

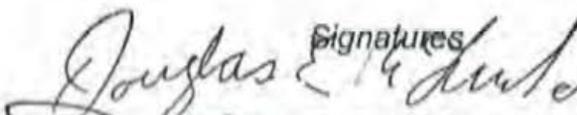
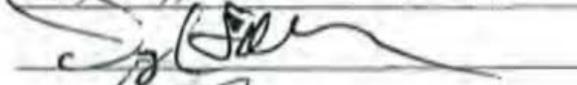
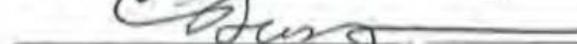
Appendix A
Fiscal Year 2017-2018

COUNTY HUMAN SERVICES PLAN
ASSURANCE OF COMPLIANCE

COUNTY OF: Bradford

- A. The County assures that services will be managed and delivered in accordance with the County Human Services Plan submitted herewith.
- B. The County assures, in compliance with Act 80, that the County Human Services Plan submitted herewith has been developed based upon the County officials' determination of County need, formulated after an opportunity for public comment in the County.
- C. The County and/or its providers assures that it will maintain the eligibility records and other records necessary to support the expenditure reports submitted to the Department of Human Services.
- D. The County hereby expressly, and as a condition precedent to the receipt of state and federal funds, assures that in compliance with Title VI of the Civil Rights Act of 1964; Section 504 of the Federal Rehabilitation Act of 1973; the Age Discrimination Act of 1975; and the Pennsylvania Human Relations Act of 1955, as amended; and 16 PA Code, Chapter 49 (Contract Compliance regulations):
 - 1. The County does not and will not discriminate against any person because of race, color, religious creed, ancestry, origin, age, sex, gender identity, sexual orientation, or disability in providing services or employment, or in its relationship with other providers; or in providing access to services and employment for individuals with disabilities.
 - 2. The County will comply with all regulations promulgated to enforce the statutory provisions against discrimination.

COUNTY COMMISSIONERS/COUNTY EXECUTIVE

<i>Signatures</i>	<i>Please Print</i>
	Date: 6/8/17
	Date: 6/8/17
	Date: 6/8/17

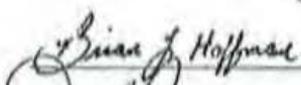
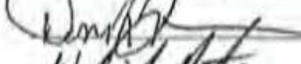
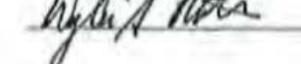
Appendix A
Fiscal Year 2017-2018

COUNTY HUMAN SERVICES PLAN
ASSURANCE OF COMPLIANCE

COUNTY OF: Sullivan

- A. The County assures that services will be managed and delivered in accordance with the County Human Services Plan submitted herewith.
- B. The County assures, in compliance with Act 80, that the County Human Services Plan submitted herewith has been developed based upon the County officials' determination of County need, formulated after an opportunity for public comment in the County.
- C. The County and/or its providers assures that it will maintain the eligibility records and other records necessary to support the expenditure reports submitted to the Department of Human Services.
- D. The County hereby expressly, and as a condition precedent to the receipt of state and federal funds, assures that in compliance with Title VI of the Civil Rights Act of 1964; Section 504 of the Federal Rehabilitation Act of 1973; the Age Discrimination Act of 1975; and the Pennsylvania Human Relations Act of 1955, as amended; and 16 PA Code, Chapter 49 (Contract Compliance regulations):
 - 1. The County does not and will not discriminate against any person because of race, color, religious creed, ancestry, origin, age, sex, gender identity, sexual orientation, or disability in providing services or employment, or in its relationship with other providers; or in providing access to services and employment for individuals with disabilities.
 - 2. The County will comply with all regulations promulgated to enforce the statutory provisions against discrimination.

COUNTY COMMISSIONERS/COUNTY EXECUTIVE

Signatures	Please Print	Date
	BRIAN L. HOFFMAN	6-13-2017
	Donna JANNONE	6-13-2017
	Wylie S. NORTON	6-13-17

Appendix B
County Human Services Plan Template

PART I: COUNTY PLANNING PROCESS

I. County Planning Team

1. The planning group consists of Human Service Agency Department Heads, staff of mental health provider agencies, mental health consumers and consumer advocates, and provider agencies of the other Human Service Agency departments. The meetings are convened by the Human Service Agency Administrator at least bi-annually but more often whenever indicated.

2. The Bradford & Sullivan County Mental Health & Intellectual Disabilities Advisory Board is a forum for need identification and input into the mental health planning process. The advisory board meets on a quarterly basis and is attended by the County MH Director and MH/ID Administrator all of these meetings are open to the public. The board is comprised of community representatives of various groups and interests and includes a high school guidance counselor, the Sullivan county CYS director, a PHD Psychologist and former Penn State Professor, two MH consumers (one affiliated with the Main Link), a nurse, former school teacher, the parents of two individuals with intellectual disabilities, and LMSW, the father of an individual with TBI, and two members of the general public who are also involved with other groups. Additionally, staff members of the Administrative Entity, Mental Health BSU, MH case Management and the Supports Coordination division meet frequently providers and consumer groups to review and discuss issues in services and service delivery. These meeting are usually held at the Main Link which is a consumer run business providing Certified Peer support, employment readiness, drop-in, suicide prevention, and general life skills development for adolescents and adults with MH and/or ID.

The Human Service Agency administrator meets with the H.S.A. department heads on a weekly basis. The inter-department meetings allow for joint planning activities as well as information sharing. The Human Services Director participated as an "Expert Facilitator" working with the United Way in reviewing their county needs assessment.

8The County Human Services Director (MH/ID Administrator) also has oversight of the CYS and D&A Divisions. In the role he identifies gaps in services and supervises collaboration and coordination of services to meet the community needs.

3. The Director of Human Services (also serves as the Bradford/Sullivan County MH/ID Administrator) meets with provider agencies- including mental health service providers- on a monthly basis for the purpose of sharing information and identifying gaps in service delivery, barriers to service access, and the need for service expansion and the development of new services. Through this collaborative process the County has been able to identify where community supports are most needed and how they can be addressed. Through a robust Supportive Living Program the County continues to be able to transition individuals from Clarks Summit back into the community as soon as they are identified as being ready and are able to maintain these individuals in the community for extended periods which has allowed the County to stay well below the hospital's bed cap. We expect to increase funding for this program this fiscal year. Also, the County is participating in the development of an enhanced personal care home for MH clients which will allow them to maintain a greater level of community involvement as opposed to being placed into a nursing home or returned to the State Hospital. The Administrative Entity continues to fund home and community based services and continues to develop life sharing placements to avoid group home or institutional placements. The County has long been a leader in this practice.

4. As stated above, the County is participating in the development of and Enhanced Personal Care Home using CHIPP funding. We are also increasing funding for the Supportive Living Program to help

stabilizing their staffing to better support our MH consumers living in their own apartments and homes. We are also hoping to reduce the numbers of suicides through funding for QPR and Mental Health First-aid trainings for schools, first responders, and the general public as well as the Zero Suicide initiatives. The County, working with the SCA is planning to use some of the BHSI funding to provide the first Vivitrol injection for opiate addicted individuals being discharged for the county correctional facility.

5. The Human Services Director formerly meets with the Joinder Board Quarterly and the Bradford County Commissioners every second and fourth Mondays of every month and with the Sullivan County Commissioners as needed/requested. Commissioners for both Counties are members of the MH/ID Advisory Board. All contracts, letters of agreements etc., are reviewed and signed by both Boards of Commissioners.

PART II: PUBLIC HEARING NOTICE

1. A copy of the newspaper announcements for the May 08, 2017 HSDF and the May 15, 2017 County Plan Public Hearings soliciting community input for the annual plan is attached.
2. Attached please find summaries and attendance sheets of the Public Hearings.
3. It should be noted that in the formal public hearing, no needs were identified

PART III: CROSS-COLLABORATION OF SERVICES (Limit of 4 pages)

For each of the following, please provide a description of how the county administers services collaboratively across categoricals and client populations. In addition, please explain how the county intends to leverage funds to link residents to existing opportunities and/or to generate new opportunities.

Years ago, the County gathered Children and Youth Services, Mental Health, Intellectual Disabilities, Early Intervention, Child Care Information Services, the Single County Authority, MH Case Management, and the ID Supports Coordination Group together to form the County's Human Services Division. All of these departments are in the same building and are under the direction of the Human Services Director who also serves as the MH/ID Administrator. All of the Department Heads meet at least weekly, as a group, with the Human services Director to discuss issues and coordinate service delivery. In addition to these meetings, the free exchange of ideas and coordination of services is a daily on-going process between the staff members of the departments.

In addition to the collaboration between these departments, the departments also do outreach to the various providers. Meetings with provider representatives occur weekly at the Main Link to review difficult cases and ascertain the best resources and approaches. These meetings have resulted in sharing cases to bring the strengths of different agencies into play.

Employment: The county MH department works closely with the Main Link to provide employment readiness opportunities to various groups of consumers. These programs include the services of an employment specialist to design and develop programs and resources to individualize the training to the consumer. The opportunities can range for job search techniques up to and including actual work experience at the Furniture Link. These services are not just available to MH consumers as individuals from the D&A Treatment Court, and persons with an intellectual disability have also been served.

Housing: The County Human Services Division works closely with the Local Housing Task Force, the Housing Authority, and the Local Housing Options Team and is the Local County Authority for the HUD program (there are no eligible housing units at this time). Additionally, the County funds a Supportive Living provider to help with placement in apartments. Also, the County provides rental assistance through both the Gap Program and BHARP funds.

PART IV: HUMAN SERVICES NARRATIVE

MENTAL HEALTH SERVICES

The discussions in this section should take into account supports and services funded (or to be funded) with all available funding sources, including state allocations, county funds, federal grants, HealthChoices, reinvestment funds, etc.

The Bradford & Sullivan County Office of Mental Health (COMH) continues to coordinate and monitor the provision of mental health treatment and support services to the residents of the two counties. Concern Counseling, Inc. and Northern Tier Counseling agency are the two psychiatric outpatient clinics available to mental health consumers in Bradford and Sullivan Counties and both clinics are fortunate to have psychiatric coverage available through the medium of tele-psychiatry. The availability of nurse practitioners who may prescribe to meet the needs of mental health consumers has been a helpful addition to the treatment services available to mental health consumers. "The Center for Holistic and Integrative Mental Health" in Athens, Pennsylvania; has been offering outpatient services along with medication management. The Robert Packer Hospital Behavioral Science Unit provides brief inpatient services and adult partial hospitalization services to our community.

The local mental health recovery movement continues to be very active and The Main Link is the locus for that movement. The Main Link membership has been providing mental health Peer Support since calendar year 2000 and Forensic Peer Support since February of 2004. The Main Link provides Drop-in services to mental health consumers through its centers in Sayre, Pennsylvania and Towanda, Pennsylvania and through its Mobile Drop-in service in Dushore, Pennsylvania. The Main Link provides a Drop-in Service to adolescents at its Sayre and Towanda sites after adult mental health consumers have finished using the sites.

The Main Link employs the services of a qualified Question-Persist-Refer (QPR) trainer, Ms. Suzanne Urban, MSN, to provide training to community groups as part of its suicide prevention activities. Ms. Urban has trained over one hundred community members including a senior nursing student class, corrections staff of the Bradford County Correctional Facility, and mental health Peer Support Workers. Our suicide prevention/anti-bullying activities include a number of public service radio announcements devoted to those activities. The number of completed suicides has remained the same from the year 2015 to the year 2016.

The Main Link started a collaborative effort in 2014 to further community outreach with two county psychological services associates who conduct those activities at the Bradford County Jail. This effort has continued through 2015, 2016 and 2017 and targets community based organizations, covering a variety of demographics.

The Main Link continues to work with COMH on the "Zero Suicide Initiative". We continue to meet as a group quarterly. The Robert Packer Hospital Behavioral Science Unit has announced that all Personal Care Physicians in the Guthrie network will ask each visiting patient if they are thinking about suicide. If the response is positive then a suicide assessment will be implemented and referrals generated.

The Main Link continues to provide Employment Assistance Services including placement in competitive employment via a strength-based approach, employment training, continuing education assistance, and assistance in obtaining a driver's license. Employment services are provided by mental health consumers to their peers. Over the past fiscal year there have been twenty one (21) referrals to this program, nineteen (19) individuals enrolled, five (5) of which are involved in the criminal justice system and two (2) who are considered teenagers. Ten (10) individuals have worked at the Main Link Used Furniture Store, seven (7) gained employment and thirteen (13) were discharged.

Psychiatric Inpatient Treatment: The County budgeted \$5,000 for this service. There were no county funded inpatients during the course of FY 2016-2017.

Psychiatric Outpatient Clinic: The County budgeted \$5,000 for this service and there was one person receiving county funding during the course of FY 2016-2017. This individual utilized the services of Concern Counseling Inc.

Psychiatric Partial Hospitalization: The County budgeted \$5,000 for this service. There was one county funded partial hospitalization patient during the course of FY 2016-2017. This consumer utilized the services of the Robert Packer Behavioral Science program.

Crisis Intervention Services: The County contracts with Concern Counseling Services for Crisis management. This agency provides walk in, telephone and mobile crisis intervention services. There were one hundred twenty two (122) county funded crisis intervention service recipients during the course of FY 2016-2017.

Emergency Services: Forty four (44) persons received county funded mental health Emergency Services during the course of FY 2016-2017. The County currently has seven (7) legal delegates available, four (4) during office hours and three (3) after office hours and on weekends.

The mental health Targeted Case Management (TCM) program continues to work with a variety of provider agencies in the county in order to ensure the implementation of recovery ideals, the coordination of and satisfaction with services for our consumers. TCM continues to offer on-call services in the evening and on weekends which serves as a diversionary measure to hospitalizations. Case managers remain available to their consumers during working hours as well. There are currently one hundred sixty eight (168) consumers receiving Targeted Case Management services along with seventeen (15) consumers who are wait listed. The COMH has been in the process of hiring a Caseworker one and a Caseworker two in order to fill these empty positions.

We have seen a reduction in school referrals to the mental health Student Assistance Program (SAP) that may be related to the decision by some school districts to employ the services of mental health professionals in their schools. The availability of psychiatric time remains limited in this geographic area.

The Bradford & Sullivan County Mental Health and Intellectual Developmental Advisory Board continues to meet quarterly in order to review existing services and to discuss needed services.

a) Program Highlights:

Highlight the achievements and other programmatic improvements that have enhanced the behavioral health service system in FY 2015-2016.

The Bradford County Mental Health and Intellectual Developmental Disability Departments continue to join services to meet the needs of developmentally disabled individuals who are also challenged with a mental illness. The dual-diagnoses program has received the support of both the Office of Development Programs and the Office of Mental Health and Substance Abuse Services. All residents of the program receive Blended Case Management services and are further eligible to receive other mental health services such as Peer Support, Supportive Living, and Community Health Liaison services. Allied Services, The Main Link, Community Care Behavioral Health, Northwestern Human Services and the two Human Service Agency departments continue to review the progress of the dual-diagnoses population every four (4) weeks, during an interagency planning meeting. The Health Choices managed care entity (currently Community Care Behavioral Health) regularly attends that meeting along with The Main Link, Allied Services, the CHIPP Coordinator, Targeted Case Managers and Peer Support Specialists.

All individuals possess a degree of resiliency, and all individuals have the capacity for recovery. The mental health system continues to develop and further promote resiliency in all individuals with serious mental illness and support their unique recovery plan. It is crucial for consumers to be encouraged to take vital roles in their recovery. The staff at the Main Link offer Community Education in order to increase awareness, reduce isolation, break down perceived stigma attached to treatment and mitigate barriers to receiving help. The COMH will continue to work with The Main Link and local CSP's to increase public awareness through outreach to media, schools, physicians' offices, municipalities, houses of worship, and law enforcement regarding mental health issues, and access to services available. The COMH will work with the Main Link and their Peer Support Specialists in continuing an outreach program for transition age individuals, adults and older individuals who are hospitalized at the behavioral science unit at the Robert Packer Memorial Hospital. The rationale behind this approach is that some of these individuals are less likely to be aware of the supports that are available in the community. The purpose behind the implementation of such a program is to reduce recidivism and increase diversionary measures.

The Main Link had two (2) staff trained in Mental Health First Aide hence most staff who are employed at Bradford County Human Services including Children and Youth Services have participated in this training. Three (3) trainings have been offered through Bradford County Human Services to various county agencies and employees. The Main Link is now offering the training to both Bradford and Sullivan County Emergency Management System and our local police forces.

The Main Link is working with CCBHO on the Self-Directed Care Initiative. This funding has come from re-investment dollars via BHARP, BHAU and CCBHO. Eleven (11) consumers are participating in this initiative.

The Main Link is continuing a recovery group called "In the Moment Mindfulness Group". In the Moment, is a group that introduces and encourages the use of mindfulness techniques to enhance satisfaction in a person's life. Participants explore subjects such as mindfulness, self-compassion, human connection, awe, gratitude, and meditation. Participants are encouraged to practice and discuss the weekly topics. Groups are held at both The Main Link Drop-In Centers and are open to everyone. Many people have found that mindfulness and self-compassion enhance life perspective, increase calmness and focus, and assist in being present. This group is not counseling, nor facilitated by a mental health professional.

The Main Link has initiated two (2) teen drop in centers, one (1) in Towanda, Pennsylvania and one (1) in Sayre, Pennsylvania. These centers offer supervised internet access, cooking and eating a home-made meal, homework assistance and community outings. From this initiative a greater need for adolescent peer support has become evident. At this time the Main Link has nineteen (19) adolescents on their caseload and is maintaining a waiting list of ten (10) adolescents.

The Sullivan County School District, in cooperation with Community Care Behavioral Health (CCBH) and the COMH is in the process of Request for Qualifications (RFQ) for Community and School Based Behavioral Health (CSBBH) Team program for children, adolescents and their families. This program should be implemented by the 2017-2018 school years. This program is projected to be able to accommodate twelve (12) to twenty four (24) families in Sullivan County. This service is available to consumers who are children and their families.

b) Strengths and Needs:

Please identify the strengths and needs specific to each of the following target populations served by the behavioral health system:

1. Older Adults:

Strengths:

The Main Link's QPR training has been provided to the local Area Agency on Aging while plans go forward to offer the training to other first responders and senior centers. We also have plans to implement community outreach through other community organizations that may serve our older adults. At this time our case management unit is serving seventeen (26) older adults.

Needs:

Older adults are under-represented in the public mental health system of care and treatment. Older adults are more likely to seek care from primary care physicians but unlikely to communicate feelings of emotional and psychological distress in that setting. Loss, role discontinuity, social isolation, and especially poor physical health become red flags pointing to depression, psychic pain, and the possibility of suicide.

The greatest difficulty facing our older population is the lack of local MH and D&A Medicare providers. Some of our older adults are required to go out of the County for treatment and some even need to cross into New York for treatment. Some of these trips can take several hours one way. Obviously, many individuals are unwilling or unable to make the trip.

2. Adult Services

Strengths:

There are two licensed Psychiatric Outpatient Clinics available to the residents of the two counties. The Northern Tier Counseling agency is able to provide psychiatric services to the Medicare-Medicaid dual-eligible population, as it has psychiatric time available on site. Both the Concern Counseling, Inc. and Northern Tier Counseling agencies make constructive use of tele-psychiatry in their service delivery systems. . "The Center for Holistic and Integrative Mental Health" in Athens, Pennsylvania; has been offering outpatient services along with medication management.

The Northwestern Human Service agency provides Health Care Liaison services to individuals who are challenged by both serious mental illness and medical co-morbidity. The service is mobile and assists consumers in understanding their medical conditions as well as their psychiatric disorders. The service provides education on medications, their uses, and their side-effects. The service is staffed with two master's level clinicians who are able to gauge the capacity of their clientele to assume responsibility for the management of their own health and therefore assess how much support an individual may require. Health Care Liaison staff are available to mental health consumers to join them in their medical appointments. Twenty nine (29) authorizations were approved by the COMH during the last fiscal year.

The Allied Services agency provides Supportive Living Services to mental health consumers in their homes and communities. Services include training in the use of community services such as transportation and shopping, budgeting, bill-paying, maintaining a domicile, etc. Eighty two (82) authorizations were approved by the COMH during the last fiscal year.

The Main Link membership provides a number of Wellness, recovery and supportive services to mental health consumers including those who are accountable to the criminal-justice system. The Main Link provides a number of trainings to mental health consumers, community agencies, and the public.

Supported Living Services, Health Care Liaison Services, Targeted Case Management Services, and Peer Support Services are coordinated via an interagency collaborative that meets on a weekly basis at the Main Link. A Community Care Behavioral Health High Risk Care Manager participates in that forum.

Needs:

Although there has been a net gain of providers, psychiatric coverage is still at a premium and availability is critically lacking. As a result, other MH services are also inadequate to truly meet the needs of the population in a timely fashion.

3. Transition-age Youth

Strengths:

For those individuals who have remained in treatment, the CASSP Coordinator, TCM and the Main Link have been instrumental in keeping them engaged in treatment. The Main Link provides employment training and life skills activities. This helps the individual to develop additional strengths and provides a greater likelihood of successful integration into the community. The CASSP Coordinator schedules interagency meetings in order to assist these individuals with discharge planning from out of home placements and gathering needed supports to facilitate recovery and strive for independence. These supports may include peer support, outpatient services, medication management, OVR etc. The CASSP Coordinator along with the CHIPP Coordinator and/or Targeted Case Management would continue to coordinate the movement of Transition Age Youth into the mental health system of care for adults. The COMH will work with the Main Link and their Peer Support Specialists in continuing an outreach program for transition age individuals, adults and older individuals who are hospitalized at the behavioral science unit at the Robert Packer Memorial Hospital. The rationale behind this approach is that some of these individuals are less likely to be aware of the supports that are available in the community. The purpose behind the implementation of such a program is to reduce recidivism and increase diversionary measures.

Needs:

Bradford and Sullivan Counties struggle with keeping our transition-age youth in the county due in part to lack of employment and in part to a lack of community activities. While the gas exploration created many jobs, most of the positions required skills that few in the area possessed. With the decline in gas drilling, even these jobs are quickly disappearing. For those youth who remain, many had CYS involvement and upon aging-out declined services and would not re-enter services until they were in crisis or involved with the criminal justice system. At this time, all of the services available are offered.

4.Children Under 18

Strengths:

The Children & Adolescent Service System Program (CASSP) Coordinator continues to participate in Interagency Service Planning activities for the population served. The number of children who have been placed in a Residential Treatment Facility, (TFC) or Community Residential Rehabilitation Host Home (CRR/HH) has decreased from approximately fourteen (14) at the beginning of this fiscal year to seven (7) at the end of this fiscal year. The county currently has four (4) Behavioral Health Rehabilitation Service (BHRS) providers, three (3) Family Based Mental Health (FBMH) providers, one (1) partial hospitalization program and, one (1) Therapeutic Foster Care (TFC) provider. The CASSP Coordinator continues to work with these providers, the CCBHO care manager, the eight school districts within the joiner and the BLAST Academy (IU17) on diversionary measures with regard to out of home placement.

The CASSP Coordinator would continue to facilitate all mental health placement activities involving children and adolescents except those Residential Treatment recommendations that are initiated by the Robert Packer Behavioral Science Unit. The CASSP Coordinator along with Targeted Case Management would remain an advocate for the target population and their families. The CASSP Coordinator would continue to monitor the status of children and teens in Residential Treatment Facility (RTF) placements and Community Residential Rehabilitation Host Homes and advise the Administrator of any placement complications and the transition of these youth back into their communities. The CASSP Coordinator along with Targeted Case Management would continue to facilitate Respite Care arrangements for those families medically identified as being able to benefit from this brief intervention.

The COMH currently contracts with Northwestern Human Services, a provider of Therapeutic Foster Care Services, to offer respite for those families who have children with severe or at risk behaviors and who are currently in treatment. Seven (7) families have benefitted from these services and they have reported that respite has been instrumental in diverting these families from seeking out of home placement for their children.

The County Offices of Mental Health (COMH) continues to ensure the provision of Student Assistance Program (SAP) services in the two counties. Services are provided by the Northwestern Human Service agency under contract with the COMH. The service would continue to assist in identifying the unmet behavioral health needs of the target population. The provider reported that there were approximately one hundred twenty (120) referrals from Bradford County and twenty five (25) referrals from Sullivan County for screening during the course of FY 2016-2017.

The Adolescent Drop-in Centers of The Main Link would continue to provide adolescent consumers with the opportunity of social interaction with their peers, enhance their sense of self through guided activities, promote healthy habits, and provide youth with the opportunity to be contributing members of their community. The Main Link Support Services to Youth would continue to support adolescents through their involvement with the local Juvenile Accountability Court. The Suicide Prevention/Anti-Bullying program of The Main Link would continue to enlist the service of adolescent consumers in providing radio

spots dealing with suicide prevention and anti-bullying themes. The Main Link would continue to coordinate educational activities with the Towanda School District. At this time the Main Link has nineteen (19) adolescents on their caseload and is maintaining a waiting list of ten (10) adolescents.

Needs:

There is a need for the provision of child psychiatry to the population of children and youth and their families. The availability of tele-psychiatry for the provision of this service is a positive asset for the mental health infrastructure. Still, having a child psychiatrist available in a local clinic would go far in filling the needs of this target group.

Adolescents discharged from the mental health residential treatment system are generally not well prepared to live independently as evidenced by their lack of life skills. These youth often remove themselves from all systems following discharge while seeking to be in control of their lives. However, this may take the form of partying, casual sexual encounters, "couch-surfing", and/or substance abuse. On occasion the Main Link is able to re-engage such youth, usually after they have had an encounter with the criminal-justice system.

A number of adolescents and children who have an Autistic Spectrum diagnosis and are not intellectually challenged continue to struggle with receiving the educational services they need, despite a robust effort by the CASSP Coordinator to refer and coordinate needed behavioral health support services. Parents and families sometimes decide to use Cyber-School or to quit their jobs and home-school their children simply because the schools are unable to support the behavioral needs of these children. The CASSP Coordinator continues to offer information to these families regarding local resources.

5. Individuals Transitioning Out of State Hospitals

Strengths:

CHIPP staff would continue to participate in the Service Area Plan (SAP) meetings for all Bradford and Sullivan County residents receiving state mental hospital services. CHIPP staff meets with state mental hospital patients several times a month when discharge planning is taking place. A Peer Support Worker from The Main Link meets with Bradford and Sullivan County residents at the Clarks Summit State Hospital two times a month based entirely on a person's willingness to receive such visits. This peer-to-peer connection historically has served to facilitate a person's transition from the hospital to the community. The Peer Support Worker would assist the consumer in accessing the services of The Main Link.

The CHIPP staff would arrange for the implementation of Health Care Liaison Services for persons who need to coordinate their physical health care with their behavioral health care needs. The service would be individualized, mobile (go to where the person is), educational, a means to rehearse for medical/behavioral appointments, and the person's eventual resumption of primary responsibility for this activity whenever possible.

The CHIPP staff would arrange for Supportive Living Services (SLS) for discharged patients who are either transitioning directly from the hospital into their own domicile or transitioning from a more structured setting such as CRR into their own home. The SLS would provide hands-on residential skills training to

recipients in the latter's domicile. CHIPP staff would assist consumers in getting to the latter's psychiatric outpatient clinic appointments. CHIPP staff would facilitate the referral of discharged persons to a Psychiatric Rehabilitation Service (PRS) if the consumer consents to such a referral.

CHIPP staff would assure the coordination of all support services to the target population. Community mental health treatment and support services would work together to obviate the need for the person to return to a psychiatric inpatient setting.

The county office has entered into an agreement with other county members of the Behavioral Health Association of Rural Pennsylvania (BHARP) to contract with a provider to develop an Enhanced Personal Care Home (EPCH) for mental health consumers receiving services in the state mental hospital system. The county office has contracted with the Community Solutions Group for two beds at this EPCH and at this time one Bradford County resident is living at this home. The program provides the county office with flexibility in bringing its residents out of the Clarks Summit State Hospital.

Needs:

The availability of decent, affordable housing remains a pressing need for persons transitioning out of state hospitals. If a discharged patient qualifies for Medicaid insurance there is a waiting period four weeks or longer before the person can schedule an application appointment. If a patient is a Medicare recipient, there may be a waiting period of several months before the single provider agency can arrange an appointment; this phenomenon may result in the delay of a person's discharge. If a person being discharged has no other residential plan, the Community Hospital Integration Projects Program (CHIPP) funded Community Residential Rehabilitation program would open a bed for the individual. If the individual would opt to live independently, the CHIPP staff would employ the services of a residential provider to search for an appropriate residence prior to the person's discharge. Support services could follow the individual in such an arrangement.

6. Co-occurring Mental Health/Substance Abuse

Strengths:

One of the greatest strengths of the COMH is that we are structured under a Human Services model and are all under one roof. This model allows for the open communication (once releases are obtained) and the coordination of services. Northern Tier Counseling and The Main Link have both sent two (2) consumers to participate in the Peer Support Recovery Specialist Program.

Needs:

There is a continuing need to have professional staff cross-trained in mental health and drug and alcohol treatment protocols. The presence of these specially trained staff would need to be supported across outpatient, partial hospital, and inpatient settings. As persons with Intellectual Developmental Disabilities may be further challenged by addictions, the training needs of professional staff would need to address the special needs of this population.

7. Justice Involved Individuals

Strengths:

The COMH now provides the services of two (2) psychological services associates along with a contracted licensed clinical psychologist (one day a week) for supervision at the Bradford County Correctional Facility (BCCF) on a full-time basis. The psychological services associates would continue to screen the majority of admissions/re-admissions to the facility for mental illness and or the presence of a suicidal crisis. The psychological services associates would continue to provide suicide prevention education to the corrections staff of the facility. The psychological services associates would continue to coordinate their activities with the consulting medical staff and the BCCF administration. The psychological services associates would continue to coordinate activities with the staff of the Torrance State Hospital Forensic Program whenever a BCCF inmate required the services of that program. These psychological services associates will work with the Main Link on extending community outreach with QPR.

The Main Link Forensic Peer Support Workers would continue to provide support to the mentally ill inmates incarcerated in the BCCF. The Main Link Forensic Peer Support Workers would continue to facilitate the return of forensic consumers to the community and continue to provide the "Hearing Voices" to the corrections staff of the facility.

The COMH would assure the provision of community mental health treatment and support service to forensic consumers who are on probation or parole status.

The COMH and its provider network would continue to work with police and magisterial courts to divert persons away from the criminal-justice system whenever possible.

Needs:

A report from a consultant hired by the Commissioners to assess needs of the County Correctional Facility identified the need for transitional housing, a mental health treatment court, and day reporting centers. No action has been taken to date.

The provision of psychiatric time to the inmates of the Bradford County Correctional Facility (BCCF) remains a challenge and budgetary limitations constrain planning to address this need.

8. Veterans

Strengths:

There is a Veterans' Administration Outpatient Clinic available to eligible veterans. It is located in Athens Township, Pennsylvania and operates from 8:30 A.M. to 5:00 P.M. Mondays through Fridays. Psychiatric Outpatient Clinic services are available at that clinic. Veterans may travel to the Veterans' Administration Medical Center in Wilkes-Barre, Pennsylvania to receive more treatment intensive services. Concern Counseling in Mansfield Pennsylvania accepts Tricare Health Insurance; this has been helpful to our veteran's families who are in need of behavioral health services.

Needs:

The County Director of Veterans Affairs has identified that the lack of providers and travel distance to VA Facilities are the greatest barriers to veterans in need to MH treatment.

9. Lesbian/Gay/Bisexual/Transgender/Questioning/Intersex Consumers

Strengths:

The mental health treatment needs of the Lesbian/Gay/Bisexual/Transgender/Questioning/Intersex consumers are provided within the public mental health treatment system including psychiatric inpatient and psychiatric outpatient clinic care.

Needs:

An annual training to address staff understanding and competency in this area will be scheduled.

10. Racial/Ethnic/Linguistic Minorities

Strengths:

According to the U.S. Census Bradford/Sullivan is 97% white and English is the predominate language. However, we have a migrant population and have supported the literacy center through HSDF to offer classes in English as a Second Language. We also contract with Language Line for interpreters via telephone, and have contracts with two individuals to provide English/Spanish interpretations as needed. Bradford County Human Services has also been successful in hiring two bilingual staff members who can be loaned to the COMH as needed.

Needs:

The influx of the natural gas industry has brought with it a Spanish speaking population. These workers tend to be transient and are unlikely to seek treatment or access to resources from this human services agency.

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c) Supportive Housing:

The DHS' five- year housing strategy, *Supporting Pennsylvanians through Housing*, is a comprehensive plan to connect Pennsylvanians to affordable, integrated and supportive housing. This comprehensive strategy aligns well with OMHSAS planning efforts, and OMHSAS is an integral partner in its implementation. Supportive housing is a successful, cost-effective combination of affordable housing with services that helps people live more stable, productive lives. Supportive housing works well for people who face the most complex challenges—individuals and families who have very low incomes and serious, persistent issues that may include substance use, mental illness, and HIV/AIDS; and may also be homeless, or at risk of homelessness.

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

1. Capital Projects for Behavioral Health		<input type="checkbox"/> Check if available in the county and complete the section.							
Capital financing is used to create targeted permanent supportive housing units (apartments) for consumers, typically, for a 15-30 year period. Integrated housing takes into consideration individuals with disabilities being in units (apartments) where people from the general population also live (i.e. an apartment building or apartment complex).									
Project Name	*Funding Sources by Type (include grants, federal, state & local sources)	Total \$ Amount for FY 16-17 (only County MH/ID dedicated funds)	Projected \$ Amount for FY 17-18 (only County MH/ID dedicated funds)	Actual or Estimated Number Served in FY 16-17	Projected Number to be Served in FY 17-18	Number of Targeted BH Units	Term of Targeted BH Units (ex: 30 years)		Year Project first started

2. Bridge Rental Subsidy Program for Behavioral Health	<input checked="" type="checkbox"/> Check if available in the county and complete the section.
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Short term tenant based rental subsidies, intended to be a "bridge" to more permanent housing subsidy such as Housing Choice Vouchers.

	*Funding Sources by Type (include grants, federal, state & local sources)	Total \$ Amount for FY 16-17	Projected \$ amount for FY 17-18	Actual or Estimated Number Served in FY 16-17	Projected Number to be Served in FY 17-18	Number of Bridge Subsidies in FY 16-17	Average Monthly Subsidy Amount in FY 16-17	Number of Individuals Transitioned to another Subsidy in FY 16-17	Year Project first started
	Base	\$40,082	\$80,000	15	30	15	\$387	7	2003

3. Master Leasing (ML) Program for Behavioral Health

Check if available in the county and complete the section.

Leasing units from private owners and then subleasing and subsidizing these units to consumers.

	*Funding Source by Type (include grants, federal, state & local sources)	Total \$ Amount for FY 16-17	Projected \$ Amount for FY 17-18	Actual or Estimated Number Served in FY 16-17	Projected Number to be Served in FY 17 – 18	Number of Owners/ Projects Currently Leasing	Number of Units Assisted with Master Leasing in FY 16-17	Average subsidy amount in FY 16-17	Year Project first started

4. Housing Clearinghouse for Behavioral Health

Check if available in the county and complete the section.

An agency that coordinates and manages permanent supportive housing opportunities.

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

	state & local sources)			FY 16-17					

5. Housing Support Services for Behavioral Health	<input checked="" type="checkbox"/> Check if available in the county and complete the section.
--	--

HSS are used to assist consumers in transitions to supportive housing and/or services needed to assist individuals in sustaining their housing after move-in.

	*Funding Sources by Type (include grants, federal, state & local sources)	Total \$ Amount for FY 16-17	Projected \$ Amount for FY 17-18	Actual or Estimated Number Served in FY 16-17	Projected Number to be Served in FY 17-18			Number of Staff FTEs in FY 16-17	Year Project first started
	Base	\$195,738	\$185,000	82	90			N/A	2003

6. Housing Contingency Funds for Behavioral Health	<input type="checkbox"/> Check if available in the county and complete the section.
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Flexible funds for one-time and emergency costs such as security deposits for apartment or utilities, utility hook-up fees, furnishings etc.

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

7. Other: Identify the program for Behavioral Health

Check if available in the county and complete the section.

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

	*Funding Sources by Type (include grants, federal, state & local sources)	Total \$ Amount for FY 16-17	Projected \$ Amount for FY 17-18	Actual or Estimated Number Served in FY 16-17	Projected Number to be Served in FY 17-18	# of Projects Projected in FY 17-18 (i.e. if PBOA; FWLs, CRR Conversion s planned)	# of Projects projected in FY 17-18 (if other than PBOA, FWL, CRR Conversion)		Year Project first started

Recovery-Oriented Systems Transformation

- I. **Transformation Priority:** Recovery Oriented Education and Training for Transition Age Youth and Adults who are hospitalized and living in the community.

Description: The COMH will work with the Main Link and their Peer Support Specialists in creating an outreach program for transition age individuals, adults and older individuals who are hospitalized at the behavioral science unit at the Robert Packer Memorial Hospital. The rationale behind this approach is that some of these individuals are less likely to be aware of the supports that are available in the community. The purpose behind the implementation of such a program is to reduce recidivism and increase diversionary measures.

Time Line:

This educational recovery oriented group was implemented in September of 2015 and has been an ongoing recovery oriented practice since the aforementioned date.

Fiscal and Other Resources Needed:

The COMH will utilize \$15,000.00 from our state allocation for this activity.

Tracking Implementation:

The Main Link will gather data related to this activity, for example; age, gender, diagnoses, current treatment modalities that are utilized and whether or not the individuals followed through with recovery oriented activities.

- II. **Transformation Priority:** Expanded Suicide Prevention and Zero Suicide
Description: The Main Link employs the services of a qualified Question-Persist-Refer (QPR) trainer, Ms. Suzanne Urban, MSN, to provide training to community groups as part of its suicide prevention activities. Ms. Urban has trained over one hundred community members including a senior nursing student class, corrections staff of the Bradford County Correctional Facility, and mental health Peer Support Workers. Our suicide prevention/anti-bullying activities include a number of public service radio announcements devoted to those activities. The number of completed suicides for the year 2016 is fourteen (14).

The Main Link continues to work with COMH on the "Zero Suicide Initiative". We continue to meet as a group quarterly. The Robert Packer Hospital Behavioral Science Unit has announced that all Personal Care Physicians in the Guthrie network will ask each visiting patient if they are thinking about suicide. If the response is positive then a suicide assessment will be implemented and referrals generated. The Main Link have two (2) staff trained in Mental Health First Aide hence most staff who work at Bradford County Human Services including Children and Youth Services have participated in this training.

Time Line: Mental Health First Aid Trainings will be offered continuously in order to meet the needs of the community. Trainings will be implemented based upon requests from local agencies.

QPR training will also be offered continuously or as requested by agencies in order to meet the needs of the community.

Fiscal and Other Resources Needed:

The COMH will utilize \$25,000.00 from our state allocation for this activity. BHARP indicated that there is grant money available for this initiative. This will be discussed during the planning process.

Tracking Implementation:

The Main Link will record and report which agency received the training and when the training occurred. Comparisons will be made with regard to the annual suicide rate along with the demographics that are associated with those statistics.

III. Transformation Priority: Employment

Description: The COMH contracts with The Main Link to expand its employment/education offerings to mental health consumers. This includes supporting mental health consumers in a work setting of their choice, assisting mental health consumers in accessing educational offerings (GED or college course work), and supporting them throughout the educational experience.

Time Line:

This recovery oriented practice was implemented in 2011 and has been successful in assisting mental health consumers with transition into the job market. This service is offered continuously.

Fiscal And Other Resources Needed:

The COMH will utilize \$46,000.00 from our state allocation for this activity.

Tracking Implementation:

Ongoing data is collected and reported by the Main Link and the COMH.

IV. Transformation Priority: Social Rehabilitation and Reintegration Activities

Description: The biggest challenge remaining in the area is being addressed through the anti-stigma campaigns in an effort to encourage individuals to seek treatment and supports. These efforts include education and outreach, QPR trainings in the schools, provision of MH First-aid trainings, and incorporation of consumers on boards, focus groups, provider meetings and crisis intervention teams. These activities are primarily headed by the Main Link, but in addition to these, they provide drop-in centers in Towanda, Dushore (Sullivan County) and Sayre providing activities, and meals. They have also opened their doors in the past as warming centers and shelters during disasters. They host weekly meetings with case management, providers, consumers and County management to review and discuss programs and service delivery.

Timeline:

These are activities that are offered continuously and continue to contribute to the recovery initiative in Bradford/Sullivan Counties. These activities also assist with consumers achieving and maintaining independence in the community.

Fiscal and Other Resources Needed:

The COMH will utilize \$401,182.00 from our state allocation for this activity.

Tracking and Implementation

These are ongoing activities; data is gathered and reported to the COMH by the Main Link.

V. Transformation Priority: Housing

Description: A critical component in maintaining wellness and recovery is obtaining and maintaining decent affordable housing. A range of housing options is necessary to support consumers on their individualized recovery paths. Various initiatives are underway to develop a Supportive Housing Continuum. Allied Services CRR has a six (6) bed Community Residential Rehabilitation Center to support consumers who are transitioning from the state hospital system and Residential Treatment facilities (Transition Age Youth (TAY)), and community psychiatric inpatient units. Allied Services oversees the Bridging the GAP Program a COMH Housing Subsidy Program for those individuals who are not yet receiving HUD subsidy but who are ready to move out of the CRR home to independent living. In order to expand the availability of affordable permanent housing and broaden The Behavioral Health Services continuum, the COMH will pursue various development partnerships and Health Choices Reinvestment fund support.

Time Line:

These activities are continuous and are approved based upon need.

Fiscal and Other Resources Needed:

The COMH will utilize \$400,000.00 from our state allocation (CHIPP) for this activity.

Tracking and Implementation:

Data is collected and stored by the COMH and Allied Services.

VI. Transformation Priority: Self Directed Care Peer Support

Description: Self Directed Care (SDC) has been implemented. Community Care Behavioral Health has been working with the Main Link regarding the consumers who will be offered this option. SDC Peer Support will serve members who have had significant service use or have been recently hospitalized, and are interested in accessing peer support. As part of the SDC team, the Certified Peer Specialists will work with Health-Choice members by educating them about recovery, peer support, and self-management, developing a recovery plan, using recovery tools and practices (e.g. WRAP, Common-Ground) connecting with community resources and using natural supports, Managing Freedom Funds, and graduating from intensive services.

Time Line: This process has begun via meetings with the Main Link, CCBHO, and service providers from Delaware and Alleghany Counties. CCBHO has identified consumers who will qualify for this service. Implementation began in July of 2016, at this time there are approximately eleven (11) consumers involved in this program.

Fiscal and Other Resources Needed: This program will be funded through reinvestment dollars; there is a grant of \$100,000.00 which will be divided between Bradford/Sullivan and other counties.

Tracking and Implementation: CCBHO will gather data and track the progress of the consumers who participate in this program.

VIII: Transformation Priority: Teen Drop In Center

Description: Teen Drop In Center is sponsored by the Main Link Peer Certified Peer Support (CPS) Specialists and is open to youth ages 14-17 who have had or who are at risk of developing social or emotional difficulties. The rationale behind this approach is that some of these individuals are less likely to be aware of the supports that are available in the community. Through the drop-in center youth can be guided toward seeking appropriate supports within their communities. This program is being offered at the Main Link in Towanda and Sayre in Bradford County. Both locations will be open

two evenings a week and offer a safe environment for youths to socialize with peers, play games and Nintendo WI, and have access the internet and share a healthy meal. Adult members (CPS) who have had background checks, FBI fingerprinting and child abuse history clearance will host the programs.

Time Line:

This program was implemented in October of 2015 and continues to provide support to the transition age group of consumers in Bradford/Sullivan counties in the areas of the recovery initiative. .

Fiscal and Other Resources Needed:

The County COMH will utilize \$46,800.00 from the state allocation of children's base funds for this activity. This is based upon five hours per week per program at fifty two weeks per year at \$60.00 an hour.

Tracking and Implementation:

The assigned staff will take roll during the program.

IX: Transformation Priority: Adolescent Peer Support

Description: Development of Natural Supports/ Assist individuals to become active in their community: Peer Support workers work with youth in the community to access spiritual, social and other natural supports in the community. Advocacy/ Assist individuals to access treatment, self-help and self-advocacy activities: Peer Support workers serve as role models in recovery who encourage youth to seek treatment when necessary, maintain wellness, take an active role in their own treatment plans and attend self-help groups (AA, NA and other consumer run support groups). Social Network/ Assist individuals to improve personal relationships, socialize and meet new people: Peer Support workers assist youth to access social venues, interact with peers, family members and others. Self Help: Assist youth to create a Wellness Recovery Action Plan (WRAP). WRAP is a plan that someone writes when he is well that describes what he has to do to stay well, his triggers, signs that things are getting worse, and a crisis plan. Assist youth in identifying their Personal Medicine. Personal medicine is what you do not what you take that makes you feel well. Improvement/ Facilitate activities that promote self-esteem/ self-worth: Peer Support workers assist youth to attend groups or activities that are designed to enhance quality of life, develop talents and improve self-esteem. (Art classes, music, dance, cooking classes etc.). Health & Wellness/ Assist individuals to adopt healthy habits, exercise and diet: Peer Support workers promote wellness through modeling healthy habits with the youth

TIME LINE:

This program was re-implemented in January of 2017 and will run continuously. The Peer Support workers who run the "Teen Drop In Center" saw that there was a need for one to one "Adolescent Peer Support" for this "at risk population" based upon information gathered from this group of teens. There will be a time however, that this service will be a billable service to Community Care Behavioral Health.

Fiscal and Other Resources Needed: At this time the Main Link has nineteen (19) adolescents enrolled in the adolescent peer support program we estimate that at least \$50,000.00 will be allocated to this program.

Tracking and Implementation: This program has been implemented; the Main Link will keep consumer files and billing information on record at their location. The COMH will audit their records as needed.

e) Existing County Mental Health Services:

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

Services By Category	Currently Offered	Funding Source (Check all that apply)
Outpatient Mental Health	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Psychiatric Inpatient Hospitalization	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Partial Hospitalization	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Family-Based Mental Health Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
ACT or CTT	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Children's Evidence Based Practices	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Crisis Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Emergency Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Targeted Case Management	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Administrative Management	<input checked="" type="checkbox"/>	<input type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Transitional and Community Integration Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Community Employment/Employment Related Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Community Residential Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Psychiatric Rehabilitation	<input checked="" type="checkbox"/>	<input type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Children's Psychosocial Rehabilitation	<input checked="" type="checkbox"/>	<input type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment

Adult Developmental Training	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Facility Based Vocational Rehabilitation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Social Rehabilitation Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Administrator's Office	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Housing Support Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Family Support Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Peer Support Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Consumer Driven Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Community Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Mobile Mental Health Treatment	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
BHRS for Children and Adolescents	<input checked="" type="checkbox"/>	<input type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Inpatient D&A (Detoxification and Rehabilitation)	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Outpatient D&A Services	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Methadone Maintenance	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Clozapine Support Services	<input checked="" type="checkbox"/>	<input type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Additional Services (Specify – add rows as needed)	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment

*HC= HealthChoices

c) Evidence Based Practices Survey:

Evidenced Based Practice	Is the service available in the County/ Joinder? (Y/N)	Number served in the County/ Joinder (Approx)	What fidelity measure is used?	Who measure s fidelity? (agency, county, MCO, or state)	How often is fidelity measured ?	Is SAMHSA EBP Toolkit used as an implementation guide? (Y/N)	Is staff specifically trained to implement the EBP? (Y/N)	Comments
Assertive Community Treatment	No							
Supportive Housing	No							
Supported Employment	Yes	19	Data Collection	Agency	Quarterly	Yes	No	
Integrated Treatment for Co-occurring Disorders (MH/SA)	No							
Illness Management/ Recovery	No							
Medication Management (MedTEAM)	No							
Therapeutic Foster Care	Yes	9	Data collection	Agency	Quarterly	Yes	Yes	
Multisystemic Therapy	Yes	2	Data collection	Agency	Quarterly	?	Yes	
Functional Family Therapy	No							
Family Psycho-Education	No							

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

To access SAMHSA’s EBP toolkits:

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

d) Recovery Oriented and Promising Practices Survey:

Recovery Oriented and Promising Practices	Service Provided (Yes/No)	Number Served (Approximate)	Comments
Consumer Satisfaction Team	Yes	116	
Family Satisfaction Team	Yes	42 +	2 Foster parents
Compeer			
Fairweather Lodge			
MA Funded Certified Peer Specialist	Yes	111	
Other Funded Certified Peer Specialist	Yes	64	
Dialectical Behavioral Therapy			
Mobile Services/In Home Meds			
Wellness Recovery Action Plan (WRAP)	Yes	11	
Shared Decision Making			
Psychiatric Rehabilitation Services (including			
Self-Directed Care	Yes	11	
Supported Education			
Treatment of Depression in Older Adults			
Consumer Operated Services	Ye	236	Drop In Out Reach recovery
Parent Child Interaction Therapy			
Sanctuary			
Trauma Focused Cognitive Behavioral Therapy			
Eye Movement Desensitization And Reprocessing			
Other (Specify) Warm Lin	Yes	80	Confidential

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

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

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

h) Certified Peer Specialist Employment Survey:

“Certified Peer Specialist” (CPS) is defined as:

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

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

- case management
- inpatient settings
- psychiatric rehabilitation centers
- intensive outpatient programs
- drop-in centers
- Medicaid-funded peer support programs
- consumer-run organizations
- residential settings
- ACT, PACT, or FACT teams

Total Number of CPSs Employed	27
Number Full Time (30 hours or more)	22
Number Part Time (Under 30 hours)	5

INTELLECTUAL DISABILITY SERVICES

The Office of Developmental Programs (ODP), in partnership with the county programs, is committed to ensuring that individuals with an intellectual disability live rich and fulfilling lives in their community. It is important to also ensure that the families and other stakeholders have access to the information and support needed to help be positive members of the individuals' teams.

This year, we are asking you to focus more in depth on the areas of the county plan that will help us achieve the goal of an Everyday Life for all individuals.

With that in mind, describe the continuum of services to enrolled individuals with an intellectual disability within the county. In a narrative format, please include the strategies that will be utilized for all individuals registered with the county, regardless of the funding stream. In completing the chart below, regarding estimated numbers of individuals, please include only those individuals for whom base or block grant funds have or will be expended. Appendix C should reflect only base or block grant funds except for the Administration category. Administrative expenditures should be included for both base/block grant and waiver administrative funds.

The goal of the Bradford/Sullivan County Intellectual Disabilities Program is to provide opportunities that will afford individuals with Intellectual Disabilities an Every Day Life throughout the continuum of life. We believe the best way to do this is to build capacity within our community and natural support systems. We know that this is the ideal, and the dream, and while we strive to accomplish this we must at times depend on formal supports and services in order to best support our individuals throughout their continuum of care needs. We are working hard to support families and individuals throughout the life span by facilitating relationship building and building social capital. The continuum of formal services consists of EPSDT, Early Intervention, Day Care, our education partners, Transition, Employment, OVR, ODP Providers, Aging, LINK, Mental Health, the justice system, Children and Youth Services, and our community, churches, medical, banks, parks, just to name a few. We provide a vast array of supports and services to individuals from the time they are determined eligible until the time our services are no longer needed. We work hard to meet the needs of all people enrolled in our Intellectual Disability Program regardless of funding or needs.

**Please note that under Person Directed Supports, individuals served means the individual used Vendor Fiscal/Employer Agent (VF/EA) or Agency with Choice (AWC) for at least one service during the fiscal year. The percentage of total individuals served represents all funding streams. The percentage might not add to 100 percent if individuals are receiving services in more than one category.*

Individuals Served

	<i>Estimated Individuals served in FY 16-17</i>	<i>Percent of total Individuals Served</i>	<i>Projected Individuals to be served in FY 17-18</i>	<i>Percent of total Individuals Served</i>
Supported Employment	0		0	
Pre-Vocational	0		0	
Adult Training Facility	16		12	
Base Funded Supports Coordination	12		12	
Residential (6400)/unlicensed	4		4	
Life sharing (6500)/unlicensed	5		5	
PDS/AWC	29		35	
PDS/VF	0		0	
Family Driven Family Support Services	14		14	

Supported Employment: “Employment First” is the policy of all Commonwealth executive branch agencies under the jurisdiction of the Governor. Therefore, ODP is strongly committed to Community Integrated Employment for all.

Please describe the services that are currently available in your county such as Discovery, customized employment, etc.

Continued communication with individuals, families, providers of employment services, OVR, schools and local businesses occurs in order to enhance employment options. The county is working to learn and preparing to implement all new service definitions within the Waiver Renewal. The county is also working diligently to have the ability to work effectively with those who have a diagnosis of Autism.

OVR is accepting referrals for a Work Experience program. This is a program that provides up to 90 hours a year, paying the individual \$10.15/hr. The age of eligibility is 14-24 years old. SERVE and BLaST are the two local programs offering this program at this time. The Bradford/Sullivan County Intellectual Disability Program is actively making referrals to this program.

Another provider is in the process of becoming a provider for Enhanced Supported Employment in order to be able to offer and provide Discovery and Advanced Supported Employment. The Arc of PA recently presented at our local Transition Council on their ADEPT program and their ability to contract with schools to offer Discovery and Customized Employment.

Identify changes in your county practices that are proposed for the current year that will support growth in this area and ways that ODP may be of assistance to you with establishing employment growth activities.

As Employment is part of the Bradford/Sullivan Quality Plan, we are making sure that the individuals in our program are provided with information and resources in order to obtain employment. Our goal is to make sure those who are interested in employment have the services they need to become competitively employed. We also have goals of educating employers, as well as educating the Supports Coordination Organization on OVR and the different providers and programs they offer. It would be beneficial for ODP and OVR to continue to work collaboratively to establish best practices that will help support the Pennsylvania Employment First policy and better serve the individuals we work with.

Bradford/Sullivan County AE and SCO will attend and participate in any ODP/OVR employment sponsored training. The AE will continue to encourage providers to attend these trainings as well. All three of our employment providers have received their CESP credential for employment. The CESP credential recognizes individuals who have demonstrated a sufficient level of knowledge and skill to provide integrated employment support services to individuals with disabilities.

The County ID Program collaborates with our MH partners and has found success for some of our individuals who have used MH services to obtain employment. Peer Support has successfully supported several people in obtaining employment.

Please add specifics regarding the Employment Pilot if your County is a participant.

As a participant in the employment pilot, the county has found barriers in working with OVR. With only one OVR counselor to cover a multitude of counties it's difficult to ensure that someone from OVR is participating in the necessary meetings. There is often a lag time in getting necessary meetings scheduled which hinder an individual's ability to become employed.

Bradford/Sullivan has been a participant in the employment pilot. With four individuals in our pilot program we have seen great participation amongst the high schools and the provider agencies.

Bradford/Sullivan AE is an active member of the local Transition Council which consists of special education coordinators from eight school districts, OVR, BLaST IU #17, the Northern Tier Career Center, Bradford County Action, and providers are encouraged to participate. The council holds an event annually called “Work With Me Day.” This event consists of students who have an intellectual or learning disability who want to work. The students are placed with an employer of interest to them,

and shadow for a few hours. After the shadowing experience is over, they all meet to discuss their experience. The keynote speaker is always someone with a disability who talks about his barriers and successes through life and employment. Participating in the local Transition Council meeting is a great opportunity to collaborate and explore resources.

Since the gas industry has moved out of our rural county, employment opportunities have become increasingly difficult to find. Being an employment first state, employment providers should be mandated to receive trainings with regard to assisting people with obtaining competitive employment. This includes training and ongoing support for Discovery and customized employment. During Intellectual Disabilities Awareness month (March) each year, there will be information provided to individuals, families and community members regarding Employment First. Employment is a part of the Intellectual Disabilities Awareness Proclamation as well.

Supports Coordination

Describe how the county will assist the supports coordination organization to engage individuals and families in a conversation to explore natural support available to anyone in the community.

Natural supports are being utilized through a new process called "Supporting Families throughout the Lifespan." The county received grant funding to be able to bring in training and education for the SCO so that they can help individuals and families explore natural supports. An important tool used is called "charting the LifeCourse." This tool is written in person first language to help represent the viewpoint of the person with a disability. It highlights self-determination and how to utilize natural supports to get there. The county is now part of The Community of Practice. The PA Family Network is also being utilized to provide training to the SCO, Families and individuals to help identify what they would like for their future while utilizing natural supports.

Describe how the county will assist supports coordinators to effectively plan for individuals on the waiting list.

The AE and SCO meet weekly to discuss the individuals on the waiting list and how to plan for them effectively. The relationship between the AE and SCO is vital in making sure all individuals' needs are met. Utilization of natural and community resources is discussed and communicated with the supports coordinators. The local Positive Practices committee is also committed to bring as much training as possible to our local area to build capacity. These meetings, trainings and events are open to provider agencies, AE, SCO staff, families, individuals and community members. The SCO is an active partner with Bradford/Sullivan/Tioga collaborative- Supporting Families Throughout the Lifespan.

Describe how the county will assist the supports coordination organizations to develop ISPs that maximize community integration and Community Integrated Employment.

The Bradford/Sullivan ID Program assists the Supports Coordination Organization (SCO) in engaging individuals and families in conversations to explore natural supports through a variety of opportunities. These opportunities allow for the development of ISPs to support individuals to maximize community integration and integrated employment. There are ID staff that are trained to facilitate biographical timelines and are also trained in Person-Centered Thinking. SC's are encouraged to promote self-determination and to empower individuals and families. SC's are trained in writing Person Centered plans and outcomes and will continue to attend all ODP sponsored

outcomes trainings. The county developed a contract with It Takes A Village to do Family Group Decision Making. This will allow for a specific process to be used to find natural supports, this process is called family finding.

Community integrated employment is part of the quality plan for both the AE and the SCO. Training and education for staff is of the utmost importance in order to effectively work toward employment. There needs to be buy in from staff so that they can deliver the message to individuals and their families. The AE/SCO meet with providers at least quarterly to work with them on identifying individuals who can increase their time in the community for both community participation and integrated employment. Collaboration will continue to occur with Office of Vocational Rehab and with the local transition council.

The AE and SCO work closely to continue to teach the principles of Everyday Lives and incorporate that into community integration and integrated employment. Giving individuals' choice, control and respect will allow for enhancing the ISP's to effectively reflect wants and needs. There will be continued investment in building social capital.

Life sharing Options: Describe how the county will support the growth of Life sharing as an option. What are the barriers to the growth of Life sharing in your county? What have you found to be successful in expanding Life sharing in your county despite the barriers? How can ODP be of assistance to you in expanding and growing Life sharing as an option in your county?

At a minimum, Supports Coordinators discuss Life Sharing on an annual basis or when an individual is in need of a different level of services. The County ID program meets with its providers on a quarterly basis and continues to promote the philosophy of Life Sharing. Contracted providers are part of the Lifesharing coalition as well as attend the annual Lifesharing conference. Lifesharing is part of the Bradford/Sullivan County Quality Plan. The county plans to get another provider involved to provide Lifesharing. We also have a goal to get two more host families and four more individuals residing in Lifesharing over the next two years.

In our joinder, success has been found through word of mouth; and many of our Life Sharing providers had been direct care staff for individuals while providing other services to them. Providers have advertised Life Sharing opportunities through radio, newspaper, their provider sponsored newsletter, "meet and greets", and through utilization of social media. Other life sharing providers became involved when they saw successful Lifesharing services being provided, and then wanted to provide the same level of care to individuals with disabilities. The AE is collaborating with Lifesharing Providers to put articles discussing the philosophy of Lifesharing as well as success stories in the local papers. The ability to pay family members to provide Life Sharing will enhance an individual's ability to maintain those relationships and community ties. The county is hopeful that the proposed rate increase will make it easier for Lifesharing providers to obtain employee benefits and have the ability for paid time off.

Transportation continues and will continue to be a barrier in our rural area due to the high cost.

Cross Systems Communications and Training:

Cross Systems Communications and Training: Describe how the county will use funding, whether it is block grant or base, to increase the capacity of your community providers to more fully support individuals with multiple needs.

Through local Positive Practice efforts, Quality Council, IM4Q, weekly Incident Management Review, Quarterly meetings with Providers and a continued strengthened partnership with the Bradford/Sullivan County Mental Health Program, the County ID Program is committed to meeting the needs of our dually diagnosed population and using positive approaches in order to provide services in the least restrictive environment. Bradford/Sullivan County has also benefited from the Dual Diagnosis Treatment Team model provided through a partnership of BHARP and CCBH. B/S also takes advantage of the services provided through the HCQU, including but not limited to, Health Risk Profiles and Dual Diagnosis Training curriculum. Bradford/Sullivan has recently worked with the HCQU to develop better understanding of supporting healthy sexuality and relationship building.

Bradford/Sullivan County ID Program and SCO attend Regional and Statewide Positive Practices meetings and trainings and providers are encouraged to attend.

The County ID Program attends trainings focused on person centered planning, and Supporting Families Throughout the Lifespan. The County is currently working to bring Al Candeluci to the county to do a training on Building Social Capital. The Bradford/Sullivan ID Program collaborates with its partners to create innovative supports systems in order to meet individual needs through a combination of natural supports and formal supports when needed. The County AE, SCO, individuals and providers developed an Intellectual Disabilities committee and sponsored several events in March for Intellectual Disabilities month. The events sponsored reached out to individuals, families, providers, schools, and communities that were preliminary steps to building partnerships of support. The committee is currently working to sponsor events to promote awareness and partnerships throughout the year.

Describe how the county will support effective communication and collaboration with local school districts in order to engage individuals and families at an early age.

Bradford/Sullivan ID Program is an active member/partner with the Local Transition Coordinating Council that works as a team to promote successful transitions out of high school and into the adult world. The Transition team is made up of eight school districts, transition coordinators, IU 17 Lead, OVR, Bradford County Action, County ID Program and Local ID providers. The teams focus on Employment, Residential, and Recreation and Leisure needs in order to prepare for life after school.

The County ID Program has worked to educate and collaborate with local school districts to be invited to IEP meetings where an individual may qualify for ID services. When invited, a member of the AE will attend and be prepared to complete intake paperwork in order to determine eligibility and move forward with opening the individual. The County ID program will work to inform our educational partners on eligibility and referral process for individuals with a diagnosis of Autism and/or Intellectual Disability.

The County ID Program has relationships with Birth to 3 Early Intervention and IU 17 Early Intervention and they both have referred to the County ID Program. The County ID program will work to educate our Early Intervention partners on eligibility and referral process for individuals with a diagnosis of Autism and/or Intellectual Disability.

Describe how the county will communicate and collaborate with local children and youth agencies, the Area Agency on Aging and the mental health system to ensure individuals and

families are provided with the information they need to access needed community resources as well as formalized services and supports through ODP.

The County ID Program collaborates with The County MH Program when needed. The County ID Program participates in MH Multi-Disciplinary Team meetings when invited. The County ID Program participates in CASSP meetings when invited. The County ID program will work to educate county MH and MH providers on eligibility and referral process for individuals with a diagnosis of Autism and/or Intellectual Disability.

The County ID Program and Children and Youth Services staff meet as needed to collaborate on shared individuals. The County CYS program and ID program work together to develop plans to transition kids with a diagnosis of intellectual disability out of CYS care. The County ID program will work to educate CYS on eligibility and referral process for individuals with a diagnosis of Autism.

The County ID Program meets with Area Agency on Aging as needed in order to collaborate on shared individuals. The County ID Program sits on the local LINK advisory team and is an active participant developing yearly planning needs. The County ID Program attends trainings sponsored by LINK. Link trainings often focus on services that can support and assist the ID population. The County ID program will work to educate Aging and Aging partners on eligibility and referral process for individuals with a diagnosis of Autism.

Emergency Supports:

The AE and SCO have on-call procedures in place and work collaboratively with hospitals, Mental Health, local and state police, sheriff's department, Intellectual Disability Providers, and other providers/organizations as needed.

In order to provide a twenty four hour response system for individuals enrolled with the County Intellectual Disability Program, a requirement of ODP's incident management policy, the Bradford County Human Service Agency Intellectual Disability Program established a rotating system of pager enabled on-call services in April of 2002.

This system is managed by the County Intellectual Disability Program Director and the Supports Coordinator Supervisor(s) on a rotating weekly basis and operates after normal working hours Monday through Friday and on weekends and holidays.

The AE is available on-call as well to back up the SC Supervisors when any emergency services and supports are needed to be approved and authorized, or if emergency guardianship is required.

The individual in need of assistance/information can direct dial the pager number and enter a telephone number for the reply. The person on call responds to the page by replying to the number entered and supplying whatever services or supports are necessary to ensure the individual's health and welfare. If the person requiring emergency assistance does not have the pager number, they can call the regular program office number and the voice mail message will direct them. The county EMS program also has on-call information in order to reach someone from the County Intellectual Disability Program.

Bradford/Sullivan County attempts to "reserve" base dollars to meet emergency needs, however if emergencies occur early in the fiscal year, base dollars may be exhausted when other emergencies arise.

When Base funds are exhausted, B/S follows ODP requirements. Please refer to DP 1025 "Unanticipated Emergency Funding Request and Approval Form."

The AE shall comply with managing Unanticipated Emergencies process as approved by the Department.

The AE shall provide administrative functions to ensure that unanticipated emergency needs are met per ODP requirements and regulations.

When an individual is identified as having an unanticipated emergency:

1. An individual is at immediate risk to their health and welfare due to illness or death of a caretaker.
2. An individual living independently experiences a sudden loss of their home (for example, due to fire or natural disaster).
3. An individual loses the care of a relative or caregiver without advance warning or planning.
4. Meeting Health and Safety needs will be the priority.
 - a. Refer to all providers immediately
 - b. The AE will review funding sources
 - i. Natural Supports/Feasible Alternatives
 - ii. Waiver Funding
 1. Consolidated: Service needs are identified and approved and authorized immediately.
 2. PFDS: Service needs are identified and approved and authorized immediately while remaining within the PFDS/Waiver Cap.
 - iii. Waiver Capacity Commitment review
 1. If Waiver capacity exists the AE will begin the waiver enrollment process.
 - iv. Base Funds
 1. Prior to requesting funds from the Department the AE will assure that all base funds are committed.
 - c. If all AE resources are exhausted the AE in consultation with the SCO will complete the Unanticipated Emergency Funding Request and Approval Form (DP 1025) and Unanticipated Emergency Screening Tool (DP 1033)
 - d. The AE will submit the request to the Regional Waiver Capacity Manager.
 - e. The AE will work with the individual, their support people and the selected provider to ensure services start as soon as needed and funding is secured.
5. If the request is approved, the regional office will add Waiver Capacity to Bradford/Sullivan AE and the AE will proceed with waiver enrollment. PUNS
 - a. Service Preference Completed
 - b. Enrolled in "intent to enroll"
 - c. SIS request is processed
 - i. A waiver to SIS completion prior to Waiver enrollment may be requested.
 - d. Physical Obtained
 - e. ICF/MR Certification completed by a QIDP

In the Event the individual is not known to the AE:

Eligibility determination for Intellectual Disability services will be a priority. The AE will work with natural supports and community supports to assure health and safety while eligibility is being determined.

Once eligibility is determined, the standard process will be followed.

24-Hour on call emergency system is in place to address unanticipated emergencies.

Developmental Programs Bulletin: Planning and Managing Unanticipated Emergencies: 00-10-03
Administrative Entity Operating Agreement 3.4.4

Bradford/Sullivan County ID Program responds to emergencies during regular working hours and through our on-call system when the office is close. When an emergency occurs, the program person responding will first attempt to access any and all natural supports within the person's circle of support including but not limited to family, friends, neighbors, community, and church. When natural supports are exhausted and the emergency need still is present the program person responding to the emergency will then contact local county providers in order to access services to meet needs. If residential services are needed respite services will be secured until long term residential services can be established. The program person will continue to assist until health and safety is assured for the individual.

There is a Warm Line available through the Main Link Program and is open every evening from 6pm-10 pm for those individuals who may need to reach out to someone regarding any mental health struggles or concerns.

Concern Counseling provides Mental Health Mobile Crisis services if needed, and two individuals lead the team, one of which is trained in the needs of those with a diagnosis of Autism.

All staff had and do receive training in working with individuals with diagnoses of an intellectual disability and/or autism. One member of their team has a background in working with individuals with an ID diagnosis who previously worked at Martha Lloyd Community Services.

There are four staff persons available to go out on crisis calls—there is always one on-call worker after hours.

The county has informed Concern that if interested in receiving any training on ID/Autism specific information, we would work with them to provide any needed educational/training needs. The county ID program will continue to invite our mental health partners to trainings and to Positive Practice meetings throughout the year.

Administrative Funding: ODP has engaged the PA Family Network to provide support and training in the community. The PA Family Network will be providing individuals who are Person Centered Thinking trainers. Describe how the county will utilize the trainers with individuals, families, providers and county staff.

Bradford/Sullivan County is committed to the philosophy of Everyday Lives, community integration, self-determination, respect, and dignity and worth of the person. The County ID program uses the National Association of Social Work Code of Ethics as a tool to guide practice.

Bradford/Sullivan/Tioga formed a Collaborative, submitted the application for, and received a grant from ODP/Supporting Families Throughout the Lifespan initiative. The B/S/T collaborative hope and desire is to develop enhanced relationships with community members in order to better support individuals with disabilities to have an Everyday Life and to promote people with disabilities living, working, and contributing in our communities. We are committed to listening to individuals and families about their wants and needs to help support individuals throughout the lifespan.

B/S/T Collaborative hosted Patrick Swartz for a one day conference at Mansfield University "From Disability to Possibility." Bradford/Sullivan AE and SCO staff attended.

Bradford/Sullivan County hosted a Supporting Families Throughout the Lifespan training. PA Family Network representatives were also present at the one day training. Nancy Richey and Lisa Tesler

were the main presenters. The majority of the audience was made up of AE staff, SCO staff, provider staff and EI staff. 44 people were in attendance.

Bradford/Sullivan County hosted a PA Family Network workshop in March 2017. Four individuals and their support teams attended. The workshop was well received. B/S also sponsored a workshop for families. At the last minute, each family cancelled. The County Program needs to develop strategies to better engage with families. Bradford/Sullivan intends to sponsor more PA Family Network workshops throughout the year.

The B/S/T Collaborative plans to bring Al Condeluci to our local area to do a one day conference on Building Social Capital.

Nancy Richey, Family Policy Specialist and Marie Craven, ODP will be invited to a Local Transition Council meeting to present on "Supporting Families Throughout the Lifespan" during the 2017/2018 school year.

Describe other strategies you will utilize at the local level to provide discovery and navigation (information, education, skill building) and connecting and networking (peer support) for individuals and families. What kinds of support do you need from ODP to accomplish those activities?

Through local Positive Practices and Quality Council, families are provided information regarding trainings, community events, and connecting with others. Local providers are utilizing social networks to connect with individuals, families and community members for the purposes of education, peer connections and information.

Discovery and Navigation-Our forums will provide valuable, needed information to the community and families on supporting individuals throughout the lifespan, helping families and individuals to advocate for what they want and need, and our role in this. Our plan is to distribute information through our brochure and Facebook to keep the public informed. Informational trainings will provide not only the community needed education and information, but help our program to better support individual's and families' needs. Supports Coordinators will be trained to assist with discovery and navigation throughout the lifespan.

Connecting and networking- creation of a Facebook page will assist in helping families to connect with one another because we are a rural community and sometimes the quickest and easiest way to connect is through social media. Once the FB page is developed, the information will be updated on our brochure that includes all three counties, Bradford, Sullivan and Tioga. We need to help individuals connect with self-advocates that will assist individuals in having the life that they want. We also have connections with families who already do amazing things developing natural resources and ensuring their loved one is included and integrated in the community. We will invite these families to share their stories and try to work to replicate their strategies of success.

From ODP we could use strategies on how a rural county can better connect and network with individuals and families.

Describe how the county will engage with the HCQU to improve the quality of life for the individuals in your community. Describe how the county will use the data generated by the HCQU as part of the Quality Management Plan process.

Bradford/Sullivan ID Program make referrals to the HCQU for a variety of reasons. Whether staff need training on a specific health need or if there is a risk of falls for an individual, a referral is made.

The HCQU will provide trainings as requested. The HCQU will complete Health Risk Profiles for individuals with disabilities. The Health Risk Profiles assist teams in identifying and addressing unmet medical needs. Health Risk Profiles are also used to assist in ruling out medical reasons for changed behavior. The HCQU has also assisted with medication management reviews, where they look at side effects, drug interactions, and time of day.

The HCQU has trained Bradford/Sullivan Counties on several portions of the Dual Diagnosis Curriculum. Currently, the HCQU nurse for Bradford/Sullivan Counties works closely with the local Positive Practices and Quality Council. At the local Positive Practice meetings, the quality management plan is reviewed. The HCQU and this committee work closely to look at trends, especially regarding reportable incidents.

Through our local Positive Practices efforts the County ID Program is partnering with providers and the HCQU to address relationship and healthy sexuality needs of the county. ODP assisted our local program in bringing Beverly Frantz in to kick start our Healthy Sexuality initiative. Beverly did a full day of training in December of 2016 to a large group of 41 AE, SCO, and provider staff. In addition 5 individuals attended the training. After that training we have been working with the HCQU to address continued needs in the area of healthy sexuality and relationships. The HCQU met with the AE, SCO and a member from each provider agency as a group to discuss needs and a Healthy Sexuality curriculum. The SCO brought the HCQU in to complete a Values Clarification exercise. The HCQU has offered Values Clarification to our providers as well and providers are being encouraged to complete. Our Healthy Sexuality initiative is being incorporated into our Quality plan for future efforts.

Describe how the county will engage the local IM4Q Program to improve the quality of life for individuals in your program. Describe how the county will use the data generated by the IM4Q process as part of your Quality Management Plan. Are there ways that ODP can partner with you to utilize that data more fully?

Our local IM4Q program has recently dissolved. The County is currently in the stages of acquiring a new IM4Q program.

The County IM4Q program representative is always invited to our Local Positive Practices/Quality Council meetings. This person typically provides updates at the meeting and works closely with members of the county to generate considerations to improve quality of life for the individuals we serve. There are individuals who are in the ID program hired, trained and paid through the local IM4Q program to assist with surveys. As information and data is shared it is incorporated into ISP's to enhance the quality of life of our individuals. It would be beneficial if ODP could partner with us to ensure that the data is given to the county on a timely basis.

Describe how the county will support local providers to increase their competency and capacity to support individuals who present with higher levels of need related to: aging, physical health, behavioral health, communication, etc. How can ODP assist you with your support efforts?

The County ID Program identifies increasing competency and capacity of the AE, SCO, providers, supporting agencies, resources, and families as a key component to individual success. The County works to build relationships across service systems, such as Mental Health, Children and Youth, Aging, and other systems, in order to build capacity.

The County partners with the Area Agency on Aging and Pennsylvania LINK to Aging and Disability Resources to bring trainings locally in order to build capacity for supporting our aging population.

The County uses the local Positive Practices Committee and Quality Plan in order to address the complex needs of individuals in the county

The County utilizes the HCQU to provide health risk profiles to assist in meeting medical needs and uses the HCQU as a training resource, including but not limited to the Dual Diagnosis Curriculum, and Healthy Sexuality Curriculum.

The County has sponsored local trainings such as Mental Health First Aid, LGBTQI, Healthy Sexuality, Person Centered Planning, WRAP, Crisis Debriefing, Dual Diagnosis, among others, in order to build capacity.

Behavior support and/or Dual Diagnosis Treatment Team is utilized to support individuals who have complex dual diagnosis and/or sexuality concerns. The behavior specialist and DDTT staff are also a key component in supporting and training the staff who work with these individuals.

Tracking of specific incidents is completed to review trends. If there are trends noted then teams are pulled together to review information and provide supports and training.

Describe what Risk Management approaches your county will utilize to ensure a high-quality of life for individuals. Describe how the County will interact with individuals, families, providers, advocates and the community at large in relation to risk management activities. How can ODP assist you?

The county has become more proactive in reviewing data from HCSIS/EIM so services and supports can be provided to prevent a person from becoming identified as "high risk." Different strategies that have been used include, but are not limited to, ruling out medical first, collaboration with other agencies and community resources, HRP assessment, biographical timelines, behavior support, and DDTT.

The County uses EIM data to identify trends and systemic issues. Plans are implemented to address issues as they are identified.

The County provides Incident Management training as requested.

Describe how you will utilize the county housing coordinator for people with an intellectual disability.

The AE and the SCO attend monthly provider meetings which the housing coordinator also attends. We collaborate and pull in other resources as needed to assist individuals in meeting their housing needs. We are in contact on an as needed basis with the service coordinator and the case manager of each apartment building who work directly with the tenants. We will have contact with the Housing Authority for updates on the following services that benefit the individuals that we serve.

- 1.) Section 8 rental assistance
- 2.) Public housing

3.) PHFA programs such as Tenant Based Rental Assistance Program (TBRA) and the Pennsylvania Housing Affordability and Rehabilitation Enhancement (PHARE) Fund Sponsored by the Pennsylvania Housing Finance Agency (PHFA).

4.) Resident Services

Describe how the county will engage providers of service in the development of an Emergency Preparedness Plan.

All providers should have a COOP plan/emergency plan. Bradford/Sullivan County has encouraged each provider to register on Code Red. Code Red ties into the Emergency Management Office. Code Red delivers emergency information to registered participants through voice mail, text message and email. Code Red information can be located on the Bradford County website.

The Quality Manager will incorporate the development of an Emergency Preparedness Plan into the quarterly QM meetings with providers.

Participant Directed Services (PDS):

Describe how your county will promote PDS services.

- PDS services are offered to all individuals and families that do not receive residential services in licensed settings.
- During the initial assessment and annually thereafter, SC's will discuss Participant Directed Services.

Describe the barriers and challenges to increasing the use of Agency with Choice.

- Sometimes the family/individual who is the co/employer does not fully understand the weight and responsibility of their role.
- It can be a time consuming process.
- Sometimes families, individuals and staff don't follow the authorization in the ISP and proceed with providing services other than documented or authorized in the frequency and duration.
- Some staff members don't turn in their timesheets in a timely manner.
- Sometimes traditional services are more convenient as they typically can start quicker and have more layers of supervision.
- The local AWC program sees the program as a burden to operationalize.
- The local AWC program perceives the program as a financial burden.

Describe the barriers and challenges to increasing the use of VF/EA.

- People are not always comfortable not having a person that they can physically go to.
- People are not comfortable with something new. There are only 2 individuals in B/S utilizing VF/EA.
- There is more responsibility for individuals and families than AWC that they are willing to or able to accept.

Describe how the county will support the provision of training to individuals and families.

- The County/AE staff will provide training to the SCO to encourage promotion of PDS.
- The County is recruiting agencies that will offer Supports Broker services.

Are there ways that ODP can assist you in promoting/increasing PDS services?

- Offer Regional trainings that promote the philosophy of PDS
- Develop written promotional handouts for families

Community for All: ODP has provided you with the data regarding the number of individuals receiving services in congregate settings.

Describe how the county will enable these individuals to return to the community.

Bradford/Sullivan County currently has 6 individuals receiving services in a private ICF/ID facility and 5 individuals living in a Skilled Nursing Facility.

The County, the AE, and the SCO will work together with provider agencies in order to assess individual's needs in order to determine if each of the 11 identified individuals could have their needs met in community based settings. If the AE, SCO and/or providers agree that their needs can be met in community based settings, "Service Preference" will be revisited with each person. If home and community based services are chosen, the AE and SCO will advocate for these individuals to move into a community setting. A PUNS will be completed, and as funds become available, services, both formal and informal, will be identified to support individuals in the community.

HOMELESS ASSISTANCE SERVICES

The Homeless Assistance Allocation for 17/18 is estimated to stay level at \$45,398.00 with an estimated total of 661 individuals who were provided assistance in 16/17. A slowdown in the amount of gas exploration and pipeline construction has eased the housing shortage somewhat but has also reduced the number of available jobs. It is anticipated that the Homeless Assistance Program will serve close to 400 individuals in 17/18. The Homeless Assistance Program is administered by Futures Inc., a local non-profit organization.

Sullivan County receives and administers their HAP allocation and will report the utilization separately.

The County also has housing contingency funds from BHARP and a PHARE grant which have been very effective in supplementing the HAP funds.

- Bridge Housing: This level of assistance was unavailable under the HAP program. MH consumers are being afforded this option under the County's "Bridging the Gap" funds. This level of assistance was unavailable under the HAP program. MH consumers are being afforded this option under the County's "Bridging the Gap" funds.

Case Management: Case management under the HAP funding is limited to helping individuals budget and make payments. HAP case management is supplemented with case managers from the Supported Living program when it is appropriate.

- How does the county evaluate the efficacy of Case Management services? The County monitors the success of individuals being able to stay in their homes and avoiding eviction who are receiving supportive living services and HAP case management. Additionally we receive updates from the supportive living provider on new placements or rehousing progress.
- Please describe any proposed changes to Case Management services for FY 17-18. None at this time.
- If Case Management services are not offered, please provide an explanation of why services are not offered. Not applicable

Rental Assistance: Rents are paid directly to landlords when need is demonstrated. Additionally, referrals are made to other agencies and groups to help with utility payments which were deferred in order to make rental payments.

- How does the county evaluate the efficacy of Rental Assistance services? The County tracks the success of individuals remaining in their apartments by tracking if they are trying to re-enter the programs and/or have avoided eviction due to nonpayment.
- Please describe any proposed changes to Rental Assistance services for FY 17-18. None
- If Rental Assistance services are not offered, please provide an explanation of why services are not offered. Not applicable

Emergency Shelter: The fund provides for up to three days in a local hotel/motel while other arrangements for housing are sought. Efforts by the Housing Task Force and LHOT to develop a homeless shelter have not been successful.

- How does the county evaluate the efficacy of Emergency Shelter services? The County is unable to track or evaluate emergency shelter placements.
- Please describe any proposed changes to Emergency Shelter services for FY 17-18. None
- If Emergency Shelter services are not offered, please provide an explanation of why services are not offered. Though very limited, shelter services are available.

Other Housing Supports: As stated above, the County is utilizing BHARP housing contingency funds to provide additional supports.

- How does the county evaluate the efficacy of Other Housing Supports services? By keeping persons in their homes and monitoring that they are able to maintain payments and not continue to need the additional support.
- Please describe any proposed changes to Other Housing Supports services for FY 2017-2018. None

- If Other Housing Supports services are not offered, please provide an explanation of why services are not offered. Not applicable

Bradford and Sullivan Counties are still suffering from a shortage of appropriate housing stock, inflated rental costs, and under or unemployment. Three new housing development projects have been approved recently which will, hopefully, increase the amount of affordable housing as well as drive down rental costs. However, a return of the high level of natural gas drilling experienced in 2009-2011 could once again result in affordable housing shortages.

Homeless Management Information Systems:

- We are working with Futures to facilitate the HMIS system and to input the required Data.

SUBSTANCE USE DISORDER SERVICES (Limit of 10 pages for entire section)

Bradford/Sullivan Single County Authority's current substance abuse system includes prevention, intervention, and outreach services in addition to case management. These services are provided through a variety of funding sources, including state allocations, county funds, federal grants, and HealthChoices.

This overview should include:

1. Waiting list information (time frames, number of individuals, etc.) for:
 - Detoxification services
 - Non-hospital rehabilitation services
 - Medication Assisted treatment
 - Halfway House Services
 - Partial Hospitalization
 - Outpatient

In regards to the SCA's contracted outpatient, intensive outpatient, and partial hospitalization providers, on average an excess of 200 available openings exists at any given time and consequently there have been no issues with waits at these levels of care. Since January, the average wait for a detox bed has been 2.46 days for 13 individuals and a non-hospital rehab bed 5.07 days for 14 individuals. The SCA made no direct referrals to halfway houses or MAT.

2. Barriers to accessing any level of care.

Despite the timely averages noted above, the SCA contributes much of this to one particular provider who, on approximately half of those clients noted above, has a bed available within 1-3 days of the Case Managers request. The SCA is optimistic that the expansion of inpatient beds by providers such as Pyramid Healthcare, Bradford Recovery

Center, and Gaudenzia as well as the development of new providers will improve wait times across the Commonwealth.

3. Narcan resources available in the county.

Narcan is available at all local pharmacies to anyone that desires it thanks to the Physician General's standing order. Additionally, the SCA purchased a bulk order of Narcan last year and developed an MOU with a local outpatient treatment provider so that the provider could train community members and agency staff as well as distribute that Narcan. Project Bald Eagle recently did training for local Early Intervention providers and some Narcan was distributed at this event as well. This opportunity remains for future use as well. Additionally, local ALS and Pennsylvania State Police carry the lifesaving medication.

4. Resources developed to address the opioid epidemic such as warm hand-off protocols, use of CRS, 24/7 Case management services, use of toll free hotline, coordination with local emergency departments, police, EMS, etc.

Given the risks associated with overdose, all local emergency departments will be provided with the most current Resource List as well as contact information and types of services provided for all local screening, assessment, and treatment providers. Additionally, SCA Case Management staff is available by phone 24 hours daily. These things are done in an attempt to facilitate a smooth transition from emergency room visits to substance abuse treatment. The Resource List will be reviewed, revised, and distributed at least annually. Clients referred to the SCA by an emergency room following an overdose will be given immediate access to substance abuse treatment. Unless the individual is being directly referred to detox services, SCA staff will make every attempt to assess overdose survivors at the emergency department that he/she is being treated. SCA staff will work with aforementioned entities to locate inpatient beds for all individuals including those with private insurance and are not eligible for SCA funding. The Case Manager will track all of these referrals which will be available for DDAP review upon request. Additionally, the Case Manager will contact all local emergency departments at least monthly to obtain any available overdose data, including non-publicly funded referrals/refusals which will also be available for DDAP review upon request.

In an effort to provide the most efficient 24 hour response system, SCA staff will utilize a weekly rotating system of on call services through use of a Department provided cell phone. Access will occur by choosing a prompt on the main Bradford County Human Services phone line that will directly connect the individual to an SCA staff's cell phone. The staff person will be responsible to answer all calls immediately and address issues in accordance with SCA policies and procedures outlined in this manual.

5. Treatment Services expansion including the development of any new services or resources to meet local needs.

One of the SCA's local outpatient treatment providers was awarded a Centers of Excellence grant that became operational in January of 2017. To date, there are approximately 85

individuals in service. The COE is charged with engaging clients in treatment within 14 days of intake as well as providing a variety of case management and certified recovery specialist services at a mobile capacity in the community. These activities range from taking clients to and from various appointments to assisting with housing and employment. Additionally, Bradford Recovery Center has expressed an interest in expansion of services to include an initiative specific to co-occurring persons as well as services associated with outpatient MAT.

6. Any emerging substance use trends that will impact the ability of the county to provide substance use services.

For FY 16/17, SCA data indicates alcohol as the primary substance of choice at 32.5%, heroin/opiates as second at 27%, followed by amphetamines/methamphetamine at 21.6%, marijuana at 17.2%, and other at 1.3%. The SCA continues to address these trends by making access to services as simplistic and expeditious as possible. For those clients referred to inpatient treatment, the SCA is expected to continue to financially assist clients in bridging the gap until clients can be made eligible through Medicaid or the ACA. Collaborative efforts between the SCA and local CAO's continue to be effective in working toward this common goal. In regards to outpatient referrals, the SCA has been fortunate in that there have been no access or waiting list issues, all clients have been seen within 14 days from SCA referral unless client has chosen an alternative appointment.

This overview should not include the DHS-issued guidelines for the use of Act 152 or BHSI funds. The focus should be a comprehensive overview of the substance use services and supports provided by the SCA and any challenges to providing services.

Target Populations

Please identify the county resources to meet the service needs for the following populations:

- **Adults (including older adults, transition age youth, ages 18 and above)**
- **Adolescents (under 18)**
- **Individuals with Co-Occurring Psychiatric and Substance Use Disorders**
- **Women with Children**
- **Overdose survivors**
- **County's identified priority populations**

Recovery –Oriented Services

Describe the current recovery support services including CRS services available in the county including any proposed recovery support services being developed to enhance the existing system. Do not include information on independently affiliated 12 step programs (AA,NA,etc).

Target Populations

- Adults

Current services for adults consist of a variety of outpatient and inpatient services through one of the SCA's contracted providers. The SCA possesses contracts with five local outpatient agencies, two methadone clinics, and 22 inpatient facilities who serve this population.

- Adolescents (under 18)

Services for adolescents are also available at the outpatient and inpatient levels of care. Locally, due to limited resources, adolescents are primarily afforded the opportunity to participate in individual counseling due to what the SCA has repeatedly been advised as a lack of adolescents in treatment to substantiate a group counseling regiment. Two providers have been able to offer some adolescent groups and plan to continue this as long as the need exists. The SCA currently contracts with three inpatient providers specifically for this age group.

- Individuals with Co-Occurring Psychiatric and Substance Use Disorders

Individuals with co-occurring psychiatric substance use disorders have the same local outpatient opportunities listed for adults and TAYS above, with one provider offering services specifically for this population upon request. In regards to inpatient, the SCA contracts with four providers who have self-identified as dual diagnosis facilities.

- Women with Children

Women with children have the same local outpatient opportunities listed for adults and TAYS above. In regards to inpatient, the SCA contracts with one provider who allows women to bring up to two children with her to treatment. Additionally, the SCA is contracted with a prevention provider that administers the Nurse Family Partnership program to first time mothers who qualify.

- Overdose survivors

Clients referred to the SCA by an emergency room following an overdose will be given immediate access to substance abuse treatment. Unless the individual is being directly referred to detox services, SCA staff will make every attempt to assess overdose survivors at the emergency department that he/she is being treated. SCA staff will work with aforementioned entities to locate inpatient beds for all individuals including those with private insurance and are not eligible for SCA funding. Current services for overdose survivors consist of a variety of outpatient and inpatient services through one of the SCA's contracted providers.

- County's identified priority population

In conjunction with DDAP as well as BCHSA, the SCA has identified the following as special populations: pregnant injecting drug users, pregnant substance users, injecting drug users, overdose survivors, and veterans. All clients are being supported through contracted referrals with five local

outpatient agencies, two methadone clinics, as well as twenty five inpatient facilities across the Commonwealth.

Recovery –Oriented Services

Bradford/Sullivan SCA continues to have a verbal agreement with The Main Link which will allow SCA clients to utilize their mentoring, drop in, and warm link recovery support services. The Main Link maintains a drop in center for Mental Health consumers in two locations within Bradford County as well as a mobile unit for Sullivan County. Additionally, Bradford and Sullivan county clients being discharged from a residential level of care and transferred to another level of care and/or for aftercare, including for recovery support services, it is required that the contractor collaborate and coordinate with county agencies to ensure a smooth transition and increase the likelihood of long term recovery. County residents have available to them CRS services at a local, licensed outpatient provider as well as the Centers of Excellence so long as the client qualifies for the latter service as it has some minimal conditions (ie – PA residency, history of opiate abuse, etc.).

HUMAN SERVICES AND SUPPORTS/ HUMAN SERVICES DEVELOPMENT FUND

Sullivan County receives and administers their own HSDF funds. This section only covers Bradford County HSDF.

Adult Services: Please provide the following:

Program Name: N/A

Description of Services: N/A

Service Category: Please choose an item.

Aging Services: Please provide the following:

Program Name: Area Agency on Aging

Description of Services: Meals on Wheels. The home delivered meal program provides a hot, noon-time nutritious meal to eligible older adults (age 60 and over) in their own homes who have been identified as a nutritional risk. The meals meet 1/3 Recommended Daily Allowance Criteria of the United States Department of Agriculture. The meals are prepared under sanitary conditions using safe food handling practices and are reviewed by a registered dietician to ensure the meals meet nutritional requirements.

The meals are delivered by a volunteer. All volunteers undergo training to identify health and safety concerns of individuals receiving home delivered meals. Criminal background clearances are completed on all home delivered meals drivers.

Service Category: Home-Delivered Meals - Provides meals, which are prepared in a central location, to homebound individuals in their own homes.

Planned expenditures: \$20,000.00

Aging Services	13	\$ 20,000
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Children and Youth Services: Please provide the following:

Program Name: YMCA day care

Description of Services: Before and after school child care service provided to working families for their children so that the families may maintain employment and the children will be able to complete school-work in a safe and supportive environment.

Service Category: Day Care - Out-of-home care for part of a 24-hour day to children provided as part of a family service plan required by §3130.61 and 3130.67 to prevent removal of a child from his parents' custody or following an out-of-home placement. See §3140.22(f)(3).

Planned Expenditures: \$8055

Program Name: Guthrie Health Care "Good Grief Day Camp

Description of Services: Under the supervision of an LCSW with vast experience in grief counselling, the camp provides counseling and supports for children who have lost a loved one in the previous two (2) years, incorporating parental education and peer supports.

Service Category: Counseling/Intervention - Activities directed at preventing or alleviating conditions which present a risk to the safety or well-being of the child, by improving problem-solving and coping skills, interpersonal functioning, and the stability of the family.

Planned Expenditures: \$3500.00

Children and Youth Services	143
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\$ 11,555

Generic Services: Please provide the following:

Program Name: N/A

Description of Services:

Service Category: Please choose an item.

Please indicate which client populations will be served (must select at least **two**):

Adult Aging CYS SUD MH ID HAP

Specialized Services: Please provide the following: (Limit of 1 paragraph per service description)

Program Name: Big Brothers/Big Sisters

Description of Services: A youth mentoring, community interaction and integration program for children from single parent homes utilizing both the traditional BB/BS model of pairing an adult with a child, but also using in-school mentors of younger children for whom and adult "big" may not be available.

Planned Expenditures: \$20,000.00

Program Name: Bradford County Literacy Program

Description of Services: Provides training for tutors to be able to educate others in preparation for their GED and employment or assisting with those who have English as a second language to obtain and maintain employment.

Planned Expenditures: \$8056.00

Specialized Services	73
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\$ 28,056

Administration: Bradford County Human Services will retain \$3137.00 to offset the costs for advertising, contracting, budgeting, monitoring and payment of invoices for the HSDF participation programs.

Interagency Coordination: (Limit of 1 page)

If the county utilizes funds for Interagency Coordination, describe how the funding will be utilized by the county for planning and management activities designed to improve the effectiveness of categorical county human services. The narrative should explain both:

- How the funds will be spent (e.g. salaries, paying for needs assessments, etc.).
- How the activities will impact and improve the human services delivery system.

Other HSDF Expenditures – Non-Block Grant Counties Only – None planned

If you plan to utilize HSDF for Mental Health, Intellectual Disabilities, Homeless Assistance, or Substance Use Disorder, please provide a brief description of the use and complete the chart below. Only HSDF-allowable cost centers are included in the dropdowns.

Category	Allowable Cost Center Utilized
Mental Health	
Intellectual Disabilities	
Homeless Assistance	
Substance Use Disorder	

Note: Please refer to Appendix C-2, Planned Expenditures for reporting instructions.

Appendix D

Eligible Human Services Cost Centers

Mental Health

For further detail refer to Cost Centers for County Based Mental Health Services Bulletin (OMHSAS-12-02), effective July 1, 2012.

Administrative Management

Activities and administrative functions undertaken by staff in order to ensure intake into the county mental health system and the appropriate and timely use of available resources and specialized services to best address the needs of individuals seeking assistance.

Administrator's Office

Activities and services provided by the Administrator's Office of the County MH Program.

Adult Development Training (ADT)

Community-based programs designed to facilitate the acquisition of prevocational, behavioral activities of daily living, and independent living skills.

Assertive Community Treatment (ACT) Teams and Community Treatment Teams (CTT)

SAMHSA-recognized Evidence Based Practice (EBP) delivered to individuals with serious mental illness (SMI) who have a Global Assessment of Functioning (GAF) score of 40 or below and meet at least one other eligibility criteria (psychiatric hospitalizations, co-occurring mental health and substance abuse disorders, being at risk for or having a history of criminal justice involvement, and a risk for or history of homelessness).

Children's Evidence Based Practices

Practices for children and adolescents that by virtue of strong scientific proof are known to produce favorable outcomes. A hallmark of these practices is that there is sufficient evidence that supports their effectiveness.

Children's Psychosocial Rehabilitation Services

Activities designed to assist a child or adolescent (e.g., a person aged birth through 17, or through age 21 if enrolled in a special education service) to develop stability and improve capacity to function in family, school and community settings. Services may be delivered to the child or adolescent in the home, school, community or a residential care setting.

Community Employment and Employment Related Services

Employment in a community setting or employment-related programs, which may combine vocational evaluation, vocational training and employment in a non-specialized setting such as a business or industry.

Community Residential Services

Care, treatment, rehabilitation, habilitation, and social and personal development services provided to persons in a community based residential program which is a DHS-licensed or approved community residential agency or home.

Community Services

Programs and activities made available to community human service agencies, professional personnel, and the general public concerning the mental health service delivery system and mental health disorders, in order to increase general awareness or knowledge of same.

Consumer-Driven Services

Services that do not meet the licensure requirements for psychiatric rehabilitation programs, but which are consumer-driven and extend beyond social rehabilitation services.

Emergency Services

Emergency related activities and administrative functions undertaken to proceed after a petition for voluntary or involuntary commitment has been completed, including any involvement by staff of the County Administrator's Office in this process.

Facility Based Vocational Rehabilitation Services

Programs designed to provide paid development and vocational training within a community-based, specialized facility (sheltered workshop) using work as the primary modality.

Family-Based Mental Health Services

Comprehensive services designed to assist families in caring for their children or adolescents with emotional disturbances at home.

Family Support Services

Services designed to enable persons with serious mental illness (SMI), children and adolescents with or at risk of serious emotional disturbance (SED), and their families, to be maintained at home with minimal disruption to the family unit.

Housing Support Services

Services provided to mental health consumers which enable the recipient to access and retain permanent, decent, affordable housing, acceptable to them.

Mental Health Crisis Intervention Services

Crisis-oriented services designed to ameliorate or resolve precipitating stress, which are provided to adults or children and their families who exhibit an acute problem of disturbed thought, behavior, mood or social relationships.

Other Services

Activities or miscellaneous programs which could not be appropriately included in any of the cited cost centers.

Outpatient

Treatment-oriented services provided to a consumer who is not admitted to a hospital, institution, or community mental health facility for twenty-four hour a day service.

Partial Hospitalization

Non-residential treatment services licensed by the Office of Mental Health & Substance Abuse Services (OMHSAS) for persons with moderate to severe mental illness and children and adolescents with serious emotional disturbance (SED) who require less than twenty-four hour continuous care but require more intensive and comprehensive services than are offered in outpatient treatment.

Peer Support Services

Refers specifically to the Peer Support Services which meet the qualifications for peer support services as set forth in the Peer Support Services Bulletin (OMHSAS 08-07-09), effective November 1, 2006.

Psychiatric Inpatient Hospitalization

Treatment or services provided an individual in need of twenty-four hours of continuous psychiatric hospitalization.

Psychiatric Rehabilitation

Services that assist persons with long-term psychiatric disabilities in developing, enhancing, and/or retaining: psychiatric stability, social competencies, personal and emotional adjustment and/or independent living competencies so that they may experience more success and satisfaction in the environment of their choice, and can function as independently as possible.

Social Rehabilitation Services

Programs or activities designed to teach or improve self-care, personal behavior and social adjustment for adults with mental illness.

Targeted Case Management

Services that provide assistance to persons with serious mental illness (SMI) and children diagnosed with or at risk of serious emotional disturbance (SED) in gaining access to needed medical, social, educational, and other services through natural supports, generic community resources and specialized mental health treatment, rehabilitation and support services.

Transitional and Community Integration Services

Services that are provided to individuals who are residing in a facility or institution as well as individuals who are incarcerated, diversion programs for consumers at risk of incarceration or institutionalization, adult outreach services, and homeless outreach services.

Intellectual Disabilities

Administrator's Office

Activities and services provided by the Administrator's Office of the County ID Program. The Administrator's Office cost center includes the services provided relative to the Administrative Entity Agreement, Health Care Quality Units (HCQU) and Independent Monitoring for Quality (IM4Q).

Case Management

Coordinated activities to determine with the individual what services are needed and to coordinate their timely provision by the provider and other resources.

Community Residential Services

Residential habilitation programs in community settings for individuals with intellectual disabilities.

Community Based Services

Community-based services are provided to individuals who need assistance in the acquisition, retention, or improvement of skills related to living and working in the community and to prevent institutionalization.

Other

Activities or miscellaneous programs which could not be appropriately included in any of the cited cost centers.

Homeless Assistance

Bridge Housing

Transitional services that allow individuals who are in temporary housing to move to supportive long-term living arrangements while preparing to live independently.

Case Management

Case management is designed to provide a series of coordinated activities to determine, with each individual, what services are needed to prevent the reoccurrence of homelessness and to coordinate their timely provision by administering agency and community resources.

Rental Assistance

Provides payments for rent, mortgage arrearage for home and trailer owners, rental costs for trailers and trailer lots, security deposits, and utilities to prevent and/or end homelessness or possible eviction by maintaining individuals and families in their own residences.

Emergency Shelter

Refuge and care services to persons who are in immediate need and are homeless; e.g., have no permanent legal residence of their own.

Other Housing Supports

Other supportive housing services outside the scope of existing Homeless Assistance Program components for individuals and families who are experiencing homelessness or facing eviction. An individual or family is facing eviction if they have received either written or verbal notification from the landlord that they will lose their housing unless some type of payment is received.

Substance Use Disorder

Care/Case Management

A collaborative process, targeted to individuals diagnosed with substance use disorders or co-occurring psychiatric disorders, which assesses, plans, implements, coordinates, monitors, and evaluates the options and services to meet an individual's health needs to promote self-sufficiency and recovery.

Inpatient Non-Hospital

Inpatient Non-Hospital Treatment and Rehabilitation

A licensed residential facility that provides 24-hour professionally directed evaluation, care, and treatment for individuals with substance use disorder in acute distress, whose addiction symptomatology is demonstrated by moderate impairment of social, occupation, and/or school functioning. Rehabilitation is a key treatment goal.

Inpatient Non-Hospital Detoxification

A licensed residential facility that provides a 24-hour professionally directed evaluation and detoxification of an individual with a substance use disorder.

Inpatient Non-Hospital Halfway House

A licensed community based residential treatment and rehabilitation facility that provides services for individuals to increase self-sufficiency through counseling, employment and other services. This is a live in/work out environment.

Inpatient Hospital

Inpatient Hospital Detoxification

A licensed inpatient health care facility that provides 24-hour medically directed evaluation and detoxification of individuals diagnosed with substance use disorders in an acute care setting.

Inpatient Hospital Treatment and Rehabilitation

A licensed inpatient health care facility that provides 24-hour medically directed evaluation, care and treatment for individuals with substance use disorder with co-existing biomedical, psychiatric and/or behavioral conditions which require immediate and consistent medical care.

Outpatient/Intensive Outpatient

Outpatient

A licensed organized, non-residential treatment service providing psychotherapy and substance use/disorder education. Services are usually provided in regularly scheduled treatment sessions for a maximum of five hours per week.

Intensive Outpatient

An organized non-residential treatment service providing structured psychotherapy and stability through increased periods of staff intervention. Services are provided in regularly scheduled sessions at least three days per week for at least five hours (but less than ten).

Partial Hospitalization

Services designed for those individuals who would benefit from more intensive services than are offered in outpatient treatment projects, but do not require 24-hour inpatient care. Treatment consists of the provision of psychiatric, psychological and other types of therapies on a planned and regularly scheduled basis at least three days per week with a minimum of ten hours per week.

Prevention

The use of social, economic, legal, medical and/or psychological measures aimed at minimizing the use of potentially addictive substances, lowering the dependence risk in susceptible individuals, or minimizing other adverse consequences of psychoactive substance use.

Medication Assisted Therapy (MAT)

Any treatment for opioid addiction that includes a medication approved by the U.S. Food and Drug Administration for opioid addiction detoxification or maintenance treatment. This may include methadone, buprenorphine, naltrexone, or vivitrol.

Recovery Support Services

Services designed and delivered by individuals who have experience with substance-related disorders and recovery to help others initiate, stabilize, and sustain recovery from substance abuse. These services are forms of social support not clinical interventions. This does not include traditional 12 step programs.

Recovery Specialist

An individual in recovery from a substance-related disorder that assists individuals in gaining access to needed community resources to support their recovery on a peer to peer basis.

Recovery Centers

A location where a full range of Recovery Support Services are available and delivered on a peer to peer basis.

Recovery Housing

A democratically run, self-sustaining and drug-free group home for individuals in recovery from substance related disorders.

Human Services Development Fund

Administration

Activities and services provided by the Administrator's Office of the Human Services Department.

Interagency Coordination

Planning and management activities designed to improve the effectiveness of county human services.

Adult Services

Services for adults (a person who is at least 18 years of age and under the age of 60, or a person under 18 years of age who is head of an independent household) include: adult day care, adult placement, chore, counseling, employment, home delivered meals, homemaker, housing, information and referral, life skills education, protective, service planning/case management, transportation, or other service approved by DHS.

Aging

Services for older adults (a person who is 60 years of age or older) include: adult day service, assessments, attendant care, care management, congregate meals, counseling, employment, home delivered meals, home support, information and referral, overnight shelter, personal assistance service, personal care, protective services, socialization/recreation/education/health promotion, transportation (passenger), volunteer services or other service approved by DHS.

Children and Youth

Services for individuals under the age of 18 years; under the age of 21 years who committed an act of delinquency before reaching the age of 18 years or under the age of 21 years who was adjudicated dependent before reaching the age of 18 years and while engaged in a course of instruction or treatment requests the court to retain jurisdiction until the course has been completed and their families include: adoption services counseling/intervention, day care, day treatment, emergency placement services, foster family services (except room & board), homemaker, information and referral, life skills education, protective and service planning.

Generic Services

Services for individuals that meet the needs of two or more populations include: adult day care, adult placement, centralized information and referral, chore, counseling, employment, homemaker, life skills education, service planning/case management, and transportation services.

Specialized Services

New services or a combination of services designed to meet the unique needs of a specific population that are difficult to meet with the current categorical programs.

Bradford County Human Services

*William D. Blevins, Human Services Director
220 Main Street Unit # 1
Towanda, PA 18848
(570) 265-1760 or 1-800-588-1828
Fax: (570) 265-1761*

*Date: April 20, 2017
To: The Rocket Courier
Fax: 570-746-7737
Sender: William Blevins*

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1-800-588-1828*

Please run the following Public Notice in the April 27, 2017 edition and send the bill to my attention at the above address. If you have any questions please do not hesitate to call. Thank you.

HUMAN SERVICES FUND BIDDERS CONFERENCE

All not for profit groups interested in applying for HSDF allocations from Bradford County Human Services must attend a Bidders' Conference to be held on May 8 at 1:00 pm. The conference will be held in the Human Services office at 220 Main Street Towanda PA.

Bidder packets and qualifications will be distributed at that time.

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State of Pennsylvania
County of Bradford, ss:

Wyalusing, PA

Personally appeared before me this 28th day of April A.D., 2017
Diana J. Lamb, who being duly sworn doth depose and say that she is a representative of
THE ROCKET-COURIER, a weekly newspaper, published in the Borough of Wyalusing,
Bradford County, Pennsylvania, and that the notice hereto attached was published in said
newspaper April 27 2017 and was inserted 0 consecutive weeks, as
follows: _____

The affiant is not interested in the subject matter of the foresaid notice of publication
and that all allegations in the foregoing statements as to time, place and character of
publication are true.

(Signed) Diana J. Lamb Keeler Newspapers

Sworn and subscribed to before me this 28 day of April A.D., 2017

Patricia M. Smiley

Human services fund
bidders conference.
All not for profit
groups interested in
applying for HSDP
allocations from
Bradford County Hu-
man Services must
attend a Bidders'
Conference to be held
on May 8 at 1 p.m. The
conference will be
held in the Human
Services office at 220
Main Street Towanda,
PA. Bidder packets
and qualifications will
be distributed at that
time. H17c

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
Patricia M. Smiley, Notary Public
Wyalusing Boro, Bradford County
My Commission Expires June 8, 2020
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Bradford County Human Services

*William D. Blevins, Human Services Director
220 Main Street Unit # 1
Towanda, PA 18848
(570) 265-1760 or 1-800-588-1828
Fax: (570) 265-1761*

*Date: April 20, 2017
To: The Morning Times
Fax: 570-888-6463
Sender: William Blevins*

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1-800-588-1828*

Please run the following Public Notice in the April 24, 2017 edition and send the bill to my attention at the above address. If you have any questions please do not hesitate to call. Thank you.

HUMAN SERVICES FUND BIDDERS CONFERENCE

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Bradford County Human Services

*William D. Blevins, Human Services Director
220 Main Street Unit # 1
Towanda, PA 18848
(570) 265-1760 or 1-800-588-1828
Fax: (570) 265-1761*

*Date: April 20, 2017
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DESTINATION TEL # 35708888463
DESTINATION ID
ST. TIME 04/21 07:57
TIME USE 00'38
PAGES SENT 0
RESULT NG

Bradford County Human Services

William D. Blevins, Human Services Director
220 Main Street Unit # 1
Towanda, PA 18848
(570) 265-1760 or 1-800-588-1828
Fax: (570) 265-1761

Date: April 20, 2017
To: The Morning Times
Fax: 570-888-6463
Sender: William Blevins

570-

YOU SHOULD RECEIVE 1 PAGE(S), INCLUDING THIS COVER SHEET. IF YOU DO NOT RECEIVE ALL THE PAGES, PLEASE CALL (570) 265-1760 or 1-800-588-1828

Please run the following Public Notice in the April 24, 2017 edition and send the bill to my attention at the above address. If you have any questions please do not hesitate to call. Thank you.

HUMAN SERVICES FUND BIDDERS CONFERENCE

All not for profit groups interested in applying for HSDF allocations from Bradford County Human Services must attend a Bidders' Conference to be held on May 8 at 1:00 pm. The conference will be held in the Human Services office at 220 Main Street Towanda PA.

Bidder packets and qualifications will be distributed at that time.

Apr 20 2017 3:48PM

Last Transaction

Date	Time	Type	Station ID	Duration	Pages	Result
				Digital Fax		
Apr 20	3:48PM	Fax Sent	95708886463	0:00 N/A	0	Error 388*

* A communication error occurred during the fax transmission. If you're sending, try again and/or call to make sure the recipient's fax machine is ready to receive faxes. If you're receiving, contact the initiator and ask them to send the document again.

Apr 20 2017 3:47PM

Last Transaction

Date	Time	Type	Station ID	Duration	Pages	Result
				<u>Digital Fax</u>		
Apr 20	3:46PM	Fax Sent	95708886463	0:00 N/A	0	Error 388*

* A communication error occurred during the fax transmission. If you're sending, try again and/or call to make sure the recipient's fax machine is ready to receive faxes. If you're receiving, contact the initiator and ask them to send the document again.

Apr 20 2017 3:45PM

Last Transaction

Date	Time	Type	Station ID	Duration	Pages	Result
				<u>Digital Fax</u>		
Apr 20	3:44PM	Fax Sent	95708886463	0:00 N/A	0	Error 388*

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Apr 20 2017 3:42PM

Last Transaction

Date	Time	Type	Station ID	Duration	Pages	Result
				Digital Fax		
Apr 20	3:41PM	Fax Sent	95708886463	0:33 N/A	0	Cancel

*** ERROR TX REPORT ***

TX FUNCTION WAS NOT COMPLETED

TX/RX NO 1201
DESTINATION TEL # 95708886463
DESTINATION ID
ST. TIME 04/21 08:31
TIME USE 00'38
PAGES SENT 0
RESULT NG

Bradford County Human Services

*William D. Blevins, Human Services Director
220 Main Street Unit # 1
Towanda, PA 18848
(570) 265-1760 or 1-800-588-1828
Fax: (570) 265-1761*

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201 N. LEHIGH AVENUE, SAYRE PA 18840

PHONE (570) 888-9643 FAX (570) 888-6463

William Blevins
Bradford County Human Services
220 Main St., Unit #1
TOWANDA, PA 18848

*File
HSD F*

Alternate Acct#: 103329

Date: 04/26/17

Due Date: 04/26/17

Ad#	Text	Start	Stop	Days	Amount
01567219	legal notice human services f	04/24/17	04/24/17	1	19.32
Total Due:					23.32

Commonwealth of Pennsylvania, **SS.**
County of Bradford,
Morning Times
April 24, 2017

AFFIDAVIT OF PUBLICATION

LEGAL NOTICE

**HUMAN SERVICES FUND
BIDDERS CONFERENCE**

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April 24, 2017.

Personally appeared before the undersigned, a Notary Public, etc. within and for said County and State, Ashley Moore the Advertising Manager of "Morning Times", a daily newspaper published in Sayre, County of Bradford, State of Pennsylvania, who being duly sworn, states on oath that the notice of which the annexedis a copy was published in said newspaper for 1 times, in the issues bearing date(s) of 04/24/2017

Affiant is not interested in the subject matter of the aforesaid notice or advertisement, and all allegations in the foregoing statement as to time, place and character of the publication are true.

Ashley Moore
Ashley Moore, Advertising Manager

Sworn to and subscribed before me this 26th day of April, 2017.

Francis L. Ellis
Francis L. Ellis
Notary Public
Commission Expires August 14, 2018

NOTARIAL SEAL
FRANCES L. ELLIS, Notary Public
Sayre Boro, Bradford County
My Commission Expires August 14, 2018

INVOICE

MORNING TIMES

AFFIDAVIT

201 N. LEHIGH AVENUE, SAYRE PA 18840

PHONE (570) 888-9643 FAX (570) 888-6463

William Blevins
Bradford County Human Services
220 Main St., Unit #1
TOWANDA, PA 18848

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April 24, 2017.

Handwritten signature and date: 04/26/17

NOTARIAL SEAL
FRANCES L. ELLIS, Notary Public
Sayre Boro, Bradford County
My Commission Expires August 14, 2018

Bradford County Human Services

William D. Blevins, Human Services Director

220 Main Street Unit # 1

Towanda, PA 18848

(570) 265-1760 or 1-800-588-1828

Fax: (570) 265-1761

Date: April 20, 2017
To: The Daily Review
Fax: 265-6130
Sender: William Blevins

YOU SHOULD RECEIVE 1 PAGE(S), INCLUDING THIS COVER SHEET. IF YOU DO NOT RECEIVE ALL THE PAGES, PLEASE CALL (570) 265-1760 or 1-800-588-1828

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CONFIDENTIALITY NOTICE

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Apr 20 2017 3:38PM

Last Transaction

Date	Time	Type	Station ID	Duration	Pages	Result
				Digital Fax		
Apr 20	3:38PM	Fax Sent	95702656130	0:43 N/A	1	OK

2017 NFL Mock Draft — First Round

BY COY COBBLE

The biggest difference in the 2017 draft is that it starts at 8 p.m. The draft continues with rounds two and three at 7 p.m. on Friday and then Saturday will include rounds four through seven straight away.

This year's draft is highlighted by the Brown, including a number one overall pick and four quarterbacks. The Browns will likely have four through seven straight away.

1. Brown — Mike Garret, EDGE, Texas A&M
The Browns may have to look toward selecting Garret. He is the top overall pick and the son of the coach, which makes him a safe bet for the team.

2. Cleveland — Myles Garrett, EDGE, Texas A&M
After knowing their defensive line with their first pick, the Browns will likely select a defensive end. Garrett is the top overall pick and the son of the coach, which makes him a safe bet for the team.

3. Houston — Deshaun Watson, QB, Clemson
I don't think the Texans will select a QB in the first round, but they will select a QB in the second round. Watson is the top overall pick and the son of the coach, which makes him a safe bet for the team.

4. Baltimore — Lamar Jackson, QB, Louisville
The Ravens have been struggling to find a QB in the first round. Jackson is the top overall pick and the son of the coach, which makes him a safe bet for the team.

5. Kansas City — Patrick Mahomes, QB, Texas Tech
The Chiefs will likely select a QB in the first round. Mahomes is the top overall pick and the son of the coach, which makes him a safe bet for the team.

6. Atlanta — Matt Ryan, QB, East Carolina
The Falcons will likely select a QB in the first round. Ryan is the top overall pick and the son of the coach, which makes him a safe bet for the team.

7. Chicago — Mike Baker, QB, Ohio State
The Bears will likely select a QB in the first round. Baker is the top overall pick and the son of the coach, which makes him a safe bet for the team.

8. Philadelphia — Carson Wentz, QB, North Dakota State
The Eagles will likely select a QB in the first round. Wentz is the top overall pick and the son of the coach, which makes him a safe bet for the team.

9. Dallas — Dak Prescott, QB, Texas Tech
The Cowboys will likely select a QB in the first round. Prescott is the top overall pick and the son of the coach, which makes him a safe bet for the team.

10. Pittsburgh — Ben Roethlisberger, QB, Michigan State
The Steelers will likely select a QB in the first round. Roethlisberger is the top overall pick and the son of the coach, which makes him a safe bet for the team.

11. Denver — Drew Brees, QB, LSU
The Broncos will likely select a QB in the first round. Brees is the top overall pick and the son of the coach, which makes him a safe bet for the team.

12. New York Jets — Sam Darnold, QB, USC
The Jets will likely select a QB in the first round. Darnold is the top overall pick and the son of the coach, which makes him a safe bet for the team.

13. Cincinnati — Andy Dalton, QB, Xavier
The Bengals will likely select a QB in the first round. Dalton is the top overall pick and the son of the coach, which makes him a safe bet for the team.

14. Oakland — Matt Barkley, QB, USC
The Raiders will likely select a QB in the first round. Barkley is the top overall pick and the son of the coach, which makes him a safe bet for the team.

15. Minnesota — Matt Ryan, QB, East Carolina
The Vikings will likely select a QB in the first round. Ryan is the top overall pick and the son of the coach, which makes him a safe bet for the team.

16. New York Giants — Daniel Jones, QB, Duke
The Giants will likely select a QB in the first round. Jones is the top overall pick and the son of the coach, which makes him a safe bet for the team.

17. Buffalo — Josh Allen, QB, Wyoming
The Bills will likely select a QB in the first round. Allen is the top overall pick and the son of the coach, which makes him a safe bet for the team.

18. Tennessee — Derrick Henry, RB, Alabama
The Titans will likely select a RB in the first round. Henry is the top overall pick and the son of the coach, which makes him a safe bet for the team.

19. Washington Redskins — Derion Johnson, RB, Michigan State
The Redskins will likely select a RB in the first round. Johnson is the top overall pick and the son of the coach, which makes him a safe bet for the team.

20. Houston — Deshaun Watson, QB, Clemson
The Texans will likely select a QB in the first round. Watson is the top overall pick and the son of the coach, which makes him a safe bet for the team.

21. Baltimore — Lamar Jackson, QB, Louisville
The Ravens will likely select a QB in the first round. Jackson is the top overall pick and the son of the coach, which makes him a safe bet for the team.

22. Kansas City — Patrick Mahomes, QB, Texas Tech
The Chiefs will likely select a QB in the first round. Mahomes is the top overall pick and the son of the coach, which makes him a safe bet for the team.

23. Cleveland — Myles Garrett, EDGE, Texas A&M
The Browns will likely select a defensive end in the first round. Garrett is the top overall pick and the son of the coach, which makes him a safe bet for the team.

24. Houston — Deshaun Watson, QB, Clemson
The Texans will likely select a QB in the first round. Watson is the top overall pick and the son of the coach, which makes him a safe bet for the team.

25. Baltimore — Lamar Jackson, QB, Louisville
The Ravens will likely select a QB in the first round. Jackson is the top overall pick and the son of the coach, which makes him a safe bet for the team.

26. Kansas City — Patrick Mahomes, QB, Texas Tech
The Chiefs will likely select a QB in the first round. Mahomes is the top overall pick and the son of the coach, which makes him a safe bet for the team.

The Review Classifieds

To Place An Ad To Fax An Ad or Legal 570-265-2151 570-265-6130

- ADVICES WANTED EMPLOY SERVICES BUSINESS RENTALS FOR SALE REAL ESTATE PERSONAL SERVICES AUTO

Legal Notices
Notice of the Board of Supervisors...
Notice of the Board of Supervisors...

Legal Notices
Notice of the Board of Supervisors...
Notice of the Board of Supervisors...

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Wanted: Dairy/Frozen Department Manager.
Experience preferred.
Apply in person at Hurley's Supermarket Towanda, PA.

Motor Route available to deliver the Owego Pennysaver
Call 570-265-2151 ext 1657 for more information.

The Review Daily/Sunday CIRCULATION DEPARTMENT
is open weekdays from 8 a.m. to 5 p.m. Customer service representatives are available 8:30 a.m. until 10 a.m. on Sunday and Saturdays. Calls from Towanda, Jefferson and Wayne Counties received after 10 a.m. will be given credit rather than a paper.

FREEBIES CHEAPIE THRIFIT
1. In the spirit of FREEBIE, you are invited to come to the Review...
2. All you need is a copy of the Review...
3. All you need is a copy of the Review...
4. All you need is a copy of the Review...
5. All you need is a copy of the Review...
6. All you need is a copy of the Review...
7. All you need is a copy of the Review...
8. All you need is a copy of the Review...
9. All you need is a copy of the Review...
10. All you need is a copy of the Review...

Athletes of the Week, B2

MONDAY

The Review

MONDAY

The Review

Athletes of the Week, B2

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Legal Notices

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24apr,1tc

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24apr,1tc

**Bradford County
Commonwealth of
Pennsylvania**

Kelly M Russell, being duly sworn, says she is the designated agent of The Daily Review, of general circulation, established in 1879, published in the Borough of Towanda, county aforesaid, and that the notice hereto attached is exactly as was printed in said paper once a day on the following dates:

24th of April 2017

Kelly M Russell, Accounting

Kelly M Russell

Sworn and subscribed before me this day

25th day of April 2017
Susan M Rought, Notary Public

COMMONWEALTH OF PENNSYLVANIA
Notarial Seal
Susan M. Rought, Notary Public
Towanda Boro, Bradford County
My Commission Expires Aug. 6, 2017
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

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24apr17c

April 2017

Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20 faced ads Daily Review The Rocket Courier	21 faced ads The Morning Times	22
23	24 AD ran - The Morning Times Daily Review	25	26 Proof of Publication The Morning Times	27 AD ran - The Rocket Courier	28 Proof of Publication The Rocket Courier	29
30						

May 2017

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
7	8 HSPF mtg 1:00pm-3:00pm Packets handed out to attendees.	9 Emailed Packets & HSPF contact names and phone #'s to HSPF attendees.	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

Bradford County HSDF Bidder's Conference
May 8, 2017 1:00 p.m.
Human Services Large Conference Room

Attending:

Kaitlyn Hoefflein	Big Brothers/Big Sisters
Aubrey Carrington	Bradford/Wyoming Literacy Program
Marlea Hoyt	BSST Area Agency on Aging
Becky Deremer	BSST Area Agency on Aging
Charity Field	Bradford County YMCA
Bill Blevins	Administrator, Bradford County Human Services
Brian McCarthy	Fiscal Director, Bradford County Human Services

Bill called the public hearing to order. He reported that the state has not released the allocation amount for the 2017/2018 year. He does not expect to receive the same level of funding as 2016/2017. HSDF is being cut by 2+ million dollars, under the Governor's budget and the House budget. Funding is contingent upon a State Allocation and will not commence until the allocation is received by Bradford County. Funding is not retroactive and only available for Bradford County residents.

The Bureau of Financial Operations has told Bradford County Human Services that we need to tighten up HSDF contracts and follow guidelines provided. The Bureau of Financial Operations will be closely monitoring HSDF contracts. Making sure only those eligible meet the criteria for receiving HSDF funded services. They must be Bradford County residents only. Financial eligibility must be met; i.e. income at or below 125% of the poverty level. Agencies may not use HSDF funds for a service that is already provided by another Governmental agency.

Bradford County is being required to do HSDF contract monitoring. This monitoring will include but not be limited to: on-site visits, which include; observation of service delivery, a review of HSDF records and office audits.

Applications for HSDF funding will only be accepted by the groups attending the bidders' conference. This list includes; Bradford County YMCA, Bradford & Wyoming Literacy Program, Area Agency on Aging, and Big Brothers Big Sisters. It is the responsibility of the agency submitting a proposal to include in the application; HSDF budget, Agency budget for service/s provided, a list of the Board of Directors, a conflict of interest policy (if applicable) and a very clear program description of the service/s provided by the agency to meet the criteria of the HSDF awarding. All applications and contracts are subject to approval by the Bradford County Commissioners and the state.

Bill then reiterated the need to be clear and to follow the guidelines for the application process. Providers were informed there would be a "black-out" period once the conference ended until the applications were turned in. The deadline for applications is no later than 5:00PM Monday May 15, 2017. Providers attending the conference requested a phone number and contact person at the state level to ask questions and receive guidance from during the application process.

Bill stated that Brian in Fiscal would obtain contact information and it would be in the Bidders' packets that would also be email out by Carrie. The meeting ended then.

HSDF Bidders' Conference Important Points

1. Funding is contingent upon receiving a State Allocation:
 - a. Under both the Governor's budget and the House Budget HSDF is being cut by 2+ million
 - b. We do not expect to receive the same level of funding we did last year.
 - c. Funding will not commence until the allocation is received by Bradford County Human Services.
 - d. Funding by not be retroactive
2. The Bureau of Financial Operations will be closely monitoring HSDF contracts:
 - a. Making sure that only those eligible by are receiving HSDF funded services
 - i. Financial eligibility
 1. Access cards
 2. At or below 125% of the poverty level
 - ii. Members of groups identified as eligible
 - iii. Receiving eligible services
 - b. Bradford County residents only.
 - c. If it is the responsibility of another Governmental agency to fund the service, HSDF may not be utilized.
3. County will be required to do contract monitorings
 - a. On-site visits
 - i. Observation of service delivery
 - ii. Records review
 - b. Office audits
4. Applications for funding will only be accepted by groups attending the bidders' conference
5. Applications are due no later than 5:00PM Monday May 15, 2017
6. All application must include the following:
 - a. HSDF budget
 - b. Agency budget
 - c. Board list
 - d. Conflict of interest policy (if applicable)
 - e. Program description including work statement
7. All applications and contracts are subject to approval by the County Commissioners and the State.

Attachment "I"
BRADFORD COUNTY HUMAN SERVICE DEVELOPMENT FUND
TOTAL AGENCY BUDGET FOR SERVICE PROVIDER
FISCAL YEAR 2017/2018

AGENCY NAME: _____ ADDRESS: _____

TELEPHONE #: _____

CONTACT NAME: _____ EMAIL ADDRESS: _____

PROVIDER'S NORMAL OPERATING PERIOD: FROM: _____ TO: _____
 (I.E., CALENDAR/FISCAL YEAR PERIOD)

PROVIDER'S FORM OF OPERATIONS: PROFIT: _____ NON-PROFIT: _____ OTHER: _____
 (Specify):

LIST ALL SERVICES PROVIDED BY YOUR AGENCY:
 Recreational, educational, and general wellness for all ages

SUMMARY OF TOTAL AGENCY BUDGET
FOR THE PERIOD JULY 1, 2016 THROUGH JUNE 30, 2017

<u>EXPENDITURES</u>	<u>AMOUNT</u>
SALARIES AND WAGES	_____
BENEFITS	_____
OPERATING COSTS	_____
FIXED ASSESSTS & COSTS	_____
OTHER MISCELLANEOUS COSTS	_____
INDIRECT COSTS (IF APPLICABLE)*	_____
TOTAL PROJECTED COSTS OF SERVICE:	_____
 <u>REVENUES</u>	 _____
CONTRIBUTIONS	_____
ALL OTHER INCOME	_____
TOTAL PROJECTED REVENUES:	_____
 PROJECTED SURPLUS/(DEFICIT):	 _____

*INDIRECT COSTS INCLUDE ADMINISTRATION AND OVERHEAD COSTS.

Attachment "3"

BRADFORD COUNTY HUMAN SERVICES DEVELOPMENT FUND
REQUEST FOR PROPOSAL
FISCAL YEAR 2017/2018

1. AGENCY NAME: _____
2. TYPE: PUBLIC NON-PROFIT PRIVATE OTHER
 - A. OTHER MATCHING FUNDS: _____ SOURCE _____
 - B. WHICH OF THE FOLLOWING DOES YOUR PROGRAM QUALIFY UNDER:

<input type="checkbox"/> ADULT SERVICES	<input type="checkbox"/> CHILDREN & YOUTH
<input type="checkbox"/> DRUG & ALCOHOL	<input type="checkbox"/> INTELLECTUAL DISABILITIES
<input type="checkbox"/> AGING	<input type="checkbox"/> GENERIC (Specify)
<input type="checkbox"/> MENTAL HEALTH	
 - C. HOW WILL FUNDS BE USED:

<input type="checkbox"/> TO SUPPLEMENT EXISTING SERVICES
<input type="checkbox"/> FOR GENERIC SERVICES
<input type="checkbox"/> FOR NEW SERVICES WITHIN THE SIX PROGRAM AREAS
 - D. TOTAL ESTIMATED PERSONS TO BE SERVED (unduplicated): _____
3. Attach a narrative/program description, describing how your agency plans to use funds from the HSDF grant. Briefly describe the problem to be addressed, objectives of the program, method, and evaluation process. Include who is eligible for the proposed services.

** PLEASE ALSO INCLUDE YOUR EXPECTED BUDGET REQUEST FOR 2017/2018 HSDF PROGRAM(S), THE STATE IS REQUIRING A LONG RANGE PLAN FOR HSDF PROGRAM(S) FROM THE COUNTY.
4. Total agency budget must be included with submission of proposal. A specific budget relating to HSDF funded activity must also be submitted. Attach agency budget as an exhibit. For those agencies on the State fiscal year, you may submit your fiscal year budget.
5. Provide data supporting the need for proposed service. If requesting funds to continue a service funded with HSDF, provide data which includes: number of unduplicated persons previously served, number of persons on waiting list for service, inability to provide service due to lack of funds, and potential for program self-sufficiency.
6. Attach a list of the Board of Directors.
7. Attach a copy of a Conflict of Interest Policy, of any Board Member, who is a County Commissioner or a county employee.
8. Submit **one original** and **three copies** of proposal no later than **4:00 p.m., Monday, May 15, 2017**. Proposals may be hand carried or mailed to: **Bradford County Human Services, 220 Main Street, Unit 1, Towanda, PA 18848 (ATTN: Carie Cory.)**

Attachment "3"

BRADFORD COUNTY HUMAN SERVICE DEVELOPMENT FUND

REQUEST FOR PROPOSAL
FISCAL YEAR 2017/2018

- A. STATEMENT OF PROBLEM/DEFICIENCY EXISTING WITHIN THE BRADFORD COUNTY HUMAN SERVICE DELIVERY SYSTEM:

- B. STATEMENT OF PROPOSED SOLUTION TO PROBLEM/DEFICIENCY NOTED ABOVE:

- C. PROGRAM NARRATIVE OF PROPOSED SERVICE:

- D. PROVIDE HISTORICAL NUMBERS OF PERSONS SERVED IN PROGRAM IN PRIOR YEARS, WAITING LISTS, OTHER FUNDING ALTERNATIVES, OR LACK OF AND POTENTIAL FOR PROGRAM SELF SUFFICIENCY.

E. IF AN HSDF PROVIDER IN PRIOR FISCAL YEAR GRANT PERIODS, DESCRIBE YOUR OUTREACH AND INTAKE PROCEDURES UTILIZED IN CARRYING OUT HSDF FUNDED INITIATIVES.

F. DESCRIBE YOUR AGENCY'S EFFORTS TO COORDINATE SERVICE DELIVERY WITH ESTABLISHED CATEGORICAL PROGRAM WITHIN THE COUNTY SUCH AS MH/MR, CYS, AGING, DRUG & ALCOHOL AND CHILD CARE SERVICES.

G. DESCRIBE YOUR AGENCY'S EFFORTS TO HAVE CLIENTS BECOME SELF-SUFFICIENT.

Attachment "4"

STATEMENT OF ASSURANCE

2017-2018 HUMAN SERVICES DEVELOPMENT FUND

BRADFORD COUNTY

The recipient of Human Services Development Funds from the Bradford County Commissioners hereby assures that in compliance with Title XI of the Civil Rights Act of 1964, the Pennsylvania Human Relations Act, and Section 504 of the Federal Rehabilitation Act of 1972, the Provider:

- A. Does not and will not discriminate against any person because of race, color, religious creed, ancestry, national origin, age, sex, handicap, or familial status in providing:
 - 1. Services or employment, or in its relationship with other providers; and
 - 2. Access to services and employment promulgated to enforce the statutory provisions against discrimination;
- B. Will comply with all regulations promulgated to enforce the statutory provisions against discrimination;
- C. Will adhere to fiscal requirements for the Human Services Development Fund.
- D. Will maintain eligibility records and other necessary records to support expenditures of funds in compliance with Human Services Development Fund requirements.
- E. Will submit an audit if Provider receives more than \$3,000 of HSDF Funding for the grant period July 1, 2017 to June 30, 2018.

DATE

SIGNATURE OF AUTHORIZED AGENT

NAME AND TITLE (Typed)

AGENCY

Human Services Development Fund

Administration

Activities and services provided by the Administrator's Office of the Human Services Department.

Interagency Coordination

Planning and management activities designed to improve the effectiveness of county human services.

Adult Services

Services for adults (a person who is at least 18 years of age and under the age of 60, or a person under 18 years of age who is head of an independent household) include: adult day care, adult placement, chore, counseling, employment, home delivered meals, homemaker, housing, information and referral, life skills education, protective, service planning/case management, transportation, or other service approved by DHS.

Aging

Services for older adults (a person who is 60 years of age or older) include: adult day service, assessments, attendant care, care management, congregate meals, counseling, employment, home delivered meals, home support, information and referral, overnight shelter, personal assistance service, personal care, protective services, socialization/recreation/education/health promotion, transportation (passenger), volunteer services or other service approved by DHS.

Children and Youth

Services for individuals under the age of 18 years; under the age of 21 years who committed an act of delinquency before reaching the age of 18 years or under the age of 21 years who was adjudicated dependent before reaching the age of 18 years and while engaged in a course of instruction or treatment requests the court to retain jurisdiction until the course has been completed and their families include: adoption services counseling/intervention, day care, day treatment, emergency placement services, foster family services (except room & board), homemaker, information and referral, life skills education, protective and service planning.

Generic Services

Services for individuals that meet the needs of two or more populations include: adult day care, adult placement, centralized information and referral, chore, counseling, employment, homemaker, life skills education, service planning/case management, and transportation services.

Specialized Services

New services or a combination of services designed to meet the unique needs of a specific population that are difficult to meet with the current categorical programs.

V. HSDF MONITORING REQUIREMENTS

The Department of Human Services' Bureau of Financial Operations (BFO), the state agency charged with administering the HSDF program, reserves the right to perform fiscal and programmatic monitoring of HSDF-funded services, whether provided by the county or a county-contracted provider. Department monitoring efforts will be in addition to those of the county and will adhere to the guidelines as set forth in the HSDF Act, HSDF Instructions and Requirements, this Fiscal Year Update, Title 55 PA. Code, Chapter 2050, and other applicable federal, state, and local policies.

VI. FAMILY MONTHLY GROSS INCOME LEVELS

The following Family Monthly Gross Income Levels must be used for Adult Services in accordance with Title 55 PA. Code, Chapter 2050 and for HSDF Generic and Specialized Services which require the use of Adult Services eligibility criteria.

These income levels are to be used in conjunction with the financial eligibility criteria established in Title 55 PA. Code § 2050.22 for Adult Services funded through the HSDF program.

The income levels are in effect between July 1, 2016 and June 30, 2017.

FAMILY MONTHLY GROSS INCOME LEVELS		
FAMILY SIZE	125% of Poverty	250% of Poverty
1	\$1,238	\$2,475
2	1,669	3,338
3	2,100	4,200
4	2,531	5,063
5	2,963	5,925
6	3,394	6,788
For each additional family member add:	\$433	\$867

*These income levels are based on Federal Poverty Income Guidelines which are revised annually.

INTAKE PERSON: _____ DATE: _____ RID #: _____

PLEASE GET THE FOLLOWING INFORMATION WHEN YOU HAVE AN INTAKE REQUESTING MONEY FOR UTILITIES, RENT, ETC. WE NEED TO HAVE ALL OF THIS FORM COMPLETED.

NAME: _____	PHONE: _____
ADDRESS: _____	DOB: _____
_____	SSN: _____
	(of person's name on account)

OTHER ADULTS IN HOUSEHOLD (NAME, SSN OR DOB):

_____	_____	_____	_____
_____	_____	_____	_____

NUMBER OF CHILDREN IN THE HOME: _____

CHILDREN'S NAME AND DOB:

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

ANNUAL INCOME FOR HOUSEHOLD: _____ \$ _____

*Requires paystubs, etc. or supporting documentation

Verified by _____ Signature _____ Date _____
(Name of staff member)

Bradford County Human Services

*220 Main Street Unit # 1
Towanda, PA 18848
(570) 265-1760 or 1-800-588-1828
Fax: (570) 265-8541*

*Date: April 20, 2017
To: Daily Review
Fax: (570)265-6130
Sender: Carie Cory*

*YOU SHOULD RECEIVE 1 PAGE(S), INCLUDING THIS COVER SHEET. IF YOU DO NOT
RECEIVE ALL THE PAGES, PLEASE CALL (570) 265-1760 or
1-800-588-1828*

Please run the following Legal Notice in the May 1, 2017 edition and send the bill to my attention at the above address. If you have any questions, please do not hesitate to call. Thank you.

Public Notice

A Public Hearing will be conducted to obtain input from the citizens of Bradford and Sullivan counties on Mental Health, Intellectual Disabilities and Drug and Alcohol services. The Hearing will be held in the Bradford County Human Services Office at 220 Main Street Towanda PA, on May 15, 2017, at 1:00 pm.

CONFIDENTIALITY NOTICE

THE INFORMATION CONTAINED IN THIS TELECOPY IS CONFIDENTIAL, AND IS INTENDED FOR THE USE OF THE NAMED RECEIVER ONLY. IF YOU ARE NOT THE NAMED RECEIVER OR THE PERSON RESPONSIBLE FOR DELIVERING THIS TELECOPY TO THE NAMED RECEIVER, YOU ARE HEREBY NOTIFIED THAT ANY USE OF THIS TELECOPY OR OF ITS CONTENTS, INCLUDING DISSEMINATION OR COPYING, IS AGAINST FEDERAL AND STATE LAWS AND IS STRICTLY PROHIBITED.

*** ERROR TX REPORT ***

TX FUNCTION WAS NOT COMPLETED

TX/RX NO	1204	
DESTINATION TEL #	95702651666	
DESTINATION ID		
ST. TIME	04/21 08:54	
TIME USE	00'00	
PAGES SENT	0	
RESULT	NG	#0018 BUSY/NO SIGNAL

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*** TX REPORT ***

TRANSMISSION OK

TX/RX NO 1205
DESTINATION TEL # 85702656130
DESTINATION ID
ST. TIME 04/21 08:59
TIME USE 00'29
PAGES SENT 1
RESULT OK

Bradford County Human Services

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**Bradford County
Commonwealth of
Pennsylvania**

Kelly M Russell, being duly sworn, says she is the designated agent of The Daily Review, of general circulation, established in 1879, published in the Borough of Towanda, county aforesaid, and that the notice hereto attached is exactly as was printed in said paper once a day on the following dates:

1st of May 2017

Kelly M Russell, Accounting

Kelly M Russell

Sworn and subscribed before me this day

2nd day of May 2017

Susan M Rought, Notary Public

COMMONWEALTH OF PENNSYLVANIA
Notarial Seal
Susan M. Rought, Notary Public
Towanda Boro, Bradford County
My Commission Expires Aug. 6, 2017

MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

COPY

PUBLIC NOTICE
A Public Hearing will be conducted to obtain input from the citizens of Bradford and Sullivan counties on Mental Health, Intellectual Disabilities and Drug and Alcohol services. The Hearing will be held in the Bradford County Human Services Office at 220 Main Street Towanda PA on May 31, 2017, at 1:00 pm.
Imay, LLC

Bradford County Human Services

220 Main Street Unit # 1
Towanda, PA 18848
(570) 265-1760 or 1-800-588-1828
Fax: (570) 265-8541

Date: April 20, 2017
To: Morning Times
Fax: 888-5554
Sender: Carie Cory

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*** TX REPORT ***

TRANSMISSION OK

TX/RX NO 1203
DESTINATION TEL # 95708885554
DESTINATION ID
ST. TIME 04/21 08:47
TIME USE 00'20
PAGES SENT 1
RESULT OK

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INVOICE

**T MORNING
TIMES**

AFFIDAVIT

201 N. LEHIGH AVENUE, SA

*file for
County Plans*

PHONE (570) 888-9643 FAX (570) 888-6463

William Blevins
Bradford County Human Services
220 Main St., Unit #1
TOWANDA, PA 18848

Alternate Acct#: 103329

Date: 05/02/17

Due Date: 05/02/17

Ad#	Text	Start	Stop	Days	Amount
01567220	Legal notice A Public Hearing	05/01/17	05/01/17	1	14.72
Total Due:					18.72

Commonwealth of Pennsylvania, **SS.**
County of Bradford,
Morning Times
May 1, 2017

AFFIDAVIT OF PUBLICATION

LEGAL NOTICE

A Public Hearing will be conducted to obtain input from the citizens of Bradford and Sullivan counties on Mental Health, Intellectual Disabilities and Drug and Alcohol services. The Hearing will be held in the Bradford County Human Services Office at 220 Main Street, Towanda, PA, on May 15, 2017, at 1:00 pm.

May 1, 2017.

Personally appeared before the undersigned, a Notary Public, etc. within and for said County and State, Ashley Moore the Advertising Manager of "Morning Times", a daily newspaper published in Sayre, County of Bradford, State of Pennsylvania, who being duly sworn, states on oath that the notice of which the annexedis a copy was published in said newspaper for 1 times, in the issues bearing date(s) of 05/01/2017

Affiant is not interested in the subject matter of the aforesaid notice or advertisement, and all allegations in the foregoing statement as to time, place and character of the publication are true.

Ashley Moore

Ashley Moore, Advertising Manager

Sworn to and subscribed before me this 2nd day of May, 2017.

Francis L. Ellis

Francis L. Ellis
Notary Public
Commission Expires August 14, 2018



INVOICE

MORNING TIMES

AFFIDAVIT

201 N. LEHIGH AVENUE, SAYRE PA 18840

PHONE (570) 888-9643 FAX (570) 888-6463

William Blevins
Bradford County Human Services
220 Main St., Unit #1
TOWANDA, PA 18848

Alternate Acct#: 103329

Date: 05/08/17

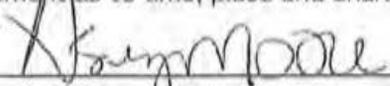
Due Date: 05/08/17

Ad#	Text	Start	Stop	Days	Amount
01567220	Legal notice A Public Hearing	05/01/17	05/01/17	1	14.72
Total Due:					18.72

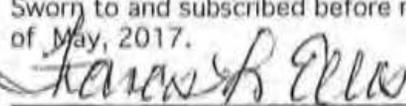
Commonwealth of Pennsylvania, **SS.**
County of Bradford,
Morning Times
May 1, 2017

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Affiant is not interested in the subject matter of the aforesaid notice of advertisement, and all allegations in the foregoing statement as to time, place and character of the publication are true.


Ashley Moore, Advertising Manager

Sworn to and subscribed before me this 8th day of May, 2017.


Francis L. Ellis
Notary Public
Commission Expires August 14, 2018

AFFIDAVIT OF PUBLICATION

LEGAL NOTICE

A Public Hearing will be conducted to obtain input from the citizens of Bradford and Sullivan counties on Mental Health, Intellectual Disabilities and Drug and Alcohol services. The Hearing will be held in the Bradford County Human Services Office at 220 Main Street, Towanda, PA, on May 15, 2017, at 1:00 pm.

May 1, 2017.

NOTARIAL SEAL
FRANCES L. ELLIS, Notary Public
Sayre Boro, Bradford County
My Commission Expires August 14, 2018

Public Hearing 5/15/17

April 2017

Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20 faxed ad Daily Review's Morning Times RocketBourne Sullivan Review	21	22
23	24	25	26	27	28	29
30						

May 2017

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1 AD rati- Morning Times Daily Review	2 Proof of Publication Daily Review	3 AD rati- Sullivan Review	4 AD rati- Rocket Course	5	6
7	8 Proof of Publication Morning Times	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

Bradford and Sullivan Counties Public Hearing Sign In Sheet

May 15, 2017

Location - Bradford County Human Services 220 Main Street Unit # 1 Towanda, PA

Name	Agency / Individual	Town	E-mail (optional)	Do you wish to make public comment and if so, on what topic:
				Mental Health
				Intellectual Disabilities
				Drug & Alcohol
				Human Services Development Funds
Ellen Timmerman	Bradford Sullivan Mental Health	Shunk		
Brian McCarthy	Bradford/Sullivan Human Services	Towanda		
Teresa Sharp	Bradford/Sullivan PA	Towanda		
Mayme Carter	B/S Intellectual Disability	Towanda		
James Coewen	Daily News	Towanda		
Annette	Main Street	TOWANDA		
[Signature]	IC	CC		
Karl Dist. 2001	IC	CC		
Gena Bad	PYD 110 Main St Athens	Athens		
Sarah Gates	Troy Psychological Services	Troy	Sarahgates4@gmail.com	

Bradford County intellectual disabilities department will begin a new state wide initiative July 1, 2017. This initiative will offer case management services to autistic adults. Eligibility for the program include; three deficits in adaptive functioning and a diagnosis of autism. Other services may be added at a later date. These services will probably be provided by agencies that have contracts with Bradford County. Autism is a broad spectrum condition and is very staff intensive. Applied behavioral analysis and support coordination will be needed for individuals with autism.

All services to move forward without budget, based on last year's budget.

State proposes a 19.6 million dollar cut to mental health budget.

Intellectual disabilities were not cut but there is no added funding.

Bradford Recovery Center is using incentives to address the opioid epidemic.

Center of Excellence is looking to meet those needs of the opioid epidemic, as well.

Bradford County has looked at numbers for providing veteran services but the majority of veteran's receive services through the VA and the numbers were not there to provide additional services.

There were no other comments or recommendations and the public meeting was adjourned.

Keeler Newspapers

PO Box 187 • Wyalusing, PA 18853-0187
570-746-1217 FAX: 570-746-7737



Publishers of
The Rocket-Courier and
Rocket-Shopper

PROOF OF PUBLICATION

State of Pennsylvania
County of Bradford, ss:

Wyalusing, PA

Personally appeared before me this 19th day of May A.D., 2017

Diana J. Lamb, who being duly sworn doth depose and say that she is a representative of THE ROCKET-COURIER, a weekly newspaper, published in the Borough of Wyalusing, Bradford County, Pennsylvania, and that the notice hereto attached was published in said newspaper May 4 2017 and was inserted 0 consecutive weeks, as follows: _____

The affiant is not interested in the subject matter of the foresaid notice of publication and that all allegations in the foregoing statements as to time, place and character of publication are true.

(Signed) Diana J. Lamb Keeler Newspapers

Sworn and subscribed to before me this 19 day of May A.D., 2017

Patricia M Smiley

A public hearing will be conducted to obtain input from the citizens of Bradford and Sullivan Counties on Mental Health, Intellectual Disabilities and Drug and Alcohol services. The hearing will be held in the Bradford County Human Services Office at 220 Main Street, Towanda, PA on May 15, 2017 at 1 p.m. R110c

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
Patricia M. Smiley, Notary Public
Wyalusing Boro, Bradford County
My Commission Expires June 8, 2020
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES



PUBLIC NOTICE

The annual meeting of the Peace Church Cemetery Association is set for Sunday May 21st at 2:00 p.m. at the church.

PUBLIC NOTICE

INVITATION FOR BIDS

The Dushore Sewer Authority (Owner) will receive sealed bids for the Railroad Street Sewer Rehabilitation Project, at the Borough of Dushore Municipal Building until 3:00 PM prevailing time on June 12, 2017 at 216 Julia Street, Dushore, Pa 18614. Sealed bids will be publically opened and read aloud at 6:30 PM during the legislative sewer authority meeting.

The sanitary sewer project will generally consist of the Cured in Place Pipe (CIPP) trenchless rehabilitation of approximately 800 feet of 8-inch clay pipe.

Copies of the Contract Documents may be obtained by depositing \$50.00 with McTish, Kunkel & Associates at 1500 Sycamore Road, Suite 320, Montoursville, PA 17754 for each set.

A certified check or bank draft payable to the order of Dushore Sewer Authority, or a satisfactory Bid Bond executed by the Bidder and an acceptable surety in an amount equal to ten percent (10%) of the total of the Bid, shall be submitted with each bid. The Bidder shall include the fully completed Non-Collusion Affidavit with the bid.

This Project is funded in part with Community Development Block Grant (CDBG) funds. In accordance with CDBG rules and regulations, municipalities must uphold the conditions of the Minority/Women's Business Enterprise (MBE/WBE) Action Plan. The objective of the plan is to facilitate the strengthening and expansion of MBE/WBE business concerns. Complete copies are available by contacting Sullivan County Office of Planning and Community Development, Sullivan County Courthouse, 245 Muncy Street, Laporte, PA 18626.

The minimum participation level of five percent (5%) for Minority Business Enterprises and three percent (3%) for Women Business Enterprises MBE/WBE has been

PUBLIC NOTICE

PUBLIC HEARING

Sullivan County Human Services will hold a public hearing for those agencies that have submitted Requests for Proposal for the provision of services through the Sullivan County Human Services Development Fund (HSDF) for FY 2017-2018. The hearing will be held Thursday, May 25, 2017, at 1 p.m. in the Sullivan County Courthouse. The public is invited.

PUBLIC NOTICE

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ESTATE NOTICE

Letters of Administration on the Estate of Robert Thomas Balog, deceased, who died November 28, 2016, late of Forks Township, Sullivan County,

PUBLIC NOTICE

The Elkland Township Supervisors are requesting bids for (1) bid = 4795 tons of Shale (more or less) to various roads in Elkland Township, Sullivan County. Bidders must be able to tail gate spread materials and have the ability to deliver 300 tons per day. Please contact Roy Zimmerman with any questions at 570-924-3655. Sealed bids should be sent to Elkland Township, 909 Kobbe Road, Forksville, PA 18616 and must be received by May 30, 2017. Please write "Shale Bid" on the envelope.

Received bids will be opened at the regular monthly meeting scheduled for Thursday, June 1, 2017 at 7:00 p.m. The Supervisors reserve the right to reject any and all bids.

Respectfully,
Tim Waechter
Secretary/Treasurer
Elkland Township

ADMINISTRATOR'S NOTICE

Letters of Administration on the Estate of Adella P. Clark, deceased, late of Dushore Borough, Sullivan County, Pennsylvania, having been granted to the undersigned by the Register of Wills of Sullivan County,

auctions

Real Estate Auction

87+/- Acre Home • Barn • Land

26 Stanley Myers Road
Muncy Valley, PA 17758

Davidson Twp • Sullivan County

Saturday, May 13th @ 12pm

Auction Held on Site



Sold at Absolute Auction
Sells Regardless of Price

• 2 Story Home • Bank Barn • 25+/- Open/Tillable
• Excellent Hunting • Spring Fed Pond

Directions: From Muncy Valley, travel Route 42 & 220 south 1.5 miles, turn left on Rt. 42 south travel 1.4 miles, make a right onto Stanley Myers Rd. Property is on the left & right.



Real Estate It's What's For Sale!

AY-002123 | dustinsnyderauctioneer@gmail.com

570.441.9357

www.dustinsnyderauctioneer.com

I would like to thank the owners for hiring our services.

Follow us on



**APPENDIX C-2 : NON-BLOCK GRANT COUNTIES
HUMAN SERVICES PROPOSED BUDGET AND INDIVIDUALS TO BE SERVED**

County:	1. ESTIMATED INDIVIDUALS SERVED	2. DHS ALLOCATION (STATE & FEDERAL)	3. PLANNED EXPENDITURES (STATE & FEDERAL)	4. COUNTY MATCH	5. OTHER PLANNED EXPENDITURES
MENTAL HEALTH SERVICES					
ACT and CTT					
Administrative Management	1,377		\$ 365,041	\$ 40,560	
Administrator's Office			\$ 118,416	\$ 11,336	
Adult Developmental Training					
Children's Evidence Based Practices					
Children's Psychosocial Rehabilitation	224		\$ 64,271	\$ -	
Community Employment	19		\$ 46,440	\$ -	
Community Residential Services	144		\$ 773,077	\$ -	
Community Services	82		\$ 92,500	\$ 736	
Consumer-Driven Services					
Emergency Services	44		\$ 11,566	\$ 1,285	
Facility Based Vocational Rehabilitation					
Family Based Mental Health Services	1		\$ 3,279	\$ 364	
Family Support Services	5		\$ 91,000	\$ 6,960	
Housing Support Services	144		\$ 601,205	\$ 15,727	
Mental Health Crisis Intervention	122		\$ 30,904	\$ -	
Other					
Outpatient	-		\$ 5,000	\$ 556	
Partial Hospitalization	1		\$ 5,000	\$ 556	
Peer Support Services					
Psychiatric Inpatient Hospitalization	-		\$ 5,000	\$ 556	
Psychiatric Rehabilitation					
Social Rehabilitation Services	543		\$ 402,776	\$ 20,488	
Targeted Case Management	176				
Transitional and Community Integration					
TOTAL MENTAL HEALTH SERVICES	2,882	\$ 2,615,475	\$ 2,615,475	\$ 99,124	\$ -
INTELLECTUAL DISABILITIES SERVICES					
Administrator's Office			\$ 310,000	\$ 1,333	
Case Management	14		\$ 281,446	\$ 5,635	
Community-Based Services	78		\$ 316,838	\$ 35,204	
Community Residential Services	10		\$ 361,838		
Other	35		\$ 16,202		
TOTAL INTELLECTUAL DISABILITIES SERVICES	137	\$ 1,286,324	\$ 1,286,324	\$ 42,172	\$ -

**APPENDIX C-2 : NON-BLOCK GRANT COUNTIES
HUMAN SERVICES PROPOSED BUDGET AND INDIVIDUALS TO BE SERVED**

County:	1. ESTIMATED INDIVIDUALS SERVED	2. DHS ALLOCATION (STATE & FEDERAL)	3. PLANNED EXPENDITURES (STATE & FEDERAL)	4. COUNTY MATCH	5. OTHER PLANNED EXPENDITURES
HOMELESS ASSISTANCE SERVICES					
Bridge Housing					
Case Management	199		\$ 6,000		
Rental Assistance	163		\$ 33,524		
Emergency Shelter	36		\$ 5,874		
Other Housing Supports					
Administration					
TOTAL HOMELESS ASSISTANCE SERVICES	398	\$ 45,398	\$ 45,398		\$ -
SUBSTANCE USE DISORDER SERVICES					
Act 152 Inpatient Non-Hospital	30		\$ 101,731		
Act 152 Administration			\$ 2,000		
BHSI Administration					
BHSI Case/Care Management					
BHSI Inpatient Hospital					
BHSI Inpatient Non-Hospital	9		\$ 33,577		
BHSI Medication Assisted Therapy					
BHSI Other Intervention					
BHSI Outpatient/IOP	9		\$ 6,615		
BHSI Partial Hospitalization	6		\$ 10,410		
BHSI Recovery Support Services					
TOTAL SUBSTANCE USE DISORDER SERVICES	54	\$ 154,333	\$ 154,333	\$ -	\$ -
HUMAN SERVICES DEVELOPMENT FUND					
Adult Services					
Aging Services	13		\$ 20,000		
Children and Youth Services	143		\$ 11,555		
Generic Services	-		\$ -		
Specialized Services	73		\$ 28,056		
Interagency Coordination					
Administration			\$ 3,137		
TOTAL HUMAN SERVICES DEVELOPMENT FUND	229	\$ 62,748	\$ 62,748		\$ -
Please note any utilization of HSDF funds in other categoricals and include: categorical and cost center, estimated individuals, estimated expenditures.					
GRAND TOTAL	3,700	\$ 4,164,278	\$ 4,164,278	\$ 141,296	\$ -