

WAYNE COUNTY
PUBLIC WELFARE BLOCK GRANT
STATE FISCAL YEAR 2013-14

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WAYNE COUNTY
PUBLIC WELFARE BLOCK GRANT
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I. Public Hearing Notice

Public Hearings were held on April 16, and May 7, 2013. See Appendix B, Attachment A for minutes and participation data.

II. Waiver/ Movement of Funds Among Categorical Funding Streams

A. Commitment to the maintenance of core programs necessary and/or mandated in each categorical county social service program.

Wayne County is committed to both maintain core services in all categorical county programs. However, it is Wayne County's intent to utilize all funding as flexibly as possible, consistent with the requirements of Act 80.

B. Request for Waiver:

It is our understanding that the County may move up to 25% of funding, heretofore allocated to specific any specific categorical disciplines, to other categorical programs/funding streams included in the Pilot Block Grant. Wayne County is moving funding among these funding streams. However, at this time, funds anticipated to be moved are less than the 25% threshold associated with any specific categorical funding stream. Therefore, no formal request for Waiver is included with this Plan submission.

C. Movement of funds among Categorical Programs

This plan does reflect movement of funds from the Mental (Behavioral) Health, Intellectual Disabilities, Children and Youth and Drug and Alcohol categorical funding streams to the Homeless Assistance, and Human Services Development Fund/ Human Services and Supports categorical programs, as well as to Block Grant Administration.

The movement of these funds reflects the County's desire to specifically address local prioritized social services needs as prioritized as a result of public input and our Planning Team. It is important to note that these needs are common to consumers served in all categorical programs, and include housing; transportation;

employment, bullying/prevention efforts. It is important to note that consumers associated with all categorical programs will benefit

Funds moved to administration include those to strengthen integrated infrastructure to manage the programs and include, fiscal and IT systems, cross-training, and quality management oversight accomplished in an integrated manner, coordinated across all categorical programs.

D. Concept underlying Movement of Funds: Pooling Resources, both Public and Private, to meet Common Goals of Spinning our Wheels together rather than each of us, alone:

Indeed, the movement of funds is so that the Wayne County Human Services Agency may better plan in a coordinated, unified manner to meet consumers' needs as well as its fiduciary and program quality obligations. Categorical unit directors are fully engaged and supportive of this paradigm.

Service gaps exist in all categorical disciplines for these basic consumer needs. It is difficult to coordinate efforts while working across disjointed requirements of funders (public and private), staff classifications, etc. Yet, each categorical (and Aging) have certain funds which are mandated and/or chosen to be earmarked, to meet basic needs of housing, employment, transportation, etc. As well, there are private and public opportunities, and willing community partners who have interest in provision of these basic services and who are working to generate resources to put towards the common goal, a common plan and a common roll-out of effort.

It is our intent to “pool” our resources – people, funds and other – so that all resources can be brought to bear towards a combined, coordinated plan for each of these basic needs. A mechanism to do so offered and inherent in the Pilot Block Grant allowing funding to be utilized for “generic” populations for programs which we may design specifically to meet local needs. The use of the Human Services Development Fund/ Human Services and Supports is one way, as is the “Other Housing Supports” section as well as other sections of the of the Homeless Categorical.

It is important to note that:

1. Block Grant and other resources **WOULD CONTINUE TO SERVE CONSUMERS FROM THOSE VERY SAME PROGRAMS;** and
2. Service delivery would be follow from a coordinated plan for which there is common negotiation, consensus and support, to address the common need;
3. Service Delivery Coordination and cooperation would naturally follow, as would resources;
4. Utilizing this paradigm most lends itself to the flexibility and to partnering with others to combine scarce resources with locally generated solutions to the issues our consumers and our community face.

III. County Planning Team

A. PW Block Grant Planning Team Membership

Representatives from the same sources remain in place from SFY 2012-13. A roster of membership and affiliation may be found in Appendix B, Attachment B, and Attachment C, for minutes, etc.

B. Relationship of the Planning Team to the Human Services Quality Council/ and Development of Needs their Priorities:

1. Wayne County Human Services has created a “Quality Council”. The mission of the Council is to: (a.) bring the private and public sector (including consumers and families) in Wayne County together to create a healthier community and a better quality of life for Wayne County’s most vulnerable residents; (b.) communicate and work closely with each other to resolve issues that we, together, face; and (c.) spin our wheels together, in concert, rather than separately and less effectively, each on our own.
2. The Quality Council meets quarterly. However, it has numerous sub-committees that meet continuously all year, and where much work is done by smaller groups who bring findings and seek consensus at the quarterly meetings. This forum is a dynamic venue, which allows for continuous filtering of information, adjustments of goals to real time events, synthesis of opinion, priorities and consensus to move forward.
3. The Quality Council does much its work through its sub-committees. Permanent sub-committees include: Community/Agency Education; Positive Practices; Local Housing Options Team (L-HOT); State Mandated Initiatives; Risk Management; Human Rights; Schools/Education. Ad-hoc sub-committees are established as determined by the Council Each sub-committee is active and completes substantial work toward its goals, and reports to the quarterly meeting of Council, providing information, requests for action by the Council, etc.
4. During the last six months, the PW Block Grant Planning Committee, together with the Quality Council voted to create a BG Planning sub-committee of the Quality Council, rather than a separate BG Planning team. This seemed to be the most efficient and effective decision because;
 - a) Almost every member of the Planning Team was already a member of the Quality Council and/or its subcommittee; and

- b) The cogent issues were being concurrently discussed at the Quality Council, which is well attended by stakeholders, community leaders, families, and categorical agencies. This arrangement seemed to be a better use of everyone's precious time, and is a mechanism by which the most pressing priorities seem to naturally rise to the top and encourage consensus. Thus this process becomes an ongoing, real time and grass-roots synthesis of a needs assessment.

IV. NEEDS ASSESSMENTS

Wayne County has used several strategies to identify and develop needs and their priority needs with respect to our local consumer population. Resources included the County Data set, as presented by the Department of Welfare, local census data, Categorical Agency information, information from various community providers and organization. It is of note that the Human Services Narrative (Number IV, below) also reflects the summary of the following needs, but those needs are expressed in the Narrative from the perspective of each categorical agency.

Using the mechanism of the Quality Council in conjunction with the Block Grant Planning Team (as is described above), Wayne County has identified the following priorities:

A. Housing:

1. Local Issues:

- a. Lack of sufficient affordable housing;
- b. Lack of sufficient safe, sanitary housing;
- c. Homelessness and/or impending Homelessness;
- d. Increase in "couch surfing";
- e. Insufficient funds to pay even modest rent due, in part, to the elimination of basic welfare funding benefits to single consumers. (It is of note that this group of consumers not only has limited or no access to housing, but can no longer afford to buy the essentials of toilet paper, toothpaste, sanitary products, etc. Collections are being taken around town to try to assist.);

2. Local Strategies for Housing Needs:

Through the Local Housing Option Team (L-HOT) the County has fully engaged in the last two years in developing strategies for a coordinated plan to meet the need. A housing facility of four units was purchased directed at those with Mental Illness. To date there are five families utilizing this transition facility awaiting eventual movement to Section 8 Housing for which there is generally an 18 month wait. Blended Case Management Staff remains fully engaged with these families/individuals.

There is no shelter in Wayne County. However, the Team is looking to working together to expand its arrangement with a downtown church for its “Warmth in the Night” Program. This is available during cold winter months, 7PM to 7AM the next morning. . offering hot food, a cot, blankets, a shower, and personal toiletries. It is supported by local banks, the church and its members, social service agencies, and a few small private contributions. Volunteer teams provide overnight staffing.

The L-Hot is planning to rent two apartments during the SFY 2013-14 – one efficiency apartment and one with one to two bedrooms. These would be set aside for short-term use by those identified and referred to the L-Hot by categorical social service agency and/or other agencies. The L-Hot would determine consumer priority. Funding is anticipated through Block Grant, public/private partnerships, private donations.

Longer-range strategies include the advocacy for establishment of the Act 137 Housing Program in the County so that a fund pool may be generated for use grow smaller housing alternative and initiatives, and to use funding collaboratively with Federal and State Housing agencies working with private developers to establish a broader range of public, moderate income housing options in the County. Working with neighboring Counties in this regard may also be an option for housing options, supported small and limited regional consortia.

B. Transportation:

1. Needs:
 - a. Wayne County has no public “mass transit” transportation system. There is a cab service, which is limited in scope and distance, and is often more than consumers can afford. Some consumers have bicycles, but that is difficult in inclement weather, and winter months, as well as being able to pedal on mountainous terrain, for which Wayne County is known;
 - b. The County directly operates a limited-time transportation program funded/subsidized for those “eligible” through the Commonwealth Departments of Aging, Transportation, and Welfare. Those eligible include those holding an ACCESS card and traveling to and from medical/medical related appointments, the elderly, and the disabled. A category of General Public riders may ride, but that category of ridership is not publicly funded or subsidized. Therefore, fees to the general public rider are higher than to those riders who are subsidized;

- c. Those who are not disabled, under the age of 59.9 years or who have no medical ACCESS card are not eligible for subsidized transportation, but may ride as a general public, at a significantly higher cost, and only during hours of operation. There are no regular operating hours in the evenings, or on weekends or holidays.
- d. The Wayne County Transportation System does not meet the needs of those who have evening, night or weekend shifts. This is particularly a barriers for those who are low wage earners, or disabled.
- e. Transportation which is affordable to low-income wage earners is needed for employment opportunities for those with Behavioral Health and Intellectual Disabilities, transition youth, and those underemployed or unemployed.

2. Strategies for Transportation Needs

- a. It is the intention of the County to enhance current transportation services by meeting the need for specialized or “niche” transport services tailored to meet the specialized transport needs of special populations, and or utilizing specialized modes.
- b. Block Grant Funds will be used in this venue to provide specially trained drivers, transporting at days and times specific to meet the needs of, for example, those who have developmental disabilities to work places; those with autism, etc. These funds would be used in addition to and in conjunction with, existing transportation programs/resources in a coordinated non-duplicative way. The structure of the

2.

C. Employment

- 1. Development of local employment opportunities for those who are underemployed, unemployed and lack skills/training consistent with the local economy. This target populations includes:
 - a) Transitional Youth leaving High School;
 - b) Those with Intellectual Disabilities;
 - c) Those with Behavioral Health disabilities;
 - d) Young men (18-25 years of age) leaving the Wayne County Correctional Facility;

Public Hearing participants (and Planning Team Members) have identified a mismatch between traditional job training or skill building and what is required by local employers. Wayne County’s economy is based on tourism and recreation, local agriculture, forestry products, summer camps, construction trades, and retail. Training models traditionally used

by public and private facilities for the target populations are often based on a manufacturing model and pre-supposes there will be manufacturing jobs locally. In reality, there are very few manufacturing plants located in Wayne County which once hosted many. Here are three examples of the “mismatch of what employers demand and what trainers “train for”:

- a) There are few opportunities for transitional youth in the public schools that will not go on to college, and will live locally. This may be due to lack of demand and funding to host robust vocational training. While limited training opportunities exist for nurse’s aide, auto mechanics, or basic building trades, these are not offered by all school districts. This situation is exacerbated by the fact that three districts serve 756 square miles and travel is expensive both for students and the district.
- b) For the ID consumer, traditional training might consist of putting parts of an engine component together). There are no assembly or manufacturing needs for this locally (or even in nearby communities);
- c) There is no consolidated vocational training center in the county. Two small manufacturing enterprises produce machined work and custom made furniture; no school or vocational opportunities exist for machinist, or wood-crafting.
- d) Has been clearly identified by the Planning Committee members including the District Attorney, Directors of Adult and Juvenile probation, the Wayne County Correctional Facility, killed or trained
- e) The rate of unemployment for Wayne County is 7.1% lower than that for the region at 9.2%, and the state at 7.6%. However, the Wayne County Employment/Workforce office reports that there are many Wayne County residents working part time and therefore are not fully employed. Additionally they report that there are many who have exhausted their unemployment benefits and are therefore not counted in our unemployment percentage and as a result the lower rate of employment for Wayne County may be deceiving.

In spite of these considerations, local employers are reporting to us that they cannot find willing and capable workers, workers who are trained and/or skilled, and are willing to train workers. The job slots available are not in manufacturing, but rather are associated with the local economy which includes farming, forestry, retail, tourism, and building trades. The potential therefore exists to try

to put together the target population of social service consumers, as noted above, and the opportunities which may exist in our local workforce.

2. Local Strategies for Employment:

- a. Referring to our proposed use of “pooling” funding and resources from PW Block Grant as well as other public/private sources The use of the Human Services and Supports budget category, employment is a typical example of how we may spin our wheels together. Through the Quality Council we have established an ‘Employment Coalition’. The Wayne County Employment Coalition is a community coalition comprised of educators, school systems, consumers, employment support provider agencies, the Office of Vocational Rehabilitation, Office of Behavioral and Developmental Programs and Early Intervention, Office of Developmental Programs, the Area Agency on Aging, and community businesses who work to promote successful employment, employment opportunities and supports the needs of individuals with disabilities.
- b. This has developed into a willing and positive movement in which our partners, including local farmer, are bringing product, funding and other resources to the table. We are developing employment opportunities for the target population such as farm work, retail, light food processing. Some of our transition youth are assisting in food preparation and manning operating food kiosks at our senior center which provides meals for our aging residents. The kiosks offer an opportunity for seniors to have supplementary meals or portions thereof, to bring home for their evening supper.
- c. These events have now been tied in directly to (1.) the importance of job development staff to tie target populations to specialized niches in the local marketplace of employers; (2.) the need for transport and transport modalities at alternate times and sometimes for individualized types/modes of transport than our small county system typically accommodates (i.e. specialized transport/staffing for those with autism, certain ID consumers, etc.); and (3.) the flexible use of PW Block Grant and other private-public entities to support development of job development for these target populations.
- d. Future strategies involvement the creation of a “market exchange” in which local produce, forestry and other local agricultural products, together with home craft items, and art work is brought to a local venue for processing, storage, sale and/or wholesale distribution. This project has gather initial support of the local Farm Bureau, and local restaurants who use niche produce in upscale reataurant offerings. Such a “cooperative” will help the local economy, the farming community and other who live ot have settled in the area and are making a living in the creative arts.

D. Increased Prevention Strategies with regard to Bullying and Other Prevention/Student Assistance Initiatives

For the past five years, our County has struggled to address issues of bullying. This issue is not unique to our County, and has certainly been at the forefront of national discussion in the past two years. Locally, and most unfortunately, there have been teen suicides in our community which are thought to be related, in part, to bullying. One occurred as we write this grant.

While funding for training may have been available under the former Integrated Children's Services Planning initiative, of which Wayne County was a part, the effort to grow consensus, common vision, planning and implementation was more than we could accomplish due to (a) cuts in staff funding in our schools, our local community agencies and in our county social services categorical agencies which resulted in lack of manpower to spearhead the initiative; (b) difficulty in researching bullying programs which would have the best fit for our community; (c) the great cost for many of these programs; (e) insufficient staff available to plan for sustainability in terms of dollars and sustained people resources.

Our elected County Commission, the school districts, and our justice and just-related systems have recognized the growing use of drugs/alcohol, and prescription drugs use. All are committed to, together, chip away at this problem and to keep our children and our community as a healthy place to live.

2. Local Strategies for local Prevention/Education Needs and the establishment of D&A Treatment in out local correctional facility:

- a. The Quality Council sub-committee for Community Education has identified a bullying program which they feel will be effective in our local community. It is called "Rachael's Challenge" and is so named after one of the children who lost her life in Columbine, Colorado. Efforts are currently underway to present/provide the program, county-wide, and at four school districts. Funding support and staff resources are coming through the Block Grant (SFYs 2012-13 and 2013-14), the local hospital, the school districts and other local monies. This initiative has generated enormous support in our community, as evidenced by the numbers of people and financial commitment that has already been generated.
- b. It is our intent to strengthen preventive/interventive Drug and Alcohol student programs in schools, at camps, at other community venues. In addition, we plan to strengthen our Student Assistance Teams. Plans are underway for additional and more aggressive D&A Prevention efforts in the 2013-14 year for which Block Grant funding will be used in conjunction with other fiscal and "people" resources.
- c. While this topic is not an exact fit for this section we are describing our efforts here: (1.) to demonstrate the County's commitment to the issues of Substance Abuse addiction in our community; and (2.) because the forensic population of

males ages 18-25 is a target group identified as in need; and (3.) has shown itself to be both reoffending and has a high incidence (about 70%) of addiction, mental health issues, and/or both. Treatment will begin On July 1, 2013. It will be added to the already provided services in the correctional facility of Drug and Alcohol Intervention and Education services as well as the services of a Recovery Specialist through the Wayne County Drug and Alcohol Commission. Once, released, this forensic population will immediately be transferred community treatment as appropriate, in order to assure transition service sand follow-up both of which are most likely to generate success for this consumer group. Block Grant and local County funding are being utilized in these efforts.

E. Administrative Coordinative Needs:

1. Need for general support and cross-training:

In Wayne County, all categorical are structurally located under the aegis of the County's Human Services Agency. We have operated, in fact, in an administratively integrated fashion since 1995. As programs and fiscal requirements have grown and/or changed, and as the Human Services Agency creates and develops new opportunities to further integrate, some staff support, as well as informational technology support appears to be needed. We are carefully reviewing strategies to work smarter for more efficient and effective use of current staff, and or add certain specialized staff to accomplish those efficiencies.

Our fiscal and statistical data records are detailed and exhaustive. The accuracy and integrity of our reporting is good. However, our reports, though accurate, are consistently late, as staff struggle to continually refine data, check data, maintain program and fiscal integrity, maintain accountability and guard against waste, fraud and abuse. The process is very labor intensive and time consuming, but it is also important for us to management information available for analysis to assure that all mandates are being met, that quality standards are maintain with respect to compliance, program and fiscal concerns so that are consumers (and those who pay the bill) are best served.

During the SFY 2012-13, we have analyzed our needs and sought professional assistance in this regard as well. Parts of our fiscal system are based on DOS technology. Thus, while we utilize new technology in many aspects, the DOS and the newer technology is not compatible for data transfer, necessitating duplicate entry, increased risk of error, etc. In SFY 2012-13, we have begun the process of addressing the technology issue, but more is needed. In addition, staff woks across all systems, therefore cross- training is also needed. Finally, there is a need for additional staff support with concentration on filling fiscal staff gaps, and maintaining quality assurance and compliance with state and federal requirements. Block Grant funds have supported and will support this effort, along with local funding as well. These projected costs are shown under the general Administration for the Block Grant.

2. Administrative Funding with respect to Intellectual Disabilities Categorical funding and the mandated responsibilities of the Administrative Entity:

This funding pertains to the obligations of the (ID) Administrator's Office including the general administrative responsibilities, fiscal and programmatic functions that are essential in maintaining the core services for ID Consumers of Wayne County, including Consumers that receive Base Services. This Administrative funding includes Base Maintenance and Base Supports Coordination funds; Employment Pilot funding, and Waiver Administration funds that support the AE Operating Agreement.

The funding thus identified assists and ensures that the Administrator's Office maintains the responsibility and oversight to provide for sufficient funding and resources for Consumers seeking to access Services and Supports, including but not limited to life sharing, employment, services for transition age youth; home and community habilitation, specialized supports, case management and residential services.

Administrative funding also supports the Employment Coalition, the Quality Council and the Quality Council Planning Team Subcommittee. These Committees are actively engaged in promoting, developing and providing opportunities on the Local level, including accessing resources available in the Community for Wayne County ID Consumers in support of the AE Operating Agreement and supports such requirements as HCQU, IM4Q and other oversight functions of the ID programs.

3. Administrative Funding with respect to Mental (Behavioral Health):

These costs are shown in the Administrative section of the Budget associated with "Mental Health".

V. HUMAN SERVICES NARRATIVE

A. Mental Health Services Narrative

1. Older Adults (ages 60 and older):

a. Strengths:

Wayne County Programs operate under the aegis of the Wayne County Human Services, so communication and awareness of programming among Behavioral Health (BH) and Aging staff is excellent. All staff is cross oriented and/or trained and both programs maintain On-Call (24/7) staff whose function is to mitigate crises and work together to ensure the health and safety of older consumers. The opportunity exists to weave a combination of Behavioral and Aging services to best serve the individual.

As Adults age and their needs change, their BH team often meets to review current services and explore alternative services through the Aging Office that may better meet their new needs. The Aging Office also has Registered Nurses on staff, whose consultive expertise is available and used as is needed by the BH adult staff. Additionally, a supervisory level departmental review of high risk shared cases has been initiated and now occurs quarterly (or more often, if needed).

Working with the Wayne County Coroner, and other law enforcement/justice system personnel, an ongoing review of County suicide statistics has revealed that over the past two years there has been a significant increase in older adults taking their own lives, particularly males by means of gun. This is part of a larger overall increase in suicides seen within the County. The Wayne County Behavioral Health Office is in the process of rolling out *Means Matters*, a community wide educational initiative to encourage gun owners to use cable locks on all guns, secure guns in locked cabinets and lock ammunition in a separate case or cabinet.

Additionally, educational materials are provided with information regarding depression warning signs and contact numbers for crisis services. Initial presentations have been provided to 7th and 9th graders in 3 school districts, the Wayne Information Network, (an group of human service providers within the community associated with LINK, as well as the Wayne County Public Library staff and volunteers. Currently the materials for this have been free of charge to consumers and the public who may obtain gun locks through the Sheriff's Office under Project Childsafe and Suicide Prevention Lifeline cards through SAMHSA.

b. Unmet Needs:

Housing continues to be a pressing issue for individuals of all ages throughout our Wayne County community. As the nuclear family continues to devolve and farms continue to collapse in the current economy, the tradition of multigenerational families sustaining themselves is falling by the wayside. In its place we are observing an increasing number of older adults living alone and isolated from extended family supports. This is believed to be one factor contributing to the increase in Older Adult suicides noted above.

Within the State Hospital system, Wayne County has 3 residents over age 60 who are not currently ready for discharge, but whose needs are not expected to be able to be met within the community without creating a program specific to them utilizing either CHIPP, MPP or Block Grant funding.

2. Adults (ages 18 to 60):

a) Strengths:

Wayne County has made significant strides in building a Recovery focused group of services for Adults within the community. These include the following:

- 1) New Horizons Drop-In Center with an active CSP program. Members have taken on an active role with our Agency's Quality Council, including the Local Housing Options Team (L-HOT) subcommittee. They participated this past January in Wayne County's first ever Point-In-Time (PIT) Homeless Count. They have hosted a number of Open House events to educate the community about mental illness and eliminate stigma, as well as increase participation in their program. As a Social Rehab program, this continues to be funded under available State, Federal and Block Grant funds.
- 2) Psych Rehab: The Psych Rehab Program, licensed in May 2010, has seen participation continue to grow, with the program now serving about 40 people monthly. Of these, about 20 annually are served for some period of time under Base funding with the remainder funded by CCBHO. Another provider recently transitioned their Partial Hospitalization Program to Psych Rehab and will be serving an additional 14 consumers, 3 of whom will be served under Base funding.
- 3) Blended Case Management (BCM) currently serves approximately 150 Adult consumers annually. Of these, about 10% are funded under the Block Grant due to being ineligible for Medical Assistance. This 10% includes individuals with histories of State Hospital admissions, co-occurring disorders, justice involvement and homelessness. Without BCM Block Grant funded services, they would likely utilize services at other system entry points at greater expense. The use of Block Grant funds for this service is deemed a cost effective and responsible use of monies.
- 4) Clark Summit State Hospital program integration: Of the 9 residents Wayne County currently has at Clarks Summit State Hospital, 6 are Adults. Currently two are being targeted for discharge in the coming months. The remaining 4 are not deemed ready for discharge. In 2007 Wayne County received 3 CHIPPS allocations and developed a 3 unit Transitional Living Apartment Program as part of its Housing continuum. This has greatly impacted the County's ability to transition residents of the State Hospital back to the community in a timely manner, as well as divert admissions to the State Hospital in cases where an individual may require additional supports and services in the community to

achieve and maintain stabilization. Block Grant funding in place of the previous CHIPP allocation now supports this ongoing initiative.

- 5) Therapeutic Family Support Services to Adult consumers in our community: Through CCBHO Re-investment funds, Northeast Counseling Associates began providing. Modeled after Family Based In-Home services, the intent of these services was to reduce inpatient admissions, including State Hospital admissions, while strengthening coping skills and building support systems around those individuals who were identified as 'at-risk' in their current environment. This program is about to be rolled out as an in-plan service under broader CCBHO funding, with the County providing funding under the Block Grant to those individuals who do not qualify for Medical Assistance.
- 6) Dually Diagnosed Treatment Team: Another CCBHO Re-investment program that Wayne County residents have benefitted from is the Dually Diagnosed Treatment Team through NHS. This program has enhanced the lives of consumers while minimizing or eliminating hospitalization or other institutional placement. It is important to note the level of cooperation and coordination that occurred on behalf of a consumer to address medical, behavioral, health and safety issues to allow his continued opportunity to reside in the community rather than an institutional setting. It is hoped that this team will be available to transition additional individuals to less restrictive levels of care and from treatment to home.
- 7) Local Housing Options Team (L-HOT): Wayne County's Quality Council and the Sub-Committee have taken a very active role in addressing housing issues in Wayne County. At the December 2012 Quality Council Meeting the L-HOT hosted a panel of speakers to address local housing issues, including the loss of a facility to accept emergency housing vouchers, impact of funding cuts, and the increase in requests for services. Out of this discussion arose the need for Wayne County to better document their experiences regarding homelessness. Up to this point, it appeared that information had been primarily anecdotal and that in order to access additional funding opportunities and community support there would need to be factual data and education. As a result of this meeting, Wayne County participated in its first Point-In Time Count in January 2013. Volunteers from the community, provider agencies and consumer groups turned out with State and Local Police support. Donations of blankets, coats, toiletries, food and coffee were received for distribution. Three individuals were found living in their vehicles that snowy night. The L-HOT

continues to explore ways of partnering with the community, identifying opportunities, includes grants research, the advocacy with the County for the establishment of housing funding under Act 137, and ways to partner with regional and state entities and/or developers involved in public housing development

- 8) Development of a four-unit housing facility for those with mental illness: Wayne County was able to partner with CCBHO to utilize Re-investment monies to develop a housing program that consists of a 4-unit property. Three of the units have 2 bedrooms; the other is a 1 bedroom unit. All of the units have washers and dryers. The property is on the outskirts of town but still within walking distance to providers, stores, parks, etc. A sub-committee of the L-HOT reviews applications for approval/denial when units are available. Applicants must have a mental health diagnosis and priority is given to: homeless; pregnant women; families with children; those with a physical disability, co-occurring illness or dually diagnosed; those with established ties to Wayne County.
- 9) Increased capacity building for training, competence and employment: Under the PW Block Grant, a new Capacity Building Initiative looking at employment opportunities, sustainability and building healthy communities is gradually being undertaken.

As a farming community, Wayne County has a rich history of passing down traditions, skills and knowledge. We currently have small family farms that are struggling as 'big ag' takes over the production of what used to be provided within the community. Consumers are beginning to realize that they prefer to eat foods produced locally by their friends and neighbors, that have not been shipped from hundreds or even thousands of miles away and that have not been over-processed or chemically assaulted. With that in mind, a small yet growing group has come together to begin identifying farms and buyers with the intent of developing a clearing house, or exchange.

Currently being planned and developed: (a) some small farm to fork initiatives within the schools including the use of consumers in washing, preparing home grown produce; (b) A breakfast and lunch kiosk serving County employees, as well as senior citizens at Senior Center, offered as a cooperative through Supported Employment and the Aging office; (c) Some farms hiring on identified consumers through the summer to assist with planting and harvesting; (d) opportunities for consumer employment at local farm markets stands; .

The skills that will be needed to ensure success are limitless, and range from understanding planting cycles, running mowers, developing computer billing systems, customer service, etc. As the project continues to gain momentum, more money is retained in the community that had previously been going to industrial farms outside our borders. Eventually the local farms should once again be able to produce beyond the needs of the community and look to export to surrounding communities, which opens the door to exploring opportunities for transportation of food products.

In addition to Block Grant funding, the County is also looking at a number of private and government grants specifically targeted to these initiatives to supplement available funding.

a) Unmet Needs:

Housing, cash assistance, transportation, employment and timeliness of access to SSD/I benefits seem to be the overarching issues facing our Adult consumers at this time.

Each of these issues is inter-related to the other:

- 1) Consumers are unable to obtain safe, affordable housing due to a 2 year waiting list for Housing Choice Vouchers within our County;
- 2) The employment availability for consumers, as well as adults in general within our community is quite limited in the current economy.
- 3) Lack of transportation further limits the options available. There is no public/mass transit system in the County. A small County run system funded for seniors and those with MA or persons with Disabilities exists, but the 15% co-pay for those with disabilities is beyond the affordability of many consumers;
- 4) For those seeking SSD/I benefits, the process is 18 to 24 months, during which, if they opt to take on even a part time job, they jeopardize being deemed ineligible. During this period, they have no funds for housing, transportation or even basic necessities such as laundry detergent and toilet paper, due to the elimination of cash assistance;
- 5) This group has been at increasing risk for substance abuse, homelessness, domestic violence, repeat hospitalizations

and a host of other issues. The ability of Wayne County to continue to focus on Housing and Employment related initiatives through the L-HOT, Quality Council and Employment Coalition activities and the Capacity Building Initiative described above will be imperative in assisting to stabilize this population.

- 6) More supportive service infrastructure would greatly enhance the opportunity for successful recovery for those struggling in the community and especially for those who may anticipate re-entry into the community from in-patient venues.
- 7) It is anticipated (and greatly hoped) that the new State Budget will include CHIPP funding opportunities for the Counties to apply for. Wayne County anticipates applying for these funds to facilitate the discharge of consumers from the State Hospital back to the community, as well as to enhance the infrastructure of services available within the community to divert future State Hospital admissions.

As a rural community, Wayne County lacks the capacity to sustain an ACT/PACT Team to support high risk consumers with intensive services where they live. There are currently no CRR, LTSR or similar structured and staffed residential living programs. The needs of several of the consumers currently being served within the State Hospital are such that they will require highly structured programming and supervision in order to return to the community. The addition of such opportunities to provide an extended stabilization period without requiring a State Hospital admission would benefit consumers with a significant mental illness within our community. These services would enhance the continuum available to support Recovery for all consumers.

- 8) Forensic population: The County Correctional Facility has identified a population of young men between 18 and 25 who have mental illness and/or are have co-occurring disorders. Currently, BH administrative management, assessment for both BH and D&A is currently in place in the facility, as well as some mental health and drug and alcohol treatment. However, this targeted population has not often experienced successful reintegration into the community, and has re-offended, returning, often multiple times, to the correctional facility.

- 9) Working with the District Attorney, the Warden, the Chief of Adult Probation, we have been identifying strategies to assist this population in recovery. These young men face all the issues noted above, and have the extra burden of their criminal records to overcome. It is for this reason that the development of community service supports as noted above, are critical to our community's health, and the growth of our employment initiative is critical to start people on worthwhile productive paths.

3. Transition Age Youth

- a) Strengths: The Behavioral Health Program continues to work closely with Blended Case Mgmt, ID Program, SCO provider, and CYS/JPO and local schools to identify those children who are at-risk for struggling to meet the challenges of becoming successful, productive adults.

While Integrated Children's Services Program (ICSP) funding was discontinued by the Commonwealth, the program initiatives and philosophies continue in Wayne County. The ICSP position has been transitioned to a shared position between Behavioral Health and CYS. The position includes duties of both CASSP coordination and Children's Integrated Team (CIT) coordination. The intent is that with a greater understanding of how the two systems function independent of each other, a more holistic model that best serves the adolescent/young adult while still holding true to the mandates will become possible.

For those adolescents transitioning to Adult services, the CASSP coordinator has been designated by the County as the individual responsible for maintaining current information on Transition Age Youth initiatives and programs, both locally and across the state, as well as to share any promising practices with Administration so that we can look at the feasibility of duplicating any best practices locally.

School providers and human services agencies are strongly encouraged to utilize the CIT meeting process early on in developing a support team for transitioning youth and assisting in identifying resources within the family and community that will support his or her success.

- b.) Unmet needs:

The reluctance of Transition Age Youth and Young Adults to be associated with provider agencies continues to be a barrier to their willingness to engage in services. There is a tendency, as with all adolescents, to think they know best. As a result, we often become re-engaged with this population after they have burned bridges with family, found themselves homeless, become involved with the

justice system or otherwise determined that we are one of their last options. The need to make the programming and choices more palatable to this population is as important, if not more important, than any other factor in their willingness to continue needed services through adolescence into adulthood.

In our community lack of safe, affordable housing, transportation and employment opportunities are the primary barriers to success. Continued efforts to focus on Housing and Employment initiatives as outlined in Adult services will be imperative in stabilizing this population, as well.

4. Children:

a. Strengths:

- 1) CASSP/ICSP: Wayne Co. continues to have a strong CASSP component for children's services. In conjunction with CCBHO, families and providers have been educated regarding least restrictive, community based services as alternatives to out of home placements. The CASSP/CIT meetings explore and discuss all supports and options available when a family or treatment team is moving in the direction of out of home placement.

CASSP meetings continue to be held on children receiving Behavioral Health services each time there is a change in level of care or request for renewal of funding (for those services requiring this). Additionally, efforts were made to outreach to each of the hospitals and through our Crisis Services provider to notify all admissions departments that the County expects CASSP meetings to be held on all child/adolescent admissions prior to discharge in order to ensure that services are in place quickly and that readmissions are minimized.

- 2) Family Group Decision Making (FGDM): Due to the flexibility allowable in the Block Grant, Wayne County will be utilizing Family Group Decision Making as a tool to assist families in developing strategies and supports to meet the emotional, physical and educational needs of their child while planning for the safety of the child, caregivers and community. This is an especially important tool for children with multiple hospital admissions and those at risk for out of home placement. This will be funded in conjunction with CYS.
- 3) Blended Case Management (BCM) Services: BCM services currently serve approximately 90 children/adolescents annually. This includes a small number of those who are ineligible, at least

initially, for Medical Assistance and are served under the Block Grant. Because these services facilitate the coordination and communication between treatment, education, medical and social service providers with the child and family, it is essential that this service be funded for at-risk children with multiple providers.

- 4) Quality Council: Wayne County continues to be a community that truly cares about its members. Through Quality Council and Integrated Children's Services Program meetings it is moving to observe the involvement and commitment that schools, provider agencies, Police, community partners, consumers and families have shown to the children of this community. They are willing to participate in solution focused discussions, partner in non-traditional ways and otherwise do whatever it takes to address the problems that face our children.

One issue that is being focused on is School Bullying and the related issues of self-esteem and suicide risk. The Schools/Education Sub-committee of the Quality Council is currently focusing on partnering with Wayne Memorial Hospital to bring *Rachael's Challenge* to our school districts in Wayne County. Rachael's Challenge is a nationally recognized program, arising out of the Columbine tragedy to prevent and/or redirect bullying and its devastating effects. These services are funded under the Community Services cost center.

- 5) Student Assistance Program (SAP): The Wayne County Student Assistance Program has been very active in our three school districts and this year the Wallenpaupack Area High School FAME Team received the Distinguished SAP Team Award. The Wallenpaupack School District in particular has dealt with two suicides this year.

Through SAP and additional administrative support, the school has partnered with the local Suicide Prevention Task Force to participate in an Out of the Darkness Walk. Additionally, they are requesting mental health professionals and suicide survivors to come speak with students and parents about suicide prevention, and will be participating in a number of activities on their campus and in their community to raise awareness about depression, suicide and resources available to promote prevention.

b. Unmet Needs:

- 1) Intensive community-based Children's Services: Wayne County continues to have a high number of children and adolescents in out-of-home placements in comparison to other HealthChoices

Counties. In looking at Wayne County's statistical data such as age at time of placement, diagnoses, services utilized prior to placement, etc. a pattern has unfolded revealing a need for intensive, community-based services, focused on ASD/Dually Diagnosed children. These services need to be available to children and families prior to age eight in order to address behaviors before they have led to school placement and family safety issues.

- 2) More robust continuum of care services: Wayne County has limited availability of child/adolescent services within the continuum of care. Often, waiting lists for BHRS services mean that a child will be prescribed this service but may not receive it on a timely basis or will wait for months to see a BHRS prescriber. This is not an acceptable if effective remediation is to occur, and/or may put the child or his siblings at further risk. Wayne County previously had school-based partial hospitalization programs within the County. Currently, however, there is only one center-based program within the County. The KidsPeace SITE program waiting list is often months long. Access to psychiatric care in a rural community continues to be a critical concern. This becomes especially problematic for children who have complex needs such as ASD and/or Dual Diagnosis.
- 3) Out-of-Home Placement Facilities: For those children, who do require placement outside of their homes, host homes are rarely in our own community and typically are one to two hours away, meaning a significant disruption to the child and family's normal routine to maintain contact and continuity. The nearest RTF is nearly 2 hours away.

5. Special/Underserved Populations:

- a) Individuals transitioning out of State Hospitals: Wayne County currently occupies 9 of 14 allocated beds at Clark Summit State Hospital (CSSH). There are two discharges pending, one prior to June 30th and one within 6 months due to a pending orthopedic surgery.

(1.) Unmet needs/Challenges:

- a) Loss of Personal Care Boarding Home facilities, transitional living arrangements: Wayne County has worked closely with CSSH, its Blended Case Management, Community Providers and Transitional Living Provider to ensure that lengths of stay are minimized to the greatest extent possible. At this time, our obstacles potentially include the loss of a number of PCBH providers within our community, availability of only 3-4 Transitional Living

Arrangement beds, no access to traditional CRR or LTSR levels of care, financial difficulty associated with supporting an ACT/PACT type program in a rural community.

b) Ongoing difficulty in accessing psychiatric care in this community.

c)) Justice Involved Individuals:

1) There is ongoing treatment team participation for 2 individuals currently served under Act 21;

2) County Prison inmates are provided risk assessment and psycho-social support services;

3) The County BH Office participates in Enhanced Re-entry Planning for targeted SCI inmates. All services are provided by Behavioral Health Administrative Dept. under Transitional and Community Integration Services.

d) Veterans

Wayne County interacts with Veterans in a variety of arenas. The American Foundation for Suicide Prevention of Pike and Wayne Counties hosts local support groups each month for suicide survivors. They also host an annual Out of the Darkness Walk and International Survivors of Suicide Day which the Wilkes-Barre Veteran's Hospital participates in. Both of these events are used to raise awareness of risk factors and accessing resources.

An agency staff has taken on training in providing family support to military families and is exploring starting a support group within the community to assist both deployed and returning military families to cope with the stressors this brings.

Catholic Social Services has been active with housing-related funding for Veterans that are homeless. They have available beds in neighboring Pike County for these individuals.

Recent trainings offered through OMHSAS have been disseminated to providers in order to build capacity within Wayne County to serve the Veteran population.

Wayne Memorial Hospital has worked to offer the VA Hospital in Wilkes-Barre opportunities to bring services to Wayne County in a cost effective manner to alleviate the need for residents to travel an hour for appointments. Wayne County Transportation is available for eligible residents at variable co-pays that do need transportation.

The Human Services Agency houses a Veteran's liaison that assists individuals in navigating through the various systems and services, as well as advocating on their behalf as needed.

e) LBGTTQI

- 1) Agency staff is routinely oriented with pertinent information at time of hire in accordance with OMHSAS regulations.;
- 2) Agency staff and providers have participated in trainings on this topic;
- 3) Language is included in provider contracts as mandated;
- 4) Psych Rehab Program staff have participated with consumers in OMHSAS committees regarding this topic.

f) Racial/Ethnic/Linguistic Minorities:

The Wayne County community has very limited culturally diversity at this time. Recent US Census data indicates 3.4% of blacks, 3.5% of Hispanic, and .5% Asian. However, this includes the populations in two large correctional facilities: one Federal, and one State.

Minorities living in and participating in community life reflect lower percentages of the minorities who would request or participate in community social services.

There is a small Hispanic population primarily in the Hamlin/Lake Ariel area. Most of these individuals have

self-identified as ESL and have not requested any interpreter services.

Wayne County is currently serving two families who utilize sign language interpreter services. These are currently obtained through Center for Independent Living and are somewhat cost prohibitive due to the travel time billed to the Agency with the available providers traveling 2-3 hours each way.

g) Other (if any) Dually Diagnosed Individuals

A CCBHO Re-investment program that has benefitted Wayne County residents is the Dually Diagnosed Treatment Team through NHS. The DDTT is a recovery oriented, person-centered approach to supporting individuals who are diagnosed with serious and persistent mental illness and a developmental disability. This program offers a team approach to service coordination and treatment for individuals who have encountered challenges with more traditional treatment settings. Services are provided where the individual is, at the time of need and may include the home, a local community setting such as a coffee shop, work place or provider office setting. DDTT consists of a team that includes a psychiatrist, Registered Nurse, Pharmacist consultant, Program Director, Behavioral Specialist and Service Coordinator.

This program has enhanced the lives of consumers while minimizing or eliminating hospitalization or other institutional placement. It is hoped that this team will be available to transition additional individuals to less restrictive levels of care and from treatment to home.

6. Recovery Oriented Systems Transformation

a. Priorities

1) Crisis Services Transformation

a) Mobil Crisis:

Wayne County has continued to partner with our contracted Crisis Services provider, Northwest Human Services (NHS), as well as CCBHO and Wayne Memorial Hospital to transform Crisis Services to a mobile service. Due to unanticipated staffing issues

with NHS, there have been delays in this initiative. It is hoped that this is now resolved and that this will move forward quickly.

The intent is that crisis services will begin being delivered, initially during daytime hours, in the community and at the place where the crisis is occurring. As experience is gained regarding the number of calls occurring, the time of day, the types of calls, etc., the service will expand to encompass the busiest times while keeping cost effectiveness in mind.

With Crisis Services based in the community in this manner the hospitalization rate is expected to decrease, the utilization of Wayne Memorial Emergency Room services will decrease and the distress on consumers and families will decrease as they remain in familiar surroundings. It is anticipated that as the environment shifts from hospital to community, the emphasis on supports will shift from clinical to community. Consumers and families, guided by the crisis worker, will utilize the natural supports identified in their recovery plan and utilize coping skills that have helped them overcome past struggles. With the support of the BCM and others, individuals will strengthen their ability and confidence to face challenges in their Recovery while remaining in their homes whenever possible.

With increased availability of the hospital for the more emergency need, it is also hoped that this will have a positive impact on the upward trend our community has been experiencing in suicides.

b) Telephone Crisis:

Wayne County continues to partner with CCBHO in explore the possibility of utilizing a multi-county telephone crisis provider as a cost effective alternative to the current contracted arrangement.

Time Line:

- July 1 Begin C/FST Surveys of Crisis Services;
- August 1 Mobile Crisis Services (daytime) fully initiated;
- October 1 Review of Crisis Services experience to date and any scheduling adjustments necessitated, in conjunction with Wayne Memorial Hospital;
- Decision regarding telephone crisis services in partnership with CCBHO and BHARP Counties; possible provider contract changes;
- January 1 Review of Crisis Services experience to date and any scheduling adjustments necessitated, in conjunction with Wayne Memorial Hospital;

- April 1 Review of Crisis Services experience to date and any scheduling adjustments necessitated;

NHS is currently receiving funding through CCBHO for this initiative. The County will continue to contract with NHS for Crisis Services and monitor the contract for utilization and achievement of identified targets.

The County will partner with CCBHO and/or independently contract with The Advocacy Alliance to obtain C/FST surveys. The cost is to be determined but is expected to be relatively nominal and important in terms of gauging consumer's perception of the transformed service delivery.

2) Housing/Supported Housing

a) L-HOT:

For the latter part of FY2011-2012 and the first half of FY2012-2013, CCBHO had been funding a part-time Housing Coordinator position for Wayne County in order to re-vitalize the L-HOT and focus on homeless and housing related issues within the community. With this support, the County has built strong partnerships with agencies, community members, and area businesses. It is imperative that these partnerships continue to grow and thrive and that the L-HOT continue to grow and thrive, as well.

The L-HOT will continue to be providing oversight for applicants to the Fair Ave. Housing Program (four-unit apartment facility). A special sub-committee of the L-HOT has been formed to review Fair Ave. applicants and make final recommendations for acceptance into the units as they become available. Priority is given to (in no specific order) individuals who meet the current definition of homelessness; pregnant women; families with children; individuals with documented physical health conditions, co-occurring illness, dually diagnosed; established ties to Wayne County and acts as a clearing house for housing requests, ultimately making final decisions for placement assignments in available housing units.

The L-HOT will continue to coordinate Wayne County's participation in Point-In-Time Counts. The L-HOT has been tasked with identifying revenue and funding opportunities, as well as brainstorming ways to best manage the limited resources available and maintain databases on homelessness and shelter usage.

Moving forward, it will be necessary for the County to fund this position out of the Block grant or other available funding in order to maintain this momentum. The L-HOT currently meets quarterly with the Fair Ave. Housing subcommittee meeting on an as-needed basis to review applications. It is anticipated that they will participate in the summer and winter Point-In-Time Counts on an on-going basis. The L-HOT will also be active in exploring and advocating for additional support and funding for increased safe and sanitary housing for all human services consumers. As such, they will take an active role in the regional efforts to pursue Federal, State and private funding opportunities that match the needs of the County's housing/homeless as identified through the L-HOT.

b) CHIPPS:

With the expected CHIPPS in the upcoming Budget, Wayne County plans to submit a proposal to OMHSAS requesting funds to plan for an anticipated 2 State Hospital residents. This will likely be done in partnership with Carbon-Monroe-Pike MH/MR and as such, it is unclear at this time what this plan may entail as a great deal of discussion and coordination will be necessary to assure that a quality match is made between consumers, needs, providers and location.

Wayne County has only participated in one CHIPPS initiative in the past, but experience has proven that this is a time-intensive project that requires the commitment of the Hospital, providers, families, CCBHO and the community. While the bulk of the funding for this initiative is provided under CHIPPS, the County will bear the administrative costs associated with development and implementation of the plan, coordination among providers, community outreach, etc. which will fall to Block Grant or other available funding sources.

c) Step by Step Supportive Housing Provider

Wayne County has been working closely with Step by Step, the contracted Housing Supports provider, since 2006. Initially these efforts were focused on identifying consumer goals and moving the service towards a Recovery Focused Orientation. At this time, the County is moving forward with continuing to transform this service to the SAMHSA EBP model of Supported Housing.

While it is anticipated that this will be an ongoing project, the County will develop a plan with Step By Step for quarterly monitoring strategies utilizing the Fidelity Scoresheet and Fidelity Scale to ensure fidelity with the EBP of Supported Housing by the

end of fy2013-2014. Supported Housing services are funded under the Block Grant and CDBG. It is possible that the transformation activities may impact their rate, but this is expected to be minimal. The cost to the County will be under the Administrative contract management costs and should not be impacted by this initiative.

3) Supported Employment

Since 2006, Wayne County has contracted with The Human Resource Center for Supported Employment services. With the development of the Capacity Building Initiative outlined under Adult Services, it is felt that an additional provider would be beneficial. Additionally, the County is continuing to move forward in transitioning this service to the SAMHSA EBP Supported Employment model. During fy2013-2014 provider(s) will be expected to develop a plan with the County to participate in quarterly monitoring activities as outlined in the SAMHSA Supported Employment EBP model to ensure fidelity by the end of fy2013-2014.

The contracts for Supported Employment in previous years have been underutilized as a result of economic factors, ongoing staffing issues with OVR, and transportation. It is hoped that through the Capacity Building Initiative and the transformation to an EBP, consumers will experience success in the workplace.

Costs are expected to increase for this contracted service, due to the Initiative. Some of these costs may be offset by Federal and private grants for which application is being made. The remainder will need to be achieved through the Block Grant and other available funding streams. This may necessitate the prioritizing of Supported Employment over other vocational programming.

4) Therapeutic Family Support Service Program:

This service had previously been funded under CCBHO re-investment and was modeled after Family Based In-Home Services for children. It is a therapeutic intervention for Adult consumers with frequent hospitalizations and at risk for institutionalization. With the discontinuation of CCBHO funding, it will be necessary for the County to anticipate service utilization for those consumers without insurance and to actively intervene to exhaust Medical Assistance eligibility.

With the transformation of a provider's Adult Partial Hospitalization Program to Psych Rehab, the cost savings associated with the non-MA eligible consumers is anticipated to be utilized in funding this new service. It will be necessary to closely monitor this program through service authorizations and monthly reviews with the provider, as the service is new and the service intensity will vary based on consumer need and

circumstance. However, the potential for overall cost savings through this programs success is worthwhile.

B. INTELLECTUAL DISABILITY SERVICES INTELLECTUAL DISABILITY SERVICES

Wayne County Developmental Programs works to promote the philosophies of Everyday Lives for those with Intellectual Disabilities. The philosophy stands on the concept of Self Determination. Self Determination is not just for a limited group of people. It is for *everyone* including children, young adults and older adults whether they need a lot of support or they can live on their own. It means having friends to play with as children, having jobs and serving in their churches as adults, and choosing how to spend their time in retirement. Individuals and their families want to have everyday lives that are typical of the general population. Wayne County works to build capacity within provider networks and community resources in order to provide consumers and their families with a variety of services, supports and connections to ensure the health and safety of this vulnerable population and works toward making connections between consumers and community resources to strive for an Everyday Life. Wayne County projects utilization in excess of \$245,000 of block grant funding in home and community based supports and services to include but not limited to home and community habilitation, companion, respite, family aid and transportation services. During the 12/13 fiscal year we also utilized block grant funds to provide support in a medical environment services to two consumers and home rehabilitation services to another to ensure health and safety.

CHART

SERVICES ARRAY AS REQUESTED IN BLOCK GRANT	ESTIMATED/ACTUAL INDIVIDUALS SERVED - FY 12-13	PROJECTED INDIVIDUALS TO BE SERVED – FY 13-14
SUPPORTED EMPLOYMENT	7	10
SHELTERED WORKSHOP	1	2
ADULT TRAINING FACILITY	2	3
BASE-FUNDED SUPPORTS COORDINATION	29	30
RESIDENTIAL (6400)	0	UNKNOWN
LIFESHARING (6500)	0	UNKNOWN
PDS/AWC	1	1
PDS/VF	0	UNKNOWN
FAMILY DRIVEN FAMILY SUPPORT SERVICES	0	UNKNOWN
XXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX
SERVICES ARRAY ADDITIONAL TO THOSE SERVICES REQUESTED		
HOME REHABILITATION	1	UNKNOWN
TRANSPORTATION	4	7
COMPANION	2	4
FAMILY AIDE	5	6
HOME AND COMMUNITY REHABILITATION	15	17
RESPIRE SERVICES	5	7

In addition to supporting Everyday Lives and ensuring the availability of support and services to ensure health and safety; Wayne County works to support Best Practice Initiatives for those with developmental disabilities.

1. **Supported Employment:** Wayne County works to support the ODP Employment Initiative and have successfully met our Quality management goals and increased the number of consumers competitively employed to a total of 17 individuals. The Wayne County Employment Coalition works to promote opportunities, supports and services that result in successful employment of those with disabilities. We have begun a partnership with the County Job Training Program for Summer Youth and have successfully made arrangements for 4 youth during the 2013 summer. We have also reached out to our school district transition coordinators and will embark on a joint training and education initiative for our transition age youth. Finally, while Wayne County has participated in the transition fairs hosted by our area school districts, during fiscal 13/14 we will hold our first transition fair for parents, consumers, school personnel, employers and other community stakeholders.
2. **Base Funded Supports Coordination:** Wayne County works to ensure that supports coordination services are available for all consumers with developmental disabilities regardless of funding streams. Wayne County is committed to maintaining the availability of supports coordination for all consumers in need. Base funded supports coordination funding allows for consumers who are currently in hospital or skilled nursing facilities, residential treatment facilities, intermediate care facilities for those with intellectual disabilities, state hospitals or live within the community but have private insurance or are otherwise not eligible for other supports coordination funding streams. Often times base funded supports coordination is instrumental in transition back to community settings.
3. **Life sharing Options:** Wayne County supports the ODP Life sharing initiative as we also believe in least restrictive settings and that people deserve a caring family. We have successfully met our Quality Management goal and increased Life Sharing arrangements to a total of 12 individuals. These Residential Habilitation Services provided to protect the health and welfare of individuals who reside with both licensed and unlicensed families/homes, assist individuals with developmental disabilities in acquiring, retaining, and improving self-help, socialization and adaptive skills necessary to reside successfully in home and community based settings. Services consist of support in the general areas of self care, communication, fine and gross motor skills, mobility, therapeutic activities, personal adjustment, relationship development, socialization and the use of community resources. The Wayne County Administrative Entity for Developmental Programs has a life sharing Strategic Plan that works to continually establish a culture of life sharing. We do this by always considering life sharing first when someone is seeking residential options. Additionally consumers receive information about life sharing and are asked if they are interested in pursuing life sharing at least annually during their Individualized

Support Plan meeting. Finally, we participate and attend the Regional Life Sharing Committee and work toward expanding the availability of life sharing options with our provider network..

4. Base-Funded Supports Coordination:

Base-Funded Supports Coordination is utilized to provide coordination of support Services to ensure the health and safety of those intellectually disabled individuals. Supports Coordination funding are designed to locate, coordinate, and monitor services for individuals. The Base funding for these Support Coordination services are specifically used by the Wayne County Office of Intellectual Disabilities for coordinative services to those who requirement case management services but who do not have another payer available. Base supports coordination funding is also used for those individuals who reside or are receiving treatment within ICF/ID, skilled nursing facilities, residential treatment facilities or who have private insurance.

The following SC functions define the actions associated with those roles:

- a) Facilitate team participation and ISP development;
- b) Complete quality ISPs, including critical revisions as per the timelines outlined in the ISP Bulletin and Manual. For individuals receiving services through the waivers, the *Supports Intensity Scale™ (SIS™)* and *PA Plus* assessment tool will be utilized in the ISP process;
- c) Distribute ISPs that have been approved and authorized by the AE or County Program, as per the timelines outlined in the ISP Bulletin and Manual;
- d) Locate services and make referrals to providers on behalf of individuals;
- e) Coordinate supports and services for the individual receiving services;
- f) Monitor and verify that individuals receive the quality, type, duration and frequency of services and supports outlined in the ISP;
- g) Verify health and welfare of participants through meetings with the individual and their family;
- h) Provide follow-up and track activities related to ODP approved corrective action plans;
- i) Participate in mandatory and ongoing training to enhance skill;

- j) Finalize the initial Prioritization of Urgency of Need for Services (PUNS) and update and complete the PUNS as indicated in the current *PUNS Manual* and the *Electronic Resource Guide For Supports Coordinators and SC Supervisors*;
- k) Inform individuals of their appeal rights. For base funded individuals this will occur through the County hearing process and for waiver-funded participants this will occur through the Fair Hearing process. This will occur whenever any decision or action is taken that requires rights to Due Process;
- l) Complete Service Notes in HCSIS to reflect all contracts and actions in regard to the individual and their services including assessments, reviews, actions and monitoring in a timely manner;
- m) Utilize the current the Electronic Resource Guide for Supports \Coordinators and SC Supervisors (05/19/2009), PA Dept. of Public Welfare, Office of Developmental Program.

1. Lifesharing Options

The Wayne County Office of Developmental Programs is committed to the Pennsylvania's Office of Developmental Programs Life sharing Initiative. These Residential Habilitation Services provided to protect the health and welfare of individuals who reside with both licensed and unlicensed families/homes by assisting them in acquiring, retaining, and improving self-help, socialization and adaptive skills necessary to reside successfully in home and community based settings. Services consist of support in the general areas of self care, communication, fine and gross motor skills, mobility, therapeutic activities, personal adjustment, relationship development, socialization and the use of community resources.

- a.) The Wayne County Office of Developmental Programs has a life sharing Strategic Plan. Wayne County assesses the number of people served quarterly to keep us on track of our goal to expand life sharing arrangements/opportunities. Life sharing services are also reviewed with all consumers at their Annual ISP meeting.

2. Cross-Systems Training Communications and Training:

Individuals with intellectual disabilities and a co-occurring psychiatric diagnosis often struggle with accessing quality community based services that are coordinated and effective to adequately address their specialized needs. Wayne County has been actively and aggressively working toward positive practices and ensuring community inclusive opportunities for those with dual diagnosis. Wayne County is:

- a) Working to strengthen competency through the system, by raising awareness, advocating for and assisting to create specifically designed curricula, communication and person centered planning to develop sound options for individuals in need of specialized services.
- b) Partnering with ODP and OMHSAS, State, Regional and Local Positive Practices committees, the local Wayne County Quality Council and our provider networks.
- c) Utilizing BH and County AE case review meetings, and County BH/AE/SCO/BSU case reviews to continually identify and refine service delivery consistent with the specialized and individualized needs of those with dual diagnosis, working across many systems to achieve the best service package available to produce the best outcomes possible for the consumer and his/her family.
- d) Working, through the partnership between Through County and through the use of our Wayne County Quality Council's Positive Practices, Risk Management and Human Rights sub-committee meetings, toward building early intervention and system connections.
- e) Utilizing the Statewide Positive Practices Resource Team when necessary.
- f) Is also fortunate to have access to the NHS Dual Diagnosis Treatment Team which was created through the partnership between CCBH and BHARP. The utilization of CCBHO reinvestment funding dollars resulted in the creation of this team who specialized in providing service to those with intellectual disabilities and a co occurring psychiatric diagnosis.

Wayne County strategy to provide with this specialized population is consistent and complies with:

- a) ODP Information Memo 045-12 regarding Admissions to State Operated Intermediate Care Facilities for Persons with Intellectual Disability;
- b) Required procedures required through OMHSAS regarding Admissions to State Hospitals;
- c) Recent federal legislation mandates regarding least restrictive environment options.

3. Emergency Supports:

Effective July 1, 2009 ODP implemented a Waiver capacity management process for the Consolidated and Person/Family directed Supports (P/FDS) waivers. Under the new process Administrative Entities are no longer allocated Waiver service funds to pay for Waiver services. The AE is provided with a Waiver capacity commitment which identifies the maximum number of individuals the AE may enroll in a specified Waiver at any given point in time during the fiscal year as ODP approves.

Wayne County manages and plans for unanticipated emergencies pursuant to DPW ODP Bulletin: 00-10-03, *Planning and Managing Unanticipated Emergencies* and the *AE (Administrative Entity) Operating Agreement*. If Wayne County identifies an unanticipated emergency situation, we evaluate the availability of resources (Waiver, base funds, natural and community resources and other service systems) to address the needs of the individual. If Wayne County determines that resources are not available to address the unanticipated emergency, the AE processes required paperwork for submission to the Regional Waiver Capacity manager to request emergency Waiver capacity slot to serve an eligible individual.

4. Administrative Funding:

C. Homeless Assistance

1. CHART

	ESTIMATED/ACTUAL INDIVIDUALS SERVED IN FY 12-13	PROJECTED INDIVIDUALS TO BE SERVED IN FY 13-14
BRIDGE HOUSING	0	0
UTILITY ASSISTANCE	32 households	50 households
RENTAL ASSISTANCE	21 households	35 households
EMERGENCY SHELTER	7 households	18 households
SECURITY DEPOSIT ASSISTANCE	4 households	9 households
OTHER HOUSING SUPPORTS	0	53

2. Bridge Housing:

This service is not provided at this time in the County. However, the L-HOT will be researching this service during the SFY 2013-14. due to lack of funding.

3. Rental Assistance:

The County had the advantage in the past two prior years of having been funded Federal Program: Homeless Prevention Rapid Re-housing Program via a grant through the Commonwealth's DCED. Though successful in helping our consumers and the community, the grant ended in August, 2012. Currently, the Human Services Department County is exploring a much more modest grant opportunity for such assistance. Obtaining the grant is uncertain. Thus, we have moved Block Grant Resources into Rental Assistance.

4. Emergency Shelter:

Wayne County had utilized Emergency vouchers for sheltering homeless in the past. During the fall of 2012, the last hotel in the community that was accepting these vouchers closed. Grace Episcopal Church in Honesdale offers a "Warmth in the Night" Shelter from 7pm to 7am on those evenings when the temperature or wind chill drops below zero degrees. Volunteers from the Church and community staff the shelter. It is available for the homeless, those who are stranded and those whose heating source is inadequate. There are no other shelter options within Wayne County at this time. As a result, when residents find themselves without resources, they are often referred to other communities such as Lackawanna or Monroe, placing added burden on those communities and placing our residents outside of their familiar surroundings. Currently, the County is experiencing an increase in those seeking emergency housing and hospitals requesting emergency discharge placements for inpatients.

At this time, the Quality Council L-HOT Subcommittee is exploring options for options for Emergency Shelter Care with the county, the churches, and other community organizations.

D. Children and Youth Services

1. Background:

Wayne County Children and Youth Services experienced success in several areas and attributes much of its success to positive and integrative relationships between other County Human Services agencies (Office of Behavioral and Developmental Programs and Early Intervention, Drug and Alcohol Commission and the Area Agency on Aging), the Juvenile and Adult Probation Departments, schools and private service providers. Family and child cases in common with

other agencies are frequently served with a “team” approach (the County’s Integrated Children’s Services model) so that everyone is working on the same goals and toward the same end.

Through the Needs-Based Budget, Children and Youth Services and the Juvenile Probation Department have historically shared purchased services which included Family Preservation Services/Family Support Services, SITE (Sexual Issues and Treatment Education) and the PATH After-School Program. Because of the limited public services available in this small rural county, these services, all of which are either totally in-home services or have an in-home component, have positively impacted permanency, safety and well-being for children and youth in the county.

As noted above, all of the aforementioned services have remained available to both CYS and JPO since their inception. All have been utilized to provide for the safety and well-being of children and youth in the county and to improve upon the agency’s efforts to provide permanency for those children and youth for whom return to their familial homes from placement is not an option..

The inclusion of MST, FGDM and the Housing Initiative funding in the Block Grant creates new opportunities for these valuable resources to be utilized in the County. It is the intention of Wayne County to share all three Special Grant services/practices among all Human Services agencies. For example, grandparents raising a grandchild(ren) will benefit from a FGDM conference in which individuals who are able to provide help and support would be identified and a plan for their involvement would be developed. A parent struggling with addictions who needs respite or transportation would also benefit from a FGDM conference. A family involved in the mental health system might be in need of help paying their rent through the Housing Initiative or any family involved in any system will be able to access MST for help with parenting their teens and strengthening their families – all of which could have been accessed before but only through an open case with CYS or JPO.

2. Multi-Systemic Therapy (MST):

In the second half of FY 2008-09, Multi-Systemic Therapy was added to the CYS/JPO service array through Special Grants. Youth who participated in the program, but who did not have medical assistance or did not meet medical necessity, were funded through the Special Grant funding. However, the agencies and the provider were very successful in appropriately “flipping” youth who met the criteria to Medical Assistance funding. This sometimes resulted in under-spending the Special Grant funds for this service. MST was shared between Children and Youth and Juvenile Probation and played a vital role in developing successful parenting strategies, strengthening family relationships, improving youth attitudes and behaviors and preventing out-of-home placement for youth. While MST has been, and continues to be, a valuable intervention that resulted in very positive outcomes, it is appropriate and available only to youth ages 12-17.5.

Because JPO youth entering the system tend to be older youth, the age restriction tends to be prohibitive when the JPO seeks to utilize MST as frequently as was projected. Also, children under the age of 12 cannot be served through MST.

For MST:

Objective: To avoid placement; to reunify and maintain the integrity of youth;
Description: An intensive in-home therapeutic program to empower families to provide effective parenting and supervision for the referred youth to prevent abuse/neglect, decrease substance abuse, improve behaviors, improve school attendance/performance, address delinquent behaviors and promote socially acceptable behaviors and attitudes.

Target Population: youth, aged 12 -17, who are open in CYS In-Home or JPO Services or who are in placement through either department and are nearing reunification with families.

Expected Outcomes: Placement Prevention; (b.) Improvement of Parenting Skills to include Collaborative Co- Parenting of Separated Parents; (c.) Improvement in Youth Behavior;

Numbers served and costs SFY 2013-14: 15

Cost: \$63,798.(Block Grant Special Grants)

3. Family Group Decision Making (FGDM):

In FY 2008-09, Family Group Decision Making introduced to CYS and JPO through the Needs-Based Budget. The outcomes were initially disappointing as the provider strayed from the traditional program model, took too long to move to conferences, and was unable to maintain stable staffing. For FY 2009-10 and FY 2010-11, funds for FGDM were requested and granted through Special Grants. Problems with the provider continued through FY 2009-10 and successes were minimal.

In FY 2010-11, the agency contracted with a different provider and, although it took time and effort to make changes, FGDM has become an accepted and appreciated practice within CYS and, more recently, JPO. Both departments are broadening their perspectives with respect to utilization of FGDM to include identifying and putting in place supports for families and children, placement prevention, support for kinship care, reunification, school refusal/truancy issues and transition planning and identification of connections and supportive relationships for youth leaving care.

Family consent and/or active participation present a challenge in applying the FGDM program. Wayne County is a small rural community with limited opportunity for “anonymity.” Families are very reluctant to share their “stuff” with many others – even those they may themselves have initially chosen to join

in the FGDM conversation. Families are often refuse, are reluctant, or agree and then abort the process.

More recently, and very importantly, C&Y staff has “re-introduced” FGDM as a tool for identifying individuals who are available and willing to act as supports and mentors for youth who are aging out of care, entering adulthood and without the family involvement that most other youth in our community may rely. Thus the application of the FGDM process is targeted to these transitional youth, and both youth and agency staff have identified and cultivated role models, mentors etc. in place of more traditional “family” members and adult supports.

Family Group Decision Making (FGDM):

Description – FGDM is a process which brings together a group of people significant to a child and family who make decisions and develop a plan of action to support the safety, permanency and well-being of the child(ren) and other family members. It is critical to the process that it is family driven.

Target Population – Any family or youth facing difficulties who would benefit from a group conference including family, friends, community supports or any significant others to develop a plan to establish a support system, including identified roles, that the identified family/youth can rely upon to provide assistance when needed.

Expected Outcomes – The identified outcomes for Family Group Decision Making are to ensure Safety and Placement Prevention; to increase Family/Youth Support to help parents/youth to work toward and achieve their family service plan/transition plan goals and objective; and to increase accountability and oversight of the parents/youth through their support system.

FY 2013-14:

Number Projected to be Served and Costs 26; \$43,680 (Block Grant Special Grants)

4. Housing Initiative

Beginning in FY 2009-10 and continuing through FY 2012-13, CYS requested and was approved for funding through the Housing Initiative under Special Grants. Although the funding was available to JPO, no requests were made by that department. CYS utilized the funds for emergency situations to keep children safe, maintain stability for children and their families and prevent out of home placement. Expenditures in FY 2012-13 to date included temporary emergency housing, security deposits, rent assistance, fuel oil, food and clothing.

Housing Initiative:

Objective: to prevent placement due to homelessness, safety concerns or other inadequate housing issues;

Description: (a.) assistance to families and youth with any issues that may arise with respect to obtaining and maintaining housing and necessary day-to-day living expenses. Assistance with housing needs to facilitate reunification of children in placement with their families; Assist aging out youth to secure housing or other appropriate living necessities.

Target population: Families needing this assistance in order to keep their families safe and/or intact (placement prevention), to ensure a safe and appropriate living environment for a child(ren) to return home from placement (reunification), and to assist “aging out” youth who are transitioning from placement or home o living on their own.

Expected Outcomes: to ensure safe and adequate living arrangements for families and youth.

FY 2013-14:

Number Expected to be Served and Cost: 20; \$9.945 (Block Grant, Special Grants)

E. Drug and Alcohol Services

The current substance abuse system that is available to Wayne County residents revolves around the fact that Wayne County Drug & Alcohol Commission completes level of care assessments on every individual who is seeking assistance with addiction, and that these individuals are offered a full continuum of treatment. The single point of contact for Wayne County residents seeking assistance for drug and alcohol problems originates at the screening which is done on a face to face basis or via phone contact. The screening is followed by a full DDAP Approved Level of Care Assessment.

Wayne County Drug & Alcohol Commission also provides Prevention services to three local school districts which include Wayne Highlands School District, Wallenpaupack Area School District and Western Wayne School District. The Commission also provides Court Reporting Networks (CRN’s) for all driving under the influence (DUI) offenders. We also provide Alcohol Highway Safety Classes (AHSC) consisting of 4 or 7 classes depending on the needs of the offender. We also conduct Underage Drinking Classes to educate those youthful offenders of the risks of drinking. The Commission also case manages the Medication Assisted Therapy (MAT) program.

Individuals who are referred to our outpatient provider occasionally incur being placed on a waiting list. When this occurs it is always associated with staffing concerns on behalf of our provider where staff retention has continued to be a problem.

There were 603 clients assessed for drug and alcohol abuse/addiction in Wayne County. The number of clients who completed intensive outpatient and outpatient were 238. There were 62 clients who were placed in inpatient facilities. Two days a week for the Care Management Position is paid for using the Human Service Block Grant Dollars. This allows Wayne County to meet the demand of the county residents and also meet the demand of DDAP to see all people within 7 days

Coordination within the county human services system occurs frequently. The majority of this communication and coordination occurs between both the adult and juvenile probation departments while coordination also frequently occurs between the other human services i.e. Wayne County Children and Youth Services; Wayne County Office of Behavioral and Developmental Programs and Early Intervention and Area of Aging Transportation System. The current major concern in the county is providing Drug and Alcohol Treatment services in the correctional facility. The initiative is a top priority for the President Judge in Wayne County.

Local emerging substance abuse trends that the Commission feels will impact the current service in the emergence and increase of opiates, heroin and prescription drug abuse. Wayne County Drug & Alcohol Commission has developed and initiated a Medication Assisted Therapy program which is made available to opiate addicted clients who qualify for this program.

Funding from the block grant has enabled this agency to hire an additional care manager who completes level of care assessments and does case coordination. This additional full time staff member has allowed us to meet with our consumers in a timely manner and address their non-treatment needs... It is anticipated that she will be completing approximately 275-300 level of care assessments per year. Prior to Act 80 this position was part-time. The Block Grant has allowed the position to be full time.

The Human Service Block Grant has also enabled the Wayne County Drug and Alcohol Commission to allow the Prevention Specialist to provide Parenting Classes to those seeking recovery in treatment.

1. **Older Adults (ages 60 and above)**
–The current services for all of these populations include level of care assessments and referral to appropriate treatment. The Commission contracts, for treatment to be provided, for outpatient, intensive outpatient, detox, inpatient and half-way house, medically managed and medically monitored detox. The contract with Eagleville inpatient facility has served this population most effectively. Last fiscal year we served 4 clients for inpatient level of care and 8 clients in outpatient.
2. **Adults (ages 18 to 55) – Transition-Age Youth (ages 18 through 26)/Forensic Transition Population**

We have taken the liberty of combining these two categories together due to the fact that DDAP requirements do not have the categorical of transitional youth and they are not separated out in our reports. The Wayne County Drug and Alcohol Commission is aware of the fact that individuals included in this age group of 18 through 26 is at the highest risk for addiction to present itself do to negative consequences associated with addiction i.e. legal issues, relationship problems, financial problems. Of this combined group the Commission served 253 individuals of which 131 were in the age category of 18-26. In the fiscal year 2012/2013 Forensic Treatment planning occurred. The proposal for treatment in the Wayne County Jail will began on July 1, 2013. This initiative was per the request of the Wayne County President Judge. The proposal for treatment was awarded to Carbon, Monroe, Pike Drug and Alcohol Commission Treatment Unit. The ongoing treatment will be provided to 25 inmates. National Statistics states 80% of incarnated prisoners are addicted. It is Wayne County goal that his treatment service will have outcomes of less recidivism and will lead to many positives results in all factors of the prisoner's life once they are released . The contracts that are in place to serve this population includes: Carbon, Monroe, Pike Drug and Alcohol Commission, Drug and Alcohol Treatment for Outpatient and Inpatient include: Choices, Clearbrook, Eagleville, Gaudenzia, Marworth, Pyramid and White Deer Run.

3. **Adolescents (under 18)**

In order to accommodate the special needs of this population; contracts are in place with inpatient facilities that offer age appropriate services. Current contracts are maintained with Clear Brook Lodge, Chambers Hill and Pyramid Healthcare to address short term inpatient treatment for adolescents. We also hold a contract with Drug & Alcohol Treatment Services for outpatient, intensive outpatient and partial hospitalization services. The majority of referrals for this age group go to Carbon Monroe and Pike Drug and Alcohol Commission for outpatient. Last fiscal year (2011/2012) we referred 29 adolescents to our outpatient provider and 6 adolescents to different inpatient facilities.

4. **Individuals with Co-Occurring psychiatric and substance use disorders -** In order to accommodate the special needs of this population, contracts are in place with facilities that offer appropriate services. Current contracts are maintained with Eagleville Hospital, Gaudenzia, Pyramid Healthcare and White Deer Run.

5. **Recovery-Oriented Services** – The focus is of Wayne County Drug and Alcohol Commission is Recovery Oriented System of Care. The initial phone call or contact with the agency is engaging and welcoming. The “whole” person is treated with respect and dignity from the initial intake/screening until final discharge. Wayne County SCA is a member of the BHARP Recovery Committee which includes many initiatives. Last year Wayne County received Reinvestment Dollars to hire a Recovery Specialist. The outpatient treatment provider hired the Recovery Specialist which has been a wonderful asset to enhance many clients to the road to Recovery.

F.Human Services Development Fund/Human Services and Supports:

1. Adult Services:

Wayne County uses a portion of the HSDF funding to provide in home services in the form of Home Delivered Meals to adults between age 18 and 60 years of age. These residents would not be eligible under any other funding stream. Wayne County seeks to continue to provide this service and is setting aside \$17,900 to do so.

2. Aging Services:

Wayne County will continue to use the prior levels of service and funding outlined in the above chart. The funding provides for Case-management services to the elderly and an information and referral program across all county human services. A need that has been identified in the Aging community is Adult Day Care. Wayne County is a long County, with rural and arduous roads. There is one Adult Day Care on the southernmost end of the county, making it inaccessible to the majority of consumers we serve. An Adult Day Care that is more centrally located would serve our community well.

3. Generic Services:

Generic Services include:

- a. the WINFO (Wayne Information), a coordinated, integrated Information and Referral service;
- b. Employment - to include an initiative directed to consumers across all categorical services with special emphasis on the target populations of transitional youth in C&Y and ID, those with Mental Health, the forensic population of 18-25 year olds and other who are under-employed or not employed. A job development initiative is specifically planned;
- c. Transportation – to provide “niche” transportation to those with specialized needs at non-traditional times and on non-traditional days.

VI. HUMAN SERVICES PROPOSED BUDGET AND SERVICE RECIPIENTS

(See Attached Appendix C)

Appendix A
Fiscal Year 2013-2014

COUNTY HUMAN SERVICES PLAN

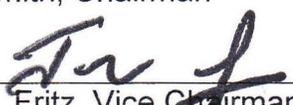
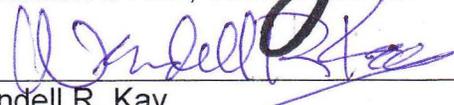
ASSURANCE OF COMPLIANCE

COUNTY OF: WAYNE

- 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 Pre-Expenditure 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 necessary eligibility records and other records necessary to support the expenditure reports submitted to the Department of Public Welfare.
- 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 handicap in providing services or employment, or in its relationship with other providers; or in providing access to services and employment for handicapped individuals.
 - 2. The County will comply with all regulations promulgated to enforce the statutory provisions against discrimination.

COUNTY COMMISSIONERS/COUNTY EXECUTIVE

<i>Signatures</i>	<i>Please Print</i>	
	Brian W. Smith	6-20-13
Brian W. Smith, Chairman		Date
	JONATHAN A. FRITZ	6-20-13
Jonathan A. Fritz, Vice Chairman		Date
	Wendell R. Kay	6-20-13
Wendell R. Kay		Date

Block Grant Public Meeting Minutes May 7, 2013

Meeting commenced at 2:10 pm

Attendees: Andy Whyte, Jim Smith, John T. Giovene, Sr., Shirley Firmstone, Tammy Redzich, Leo O'Neill, Robin Dunn, Carol Wilson, Bonnie Tolerico, Margaret Ennis, Cindy Matthews, Darlene Miller, Michelle Valinski and Lucas Heddy

Andy Whyte opened the meeting stating that at last year's meeting the topic of "housing". She plans on addressing the concerns and resources this year. Andy asked the attendees "What is most important to you"; housing, job, employment, transportation? Transportation is currently being discussed.

Andy – "Do you know of others having a hard time?"

John Giovene – "I am behind on my rent for 3 years and I live in Wayne County. I'm trying to fix the trailer. Contacted Wayne County Redevelopment and they do not repair roofs on trailers."

Andy – "Is anyone looking for employment?"

It was noted that transportation to/from a job is a big concern/problem. John stated that he uses Wayne County Transportation and the driver sometimes arrives much earlier than expected.

Cindy – "Employment for ID consumers can be an issue. More job matches could be made if transportation was in place."

Jim – "Transportation is not dependable/consistent. Rides arrive early and it's an inconvenience because I'm not ready when the driver arrives. Sometimes I'm picked up an hour early."

Margaret – "The Share Ride concept might be something to look into. Rides that are scheduled for a job can be more consistent. Can assigned drivers be designated for certain functions?"

Andy – "How are the physically handicapped being served?"

Some supplementary systems are state funded. There appears to be problems everywhere.

Cindy – "A lot of consumers are being cared for by parents, etc. I have not heard of a lot of problems. There is standing ambulance transportation."

Margaret – "Can 2 or 3 drivers be designated to driver certain consumers with handicaps? Some require more patience and drivers could be made more aware of the consumer's problems/needs."

Employment in our community is limited. Farming, logging and other possible areas/needs of employment are available. One consumer is planning to do some planting on a farm.

A question was asked if there is a possibility of employment at the local camps for cooking, cleaning, laundry, lawn care, etc.

Cindy – “An employer who hires one of our consumers doesn’t get paid unless the employee works for a certain amount of time, usually 90 days. Some employers have their regulations and requirements.”

Some camps are very receptive, some are not and are set in their ways.

Andy – “ It takes time to gather resources, ideas and make changes; but we’re working on it.”

Margaret directed this question to the consumers – “What are you getting that it working and what is important and what do you depend on?”

Mrs. Firmstone – “The recovery center is great that all can help each other.”

Carol – “Need to advocate this to the Commissioners, the community and the state.”

Mrs. Firmstone – “I spoke with my daughter’s doctor while she was in Pittsburgh and both the doctor and the nurse told me that it’s important that her treatment continues after she returns home. She needs the recovery center.”

Andy – “We each need different things at different times and for different reasons.”

Mrs Firmstone asked if anyone is aware of the Cooperaage? Robin stated that the Cooperaage is coming to the New Horizons Drop-In center for a presentation on May 28, 2013.

Margaret – “We have a lot of artistic people in our community who might be willing to do presentations.”

Mrs. Firmstone asked “Are there funds to give some businesses to offer lessons or work shops to people in our community such as ceramics, etc.?”

Margaret – “There may be grant opportunities to bring some people into the community. We could arrange for certain events to occur on assigned days.”

Andy asked consumers “Are you able to get to your clinical services?”

John “”My thereapist has been great in accommodating my needs.”

Andy to John “How is the monitoring of your medications? Is your doctor addressing your needs?”

John – “I had a change in medical coverage to Geisinger. Sometimes I have to wait 1 ½ weeks for an appointment.”

Margaret – “Is anyone limited to coming to the Drop-In Center because of the access of the rooms?”
Margaret showed Mrs. Firmstone the other rooms in the building, excluding the upstairs.

Cindy – “Has the fund raising events at Dyberry Day Camp been beneficial? We need to contact them.”

Cindy - “As of July 1, 2013, Deutsch will be accepting waiver consumers.”

The Drop-In Center has been organizing social events and are more mindful of the selections.

Margaret – “There iisn’t any access to a sheltered workshop after graduaiton. There is a need to find other opportunities after graduaiton.”

Industry in our community has changed. There aren’t any more factories that a consumer can be trained on for a particular job.

Planting, harvesting, transporting, ordering, is an opportunity for our consumers if more local farmers were to provide produce, etc. to our schools.

The owner of the Cooperage would be a good contact for job opportunities.

Cindy – “Local schools and SEEDS (upstairs at the Cooperage) are interested in helping our Agency pilot a program for job opportunities.

Andy thanked everyone for attending and adjourned the meeting at 3:40 pm.

**DPW BLOCK GRANT
PUBLIC HEARING MINUTES
April 16, 2013**

In attendance were Andrea Whyte, Administrator, Wayne County Human Services Agency; Wendell Kay, Wayne County Commissioner; Jacqueline Sturgis, Administrator, Wayne County Area Agency on Aging; Carol Wilson, Casework Manager, Wayne County Behavioral & Developmental Programs & Early Intervention; Linda Vonson, Administrator, Wayne County Children & Youth Programs; Bonnie Tolerico, Administrator, Wayne County Drug & Alcohol Commission and Laurie Barbarise, Recording Secretary.

Mrs. Whyte called meeting to order at 5:00 PM. She stated that some of the things identified from last year's meeting are:

- shortage of housing in Wayne County
- employment for young people in Wayne County
- insufficient funding for mental health; i.e. suicide is increasing in Wayne County
- lack of mobile mental health crisis responders in Wayne County
- Forensic drug & alcohol treatment facility core social services in wake of budget cuts.
- Should be more opportunities to help with parents to enlighten them.

This year we were able to purchase the Fair Avenue Apartments with the help of Medical Assistance reinvestment money. Local Housing Option Team is fairly active now and we are about to ask Honesdale National Bank to serve on it as well. The LHOT is a committee making decisions on community housing priorities and who would have housing funding, who would be placed and what would be the priorities for placement. The LHOT Committee consists of people in the community, as well as the County. It is meant to be a kind of a clearing house. Acting together are housing who need to help prioritize projects and initiatives in our community for adding housing and opportunities for safe and affordable long-term housing. It's coming along. LHOT was the team that placed people in Fair Avenue. There still is a need for housing. If we have funding availability, we could rent an apartment or even a room with a bath. That would help for the times when we use Mr. Putzi's Motel. He has an offer to lease. He will talk to the new manager of that place to see if an apartment could be set aside. They do have one unit that has a kitchen.

Commissioner Kay asked if he received an offer that he is going to accept. Mrs. Whyte stated that he led her to believe it was going to be signed. Mr. Putzi said with all due respect, he has somebody who is really interested in it. Mrs. Whyte said she would really appreciate if he mentioned to the new buyer that we might be interested in perhaps renting a unit for one year. It would be nice to rent two units. Sometimes you have families and housing is an important component.

Commissioner Kay said that ACT 137 is on the back burner because we are currently focused with Chapter 102 Regulations. He stated he would have no problem advocating for ACT 137.

Mrs. Ennis said she did not know how much the County Commissioners are familiar with the Housing Authority. When housing issues come up, it is our agency that is on the forefront for Wayne County. She is not sure we should be the one in the driver's seat. Carol Wilson has been representing us at the state levels. Mrs. Ennis thinks it is unfair. Wayne County should be in a better position if we were represented by our housing authorities. Mrs. Tolerico stated that in all negotiation meetings, they

Appendix B – Attachment A

were against BHIDEI. The Bureau of Financial Operations had to come to her defense. Commissioner Kay stated this is the first he is hearing this. He offered to talk to Mrs. Coccadrilli about it. Ms. Wilson stated that other counties at the forefront are partnered very closely with their housing authority.

Mrs. Whyte stated she is working on an employment project getting local kids involved with local industry like farming and service industry.

Mrs. Ennis discussed a crisis project working with NHS with money from CCBH.

Mrs. Whyte stated the biggest challenge we have is maintaining core social services.

Appendix B – Attachment A

Name/Consumer	Family	Organization	Phone #	Email
Paula Brennan		Wayne Highlands School District	253-3010	Brennan.paula@waynehighlands.org
James Chapman		Wayne County Adult Probation	253-5970, Ext. 2300	jchapman@co.wayne.pa.us
Bonnie Decker		Trehab	253-8941	bontonsuedec@hotmail.com
Juliann Doyle		Wayne County Office of Human Services	253-4262 Ext. 3111	jdoyle@co.wayne.pa.us
Margaret Ennis		Wayne County Behavioral & Developmental Programs & Early Intervention	253-9200	mennis@co.wayne.pa.us
Sandy Fofi		Wayne County juvenile Probation	253-5970, Ext. 2304	sfofi@co.wayne.pa.us
Mark Hoover		Human Resource Center	470-0602	Mark.Hoover@hrcinc.org
Edward Howell		Wayne County Coroner	253-4952	ehowell@co.wayne.pa.us
Wendell Kay		Wayne County Commissioners	253-5970, Ext. 1322	wkay@co.wayne.pa.us
Carol Lienert		Wayne Highlands School District	493-0068	lienert@verizon.net
Marie McDonnell		Wayne County Job Training	253-5970, Ext. 1765	mmcdonnell@co.wayne.pa.us
Tom McDonnell		Wayne County Veteran's Affairs	253-5970, Ext. 3114	jmcdonnell@co.wayne.pa.us
Justin J. Rivardo		Wayne County Correctional Facility	253-5970, Ext. 1544	jrivardo@co.wayne.pa.us
Judy Rollison		NHS	253-0321	jrollison@nhsonline.org
Joanne Romance		Wayne Memorial Hospital	253-8265	romance@wmh.org
Zoya Siuduit	X		448-2766	zbsrn@msn.com
Jacqueline Sturgis		Wayne County Area Agency on Aging	253-4262	jsturgis@co.wayne.pa.us
Debbie Swendsen		Trehab	253-8941	dswendsen@trehab.org
MaryAnn Swingle		Wayne County Juvenile Probation	253-5970, Ext. 2324	Mswingle@co.wayne.pa.us
Tammy Walsh		Wayne County Behavioral & Developmental Programs & Early Intervention	253-9200	twalsh@co.wayne.pa.us
Andrea C. Whyte		Wayne County Office of Human Services	253-4262	awhyte@co.wayne.pa.us

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MICHELLE HESSLING

being duly sworn, according to law, deposes and says that **SHE** is **PUBLISHER** of THE NEWS EAGLE, a newspaper of general circulation, established in 1956, and published twice weekly in the Borough of Hawley, Wayne County, Pennsylvania; and that the advertising notice hereto annexed was published in said newspaper on the following dates:

04/10/2013

04/13/2013

And the affiant further declares that he is not interested in the subject matter of the notice, and that all of the allegations as to the time, place and character of publications are true and correct.

Michelle R. Hessling

Sworn to and subscribed before me this 23rd day of April 2013.

Jeannie Torrnick

NOTICE
Wayne County, through its County Human Services Agency, is seeking input and comments for the Wayne County Human Services Block Grant Plan (SFY 2013-2014) funded by the PA Department of Welfare. The public is invited to attend public hearings that are being held Tuesday, April 16th, 4:00 pm-5:00 pm at the Wayne County Chamber of Commerce, 32 Commercial Street, Suite 200, Honesdale, and on Tuesday, May 7th (correction from previously advertised May 14th), 2:00 pm-3:00 pm at the New Horizons Drop-In Center, 1100 Church Street, Honesdale.

RECEIVED
APR 25 2013
WAYNE COUNTY
AREA AGENCY ON AGING

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
JEANNIE TORRICK, NOTARY PUBLIC
TEXAS TWP, WAYNE COUNTY
MY COMMISSION EXPIRES SEP 22, 2013

WAYNE COUNTY PENNSYLVANIA

MICHELLE HESSLING

being duly sworn, according to law, deposes and says that she is

PUBLISHER

of THE WAYNE INDEPENDENT, a newspaper of general circulation, established in 1878, and published daily in the Borough of Honesdale, Wayne County, Pennsylvania; and that the notice hereto annexed was published in said newspaper on the following dates:

3/26

and the affiant further declares that she is not interested in the subject matter of the notice, and that all of the allegations as to the time, place and the character of publication are true and correct.

Michelle Hessling
Michelle Hessling

Sworn to and subscribed before me this 27th day of May A.D. 2013

Jannie Torrick
Jannie Torrick

NOTICE
Wayne County, through its County Human Services Agency, is seeking input and comments for the Wayne County Human Services Block Grant Plan (SFY 2013-2014) funded by the PA Department of Welfare. The public is invited to attend public hearings that are being held Tuesday, April 16th, 4:00 pm-5:00 pm at the Wayne County Chamber of Commerce, 32 Commercial Street, Suite 200, Honesdale, and on Tuesday, May 14th, 2:00 pm-3:00 pm at the New Horizons Drop-In Center, 1100 Church Street, Honesdale.

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
JEANNIE TORRICK, NOTARY PUBLIC
TEXAS TWP, WAYNE COUNTY
MY COMMISSION EXPIRES SEP 22, 2013

**WAYNE COUNTY
PENNSYLVANIA**

MICHELLE HESSLING

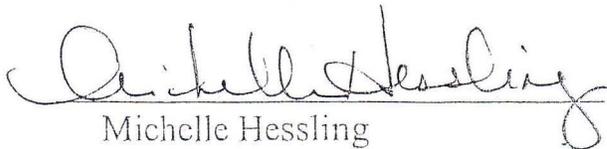
being duly sworn, according to law, deposes
and says that she is

PUBLISHER

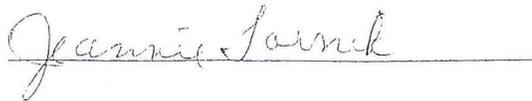
of **THE WAYNE INDEPENDENT**, a
newspaper of general circulation, established in
1878, and published daily in the Borough of
Honesdale, Wayne County, Pennsylvania; and
that the notice hereto annexed was published in
said newspaper on the following dates:

4/6, 4/9

and the affiant further declares that she is not
interested in the subject matter of the notice,
and that all of the allegations as to the time,
place and the character of publication are true
and correct.


Michelle Hessling

Sworn to and subscribed before me this 24th
day of April A.D. 2013



NOTICE
Wayne County, through its County Human Services Agency, is seeking input and comments for the Wayne County Human Services Block Grant Plan (SFY 2013-2014) funded by the PA Department of Welfare. The public is invited to attend public hearings that are being held Tuesday, April 16th, 4:00 pm-5:00 pm at the Wayne County Chamber of Commerce, 32 Commercial Street, Suite 200, Honesdale, and on Tuesday, May 7th (correction from previously advertised May 14th), 2:00 pm -3:00 pm at the New Horizons Drop-In Center, 1100 Church Street, Honesdale.

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
JEANNIE TERRICK, NOTARY PUBLIC
TEXAS TWP, WAYNE COUNTY
MY COMMISSION EXPIRES SEP 22, 2014

Quality Council Members and contact information

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Lucas Heddy	Wayne County CSP		
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Karen Rickert	Early Intervention	krickert@ptd.net	570-470-3716
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Hawley, PA 18428			
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Honesdale, PA 18431			

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Honesdale, PA 18431			

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Honesdale, PA 18431			

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Honesdale, PA 18431			

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updated 3.21.13

Human Rights Committee

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*Chairperson

Revised 4/1/13

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*Chairperson

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Devendorf, Gwen	Wallenpaupack School District	devendgw@wallenpaupack.org (tel) 570-226-4557, ext. 3058 (fax) 570-251-3146
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State Mandated Initiatives

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*Chairperson

Revised 8-8-12

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*Chairperson

Revised 7/23/12

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Community/Agency Education Task Force Committee

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Updated 6-1-13

Human Rights Committee

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Revised 4/1/13

**DPW Block Grant
Planning Team Meeting Minutes
April 2, 2013**

In attendance at the meeting were Laurie Barbarise, Recording Secretary; Juliann Doyle, Wayne County Office of Human Services; Mark Hoover, Human Resource Center; Cynthia Matthews, Wayne County Behavioral & Developmental Programs & Early Intervention; Donna McCormick, Human Resource Center; Marie McDonnell, Wayne County Job Training; Susan Schroeder, Wayne County Office of Human Services; Jacqueline Sturgis, Wayne County Area Agency on Aging; Jane Teeple, Wayne County Office of Human Services; Linda Vonson, Wayne County Children & Youth Services; Margie Weber, Wayne County Drug & Alcohol Commission; Andrea Whyte, Wayne County Office of Human Services; and Carol Wilson, Wayne County Behavioral & Developmental Programs & Early Intervention.

Mrs. Whyte opened the meeting at 4:05 PM welcoming everyone.

Housing – Mrs. Whyte stated we have made strides in the housing realm, even though there was a 10% cut in funding last year. The Office of Human Services and the Human Resource Center have been working hard to try to expand housing possibilities for those with mental health and disability issues.

Ms. Wilson explained that we received CCBH funding reinvestment dollars to purchase, outright, a four-unit property on Fair Avenue that has three, two bedroom units and one, one bedroom unit. A fourth unit is available for crisis situations. LHOT (Local Housing Options Team) is part of the Quality Council. They review applications and make determinations as to who is eligible for housing. The criterion is that the tenant must have a mental health diagnosis, because the funding comes from CCBH. Mrs. Whyte also stated that there is a property on 6th Street with three units and a fourth that is used by staff. Ms. Wilson stated that LHOT wants a broad membership representation across the community; the more people we have, the more powerful we will be. LHOT is a group that has a vested interest, active in pursuing anything related to housing. Wayne County Behavioral & Developmental Programs & Early Intervention is exploring options with the ACT 137 Housing Transfer Tax. Wayne County has not initiated this tax. Whenever there is a deed transfer, there is a fee that is applied that may be set aside to use for any County-designated housing. This would give us a pot of money as leverage to use when applying for Federal and State grants. Mrs. Whyte will meet with the County to discuss ACT 137.

Mrs. Whyte stated that Grimm Construction has made application to secure funding for subsidized housing for seniors in Hamlin which will consist of sixty-two units, designated for handicapped and low-income.

Employment – Ms. Matthews and Ms. Wilson have been working to try to generate a job market for our local farmers. There are handicapped people who need some kind of work to get them going. The idea is to create a demand from local population and businesses to purchase the local produce, thereby creating jobs for people through those venues and make our community healthier. One of the things we are looking into is working with the Human Resource Center.

Currently, we have an ala-carte kiosk where we sell breakfast and lunch. We want to try to use it as a training site to get HRC clients involved.

Mrs. Whyte stated we want to be able to order from our local farmers for filling congregate and home-delivered meal orders. Timeline, costs and transportation issues will be discussed at an upcoming meeting.

Ms. Matthews stated she has met with staff at HRC. There are some things that need to be worked through. We will have to branch out to some of our other providers as well. One of the things that we are working on too is some of our local farms can be work sites for our youth this summer. We will try to see if we can also pilot through volunteers or summer youth programs. Ms. Matthews further stated that transportation will be an issue and asked if the ACT 137 funding could be used for this service. Mrs. Whyte said that she is exploring a special contract rate aside from the Shared Ride Program. Mrs. McDonnell stated that her agency came into some money from Monroe County and if something is in place before June 30th, it could be used to pay wages.

Community treatment – Mrs. Whyte reported that we were able to move money into a drug and alcohol program which is directed toward parents who have had addiction issues to educate them on how that affects their children. Mrs. Weber stated the parents learn parenting skills they have lost along the throes of addiction. She further stated that with the Block Grant funding, they were able to hire a full-time drug & alcohol specialist trainee which has made all the difference in the world.

Prevention initiatives – Ms. Wilson reported that there were sixteen suicides last year and that there have been four suicides this year. Of the four suicides this year, three were committed by elderly persons. Of the sixteen suicides last year, six were elderly, five were by gunshot and one was by hanging. Ms. Sturgis will begin looking at some initiatives for older adults, offering gun locks for free. She stated we have less than two-hundred that we have stockpiled. If there are funds available, she would like to order gun locks.

Ms. Wilson stated she has conducted suicide training, educating staff on the warning signs of depression and limiting access to guns, which was very well received.

Increasing/alarming availability of drugs – The District Attorney has been working with the Drug Task Force. Mrs. Weber stated they are looking at a database to monitor prescriptions, doctor-hopping, etc. She reminded everyone to monitor their medications.

MH crisis services at the local ER and mobile MH crisis service – Mrs. Whyte stated that ER procedures are now a lot better than they were in acting appropriately to the person coming in with a mental health crisis. One thing that needs to be worked on is someone coming in with an overdose. She further stated we have now started a mobile crisis team. Ms. Wilson stated that staff is currently going through training and hopes to be up and running within two weeks. Mrs. Whyte explained that when a call comes in, the team can go to wherever the person is which might avoid them having to go to the ER by addressing the situation where it is happening. The idea is that the more immediately you can address the crisis/trauma, it changes the entire

dynamic. By having the mobile crisis team, you have the original supports in place to help stabilize the person.

Forensic D&A treatment services at Wayne County Correctional facility – Mrs. Whyte explained she has been working with the District Attorney, Judge, Warden and the County. She believes there is a good chance that those services might be able to come about by July 1, 2013.

Maintaining core social services – While it's been hard to maintain our services; we made it through the year.

Plans for SFY 13-14 – Mrs. Whyte stated she was supposed to get final approval in the middle of February; however, she has had no instruction for the Department on the next wrap. She is moving forward with a Public Hearings scheduled for April 16th. Ms. Teeple stated that instructions will be coming at the end of April/early May.

Input/discussions/comments – Ms. Matthews stated that in talking about this money, one of the things is Mrs. McDonnell's program for those under twenty two, so anyone over twenty two cannot get aide. If there is anything over 3%, is there any ability to mimic what Mrs. McDonnell does when she pays wages? She further stated that individuals over age twenty two are more capable of doing a lot more work on the farm and that there are some farms that are willing to hire people.

Mr. Hoover asked if there would be more flexibility with every year. Mrs. Whyte states yes; 20% the first year and 25% the following year. The challenge is maintaining core services.

Mrs. Whyte stated that the next Quality Council meeting is scheduled for Thursday, June 13th, 11:30 AM – 1:00 PM at the office of Wayne County Behavioral & Developmental Programs & Early Intervention.

Please phone or email Andy Whyte at 253-4262, awhyte@co.wayne.pa.us with anything else in the future.

With no further business to discuss, the meeting adjourned at 5:20 PM.

PLANNING TEAM COMMITTEE MINUTES
Sub-Committee of quality Council
June 13, 2013

In Attendance: Margaret Ennis, Administrator, Wayne County Behavioral and Developmental Programs and Early Intervention; Jeffrey Zerechak, Administrator, Wayne County Drug & Alcohol Commission; Bonnie Tolerico, Administrator, Wayne County Drug & Alcohol Commission; Cynthia Matthews; County Casework Manager; Betsy Mead, Clinical Research Associate, Commonwealth Medical College; Jean _____, Wayne Memorial Hospital, Donna Decker, Wayne Memorial Hospital and Marie McDonnell, Wayne County Job Training.

The meeting commenced at 1:30 PM. Andy explained the needs of most consumers across all categorical agencies – those agencies which are part of Human Services, as well as those of the medical community and schools. Housing, employment, transportation and robust community service options are important to the consumers and the community.

A more detailed discussion ensued concerning employment for target populations of C&Y transitional youth, ID transitional youth, a population of young males 18-25 in the Wayne County Correctional Facility who are re-offenders, the underemployed, and the unemployed. Cindy Matthews discussed the initiative now underway in which those with ID are working on farms and in food kiosks at the senior center. All were of the opinion that transportation still remains a major obstacle for these and other potential young workers in the target group insofar as there is no mass transit in Wayne County. The group urged that options for transportation be included as part of the block grant planning and resource priorities.

Marie McDonnell raised the issue of the need for job developers. While job coaches are available for certain of those with developmental disabilities, a job developer would serve a different function. The function of the developer would be to foster productive relationships with potential employment recruitment sites for all those in the target population, to work with employers to find niche jobs specifically tailored to the individual and target population, and the need in the workplace. The Wayne County Employment Coalition, in particular, Marie McDonnell, will explore many resources so that block grant funding, along with other funding possibilities might be available to fund such a position.

More long-term goals include the continued development of the exchange market that has been discussed with members of the Wayne Tomorrow Agricultural Committee, the local farm bureau, and various people involved in the Arts. The vision of the exchange is to create an open-type market where local agricultural and forest products may be bought, lightly processed, stored and sold along with artwork and other crafts which are a growing niche market in Wayne County (i.e. wool, woodworking, pottery, etc.). It is hoped that our target population would find such an exchange as a place where skills could be developed and paid employment be available.

The group discussed the progress made on housing thus far and continues to urge that steps continue to be made to find emergency and short-term housing for individuals and families and to work with the County on developing strategies for the use of ACT 137 monies. as well as work with community and state coalitions for the further development and/or availability of safe

and affordable housing in the Wayne County community. This is particularly important as Wayne County is one of the Marcellus Shale Coalition counties where property owners hold leases for natural gas drilling. As gas development occurs, housing options will become scarcer for our low-income consumers. The Planning Team concurred with the priorities as has been detailed in the December 13, 2013 PW Block grant Planning document for FY 13-14.

APPENDIX C
HUMAN SERVICES BLOCK GRANT PROPOSED BUDGET AND SERVICE RECIPIENTS

County: Wayne	ESTIMATED CLIENTS	HSBG ALLOCATION (STATE AND FEDERAL)	HSBG PLANNED EXPENDITURES (STATE AND FEDERAL)	NON-BLOCK GRANT EXPENDITURES	COUNTY MATCH	OTHER PLANNED EXPENDITURES
MENTAL HEALTH SERVICES						
ACT and CTT	0	0	0	0	0	0
Administrator's Office	0	179,521	179,521	0	0	0
Administrative Management	531	73,863	73,863	0	0	0
Adult Developmental Training	0	0	0	0	0	0
Children's Evidence Based Practices	0	0	0	0	0	0
Children's Psychosocial Rehab	2	5,000	5,000	0	0	0
Community Employment	6	16,080	16,080	0	0	0
Community Residential Services	3	277,246	277,246	0	5,000	19,500
Community Services	20	91,135	91,135	0	15,298	0
Consumer Driven Services	177	24,000	24,000	0	0	0
Crisis Intervention	199	10,000	10,000	0	0	0
Emergency Services	334	34,571	34,571	0	0	0
Facility Based Vocational Rehab	10	66,000	66,000	0	0	0
Family Based Services	3	23,000	23,000	0	0	0
Family Support Services	10	67,494	67,494	0	0	0
Housing Support	55	280,000	280,000	0	0	0
Other	0	0	0	0	0	0
Outpatient	116	21,250	21,250	0	0	0
Partial Hospitalization	5	8,000	8,000	0	0	0
Peer Support	0	0	0	0	0	0
Psychiatric Inpatient Hospitalization	0	0	0	0	0	0
Psychiatric Rehabilitation	17	57,534	57,534	0	0	0
Social Rehab Services	29	42,733	42,733	0	0	0
Targeted Case Management	59	49,434	49,434	0	5,000	0
Transitional and Community Integration	335	30,701	30,701	0	0	0
TOTAL MH SERVICES	1,911	1,357,562	1,357,562	0	25,298	19,500

**APPENDIX C
HUMAN SERVICES BLOCK GRANT PROPOSED BUDGET AND SERVICE RECIPIENTS**

County: Wayne	ESTIMATED CLIENTS	HSBG ALLOCATION (STATE AND FEDERAL)	HSBG PLANNED EXPENDITURES (STATE AND FEDERAL)	NON-BLOCK GRANT EXPENDITURES	COUNTY MATCH	OTHER PLANNED EXPENDITURES
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INTELLECTUAL DISABILITIES SERVICES

Admin Office	189	298,462	298,462	0	0	0
Case Management	13	85,946	85,946			
Community Residential Services						
Community Based Services	58	270,973	270,973		15,000	
Other						
TOTAL ID SERVICES	260	655,381	655,381	0	15,000	0

HOMELESS ASSISTANCE SERVICES

Bridge Housing						
Case Management						
Rental Assistance	146	23,483	23,483			
Emergency Shelter	16	1,000	1,000			
Other Housing Supports	10	52,260	52,260			
TOTAL HAP SERVICES	172	76,743	76,743	0	0	0

CHILDREN & YOUTH SERVICES

Evidence Based Services	41	107,478	107,478		5,657	
Promising Practice						
Alternatives to Truancy						
Housing	20	9,945	9,945		1,755	
TOTAL C & Y SERVICES	61	117,423	117,423	0	7,412	0

**APPENDIX C
HUMAN SERVICES BLOCK GRANT PROPOSED BUDGET AND SERVICE RECIPIENTS**

County: Wayne	ESTIMATED CLIENTS	HSBG ALLOCATION (STATE AND FEDERAL)	HSBG PLANNED EXPENDITURES (STATE AND FEDERAL)	NON-BLOCK GRANT EXPENDITURES	COUNTY MATCH	OTHER PLANNED EXPENDITURES
DRUG AND ALCOHOL SERVICES						
Inpatient non hospital	28	76,435	76,435			
Inpatient Hospital						
Partial Hospitalization						
Outpatient/IOP						
Medication Assisted Therapy	12	5,000	5,000			
Recovery Support Services	155	29,578	29,578			
Prevention	20	4,700	4,700			
TOTAL DRUG AND ALCOHOL SERVICES	215	115,713	115,713	0	0	0
HUMAN SERVICES AND SUPPORTS						
Adult Services	16	136,296	17,900			
Aging Services	38		30,000			
Generic Services	725		88,396			
Specialized Services						
Interagency Coordination						
TOTAL HUMAN SERVICES AND SUPPORTS	779	136,296	136,296	0	0	0
COUNTY BLOCK GRANT ADMINISTRATION			74,471		10,709	
GRAND TOTAL	3,398	2,459,118	2,533,589	0	58,419	19,500

Additional Information received from Wayne County in response to questions from Plan review by the Department:

Wayne County
Public Welfare Human Services Block Grant – Addendum #1(7/19/13)
Drug and Alcohol

The full-time Certified Recovery Specialist (CRS) utilizes a client centered approach in the provision of service. Clients/consumers work with the CRS to develop an individualized recovery plan which focuses on the non-treatment needs that can create barriers to their recovery and lead to relapse. The Certified Recovery Specialist meets with clients/consumers both in the office and in the community. Since an individualized approach is employed, services vary based upon client need. Listed below are some of the most common services which have been provided to clients/consumers since the inception of the service.

- Assists clients with overcoming potential barriers to accessing 12 step meetings. This can include accompanying clients to their first meetings, until they establish a comfort level with the process and make connections.
- Contacts clients prior to their discharge from inpatient treatment to establish a rapport and to ensure they have a CRS appointment close to their discharge date as possible.
- Educates family members as to their role in the client's recovery and provides information about support services available to them.
- Facilitates recovery education groups for clients involved in the SCA's MAT-Suboxone Program.
- Accompanies clients to the County Assistance Office who may have difficulty reading or writing in order to assist them with obtaining or renewing benefits.
- Offers support and coaching to clients and families who may be accessing inpatient treatment for the first time.

- Assists clients with job searches, resume writing and interview preparation.
- Assists clients with linkages, referral and follow-up to mainstream community resources such as CareerLink, Housing Authority, Food Pantry, Transportation services.

The Certified Recovery Specialist also provides outreach services in order to increase community awareness of recovery issues and the services that are available to support recovery. Outreach is provided in the following community locations:

- Wayne County Public Library's - GED Program
- The Wayne County Correctional Facility
- Mental Health Drop-In Center

- Wayne Memorial Hospital
- Wayne County Assistance Office
- Varying physician's offices