Providing high quality housing and supportive services is critical in preventing recidivism to various inpatient settings or residential treatment facilities.

Through the York County Continuum of Care, the county has implemented a Housing First model for homeless programming, consistent with HUD's goals and requirements. Housing First focuses on stabilizing a person by providing housing and then addresses any other needs the person or family may have such as mental health or substance abuse issues. Housing First is a recovery-oriented approach, which also helps prevent people from being placed in costlier, more restrictive programs, including prison and unnecessary hospitalization.

This year, York County was able to begin a rapid re-housing program for homeless transitionalage youth. In this program, youth are assisted with rental assistance funds, obtained through the federal Continuum of Care grant. Participants are offered support services and life skills opportunities so they work toward self-sufficiency.

The utilization of least restrictive services is one of the main priorities of the York County Behavioral Health System. Funding has been made available to the children and adult system to continuously pursue the least restriction options. For FY 17-18 funding from OMHSAS was awarded to York County MHIDD Program to participate in a CHIPP Expansion. As a result of this expansion, eight individuals will be transitioning out the state hospital to other community living arrangements. In the children and adolescents system, community mental health services are available through the school system. At this time, 81 school buildings offer outpatient mental health services. Also, all school districts in York County including some private schools offer the Student Assistance Program (SAP) for those students who have socio-emotional challenges in school.

All ID services are provided in the least restrictive manner possible. Licensing requirements dictate the level and manner of service delivery for many services. The contracted agencies must follow ODP and CMS criteria for community services and they are always in the least restrictive manner. In the event restrictive procedures are necessary, the criteria are always decided from a team approach.

In the child welfare system, programs such as CASSP and family engagement practices such as Family Group Decision Making and Family Team Meetings are instrumental in keeping children and youth in the least restrictive setting. York County's Office of Children, Youth and Families has also introduced an Integrated Planning Team (IPT) process that leverages the knowledge and ideas of many different providers and family resources to help maintain children in the most appropriate, least restrictive level of care. These processes allow for families to assist in planning which leads to greater family buy-in, resulting in more successful outcomes.

For those with substance abuse disorders, the York/Adams Drug and Alcohol Commission and York/Adams HealthChoices program provides funding to transition the drug and alcohol system from the Pennsylvania Client Placement Criteria to the American Society of Addition Medicine (ASAM) Criteria. This transition shall provide a foundation for the transition of placement criteria from program focused, to individually driven. Rather than providing treatment for a set number of days, or by a pre-determined programmatic outline, services will occur as determined by client need, resulting in a much more person-centered approach to care. This shift shall support an increased person-centered approach, with care defined by the needs an individual presents and by what services and time is needed to address these needs. This will assist the drug and alcohol system to move towards more appropriate levels of care and lengths of stay. The Drug and Alcohol Commission shall support funding to residents per the ASAM Criteria

Substantial Programmatic or Funding Changes Based on Last Year's Outcomes

Last year, York/Adams MHIDD entered into a partnership with the Office of Children, Youth, and Families of York County. As the cases with a mental health diagnosis grow in the child welfare system, the need to have a stationary person from the mental health department assist case workers with referrals and recommendations was imperative. This position was created in the summer of 2017 and has been very successful in strengthening the mental health resources for families in the child welfare system. As a result, the program is looking to create other partnerships through different human services departments such as Early Intervention.

The ODP has worked closely with the Administrative Entity to determine number of individuals requiring waiver services. There continues to be a lengthy waiting list, but each year the expansion eases a bit of the burden on the community level. The availability of expansion is never enough, but the increase in capacity continues to allow individuals to have some movement within the system. Recent high school graduates (21 years of age), have been a

priority to increase waiver capacity in order to get individuals into the workforce. PA is an employment first state and has been constant in its effort to improve.

Regarding the opioid epidemic in our region, women with children face increased barriers to treatment access, as women are likely to have primary child-care responsibilities. Child care access and the possibility of losing custody often weigh heavily in whether or not woman with children will seek out and be able to attend recommended treatment. In recognizing specific barriers that women with children face, the Commission has sought innovative ways to connect with this population and provide much needed services to benefit this population.

The Commission has collaborated with York County Children, Youth and Families to develop solutions to women with children barriers. Specifically a program is in development at a local daycare in which drug and alcohol services shall be provided during non-traditional day care hours. These services shall include clinical drug and alcohol treatment and parenting education for adults and simultaneous daycare/prevention services for their children so that childcare is not a barrier for treatment participation. A family meal will also be provided. All services are free of charge. Further, expansion to fathers with children is also being explored.

Additionally, a collaboration with the Drug and Alcohol Commission, York County Children, Youth and Families, York Hospital, and numerous other agencies has been newly formed to focus on neo-natal absence syndrome. The focus of this group is to identify neo-natal abstinence syndrome babies and put appropriate services into place within 48 hours of identification which meet the needs of the full family, while taking care to not overwhelm the family. In addition to this collaboration, the Commission is collaborating with Wellspan – York Obstetrics and Gynecology Department to ensure that pregnant females in need of Medication Assisted Treatment (MAT) are connected to such services while being aware of potential outcomes of the medication in relation to neo-natal abstinence syndrome. Further, the Commission in collaboration with Wellspan are mapping out the MAT flow for pregnant females from induction by the hospital and continuation of their MAT and clinical treatment.

There will be no other substantial programmatic or funding changes made as a result of last year's outcomes.

Part II. Public Hearing Notice

In order to comply with the hearing notice requirements, the York County Human Services Department advertised the meeting notice inviting the community to provide input on the York County Human Services Plan during an open forum. The public notice was published in the York Daily Record on March 25, 2018 and March 28, 2018, and the Hanover Evening Sun published the meeting notice on March 25, 2018, and March 27, 2018. Both entities also published the dates electronically as well.

The public meeting was held on Tuesday, April 3, 2018, beginning at 3:00 PM at a local school, centrally located within York County. The announcement also offered the public the opportunity to provide feedback about the plan at the Commissioners Meeting on May 2nd at 10:00 AM. Please refer to Attachment A, Attachment B, and Attachment C for documentation relating to this requirement.

Public Hearing Summary and Comments

On Tuesday, April 3, 2018, the York County Human Services Division hosted a public meeting to discuss funding plans for FY 17-18. There were 24 individuals in attendance.

Information that was presented included:

- Block grant participation
- Annual program highlights
- New initiatives
- Changes in programming
- Future planning efforts

After the presentation, an attendee asked the following question:

- Does the York County Human Services Division have a number of unduplicated individuals served across all departments/services?
 - County response: No, we do not. There are many different systems used by the various departments to maintain consumer information. However, there is no common intake system utilized which would be necessary to gather this type of information.

The second public hearing was held in conjunction with a Commissioners Meeting, which was held on May 2, 2018 at 10:00 AM. The Human Services Plan was presented and the public was given a chance to comment or ask questions. There were approximately 100 people in attendance. The following questions/comments were asked/made:

Question: Commissioner Reilly: Regarding the \$1 million increase, can you tell us about the money that hasn't been allotted?

Answer: Michelle Hovis: Some of that money has been allotted because they are startup programs, and programs had to make purchases and do renovations. The money for the ongoing programs will provide for staffing and will begin in the upcoming year.

Question: Commissioner Hoke: Regarding the \$17 million, the community needs to know that we opted into the Human Services Block Grant program on year ago, which gives us the flexibility with the funds. Who makes the decision on how you would reallocate funds to different organizations?

Answer: Michelle Hovis: We have a planning team that meets and determines what needs are out there. Each system brings their needs to the table in terms of new ideas or outstanding barriers. Our systems have had no increases in funding generally. The additional funds received this year, which are CHIPP (Community Hospital Integration & Project Program) funds, but it is a very specific increase. Generally our systems have not had an increase and are still recovering from a decrease in funding. We take feedback from public meetings, other initiatives and coalitions. As a reminder, this doesn't represent all of the funds that we manage in the Human Services division.

Comment: Commission Byrnes: It is terrific what you are doing in leading the Communities of Hope initiative. Some of these private and public partnerships are what enable our Human Services Department to truly excel.

Comment: Member of the Public: Area Agency on Aging does a wonderful job. My wife has Alzheimer's and I had a lot of help from them.

Michelle Hovis: Area Agency on Aging is part of the Human Service Division and the big picture, but their funds are not included as part of this specific plan. We are grateful for your comment because our Area Agency on Aging works hard to assist older adults.

Commissioner Byrnes: We will pass your comment onto our Director of the Area Agency on Aging, Mark Shea.

Part III. Cross-Collaboration of Services

Communities of Hope: York County continues to promote cross-collaboration among the categorical human service departments as well as various client populations. York County is continuing to work with Casey Family Programs in order to proceed with the Communities of Hope initiative within York City. The goal of the program is for a community to work together "across systems and across sectors to improve the broader conditions that may affect the health, safety and opportunities of children and their families." The initiative touches many different consumer populations, including OCYF involved families, families experiencing homelessness or near homelessness, children and adults with mental health issues, families living in poverty, children and adults with substance abuse issues, etc. The collaborative effort will help identify various preventative interventions that may assist families from becoming involved in the formal child welfare system. York County will be contracting with Communities in Schools to hire a

Community Mobilizer who will perform targeted activities to achieve the goals of communities of Hope.

Inter-departmental Collaboration: York County is also taking measures to cross-collaborate among departments to better serve consumer populations, which often times overlap. Recently, the number of referrals to OCYF in York County has increased due to complex substance abuse issues. As a result, the York/Adams Drug and Alcohol Commission co-located a drug and alcohol specialist to the Office of Children, Youth & Families. The specialist works in tandem with OCYF workers, accompanying staff to home visits to discuss treatment options and available resources with families. The specialist also provides technical assistance to OCYF staff in regards to substance abuse matters. This change in practice has been invaluable, and York County looks to continue to expand this cross-collaboration initiative in order to provide a wider breadth of services to families.

York County has also co-located a mental health specialist to work directly with the staff of the Office of Children, Youth & Families. The mental health specialist teams with caseworkers to problem-solve, share information, and discuss mental health programming for the families that may need additional mental health supports. The mental health specialist also is a regular participant in the Integrated Practice Team (described in further detail below) meetings and is there to assist families with any mental health needs, reducing barriers and creating efficiencies.

In addition, the York County Office of Children, Youth and Families has begun a partnership with the Children's Home of York to implement a process called "Integrated Practice Team". The Integrated Practice Team is a community-oriented, strength-based, individualized planning process aimed at helping people meet their unmet needs, both within and outside of formal human services systems, while they remain in their neighborhoods and homes. The team is comprised of community partners of various backgrounds and disciplines who offer knowledge and expertise toward the development of a comprehensive family service plan with innovative ideas to ensure the individual needs of the family are met while children live safely in their own homes. The child/family that has an Integrated Practice Team Meeting is encouraged to attend the meeting, to assist with vocalizing their needs, as well as assisting in the planning process. During the Integrated Planning Team Meeting, the group will assist with developing an action plan for the family, as well as determining who will be responsible for assisting with the action items. Additionally, the assigned representatives from the Children's Home of York will assist by following up with the assigned individuals to ensure that they have followed through on their specific items. The practice is a true example of cross-collaboration.

York County is also involved in numerous initiatives that involve cross-collaborating in the areas of employment and housing.

Employment: York County's MH-IDD Program is working with the Department's Office of Developmental Programs and local ID service providers to make changes in the service system to promote employment, inclusion, and community participation for intellectually disabled

consumers. These changes will be designed to build capacity of providers to help people find and keep jobs earning competitive wages and serve people in increasingly inclusive settings.

ODP has proposed changes to the Medicaid Home and Community-Based Services waivers effective July 1, 2017 and will continue to hit benchmarks through 2019. The changes will promote the amount of service a person can receive in a licensed adult training or vocational facility based on individual need and desire for community integration/employment. The proposed changes will also limit the size of new and existing training facilities to improve the quality of service and to reduce the stigma of "institutional employment/programming." ID service providers have been networking with local organizations, employers, and amenities to plan for the changes. Several providers have also included the County Program in their planning facets to increase understanding for all and to provide overall quality of service delivery as the changes occur.

The ID Program also participates on the interagency coordinating councils for transitioning students to adult life. The council works with local intermediate units and schools to plan for employment opportunities post education.

The County Behavioral Health System and community case management programs recognize the value of providing independence through employment. Case management works diligently with consumers and agencies in the community to support goals of self-sufficiency. York/Adams MHIDD Program contracts with providers such as Shadowfax and Bell Socialization Services for pre-vocational services and job couching opportunities. The use of Certified Peer Specialists to support consumers' self-sufficiency goals through employment is also available to those adults and transitioning age youth with a mental health diagnosis.

York County's Health Choices Management Unit is also currently funding a mobile psych rehab program for transitional-age youth, which focuses on employment. With more flexible funding options available through the HSBG, the county could potentially use funding to support the costs for this program for individuals who are not eligible for Medical Assistance, but would benefit from the service.

The community case management program will also continue to focus on assisting consumers in obtaining employment. The goal of the program is to help families achieve self-sufficient living, where increasing household income is often critical. Many of the people who request assistance are not employed or are under-employed. Case management helps identify employment opportunities and helps consumers create a plan to obtain and maintain employment.

The Reentry Coalition is a collaborative effort focused on reducing prison recidivism by providing a smoother transition for individuals exiting prison. The Reentry Coalition acknowledges that reentrants have multiple and complex needs. The collaborative approach of York County's Reentry Coalition allows for coordination between partnering agencies and helps agencies leverage resources and knowledge. Gaps and duplications in services are also discussed and can be addressed to offer better overall service to the community. In regards to employment,

the coalition has brought in the Office of Vocational Rehab (OVR) and CareerLink to train participants about the services they offer and how they can assist in the Reentry Coalition's mission to serve reentering citizens who have multiple needs.

Housing: York County leads and participates in many housing-related activities that rely on strong collaboration for success. For example, the York County Continuum of Care is the governing body responsible for many different funding streams which are geared toward homeless individuals and families. The Continuum of Care (CoC) is a large committee comprised of human service professionals, mental health providers, individuals who have experienced homelessness, medical providers, veterans organizations, housing providers, etc. The group also makes funding decisions for various funding streams, including the Emergency Solutions Grant (ESG), and HUD's Continuum of Care. The CoC has also voted on program rules that impact the Homeless Assistance Program (HAP). For example, in FY 17-18, the CoC voted on increasing the federal poverty guideline threshold from 150% to 200%. Categorical human service departments are well represented in the CoC and are very active participants.

The CoC addresses the needs of various homeless populations through its planning and funding processes. The CoC routinely conducts needs assessments via surveys to determine any pockets of unmet needs within different consumer groups. Based on this information, the York CoC prioritizes projects in these areas as funding becomes available. York County now has a rapid re-housing program geared toward homeless, transitional-age youth, involved with the OCYF system. The CoC also funds permanent supportive housing and rapid rehousing projects for people with physical disabilities, mental health and substance abuse issues, victims of domestic violence, and families with children. The collaborative nature of the CoC allows for York County to best leverage its resources through a coordinated planning process.

Following the Housing First model, the CoC has formed a prioritization and review committee to determine which housing options are most appropriate for families/individuals who meet HUD's definition of homeless. Families/individuals that are homeless are assessed and are provided a score based on a vulnerability index. The review committee (comprised of county human services agencies, housing providers, community case management staff, etc.) discusses the family's vulnerability factors, which can range from safety issues, domestic violence, behavioral health issues, physical health issues, etc., and then makes a recommendation for an appropriate housing intervention.

In addition to the CoC, there are many other examples of cross-collaboration for housing services in human services. The Reentry Coalition (discussed above) is also a prime example of collaborative work in the area of housing. The prison population touches all populations that receive services from the York County Human Services Division. A subcommittee of the Reentry Coalition has been formed to focus solely on housing. The subcommittee is assessing prison data to determine if applying for CoC funds to create a program that will provide supportive housing services to reentrants whom were homeless prior to their stay in prison.

The York/Adams MH-IDD Program actively participates in the York County Coalition Housing Task Force and a local housing coordination meeting. The behavioral health system engages in these community support meetings to ensure the inclusion of individuals recovering from a mental illness as a targeted group. York/Adams MH-IDD Program also participates in the ranking committee for this task force to ensure that Housing First Approaches are reflected at the time of considering community resources for the homeless, especially those with a mental illness. As a way to collaborate with the justice system, those individuals with a persistent mental illness who are part of the justice system are a priority for our residential programs.

For the ID population, residential services continue to be a high priority. There is often crosscollaboration with the Aging Office for expedited Dom Care applications and nursing facilities. Mostly, the ID department works with community agencies in combination with the Office of Developmental Programs for management of waiting lists and waiver eligibility issues.

The HealthChoices Management Unit (HCMU) is also a lead in cross-collaboration as it develops housing programs that address the needs of many different populations served under the human services umbrella. The primary focus of HCMU-developed and funded projects is for low-income individuals on Medical Assistance with behavioral health issues. However, HCMU collaborates with other categorical populations through programs such as the Shelter + Care, which is a CoC funded permanent supportive housing project in partnership with the Housing Authority of York and is geared toward homeless individuals with behavioral health issues.

The county leads many other initiatives which involve collaboration among categorical agencies to serve different and often times overlapping consumer populations. A summary of major collaborative efforts in York County are outlined below.

Communities that Care- a process that uses preventative science research to promote positive youth development and prevent youth behavior problems. The process provides local control and flexibility to maintain support and sustainability and is guided by the results of a survey (Pennsylvania Youth Survey) that is conducted within our York County school system.

Delta Collaborative- Located in southern York County, Delta is a rural town where there is a high concentration of poverty and a lack of transportation resources, which can be barriers to services. A collaborative is comprised of county human services professionals, health/ human service providers, Southeastern York County school district staff, and representatives from the Delta community was formed to tackle the issues. As a result of the group's work, York County expanded site based behavioral health services in Delta and began offering an emergency shelter nights program for the homeless geared specifically for this area.

Faith-Based Community Partnership: Through various initiatives including Systems of Care and Communities of Hope, the York County Human Services Division has been working with the faith-based community in order to create partnerships to best utilize and leverage resources. Many faith-based organizations have a mission to assist those in need, and can be a tremendous

resource to human service agencies. The goal is to continue an open dialogue to discuss plans for future desired programming. As a way to achieve that goal, the Human Services Division is partnering with members of the faith-based community and is hosting a conference in June 2018 to educate the faith based community about the trends and unmet needs in the community and to discuss further partnerships.

Community Care and Coordination Meetings: Facilitated by a major healthcare provider, monthly Community Care and Coordination provide participants a forum to discuss complex cases, where barriers to care are often identified. The group is comprised of human services personnel from various county departments, EMTs, staff from medical offices, staff from the Area Agency on Aging, doctors, social service providers, etc. The Community Care and Coordination group shares resources and identifies ways to reduce barriers to care. Housing issues are often discussed during these meetings.

Drug and Alcohol Collaborative Efforts: The Drug and Alcohol Commission is not a standalone agency, in that many agencies work collaboratively to combat the disease of addiction. The importance of collaboration and coordination between the Commission and other related systems in order to improve outcomes cannot be under emphasized. The Commission collaborates with many agencies in the community and within the County Human Services system and strives to continue to reach out to community agencies in an effort to further expand its current collaboration.

The Commission continues its collaborative efforts with the criminal justice system by supporting treatment courts and diversionary programs. The Commission continues its support and collaboration of the York County Treatment Courts, through the assignment of full time designated Case Managers for the following treatment courts (York County Drug Treatment Court, York County Mental Health Treatment Court, York County DUI Treatment Court and Veterans Treatment Court) on a consultative basis. Additionally, the Commission supports a variety of diversionary programs including Intermediate Punishment. Further, the Commission sits on both the York County Intermediate Punishment Board as well as the York County Treatment Court Advisory Board.

The Commission also continues to collaborate with and support York and Adams County Children, Youth and Families, and most recently has provided drug and alcohol liaison services to these entities. The Commission, HealthChoices program and MH-IDD program participate in regular meetings with crisis providers to discuss access to care and barriers in treatment.

The Commission additionally works with treatment providers to not only provide treatment, but to increase their education about Naloxone, the opioid overdose reversal medication. The Commission has met with providers one on one as well as well as discussed ways to incorporate Naloxone into practice at provider working group meetings. The Commission has also partnered with the local contracted providers to reach out to pharmacies in York/Adams to further educate

on Naloxone in addition to providing information to the York County Heroin Task Force and making materials available at the Heroin Task Force town halls. The Commission strives to offer coordination for MAT, such as Suboxone and Vivitrol and forge connections with agencies offering these services, even though the Commission does not currently contract for these services.

Part IV: Human Services Narrative: Mental Health Services

York/Adams HealthChoices Management Unit and The York-Adams Mental Health Program have worked on ways to improve and expand services for the 2018-2019 Fiscal Year. During the last year, our county mental health system has continued to find ways to expand services that can address the mental health needs of the residents we serve. The goal is to fulfill the mission and to strive for an all-inclusive system delivery. In the past year, efforts have concentrated on addressing the needs of children with social emotional disturbance and adults with a persistent mental illness by ensuring the availability of less restrictive services. Another area of focus that the county continues to address is the need of services for our special populations including Transitioning Age Youth, Individuals Transitioning from state hospitals, Racial/Ethnic/Linguistic Minorities and the LGBT Community.

The inclusion of stakeholders has been vital in the development and implementation of the York County Human Services Plan. It is through Advisory Board Meetings, Systems of Care Partnership, Community Outreach, and the York County Continuum of Care Committee Meetings, that York & Adams County continues to engage community members, advocacy groups, behavioral health managed care representatives, and other cross-systems partners inside and outside our county in the development and implementation of this plan.

Program Highlights

The behavioral health system continues to expand the menu of community services provided to the residents of York County. In FY 2017-2018, a second partial hospitalization program opened its doors to adults with serious and persistent mental illness. This program is located in the heart of York City close to the public transportation center, providing greater accessibility for consumers.

Efforts were also made to address the behavioral health needs of the transitioning age population. Community Care Behavioral Health issued a Request for Proposal (RFP) for a Mobile Psychiatric Rehabilitation Program. Fellowship Health Resources was the selected provider for this program, and has been licensed by the Office of Mental Health and Substance Abuse Services. The program is expected to start serving consumers in the spring. Another addition to the menu of services targeted to transitional-age youth is Certified Peer Specialist services. This program provided by Service Access Management (SAM) serves youth and young adults ages 14 to 26.

Collaboration with the School District for the City of York has been taking place over the last number of years to discuss the increasing needs of students within the district. As a result, in FY 2017-2018, Community and School Based Behavioral Health (CSBBH) was implemented. CSBBH is a program that includes clinical interventions as well as case management, crisis intervention, and consultation/training to educational staff. Pressley Ridge was selected to provide the service and offers the service in three schools within the district. CSBBH is currently in three school buildings in York City School District. CSBBH currently serves 32 students with social and emotional disturbance. In addition, outpatient mental health satellites were added to school buildings in Red Lion, Northern School District, South Eastern, Southern York, York Suburban, South Western, Spring Grove, Upper Adams, and Fairfield School Districts.

Another program highlight is the revitalization of the County's Disaster Crisis Outreach Referral Team (DCORT). Over the last two years, the number of DCORT members had declined. Efforts were made for recruitment and training to increase member's participation. York/Adams DCORT currently has eight certified members on their team. DCORT is designed to help those individuals who have been impacted by a crisis or disaster. The goal of DCORT is to provide assistance for a basic behavioral response to an all hazard incidents or support during a crisis, disaster, or for an incident with a potential of causing emotional trauma to the general population. DCORT continues to collaborate with York County Emergency Management and Red Cross to meet the emotional needs of York County residents during a disaster.

Community activism has continued to grow this year in York County. The York County Youth Mental Health Alliance (YCYMHA), formed in April of 2016, has continued to give York County youth a voice on the topic of mental health. This year the alliance is organizing their second 5k Glow Run to evoke mental health awareness. YCYMA will also host a solutionfocused Town Hall Meeting between youth and school administrators. The Safe Schools/Healthy Children Grant has sponsored many of the planned activities for this group.

Another highlight is the Safe Schools/Healthy Children Grant that Northeastern School District in York County received. Goals of the grant are to reduce school violence, bullying, and to focus on mental health prevention. Safe Schools/ Healthy Students have worked with many other groups to fulfill this goal such as the Garrett Lee Smith Foundation.

In addition, York County is part of the PA Systems of Care Partnership. Systems of Care (SOC) is a spectrum of effective community-based services and supports for children, youth, and young adults with or at risk for mental health and related challenges. SOC has supported the goals of the behavioral health system by creating partnerships with many community agencies. Partnerships have been developed with the Lincoln Intermediate Unit 12 (LIU) to inform schools about county resources to create a unified network of behavioral health community resources. SOC is also working with school districts to provide trauma-informed care training to staff. SOC has collaborated with the York/Adams County MHIDD Program to offer Youth Mental First Aid Trainings to people in the community.

Strengths and Needs

Older Adults (Ages 60 and above)

Strengths: The York/Adams MH-IDD Program maintains Memorandums of Understanding with the York and Adams County Offices of Aging. The MOUs were updated this fiscal year. The updates include: HealthChoices responsibility with both county programs and shared case management responsibilities between York/Adams County MHIDD Program and the York and the York and Adams Offices of Aging.

In addition, professionals in York County have initiated an Alliance for Low Income Personal Care Home Advancement (ALPHA), which is focused on creating new avenues to make personal care homes affordable for older adults on limited incomes. Another area of focus is to enhance the care received by older adults with significant mental health needs. York/ Adams MHIDD Program serves as a member of their Behavioral Health Committee. Recent projects have included the design of a Situation Management Tool for personal care homes and a Crisis Plan template for their use as well.

Needs: The closure of personal care homes in the county continues to affect our housing continuum for older adults with mental illness who are often times on very limited incomes. York/Adams MHIDD Program is committed to support the efforts of ALPHA to offer proper care to members of the community.

Adults (Ages 18 and above)

Strengths: In order to support our mission and avoid the unnecessary institutionalization of adults who are recovering from a serious and persistent mental illness, our Behavioral Health System offers a varied menu of community-based services. Services such as Community Outreach Recovery Essentials (CORE) by TrueNorth Wellness Services and Behavioral Health Mobile Psychiatric Nursing provided by Wellspan Behavioral Health are designed to provide support and improve the recovery of individuals with a serious and persistent mental health illness and who are participants of the Community Hospital Integration & Project Program (CHIPP). Assertive Community Treatment Teams (ACT) provided by Bell Socialization Services is also another service designed to help those individual with higher psychiatric needs to integrate and remain in the community.

Another community-based service offered by our Behavioral Health system is Partial Hospitalization Services. TrueNorth Wellness Services and Community Service Group provide services to York County residents who are at risk of a psychiatric hospitalization or in need of mental health services beyond traditional outpatient treatment. These services include individual therapy, medication management, and therapy groups. The program's psychiatrist monitors all treatment related services.

In addition, Merakey (formally known as NHS) offers community-based Extended Acute Services to adults in our community. Our Extended Acute Care (EAC) is a 16 bed shared facility use to divert individuals from the State Hospital level of care by decreasing the acuity of their symptoms and help them to use systemic and natural supports in their recovery. Also, the behavioral health program offers two (2) beds at Philhaven hospital-based EAC for those individuals with severe and persistent mental illness and medical treatment needs that are not met sufficiently at the non-hospital based EAC.

Consumer-operated services also support the adults with serious and persistent illness living in the community. The National Mental Health Alliance (NAMI) offers many educational and support programs for this population. Their connection support groups and community presentations as In Our Own Voice are well known in the community. NAMI also offers evidence-based programs such as the Family-to-Family Education Classes. These classes help to improve the coping and problem solving abilities of families and/or caregivers of those living with a mental illness. NAMI also focuses on advocacy, organizing a walk each October to raise mental health awareness. Last year, the total number of participants was 200.

The integration of individuals with a serious and persistent mental illness into the community includes many dimensions of daily living. York/Adams MH-IDD Program contracts with Penn Employment Services, HART Center, and AHEDD, Inc. to provide consumers with the opportunity to work with the community while accomplishing educational, vocational, and financial goals.

The County MH-IDD Program also engages in community support meetings in order to ensure the inclusion of individuals recovering from a mental illness. Our active participation in the York County Coalition Housing Task Force and Ranking Committee ensures that Housing First Approaches are considered for those adults with a serious and persistent mental illness.

Needs: There continues to be a need for outpatient psychiatric services in York County. Efforts continue to be made to expand such services.

Transition-Age Youth (Ages 18-26)

Strengths: To address the behavioral health needs of our Transitioning Age Population, Community Care Behavioral Health contracted with Fellowship Health Resources for their Mobile Psychiatric Rehabilitation Program. This program's goal is to build independent living skills of transition-age individuals to maximize their integration to the adult community. This program serves individuals ages 16 to 26.

The HealthChoices program also sought to expand Certified Peer Specialist Services for this population. The Certified Peer Specialist (CPS) works directly with consumers to provide individualized assistance to consumers' personal goals towards recovery. For the transition-age population, recovery goals focus around building independent living skills.

Based on the individualized case management services offered by York and Adams MHIDD program, transitioning age youth are served by provision of services such as career development and independent living. York and Adams MHIDD Program hold contracts with the Arc of York County and other community providers to satisfy the transitional needs of this population. Also, several of the MH-IDD Program's housing options are designed to serve the young adult population (ex. Bell Socialization Services' Young Adult Apartment Program).

The York/Adams MH-IDD Program and the York County Children and Youth and Families are also co-located in the same building. With this close proximity, this allows both staffs to work cooperative on cases of young adults with serious emotional disturbances; involved in out-ofhome placement, and in need of help in transitioning to the adult world. Mental health case management attends as needed to transition planning meetings with York County Children and Youth and Families

Needs: The implementation of the Mobile Psychiatric Rehabilitation Program and Certified Peer Specialist Services will attempt to close the gap between the children and adult system. Nonetheless, more transitional housing opportunities may be considered for this targeted group.

Children (Under 18)

Strengths: York County Behavioral Health System continues to expand the delivery of services in the schools. The Student Assistance Program (SAP) helps to identify the needs of the students refer for a mental health assessment. During FY 2016-2017, 1,266 students received assessments through SAP and 602 received mental health services as a result. To date, 538 students have been served. To complement the delivery of school services, school districts have pursued school-based outpatient mental health services. At this time, 81 school buildings have contracted with outpatient mental health providers to provide these services.

Another well-utilized resource in our community especially in the school system is Child and Adolescents Service System Program (CASSP). CASSP's purpose is to develop and coordinate a plan of care for children and adolescents with emotional, mental health, or behavioural challenges. Our Behavioural Health System also has the opportunity to work closely with the Family Engagement Unit. The Family Engagement Unit oversees different types of family meetings including Family Group Decision Making (FGDM). Their intent is to involve families and natural supports in developing plans that will address the safety, well-being and permanency of their family members.

In addition, a full continuum of services is available for children and adolescents to reduce the utilization of restricted residential settings. These services include outpatient mental health services, CRR Host Home, crisis intervention, case management, and partial and inpatient hospitalization. Some of the more widely used services are Family-based Services and Behavioral Health Rehabilitation Services (BHRS). Family-based services main goal is to engage family members on building connections while addressing the structural dynamics of the

family. BHRS is designed to develop behavioral interventions based on the unique needs of the client. Family-based services are considered one of our highest levels of community-based services.

Two additional practices that help decrease the need of restricted residential settings are Multisystematic Therapy (MST) and Functional Family Therapy (FFT). These evidence-based practices are designed to address the mental health needs of our children, adolescents, and transitioning youth. MST provided by Adelphi Village is geared to adolescents between the ages of 12 to 18. MST focuses on addressing the environmental and systematic challenges that impacts youth by promoting a better quality of life and by promoting resiliency. In contrast, FFT provided by True North Wellness Services, is a short-term intervention offered to children and adolescents between the ages of 10 to 18. FFT model focuses on acceptance and respect while addressing the emotional and behavioral challenges within the family system.

A community-based service added this year to our continuum was Community School-Based Behavioural Health (CSBBH) offered through Presley Ridge. The CSBBH Program is a voluntary mental health service for youth ages 5 to 18. The targeted group is students who demonstrate an emotional or behavioral disturbance that interferes with their ability to be educated and to function in other settings may be appropriate for participation. The CSBBH Team is based in the school, but delivers services to the youth and family in the school, home, and community settings as needed. The CSBBH model includes clinical interventions as well as case management, crisis intervention, and consultation/training to educational staff.

Through HealthChoices reinvestment funds, another community-based program utilized to avoid the unnecessary institutionalization of children and adolescents with social emotional disturbance is High Fidelity Wraparound Services. Service Access Management, Inc. (SAM) through the Joint Planning Team (JPT) provides these services. The goal of JPT is to provide support, and planning to help families develop, use resources, and skills in order to return and/or sustain the youth in the home community.

The Children Mental Health Respite Program is also available to children and adolescents with a mental health diagnosis. This program is designed to provide planned or emergency care to a child with a special need in order to provide temporary relief to caregivers. This includes the use of community-based programs, recreational programs, residential programs, and placement with friends or family members other than caregivers.

York/Adams Mental Health Program has also created a partnership with York County Children, Youth & Families. The mental health program has agreed to provide a Children's Administrative Case Manager to work specifically with York County Children, Youth and Families' cases. This case manager will be the liaison between mental health services and the child welfare system. **Needs:** Stakeholders continue to express the struggles with accessing child psychiatric services in a timely manner.

Individuals Transitioning out of State Hospitals

Strengths: In response to Pennsylvania Olmstead Plan, York County Behavioral Health System continues to meet the needs of individuals transitioning from state hospital care. Recovery oriented systems and community based resources such as ACT and CORE are used in conjunction with community-based residential services. The full continuum of residential services include Community Rehabilitation Residence (CRR), Structured Care Resident (SCR), Assisted Living (AL), Independent Living (IL), Long Term Structured Residence (LTSR) and Supported Living.

In order to fulfill the mission and increase the menu of services offered to adults recovering from a mental illness, York/Adams MHIDD Program decided to participate in the expansion of the Community Hospital Integration Project Program (CHIPP). Keystone Human Services will be operating the third (SCR) and Community Services Group will operate the first enhanced CRR. This new SCR will be located outside of Gettysburg in the 672 Catchment Area. The first enhanced CRR will be expected to serve four individuals in the York Area. This expansion will help with the diversion and transition of individuals out of state hospitals.

Needs: Despite the efforts to end the unnecessary institutionalization of individuals with severe and persistent mental illness, the waiting list for these residential programs continues. Waiting lists for highly supervised housing continues to be long.

Co-occurring Mental Health/Substance Abuse

Strengths: The *Hazeldon* Co-Occurring Mental Health and Substance Abuse Program is another resource provided to individuals in the community with co-occurring disorders. Having additional treatment providers that specialize in treating co-occurring disorders can decrease the unmet needs by expanding the availability of accessing services. PA Counseling Services and T.W. Ponessa are the providers for this service.

In addition, non-hospital inpatient and detox services are offered to this population. White Deer Run, a large drug and alcohol treatment provider, operates a co-occurring licensed non-hospital inpatient facility at the York County Substance Abuse Treatment Center. This allows priority access to York and Adams County consumers in need of this level of care.

Similar to mental health and intellectual disabilities, the York/Adams MH-IDD Program and the York/Adams Drug and Alcohol Commission are also co-located in the same building. This allows for immediate access to drug and alcohol case management services, including on-site level of care assessments, and assistance in accessing placement and funding in the appropriate

treatment facility. Many special populations with co-occurring disorders are served through a network of providers. This includes Pregnant Female, Adolescents, and Intravenous Drug Users.

Other internal efforts are being made to strengthen the association between mental health and substance use treatment. York/Adams MHIDD will be collaborating with Gaudenzia to provide the Drug and Alcohol Current Trends Training to all mental health staff. This training educates the public about the latest trends in the world of Substance Use Disorders so that people can early identify the signs and encourage/seek treatment.

Needs: The continuity of services is a challenge with this population given the gap in housing services. This population is in need of more transitional housing services at the time of discharge from Drug & Alcohol rehabilitation facilities. More programs based on the Housing First Approach should be developed and geared towards the special need of individuals with co-occurring disorders.

Justice-involved Individuals

Strengths: The York/Adams Behavioral Health System collaborates with other community groups who are dedicated to address the needs of justice-involved individuals. The biggest partnership is with the Probation Departments Office of both Counties. Also, many behavioral health providers are active participants on the Re-entry Coalition, Criminal Justice Advisory Board (CJAB) and other cross-systems initiatives.

The York County Mental Health Treatment Court and the York County Juvenile Justice Partnering with Mental Health (JUMP) have been part of the menu of services since 2005. The participation in specialized forensic programs designed to meet the needs of individuals with mental illness who are also involved in the criminal justice system has been very active over the years. These programs have a less than 10% 3- year recidivism rate and less than 5% 2-year recidivism rate. The York County Mental Health Court was nationally recognized in early 2011 as a Model Example of Treatment/Diversion Programs.

In addition, York County has implemented the nationally recognized training curriculum of the Memphis Model of Crisis Intervention for police officers. To date 140 police officers representing 19 different departments including York Hospital, Memorial Hospital, York County Prison, the Probation Department and the Sheriff's Department have been trained in the Memphis Model of Crisis Intervention. Two more trainings are scheduled for this year.

Needs: The need to secure adequate housing upon release from the criminal justice system continues to be an area of need in our community. Through the Re-entry Coalition the needs of this population continue to be a moving force.

Veterans

Strengths: NAMI is the heart of mental health consumer-operated services in York. NAMI in collaboration with the Veterans Affairs Office in York is offering the NAMI Homefront Program this spring. The NAMI Homefront Program is an educational program that teaches families, caregivers, and friends of military service members and veterans how to manage the challenges and the impact of mental health for this population.

Another area of support for veterans is trauma-based treatment. The behavioral health system ensures that trauma-informed care is available in the community. The local mental health providers have clinicians exclusively trained in the area of trauma; still many choose care through Veterans Affair Medical Services.

It is also through community outreach that the York County behavioral health system tries to support the needs of this population. York/Adams MHIDD Program is part of Suicide Prevention of York. Suicide Prevention of York provides advocacy, community resources and education about suicide. Veterans have been one of the target populations for this organization.

Needs: The expedited identification of veteran status for individuals accessing psychiatric and behavioral supports is a need for many of our service providers. The early identification of veterans accessing supports can better assist in accessing appropriate services. This ongoing need remains a priority of the local mental health service system.

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

Strengths: To create a safe and welcoming environment, the York County MHIDD Program reached out to the National Resource Center on Domestic Violence about the "The 'ALL Are Welcome Here' image. This image was created by the Pennsylvania Cross-Systems Advocacy Coalition and supported by Grant No. 2007-FW-AX-K009, which was awarded by the Office on Violence against Women, and the U.S Department of Justice. The 'ALL Are Welcome Here' image was made into a sticker by the York/ Adams MHIDD Program. This sticker was distributed among human services offices and behavioral health providers in the area to reflect the county views of a welcoming and inclusionary environment for this population.

The behavioral health system understands the stigma this population confronts. York/Adams MHIDD Program has special funding available for those consumers who wish to obtain counseling services with Alder Health Care Services. This provider has staff with special dedication and training in this area. Alder Health is committed to providing a safe and affirming environment to the individuals that seek to improve their behavioral health. Alder offers individual, couples and family counseling.

Needs: Through provider feedback, the county has gained insight into the need of more specialized staff training about the LGBTQ community. Some providers have resourcefully connected with the Keystone Pride Initiative to better serve the needs of this population.

Nonetheless, the lack of clinicians who are specifically trained to work with this population continues to be a need.

Racial/Ethnic/Linguistic Minorities

Strengths: York/Adams MHIDD Program continues to contract with The Senderos Program to satisfy the social rehabilitation needs of our Spanish-speaking community. The Senderos Social Rehabilitation Program offered by Bell Socializations Services has been in service since 1994. This program provides support services, social education recovery, and social skills to support the mental health challenges of our Spanish-speaking population.

It is also through community outreach that our York County Behavioral Health System engages in the needs of our Spanish-speaking community. York and Adams Mental Health Program is part of the York County Hispanic Coalition. This group meets monthly to address and support the needs of this community. As part of the Coalition, we have connected with CASA. CASA is an agency dedicated to help with the quality of life of low-income immigrant families. York/Adams MHIDD Program plans to collaborate with CASA to inform our immigrant community about available resources for mental health.

As the growing number of Spanish-speaking residents continues, the York/Adams MH-IDD Program contracts with several local interpreter services to assist case management staff in communicating with consumers and family members. In addition, we have mobile "interpretalk" telephones that allow our staff to communicate with individuals who speak in practically any non-English language.

Needs: The York County Behavioral Health System ensures the offering of cultural sensitive practices from our all of our providers. Nonetheless, more efforts continue to be made to improve such practices and to expand the menu of services offered to this population.

Other- People Living with HIV/AIDS

Strengths: York County Behavioral Health System has the privilege to have Family First Health Caring Together Program as a resource for the community. The Caring Together Program is collaborative partnership between Family First Health and WellSpan Health that provides a high quality of care for people who are HIV positive. Their services include case management, referrals to behavioral health, nurse care management, and medical care. The Caring Together Program conducts mental health assessments on site and refers to appropriate behavioral health services. In an effort to increase the utilization of services for this population, the Caring Together Program provided information and training to our mental health case managers about their services and best practices for this population.

In addition, Alder Behavioral Health offers the opportunity to individuals living with HIV/AIDS to be served by helping professionals who are sensitive to their treatment needs. Alder has master level clinicians who are experts in the areas of stress, trauma, anxiety, intimacy issues, depression, gender identity, and sexuality.

Needs: Alder Behavioral Health is located in Lancaster, Pennsylvania. Given the location of these services, accessibility can be an issue for those individuals who lack means of transportation.

Is the county currently utilizing Cultural and Linguistic Competence (CLC) Training?

🖾 Yes 🛛 No

York County Behavioral Health System values the importance of a culturally competent workforce and community. It is through the Systems of Care Partnership and the Cultural Linguistic Committee that cultural competency trainings and/or activities are offered to employees of the County of York and other community agencies. Our last training was called the Community Action Poverty Simulation (CAPS). This training was provided by the Department of Human Services of York College. This simulation gives the unique opportunity for service workers to understand life with a shortage of money and an abundance of stress. Scenarios help participants decide how to seek services and support, obtain financial assistance, and determine how to spend the little money the family has in order to survive. This training is offered on a yearly basis.

Cultural and Competency Linguistic training was offered to offered all Children, Youth and Families staff. This training was offered by Bilingual connections. The goal of this training was to inform caseworkers about cultural competency practices when meeting with Hispanic families. This training will be offered to more agencies under the Human Services Division including York/Adams MHIDD Program.

Does the county currently have any suicide prevention initiatives?

🛛 Yes 🛛 No

The Systems of Care Partnership and the Garrett Lee Foundation Youth Suicide Prevention sponsored a Question, Persuade and Refer, Train-the-Trainer Course. This education program is designed to educate professionals and community members about the warning signs of a crisis and how to respond. Also, Youth Mental Health First Aid trainings which educate professionals and community members about youth related crisis and non-crisis situation have been offered by York/Adams MHIDD Program and sponsored by Systems of Care.

In addition, Systems of Care organized a countywide Public Service Announcement Contest in recognition of Mental Health Awareness Month in May. SOC invited all York County High Schools to participate. The purpose of the contest was to raise awareness about youth mental health issues and to de-stigmatize youth seeking help for their mental health issues.

York County Behavioral System is also pleased to announce that both of our crisis centers have become a member of the National Suicide Prevention Lifeline. The National Suicide Prevention Lifeline is a national network of crisis call centers dedicated to reach and serve all persons who could be at risk of Suicide. Also, in order to support the work of crisis workers, all mental health department staff was trained on the Mental Health Procedures Act, and our mental health delegate procedures.

1. Capital Pro	1. Capital Projects for Behavioral Health	ioral Health		Check if available in the county and complete the section.	le in the count	ty and comple	te the section.		
Capital financing is used to create targeted permanent supportive housing units (apartments) for consumers, typically, for a 15-30 year period. Integrated housing takes into consideration individuals with disabilities being in units (apartments) where people from the general population also live (i.e. an apartment building or apartment complex.	used to create tar takes into conside rtment building or	geted perman eration individ r apartment co	lent supportiv luals with disa omplex.	e housing unit abilities being i	s (apartments) n units (apartr) for consumer nents) where p	s, typically, for eople from the	r a 15-30 year e general popu	period. Iation
Project Name	*Funding		Projected \$	Actual or	Projected	Number of	Term of		Year
	Sources by Tvpe	Amount for FY 16-17	Amount for FY 18-19	Estimated Number	Number to be Served in	I argeted BH Units	I argeted BH Units		first
	(include grants, federal state &	(only County MH/ID	(only County MH/ID	Served in FY 16-17	FY 18-19		(ex: 30 years)		started
	local sources)	dedicated funds)	dedicated funds)						
Anthony's Place	York/Adams	\$0 MH/ID		2	2	2	20 years		2009
•	HealthChoices	Funds							
	Reinvestment								
	\$200,000						14444444		
Misty Ridge Terrace	York/Adams HealthChoices	\$0 MH/ID Funds		4	6	Ω	20 years		2010
	Reinvestment	2							
	\$800,000								
Highland Park	York/Adams	\$0 MH/ID					30 years		2012
	Reinvestment								
	\$260,775								
Carriage works	York/Adams	\$0 MH/ID					15 years		2012
	Reinvestment	chin7							25

2013	20 years		\$0 MH/ID Funds	Y orK/Adams HealthChoices Reinvestment \$55,000	Thackston Park
2009	20 years		\$0 MH/ID Funds	York/Adams HealthChoices Reinvestment \$260,775	Carlisle Ave.
·	20 years		\$0 MH/ID Funds	York/Adams HealthChoices Reinvestment \$200,000	September House
				\$800,000	

2. Bridge Rental Subsidy Program for Behavioral Health	Subsidy Pro	gram for Bel	havioral	Check if	available in th	□ Check if available in the county and complete the section.	omplete the s	ection.	
Short term tenant based rental subsidies, intended to be a "bridge" to more permanent housing subsidy such as Housing Choice Vouchers.	d rental subsi	dies, intendec	l to be a "brid	ge" to more pe	ermanent hous	ing subsidy su	ch as Housing	Choice Vouch	lers.
	*Fundina	Total \$	Projected \$	Actual or	Projected	Number of	Average	Number of	Year
	Sources by	Amount for		Estimated	Number to	Bridge	Monthly	Individuals	Project
	Tvpe (include	FY 16-17		Number	be Served in Subsidies in	Subsidies in	Subsidy	Transitioned	first
di la companya di la company	arants, federal,			Served in FY FY 18-19	FY 18-19	FY 16-17	Amount in	to another	started
	state & local			16-17			FY 16-17	Subsidy in	
	sources)							FY 16-17	
							e e e e e e e e e e e e e e e e e e e		

3. Master Leasing (ML) Program for Behavioral Health	yram for Beh	avioral	I Check i	Check if available in the county and complete the section.	ie county and	complete the s	section.	
Leasing units from private owners and then subleasing and subsidizing these units to consumers.	nd then suble	asing and sub	sidizing these	units to consu	imers.			
*Funding Source by Type	<i>Total</i> \$ Amount for	Projected \$ Amount for	Actual or Estimated	Projected Number to	Number of Owners/	Number of Units	Average subsidv	Year
(include grants, federal, state &	FY 16-17	FY 18-19	Number Served in FY	be Served in FY 18-19	Projects	Assisted with amount in FY	amount in FY	first
local sources)			36-17 16-17	ר - וס- ש	Leasing	Master Leasing in FY 16-17	16-17	started
York/Adams HealthChoices Reinvestment	\$117,273	\$120,000	22	24	19	22	\$496	2009
4. Housing Clearinghouse for Behavioral Health	or Behaviora	l Health	I Check if	Check if available in the county and complete the section.	county and o	omplete the se	ection.	
An agency that coordinates and manages permanent supportive housing opportunities.	ages perman	ent supportive	housing opp	ortunities.				
*Funding	Total \$	Projected \$	Actual or	Projected			Number of	Year
(include grants,	FY 16-17	FY 18-19	Number	be Served in			Staff F1Es In FY 16-17	Project
federal, state &			Served in FY	FY 18-19				started
local sources)			16-17					
York/Adams	\$69,290	\$71,400	85	85			<u>د</u>	2008
Reinvestment								
5. Housing Support Services for Behavioral Health	s for Behavio	oral Health	I Check if a	Check if available in the	county and co	county and complete the section.	ction.	
HSS are used to assist consumers in transitions to supportive housing and/or services need	transitions to	supportive h	ousing and/or	services need	ed to assist inc	ed to assist individuals in sustaining their housing	staining their h	ousing

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Year Project first started	2009	es ndividuals version	Year Project first started	2009
Number of Staff FTEs in FY 16-17	3.5	ection. e County provid ractice where ir ss); CRR Con	Average Contingency Amount per person	\$385
		6. Other: Housing Contingency Funds for		
Projected Number to be Served in FY 18-19	85	available in the nnsylvania Housi eather Lodge nd share respons	Projected Number to be Served in FY 18-19	ω
Actual or Estimated Number Served in FY 16-17	85	Check if Check if rogram with Pe rogram s; Fairw work together a	Actual or Estimated Number Served in FY 16-17	2
Projected \$ Amount for FY 18-19	\$240,000	a partnership pl sed to eligible p e same home, v	Projected \$ Amount for FY 18-19	\$3,000
Total \$ Amount for FY 16-17	\$239,161	ncy Funds for ice (PBOA is a tunits then lease together in the otocol), other	Total \$ Amount for FY 16-17	\$2,699
*Funding Sources by Type (include grants, federal, state & local sources)	York/Adams HealthChoices Reinvestment	Other: Housing Contingency Funds for Behavioral Health Based Operating Assistance (PBOA is a g or rental assistance to specific units then lease ous mental illness choose to live together in the ribed in the CRR Conversion Protocol), other.	*Funding Sources by Type (include grants, federal, state & local sources)	York/Adams HealthChoices Reinvestment
		 6. Other: Housing Contingency Funds for Behavioral Health Project Based Operating Assistance (PBOA is a operating or rental assistance to specific units then lease with serious mental illness choose to live together in the (as described in the CRR Conversion Protocol), other. 		

Notes:	PBOA H R	CKR, Conversion, etc.)		S	(include type of So	Project Name	Project Based Operating Assistance (PBOA is a partnership program with Pennsylvania Housi operating or rental assistance to specific units then leased to eligible persons); Fairweather Lodge with serious mental illness choose to live together in the same home, work together and share respons (as described in the CRR Conversion Protocol), other.	7. Other: Ider Health	
	York/Adams HealthChoices Reinvestment	local sources)	federal, state &	(include grants,	Sources by Type Amount for	*Funding	ating Assistan stance to specific ess choose to live RR Conversion Pro	Other: Identify the Program for Behavioral Health	
	\$102,519			FY 16-17	Amount for	Total \$	ce (PBOA is a units then leas together in the btocol), other	m for Behav	
	\$115,000			FY 18-19	Amount for	Projected \$	a partnership pr ed to eligible p same home, v	rioral	
	20	FY 16-17	Served in	Number	Estimated	Actual or	ogram with Pe ersons); Fairw vork together a	I Check if	
	20		FY 17-18	be Served in	Number to	Projected	nnsylvania Hous veather Lodge Ind share respor	Check if available in the	
							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.	e county and complete the section	
P PP P	2009		started	first	Project	Year	County provides ractice where individuals ss); CRR Conversion	sction.	

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Recovery-Oriented Systems Transformation

Priority 1- The expansion of services for Transitioning Age Youth: York County Behavioral Health System recognizes peer support as key factor to a recovery-oriented mental health system. Service Access Management (SAM), Inc. and TrueNorth Wellness Services are the providers for Peer Support Services in York and Adams County. This year, SAM began providing Certified Peer Specialist for youth age 14-26. Also, Fellowship Health Resources will be providing Mobile Psychiatric Rehabilitation Services for youth ages 16 to 26. Our goal is to increase the utilization of these services through community outreach.

Timeline: The goal is to have both programs operating at full capacity by the end of FY 2018-2019.

Fiscal and Other Resources: These services are funded through HealthChoices Management Unit.

Tracking Mechanism: The HealthChoices Management Unit and Community Care Behavioral Health (CCBH) will monitor the implementation and the expansion of these services.

Priority 2- The expansion of support services for Veterans: NAMI in collaboration with the Veterans Affairs Office in York will be offering the NAMI Homefront Program this spring. Due to systematic changes, this educational program was not available last fiscal year. This year NAMI will be having 8 people participate in this program. The goal of NAMI is to increase the number of participants for each course. Their goal is to reach a maximum of 20 people per course.

Timeline: It is our hope that NAMI Homefront Program duplicates the number of participants by next fiscal year.

Fiscal and Other Resources: Different funding sources are utilized to cover the materials required for this course and the provision of staff. Funding sources include NAMI, The Veteran Affairs Office, and York/Adams MHIDD Program.

Tracking Mechanism: York/Adams MHIDD Program will follow NAMI's efforts to increase the number of participants through contract monitoring.

Priority 3- Prevocational Training for Adults with Mental Health: Access to prevocational training has been limited in the past year given the increase demand for this service. Shadowfax, the provider of this service will be considering the need for additional staff to support this increasing demand. Shadowfax and York/Adams MHIDD Program will consider the addition of an Employment Specialist to increase the access to this service.

Timeline: This addition will be considered during this fiscal year.

Fiscal and Other Resources: York/Adams MHIDD Program is the funding source for this program.

Tracking Mechanism: Shadowfax evaluates the goals of this program on a monthly basis. In addition, York/Adams MHIDD Program will follow this program effort to increase the number of participants through contract monitoring.

Services By Category	Currently Offered	Funding Source (Check all that apply)
Outpatient Mental Health	\boxtimes	⊠ County ⊠ HC □ Reinvestment
Psychiatric Inpatient Hospitalization	\boxtimes	⊠ County ⊠ HC □ Reinvestment
Partial Hospitalization		
Adult	\boxtimes	⊠ County ⊠ HC □ Reinvestment
Child/Youth	\boxtimes	⊠ County ⊠ HC □ Reinvestment
Family-Based Mental Health Services	\boxtimes	⊠ County ⊠ HC □ Reinvestment
ACT or CTT	\boxtimes	⊠ County ⊠ HC □ Reinvestment
Children's Evidence Based Practices		□ County ⊠ HC □ Reinvestment
Crisis Services	-	
Telephone Crisis Services	\boxtimes	🖾 County 🖾 HC 🗆 Reinvestment
Walk-in Crisis Services		⊠ County ⊠ HC □ Reinvestment
Mobile Crisis Services	\boxtimes	⊠ County ⊠ HC □ Reinvestment
Crisis Residential Services		□ County □ HC □ Reinvestment
Crisis In-Home Support Services		County HC Reinvestment
Emergency Services	\boxtimes	⊠ County □ HC □ Reinvestment
Targeted Case Management		⊠ County ⊠ HC □ Reinvestment
Administrative Management		⊠ County □ HC □ Reinvestment
Transitional and Community Integration Services		□ County □ HC □ Reinvestment
Community Employment/Employment Related		⊠ County □ HC □ Reinvestment
Services	_	-
Community Residential Services	\boxtimes	🖾 County 🖾 HC 🗆 Reinvestment
Psychiatric Rehabilitation		🖾 County 🖾 HC 🗆 Reinvestment
Children's Psychosocial Rehabilitation		🗆 County 🛛 HC 🗆 Reinvestment
Adult Developmental Training		□ County □ HC □ Reinvestment
Facility Based Vocational Rehabilitation		⊠ County □ HC □ Reinvestment
Social Rehabilitation Services	\boxtimes	⊠ County □ HC □ Reinvestment
Administrator's Office		⊠ County □ HC □ Reinvestment
Housing Support Services	\boxtimes	⊠ County □ HC ⊠ Reinvestment
Family Support Services	\boxtimes	⊠ County □ HC □ Reinvestment
Peer Support Services	\boxtimes	County M HC C Reinvestment
Consumer Driven Services		□ County □ HC ⊠ Reinvestment
Community Services		⊠ County ⊠ HC □ Reinvestment
Mobile Mental Health Treatment		□ County
BHRS for Children and Adolescents	\boxtimes	□ County ⊠ HC □ Reinvestment
Inpatient D&A (Detoxification and Rehabilitation)		⊠ County ⊠ HC □ Reinvestment
Outpatient D&A Services		□ County ⊠ HC □ Reinvestment
Methadone Maintenance		□ County ⊠ HC □ Reinvestment
Clozapine Support Services		□ County ⊠ HC □ Reinvestment
Additional Services (Specify – add rows as needed)		□ County □ HC □ Reinvestment

Existing York County Mental Health Services

Evidenced Based Practice	Is the service available in the County/ Joinder? (Y/N)	Current number served in the County/ Joinder (Appro X)	What fidelity measure is used?	Who measur es fidelity ? (agenc y, county, MCO, or state)	How often is fidelity measured ?	Is SAMHSA EBP Toolkit used as an Implementatio n guide? (Y/N)	Is staff specificall y trained to implemen t the EBP? (Y/N)	Additional Information and Comments
Assertive Community Treatment	Yes	62	ТМАСТ	мсо	Annually	Yes	Yes	N/A
Supportive Housing	Yes	133	Contract Monitoring	County	Annually	Yes	Yes	N/A
Supported Employment	Yes	40	Contract Monitoring	County	Annually	Yes	Yes	Include # Employed: 21
Integrated Treatment for Co-occurring Disorders (MH/SA)	Yes	117	Contract Monitoring	County	Annually	No	No	N/A
Illness Management/ Recovery	No	N/A	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	N/A
Therapeutic Foster Care	Yes	2	No	мсо	No	No	No	N/A
Multisystemic Therapy	Yes	10	CAM, TAM- R, SAM	Agency	Depends on Measure	Yes	Yes	N/A
Functional Family Therapy	Yes	8	CAM, TAM- R, SAM	Agency	Depends on Measure	Yes	Yes	N/A
Family Psycho- Education	Yes	20	FAD, FEIS, FPSC, CED- D, BSI-18	Agency	Begin, during, after program.	No	No	N/A

Recovery Oriented and Promising Practices	Service Provided (Yes/No)	Current Number Served (Approximate)	Additional Information and Comments
Consumer/Family Satisfaction Team	Yes	373	N/A
Compeer	No	N/A	N/A
Fairweather Lodge	No	N/A	N/A
MA Funded Certified Peer Specialist- Total**	Yes	53	N/A
CPS Services for Transition Age Youth	Yes	3	N/A
CPS Services for Older Adults	Yes	50	N/A
Other Funded Certified Peer Specialist- Total**	No	N/A	N/A
CPS Services for Transition Age Youth	No	N/A	N/A
CPS Services for Older Adults	No	N/A	N/A
Dialectical Behavioral Therapy	Yes	Cannot obtain	The exact number of people served cannot be obtained because is registered under outpatient mental health services data
Mobile Meds	No	N/A	N/A
	Yes	3	N/A
Wellness Recovery Action Plan (WRAP)		21	N/A
High Fidelity Wrap Around/Joint Planning Team	Yes		N/A
Shared Decision Making	No	<u>N/A</u>	N/A
Psychiatric Rehabilitation Services (including	Yes	70 Oasis	Utilize FGDM/JPT/Family Team
Self-Directed Care	No	N/A	N/A
Supported Education	No No	<u>N/A</u>	N/A
Treatment of Depression in Older Adults	Yes	5,152	N/A
Consumer Operated Services	No	<u>N/A</u>	
Parent Child Interaction Therapy	Yes	2	N/A
Sanctuary	Yes	19	N/A
Trauma Focused Cognitive Behavioral Therapy	Yes	Cannot obtain	The exact number of people served cannot be obtained because is registered under outpatient mental health services data
Eye Movement Desensitization And Reprocessing	No	N/A	N/A
First Episode Psychosis Coordinated Specialty	No	N/A	N/A
Other (Specify)	N/A	N/A	N/A

Total Number of CPSs Employed	7
Number Full Time (30 hours or more)	1
Number Part Time (Under 30 hours)	6

York County Peer Specialist Employment

Intellectual Disability Services

Continuum of Services: The base service allocation continues to be a backbone to the provision of services to over 1049 unduplicated consumers enrolled in the waiver programs (as of March 2018) and 673 individuals receiving base services (includes inclusion of ID/autism transfer consumers). Collectively, these same consumers represent a total of 1722 total consumers (waiver and base) served year to date during the 2017 – 2018 fiscal year (March 2018). (Source: Conversion and HCSIS data). The simultaneous increase of waiver and base services displays the sway of service delivery especially with the inclusion of the Community Living Waiver. Many individuals are able to transition to other forms of services. The decrease in funding over the last few years has certainly resulted in the reduction and in some cases elimination of necessary services to the most vulnerable consumers in the system. While at the same time increased services and funding has stimulated the service delivery for individuals in waiver programs. The trend of reduction to the base allocation has forced the Administrative Entity (AE) to be more creative in the utilization of those services, while eliminating others.

The following chart depicts the individuals who are receiving services funded by base dollars only. Home and Community services, specialized therapies, respite and transportation services have been added to the component to give a more accurate reflection of true numbers. These services were not included in the template in the County Human Services Plan Guidelines, but represent 403 duplicated services that are funded by base dollars during FY 2017 - 2018.

	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	46	7	50	7
Pre-Vocational	N/A		N/A	we set
Community participation	76	11	80	12
Base Funded Supports Coordination	673	39	685	40
Residential (6400)/unlicensed	7	1	6	>1
Life sharing (6500)/unlicensed	1	>1	1	>1

Individuals Served (Base/HSBG-#'s only –non waiver)

PDS/AWC	0		0	
PDS/VF	0		0	
Family Driven Family Support Services	184	27	184	27

Categories not included in guidelines but representative of overall statistics.

Home & Comm. Habilitation	24	4	26	4
Behavioral Supports (Spec. Tx)	3	>1	2	>1
Respite (Out/Home, Camps, LTA's)	337	50	345	50
Transportation Services	39	6	39	6
Duplicated Totals	1,390		1,418	

The continuum of services will reflect several aspects for consideration, including: maintain individuals in residential programs currently not eligible for waiver programs, increases in waiver rates equates to increases to base rates, further reducing the amount of available monies to the base funded individuals, reduction in available/qualified providers, flexibility of base dollars to allow the AE to manage/divert crisis situations as well as plan for those individuals transitioning from other systems by having the ability to provide one-time only funding.

The County Program will remain the Administrative Entity for the waiver Programs during 2017 -2018. The AE will continue to function under the guidelines set forth in the Administrative Entity Operating Agreement under the DPW/ODP. As part of this requirement, the AE complies with self-assessment and oversight monitoring activities.

Supported Employment

Employment opportunities continue to be ever challenging in the market of today. Traditional day programs continue to have a reduction in contracted work from industry related vendors. The recent reduction is enabling providers to realize additional options for service delivery. Providers are becoming more creative in developing employment opportunities for consumers. The unemployment rate has affected the job market for many consumers as well as making competitive opportunities to be limited.

Support Coordination Supervisory staff are members of transition councils in both county areas. The collaboration of the councils has enabled the County Program to participate in school educational fairs and to plan for life after school and into adulthood.

York County continues to support the efforts of competitive employment and other work related opportunities outside of traditional workshop settings. Employment Point Personnel participate on the Transitional Council as mentioned earlier. The Council is geared towards successful transition from and educational setting to employment following graduation.

The County Program will continue to advocate for funding to support graduates. Employment for recent high school graduates (ODP Initiative) will continue to be a focus. The system continually has to play "catch-up" to meet the demand for services. The goal is always to fully serve individuals as they graduate or shortly thereafter.

The provider network has been positioning them to be able to offer integrated competitive employment. Locally, a provider (TLC) is involved with the state's Employment First Leadership Mentoring Program. TLC is one of only 14 providers in the state to be part of the program. Other providers are using a customized employment approach. Providers have found that this approach is imperative to a successful job match that leads to long term employment.

All employment providers have become increasingly creative and have enhanced opportunities for individuals based on employment criteria as a result of the Waiver Renewal effective July 1, 2017.

York/Adams is not a participant of the Employment Pilot.

Supports Coordination (SC)

The County Program does not distinguish base-funded SC from other funded individuals. Obviously, the differential comes into play as to the level and type of services that are able to be offered to the family/individual. The County Program will continue to provide seamless transition opportunities to individuals transitioning from facility based programs to community options.

The AE will work collectively with supports coordination to effectively plan for waiting list and service availability. There continues to be a large number of individuals on waiting lists as follows:

Category	<u>Count</u>
Emergency	184
Critical	197
Planning	72

*Individuals in the emergency category are given priority when funding is available. Case management continually works with individuals, families and providers and the AE to maximize community integration in all components of service delivery including employment options.

In the next few years major emphasis/commitment will be made to serve more people in the community and giving them to high-quality services.

Lifesharing and Supported Living

The County Program has continually been a proponent of life share opportunities. Life share expansion continues to be a goal set forth in the AE Quality Management Plan and will remain intact through 2017-18. At that time, the AE will determine if the appropriateness of the goal. We project expanding life share to at least one additional individual in each year of the plan, along with other individual provider initiatives. In July 2017, Life Sharing became a stand-alone service definition.

The proposed changes allow participants to live in their own homes and receive services, allow relatives who meet qualifications to provide services to those 18 years of age and above, align rates depending of needs of the individual, and include participant rights (Source: Proposed ODP Waiver Renewal).

Finding appropriate living matches is always a challenge. A new provider to York area has been developing a lifeshare network following the provision of services in the children's system. This approach has been successful as the individuals previously participated in the waiver programs. This has truly been an extension of service provision.

Cross Systems Communications and Training

The County Program is quite active in providing cross training to other county agencies. Training sessions are held periodically to educate those in other agencies on the functions of the AE. Support Coordination staff receive a minimum of (forty) 40 hours of training each year to remain abreast of any changes in the system. There are also several inservice trainings conducted in-house to educate staff on any forthcoming changes in the system and protocol revisions. The cross trainings bring other county agencies, i.e.: including but not exclusively CYF, Aging, MH, and Drug and Alcohol, to the table to further understand the ID system.

Continual collaboration will occur between Area Agency on Aging and Mental Health service entities. The County Program in combination with the Human Services Department sponsors cross trainings to assist case management staff to receive the most accurate information on service delivery and availability. These sessions have been quite successful among new staff. York County, through our County MH-IDD Program, is working with the Department's Office of Developmental Programs and our local ID service providers to make changes in our service system to promote employment, inclusion, and community participation for intellectually disabled consumers.

These changes will be designed to build capacity of providers to help people find and keep jobs making competitive wages and serve people in increasingly inclusive settings. ODP has made changes to the Medicaid Home and Community-Based Services waivers effective July 1, 2017. The changes promote the amount of service a person can receive in a licensed adult training or vocational facility based on individual need and desire for community integration/employment. The changes will limit the size of new and existing training facilities to improve the quality of service and to reduce the stigma of "institutional employment/programming." ID service providers have been working and networking with local organizations, employers', and amenities to plan for the changes through 2019. Several providers have also included the County Program in their planning facets to increase understanding for all and to provide overall quality of service delivery as the changes occur.

The AE continues to work with a residential providers to provide community living arrangements for the most difficult to serve. The AE has been successful in utilizing a cluster of new providers to the area.

The AE has a solid working relationship with the local intermediate units. Key point personnel participate in transition counsels. In addition annual participation in the LIU transition fair provides pertinent information to students and their families as they begin the journey into adult life.

Emergency Supports

The AE continues to contract with two 24 hour crisis intervention entities for the provision of mental health emergency services. The providers are located in both of the counties. Wellspan Behavioral Health and Adams Hanover Counseling are the contracted providers for this service. The AE also has after-hour telephone service through the Medical Dental Bureau that is able to be a liaison to the caller and an on-call staff including the County Administrator for true emergency situations. Again as with SC services the AE does not distinguish the difference between how an individual's services are funded and the receipt of emergency services. The AE also supports the operation of a respite home. The home is a licensed 6400 program and is available for emergency care if necessary. After hours phone coverage and delegate calls are channeled through the agency number.

Mobile crisis units will continue to be utilized. Education on the individuals we serve is ongoing. With the inclusion of autism in the Intellectual Disability arena will create opportunities for training and orientation to all stakeholders.

The AE has also utilized waiver capacity management with ODP as a means of obtaining funds to provide emergency care for individuals. Base dollars are not ample enough to use as an emergency fund. Most base dollars are contracted with local agencies to serve individuals who are waiver ineligible on an ongoing basis.

An after-hours emergency response plan is in place with utilizing the contracted telephone service as described above. The County Administrator and appropriate staff may be notified of any emergency through this service.

Administrative Funding

The Administrative Entity (AE) will continue to support the maintenance of effort for funded services as related to the Administrative Entity Operating Agreement. The AE receives an allocation of funds (both base and Medicaid waiver) for the purpose of maintaining the functions of the AEOA.

The AE will participate in PA Family Network trainings and efforts as offered by ODP. Peer support will be encouraged through networking with individuals and families. Connections through education and discussion will be vital to the overall effectiveness of training processes.

The County Program continues to have a strong relationship with the Health Care Quality Unit (HQCU). The HQCU has been highly successful when all parties come together for a common cause. We will continue to contract with Cumberland/Perry for the provision of regional HQCU services.

The AE supports the continuation of providing administrative support for the operation of the IM4Q program through a conflict free local program. The Proposed ODP Waiver Renewal specifies that IM4Q will be utilized for individuals who are part of the Hamburg Center closure. The timelines and reimbursement procedures have not been developed to date. Local AE's continue to wait for direction on the proposed Hamburg inclusion into the process.

The County Program will continue to be a partner in the planning phases for individuals as they relate to but not limited to aging, physical health, behavioral health and communication. Case management is a vital link between the individual-provider-AE. The Prioritization of Urgency for Need for Services (PUNS) allows for a systematic way but not scientific way of managing waiting lists. As of March 2017 the York/Adams PUNS count is as follows:

<u>Category</u>	<u>Count</u>
Emergency	177
Critical	211
Planning	72

There will continue to be a linkage between quality management and risk management. Risk remediation is an ongoing focus through incident management and monitoring practices. The quality management plans will continue to hi-light the local needs and how to accomplish the goals associated there within. Incident management is also a link to risk management requiring AE and ODP regional review of all incidents reported form the provider network.

The County Program will continue to work with stakeholders including those in non-traditional areas to seek the most appropriate and needed service for those we serve.

Through the efforts of provider monitoring the AE will engage providers in the further development of Emergency Preparedness Plans. Providers are required to have emergency plans in place as they relate to backup plans, evacuation and incident reporting. Continued monitoring of these practices will occur. Technical assistance will be given to the providers as necessary.

Participant Directed Services (PDS)

PDS services have been very valuable to individuals/families that utilize the management tool. York/Adams has one Agency with Choice provider that works closely with individuals and support coordination to assure smooth operations of payment to the employees and appropriate service delivery.

Beginning with the 2017 monitoring cycle, the Agency with Choice provider was reviewed. This process proved to be tedious but fruitful on both the provider and Administrative Entity level.

ODP contracts with Public Partnership, LLC for the provision of Vendor/Fiscal services. The most often relayed barrier is the time it takes from referral/application to the final enrollment of being an employer.

The County Program will continue to promote PDS as appropriate and desired by individuals/families.

Community for All

The AE manages individuals in congregate settings on an ongoing basis. The availability of funding dictates the ability to provide services to these individuals in the community. Over the last few years litigation with class members has enabled funding to be available to provide community options. Most recently, ODP has announced the closure of Hamburg Center over the next two years. York/Adams has two individuals residing in this center and is active in planning for community inclusion for them.

2018 also launched an expansion of the County mental health CHIPP program that has incorporated ID individuals to move from state hospital settings to the community.

Homeless Assistance

Continuum of Services: The York County Human Services Department will continue to fund programming that provides a continuum of services to homeless and near homeless individuals and families. Programs such as the Bell Family Shelter and Individual Shelter Nights serve individuals and families who are experiencing homelessness. York County has two transitional housing programs for those who are homeless, but need extra assistance in "bridging" the gap to self-sufficiency. While in the bridge programs, families work on life skills, finance issues, work issues, etc. For those who are "near homeless", or facing eviction, York County offers a Rental Assistance Program, where individuals can receive assistance for rental arrears. Rental Assistance is also available to consumers who are currently homeless, where assistance can be provided to pay for first month's rent as well as a security deposit, up to a certain limit. Case Management for the homeless/near homeless is available to all individuals who qualify and need assistance in navigating the system and goal planning. Homeless case management is included under the HSDF portion of generic services.

Achievements/Improvements: Through the York County Continuum of Care, York County has implemented a Coordinated Assessment process for homeless families. Families who meet the definition of homeless (staying in a shelter, living on the streets, in a car, etc.) are assessed using the VI-SPDAT, which is vulnerability index commonly used for assessing the homeless. During the assessment process, case management is provided and attempts are made to the family's immediate needs. On a weekly basis, a Prioritization and Review and Referral Committee reviews the results of the assessments that were conducted the previous week. The committee determines the most appropriate program for the family based on the vulnerability score that was given and also based on what housing programs have openings/funding. Those with higher scores are referred to permanent supportive housing units or medium-term rental assistance programs funded through HUD. Those with lower scores are often times referred to HAP–funded one time rental assistance or short-term rental assistance funded through HUD.

The Coordinated Assessment process has led to numerous efficiencies for consumers /families. Families are not required to apply to many different programs constantly repeating their stories and supplying duplicative paperwork. With the coordinated assessment process, the family is contacted by the provider designated during the review process, and the various options are provided at that time. The process has helped rapidly re-house families, reducing the number of days of overall homelessness.

Last year, through the competitive CoC application process, York County was awarded funds to create a rapid re-housing program geared specifically to the transitional age youth population served by the York County Office of Children, Youth and Families. The program has recently opened and provides rental assistance and case management to help transition-age youth become stable with the goal of achieving self-sufficiency.

In addition, the York County CoC was also awarded funding to being a Housing Navigator position. The position is slated to begin in December 2018, and will begin developing a network of landlords that work with the extremely low-income and homeless population.

Unmet Needs and Gaps: With the previous funding cuts, York County is unable to offer any new programming for the homeless. With federal housing money also decreasing, York County has had to redirect HAP funds to emergency shelter, which has reduced the number of individuals served through rental assistance. As this is the only emergency family shelter in York County, it is crucial to keep this facility funded, so that the immediate need of shelter is provided when there are no other options.

Bridge Housing

Description of Services: Transitional "Bridge" Housing- Domestic Violence- A transitional housing program that provides domestic violence victims/families supportive housing up to one year, with the goal of consumers returning to the most independent life situation possible. The program has 11 housing units available.

Transitional "Bridge" Housing: A transitional housing program that provides homeless individuals/families supportive housing up to one year, with the goal of consumers returning to the most independent life situation possible. The program has eight housing units available.

Evaluation Process: Both transitional housing programs are monitored annually and additionally if warranted. During the monitoring process, all facets of programming are reviewed for efficacy. If there are any deficient areas, the provider will be required to submit a corrective action plan, which will be followed-up on.

Success for these programs is defined as individuals who increase their education level or obtain employment while in the program. In the domestic violence transitional housing program, an important measure of success is if the consumer does not return to his/her abuser. In addition, through life skills workshops, staff may focus on teaching residents how to clean up any debt they may have. Therefore eliminating or reducing debt is another excellent measure of success. Both programs also consider consumers moving into permanent housing as the ultimate success.

Proposed Changes: None.

Case Management

Proposed Changes: Beginning fiscal year 17-18, the county's homeless/near homeless case management is included under the HSDF "generic" community case management program.

Rental Assistance

Rental Assistance: This program provides payments for rent arrearages and security deposits to prevent and/or end homelessness or near homelessness by maintaining individuals and families

in their own residences. Households with income at or below 200% of the Federal Poverty Guidelines may qualify for assistance. Households that include children may be eligible for up to \$1500 in a 24-month period and adult-only households may be eligible for up to \$1000 in a 24-month period

Evaluation Process: Rental Assistance is monitored thoroughly on an annual basis with an intensive consumer file review, but also on a monthly basis through the review of the program's encumbrance report.

In addition, a weekly statement is reviewed which lists all of the consumers who received a rental assistance on his/her behalf for that week, along with the listing of landlords. This is reviewed to ensure that the landlord actually indeed owns the property. The agency is also monitored to ensure that landlords are screened through the medical assistance exclusionary process. This prevents any fraudulent landlords who are excluded from doing business with government agencies from receiving payments.

One measure of success for the Rental Assistance Program is the number of individuals who received assistance and are up to date on their rental payments six and twelve months later. Another success that is measured is the number of individuals and families where homelessness was prevented through the use of HAP funds. Lastly, the number of consumers which the homeless situation was resolved is tracked as an outcome.

Proposed Changes: In March of 2018, the York County Continuum of Care voted to increase all thresholds to the maximum levels as outlined in the HAP regulations. The following chart lists the changes that were made:

Criteria	July 1, 2017 Criteria	Change Enacted March 2018
Poverty Level Maximum	150%	Increased to 200%
Households with Children Maximum Level of Assistance in 24 Month Period	\$1000	Increased to \$1500
Adult-Only Households Maximum Level of Assistance in 24 Month Period	\$750	Increased to \$1000

The changes enacted in March 2018 will continue through FY 18-19.

Emergency Shelter

Emergency Shelter (Mass): A temporary shelter for persons who are in immediate need and are homeless. Consumers may stay for a period of 30 days while they develop a housing plan. The Emergency Shelter that is funded with HAP funding is Bell Family Shelter, which serves families (including single fathers with children who are experiencing homeless) and single women when the census permits.

Emergency Shelter- Individual Shelter Nights: This program provides emergency shelter assistance to homeless people who have no other reasonable source of shelter (i.e. no shelter space because shelters are at capacity and no family/friends housing resources). The service is also utilized when a homeless family may have a communicable disease. This service will be provided in conjunction with case management for families who are experiencing homelessness. The program requires daily contact between case management and consumers to ensure that the individual/family moves to a shelter setting when appropriate.

Evaluation Process: Both emergency shelter programs are monitored annually. Consumer files are reviewed to ensure that individuals/families who receive services meet situational and other eligibility criteria. Another monitoring technique used is for the monitor to attend house meetings at the shelter and speak directly to consumers regarding his/her experience and progress with established goals.

Successes for these programs include: increase in income, school enrollment for children, employment, resolution of health issues, and if the individual or family was able to exit the shelter into permanent housing.

Proposed Changes: There are no proposed changes for FY 18-19.

Other Housing Supports

Non-Applicable: York County has been meeting the very basic needs through these core services and has not been able to expand any services due to a lack of additional funding available.

HMIS Implementation

HMIS: York County's HMIS (YCHMIS) is fully implemented with Continuum of Care-funded agencies in York County. YCHMIS also includes several large faith-based homeless housing providers and is implemented with HUD's Emergency Solutions Grant (ESG) providers (with the exclusion of two (2) domestic violence providers due to Pennsylvania state law excluding their participation). In 2017, YCHMIS added Mason-Dixon Community Services (a rural community services program), a new youth-based housing program by Valley Youth House, and

the HAP-funded services of Case Management, Individual Shelter Nights, and Rental Assistance to HMIS data tracking and reporting. HAP-funded shelter services are already participating in HMIS. YCHMIS also serves as the repository for VI-SPDAT housing assessments and reporting, which are required for referral to housing programs through the Coordinated Entry process, implemented by the Continuum of Care as per the requirements from the Department of Housing and Urban Development (HUD).

York's HMIS is made up of a total of 13 homeless provider agencies, 35 programs, and 65 users. York County has successfully used the HMIS to produce six Annual Homeless Assessment Reports (AHAR's) that were accepted by HUD for use in the annual Congressional report for the last six years, the SSVF report for the last year, and APR's for CoC funded providers for the last six years. HAP Reporting in HMIS began in 2017. HMIS data is also used to confirm annual PIT numbers and demographics.

Drug and Alcohol Services

System Overview: The York/Adams Drug & Alcohol Commission (YADAC) was established in 1973 to serve as the Single County Authority (SCA) for the joinder counties of York and Adams. As the designated SCA for York and Adams County, YADAC is responsible for evaluation, planning, administration and funding of the local drug and alcohol prevention, intervention, treatment, and treatment related services within the aforementioned joinder counties. This integrated substance abuse service delivery system is executed through the establishment of contracts with licensed treatment providers, as well as prevention and intervention providers. YADAC contracts are established annually in order to meet the needs of the community. Of the contracted services, most are offered locally.

Waiting List Information

	# of Individuals	Wait Time (days)**
Detoxification Services	0	0
Non-Hospital Rehab Services	0	0
Medication Assisted Treatment	0	0
Halfway House Services	0	0
Partial Hospitalization	0	0
Outpatient	0	0

**Use average weekly wait time

Overdose Survivor's Data: The Commission ensures that following an overdose that expedient and appropriate care for the overdose survivor, smooth transition from emergency intervention to substance abuse treatment, in addition to continuing engagement and support of the survivor and their supports occurs until such substance abuse treatment can be accessed. Such services occur via a Warm Hand-off.

Warm Hand-off target population consists of overdose survivors and their families/supports. Overdose survivors are identified as those who have survived emergency intervention in York/Adams Counties as a direct result of an overdose of drugs or alcohol as identified by a York/Adams emergency responder/department. Services are provided to target populations regardless of funding (Medical Assistance, Managed Care, private insurance, etc.) and are provided to all target populations regardless of substance(s) resulting in overdose. Further, services are provided to all target populations regardless of York/Adams residence.

Warm hand-off services are provided through a contracted provider model and are provided onsite at all York/Adams emergency departments. Services are provided 24/7 and are provided on an on-call status by the contracted provider. The contracted provider must arrive within 1 hour to the emergency department from the time of the emergency department referral in order to begin Warm Hand-off services. Upon arrival, the provider engages with the survivor and their family and links the survivor to appropriate treatment and non-treatment services. If treatment services are not immediately available, the provider offers continued coordination of treatment until appropriate treatment is secured; including appropriate contact with providers, the overdose survivor and the survivor's families/supports in the event clinically appropriate treatment is not available. Such interim support services serve to keep the overdose survivor engaged and motivated to access treatment when treatment becomes available.

In addition to warm hand-off services for overdose survivors and their families/supports as outlined above, the Commission shall ensure maintenance of a current listing of contact information for Warm hand-off services including; types of services provided, phone numbers, addresses, information on relative services available, a description of the process to access care during business hours, evenings and holidays in addition to how to access care for insured and uninsured individuals.

# of Overdose Survivors	# Referred to	# Refused	# of Deaths from
	Treatment	Treatment	Overdoses
159	30	129	· · · · · · · · · · · · · · · · · · ·

Levels of Care:

LOC	# of Providers	# of Providers Located In- County	Special Population Services**
Inpatient Hospital Detox	2	0	N/A
Inpatient Hospital Rehab	2	0	N/A
Inpatient Non-Hospital Detox	16	1	N/A
Inpatient Non-Hospital Rehab	38	3	Co-occurring, Bi-Lingual, HIV/AIDS, Women with Children

Partial Hospitalization	3	1	N/A
Intensive Outpatient	6	5	Adolescent
Outpatient	15	10	Co-occurring, Bilingual, Adolescent
Halfway House	19	1	Women with Children, HIV/AIDS

Treatment Services Needed in County: In studying access to appropriate clinical treatment services, it has become clear that the drug and alcohol system is complex and difficult to navigate by community members and even providers themselves at times. Providers report widely varying processes for locating available treatment beds, and as a result, some groups report a highly congested market particularly for detox bed and inpatient rehab bed access, while other groups report sufficient bed access. At times, case managers within the same facility report similarly varying methods for locating available beds. Access appears to be based upon the individual, rather than a standard method.

Community members are impacted by this complex system and report cases where they were inhibited during, or failed to continue, the treatment care process due to a lack of understanding the system and how to access care. Further, research has additionally shown that individuals can "flow" through the York County care system along many different pathways. The actual pathway an individual follows may be highly dependent upon many variables, including availability of insurance or other payment method, which further complicates the system. If a client is able to access treatment, non-treatment need barriers that need addressed for them to maintain their access to treatment such as transportation, childcare and integration into a recovery support network are rarely if ever address by the provider as the provider lacks the time and funding to address these needs while providing clinical care.

The Commission is seeking to transform the local drug and alcohol system from a complex system to a standardized easily accessible system. This transition shall occur through embedding certified recovery services through a Care Navigator at the local provider level. This individual shall assist the system by promoting engagement, retention and re-engagement in treatment by assisting individuals and their families in navigating the drug and alcohol system to ensure appropriate and expeditious access to treatment and non-treatment needs. The Commission and HealthChoices have conducted a provider working group to discuss the implementation of Care Navigators and next steps include conducting an impact analysis to ensure funding and sustainability of the project. HealthChoices and the Commission have discussed a cost sharing partnership as part of the cost analysis.

Access to and Use of Narcan in the County: As the Commission began to connect with first responders in York and Adams Counties, we recognized that critical first responder services to overdose victims was vastly lacking due to a lack of funding and resources on the first responder level. As such, the Commission developed a Narcan Initiative, which began in May of 2017 to provider Narcan free of cost through SCA funding to first responders who would not have the means to purchase Narcan otherwise. First responders under this initiative have included fire, law enforcement, emergency medical services and community first responders. Through this initiative, the Commission has been able to assist our local first responders in saving lives of those struggling with an opioid use disorder in addition to allowing the Commission to capture critical statistical data regarding overdose reversals in our community.

The Commission functions as the Pennsylvania Commission on Crime and Delinquency Centralized approved Coordinating Narcan Entity for York/Adams County. As such, all entities seeking Commission Narcan must receive approval by the Commission. Approval entails attestation by recipient that they will receive proper training prior to administering Narcan, which may differ depending on the type of entity. The Commission supplements formal training as needed.

Specifically, York County houses 30 EMS agencies, 60 fire departments and 27 police departments. Adams County houses 15 EMS agencies and 23 fire departments. Further, York and Adams County contains 4 residential inpatient programs, 1 halfway house program and 8 outpatient providers. Our community also has 5 college campuses with security officers. As of March 27, 2018, the Commission is providing Narcan to 14 EMS, 14 fire, 9 community agencies and all County police. Further, we are in discussion to provide Narcan to County entities such as Adult and Juvenile Probation programs, Children, Youth and Families caseworkers and our MH/IDD caseworkers. The Commission continually promotes Narcan access and seeks to connect all entities in need.

ASAM Training: The Commission is committed to maintaining our robust drug system of care through the transition to ASAM. As such, the SCA has developed a plan to ensure proper ASAM training for essential staff. To ensure that training sessions adequately support the number of essential staff requiring training, the SCA conducted a survey of all licensed drug and alcohol providers within York/Adams County. From this survey, the SCA obtained the number of essential staff requiring training from each licensed drug and alcohol provider. The number of trainings scheduled reflects the need assessed.

The Commission is hosting four two day ASAM trainings in addition to providing ASAM books for each attendee. There is no cost for the participants to attend the training or related to their provided book. All costs are covered by the Commission, York/Adams HealthChoices Management, and Community Care Behavioral Health. Trainings shall occur in April and June so as to be held prior to the DDAP July 1st training deadline.

	# of Professionals	# of Professionals
	to be Trained	Already Trained
SCA	10	0
Provider Network	190	0

Human Services Development Fund

Services to be Provided: Over the past few years, the York County Human Services Department has had to eliminate programming and drastically reduce services as a result of the funding reduction to HSDF. The details for the programs that will be funded in FY 18-19 are listed below.

Adult Services

Program Name: Homemaker Services

Description of Services: Provides personal care services in a person's own home to avoid costly nursing home placements (for individuals on waiting list for waiver services). One individual is currently served through this program. Due to the extreme funding cuts, this program is being phased out.

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.

Generic Services

Program Name: Community Case Management

Description of Services: Works with individuals who need assistance in navigating the system and assists families or individuals in developing a service plan to address unmet needs and linking to available resources. This service has become more important in the current economic climate where there has been an increase in families who are requesting public assistance for the first time and need information and guidance regarding available resources as well as creating goal plans. The program will follow the Adult Services eligibility criteria, for low-income adults, with modified financial eligibility to serve individuals whose income does not exceed 250% of the Federal Poverty Income Guidelines. The age criteria is also modified to allow for anyone age 18+ to be served. Homeless and near homeless case management will be offered through the community case management program.

Service Category: Service Planning/Case Management - a series of coordinative staff activities to determine with the client what services are needed and to coordinate their timely provision by the provider and other resources in the community.

Populations Served:

☑ Adult ☑ Aging □ CYS ☑ SUD ☑ MH ☑ ID □ HAP

Program Name: PA 211

Description of Services: PA 211 Information and Referral- Assists in the funding for PA 211 (formerly FIRST in York, PA), PA's free referral source. The service links York County residents in need with the appropriate agencies or services via telephone, text, or web.

Service Category: Information & Referral - The direct provision of information about social and other human services, to all persons requesting it, before intake procedures are initiated. The term also includes referrals to other community resources and follow-up.

Populations Served: 교 Adult 교 Aging 교 CYS 교 SUD 교 MH 교 ID 교 HAP

Interagency Service Coordination

The York County Human Services Department provides oversight to the departments that comprise the Human Services Division. Funding is used to support the administrative functions that are necessary in order for the smooth operation of the categorical departments. In addition, the Department conducts many coordination efforts throughout the County, including Family Group Decision Making, Child and Adolescent Service System Program, Communities of Hope, Systems of Care, etc.

York County Human Services Department staff members are also involved in many initiatives where interagency service coordination funds can be utilized. Time spent developing the Communities of Hope initiative, which will require the partnership of multiple county human service agencies, multiple service providers, and will be focusing on improving services to many different consumer populations is a prime example of how interagency service coordination funds can be used.

Funding in this line also includes a training budget that will provide learning opportunities for the entire Human Services Division. Service coordination funds are utilized primarily to pay for salaries for employees who spend time performing these greater coordination activities. All of the activities performed under "Service Coordination" lead to a more integrated human service delivery system, which ultimately reduces barriers for consumers and improves overall quality.

In addition to the activities listed above and previously discussed in the Interagency Collaboration section, employees of the Human Services Department, provide leadership and participate in the following systems-involved committees:

 Human Services Leadership Team- Meetings involving the directors of all county human services agencies including: Human Services, OCYF, Aging, MH-IDD, HealthChoices, and the Youth Development Center. The team works together to discuss various departmental topics that may impact other departments, share resources, and plan for programming and budgeting issues that arise.

- Trainings-The Human Services Department staff lead the development of and arrange for trainings where personnel can learn about various topics and fine tune their skills. In FY 17-18, through a grant through Systems of Care, a training focus has been on trauma-informed care. All human service division personnel are required to complete a two-part training series on trauma-informed care. In addition, a group of 15 staff members, representing each of the departments within the division, will be taking three additional in-depth trauma courses, forming a Trauma Leadership Team. The Trauma Leadership Team will plan the path of trauma-informed care training for the Human Services Division and will also review various departmental policies and procedures that may need to be amended or implemented to comply with trauma-informed expectations.
- United Way Policy Council- The Assistant Director of the Human Services Department serves on the United Way of York County's Policy Council where the focus is on education, health, and reducing the effects of poverty. The policies and goals that are analyzed through the process impact all of the consumers that are served within the human services division.
- Family Issues Roundtable- Planning meetings that focus on information sharing and networking with agency and community participants. The goal of the group is to promote support for and awareness of family dynamics in the delivery of services and in the development of services to meet family and community needs. Meetings are attended by staff, community representatives, and public officials.
- Children's Roundtable- The oversight committee for certain children's related groups. The Roundtable works off a consent-driven agenda, where each subgroup sends a report to the roundtable for distribution prior to the meetings. The agendas are based on emerging needs or topics and the group serves as a support and/or mechanism to assist the subgroups. Membership on the Roundtable is cross-discipline and includes representatives from providers, medical, community agencies, and youth.
- Communities of Hope Steering Committee- The York County Human Services Division's Executive Director leads the Communities of Hope initiative in York County. (Details of the initiative are included in previous sections.) The highly collaborative effort involves many entities outside county government and human services including: the School District of the City of York, the United Way of York County, Family First Health, York City Health Bureau, Communities in Schools, and numerous others.
- Data Analysis and Mapping- The York County Human Services Department recently hired a Data/GIS Analyst to perform various mapping activities for the various departments within the Human Services Division. The mapping and data collection allows for the York County Human Services Division to operate under a data driven

decision-making model. A tool that has been created is a dashboard of various points of interest for the division.

The goal of interagency coordination is to share information with human service departments and other community partners to reduce barriers, problem-solve, and best educate staff and the community about available services. The process allows for Human Services, the lead department, to solicit feedback through meetings and provides the opportunity to learn about the needs in our community. The coordination work completed by Human Services staff, often times pulls large groups together to collaborate in various processes and projects. This work also creates efficiencies to ensure that services are not being duplicated, ensuring that resources are being utilized to the fullest extent.

Job descriptions for the Human Services staff performing interagency coordination functions are attached (Attachment D).

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

York 1. ESTIMATED 2 HSBG ALLOCATION (STATE & FEDERAL) μ HSBG PLANNED EXPENDITURES (STATE & FEDERAL) 4 NON-BLOCK GRANT EXPENDITURES 'n COUNTY MATCH ò OTHER PLANNED EXPENDITURES

County:

- -	\$ 73,410	194,408	\$ 817,449 \$			Administrator's Office
						INTELLECTUAL DISABILITIES SERVICES
325,065 HSBG Match 73,045 Joinder County Match	\$ \$ 73,045					
\$ -	\$ 398,110	2,836,523	\$ 13,061,666 \$	\$ 13,061,666 \$	16,470	TOTAL MENTAL HEALTH SERVICES
\$	\$ -	,	\$; 1	\$		Transitional and Community Integration
\$	\$ -	\$ 290,139	1,256,446 \$	s	1,210	Targeted Case Management
\$ -	\$ 18,752	136,228	5 589,932 \$	<u>s</u>	275	Social Rehabilitation Services
\$	\$	19,041	82,459 \$	s	25	Psychiatric Rehabilitation
÷ -	÷	5,778	25,022 \$	\$	8	Psychiatric Inpatient Hospitalization
- -	\$ -	۰		\$	E	Peer Support Services
\$	\$ -	6,566	28,435 \$	S	24	Partial Hospitalization
\$ -	\$ 27,240	161,128	3 725,767 \$	<u>s</u>	730	Outpatient
N	-	-		<u>~ا</u>	1	Other
\$ -	\$		- \$	s	1	Mental Health Crisis Intervention
	\$ 22,331	439,903	1,687,489 \$	s	165	Housing Support Services
Ş.	\$ 2,800	29,518	127,824 \$	<u>s</u>	30	Family Support Services
\$	\$ -	1	- \$	5	ł	Family Based Mental Health Services
	\$ 30,758	59,900	259,397 \$	~	80	Facility Based Vocational Rehabilitation
\$	\$ 99,894	203,946	883,186 \$	s -	10,755	Emergency Services
\$ -	- \$		÷	<u>~</u>		Consumer-Driven Services
\$ -	-	54,355	235,383 \$	s	1,300	Community Services
\$	43,775	1,044,853 \$	5,492,820 \$	s	160	Community Residential Services
\$ -	3,200	5,798 \$	25,113 \$	2	36	Community Employment
\$	\$ -		-	s]		Children's Psychosocial Rehabilitation
\$ -		-		~	1	Children's Evidence-Based Practices
\$ ·	\$			s		Adult Developmental Training
\$	\$ 49,595	186,872	808,783 \$	<u>s</u>		Administrator's Office
÷ -	99,765	189,684 \$	821,424 \$	s	1,670	Administrative Management
۰¢ ۱		2,814 \$	12,186 \$	S	2	ACT and CTT
						MENTAL HEALTH SERVICES
			(STATE & FEDERAL)			

234,046 HSBG Match 53,639 Joinder County Match	\$ 234,046 \$ 53,639					
\$	\$ 287,685	\$ 726,255	\$ 3,145,028 \$	\$ 3,145,028 \$	1,418	TOTAL INTELLECTUAL DISABILITIES SERVICES
						Other
±	\$	\$ 117,192 !	5 507,497 5		7	Community Residential Services
\$	\$ 159,084	\$ 299,953	\$ 1,323,365 \$		726	Community-Based Services
\$	\$ 55,191	\$ 114,702	496,717	10	685	Case Management
\$	\$ 73,410	\$ 194,408	817,449	2		Administrator's Office
						INTELLECTUAL DISABILITIES SERVICES

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

County:	1	2.	ω	4.	5	6.
York	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	100		\$ 289,108			
Case Management						
Rental Assistance	300		\$ 81,459			
Emergency Shelter	630		\$ 207,865			
Other Housing Supports						
Administration			\$ 80,000		2	
TOTAL HOMELESS ASSISTANCE SERVICES	1,030 \$	\$ 877,388	\$ 658,432		\$ '	- S

SUBSTANCE USE DISORDER SERVICES

Case/Care Management							
Inpatient Hospital							
Inpatient Non-Hospital	617		\$ 541,789				
Medication Assisted Therapy							
Other Intervention							
Outpatient/Intensive Outpatient							
Partial Hospitalization							
Prevention							
Recovery Support Services							
Administration			10				
TOTAL SUBSTANCE USE DISORDER SERVICES	617	\$ 541,789	\$ 541,789	- \$	- \$	S	
						-	

HUMAN SERVICES DEVELOPMENT FUND

Adult Services	1		\$ 4,000			
Aging Services						
Children and Youth Services						
Generic Services	22,000		\$ 363,656			
Specialized Services						
Interagency Coordination			\$ 105,983	1		
Administration			\$ 28,298			
TOTAL HUMAN SERVICES DEVELOPMENT FUND	22,001	\$ 282,981	\$ 501,937	\$	-	1

The York County Human Services Division did not include matching funds for the additional CHIPP project, as that was not discussed as part of the

GRAND TOTAL

41,536 \$

17,908,852 \$

17,908,852 \$

arrangement with OMHSAS.

3,562,778 ŝ Ś 685,795 \$ 126,684 Joinder Co. Match Grand TL 559,111 HSBG Match Grand TL

Attachment A



		Orde	er Confirmation		
<u>Ad Order Number</u> 0001717752	<u>Custon</u> YORK (<u>ier</u> County Purchasing	<u>Payor Customer</u> YORK COUNTY P		umber 9
<u>Sales Rep.</u> kahrens	<u>Custon</u> 102415	er Account	<u>Payor Account</u> 102415	<u>Order</u>	<u>ed By</u>
<u>Order Taker</u> kahrens		e <mark>r Address</mark> ARKET STREET,2ND FLOOF	Payor Address 28 E MARKET STI	Custo REET,2ND FLOOR	<u>mer Fax</u>
		PA 17401 USA <u>ter Phone</u> 1-9212	YORK PA 17401 U <u>Pavor Phone</u> 717-771-9212	Custo	i <u>mer EMail</u> all@gannett.com
<u>Tear Sheets</u> 0	<u>Affidavits</u> 1	Blind Box	5		
Invoice Text		<u>Ad Order N</u>	otes		
Gross Amount \$255.40			Payment Method	Payment Amount \$0.00	
<u>Ad Number</u> 0001717752-01	<u>Ad Type</u> Legal Liner	<u>Ad Size</u> : 2.0 X 23 Li	<u>Productio</u> AdBooker	n Method Production No	<u>ites</u>
Product Information	<u> 471-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-</u>	<u>Placement/Classi</u>	lication	Run Dates	<u># Inserts</u>
YNC Daily Record	:	Public Notices		3/25/2018, 3/28/2018	2
YNC Online::		Public Notices		3/25/2018, 3/28/2018	2

WYSIWYG Content

PUBLIC HEARING York County Human Services Division

York County Human Services Division Public Notice is hereby given that the York County Human Services Division will hold a public meeting regarding funding plans for Fis-cal Year 2018-2019. The meeting will be held on April 3, 2018 at 3:00 pm at 300 East 7th Avenue, York, PA. The presentation will in-clude the following County of York depart-ments: Human Services, HealthCholeea, Of-fice of Children, Youth and Families, Mental Health/Intellectual & Developmental Disabili-ties, Early Intervention, Drug & Alcohol Com-mission and Area Agency on Aging. A draft of the 2018-2019 Coordinated Human Services Plan will be available for review. Note: A final review of the Coordinated Human Services Plan will occur at the Commissioners Meeting on May 2, 2018 at 10:00 a.m. at 28 East Market St, York, PA.

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Attachment B



			Orde	r Confirmation		
<u>Ad Order Number</u> 0001717761	<u>Cust</u> YOR	<u>omer</u> K COUNTY PURCH	ASING	<u>Payor Customer</u> YORK COUNTY PU	PO Nu JRCHASING 127269	
<u>Sales Rep.</u> kahrens	<u>Cust</u> 1024	omer Account 15		<u>Payor Account</u> 102415	Ordere	<u>ad By</u>
<u>Order Taker</u> kahrens	28 E	<u>omer Address</u> MARKET STREET,2	ND FLOOF	<u>Payor Address</u> 28 E MARKET STR	EET,2ND FLOOR	<u>ner Fax</u>
	Cust	K PA 17401 USA <u>omer Phone</u> 771-9212		YORK PA 17401 US <u>Payor Phone</u> 717-771-9212	Custor	<u>ner EMail</u> I@gannelt.com
<u>Tear Sheets</u> 0	<u>Affidavits</u> 1		<u>Blind Box</u>			
Invoice Text		•	Ad Order Nol	tes		
<u>Gross Amount</u> \$118.32				<u>Payment Method</u>	<u>Payment Amount</u> \$0.00	
<u>Ad Number</u> 0001717761-01	<u>Ad Type</u> Legal Liner	<u>Ad Size</u> : 2.0 X 23 Li		<u>Production</u> AdBooker	Method Production Not	<u>es</u>
Product Information		<u>Placen</u>	ent/Classific	ation	<u>Run Dates</u>	<u># Inserts</u>
HAN Evening Sun:	:	Public	Notices		3/25/2018, 3/27/2018	2
HAN Online::		Public	Notices		3/25/2018, 3/27/2018	2

WYSIWYG Content

PUBLIC HEARING York County Human Services Division

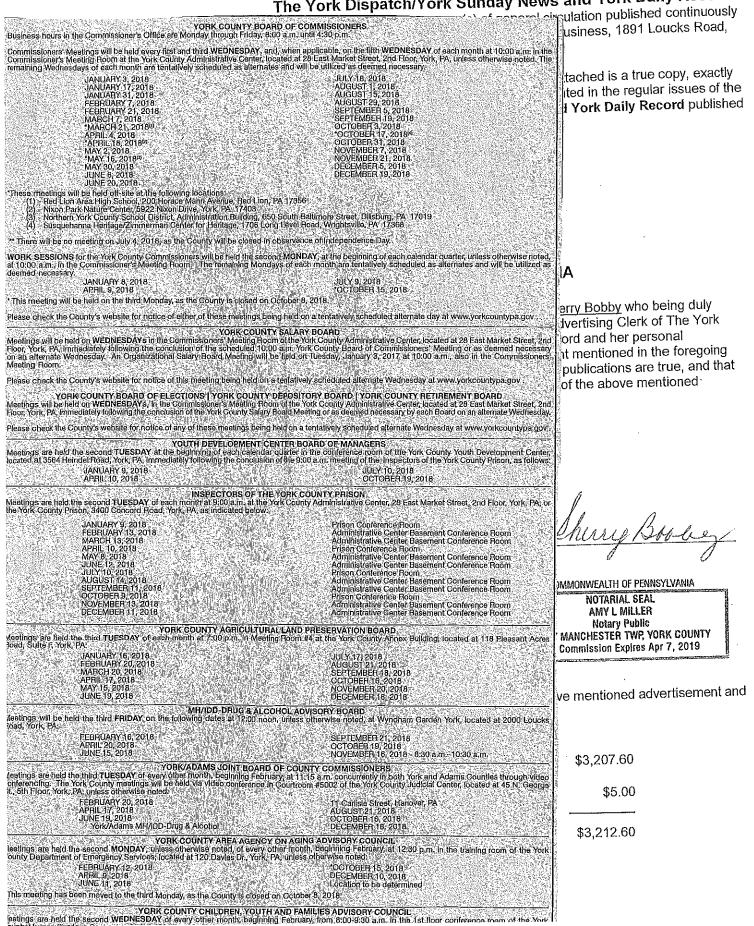
York County Human Services Division Public Notice is hereby given that the York County Human Services Division will hold a public meeting regarding tunding plans for Fis-cal Year 2018-2019. The meeting will be held on April 3, 2018 at 3:00 pm at 300 East 7th Avenue, York, PA. The presentation will in-clude the following County of York depart-ments: Human Services, HealthChoices, Of-fice of Children, Youth and Families, Mental Health/Intellectual & Developmental Disabili-ties, Early Intervention, Drug & Alcohol Com-mission and Area Agency on Aging. A draft of the 2018-2019 Coordinated Human Services Plan will be available for review. Note: A final review of the Coordinated Human Services Plan will occur at the Commissioners Meeting on May 2, 2018 at 10:00 a.m. at 28 East Market St., York, PA.

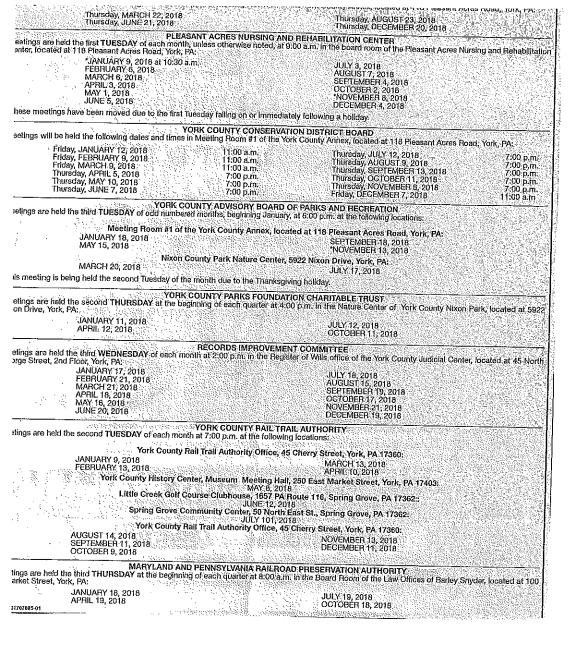
Attachment C

Proof of Publication State of Pennsylvania

AD # 0001707085-01

The York Dispatch/York Sunday News and York Daily Record





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York County Job Description

Job Title: Executive Director Human Services

Full time 🖾 🛛 Part time 🔲

Hours per week: 40

Department No: 25

Revision Date: 5/19/17

Hours of Work: 8:00 – 4:30- Other hours As needed

Department Name: Human Services

Shift: Day

Reports to (title only): County Administrator

			 · · · · · · · · · · · · · · · · · · ·
To be completed	by the Human Re	sources Department;	
FLSA Status:	Exempt	Non-Exempt	
Classification:	-		
Grade Level:			

Please complete the following to ensure that the essential functions and requirements are accurate, clear and consistent with the needs of the position.

POSITION SUMMARY

This employee is a Divisional Level Director and shall have the authority to receive and allocate those County Human Services funds, which have been assigned by County Commissioners, consistent with Federal, State and Local mandates, and shall supervise the overall operation of the County Human Services System.

ESSENTIAL REQUIREMENTS

- Degree in Human Service-related field of at least Masters level, or ten(10) or more years in Human Service Delivery at an administrative level.
- Demonstrate administrative ability; at least five (5) years administrative experience in Human Service Agency
- Demonstrable leadership abilities.
- · Demonstrate ability to work effectively with all segments of the community.
- Demonstrate a high level of communication skills; to include verbal and written skills and data
 processing knowledge.
- Demonstrate the ability to coordinate and implement both tactical and strategic plans.
- Demonstrate the ability to evaluate program effectiveness and communicate results to Commissioners, Advisory Councils and Public.

ESSENTIAL DUTIES AND RESPONSIBILITIES

- Serve as major policy advisor to the Board of Commissioners to facilitate decision-making in the area of Human Service to provide staffing that assures effectiveness.
- Advise County Commissioners of Human Service program requirements and alternative funding sources based on grant application guidelines, government regulations and legislation.
- Recommend program modifications to the County Commissioners in client service delivery, organizational structure, administration and fiscal matters to ensure provision of mandated services and avoid cost duplication of effort.
- Undertake special assignments and projects or other job related duties.
- Provide Commissioners with monthly reports through County staff.
- Secure and coordinates Federal and State funding based upon joint planning by the agencies and the Commissioners.
- Coordinate planning for Human Service delivery with all interested agencies, their boards and the general public.
- Provide consultative services to the County Categorical Program Directors leading to efficiency and economy of operations in program management and administrative matters as needed or directed by the Board of County Commissioners.
- Coordinate the analysis, collection, abstraction and publication of pertinent Federal and State regulations and/or request for proposals.
- ٠
- Coordinate planning for Human Service Delivery with all interest agencies, their boards and the general public.
- Develop and implement the Block Grant plan and coordinate efforts to integrate planning, data collection and client services planning.
- Provide information on a timely basis to citizens of the County concerning available Human Services and the appropriate process for alleviation of need, both through news media and public appearances.
- Coordinate the analysis, collection, abstraction and publication of pertinent Federal and State regulations and/or request for proposals.
- Oversee departmental budget
- Facilitate cross systems communication and initialitives
- Oversee Human Services Directors, Asst Human Services Director, Bridges to Health Coordinator
 and System and Community Coordinator

ESSENTIAL PHYSICAL AND MENTAL JOB REQUIREMENTS

Please check those items that apply to the *essential job functions* of the job title listed above. Each category must be completed.

1. Following Directions

- Full Understanding of Both Written and Verbal Instructions Required
- Understanding of Verbal Instructions Only Required
- Understanding of Written Instructions Only Required

2. Communication - English

- Excellent Verbal Communication Skills Necessary
- **Basic Verbal Communication Skills Necessary**
- Limited or No Verbal Communication Skills Necessary

3. Functional Reading - English

- Fluent Reading Recognition of Signs/Symbols
- Simple Reading
- No Reading Skills Required

4. Hearing

- Ability to Hear Required
- Limited Hearing
- Hearing Not Required

5. Seeing

- ☑ 20/20 Vision with Corrective Eyewear
- Limited Vision
- Vision Not Required

6. Functional Math

- Complex Computational Skills (Accounting and Financial Skills)
- Simple Computational Skills (Add, Subtract, Multiply, Divide, Percents)
- No Mathematical Skills Needed
- 7, Time
 - Must Tell Time to the Minute
 - Must Recognize Specific Times (Arrival, Departure, Breaks, Lunch)

8. Orientation (Familiarity with Surroundings)

- Several Blocks From Building
- **Building Only**
- Work Area
- Room Only

9. Mobility Skills

- Mobility Within the Building
- Mobility Within a Four-Block Radius
- 🛛 Driving Required

10. Sitting

- 11. Standing
 - 75% 100%
 - **50% 75%**
 - 🔀 25% 50%
 - Less than 25%
- 12. Bending
 - Knees and Waist
 Waist Only
 Knees Only
 No Bending Required
- 13. Lifting
 - $\Box Greater than 30 lbs.$ $\Box 10 30 lbs.$
 - Less than 10 lbs.
 - No Lifting Required
- 14. Reaching
 - ☐ Greater than 6 Feet
 △ 2 6 Feet
 ☐ Less than 2 Feet
 ☐ Reaching Required
- These statements are intended to describe the nature and level of work being performed by people assigned to this position. They are not intended to be an exhaustive list of all responsibilities and duties required of the job incumbents.

Job Title: Assistant Director Human Services Full time 🛛 Part time 🗌 Hours of Work: 8:00-4:30 Hours per week: 40 Shift: Day **Department No: 25** Reports to (title only): Executive Director Human Services To be completed by the Human Resources Department: FLSA Status: Exempt Non-Exempt Classification: Grade Level:

POSITION SUMMARY

This administrative position is directly involved in the administration, planning and coordination of programs under the auspices of the York County Human Services Department and has overall responsibility for the operations of the Department in the absence of the Executive Director.

ESSENTIAL REQUIREMENTS

- Degree in Human Service-related field of at least Masters level, or five (5) or more years in Human Service Delivery at an administrative level.
- The ability for comprehensive planning and fiscal/data analysis.
- The ability to design and implement needs assessments, evaluations and monitor plans.
- Knowledge of the principles and practices of Public Administration and Human Services.
- The ability to supervise administrative personnel.
- Must have general knowledge of the principles and practices of governmental accounting,
- Proficiency is required in preparation, review and analysis of fiscal and statistical reports.
- Must possess the ability to make independent decisions when circumstances warrant such actions,
- Must possess the ability to deal tactfully with departmental personnel, government agencies/personnel and the general public.
- Must posses the ability to prepare comprehensive reports and communicate effectively both, orally and in writing.
- Must have the ability to evaluate staff and program effectiveness.
- Must have the ability to provide leadership and establish and maintain effective working relationship with staff members, other agencies, institutions and the general public.
- Must have skills and abilities with desktop publishing.
- Child welfare, FBI, State Police Clearances required. Exclusion screening must be passed.

Revision Date: 05/23/17

Department Name: Human Services

- Supervise administration of all assigned grants as designated.
- Supervise the monitoring and evaluation of programs operated under the auspices of the department.
- Work collaboratively with human services division directors to provide management direction for implementation of the department's programs and projects
- Lead human services division-wide initiatives such as the block grant planning process and the fiscal
 officers work group
- Lead the request for proposal and contract negotiation process for the department.
- Prepare, monitor, and analyze budget for department
- Design and implement applied evaluation projects as they relate to plan performance, budget administration, cost analysis, service delivery patterns and/or service utilization review.
- Assist in the development of budgets and new funding applications.
- Design and implement appropriate needs assessment for target groups and/or problems.
- Analyze data regarding existing Human Services need for services, gaps and/or duplications in service.
- · Conduct fiscal compliance reviews including risk assessment on all contracted providers
- Develop and coordinate appropriate planning documents.
- Design and prepare reports to facilitate decisions making. Review and evaluate proposals for other programs.
- Preside over consumer appeals when services have been reduced, denied, or terminated. Represent the department in appeals that advance to the state level.
- Manage human services practicum and other student career exploration activities.
- Participate as a member of appropriate local/state/regional committees with respect to program development, evaluation and/or research.
- Provide technical assistance to departments within the Human Services Division in the areas of needs assessments, planning and/or grant writing.
- Coordinate client/service information gathering.
- Coordinate joint program development with various sectors of the community including governmental, private and/or education.
- Represent the department on Human Services issues.
- Supervise additional personnel as designated.
- Facilitate interdepartmental meetings.
- Other reasonable duties as assigned by Supervisor.

Please check those items that apply to the essential job functions of the job title listed above. Each category must be completed.

1. Following Directions

- Full Understanding of Both Written and Verbal Instructions Required
- Understanding of Verbal Instructions Only Required
- Understanding of Written Instructions Only Required

2. Communication - English

- Excellent Verbal Communication Skills Necessary
- Basic Verbal Communication Skills Necessary
- \square Limited or No Verbal Communication Skills Necessary

3. Functional Reading - English

- Fluent Reading Recognition of Signs/Symbols Simple Reading
- No Reading Skills Required

4. Hearing

- Ability to Hear Required
- Limited Hearing
- Hearing Not Required

5. Seeing

- 20/20 Vision with Corrective Eyewear
- Limited Vision
- Vision Not Required

6. Functional Math

- Complex Computational Skills (Accounting and Financial Skills)
- Simple Computational Skills (Add, Subtract, Multiply, Divide, Percents)
- Simple Counting Skills
- No Mathematical Skills Needed
- 7. Time
 - Must Tell Time to the Minute
 - Must Recognize Specific Times (Arrival, Departure, Breaks, Lunch)

8. Orientation (Familiarity with Surroundings)

- Several Blocks From Building
- Building Only
- Work Area
- Room Only
- 9. Mobility Skills
 - Mobility Within the Building
 - Mobility Within a Four-Block Radius
 - Driving Required

10. Sitting

375% - 100% 50% - 75% 25% - 50% 4xLess than 25%

11. Standing

75% - 100%	
🔲 50% - 75%	
🗌 25% - 50%	
Less than 25%	6

12. Bending

Knees and Waist
Waist Only
Knees Only
No Bending Required

13. Lifting

Greater than 30 lbs.
I0 - 30 lbs.
Less than 10 lbs.
No Lifting Required

14. Reaching

Greater than 6 Feet 2 - 6 Feet Less than 2 Feet Reaching Required

These statements are intended to describe the nature and level of work being performed by people assigned to this position. They are not intended to be an exhaustive list of all responsibilities and duties required of the job incumbents.

Job Title: Community Mobilizer

Full time 🛛 Part time 🔲

Hours per week: 40

Hours of Work: 40

Date: TBD

Shift: Day-other hours as needed

Department No: 35

Department Name: Human Services

Reports to: Executive Director, York County Human Services

-	To be completed by the Human Resources Department:
	FLSA Status: Exempt Non-Exempt
	Classification:
	Grade Level:

Please complete the following to ensure that the essential functions and requirements are accurate, clear and consistent with the needs of the position.

POSITION SUMMARY

A brief description that summarizes the overall purpose and objective of the position and the results that are expected.

This position is responsible for coordinating and supporting the work of the Communities of Hope initiative. The goal of the initiative is to work with and empower families and communities to make decisions to improve their life outcomes; improve utilization of data to drive decision making and improve capacity to support most vulnerable residents; leverage resources more effectively to better support services that lead to sustainable change; and improve partnerships with the business, faith-based, and philanthropic communities to forge effective relations that can foster long-lasting improvements in the lives of children and families.

ESSENTIAL REQUIREMENTS

Requirements are representative of minimum experience, training, knowledge, skills and abilities.

- A minimum of a bachelor's degree in a human services related field
- Three years experience in the human services field
- Ability to communicate proficiently verbally and through written means
- Must possess good problem solving abilities
- Travel will be required including the possibility of limited overnight travel
- Must have the ability to work independently at a setting away from supervisory staff
- Must have the ability to think analytically
- State Police Clearance, Child Abuse Clearance, FBI Clearance and compliance with MA bulletin 99-11-05 required

- Ability to manage and administer= program resources, facilitate boards, manage groups and committees, identify goals and tasks, achieve successful outcomes, and develop networks within and between public and private sector systems.
- Possesses skills such as interviewing, assessment, group facilitating, delegating, networking, collaborating, providing technical assistance and accessing resources at the community, private, and government levels.
- Understands, values, and has the ability to practice and lead from a coordinated systems approach to working with community members to identify risk and protective factors.
- Ability to engage individuals and groups of varying functional levels
- Ability to understand and prepare grant applications, concept papers, and requests for proposals as needed.
- Ability to understand and form relationships with strategic partners, ie: government, schools, non-profits, business community, faith community, and other community and state collaborative initiatives.
- Experience in project management and or strategic planning including: developing and evaluating program outcomes, data analysis, evaluation, operations, and marketing.
- Collects as shares data as needed
- Attends comprehensive training through the county human services department and other training as required
- Ability to communicate and write effectively in Spanish.

Please check those items that apply to the *essential job functions* of the job title listed above. Each category must be completed.

- 1. Following Directions
 - Full Understanding of Both Written and Verbal Instructions Required
 - Understanding of Verbal Instructions Only Required
 - Understanding of Written Instructions Only Required
- 2. Communication English
 - Excellent Verbal Communication Skills Necessary
 - Basic Verbal Communication Skills Necessary
 - Limited or No Verbal Communication Skills Necessary
- 3. Functional Reading English
 - 🛛 Fluent Reading
 - Recognition of Signs/Symbols
 - Simple Reading
 - No Reading Skills Required
- 4. Hearing
 - Ability to Hear Required
 - Limited Hearing
 - Hearing Not Required
- 5. Seeing
 - 20/20 Vision with Corrective Eyewear
 - Limited Vision
 - Vision Not Required
- 6. Functional Math
 - Complex Computational Skills (Accounting and Financial Skills)
 - Simple Computational Skills (Add, Subtract, Multiply, Divide, Percents)
 - Simple Counting Skills
 - No Mathematical Skills Needed
- 7. Time
 - Must Tell Time to the Minute
 - Must Recognize Specific Times (Arrival, Departure, Breaks, Lunch)
- 8. Orientation (Familiarity with Surroundings)
 - Several Blocks From Building
 - **Building Only**
 - Work Area
 - Room Only
- 9. Mobility Skills
 - Mobility Within the Building
 - Mobility Within a Four-Block Radius
 - Driving Required

- 10. Sitting
 - ☐ 75% 100% **50% - 75%** ☑ 25% - 50%
 - Less than 25%
- 11. Standing
 - ☐ 75% 100% ☐ 50% 75% ⊠ 25% 50%
 - Less than 25%
- 12. Bending
 - Knees and Waist Waist Only Knees Only No Bending Required
- 13. Lifting
 - \Box Greater than 30 lbs. \boxtimes 10 30 lbs. Less than 10 lbs. No Lifting Required
- 14. Reaching
 - Greater than 6 Feet Less than 2 Feet Reaching Required

These statements are intended to describe the nature and level of work being performed by people assigned to this position. They are not intended to be an exhaustive list of all responsibilities and duties required of the job incumbents.

Job Title: Administrative Assistant

Full time 🛛 Part time 🗌

Hours per week: 40

Department No: 25

Revision Date: 4/26/16

Hours of Work: 8:00-4:30

Shift: Day

Department Name: Human Services

Reports to (title only): Assistant Director Human Services

To be completed b	y the Human R	esources Department:	
FLSA Status:	Exempt	Non-Exempt	
Classification:			
Grade Level:			

Please complete the following to ensure that the essential functions and requirements are accurate, clear and consistent with the needs of the position.

POSITION SUMMARY

Responsible for planning a wide variety of staff assignments, many of which have significant effect on departmental policies as designated by the Human Services Director. Work includes department communications in writing with governmental and non-governmental organizations, analyzing administrative office tasks, developing and monitoring work projects and procedures, conducting semi-independent work projects and performing various public relations and liaison duties. Assignments must be carried out with considerable initiative and independence. The ability to maintain a high degree of confidentiality is required. Work is reviewed through direct supervision and through subsequent evaluation of assignment results by the Human Services Director.

ESSENTIAL REQUIREMENTS

- Five years of experience as an Administrative Assistant to an executive officer or management staff in a medium to large organization and such training as may have been acquired from graduation from an appropriate business college or any other combination of relevant training.
- Requires strong organizational skill and professional office abilities including oral and written communication skills, and general computer literacy.
- Must possess the ability to interface with community and related bodies for the purpose of
 recording minutes or other vital data, and to finalize it for distribution as part of the official record.
- Ability to carry out staff assignments requiring the organization of materials and the development of procedures without direct supervision.
- Ability to develop sound office procedures based on operational needs and analysis.
- Ability to establish and maintain effective working relationship with administrative personnel, County officials, community groups, and the public.

- Provide staff assistance to the Director of Human Services and other administrative office personnel as needed.
- Establish and maintain cooperative relationships with all government agencies, county programs and providers, office of Board of Commissioners and others who have interface with the Department of Human Services.
- Maintain and process confidential information, including written and verbal, in a professional manner and according to standard office procedure.
- Analyze and implement Human Services divisional operational procedures as appropriate.
- Assist in developing department administrative polices.
- Answer incoming telephone calls on a multi-line phone system, direct calls to appropriate staff, take, and transmit accurate messages when staff is not available.
- Courteously greet all persons calling or visiting the office, providing information/referral or guidance as appropriate.
- Review and proofread materials initiated by self and others to ensure typographical, grammatical and syntax accuracy; organize layout of documents utilizing fonts and other features as appropriate to increase document readability and visual appearance.
- Maintains records, contractual files, and coordinate storage of archived materials;
- Develop files on reports, studies, and special projects.
- Compose draft correspondence and documents as required.
- Process and track invoices
- Prepare, send, receive, and document communications via fax and e-mail.
- Search the Internet for information as required by Human Services Director.
- Receive and document accurately all incoming and outgoing correspondence.
- Schedule and arrange meetings, conferences, public appearances, telephone conferences, interviews, and appointments. Notify proper personnel, reserve meeting facilities, arrange for refreshments and equipment, prepare documents and material for attendees.
- Schedule and coordinate travel.
- Keep accurate record of appointments of assigned staff, place calls as requested, receive and scrutinize contacts made by telephone or in person.
- · Review contracts and other legal documents for sufficiency.
- Perform duties of an appointed notary of Pennsylvania.
- Review Federal Register and Pennsylvania Bulletin for legislative and regulatory proposals of
 potential interest to the Human Services Division.
- Prepare agendas, minutes, and records and prepare appropriate reports and correspondence for edit by the Director of Human Services for governmental or non-governmental organizations as required.
- Attend meetings as requested by the Human Services Director and provide reports on those activities.
- Attend trainings and support activities, which increase ability to perform in areas of responsibility.
- Perform all related clerical functions including but not limited to: dictation, typing, word
 processing, duplicating, collating/organizing materials; filing, telephone communications, etc.
- Coordinate maintenance and repair of office equipment and furniture as necessary.
- Participates as a team member with other support staff, provides back-up in their absence (i.e., lunches, meeting, vacation-sick days, etc.).
- Other reasonable duties as assigned by Supervisor.

Please check those items that apply to the *essential job functions* of the job title listed above. Each category must be completed.

1. Following Directions

- Full Understanding of Both Written and Verbal Instructions Required
- Understanding of Verbal Instructions Only Required
- Understanding of Written Instructions Only Required

2. Communication - English

- Excellent Verbal Communication Skills Necessary
- Basic Verbal Communication Skills Necessary
- Limited or No Verbal Communication Skills Necessary

3. Functional Reading - English

- Fluent Reading
- Recognition of Signs/Symbols
- Simple Reading
- No Reading Skills Required

4. Hearing

- Ability to Hear Required
- Limited Hearing
- Hearing Not Required

5. Seeing

- ☑ 20/20 Vision with Corrective Eyewear
- Limited Vision
- Vision Not Required

6. Functional Math

- Complex Computational Skills (Accounting and Financial Skills)
- Simple Computational Skills (Add, Subtract, Multiply, Divide, Percents)
- Simple Counting Skills
- No Mathematical Skills Needed
- 7, Time
 - Must Tell Time to the Minute
 - Must Recognize Specific Times (Arrival, Departure, Breaks, Lunch)

8. Orientation (Familiarity with Surroundings)

- Several Blocks From Building
- Building Only
- Work Area
- Room Only

9. Mobility Skills

- Mobility Within the Building
- Mobility Within a Four-Block Radius
- Driving Required

10. Sitting

∑ 75% - 100%
∑ 50% - 75%
∑ 25% - 50%

Less than 25%

11. Standing

☐ 75% - 100% ☐ 50% - 75% ☐ 25% - 50%

🔀 Less than 25%

12. Bending

Knees and Waist Waist Only Knees Only No Bending Required

13. Lifting

Greater than 30 lbs. 10 - 30 lbs. Less than 10 lbs. No Lifting Required

14. Reaching

☐ Greater than 6 Feet
≥ - 6 Feet
☐ Less than 2 Feet
☐ Reaching Required

These statements are intended to describe the nature and level of work being performed by people assigned to this position. They are not intended to be an exhaustive list of all responsibilities and duties required of the job incumbents.

Job Title: Data Analyst & GIS Administrator	Revision Date: 10/12/17
Full time 🖾 Part time 🗌	Hours of Work: 8:00 – 4:30
Hours per week: 40	Shift: Day
Department No: 25	Department Name: Human Services
Reports to (title only): Executive Director Human Services	
To be completed by the Human Resources Department: FLSA Status:	

Please complete the following to ensure that the essential functions and requirements are accurate, clear and consistent with the needs of the position.

POSITION SUMMARY

This Administrative position would provide data support to the Human Services Department as well as the Division. Because having and understanding data is elemental to planning, prioritizing and measuring outcomes, this position will provide the department with the tools needed to make informed decisions. Data gathering, analysis, mapping and working with social media will be requirements of the position.

ESSENTIAL REQUIREMENTS

- 3+ years of experience performing related work in the field of large GIS integration projects or other relevant fields of work
- Experience with the administration, configuration, deployment and maintenance of enterprise GIS technologies such as ESRI's ArcGIS Server, ArcGIS Online, Portal for ArcGIS and ESRI Enterprise Geodatabases.
- Knowledge and understanding of GIS/GPS principles, databases, cartographic, geographic, statistical and mathematical theory sufficient to perform geographic analyses is required.
- Bachelor's Degree in GIS, Computer Science, Remote Sensing, Geography, or a closely related field with Geographic Information System (GIS) coursework is required.
- Certification as Geographic Information System Professional (GISP) is preferred.
- Customization, automation and scripting skills (JavaScript, Python, ArcPy, etc.)
- Experience with commercial, industry-standard software for GIS and imagery analysis.
- Ability to manage comprehensive IT or GIS integration project
- Experienced in Microsoft Office Products
- Experience with Social Media and Social Marketing
- Experienced in Crystal Reports, including creation of new reports and queries of databases

- Communicate with diverse audiences through verbal, written and graphic means.
- Leadership in: identifying potential data administration, and management of projects, for GIS capabilities; engaging others in designing projects; developing work plans and outcomes, including tasks and goal dates; meeting goals and customer needs.
- Develop and design projects, identify data sources, develop work plans / outcomes, and subsequently to manage and implement multiple projects simultaneously.
- Search and locate data that is relevant to each specific project, and will organize and integrate selective data into each project. Data includes, but is not limited to: Department Consumer data, fiscal data, service data, road centerline data, Municipal County State Federal data, road data, street address data, census data, poverty data, service delivery data, etc.
- Present ideas effectively both verbally and in writing, to analyze complex problems, to be highly accurate and to formulate sound conclusions.
- Maintain confidential computer and written records and correspondence.
- Find and obtain data and manages data for effective use in projects.
- Develop charts, graphs, maps and comprehensive reports for customer documentation.
- Make additions, changes, and deletions to the databases as needed.
- Create and maintain databases for each specific project.
- Develop and oversee social media campaigns
- Oversee website activities including design and posting of relevant information
- Adhere to County policy standards, including required background checks.
- Handle very sensitive and highly confidential data, disclosure of which is protected by law and could result in legal action.
- Maintain knowledge of the County, State, and National data and GIS resources, including geographical, street, township / municipality and other applicable subdivisions.
- Can create GIS and GIS related documents that meet the unique needs of each Customer.
- The Administrator will represent the Human Services Division on various projects and support several grants. May chair committees.
- Maintain extremely high level of accuracy in utilizing and interpreting data, inaccuracy could result in significant negative impact to County and others.
- Perform other reasonable duties as assigned by Supervisor.

Please check those items that apply to the *essential job functions* of the job title listed above. Each category **must** be completed.

1. Following Directions

- Full Understanding of Both Written and Verbal Instructions Required
- Understanding of Verbal Instructions Only Required
- Understanding of Written Instructions Only Required

2. Communication - English

- Excellent Verbal Communication Skills Necessary
- Basic Verbal Communication Skills Necessary
- Limited or No Verbal Communication Skills Necessary

3. Functional Reading - English

- Fluent Reading
- Recognition of Signs/Symbols
- Simple Reading
- No Reading Skills Required

4. Hearing

- Ability to Hear Required
- Limited Hearing
- Hearing Not Required

5. Seeing

- 20/20 Vision with Corrective Eyewear
- Limited Vision
- Vision Not Required

6. Functional Math

- Complex Computational Skills (Accounting and Financial Skills)
- Simple Computational Skills (Add, Subtract, Multiply, Divide, Percents)
- Simple Counting Skills
- No Mathematical Skills Needed

7. Time

- Must Tell Time to the Minute
- Must Recognize Specific Times (Arrival, Departure, Breaks, Lunch)

8. Orientation (Familiarity with Surroundings)

- Several Blocks From Building
- Building Only
- Work Area
- Room Only

9. Mobility Skills

- Mobility Within the Building
- Mobility Within a Four-Block Radius
- Driving Required

10. Sitting

☐ 75% - 100% ⊠ 50% - 75% ☐ 25% - 50%

Less than 25%

11. Standing

☐ 75% - 100% ☐ 50% - 75% ⊠ 25% - 50% ☐ Less than 25%

12. Bending

Knees and Waist
 Waist Only
 Knees Only
 No Bending Required

13. Lifting

☐ Greater than 30 lbs.
☑ 10 - 30 lbs.
☐ Less than 10 lbs.
☐ No Lifting Required

14. Reaching

☐ Greater than 6 Feet ☐ 2 - 6 Feet ☐ Less than 2 Feet ☐ Reaching Required

These statements are intended to describe the nature and level of work being performed by people assigned to this position. They are not intended to be an exhaustive list of all responsibilities and duties required of the job incumbents.

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

County:	1.	2.	3.	4.	5.	6.
York	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	2		\$ 12,186	\$ 2,814	\$-	\$-
Administrative Management	1,670	1	\$ 821,424	\$ 189,684	\$ 99,765	\$-
Administrator's Office			\$ 808,783	\$ 186,872	\$ 49,595	\$-
Adult Developmental Training	-	1	\$-	\$-	\$-	\$-
Children's Evidence-Based Practices	-	1	\$-	\$-	\$-	\$-
Children's Psychosocial Rehabilitation	-		\$-	\$-	\$ -	\$-
Community Employment	36	1	\$ 25,113	\$ 5,798	\$ 3,200	\$-
Community Residential Services	160	1	\$ 5,492,820	\$ 1,044,853	\$ 35,519	\$-
Community Services	1,300	1	\$ 235,383	\$ 54,355	\$-	\$-
Consumer-Driven Services	-]	\$ -	\$ -	\$ -	\$ -
Emergency Services	10,755	1	\$ 883,186	\$ 203,946	\$ 99,894	\$-
Facility Based Vocational Rehabilitation	80	1	\$ 259,397	\$ 59,900	\$ 30,758	\$ -
Family Based Mental Health Services	-		\$ -	\$-	\$-	\$-
Family Support Services	30	1	\$ 127,824	\$ 29,518	\$ 2,800	\$ -
Housing Support Services	165	1	\$ 1,687,489	\$ 439,903	\$ 22,331	
Mental Health Crisis Intervention	-	1	\$ -	\$ -	\$ -	\$-
Other	-	1	\$ -	\$ -	\$ -	\$ -
Outpatient	730	1	\$ 725,767	\$ 161,128	\$ 27,240	\$ -
Partial Hospitalization	24		\$ 28,435	\$ 6,566	\$ -	\$ -
Peer Support Services	-	1	\$ -	\$ -	\$ -	\$ -
Psychiatric Inpatient Hospitalization	8	1	\$ 25,022	\$ 5,778	\$ -	\$ -
Psychiatric Rehabilitation	25		\$ 82,459	\$ 19,041	\$ -	\$ -
Social Rehabilitation Services	275		\$ 589,932	\$ 136,228	\$ 18,752	\$ -
Targeted Case Management	1,210		\$ 1,256,446	\$ 290,139	\$ -	\$ -
Transitional and Community Integration	-		\$ -	\$-	\$-	\$-
TOTAL MENTAL HEALTH SERVICES	16,470	\$ 13,061,666	\$ 13,061,666	\$ 2,836,523	\$ 389.854	\$ -
		-,,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , , ,	\$ 316,809	HSBG Match
					\$ 73,045	Joinder County Match
INTELLECTUAL DISABILITIES SERVICES			1.			
Administrator's Office		-	\$ 821,470	, ,	\$ 70,618	
Case Management	685	-	\$ 544,879	· · · · ·		'
Community-Based Services	726	-	\$ 1,299,810	,		
Community Residential Services	7		\$ 478,869	\$ 110,584	\$ 35,239	\$-
Other						
TOTAL INTELLECTUAL DISABILITIES SERVICES	1,418	\$ 3,145,028	\$ 3,145,028	\$ 726,255	\$ 325,076	\$ -
					\$ 271,437	HSBG Match
					\$ 53,639	Joinder County Match

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

County:	1.	2.	3.	4.	5.	6.
York	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	100		\$ 289,108			
Case Management]		
Rental Assistance	300		\$ 81,459]		
Emergency Shelter	630		\$ 207,865]		
Other Housing Supports]		
Administration			\$ 80,000			
TOTAL HOMELESS ASSISTANCE SERVICES	1,030	\$ 877,388	\$ 658,432		\$-	\$-

SUBSTANCE USE DISORDER SERVICES

Case/Care Management						
Inpatient Hospital						
Inpatient Non-Hospital	617		\$ 541,789		\$ 5,608	
Medication Assisted Therapy						
Other Intervention						
Outpatient/Intensive Outpatient						
Partial Hospitalization						
Prevention						
Recovery Support Services						
Administration						
TOTAL SUBSTANCE USE DISORDER SERVICES	617	\$ 541,789	\$ 541,789	\$ -	\$ 5,608	\$-

HUMAN SERVICES DEVELOPMENT FUND

Adult Services	1		\$ 4,000		
Aging Services					
Children and Youth Services					
Generic Services	22,000		\$ 363,656		
Specialized Services					
Interagency Coordination			\$ 105,983		
Administration			\$ 28,298		
TOTAL HUMAN SERVICES DEVELOPMENT FUND	22,001	\$ 282,981	\$ 501,937	\$-	\$-

GRAND TOTAL	41,536	\$ 17,908,852	\$ 17,908,85	2 \$ 3,562,778	\$ 720,538	\$ -
					\$ 593,854	HSBG Match Grand TL
					\$ 126,684	Joinder Co. Match Grand TL