Introduction
Lehigh County fully concurs with the State’s goal of ending unnecessary institutionalization of adults with serious and persistent mental illness and children with serious emotional disturbance. This is evidenced by Lehigh County supporting seven people in returning to the community from Wernersville State Hospital in Fiscal Year 15-16 through the Community Hospital integration Projects Program (CHIPP) initiative and in reducing our bed cap at Wernersville State Hospital (WeSH) by seven. Additionally, Lehigh County is committed to further reducing the utilization of WeSH for Lehigh County residents during Fiscal Year 16-17 by permanently closing seven additional beds at WeSH and moving those individuals back into the community.

Lehigh County is working with two providers who have physical sites available and who are willing and able to support these seven people. It is our sincere hope that the State will provide the necessary funding through the CHIPP initiative to allow these individuals to return to the community and for Lehigh County to be able to permanently close these beds and further lower our bed cap at WeSH.

This plan will build on the services and supports that are already in place in Lehigh County. These include Assertive Community Treatment teams (ACT), mobile crisis services. We also have successful case management, psychiatric rehabilitation services, and community services for youth and young adults including Multi-Systemic Therapy and Functional Family Therapy, and competitive employment opportunities, including supported employment services. We utilize Peer Support and peer-run services including certified peer specialists, drop-in centers, and a warm-line.

Olmstead Planning Process
Stakeholders, including consumers, family members, advocacy groups, providers, behavioral health managed care representatives, and cross-systems partners were involved in Lehigh County’s Olmstead planning process. Specifically:

- Lehigh County developed a CSP Committee to specifically address the needs of the citizens in the County. This committee meets every month with the third month being a joint meeting with the Northampton County CSP committee. The format of the meeting allows for individuals in recovery, families, providers, Magellan, PA Office of Mental Health & Substance Abuse Services (OMHSAS), and other stakeholders to express their desires for services and to comment on proposed initiatives being developed by the County. The information contained in the Olmstead Plan has all been reviewed with the Lehigh County CSP Committee.
- The Lehigh County MH/ID Advisory Board meets on a bi-monthly basis. This board reviews the work being performed by the Mental Health Office and offers suggestions on improvements that can be made.
- Lehigh County staff attend the Lehigh Valley Provider meeting each month where input is provided on services that are being offered and recommendations are made on possible changes and enhancements that can be made to the services and supports offered by the County.
- Lehigh County meets regularly with administrative staff from the Lehigh County Behavioral Health Managed Care Organization (BHMCO) Magellan, to discuss services and supports that are needed. This is a collaborative effort with Magellan reviewing ideas presented by the County and offering their suggestions on services that are needed.
- Lehigh County participates on several collaborative committees to address the needs of people who are homeless. These committees, that are made up of various stakeholders in the community, include the Regional Homeless Advisory Board (RHAB), the Lehigh County President Judge’s Committee to address homelessness for people involved with the courts and the Lehigh County Coordinating Committee to address the operation of a Warming Station to provide shelter during the winter months.
for individuals who are homeless. Information from these committees is used in formulating new services and improving existing services.

- Staff from the mental health office participate in the weekly Youth Cross-System team meeting that provides collaboration to support youth involved with child welfare. The committee makes recommendations on how to best support youth who are transition from the children’s system to the adult system.
- The mental health office participates on Team MISA (Mental Illness & Substance Abuse) consists of members from different areas of the criminal justice system, the public defender’s office, Drug and Alcohol (D&A) and the mental health office who review cases of defendants with special needs, such as mental health, alcohol or drug problems and divert them from prison to treatment programs, when appropriate.
- The mental health office participates on the Lehigh County Veterans’ Mentor Program (VMP) which addresses the issues faced by a growing number of veterans involved in the criminal justice system. The VMP uses a collaborative approach to criminal justice proceedings. The VMP works in conjunction with the District Attorney’s Office, defense attorneys, mental health, D&A, probation, and the Veterans Administration to give each program participant the best possible chance of getting back on track as a healthy, productive veteran and citizen.
- Lehigh County mental health staff participate on the Lehigh County Jail’s reentry committee in developing the most appropriate community outcomes for people with a mental illness who are returning to the community.
- Lehigh County facilitates Community Support Plan (CSP) for all individuals at the County’s Extended Acute Care (EAC) program. The CSP process follows the format established by the PA Office of Mental Health & Substance Abuse Services OMHSAS. It is developed by the individual and includes as appropriate input from family members and friends. The plan is used to guide the services that are put in place for the individual. This document is updated at Recovery Update Meetings as needed.
- Lehigh County’s State Hospital Liaison compiles data related to the desired community supports for Lehigh County residents residing at WeSH. She combined this with information obtained at team meetings to develop a data base of desired and needed supports.
- The Consumer Family Satisfaction Team, which is comprised of consumers and persons in recovery, collected and analyzed approximately 1,000 surveys with individuals in recovery. This information was then collated to be able to be utilized in the Olmstead planning process.
- Representatives from the Disability Rights Pennsylvania (DRP) participated in a phone conference with Lehigh County to discuss our current plan and to provide guidance and advice on the development of the current plan.
- Case management Blended Case Management (BCM) and Assertive Community Treatment Teams (ACT) providers, residential providers and employment providers participated in phone and in-person conferences to discuss the current services and supports provided by the county and to make recommendations on ways to improve these services.
- The County Mental Health office met with the County HealthChoices staff and Magellan representatives to discuss current services, reinvestment plans and future needs based on information obtained through the planning process.
- The County’s Mental Health office meets regularly with the D&A and Intellectual Disabilities offices in the County to discuss specific cases as well as to identify trends and discuss means of working more efficiently together.

**Services to Be Developed**

- Crisis Intervention will be implementing a new position involving a case manager who will be responsible for “closing the loop” for all cases generated by Crisis Intervention by making appropriate referrals, service linkages, and following up after the crisis has passed. In addition, the case manager will assist
with monitoring quality of services through surveying consumers, family, and other professionals. This staff should be in place by January 2017. It is anticipated that this staff will be working with 2-3 people on a given day. Because this is a redesign of a current county position, no additional resources will be needed. This service will be utilized with individuals of any age who utilize crisis intervention services.

- The County is implementing a Pathways to Treatment case management position. This position is designed to meet the needs of adults who: may have a mental health need that has not yet been diagnosed making the ineligible to engage in services, individuals who do not know how to access the system and for whom telling them to, “call the toll free number on the back of your insurance card” is not sufficient, others with complex cases that are not yet involved with other case management services and supports, and will serve as a resource for children’s mental health for transitioning youth with complex needs who will be entering the adult system.
  - The case manager will develop an individualized pathways to treatment linkage plan based on the desires, strengths and needs of the individual.
  - The case manager will utilize aggressive and creative attempts to help the person gain resources and services identified in the plan. This will be accomplished in the individual’s home and during community visits and other locations as needed. In some cases, the case manager will start working with the individual prior to their release from jail.
  - The case manager will obtain records and will review clinical information and will hold a general discussion with the individual regarding unmet needs and plans for the future.
  - The case manager will actively work to assist the person in gaining access to needed services and entitlements. The case manager will have easy access to communicate with the county deputy mental health administrator for the purpose of obtaining assistance in resolving issues which prevent the person from receiving needed treatment, rehabilitation and support services.
  - The case manager will provide assistance to persons in identifying, accessing and learning to use community resources appropriately to meet their daily living needs. This may include the use of public transportation, the library, stores and the like. This will be done by making a referral to an appropriate service provider or in providing assistance directly to the individual in locating and obtaining alternate resources if services desired do not exist.
  - The case manager will provide input to the mental health office about new services that may be needed to more appropriately meet the needs of County residents who utilize the mental health system and are unable to connect with existing services.
  - The case manager will work on obtaining verification of eligibility to receive intensive case management services, such as past treatment records, psychiatric or psychological evaluation, letter summarizing treatment history, Individual Education Plan (IEP), and the like.
  - The case manager will advocate for and assist individuals in gaining access to needed services including establishing therapeutic relationships with ongoing case management providers, a therapist and/or psychiatrist as needed. The case manager will work closely with the identified providers and will provide consultation during the transition process regarding the overall treatment and management of the individual’s recovery.

This change occurred March 1, 2017. It is anticipated that the staff will work with up to 12 people through the Pathways to Treatment part of their job in a month. This position was developed from an existing guardianship/quality assurance case manager position by realigning their duties. Because this is a redesign of a current county position, no additional resources will be needed.

- Lehigh County Mental Health will be implementing a program that will have a mental health staff embedded with the Allentown Police Monday to Friday from 10:00 AM to 6:00 PM. 80% of all crisis calls and approximately 80% of all individuals who are incarcerated are from the City of Allentown. The Allentown Police have identified weekdays from 2:00 PM to 10:00 PM as their period of highest call volume for people experiencing a mental health crisis. This position will allow the worker to cover half of the high volume period while still being accessible to the officers and supervisors working
during the day. What makes this program unique is that the staff will have multiple roles in identifying, supporting and linking people with a mental illness or COD to services. The goal is to identify people with a mental illness early in their involvement with the police to reduce incarcerations and hospitalizations. One of the resources available to this staff will be the Pathways to Treatment case manager referenced above. We are looking to have this program implemented by January 2017. It is estimated that the staff will work with three to four individuals per day. The County received a PA Commission on Crime and Delinquency grant to pay part of the costs of this program for the first two years. The county is committed to this program and will utilize block grant dollars to cover costs beyond those covered by the grant and to ensure it continues after the grant period is over. This program will support individuals of all ages who as the result of a mental illness have contact with the police.

- It was determined that individuals who are in a Community Residential Rehabilitation program (CRR) do not always transfer the skills they learn to their new living arrangement. For instance, people who learn to use an electric stove and have a washer and dryer in their house, are sometimes not able to use a gas stove or use a laundry mat in the community. It was suggested that a “Bridge Team” be developed that would include a case manager, a Certified Peer and a mobile psych rehab worker. This team could support an individual during a transition period and would be designed to work with the person on a short-term basis. This program was presented to HealthChoices and to Magellan. It is hoped that it can be in place by July 1, 2017. It would be funded by Magellan and is estimated to be able to support over 200 people age 18 and over per year

- Community Based Intensive Treatment (CBIT) will be utilized to support individuals age 18 and older who are impacted by the corrections system in their recovery through increased collaboration of the treatment providers and systems involved with their supports. The goal is a decrease in inpatient days, total hospitalizations, 30 day readmission rates, and incarceration. Magellan is currently collecting data on this project with a goal of having it implemented by July 2017. An estimated 100 people will be supported the first year with funding being provided by Magellan.

- To better support the efforts to provide housing for people with a mental illness leaving the jail, we are looking to have a MH caseworker assigned to work out of the jail one day a week. They would meet with the jail case managers regarding individuals they have on their pods and more proactively address the needs of people with a mental illness who are incarcerated. We are looking to have this in place by the spring of 2017. We anticipate this staff will be working with 200-300 people age 18 and older per year. Because this is a redesign of a current county position, no additional resources will be needed.

- Forensic Peer Services are now being provided by PeerStar. Because it is essential to connect with returning citizens within three hours of their being released from jail, the County is looking at having a forensic peer run group sessions in the jail for people who will be maxing out within 4-6 weeks. The goal is to acclimate these individuals to the value of the Certified Peer Specialist program and then to be able to immediately connect them with a forensic peer upon their release. We hope to have this program operating by July 2017. It is anticipated that 150-180 people age 18 and older will benefit from the program each year. The cost of the program will be covered by County base dollars.

- The Lehigh Conference of Churches (CoC) has successfully run a model of shared housing for individuals with a forensic background. The program involves identifying three or four people who are compatible and are willing to share the expenses of a home. The CoC serves as the master lease holder but provides no other services. The County is looking to expand this model from being just a forensic program to being a program that will serve the needs of individuals with a mental illness. To date, Salisbury Behavioral Health has started renting an apartment to three people who are living with a mental illness. It is our goal to have other providers also enter into this type of master lease arrangement. It makes housing affordable in a housing first model. The goal is to work with our current providers to have three apartments operational by July 2017. Nine people age 18 and older will be served and there will be no cost to the county because the individuals will be paying the rent and costs associated with their housing.
• Goodwill Keystone Area has decided that they will no longer operate sheltered workshops effective July 1, 2017. Lehigh County Mental Health supports this decision to end this practice of providing sub-minimum wage employment and will be working with Goodwill in having people at their sheltered workshop as participants or in a Transitional Employment position obtain gainful community employment. The mental health office only has four individuals currently receiving services at the Goodwill sheltered workshop so making the transition should go smoothly. Services and employment supports will be offered to these individuals at the Clubhouse of Lehigh County, which is already funded by Lehigh County. Additionally, Goodwill will be receiving a grant through OVR to support 20 people between the ages of 18 and 21 per year transitioning out of schools in Lehigh County in obtaining employment. This program will be operated out of the Clubhouse of Lehigh County. The grant is expected to be renewable for six years.

Housing in Integrated Settings

All of the programs below are located in mainstream society and offer the individuals access to community resources; all individuals can access community resources at opportunities, frequencies and timing of their choosing; individuals have choice in their daily activities and have the opportunity to interact with others who do not have disabilities to the fullest extent possible; all units are accessible and barrier free.

<table>
<thead>
<tr>
<th>Provider</th>
<th>Program</th>
<th>Number of People Currently Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lehigh County Housing Authority</td>
<td>Shelter + Care/CoC</td>
<td>27</td>
</tr>
<tr>
<td>Valley Housing Development Corporation</td>
<td>Supportive Housing Grant</td>
<td>14</td>
</tr>
<tr>
<td>Valley Housing Development Corporation</td>
<td>Supported Housing Units</td>
<td>Seneca House-21 Gordon St.-12</td>
</tr>
<tr>
<td>PATH-Projects for Assistance in Transitioning from Homelessness</td>
<td>Security deposits, first month’s rent, contingency</td>
<td>41</td>
</tr>
<tr>
<td>PBOA-Project Based Operating Assistance *Contract is Appendix A</td>
<td>Sheffield and Hamilton-Linden Apartments</td>
<td>17</td>
</tr>
<tr>
<td>Hope VI Pennrose-Allentown Housing Authority</td>
<td>Permanent Housing</td>
<td>20</td>
</tr>
<tr>
<td>Conference of Churches Clearing House Program</td>
<td>Master Lease, Bridge Subsidy, Contingency Funds</td>
<td>Master Lease-contracted for 10 serving 7 Bridge Subsidy-contracted for 19 serving 19 Contingency Funds-contracted to serve 175 people, serving 315</td>
</tr>
</tbody>
</table>

Overview of Housing in Integrated Settings

In an effort to maximize housing for individuals experiencing or at risk of experiencing homelessness in integrated settings utilizing a housing first model, Lehigh County Mental Health partners with the Lehigh County Housing Authority and their subsidiary, Valley Housing Development Corporation, the Allentown Housing Authority and participates in SAMHSA’s Projects for Assistance in Transition from Homelessness (PATH) program. The services are all overseen by a county mental health case manager. The services provided in each area are:

• Lehigh County Housing Authority-The program formally known as Shelter Plus Care and now part of the HUD Continuum of Care, serves homeless individuals with a serious mental illness and requires that they have a case manager at the time of the referral but does not mandate they maintain this service as a condition of tenancy.
- Valley Housing Development Corporation (VHDC) operates two site based programs that are located in Lehigh County, Gordon St Apartments and Seneca House. At the time of the referral the individual needs to have a case manager but ongoing treatment is not a condition of tenancy. They also do not need to meet HUD’s definition of homelessness and are not bound by the restrictive nature of Section 8 exclusionary conditions, such as having a criminal background. VHDC also operates supporting housing which is similar to Shelter Plus Care in that you need to meet the HUD definition of homelessness but are not bound by the exclusionary conditions of a criminal background.

- Lehigh County’s participation as a Projects for Assistance in Transition from Homelessness (PATH) provider, allows the County to provide first month’s rent or security deposits as well as contingency funds for people who are homeless but who do not necessarily meet the HUD definition of homelessness.

Two other Housing First programs that are overseen by the County’s mental health office are the PHFA Projects Based Operating Assistance (PBOA) program at the Sheffield and Hamilton-Linden Garden Apartment complexes. This program sets aside up to 20 apartments between the two complexes. Currently there are 17 people in this program. The second project is the Hope VI public-private revitalization venture between the Allentown Housing Authority and Pennrose Properties. This development includes 269 rental units as well as 53 homeownership units. Twenty of the 269 rental units are set aside as supportive housing for people with a mental illness through a HealthChoices reinvestment plan that guarantees the apartments in perpetuity for use by the county. Neither program requires an individual to be in treatment in order to maintain tenancy but both require the applicant have successfully completed a CRR program. Both programs are permanent housing and both have had people who were incarcerated, hospitalized or in a D&A treatment program be able to return to their home when they returned to the community.

All of these programs meet the requirements for integration of housing services as described in Title II of the ADA. It is the hope of the mental health office that more programs like these will be able to be developed over time.

The Lehigh County HealthChoices program has also provided a reinvestment plan through the Lehigh Conference of Churches to provide a Clearinghouse that operates a Master Lease program, a Bridge Funding program and a Contingency Fund. A brief description of each program is below:

**Master Lease:** The Clearinghouse rents from a landlord who receives the full month contract rent and reimbursement for tenant damages over and above the security deposit. Landlord are responsible for maintenance and repairs for the unit. All units have an appropriate Certificate of Occupancy and pass an initial inspection to be eligible under the Clearinghouse Master Lease Program. Units leased under the Program are re-inspected at least annually. This program is successful because of the partnership with the Lehigh Conference of Churches. managed rental assistance funding from Lehigh County, FEMA, and private sources for over twenty years, the LCC has a history of working with landlords who understand its mission to provide decent, safe, and permanent independent housing to low-income persons. The LCC initiated a HUD McKinney-Vento tenant-based rental assistance project for individuals who are disabled, chronically homeless and limited by behavioral health issues. As a result, a trusting relationship has been established with area housing providers regarding individuals who meet these criteria.

**Bridge Funding Program:** When an individual requires a bridge subsidy to cover their monthly rental payments until a Housing Choice Voucher is made available, the Clearinghouse works with public housing agencies to develop a bridge subsidy program for these consumers who will be required to apply for Vouchers. Additionally, the Clearinghouse works with the public housing agencies to assist them in creating a preference for people with special needs under their Housing Choice Voucher Program, utilizing their discretion to establish “local preferences,” subject to HUD approval, that mirror the needs of the community. This is accomplished in partnership with the Allentown Housing Authority and the Lehigh County Housing Authority.
**Contingency Fund:** These funds are used to assist extremely low income persons with the one-time costs (e.g. security deposits, utility deposits, essential furniture and household goods, etc.) that are necessary prerequisites to successfully occupy permanent housing. The Clearinghouse uses Contingency Funds to assist eligible consumers with these expenses associated with moving into permanent supportive housing or the expenses associated with maintaining housing stability.

**Community Residential Services Housing Inventory:**

<table>
<thead>
<tr>
<th>Level of Care</th>
<th>Provider</th>
<th>Location</th>
<th># beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Inclusive Residential (AIR)/Community Residential Rehabilitation (CRR)</td>
<td>Resource for Human Development (RHD)</td>
<td>3838 Friedens Rd. Slatington, PA 18080</td>
<td>6</td>
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<tr>
<td>AIR/CRR</td>
<td>Horizon House (HH)</td>
<td>2128 S Lehigh St. Whitehall, PA 18052 (also office)</td>
<td>3-Males</td>
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<tr>
<td></td>
<td></td>
<td>2130 S Lehigh St Whitehall, PA 18052</td>
<td>3-Males</td>
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<tr>
<td>Specialized Medical Home</td>
<td>Salisbury Behavioral Health (SBH)</td>
<td>72 Valley Park South Bethlehem, PA 18018</td>
<td>3- Males</td>
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<tr>
<td></td>
<td></td>
<td>221 Valley Park South Bethlehem, PA 18018</td>
<td>3- Females</td>
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<td>Community Living Arrangement (CLA)</td>
<td>RHD</td>
<td>1715 Elmhurst Dr. Whitehall, PA 18052</td>
<td>2</td>
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<tr>
<td>EPCH</td>
<td>Northwestern Human Services (NHS)</td>
<td>515 Delaware Ave. Bethlehem PA 18015</td>
<td>16</td>
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<td>CLA</td>
<td>RHD</td>
<td>5543 Walnut Ln. Zionsville, PA 18092</td>
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<tr>
<td>CLA</td>
<td>Impact Services</td>
<td>6141 Hanoverville Rd Bethlehem, PA 18018</td>
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<tr>
<td>CLA</td>
<td>NHS</td>
<td>3547 Main St. Slatington, PA 18080</td>
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<td>CLA</td>
<td>Community Options</td>
<td>3328 Cambridge Dr. Allentown, PA 18104</td>
<td>1</td>
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<td></td>
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<td>3936 W Turner St. Allentown, PA 18104</td>
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<td>Supported Housing</td>
<td>SBH</td>
<td>321 S West St. Allentown, PA 18103 (also office)</td>
<td>11 People 4 Apts.</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>3-Females/ 8-Males</td>
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<tr>
<td>Supported Housing</td>
<td>SBH</td>
<td>2334 S Fountain St. Allentown, PA 18103 (also office)</td>
<td>9 People 3 Apts.</td>
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<tr>
<td></td>
<td></td>
<td>2336 S Fountain St. Allentown, PA 18103</td>
<td>All Males</td>
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7 | Page
<table>
<thead>
<tr>
<th>Level of Care</th>
<th>Provider</th>
<th>Location</th>
<th># beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supported Housing</td>
<td>Horizon House</td>
<td>210 S Fulton St. Allentown, PA 18103</td>
<td>8 People/3 Apts. 3-Males</td>
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<td></td>
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<td>1500 Hamilton St. Apt 3N Allentown, PA 18103</td>
<td>2-Females</td>
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<td>47 S St Cloud St. Allentown PA 18103</td>
<td>3-Males</td>
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<td>Supported Housing</td>
<td>Step by Step (SXS)</td>
<td>214 S Jefferson St. Allentown, PA 18102</td>
<td>7 People 4 Apts.</td>
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<td>CRR</td>
<td>SXS</td>
<td>375 Linden St. Allentown, PA 18102</td>
<td>10</td>
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<tr>
<td>CRR</td>
<td>SXS</td>
<td>704-706 Weil St. Bethlehem, PA 18015</td>
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<tr>
<td>CRR</td>
<td>SXS</td>
<td>214 S Jefferson St. Allentown, PA 18102</td>
<td>12/6 Apts.</td>
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<td>CRR</td>
<td>Transitional Living Center (TLC)</td>
<td>Scattered sites at Riverbend Apts. in Allentown - Moderate Care</td>
<td>28 People 9 Apts.</td>
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<td>CRR</td>
<td>TLC</td>
<td>Scattered sites at Riverbend Apts. in Allentown - Full Care</td>
<td>10 People 4 Apts.</td>
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<td>Fairweather Lodge</td>
<td>SXS</td>
<td>211 N 8th St. Allentown, PA 18102</td>
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<td>Supportive Housing</td>
<td>SXS</td>
<td>706 S Woodward St. Allentown, PA 18103</td>
<td>11 People 11 Apts.</td>
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<tr>
<td>Supportive Housing</td>
<td>SXS</td>
<td>214 S Jefferson St. Allentown, PA 18102</td>
<td>10 People 5 Apts.</td>
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</tbody>
</table>

**Overview Community Residential Services Housing Inventory**

**Medically Fragile Persons (MFP)** is an unlicensed program (called The Landings) consisting of two apartments that is designed to meet the needs of elderly individuals who have been diagnosed with a mental illness and are medically compromised. The first priority for admission to The Landings is for individuals currently at a State Hospital or State Restoration Center who are psychiatrically stable and meet criteria for individuals 60 or older who are skilled nursing home facility eligible and can have their needs met in the community through the Aging Waiver. There is no requirement that individuals receive mental health treatment to remain in the apartments.

**CRR Conversion**

**Fairweather Lodge** operated by Step by Step was converted from a CRR. - The Lehigh County Fairweather Lodge follows the model developed by Dr George Fairweather with the exception that there is not a lodge operated business. Members are required to work 15-20 hours per week or to volunteer 15-20 hours per week. Services are available as long as the member wants and needs them but are not a requirement of being in the Lodge.

**All Inclusive Residential Program (AIR) Licensed as CRRs** - Is provided by two agencies each operating residential sites for six individuals with serious mental illness who were discharged from or diverted from a State Hospital. As part of our ongoing desire to meet the needs of individuals in a housing first model, Lehigh County is planning on addressing the All Inclusive CRRs during the coming year. Presently, these two homes have all behavioral health services incorporated in their program descriptions. The mental health office will be
meeting with the providers to have them remove the psychiatric time as well as other mental health services that can be provided in the community form their programs. We recognize that this is only a step in the conversion process but believe it is a major step in supporting people in being involved in a greater level in their community, which will lead to more opportunities for them.

Community Residential Rehabilitation (CRRs) - Lehigh County contracts with two providers to support a total seventy-two (72) individuals in Community Residential Rehabilitation settings. One of the homes operated by Step by Step is designed to support eight people who are experiencing a mental illness and a co-occurring disorder. All of the programs support individuals in their recovery by equipping them for independent living in the community setting of their choice. We are working on scheduling meetings with our two CRR providers, TLC and SXS to discuss converting their apartment model CRRs to supported apartments. We are also looking to discuss converting SXS’s two congregate care CRR’s located on Linden St. and Weil St. to Fairweather Lodges.

Specialized Personal Care Homes - Enhanced Personal Care Home (EPCH) Lehigh County contracts with two agencies to provide Enhanced Personal Care Home placements for a total of 36 adults, age 18 and older, who have a severe and persistent mental illness. The EPCH is an additional resource available to those individuals who were discharged from a State Hospital and wish to return to community living in Lehigh County. It is also a resource for those individuals already live in the community who require a higher level of care in order to remain in the community. We are starting preliminary discussions internally regarding reducing the number of beds from 20 to 16 at the Salisbury Behavioral Health EPCH.

Community Residential Services-Moderately structured supervised setting

Supported/Supportive Housing - Lehigh County contracts with three providers to operate Supported Apartment Living Programs for a total of forty-eight individuals from Lehigh County with serious mental illness and co-occurring substance abuse disorders and/or intellectual disabilities. The primary objective of the program is to empower and equip individuals to live independent, productive lives in the community setting of their choice. The programs were designed to provide an intense level of support. Unfortunately, the budget cut has necessitated that two of these programs no longer provide on-site supervision of program residents on a 24-hours-a-day, 7-days-a-week basis. This will result in sixteen individuals now living in programs where they will receive between eight and twelve hours of staff support a day. Because of this, decisions about who can live in these homes and still have their needs met in a safe and secure residential environment need to be made. This obviously impedes our ability to move people back into the community from the EAC and the State Hospital.

Local Lead Agency - Lehigh County is an active participant in the Northeast Regional Homeless Advisory Board (RHAB) and its subcommittee addressing the needs of people with a mental illness who are experiencing homelessness. We will also be participating as a point of entry for people who are homeless and are looking to receive housing services. Staff will be trained in using the Vulnerability Index (VI), the Service Prioritization Decision Assistance Tool (SPADT), and the combined VI-SPADT prescreen assessment tool. A decision was made by the homeless support provider community to cease operating the LHOT in the Valley and include discussions that would have occurred in these meetings at the RHAB meetings. For reporting purposes, Kay Achenbach, Lehigh County Director of Human Services, is still the LLA.

Special Populations

Individuals with a dual diagnosis (mental health/intellectual disability) - The Lehigh County mental health office works closely with the county’s office of Intellectual Disabilities (ID) in serving the needs of people who have a dual diagnosis. This collaboration has included: the mental health office monitoring three residential homes where individuals discharged from Allentown State Hospital as part of the closure. The individuals in the homes have co-occurring mental health and Intellectual Disabilities (ID); working collaboratively with the ID office with them paying for an individual in Life Sharing and the MH base program paying for their treatment in the community that is not covered by the BHMCO. Other individuals with an ID have
been supported in the EAC. Lehigh County also has a Specialized Program for Offenders in Rehabilitation and Education (SPORE) that pairs a case worker with a probation officer in both the juvenile and adult systems. The case workers are able to support an individual with an ID who is on probation or parole.

Lehigh County HealthChoices/Magellan funds a Dual Diagnosis Treatment Team (DDTT) – A voluntary, community-based, direct service that provides intensive supports to members with a dual Mental Health/Intellectual Disability diagnosis. The primary focus of this program is on crisis intervention, hospital diversion, and community stabilization through the delivery of integrated case management, medication monitoring/management, behavioral assessment, and the development and implementation of a comprehensive behavioral support plan. This program provides an all-inclusive, collaborative, continuum of care model that addresses the needs of the member from a “whole person” perspective, assisting the member, his/her family, providers, and other community and natural supports with the skills to manage symptoms and behaviors that would place the member at risk for more restrictive levels of care.

**Individuals with co-occurring disorders (mental health/substance use disorders)** - SPORE staff are able to support individuals with co-occurring disorders who are on probation or parole. The county also operates a CRR for eight individuals with co-occurring disorders. Additional supports are provided through the BCM and ACT programs as well as through outpatient treatment with providers specializing in co-occurring disorders. While Lehigh County does not have a mental health or D&A court, we do have Team MISA, which is a sub-committee of the CJAB.

Lehigh County Magellan has identified two providers who are currently in the process of obtaining their PROMISe numbers to operate Certified Recovery Specialist (CRS) programs. Once the numbers are obtained, contracts will be implemented. It is anticipated that this program will be operational in the fall of 2017.

**Individuals with both behavioral health and physical health needs** - HealthChoices/Magellan is developing Wellness Recovery Teams which will serve as a collaborative approach to improve physical and behavioral health factors in those diagnosed with a serious and persistent mental illness (SPMI), substance use disorder, and physical health conditions. The teams are comprised of professionals with expertise in behavioral health and physical health issues, including, but not limited to, a registered nurse and a master’s level behavioral health professional. The Administrative Navigator, Nurse Navigator and Behavioral Health Navigator will work jointly to assess and support identified areas of concern and collaborate with a member’s treatment providers such as behavioral health supports, primary care and specialty medical providers, managed care organizations, and a member’s family and/or other supports. All services are delivered within the context of a strong commitment to a recovery-oriented system of care and infused with recovery-oriented practices.

**Integrated Care** – This program provides for the integration of care between behavioral health services from a Behavioral Health Outpatient Provider with the physical health services from a Federally Qualified Health Center, Physical Health Outpatient Provider. This program model delivers comprehensive and coordinated care for our most challenging and complex members by offering a community-based, personalized approach with fully integrated behavioral health, case management, and physical health. This program has brought together behavioral and physical health services in a collaborative approach for individuals with complex physical, emotional, and social issues to enhance care and improve quality of life. The three providers identified by Magellan to provide this service all have received their PROMISe numbers from the State and are in the process of having their contracts executed. It is anticipated that this program will be operational by July 1, 2017.

As was mentioned above, Lehigh County contracts with Salisbury Behavioral Health to operate an MFP, called The Landings that consists of two apartments designed to meet the needs of elderly individuals who have been diagnosed with a mental illness and who are medically compromised.

**Individuals with a traumatic brain injury** - Lehigh County works with Action Recovery, a part of New Vitae Wellness and Recovery. They offer a continuum of residential and behavioral health options dedicated to achieving lasting and positive changes for adults who are encountering challenges associated with acquired or traumatic brain injuries. The program provides Long-term and Transitional Living services.
**Individuals with criminal justice/juvenile justice history** - The County has provided two CIT classes for 38 police officers, representing 9 departments in the County. This training will be offered again in April 2017.

As was mentioned in another section, the county has applied for a PCCD grant that will provide for a mental health staff to be embedded with the Allentown Police Department 40 hours a week.

Team MISA (Mental Health and Substance Abuse) is a committee that was created with a goal of diverting low risk offenders with a mental health diagnosis from incarceration or to provide community-based services in the very early stages of incarceration.

A mental health case worker will be assigned to work out of the county jail one day a week to support returning citizens in getting linked to outpatient services, forensic peer supports, and housing. The case worker will be using a tracking system has been developed to better follow inmates who have a mental illness and have been admitted to the Lehigh County Jail. The system allows for identifying people who have been incarcerated and have been involved with mental health services in the community. When there is a current service provider, they are notified of the incarceration so that they can become involved with planning in the jail and at the time of reentry. Individuals who are not currently receiving services but are assessed for their need of treatment upon returning to the community are assessed for and referred to the appropriate treatment. People who will be returning to the community and are at risk of homelessness are identified early in order to put the necessary supports in place.

Through a partnership with Haven House, a system has been developed to have individuals being released from the jail with only three days of medications see a nurse practitioner to have prescriptions written/samples provided pending the completion of the Initial Psychiatric Examination. By doing this, returning citizens are able to stay on their medications upon release from the jail.

MISA began in 2005 out of meeting that was called to discuss several cases that involved multi-systems. These cases involved persons that had serious mental illness. The original attendees of the meeting where the Mental Health Administrator, the Assistant Director of Corrections, the Court Administrator and the Executive Director of Pre-trial Services. The meetings were scheduled weekly as a “think tank” for the involved parties to streamline processes and expedite appropriate releases from jail. Team MISA developed and formalized and became an off-shoot of MISA/CJAB (subcommittee of Criminal Justice Advisory Board (CJAB). Today, Team MISA is comprised of a variety of disciplines within the County, including the District Attorney’s Office, Lehigh Valley Pre-Trial Services, MH/ID, SPORE, D&A, Lehigh County Prison (treatment, administration, and case managers), Probation/ Parole and the Public Defender’s Office. The meeting is chaired by the first Assistant DA. The success of the group results from the collaboration and ensuring that there are department heads, as well as front line staff, at the table. The team meets weekly to discuss new referrals and any updates on “old” referrals. Each team member collects all pertinent information from their respective office, has information releases signed when necessary, and collectively, the team discusses the most appropriate and expeditious approach to manage the case.

The Re-entry Committee is a multi-disciplinary team that meets every other week to discuss and develop re-entry plans for inmates who have a variety of needs including mental health and/or intellectual disabilities. The committee consists of Lehigh County Prison entities: administration, supervisors, case manager, nurse-supervisor, and mental health professional, Lehigh County SPORE: Director and Forensic Case Manager.

We anticipate the re-entry committee will be working with sixty individuals who are going to max-out from the county prison and twenty-three individuals who are going to max out from an SCI in the target population during this fiscal year. Additionally, there are seventy-five people we project will be paroled from the county prison and three who will be paroled from an SCI in the target population during this fiscal year.

**Youth Cross System Team & Integrated Case Management Support** is a multi-disciplinary team that meets weekly to assist DHS and Juvenile Probation with youth & families involved in multiple-systems. Over the past 12 months this team received over 50 new referrals and had over 80 reviews on existing cases.
Lehigh County has been working on reducing the utilization of Residential Treatment Facilities (RTFs) through the incorporation of other services, specifically through increase utilization of Multi Systemic Therapy (MST) and Functional Family Therapy (FFT). The chart below shows the decline in usage of RTF’s since 2011.

<table>
<thead>
<tr>
<th>Year</th>
<th>Admissions</th>
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<tbody>
<tr>
<td>2011</td>
<td>112</td>
</tr>
<tr>
<td>2012</td>
<td>82</td>
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<td>2013</td>
<td>54</td>
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<td>2014</td>
<td>62</td>
</tr>
<tr>
<td>2015</td>
<td>50</td>
</tr>
<tr>
<td>2016</td>
<td>44</td>
</tr>
</tbody>
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High Fidelity Wraparound (HFW) is available to youth involved in juvenile justice; however, there are very few referrals. As a result of this plan, there is a new effort to promote HFW to Juvenile Probation officers. In the past 1 ½ years, there were 3 juvenile justice involved youth who received HFW. Juvenile Probation is also actively involved in our Youth Cross System Team process where we work to prevent RTF placement and connect youth to community based supports.

**Individuals who are deaf or hearing impaired** - Lehigh County has access to interpreter services to support people who are deaf and come to the Government center for services.

Lehigh County also has access to PAHrtners Deaf Services that offers a wide-range of behavioral, developmental and therapeutic support programs to Deaf and Hard of Hearing (HoH) individuals in an environment free of cultural or language barriers. Most of their staff members are Deaf/HoH. All PAHrtners employees are fluent in American Sign Language (ASL) and versed in Deaf culture. PAHrtners offers an array of services that are available to residents of Lehigh County. The services include Blended Case Management, a partial hospitalization program, a Residential Treatment Facility, an adult residential program, and outpatient services. All services are operated out of their Montgomery County location and outpatient is also offered at their satellite location in Lehigh County two days per week.

**Individuals who are experiencing homelessness** - The HOPE Intensive Case Management (ICM) Program for Homeless –This program was developed to meet the needs of Individuals Living with Serious Mental Illness who have experienced homelessness and whose ability to return to independent community living is further complicated by mental illness and substance abuse. The primary goal of this program is to facilitate rapid community engagement and achievement of personal goals by helping homeless Individuals Living with Serious Mental Illness to engage in a comprehensive array of outpatient mental health and substance abuse treatment services, to shorten the length of time homeless, to reduce the number who return to homelessness, and increase employment and income.

Lehigh County recognized that some people experiencing homelessness are not willing to come to the Government Center to obtain services. To address this, a case worker has been assigned to go to the soup kitchen at St Paul’s every Wednesday and to Crossroads, a homeless drop-in center every Tuesday. This staff is able to engage people who are in need of mental health treatment, assist them in applying for benefits, arrange for necessary and appropriate treatment and link individuals to housing supports.

Lehigh County Department of Human Services (DHS) has a centralized intake unit called Information & Referral. This unit works closely with community housing/shelter resources and with the office of Children & Youth Services to assist families experiencing homelessness. In 2017, Information & Referral will participate in a pilot program for Coordinated Entry of all individuals experiencing homelessness. This includes a partnership with PA 2-1-1 providing all County residents easy access to customized health, housing and human services information in one place.

**Older adults** - The County Mental Health and Aging offices have built a successful collaboration in addressing the needs of senior citizens who are experiencing a mental illness. This is evidenced by the two trainings that
were developed and implemented by the two offices and by the close relationship that is maintained to effectively operate the Medically Fragile Persons (MFP) program.

Two trainings were held in conjunction with the County’s AAA regarding staff better understanding the psychiatric issues in older adults. The first training was held jointly with Northampton County and the second was for Lehigh County providers and staff.

On an ongoing basis, a little more than half of the people living at the two Enhanced Personal Care Homes and slightly less than 50% of the people living in the All Inclusive Residential (AIR) programs are age 60 and over.

**Individuals who are medically fragile** - Lehigh County developed a Money Follows the Person (MFP) program as part of the closure of the Allentown State Hospital. The program provides housing supports for six individuals (three people each in two apartments) who are at least 60 years of age, are determined to meet the criteria for a skilled nursing home level of care and have a serious and persistent mental illness. While this is still the program description, it no longer referred to as a Money Follows the Person program and is now called a Medically Fragile Persons program.

The county also operates two enhanced personal care homes to address the needs of people who meet the criteria for a PCH level of care, some of whom who are under 60 and have medical conditions that can be addressed at the home.

**Individuals with limited English proficiency** - Lehigh County has a bi-lingual pool consisting of 18 staff who are available to serve as interpreters for people whose primary language is Spanish. There are also bi-lingual staff in the crisis office and the County BCM and CHIPP programs. The County also has a contract with a language line that can be used for people with a primary language other than English or Spanish.

Additionally, the County’s BHMCO, Magellan, is committed to ensuring that members receive information and counseling in a language they understand. Lehigh County utilizes these providers in cases where an individual does not have medical assistance and receives their services through county funding.

**Transition age youth including young adults** - Lehigh County HealthChoices/Magellan fund School-Based Outpatient Services –A partnership between a behavioral health provider and Allentown School District (ASD) to provide on-site behavioral health services to children and adolescents through 4 different ASD school sites. This allows for immediate access to assessment and therapy services when needed and when consent is provided. Additional services are:

- Transition age work group that consists of community members, mental health provider agencies, community organizations and agencies, and the faith based community was created.
- Two Certified Peer Specialists, who are in their late twenties, have been identified to work with this population
- The county has partnered with The Synergy Project and the Chew St landing to promote a Thursday night transition age drop in center
- The county actively participates with the MY LIFE program, which is made up of youth between the ages of 13 and 23 who have experience with mental health, Substance abuse, Juvenile justice, Foster care.
- Lehigh County Children’s Mental Health office works with transitional age youth who have complex situations and needs and who are transitioning to the adult system. This case management service is provided by a program specialist from the Children’s’ Mental Health Office who works in conjunction with the Adult Mental Health Unit’s CHIPPs supervisor and BSU program specialist to facilitate case consultation services, participation in Individualized Educational Plans, treatment planning meetings, and referrals to housing and ancillary resources.
- In addition to case management, psych rehab and outpatient mental health services, Lehigh County HealthChoices in conjunction with Magellan under a contract with Access Services provides the Transition to Independence Process (TIP) for young adults between 16-26 years old. TIP is an empirically supported, youth driven, model developed to work with young adults experiencing emotional and/or behavioral difficulties. TIP works to engage and support young adults in their own
future planning process across five transition domains: Educational Opportunities, Living Situation, Employment and Career, Community Life Functioning, and Personal Effectiveness and Wellbeing.

- Transitional-age youth are a target population for Lehigh County’s High Fidelity Wraparound initiative and have representation on the Youth System of Care Leadership Team.
- Youth Mental Health First Aid has been provided to over 700 individuals including parents, teachers, police officers, pastors, probation officers, caseworkers, and school nurses. We sponsored an instructor certification course for Lehigh County School Districts. Allentown, Northern Lehigh, Parkland, Southern Lehigh, and Whitehall School Districts are participating along with Intermediate Unit 21, Lehigh County Human Services and Juvenile Probation. YMHFA classes will be widely available to the community and participating school district staff.

**Conclusion**

Lehigh County has worked diligently over the past year with persons in recovery, the local advocacy community and the provider community to develop a system that is truly recovery based and community focused for adults and resiliency focused for youth. Our goal is to ensure that appropriate systems are in place for people residing in the community as well as those transitioning to the adult system from the children’s system or who are returning to the community from Wernersville State Hospital or from the county jail or state prison. We recognize that we are supporting people and that this takes a community not a program. To this end, the mental health office has worked at developing connections and working relationships with community partners. This includes individuals in recovery, families, the faith based community, advocates, other governmental entities, police departments, elected officials, hospitals, providers, HealthChoices/Magellan, schools, and community members. Lehigh County remains committed to the principles of Housing First and is always looking to modify services and supports to ensure people receive the housing supports they need without having to be made ready to do so.