Pennsylvania Olmstead Plan

Cameron-Elk Behavioral and Developmental Program

November 1, 2016

May 4, 2017

I. OLMSTEAD PLANNING PROCESS:

At the present time, Cameron-Elk Behavioral and Developmental Program’s (CE) census at Warren State Hospital is “zero”, with our last individual being discharged in September of this year.

Since FY 13/14, 4 individuals have been discharged from Warren State Hospital under the CHIPP initiative. All 4 are living successfully in the community. Three have had no inpatient hospitalizations since their discharge and one has had one hospitalization. With their individual plans, each has broken through barriers that at one point caused them their long term stay. It has been enlightening to see each one of them grow in their own Recovery.

In addition, since that time, there have been only 2 admissions. Both have been discharged and are living independently. CE has always been committed to actively diverting individuals from admissions to community inpatient units, as well as, any long term stay. CHIPP dollars have made it possible to continue developing supports that will ensure community services are readily available.

Input from Provider agencies, Community Support Program (CSP) monthly meetings, family members, local and regional Housing Groups, as well as, additional Stakeholders, occurs regularly to ensure each individual has their own Recovery Oriented Plan. Collaboration occurs on a daily basis with close monitoring and support from CE regarding admissions of individuals that may be at risk.

II. SERVICES TO BE DEVELOPED:

a) Prevention and Early Intervention is instrumental in diverting individuals from inpatient and long term hospitalization, as well as, the criminal justice system. Dickinson Center, Inc. Crisis staff have participated in several Crisis trainings which has included Crisis Intervention Team (CIT). Although there is not a team in place, this training has promoted collaborative efforts to create more positive interactions with individuals, their families and the community to reduce the stigma of mental illness. Looking ahead, CE
will further discuss supporting a local CIT training reaching out to “first responders” in an effort to form more effective partnerships between the law enforcement, mental health and advocacy communities. The target for this training is the beginning of FY 17/18.

CE connects with Mental Health Delegates on an ongoing basis. In addition, monthly meetings occur to receive feedback regarding possible concerns, as well as, changes being made to improve the system.

The Center for Community Resources, Inc (CCR) administers Mental Health Crisis hotline services for Cameron-Elk. They provide a rapid response to crisis situations which threaten the well being of individuals or others. The delivery of service is based on the recovery model, Child and Adolescent Service System Program (CASSP) Principles and National CSP Principles. The services include:

- Triage of calls and appropriate referrals to community resources.
- Conduct risk assessment and screening for potential for self-harm or risk of harm to others.
- Assist in facilitating voluntary and involuntary hospitalization in collaboration with mental health delegates or other crisis providers.
- Conduct follow-up phone contact with willing individuals to facilitate follow through with referred resources and seamless care delivery
- Collaborate with police, emergency medical teams, hospitals, schools and local mental health providers to provide quality care to community members.

CCR’s goal supports CE’s strive for a Recovery Oriented System by empowering and supporting individuals with a focus on their strengths, being sensitive to the cultural differences and ensuring services are provided in the least restrictive manner possible by encouraging the use of community based/natural supports. Their Philosophy, like ours, is that individuals can achieve stability and can return to a fully functioning, healthy life and find hope during their journey to recovery.

Cameron-Elk has very limited use of Residential Treatment Facilities as it has become increasingly difficult to get authorization for this level of treatment. Other services utilized to provide intensive community based treatment include Family Based Services and Community Residential Rehabilitation.
b) **Non-institutional housing options:** Cenclear Services *supportive housing residential program* offers 5 male individuals shared housing, along with recovery support services to give them the opportunity to live a more stable and productive life. Each individual has a support plan that assists them in developing the skills necessary to self-manage their own recovery, as well as, move on to independent living. The support plan may include, but is not limited to, education, employment and vocation. In addition, if a bed is available, this home has been utilized for respite situations as a diversion method. The need for a female transition home being developed with a target date of July 2018 has been discussed as a priority.

ELCAM Housing offers housing stability and independent living skills training. They offer employment opportunities through their Community Center/Workshop as well as working with ELCAM to enhance employment opportunities for competitive employment. The plan was to identify 3-5 individuals by July 2016. Currently, utilizing CHIPP dollars, there are two individuals who have begun work toward developing readiness skills for competitive employment. Moving forward, the goal is to have 4-6 identified individuals transitioned to competitive employment by January 2017.

*Master Leasing and Bridge Subsidy* model using MCO reinvestment funds has increased the availability of affordable rental units to Medical Assistance (MA) eligible individuals. Awarded Pennsylvania Housing Affordability and Rehabilitation Enhancement (PHARE) funds for Cameron-Elk have assisted in sustaining this program. To date, 6 individuals have utilized this with 3 bridging over to Section 8.

CE practices the Housing First approach when supporting the homeless population. In this rural area, it is often times difficult to find safe, affordable housing. We look at every possible alternative to get someone housed prior to connecting with services. It does need to be noted, however, that when assisting individuals working toward Recovery from a mental illness, it is necessary to connect with needed services to assist with stability and finding appropriate housing. This has shown to have a positive effect for an individual to live successfully in the community of their choice.

c) **Non-residential treatment services and Community supports:**

- Psych Rehab (site based)
- Psych Rehab (mobile)
- Community Psychiatrists Availability
- Outpatient Services
- Crisis Intervention (mobile/walk-in/telephone) and Emergency Services
- Traumatic Incident Reduction
- Multi Systemic Therapy
• Housing Support Services
• Employment Support Services
• Peer Support Services
• Vocational/Social Rehab
• Medication Management
• Drop-in-Center
• Forensic Services (in jail)

The above services are currently available to individuals that are 18 years and older and reside in Cameron and Elk Counties. Increasing the availability of these services, such as, Housing Support and Forensic services will be necessary in an effort to give individuals returning to the community enough support to make a successful transition. With the need growing, CE is in discussion with CCBH and a local provider, to be approved as a Mobile Psych Rehab provider allowing specific housing support services be approved as eligible. In addition, CE continues to look for grant opportunities that are specific to Forensic re-entry. This would open up the availability of additional CHIPP and Base funding to assist in the increase of number of individuals being served.

d) Peer Support and Peer Run Services:

Certified Peer Specialists (CPS)

• Assist incarcerated individuals as they work on their Community release plan. CE provides funding to enable a CPS to connect with an individual prior to discharge.
• Putting in place 1 CPS to serve approximately 15 individuals over the course of a Fiscal Year, to work with Generations Inpatient Geriatric Unit to address the needs of the older adult population. The target date is January, 2018. Currently individuals are given a choice of 3 agencies which provide CPS services. Overall there are 14 employed CPS’s serving 93 Cameron-Elk individuals. Of the 93, 16 are county funded.
• A strong interest in a consumer run business has been identified. This would open doors for those struggling with employment opportunities such as individuals connected to the criminal justice system. Discussions will continue on utilizing County CHIPP and Base dollars to assist with start-up costs as well as developing a plan for sustainability. There will be ongoing discussions with the CPS group as well as Stakeholders as we move forward.
• Discussion between CE and a group of Certified Peer Specialists, represented by all three providers, noted the continued challenges faced at times in performing
job duties. The primary concern is the certification training. Although it does address all of the components of the job responsibilities, it does not go into enough detail with some. It was noted that required documentation is touched on, but “it doesn’t come close to” what is required once they become employed. They are able to work through the emotional stress that sometimes is present when working with an individual, however, the required documentation is more of a difficult task. CE will support individuals having difficulty transitioning into employment through the county funded Employment Support Program. This will be ongoing and on an as-needed basis.

e) Supported Employment Services:

- Continue to work with ELCAM to enhance employment opportunities for competitive employment. The plan was to identify 3-5 individuals by July 2016. Currently, utilizing CHIPP dollars, there are two individuals who have begun work toward developing readiness skills for competitive employment. Moving forward, the goal is to have 4-6 identified individuals transitioned to competitive employment by January 2017.

- DCI’s County funded Employment Support Services (ESS) strives to find employment that is best suited to an individual’s abilities. They provide assistance through the entire process from developing resumes to applying for jobs. The support continues after being hired until the employee, employer and employment specialist are all confident the job can be performed independently. In addition, ESS offers Social Security Benefits counseling.

III. HOUSING IN INTEGRATED SETTINGS:

a) Housing Inventory:

- Achieving Housing, Employment and Dreams (AHEAD) Permanent Supportive Housing (PSH) for individuals ages 18-30 with a serious mental illness who are homeless and wanting to reside in Cameron or Elk Counties with a preference to chronically homeless individuals. AHEAD has 10 available vouchers with 13 beds available. It is currently serving 15 individuals.

- Home Again PSH for individuals or families who are chronically homeless with a disability and want to live in Cameron, Clarion, Clearfield, Elk, Jefferson, Forest,
Warren, Venango, Mercer, McKean, Potter, Crawford, or Lawrence Counties. There are 22 vouchers with 34 beds being utilized.

- **Shelter Plus Care PSH** for individuals or families who are homeless with a disability and want to live in Clearfield, Jefferson, Cameron, Elk, McKean, or Potter Counties. With a preference given to those who are chronically homeless, CE is currently utilizing 4 vouchers with 10 beds.

- **Housing Plus PSH** for individuals or families who are homeless with a disability and want to reside in Cameron or Elk Counties with a preference given to chronically homeless. Housing Plus currently serves 25 individuals in 14 households.

- **Northwest Regional Housing Alliance (NWRHA) Phase I PSH** for chronically homeless individuals with a disability who want to live in Elk, Cameron, Clarion, Clearfield, Jefferson and Lawrence counties. CE is utilizing 3 vouchers, 3 beds.

- **NWRHA Phase II** for homeless families with the head of household having a disability who want to reside in Elk, Cameron, Clarion, Clearfield, Jefferson and Lawrence counties, with a preference to chronically homeless. CE is utilizing 3 vouchers, 5 beds.

- **Northwest (NW9) Bridge/Master Leasing Program** for individual who are either bridging to section 8 or are unable to have a lease in their name. This is an 18 month program to assist individuals to obtain Section 8 or become self sufficient within the program period. This is for those wanting to reside in Cameron, Clarion, Clearfield, Elk Forest, Jefferson, McKean, Potter or Warren counties. CE has regular contact with the Local Lead Agency (LLA). The LLA point person reviews and monitors all housing program referrals and services that are a collaborative effort between CE and the Behavioral Health Administrative Unit (BHAU).

- **Section 8 and Public Housing through the Elk County Housing Authority** for individuals and families needing rental assistance to live in Cameron or Elk Counties. Individuals have a choice of where they reside. All housing programs offered refer to scattered sites throughout Cameron and Elk Counties. Individuals have full access to Community Resources/activities.

b) **Progress made towards integration of housing services as described in Title II of the American Disabilities Act (ADA).**

Our housing services have always been aimed toward the rights of individuals with disabilities. We work very closely with our fair housing officers and attorneys in our region to ensure all housing applicants have a fair chance at housing. We do not allow any individuals to be discriminated against based on race, color, religion, sex, handicap,
familial status, or national origin. All applicants are provided with literature from the Federal Fair Housing Law and assistance is offered for writing and following reasonable accommodations when needed.

Individuals are housed in scattered site apartments/housing in the community of their choice. CE’s Housing Specialist ensures that living conditions are safe and affordable, as well as, located in close proximity of needed services that are made available to the individuals. In instances where individuals choose to live in an area where accessibility becomes a barrier, support services and/or CE non-emergency transportation assists.

c) **Community Residential Rehabilitation (CRR)**

N/A: There are no CRR’s located in Cameron-Elk Counties.

d) **Strategies used to maximize resources to meet the housing needs of individuals:**

1. The Local Lead Agency (LLA) has been determined to be the 23 County Behavioral Health Administrative Unit (BHAU). The point of contact is the BHAU’s Service System/ Housing Specialist.

2. Existing partnerships:
   - CE Housing Specialist works directly with our public housing authorities to house individuals as well and provide assistance to prevent evictions when able. We house several people in public housing and section 8. Our goals involve transitioning individuals and families from our Permanent Supportive Housing (PSH) programs to section 8 as a step towards self sufficiency.
   - CE has a very good working relationship with our Regional Housing Coordinators (RHC), as well as other housing groups across the state. We have a strong network with the RHC, are actively involved in meetings and continue to have open communication with to provide every opportunity we can to our individuals.
   - CE has a strong working relationship with our Community, Housing and Redevelopment Authorities. In Cameron and Elk Counties. The Housing Authority encompasses Public Housing as well.
   - Local Housing Options Teams (LHOTs). CE’s Housing Specialist is the Chairperson of our LHOTs. We have a strong team consisting of many provider agencies, shelters, RHC, local businesses, and formerly homeless individuals. We continue to meet monthly and work on bridging the gaps in housing as well and getting our communities involved in preventing hunger and homelessness.

IV. **SPECIAL POPULATIONS:**

a) **Dual Diagnosis (MH/ID):**

   - Strong collaboration with CE’s Intellectual Disabilities (ID) Program
• Utilization of NHS Dual Diagnosis Treatment Team (DDTT) for high risk individuals.
• Access to the Community Stabilization and Reintegration Unit (CSRU) provided by Beacon Light. This unit provides treatment to Dually Diagnosed individuals that are going through complex emotional, behavioral, physical and social difficulties. This unit serves as a diversion from admissions to inpatient units, state hospitals and state centers.
• Availability of mental health base and CHIPP funding to provide community based services for individuals that have exhausted other resources.

b) **Co-Occurring (MH/Substance Abuse):**

• DCI’s Co-occurring Psych Rehab Program assists individuals in improving their quality of life. This is a one day a week, 6-8 week program that follows the same format, principals and values of Psych Rehab with a primary focus on drug and alcohol abuse.
• Development of a Certified Drug and Alcohol Behavioral Health Center provided by Cenclear Services.
• Strong collaboration with Alcohol and Drug Abuse Services (ADAS).
• Forensic Outpatient therapist certified in co-occurring disorders. This service is provided both in the jail and community.
• Provider Agency staff trained and certified in co-occurring disorders.
• Access to contingency funds (re-investment dollars) specifically targeted for the co-occurring population to assist with housing issues.
• Trauma incident reduction provided by Citizens Against Physical, Sexual and Emotional Abuse (CAPSEA).

c) **Behavioral Health/Physical Health (BH/PH):**

• DCI’s Total Health Program provides primary care and behavioral health services to patients and consumers with physical and psychological conditions. Treatment of the whole person improves care coordination. The wellness nurse serves as the care coordinator, as well as, supporting patients in meeting their physical and behavioral health needs and recovery care plan. This program is a holistic approach to provide care to individuals of Cameron and Elk Counties.
• DCI’s Rural Health Center program is collaboration between behavioral health and physical health services in a primary care setting. DCI provides Outpatient Mental Health counseling, allowing consultation with the individual’s primary care physician. This program is available to individuals residing in Cameron County.

d) **Traumatic Brain Injury:**
• CE has limited resources, as well as, minimal referrals for individuals with traumatic brain injury. On as needed basis, CE will seek and reach out to outside resources.

• Research and attend possible trainings to become more familiar with treatment of individuals with traumatic brain injury

e) Criminal Justice/Juvenile Justice history:

• Commitment of CHIPP dollars to continue supporting the Forensic Program. This is a cooperative Program between Dickinson Center, Inc., Cenclear Services, Beacon Light Behavioral Health and the county prison warden and staff to ensure that incarcerated individuals have access to Mental Health Services, as well as, a choice of Providers. In addition, CE supports Cameron and Elk County individuals who are incarcerated in jails located in other county prisons.

• Increased presence of Certified Peer Specialists in the county prison.

• CE supports Outpatient services and medication management through base and CHIPP funding provided in the jail to reduce the risk of services being interrupted.

• ELCAM provides employment services to the Forensic population. This includes competitive employment, as well as, skill/trade building.

• Attendance at treatment team meetings at the County Prison to discuss immediate needs of the Forensic population. Ongoing meetings occur with County Prison Staff and Forensic Treatment Team which include Probation to address building upon current strengths, barriers that exist, and community re-entry.

• Collaboration with County Assistance to ensure more immediate access to benefits, psychiatric time and medications after release from prison. CE supports a Forensic Blended Case Manager who assists inmates with the completion of county assistance applications prior to discharge, as well as ensuring appointments are scheduled with County Assistance on the day of release.

f) Deaf/Hearing Impaired:

Cameron-Elk has limited resources for the hearing impaired. We have, in the past, reached out to other counties and/or utilize the resources the individual/family has. CCR, Inc has experience in dealing with special populations across the lifespan, including the deaf community. Moving forward, CE will discuss with CCR the possibility of utilizing their services on an as needed basis. In addition, on a contractual case by case basis, access to American Sign Language Services.
g) **Homelessness:**

- CE supplements the existing ‘Projects for Assistance in Transition from Homelessness’ (PATH) Grant by funding two PATH Caseworkers that assist the transition age (18-30) population that are homeless or at risk of homelessness. These caseworkers work with the transition age in finding safe affordable permanent housing. Currently the PATH Program is serving approximately 75 individuals.

- Support of the housing program ‘Achieving Housing Employment and Dreams’ (AHEAD) targets transition age (18-30) youth who are homeless. This program provides housing supports and links to employment. Since its inception, safe and affordable housing and support services have been provided to 14-16 young adults annually.

- Continued support to Cenclear Behavioral Health Services for their ‘Transition Age (18-30) Support Services Program’ (TASS). This program was developed to provide assistance to individuals and small groups to strengthen and enhance the transition to successful independent living. The objectives will address education and training, career development, financial literacy, community supports and basic daily living skills.

- Access contingency funds through reinvestment dollars to assist with security deposits, rent, furnishings, etc.

- Continued strong relationship with local landlords has offered “another chance” to individuals that would have otherwise been denied housing.

- Access to Homeless Housing Grants:
  - Home Again serving 14-16 CE homeless young adult households and families annually
  - NWRHA 1 serves 4-5 chronically homeless CE individuals and families annually.
  - Awarded PHARE dollars to assist individuals with start up costs when initially getting housed.

h) **Older Adults:**

- Continued partnership with the Office of Human Services/Area Agency on Aging (AAA) and *Generations* Geriatric Inpatient facility.

- Collaboration with Community Nurses through their Care Connections Program addresses the Physical and Behavioral Health (PH/BH) needs of the aging adult. This program provides individuals with a Care Manager that monitors PH/BH, as
well as, coordinates with medical and psychiatric care physicians. It assists in decreasing the barriers to effective treatment, while providing individualized services that focus on emotional and physical health care issues. These services are Recovery Oriented, keeping individuals in their own home/communities. Provided by a Psychiatric Nurse, they include education, medication management/monitoring, health status and symptoms, identifying needs, and coordination of care and advocacy.

- Connection with Dickinson Center’s Wellness Program that focuses on a combination of Behavioral and Physical Health.
- Combining resources with AAA to ensure this special population can continue living successfully in their home.
- On an as needed basis, providing Mental Health services to individuals that are transitioning from Nursing Home back to Independent living.

i) **Medically Fragile:**

- Refer to IV c): BH/PH

- Generations Geropsychiatric Inpatient Unit is available for the older population who is in need of medical and behavioral health treatment.

j) **Limited English Proficiency:**

- Access to local Public Libraries reading program.

- Collaboration with Cameron and Elk County Assistance offices as a resource to translation services.

- Utilize, on an as needed basis, via phone/video, *Language Line Solutions*.

k) **Transition Age Youth:**

- PATH program for individuals between the ages of 18-30 that are homeless or at risk of homelessness.

- Outreach to the younger population to connect them to the COPE drop-in-center. Funding to provide transportation to and from COPE which gives more individuals the opportunity to utilize the center.

- Utilizing CHIPP dollars to continue supporting Cenclear’s Behavioral Health Services for TASS. This program was developed to provide assistance to individuals and small groups to strengthen and enhance the transition to successful independent living. The objectives will address education and
training, career development, financial literacy, community supports and basic daily living skills.