

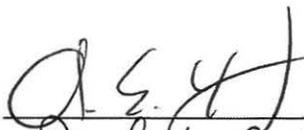
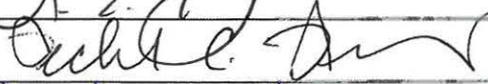
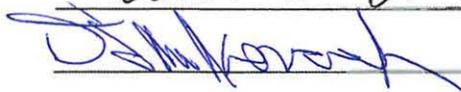
Appendix A
Fiscal Year 2017-2018

COUNTY HUMAN SERVICES PLAN
ASSURANCE OF COMPLIANCE

COUNTY OF: Columbia

- 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>	
	Chris E Young	Date: 8/30/17
	RICHARD C KROGGER	Date: 8/30/17
	D. M. KAUSHCH	Date: 8-30-17

Appendix B County Human Services Plan Template

The County Human Services Plan is to be submitted using the Template outlined below. It is to be submitted in conjunction with Appendices A and C (C-1 or C-2, as applicable) to the Department of Human Services (DHS) as directed in the Bulletin.

PART I: COUNTY PLANNING PROCESS (Limit of 2 pages)

Describe the county planning and leadership team and the process utilized to develop the plan for the expenditure of human services funds by answering each question below.

1. Please identify the critical stakeholder groups, including individuals and their families, consumer groups, providers of human services, and partners from other systems, involved in the county's human services system.

The current planning team consists of: David Withey, Columbia County - Chief Clerk; Jean Lapinski, Columbia County - Fiscal Director; Karen Heaps, Case Manager for AGAPE; Ashley Mensch, Columbia County Family Center Director; April Miller, Columbia County Children & Youth Director; Rich Beach, Columbia Montour Snyder Union (CMSU) Director; Chris Young, Columbia County Commissioner; Dave Kovach, Columbia County Commissioner; and Rich Ridgway, Columbia County Commissioner. At this time, we do not have recipients included in our planning team, but Karen works closely with the clients and is able to report on the services that they receive or any issues they may have with the programs.

2. Please describe how these stakeholders were provided with an opportunity for participation in the planning process, including information on outreach and engagement efforts.

The planning team has reviewed the current Non-Block Grant guidelines for the HSDF and HAP programs. All members were able to give their input on the current programs and/or any need for changes. Currently we have minimal outreach to the community since we are not currently a block grant county. The planning team has also decided that any cuts in the state funding to the Non-Block Grant programs would be distributed evenly across the board to all programs.

3. Please list the advisory boards that were involved in the planning process.

At this point other than the current planning team we have no other advisory teams involved.

4. Please describe how the county intends to use funds to provide services to its residents in the least restrictive setting appropriate to their needs. (The response must specifically address providing services in the least restrictive setting.)

The County programs that are funded through HAP and HSDF are overseen by local non-profit agencies. These agencies offer programs and services in the least restrictive setting while still following the program guidelines. Our local agencies work together with other non-profit agencies in our community to make sure each client is getting the required services that they need. Our agencies work hard to try and not duplicate services for each client.

5. Please list any substantial programmatic and/or funding changes being made as a result of last year's outcomes.

All programs will continue as they have in the past for 17/18. The Columbia County Human Services Coalition is currently in the middle of doing a County wide needs assessment. Our local Human Services agencies and their clients have been surveyed. We are working with Bloomsburg University students in the research department to compile data and develop a report. Once the current needs assessment has been completed we will review that data and work to update our current outcomes.

PART II: PUBLIC HEARING NOTICE

Two (2) public hearings are required for counties participating in the Human Services Block Grant. One (1) public hearing is required for counties not participating in the Human Services Block Grant.

1. Proof of publication;
 - a. Please attach a copy of the actual newspaper advertisement for the public hearing (see below).
 - b. When was the ad published?
 - c. When was the second ad published (if applicable)?

Please attach proof of publication(s) for each public hearing.

2. Please submit a summary and/or sign-in sheet of each public hearing. (This is required whether or not there is public attendance at the hearing.)

NOTE: The public hearing notice for counties participating in a LCA should be made known to residents of all counties.

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.

Employment: Currently at this point and time none of the HSDf funding is used for employment services. In our County we currently have a Career Link sight where most of our local Human Services agencies refer clients to. Our local Career Link works with clients with filing for unemployment, job searches, resume building and other career training.

Housing: The County will continue to have the Gatehouse continue to administer the HAP program. They are a homeless and transitional housing shelter and work very closely with the clientel. Within our County members of the Columbia County Housing and Redevelopment Authority, GateHouse Shelter and AGAPE all serve on the Columbia County Human Services Coalition as well as the Columbia Montour

Homeless Task Force. As members of both of these boards our housing agencies make sure all of our other Human Service agencies are up to date on the programs and services offered within our County.

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.

These services are administered by CMSU, which is a four county joiner, all of which are Non-Block Grant counties. Columbia County was included in the planning process for the service category and the complete information can be found in Union County's plan. Columbia County is in agreement with their plan and information.

a) Program Highlights: (Limit of 6 pages)

Highlight the achievements and other programmatic improvements that have enhanced the behavioral health service system in FY 16-17.

b) Strengths and Needs: (Limit of 8 pages)

Please identify the strengths and needs of the county/joiner service system specific to each of the following target populations served by the behavioral health system. When completing this assessment, consider any health disparities impacting each population. Additional information regarding health disparities is available at <https://www.samhsa.gov/health-disparities>.

- **Older Adults (ages 60 and above)**
 - Strengths:
 - Needs:

- **Adults (ages 18 and above)**
 - Strengths:
 - Needs:

- **Transition-age Youth (ages 18-26)- Counties are encouraged to include services and supports assisting this population with independent living/housing, employment, and post-secondary education/training.**
 - Strengths:
 - Needs:

- **Children (under 18)- Counties are encouraged to include services like Student Assistance Program (SAP), Respite, and CASSP Coordinator Services and Supports, as well as the development of community alternatives and diversion efforts to residential treatment facility placements.**
 - Strengths:

- Needs:

Identify the strengths and needs of the county/joiner service system (including any health disparities) specific to each of the following special/underserved populations. If the county does not currently serve a particular population, please indicate and note any plans for developing services for that population.

- **Individuals transitioning out of state hospitals**
 - Strengths:
 - Needs:
- **Co-occurring Mental Health/Substance Use Disorder**
 - Strengths:
 - Needs:
- **Justice-involved individuals-** Counties are encouraged to collaboratively work within the structure of County Criminal Justice Advisory Boards to implement enhanced services for justice-involved individuals to include diversionary services that prevent further involvement within the criminal justice system as well as reentry services to support successful community reintegration.
 - Strengths:
 - Needs:
- **Veterans**
 - Strengths:
 - Needs:
- **Lesbian/Gay/Bisexual/Transgender/Questioning/Intersex (LGBTQI) consumers**
 - Strengths:
 - Needs:
- **Racial/Ethnic/Linguistic minorities (including Limited English Proficiency)**
 - Strengths:
 - Needs:
- **Other (specify), if any (including Tribal groups, people living with HIV/AIDs or other chronic diseases/impairments, Traumatic Brain Injury)**
 - Strengths:
 - Needs:

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

Yes No

If yes, please describe the CLC training being used. Plans to implement CLC training may also be included in the discussion. (Limit of 1 page)

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 (CHIPPP), 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 type="checkbox"/> Check if available in the county and complete the section.				
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

3. Master Leasing (ML) Program for Behavioral Health					<input type="checkbox"/> 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				<input type="checkbox"/> 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, 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

5. Housing Support Services for Behavioral Health				<input 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

6. Housing Contingency Funds for Behavioral Health				<input type="checkbox"/> Check if available in the county and complete the section.					
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				<input type="checkbox"/> 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); Fairweather Lodge (FWL is an Evidenced Based Practice where individuals with serious mental illness choose to live together in the same home, work together and share responsibility for daily living and wellness); CRR Conversion (as described in the CRR Conversion Protocol), other .									
	*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 Conversions planned)	# of Projects projected in FY 17-18 (if other than PBOA, FWL, CRR Conversion)		Year Project first started

d) Recovery-Oriented Systems Transformation: (Limit of 5 pages)

Based on the strengths and needs reported above in section (b), identify the top three to five priorities for recovery-oriented system transformation efforts the county plans to address in FY 17-18 at current funding levels. For **each** transformation priority, provide:

- A brief narrative description of the priority including action steps for the current fiscal year.
- A timeline to accomplish the transformation priorities including approximate dates for progress steps and priority completion.
- Information on the fiscal and other resources needed to implement the priorities (how much the county plans to utilize from state allocations, county funds, grants, HealthChoices, reinvestment funds, etc., and any non-financial resources).
- A plan/mechanism for tracking implementation of priorities.

1. (Identify Priority)

Narrative including action steps:

Timeline:

Fiscal and Other Resources:

Tracking Mechanism:

2. (Identify Priority)

Narrative including action steps:

Timeline:

Fiscal and Other Resources:

Tracking Mechanism:

3. (Identify Priority)

Narrative including action steps:

Timeline:

Fiscal and Other Resources:

Tracking Mechanism:

4. (Identify Priority)

Narrative including action steps:

Timeline:

Fiscal and Other Resources:

Tracking Mechanism:

5. (Identify Priority)

Narrative including action steps:

Timeline:

Fiscal and Other Resources:

Tracking Mechanism:

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 type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Psychiatric Inpatient Hospitalization	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Partial Hospitalization	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Family-Based Mental Health Services	<input type="checkbox"/>	<input type="checkbox"/> County <input 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 type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Crisis Services	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Emergency Services	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Targeted Case Management	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Administrative Management	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Transitional and Community Integration Services	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Community Employment/Employment Related Services	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Community Residential Services	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Psychiatric Rehabilitation	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Children's Psychosocial Rehabilitation	<input type="checkbox"/>	<input type="checkbox"/> County <input 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 type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Social Rehabilitation Services	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Administrator's Office	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Housing Support Services	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Family Support Services	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Peer Support Services	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Consumer Driven Services	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Community Services	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/> County <input 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 type="checkbox"/>	<input type="checkbox"/> County <input 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

f) Evidence Based Practices Survey:

Evidenced Based Practice	Is the service available in the County/ Joinder? (Y/N)	Current Number served in the County/ Joinder (Approx)	What fidelity measure is used?	Who measures 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)	Additional Information and Comments
Assertive Community Treatment								
Supportive Housing								
Supported Employment								Include # Employed
Integrated Treatment for Co-occurring Disorders (MH/SA)								
Illness Management/ Recovery								
Medication Management (MedTEAM)								
Therapeutic Foster Care								
Multisystemic Therapy								
Functional Family Therapy								
Family Psycho-Education								

*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>

g) Additional EBP, Recovery Oriented and Promising Practices Survey:

Recovery Oriented and Promising Practices	Service Provided (Yes/No)	Current Number Served (Approximate)	Additional Information and Comments
Consumer Satisfaction Team			
Family Satisfaction Team			
Compeer			
Fairweather Lodge			
MA Funded Certified Peer Specialist			
Other Funded Certified Peer Specialist			
Dialectical Behavioral Therapy			
Mobile Meds			
Wellness Recovery Action Plan (WRAP)			
High Fidelity Wrap Around			
Shared Decision Making			
Psychiatric Rehabilitation Services (including clubhouse)			
Self-Directed Care			
Supported Education			
Treatment of Depression in Older Adults			
Competitive/Integrated Employment Services**			Include # employed
Consumer Operated Services			
Parent Child Interaction Therapy			
Sanctuary			
Trauma Focused Cognitive Behavioral Therapy			
Eye Movement Desensitization And Reprocessing (EMDR)			
First Episode Psychosis Coordinated Specialty Care			
Other (Specify)			

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

**Do not include numbers served counted in Supported Employment on Evidenced Based Practices Survey above [table (f)]

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	
Number Full Time (30 hours or more)	
Number Part Time (Under 30 hours)	

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.

These services are administered by CMSU, which is a four county joinder, all of which are Non-Block Grant counties. Columbia County was included in the planning process for the service category and the complete information can be found in Union County’s plan. Columbia County is in agreement with their plan and information.

**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				
Pre-Vocational				
Adult Training Facility				
Base Funded Supports Coordination				
Residential (6400)/unlicensed				
Life sharing (6500)/unlicensed				
PDS/AWC				
PDS/VF				
Family Driven Family Support Services				

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.
- 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 assist the county in establishing employment growth activities.
- Please add specifics regarding the Employment Pilot if your county is a participant.

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

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

Lifesharing Options:

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

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.
- 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.
- 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.

Emergency Supports:

- Describe how individuals in an emergency situation will be supported in the community (regardless of availability of county funding or waiver capacity).
- Provide details on your county's emergency response plan including:
 - Does your county reserve any base or block grant funds to meet emergency needs?
 - What is your county's emergency plan in the event an individual needs emergency services, residential or otherwise, whether within or outside of normal working hours?
 - Does your county provide mobile crisis?
 - If your county does provide mobile crisis, have the staff been trained to work with individuals who have an ID and/or Autism diagnosis?
 - What is the composition of your mobile crisis team?
 - Do staff who work as part of the mobile crisis team have a background in ID and/or Autism?
 - Is there training available for staff who are part of the mobile crisis team?
 - If your county does not have a mobile crisis team, what is your plan to create one within your county's infrastructure?
- Please submit the county 24-hour Emergency Response Plan as required under the Mental Health and Intellectual Disabilities Act of 1966.

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.
- 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 the above?
- Describe how the county will engage with the Health Care Quality Units (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.
- Describe how the county will engage the local Independent Monitoring for Quality (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 data more fully?
- 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 the county's support efforts of local providers?
- 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 the county in interacting with stakeholders in relation to risk management activities?
- Describe how you will utilize the county housing coordinator for people with an intellectual disability.
- Describe how the county will engage providers of service in the development of an Emergency Preparedness Plan.

Participant Directed Services (PDS):

- Describe how your county will promote PDS services.
- Describe the barriers and challenges to increasing the use of Agency with Choice.
- Describe the barriers and challenges to increasing the use of VF/EA.
- Describe how the county will support the provision of training to individuals and families.
- Are there ways that ODP can assist you in promoting/increasing PDS services?

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.

HOMELESS ASSISTANCE SERVICES

Describe the continuum of services to individuals and families within the county who are experiencing homelessness or facing eviction by answering each question below. 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. Include achievements and improvements in services to families experiencing or at risk for homelessness, as well as unmet needs and gaps.

Bridge Housing:

- Please describe the Bridge Housing services offered. Include achievements and improvements in services to families experiencing or at risk for homelessness, as well as unmet needs and gaps.
- How does the county evaluate the efficacy of Bridge Housing services?
- Please describe any proposed changes to Bridge Housing services for FY 17-18.
- If Bridge Housing services are not offered, please provide an explanation of why services are not offered.

Bridge Housing N/A – Currently the Bridge Housing program is run through the CMSU office and Columbia County has no involvement with that program.

Case Management:

- Please describe the Case Management services offered. Include achievements and improvements in services to families experiencing or at risk for homelessness, as well as unmet needs and gaps.
- How does the county evaluate the efficacy of Case Management services?
- Please describe any proposed changes to Case Management services for FY 17-18.
- If Case Management services are not offered, please provide an explanation of why services are not offered.

Case Management - Case management is done with every rental assistance or housing call that is received by Gatehouse. If a client calls and is not eligible for our HAP program or if we no longer have funding, they are then referred to any other agency that may have rental assistance in our community. If a client is assisted with HAP funds, we review all current household issues to see if there any other local program or services available to them. We work to identify client needs and create a plan to move them towards self-sufficiency so they can move out of homelessness. The expenditures for the 17-18 fiscal year should be \$7,365.00. Case Management funds will be used to cover staff salaries.

Rental Assistance:

- Please describe the Rental Assistance services offered. Include achievements and improvements in services to families experiencing or at risk for homelessness, as well as unmet needs and gaps
- How does the county evaluate the efficacy of Rental Assistance services?
- Please describe any proposed changes to Rental Assistance services for FY 17-18.
- If Rental Assistance services are not offered, please provide an explanation of why services are not offered.

Rental Assistance - For our rental assistance program, we first check to see if the client has been helped in the last 24 months. If not, we would then review the client's current situation and if we feel they are a fit for the HAP program, we will then schedule an intake interview. The client must bring all paperwork and must meet all program guidelines to be eligible for rental assistance. The expenditures for the 17-18 fiscal year should be \$19,149.00. Followup calls are made to clients at 3 month and 6 month intervals from receiving rental assistance to see if there is any additional assistance or services that are needed.

We will evaluate the efficiency of the program through the follow up calls by establishing a data base of information reflecting the following;

Number of clients still living at the address where help was rendered

Employment stability

Revision of the goal plan stated on the initial application.

By evaluating this data we will be able to confirm success of the program and also where we will need to improve as it relates to case management.

Other HSDF Expenditures/Administration

Under the Homeless Assistance Services the administration funds will be given to GateHouse in the amount of \$2,946.00. These administration funds will be used for office supplies, mileage and other expenses. No HSDF funds are used for HAP case management or HAP rental assistance. The Emergency Shelter funds that are listed under Homeless Assistance services are paid out of HSDF funds in the amount of \$5,000.00.

(Please see Emergency Shelter narrative).

Emergency Shelter:

- Please describe the Emergency Shelter services offered. Include achievements and improvements in services to families experiencing or at risk for homelessness, as well as unmet needs and gaps
- How does the county evaluate the efficacy of Emergency Shelter services? Please describe any proposed changes to Emergency Shelter services for FY 17-18.
- If Emergency Shelter services are not offered, please provide an explanation of why services are not offered.

Emergency Shelter- Hotel/Motel stay: Our Emergency Shelter funds come through the HSDF funding side, not HAP. We will put clients up in a hotel/motel stay for a maximum of 14 consecutive or non-consecutive nights as long as they have a plan on how to get out of their current situation. If they have no plan on how to move forward, we then refer them to the local homeless shelter. The goal of this program is to move the effected individual(s) into permanent or transitional housing by the end of their hotel stay. AGAPE has worked with Area on Aging, CMSU, and Children in Youth to help county citizens get them in their homes. It is case by case that we make determinations. We are looking at increase in funds this year due to a high population of 18-19 year old students in our area. The students are referred to us by the high school social workers. We will evaluate this efficacy of the program by continuing to work with the social worker, student, and any available family to find permanent housing solutions. We will also be able to monitor if there is any return for assistant to this program. Our estimated Emergency Shelter expenditures should be \$3,000.00.

Emergency Shelter- Warming Shelter: Our Warming Shelter funds come through HSDF Funding, not HAP. We will put clients up in a hotel/motel stay for a maximum of 14 consecutive or non-consecutive nights during the months of January through March when temperatures drop to a point that risk serious illness or death. The goal of this program is to meet the immediate need of the individual faced with inclement temperatures, and we will evaluate the efficacy by continuing to work with CMSU, Area on Aging, and local transitional housing to find a permanent solution. We will also be able to monitor if there is any return for assistance to this program. This is a new program for 2017-2018 and estimated Warming Shelter expenditures should be \$2,000.00.

Other Housing Supports:

- Please describe the Other Housing Supports services offered. Include achievements and improvements in services to families experiencing or at risk for homelessness, as well as unmet needs and gaps
- How does the county evaluate the efficacy of Other Housing Supports services?
- Please describe any proposed changes to Other Housing Supports services for FY 2017-2018.
- If Other Housing Supports services are not offered, please provide an explanation of why services are not offered

Other Housing Supports- N/A – We current do not fund any other housing supports. We do work closely with other local agencies who have rental funds and try to work together to get clients the assistance that they need.

Homeless Management Information Systems:

- Describe the current status of the county's Homeless Management Information System (HMIS) implementation. Does the Homeless Assistance provider enter data into HMIS?

Currently, we do not access to the HMIS system, but the Gatehouse is working on setting up HMIS in our county. Gatehouse will work with DCED to have the program added to the transitional housing and care

center of the Columbia/Montour County to establish a system that will allow more to enter their homeless information.

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

This section should describe the entire substance use disorder service system available to all county residents that is provided through all funding sources, including state allocations, county funds, federal grants, HealthChoices, reinvestment funds, etc.

These services are administered by CMSU, which is a four county joinder, all of which are Non-Block Grant counties. Columbia County was included in the planning process for the service category and the complete information can be found in Union County's plan. Columbia County is in agreement with their plan and information.

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
2. Barriers to accessing any level of care.
3. Narcan resources available in the county.
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.
5. Treatment Services expansion including the development of any new services or resources to meet local needs.
6. Any emerging substance use trends that will impact the ability of the county to provide substance use services.

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).

HUMAN SERVICES AND SUPPORTS/ HUMAN SERVICES DEVELOPMENT FUND

For each of these categories (Adult Services, Aging Services, Children and Youth Services, Generic Services and Specialized Services), please use the fields and dropdowns to describe how the county intends to utilize HSDF funds on allowable expenditures (please refer to the HSDF Instructions and Requirements for more detail).

Copy and paste the template for each service offered under each categorical, ensuring each service aligns with the service category when utilizing Adult, Aging, Children and Youth, or Generic Services.

Adult Services: Please provide the following:

Program Name: **Meals on Wheels**

Description of Services: **The Meals on Wheels Program is listed under Adult Services. Provides meal to clients who are between 18 and 60 years old and are disabled and home bound.**

Service Category: **Home-Delivered Meals - Provides meals, which are prepared in a central location, to homebound individuals in their own homes. Each client is served a minimum of one but no more than two meals daily, up to 7 days a week.**

Planned expenditures: **\$6,000.00.**

Adult Services: Please provide the following:

Program Name: **Homemaker Services**

Description of Services: **The Homemaker Services program is listed under Adult Services. We estimate 5 clients will be on the program in the fiscal year 17-18. The Homemaker Services program serves clients 18-60 who are disabled and home bound. This program is able to provide an hour or more of light housework and duties as needed by the eligible clients.**

Service Category:

Homemaker - Activities provided in the person's own home by a trained, supervised homemaker if there is no family member or other responsible person available and willing to provide the services, or relief for the regular caretaker.

Planned expenditures: **\$6,000.00.**

Adult Services: Please provide the following:

Program Name: **Transportation**

Description of Services: **The HSDF Transportaion Service is listed under Adult Services. This service is for anyone who meets the income guidelines, has resided in Columbia County for 30 days, and has no other means of transportation, and is not currently on any other transportation program. We will use these funds to purchase out of county bus tickets for county residents who has been referred by a local agency, for Veteran's who are in need of going to the VA Hospital for services, and any other other transportation need that may arise.**

Service Category:

Transportation - Activities which enable individuals to travel to and from community facilities to receive social and medical service, or otherwise promote independent living. The service is provided only if there are no other appropriate resources.

Planned expenditures: **\$4,000.00.**

Aging Services: Please provide the following:

Program Name:

Description of Services:

Service Category: Please choose an item.

Children and Youth Services: Please provide the following:

Program Name:

Description of Services:

Service Category: Please choose an item.

Generic Services: Please provide the following:

Program Name:

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: **School Based Outreach Program**

Description of Services: **Columbia County Human Services will utilize HSDF in conjunction with Columbia County Children and Youth Services, CMSU Mental Health and Drug & Alcohol Programs and area school districts to support the School Based Family Child Outreach Specialists which are listed as Specialized Services. These Specialists will provide supportive services, parent education, assistance in accessing services and service management for all of the involved systems. Participating School Districts establish an internal process to identify high-risk children and their families. These Specialists will work with students and families identified to be at high risk for abuse, neglect and mental health or drug and alcohol difficulties. The services will involve the family to the greatest extent possible. The services will have a preventative focus; with the ability to access more restricted categorical services when needed. The Human Services Director and/or the Program Coordinator, along with the Director of Children & Youth, attend annual monitoring for the School Based Outreach Program. Changes for fiscal year 17-18 are that the Blended Program is looking to expand into the Berwick and Southern Columbia School Districts. These were districts that had to cut these programs due to lack of funding over the past few years. By bringing them back on board we will have the School Based Outreach Program in all of our districts throught the county.**

Planned Expenditures: **\$20,000.00**

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.

The Executive Director and Case Manager of AGAPE sit on several committees and boards tasked with human services functions in Columbia County. These include: The Homeless Task Force, Columbia County Human Services Coalition, Bloom Ministerium, Poverty Justice Housing, The Central Susquehanna Leadership Council, Pennsylvania Housing Alliance, and Communities With a Heart. Additionally AGAPE directs the Getting Ahead Program and Poverty Simulation. Interagency coordination funds are used for staff salaries and mileage to attend committee and board meetings, along with planning and training for the Getting Ahead Program and Poverty Simulation.

AGAPE is responsible for preparing recommendations for the Human Services Development Fund (HSDF) plan to the Commissioners. The plan is developed based on input from the categorical programs, the Human Services Coalition Collaborative Board, and other community based initiatives and task forces. AGAPE has oversight for Adult Human Services, Emergency Shelter programs, and the County Food Bank programs. HSDF Administration funds are used to cover office supplies, staff time for the administration for the HSDF programs.

Other HSDF Expenditures – Non-Block Grant Counties Only

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	Emergency Shelter
Substance Use Disorder	

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

The use of the HSDF funds for Homeless Assistance is only used for Emergency Shelter. For the fiscal year 17/18 we will have two Emergency Shelter programs, one will be Hotel/Motel stay for clients that are homeless, the other will be a Warming Shelter/Hotel-Motel stay for those that are displaced during the winter months. The combined total for these two programs will be \$5,000.00.

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.

STATE OF PENNSYLVANIA
COUNTY OF COLUMBIA } SS

Brandon R. Eyerly being duly sworn according to law deposes and says that Press Enterprise is a newspaper of general circulation with its principal office and place of business at 3185 Lackawanna Avenue, Bloomsburg, County of Columbia and State of Pennsylvania, and was established on the 1st day of March, 1902, and has been published daily, continuously in said Town, County and State since that day and on the attached notice June 19, 2017 that the affiant is one of the officers or publisher or designated agent of the owner or publisher of said newspaper in which legal advertisement was published; that neither the affiant nor Press Enterprise is interested in the subject matter of said notice and advertisement and that all of the allegations in the foregoing statement as to time, place, and character of publication are true.

HEARING NOTICE
AGAPE, Love From Above to Our Community, will conduct a public hearing on July 10, 2017 at 10:00 a.m. at AGAPE, 19 E 7th Street, Bloomsburg, PA 17815. At this meeting, a review of the Columbia County Human Services Development Fund program budget for the 2017-2018 fiscal year will be conducted. AGAPE is the administrator for the Columbia County grant funds.

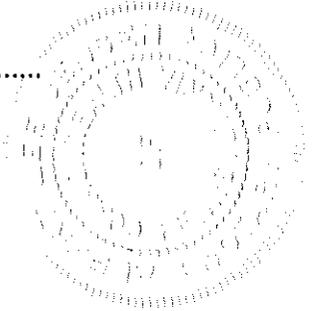
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tribed to before me this 20 day of June 2017.....

.....
Albert Lee Jensen

(Notary Public)

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
ALBERT LEE JENSEN, Notary Public
Scott Township, Columbia County
My Commission Expires April 21, 2020



And now,....., 20....., I hereby certify that the advertising and publication charges amounting to \$.....for publishing the foregoing notice, and the fee for this affidavit have been paid in full.

.....



Human Services Development Fund

Annual Public Meeting
July 10th, 2017 at 10:00 a.m.
AGAPE Love From Above To Our Community
19 E. 7th Street, Bloomsburg PA 17815

Those attending:

Eileen Chapman

Karen Héaps

Grace Hovancak

David Kovach

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

County: Columbia	1. ESTIMATED INDIVIDUALS SERVED	2. DHS ALLOCATION (STATE & FEDERAL)	3. PLANNED EXPENDITURES (STATE & FEDERAL)	4. COUNTY MATCH	5. OTHER PLANNED EXPENDITURES
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MENTAL HEALTH SERVICES

ACT and CTT					
Administrative Management					
Administrator's Office					
Adult Developmental Training					
Children's Evidence Based Practices					
Children's Psychosocial Rehabilitation					
Community Employment					
Community Residential Services					
Community Services					
Consumer-Driven Services					
Emergency Services					
Facility Based Vocational Rehabilitation					
Family Based Mental Health Services					
Family Support Services					
Housing Support Services					
Mental Health Crisis Intervention					
Other					
Outpatient					
Partial Hospitalization					
Peer Support Services					
Psychiatric Inpatient Hospitalization					
Psychiatric Rehabilitation					
Social Rehabilitation Services					
Targeted Case Management					
Transitional and Community Integration					
TOTAL MENTAL HEALTH SERVICES	-		\$ -	\$ -	\$ -

Please enter the MH allocation above (unless your county is a non-submitting joinder county).

INTELLECTUAL DISABILITIES SERVICES

Administrator's Office					
Case Management					
Community-Based Services					
Community Residential Services					
Other					
TOTAL INTELLECTUAL DISABILITIES SERVICES	-		\$ -	\$ -	\$ -

Please enter the ID allocation above (unless your county is a non-submitting joinder county).

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

County: Columbia	1. ESTIMATED INDIVIDUALS SERVED	2. DHS ALLOCATION (STATE & FEDERAL)	3. PLANNED EXPENDITURES (STATE & FEDERAL)	4. COUNTY MATCH	5. OTHER PLANNED EXPENDITURES
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HOMELESS ASSISTANCE SERVICES

Bridge Housing					
Case Management	119		\$ 7,365		
Rental Assistance	79		\$ 19,149		
Emergency Shelter **PAID OUT OF HSDF FUNDS**	35		\$ 5,000		
Other Housing Supports					
Administration			\$ 2,946		
TOTAL HOMELESS ASSISTANCE SERVICES	233	\$ 29,460	\$ 34,460		\$ -

SUBSTANCE USE DISORDER SERVICES

Act 152 Inpatient Non-Hospital					
Act 152 Administration					
BHSI Administration					
BHSI Case/Care Management					
BHSI Inpatient Hospital					
BHSI Inpatient Non-Hospital					
BHSI Medication Assisted Therapy					
BHSI Other Intervention					
BHSI Outpatient/IOP					
BHSI Partial Hospitalization					
BHSI Recovery Support Services					
TOTAL SUBSTANCE USE DISORDER SERVICES	-		\$ -	\$ -	\$ -

Please enter the SUD allocation above (unless your county is a non-submitting joinder county).

HUMAN SERVICES DEVELOPMENT FUND

Adult Services	30		\$ 16,000		
Aging Services					
Children and Youth Services					
Generic Services					
Specialized Services	800		\$ 20,000		
Interagency Coordination			\$ 6,000		
Administration			\$ 3,000		
TOTAL HUMAN SERVICES DEVELOPMENT FUND	830	\$ 50,000	\$ 45,000		\$ -

Please note any utilization of HSDF funds in other categoricals and include: categorical and cost center, estimated individuals, estimated expenditures.

\$5,000 of HSDF will be used in HAP to provide emergency shelter to 35 individuals.

GRAND TOTAL	1,063	\$ 79,460	\$ 79,460	\$ -	\$ -
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