

Appendix A
Fiscal Year 2018-2019

COUNTY HUMAN SERVICES PLAN
ASSURANCE OF COMPLIANCE

COUNTY OF: VENANGO

- 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: 07/24/18
		Date: 5/04/18
		Date: 3-24-18

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 3 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.

Venango County Human Services has involved the following stakeholder groups in the annual needs assessment process supporting the 2018-19 submission:

- Individuals/ families receiving services from all Life Stages/ Categoricals:
 - Children & Families
 - Emerging Adults
 - Adults
 - Older Adults
- Senior Center Participants
- Venango County Human Services - Service Coordination staff
- Community Partners
- Transportation Committee Members
- Providers across categoricals
- County Commissioners
- Human Service Leadership staff and categorical supervisors

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

Venango County's annual needs assessment efforts for the 2018-19 Block Grant submission consisted of the following activities. (E-mail announcements and flyers informing stakeholders of the surveys and events were distributed.)

- Online Surveys for Venango Human Service Staff – 47 Respondents
- Individual/Family Surveys – 120 Respondents (This is a paper survey was distributed by Service Coordinators/ County HS staff to individuals/ family members receiving services from Venango Human Services across all life stages/ categoricals.)
- 211 data specific to Venango County was also utilized this year. Data related to 211 calls which captured the specific needs of each caller was analyzed from January through December 2017.
- Focus Groups were conducted with the following:
 - Older Adults – held March 23, 2018 at Cranberry Place with 26 participants
 - Emerging Adult – held March 21, 2018 at HS Complex with 13 participants
 - Transportation Stakeholders – held March 26, 2018 at HS Complex with 12 participants.

- MH Providers – held April 20, 2018 at HS Complex with 5 participants
- ID Providers – held April 26, 2018 at HS Complex with 12 participants

The table below lists the top 3 areas of need identified from each activity. The common themes among all activities are below. These remain consistent with prior year’s assessments.

1. Transportation
2. Housing
3. Utilities / Employment (tied)

Data Source	Top areas of Need
211 Data Calendar Year 2017 (1152 calls)	<ol style="list-style-type: none"> 1. Utilities 2. Housing 3. Food
Individual & Family Surveys	<ol style="list-style-type: none"> 1. Employment/ Job Training 2. Utility Assistance 3. Transportation (to medical appointments/ out of county/ after hours)
HS Staff Needs Assessment Survey	<ol style="list-style-type: none"> 1. Transportation (to medical appointments & after hours) 2. Utilities 3. Housing
MH Provider Focus Group	<ol style="list-style-type: none"> 1. Employment 2. Housing 3. Transportation
ID Provider Focus Group	<ol style="list-style-type: none"> 1. Transportation after hours 2. Increased Community Awareness of ID 3. Parenting Classes
Emerging Adults Focus Group	<ol style="list-style-type: none"> 1. Jobs/ Employment Supports 2. Pregnant and/ or parenting programs 3. Housing
Older Adults Focus Group	<ol style="list-style-type: none"> 1. Home Supports 2. Lack of knowledge about services – “we don’t use social media that much”. 3. Information awareness of scams and fraud targeted seniors.
Transportation Committee Focus Group	<ol style="list-style-type: none"> 1. Fix Go Bus Schedule and wait times 2. Need unified intake for transportation services at county level 3. Increase access to RIDE Program

3. Please list the advisory boards that were involved in the planning process.
 - The Venango County System of Care Advisory Board
 - The Venango County MH/DS/CYFS and Substance Abuse Advisory Board
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.)

Venango County continues to embrace its outcomes that individuals and families are safe and secure in the least restrictive setting while receiving services and supports that meet their assessed needs. FY 2018-19 funding will be used to support a community living slot in a home targeted for individuals discharging from Warren State Hospital. This home will be developed in conjunction with Crawford and Mercer Counties, with each participating county funding 1 slot in the 3 person home. Venango County currently has 4 similar slots and the program has proven successful at maintaining individuals with chronic mental illness in the

community. In fact, of the 10 individuals who have been served in the current homes over the past three years, only one has returned to Warren State Hospital.

Another new initiative funded by the block grant will be to enhance the Triple P (Positive Parenting Practice) by ½ a staff position. Triple P is an evidence based approach that addresses child behavioral and emotional problems by giving parents proven tools and skills to build stronger families. Triple P is currently available in Venango County but only to families with Children and Youth Service (CYS) involvement. By funding half of a FTE, the program will be made available to families involved with the mental health or intellectual disability system without CYS involvement, and it is hoped that completion of this program will negate the need for CYS involvement. Four families at a time will be served under this funding with an estimated length of stay of 12 weeks so 12 families should be served in a fiscal year.

In a report issued this spring by the Pennsylvania Health Care Cost Containment Council, Venango County was ranked 4th in the Commonwealth for babies born with Neonatal Abstinence Syndrome in 2016-17. Venango County is committed to identifying programs and interventions to engage pregnant women as well supporting new parents with babies diagnosed with NAS. Venango plans to utilize block grant monies to support half of a nurse position for the Effective Safe Parenting program (ESP), which is provided by Family Service and Children's Aide Society, a local non-profit. It is projected that 10 additional families can be served in the ESP program. This program focuses on children and families affected by substance use disorder and is a team delivered community based intervention.

The team is comprised of a social worker, a parent educator, and a nurse. It has the following outcomes identified:

- Identify family strengths and protective factors
- Partner with the family in development of a service plan
- Connect the family to community resources
- Support the family in providing a safe and stable environment for their children
- Help the parents achieve a substance-free lifestyle.
- Provide accompaniment and advocacy when in court by verifying family progress
- Support family in the development of a community support systems

Venango County intends to use block grant monies to provide personal care services to older adults in the county who need assistance with bathing activities. Current funding received by Venango County's Older Adult Services does not support providing this service and individuals are often on a waiting list for extended periods of time. This sometimes results in more restrictive levels of care being needed. This service will be targeted to serve 5 older adults who receive high scores on Aging assessments.

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

For FY 17-18, Venango County's Block Grant decreased by \$355,000 due to removal of Children's Special Grants from the block grant. Recently, the county learned that OCYF did approve the county's request to fund percentages of our Housing Case Manager, Resource Communication Officer, and Clinical Manager using OCYF funding out of special grants for this fiscal year and identified other child welfare funding for future years. This approval enables

the county to maintain those programs despite the funding loss without the need to utilize additional match money from the county general fund.

The county had limited success on its plan to use re-investment dollars to develop housing due to the complicated regulations attached to housing re-investment dollars. The county is currently using some of the reinvestment dollars for contingency funding to help with utilities and rent to maintain housing with a plan to possibly pursue master leasing while this funding is still available.

The other low cost/no cost programming included improving our inventory of utility assistance resources and advertising recreational/social opportunities has been successful with the help of the county's 211 line as well as the Facebook page, which has been very useful in getting information on opportunities out.

One change Venango County Human Services intends to make as a result of last year's outcomes and needs identified in this year's planning process, is to bring a specialized driver's training program to our county. This will help address the need for after-hours transportation which has been identified as a significant need for our emerging adult individuals who need said transportation both to access recreational activities as well as improve employment options. The cost will be approximately \$610 per individual served and the plan is to serve up to 10 individuals.

Venango County is committed to improving the social determinants of health for those who receive services. During FY 17/18, an additional life coach position was created to serve the adult population, since the first position serves emerging adults. The focus of the life coach position is education, employment, safe and stable housing, accessing health care, and improving community engagement/social integration, which are all social determinants of health. The adult life coach position is targeted to work with those being released from our county jail due to our high recidivism numbers.

An additional program to combat recidivism is the implementation of the Adult Crossroad Cognitive Groups in the jail. This is an evidence based curricula designed to help offenders modify problematic behaviors. The groups require two trained staff members to facilitate. This year, the block grant was used to fund the week long facilitator training for 3 human service staff members, then to pay the facilitators to offer the groups in the county prison. It is anticipated that at least three ten week sessions of the group will be offered in the coming fiscal year. Costs to provide these sessions will be funded by the block grant.

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? May 16, 2018
 - c. When was the second ad published (if applicable)?

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

The Notice of Public Hearing was advertised in both The Derrick and THE NEWS-HERALD publications. A copy of the advertisement and notarized proof is below.

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.)

The first public meeting was held at 9:30 am on May 23, 2018 at The POINTE Drop-In Center in downtown Oil City. There was one attendee. The second public meeting was held the same day at the Human Services Complex in Franklin at 4:00 pm. There were no attendees. The sign-in sheet for both public meetings is below. The public meeting summary handout is attached at the end of this document.

No.....Term, 20.....

**Proof of Publication of Notice in THE News-Herald
 UNDER ACT NO. 587, APPROVED MAY 16, 1929**

COPY

STATE OF PENNSYLVANIA

ss:

COUNTY OF VENANGO

Tricia N. Baker, of Venango Newspapers, of the County and State aforesaid, being duly sworn, deposes and says that The NEWS-HERALD, newspaper of general circulation publishing at Franklin, Pa., County and State aforesaid, was established in 1878, since which time THE NEWS-HERALD has been regularly issued in the said County, and that the printed notice of publication attached hereto is exactly the same as printed in the regular edition and issue of the said THE NEWS-HERALD on the following dates, viz:

16th of May, 2018

Affiant further deposes that she is authorized by VENANGO NEWSPAPERS, agent for said THE NEWS-HERALD to verify the foregoing statement under oath, and affiant is not interested in the subject matter or the aforesaid notice of advertisement, and that all allegations in the foregoing statements as to time, place and character of publication are true.

COPY OF NOTICE OF PUBLICATION

Tricia N. Baker

Sworn to and subscribed before me this
 16th day of May, 2018

Michelle M Schwab

NOTARIAL SEAL
 MICHELLE M SCHWAB, NOTARY PUBLIC
 OIL CITY, VENANGO COUNTY
 MY COMMISSION EXPIRES DECEMBER 3, 2018

Venango County Human Services will hold two public meetings on Wednesday, May 23, 2018.
 The first hearing will be held at 9:30 am at The Pointe, 259 Seneca St., Oil City, PA 16301. The second hearing will be at 4 pm in the Troy Wood Human Services Complex, 1 Dale Ave., Franklin, PA 16323. These hearings are to present and review the Human Services Block Grant plan. Venango County Human Services is a department of county government managed by the Venango County Commissioners.

STATEMENT OF ADVERTISING COST

Venango Co. Mental Health 1 Dale Avenue Franklin PA 16323	#4929190
To VENANGO NEWSPAPERS, Dr. Agent for The News-Herald For publishing the notice or publication attached hereto on the above dates	146.00
Probating same	11.00
Total	157.00

Publisher's Receipt for Advertising Costs

VENANGO NEWSPAPERS, agent for THE NEWS-HERALD hereby acknowledges receipt of the aforesaid notice and publication costs, and certifies that the same have been duly paid.

No..... Term, 20.....

**Proof of Publication in The Derrick
 UNDER ACT NO. 587, APPROVED MAY 16, 1929**

COPY

STATE OF PENNSYLVANIA

ss:

COUNTY OF VENANGO

Tricia N. Baker, of Venango Newspapers, of the County and State aforesaid, being duly sworn, deposes and says that THE DERRICK, newspaper of general circulation published at Oil City, Pa., County and State aforesaid was established in 1871, since which time THE DERRICK has been regularly issued in said county, and that the printed notice or publication attached hereto is exactly the same as printed in the regular edition and issue of the said THE DERRICK on the following dates, viz:

16th of May, 2018

Affiant further deposes that she is authorized by VENANGO NEWSPAPERS, agent for said THE DERRICK to verify the foregoing statement under oath, and affiant is not interested in the subject matter of the aforesaid notice or advertisement, and that all allegations in the foregoing statements as to time, place and character or publication are true.

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Tricia N. Baker

Sworn to and subscribed before me this
 16th day of May, 2018

Michelle M Schwab

NOTARIAL SEAL
 MICHELLE M SCHWAB, NOTARY PUBLIC
 OIL CITY, VENANGO COUNTY
 MY COMMISSION EXPIRES DECEMBER 8, 2018

STATEMENT OF ADVERTISING COST

Venango Co. Mental Health 1 Dale Avenue Franklin PA 16323	#4929190
The VENANGO NEWSPAPERS, Dr. Agent for The Derrick For publishing the notice or publication attached hereto on the above dates	146.00
Probating same	11.00
Total	157.00

Publisher's Receipt for Advertising Costs

VENANGO NEWSPAPERS, agent for THE DERRICK hereby acknowledges receipt of the aforesaid notice and publication costs, and certifies that the same have been duly paid.

By _____

**FY 2018-19 Human Services Block Grant
 Public Meeting Attendance Sheet**

May 23, 2018
 The POINTE Drop-In Center
 Oil City, PA
 9:30 am

Name:	Role / Organization Represented:
<i>Donna King</i>	<i>Asst. Director The Pointe</i>

May 23, 2018
 Venango County Human Services Complex
 Franklin, PA
 4:00 pm

No one attended

Name:	Role / Organization Represented:
/	/

NOTE: The public hearing notice for counties participating in local collaborative arrangements (LCA) should be made known to residents of all counties. Please ensure that the notice is publicized in each county participating in the LCA.

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

For each of the following, please explain how the county works collaboratively across the human services programs. Please explain how the county intends to leverage funds to link residents to existing opportunities and/or to generate new opportunities. Lastly, please provide any updates to the county's collaborative efforts and any new efforts planned for the coming year.

Employment:

Venango County Human Services continues its efforts to increase employment opportunities and supports to individuals and families across all life stages. Employment statistics are tracked within each categorical with 26 individuals in the ID system and 72 in the MH working part-time or full-time in a competitive setting as of March 2018. Venango County's primary vocational provider, Venango Training & Development Center, Inc., maintains staff who are certified in Discovery and Customized Employment through Marc Gold & Associates, with others completing the certification process. In addition this agency has launched its Work Based Learning Experience (WBLE) Program for individuals in the pre-vocational setting or transitioning from high-school. This program works one on one to provide 20 hours of WBLE development and 90 hours of on-site experience helping participants to gain knowledge and skills needed to obtain CIE or transition to post-secondary training. This provider has also implemented a Work and Independence Skills Evaluation (WISE) process comprised of 15 modules which enables individuals and staff to complete a strengths-based assessment of occupational and employability skills.

Over the 2017-18 year, Venango Human Services has gone through a transition with employment services. In July 2017, a new provider, ResCare, was selected to operate the WIOA/CareerLink system in Venango County. The transition period was longer than expected with recruitment of staff and necessary training. This created a lag in existing mobile CareerLink services at both at the county jail and human service complex. Leadership staff from ResCare was extremely active in the Re-Entry Committee and understood the need to implement this services as soon as possible. In March 2018 mobile CareerLink services resumed service with staff onsite every other Monday at both locations. Human Services and jail staff can schedule sessions and provide a "warm-hand off" for individuals. ResCare also provides additional supports in the form of "ResCare Academy". This consists of various online courses related to employment soft skills, resume writing, interviewing skills and other key areas. Any open jobseeker can access the classes with a certificate provided upon completion. Venango Life Coaches, who work across all HS categoricals, have found this a valuable resource in work one on one with adults and emerging adults.

The County Employment Analysis Workgroup has also been impacted by the change in providers. Plans are to re-initiate this committee in June 2018. During the hiatus, the Venango Service Coordination Organization continued to collaborate with employment partners for training and updates. Trainings were provided by the OVR regional lead, as well as CareerLink personnel and benefits counseling staff from the WIPA/ AHEDD.

Venango County also continued its representation on the Northwest Workforce Investment Board's Youth Committee. This committee consists of partners from education, employers, and community providers and ResCare who is also the youth service provider at the CareerLink. In addition, The RIDE transportation program is essential in getting individuals to/from employment after regular Go-Bus hours with 90% of the rides supporting employment opportunities.

In the 2018-19 FY year, Venango County will launch an Employment Creation Initiative targeting individuals from the ID and MH categoricals. As the county maintains a fleet of approximately 50 vehicles, the plan will be to contract with a provider to operate a detailing service for county cars and possibly open this to the public. This opportunity would also include the Fairweather Lodge Members. The initiative is a further enhancement on the existing collaboration for operation/ staffing of the County Perks Café, which employs 5 individuals at present.

Housing:

The need for safe, affordable housing in the County continues at a critical point. The development of the Housing Department and hiring of a housing case manager was an important step in addressing these needs. The housing case manager is tasked with building relationships with local landlords and traditional supports. Service Coordinators can place homeless individuals and families into decent affordable housing where landlords can be reassured by the ongoing program support offered to tenants. The County has partnered with a local ministerial organization, Emmaus Haven, whose primary goal is to address homelessness and to develop transitional housing opportunities. The Bridge Housing Program startup was the collaborative effort of the County through Housing Assistance Program funds to purchase supplies and the labor offered free of charge by the ministerial group Mustard Seed Missions. The County's housing case manager, in conjunction with the individual's traditional supports coordinator, assists the individual in gaining needed supports and skills to find, acquire and maintain safe, affordable, permanent housing. Standardized client intake and assessment tools were developed to streamline program operations, eliminate duplicative assessments, improve service delivery, and provide common metrics for gauging progress. A total of 31 individuals have accessed the Bridge Housing program since its launch in January Of 2017. 71% of participants have obtained permanent housing in the community with 51% of participants gaining income.

One of the major barriers to housing for many is past criminal activity. Landlords are reluctant to rent to these individuals and the local Housing Authorities are not willing to provide a Housing Choice Voucher to them or to allow them into public housing. The housing case manager will continue to work with the local housing authorities and landlords to address the needs of those with mental health or substance abuse issues as well as those who have non-violent criminal records. It is the hope of the County that doors will someday be open to assist this population with public housing funds.

Human Services staff continues to sit on the Local Housing Option Team (LHOT) committee to discuss housing issues throughout the community with other service providers and landlords. This group meets every other month with a composition of Local Housing Authorities, area landlords, MH service providers, faith-based partners, and veteran services representatives, the Western Region Continuum of Care and NW Legal Services. The group's current project is a landlord engagement event scheduled for September 2018. The goal of this event is to improve communication between service agencies, landlords and community partners.

In January of 2018, Venango County assumed the role of lead agency for the Coordinated Entry Program. Individuals meeting the HUD homeless definition are assessed and information enter into the system having their need prioritized. This opens individuals to resources within the 20 counties within the Continuum of Care.

The County housing department is also accessing HC reinvestment funds for contingency funding designed to enable individuals to gain or maintain housing. Contingency funds are used primarily to pay for outstanding utilities or first month's rent or deposits. This resource is being promoted to HS

Supports Coordinators focusing on MA eligible adults and families within the county. Additional HC reinvestment funds will be used to secure five master lease sites which will serve at least five individuals.

The Regional ESG (Emergency Solutions Grant) is an alternate resource which has been used for rapid rehousing and homeless prevention. Lawrence County is the grant holder with 6 counties accessing these dollars. This initiative officially started in Venango in April 2018, and has already enabled one person to leave the Bridge House program for permanent housing.

An additional partnership includes the 211 Call Center in Venango County. 211 has initiated referrals and linkages for those needing housing supports. In calendar year 2017, 25% of 211 basic needs calls in Venango were individuals requesting assistance with housing and 51% of calls were asking for utility assistance.

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.

a) Program Highlights: (Limit of 6 pages)

County Wide Activities

- Venango County has made significant strides towards an Integrated Case Management system in 2017. Seven pilot families are utilizing the newly structured Person/ Family Centered Case Management approach. This enables collaborative case coordination for individuals/families involved with multiple categoricals in the human service system. In support of this effort, Venango County launched the use of ICAMS (Integrated Case and Accounting Management System) software, which allows Service Coordinators to view case notes and update progress on a shared platform.
- Venango's Workforce Development initiative continued through the 2017 year. There are currently 18 course offerings available which are also open to provider and community partners.
- The county has greatly improved its internet and social media presence during 2017. In addition to the updated human service website, a Facebook page informs the public of services and events available across all life stages. An interactive phone application was also launched in 2017 providing access to information on services and supports available throughout Human Services not only to the public but also for use by Service Coordinators in the field. Facebook Live was also utilized for an interactive outreach event by Substance Abuse in June 2017.
- The Northwest 211 call center is operating under the Venango Human Service umbrella. 9 counties utilize this information and referral line whose navigators provide linkages and information to individuals in need.

Mental Health Activities/Achievements

- Venango County completed the pilot phase of the Child-Centered Planning Meetings. Active participation from families and systems staff, including extended family, neighbors, schools,

psychologists, psychiatrists and CYS/JPO has supported positive outcomes. Eight meetings were completed during the pilot.

- Supports and services for young children with behavioral health needs is being addressed via the county's Positive Parenting Program (Triple P). County Triple P staff conducts group sessions with identified parents focusing on managing behaviors and develop positive relationships with their children. Sessions are conducted in homes across the county as well at Child Development Center, Inc.'s multiple daycare/early head start locations.
- The continuation of efforts to insure that county and behavioral health service providers are either "trauma informed," or certified in Trauma Focused Cognitive Behavioral Treatment has led to the certification of 3 additional therapist in 2017.
- The Consumer Support Program held its annual rally on May 20, 2017 at the Franklin Bandstand Park. Themed "Lets Band Together to Prevent Suicide", the rally included local bands, speakers from the county mental health program and the Venango County Suicide Prevention Taskforce, veteran's services, vendors and consumers. Over 100 participants attended this event.
- The Venango County Suicide Prevention Taskforce conducted a number of events during the 2017 year. In September, Taskforce staff teamed with 2 local school districts (Franklin and Cranberry) to conduct "Awareness Nights" at sporting events. Activities included, Message of Hope announcements, informational tables, ribbon distribution and luminaries.
- Over 150 participated in the 3rd annual Substance Abuse Recovery Rally held on September 15, 2017. Guest speakers included 4 members in recovery, and tables with community resource information. A Proclamation was read by Commissioner Abramovic declaring the September Substance Abuse Recovery Month in Venango County.
- The Venango County Overdose Task Force continued to maintain momentum in 2017. The group sponsored a Community Engagement Session, themed "Awareness and Support for Reducing Opioid Misuse" which was held in September with keynote, Dr. Antoine Douaihy, Medical Director, Addiction Medicine Services and Inpatient Dual Diagnosis Unit from Western Psychiatric Institute and Clinic. An evening Clinical Conference for medical professionals was also conducted on same topic. Over 50 professional attended this event.

Special Projects within Behavioral Health Services (Mental Health & Substance Abuse)

- Venango County Human Services initiated the Bridge Housing Program with the goal to provide safe, temporary housing for adults. The program is short term (average length of stay is 40 days) and consists of a total of six beds within three separate apartments. The program provides a housing case manager who works with the residents to secure more permanent housing. The target population for the bridge housing is single adults, and each person has a locked bedroom within a gender specific apartments. 21 Individuals accessed the program in 2017 with 75% obtaining permanent housing.
- Venango Human Services in collaboration with the County Criminal Justice Advisory Board (CJAB) has identified an evidence-based cognitive behavior training curricula, "Crossroads" as the preferred model for Venango County. The curriculum is led by co-facilitators who are certified by the National Curriculum and Training Institute in partnership with the American Probation and Parole Association. 3 new facilitators were certified in December of 2017. They will support participants in the development of cognitive life skills, anger management, parenting, substance abuse intervention, and other important skills necessary to a productive lifestyle and ultimately reduce recidivism.
- The County continues to see the RIDE program as a major strength to the community with over 90% of the trips being to/from employment. The RIDE program also continues to help individuals maintain their physical wellness by attending appointments.

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:** Venango County's newest senior center, Cranberry Place, is located at the Cranberry Mall. This centralized location has appealed to the older adult population. Improved activities and educational events including those focusing on physical and mental health have also been a draw. Venango County also continues to offer the APPRISE program with approximately 5 volunteers who help assist seniors with Medicare options. The APPRISE program has counseled 133 people in 2017. The Venango County Protective/Intake/Crisis Unit continues to provide the primary response for older adults in need of emergency mental health and/or Aging Protective Services. Because the workers are cross-trained in procedures for both interventions, there are no issues with the systems not collaborating and decisions regarding which intervention is more appropriate are made purely based on individual need, not which system is able and willing to provide assistance.
- **Needs:** Older adults often do not seek assistance for mental health disorders or physical health problems. Older Adults are also reluctant to take medications for depression or other mental health diagnosis. In an effort to address this, Venango County is increasing its outreach effort to seniors by offering Depression and Screening Assessments in conjunction with the older adults resource fair on October 13, 2018 as well as providing at least one presentation on depression and one on addiction at the Cranberry Place senior center. As identified in the needs assessment, Older Adults often do not use social media to gain knowledge of community activities, events and resources. A hard copy of the Venango County Resource Guide will be provided to local Senior Centers and presentations will be conducted at these locations.

• **Adults (ages 18 and above)**

- **Strengths:** An adult Life Coach was implemented in April 2018. This position works with the 25 year old and above population and will compliment the Emerging adult Life Coach that is currently in place that works with the 17 – 25 year old population.. The Life Coach will work with individuals on many of the social determinants of health including obtaining their GED, employment opportunities, soft skills, transportation, housing as well as other identified needs. The Life Coach will also work with the individuals at the Bridge House Apartments as well as individuals that are released from jail. Funding was recently provided to the county's primary outpatient provider for start-up of a hoarding intervention program. This program pairs a Cognitive Behavior trained master's level therapist with a staff member who is certified in psychiatric rehabilitation. The start-up funds are being used to allow the team to serve five individuals who have hoarding behaviors as well as enable the team to access national training on this disorder.

- Needs: Housing continues to be a top priority need. Plans are in place to implement master leasing using HC reinvestment monies to help impact on this area. We will use other funding sources such as the Emergency Solutions grant and rapid re-housing to help address these issues along with the Bridge Housing Apartments. Transportation has also been identified as a high need. Venango County will continue to fund the Ride program to provide transportation after hours and out of county, focusing on employment and medical appointments.
- **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: The Life Coach program continues to receive referrals for people who need assistance in education, housing and employment. It is anticipated to serve up to 50 individuals in the coming fiscal year covering the Emerging Adult and Adult populations. The Life Coach can work outside of the normal parameters of case management to access resources that are barriers to the above three goals. The Transitions Program continues to be a success. A local site-based psych rehab provider also is using special programming to meet the needs of this very distinct group. The Independent Living Program funded under CYFS is assisting a record number of youth who are aging out of foster care acquire the skills necessary for a successful adult life. This includes post-secondary education opportunities, budgeting, life skills, and housing search assistance. Venango County has the HC funded Transitions program available to help high-risk emerging adults, age 18-25, as they launch from adolescence to adulthood. This program is targeted to high risk young adults who have serious mental illness and an extensive treatment history.
 - Needs: Housing, employment and transportation continue to be the main barrier for transition-aged youth. Opportunities for positive social interaction and recreational activities have also been identified as a need. The emerging adult population has identified a need for pregnancy support and parenting programs.
- **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: The Student Assistance Program (SAP) expanded its reach in the 2017/18 school year. The program now exists in 5 school districts in Venango County. The Student Assistance Program continues to execute CAST, Signs of Suicide, as well as other groups in the junior/senior high schools. In the 2017/18 school year, SAP at the elementary level is expanding as well. In the 2018/19 school year, it is anticipated that groups will begin to be offered at the elementary level to address the needs of those students. The SAP program completed 271 screenings in the last calendar year for mental health and Drug and Alcohol needs. In February of 2018, the Adolescent Partial Hospitalization Program opened and is serving a maximum of 12 adolescents at any given time. Person/Family Centered Case Management and Child-Centered Planning Meetings benefit this age group. CASSP meetings with immediate linkage to services have also proven effective.

- Needs: At times, it is difficult to locate inpatient psychiatric beds resulting in children and families having extended stays in Emergency rooms while a bed is located. The county is aware of the statewide RTF bed shortage although this has not had a significant impact on us due to our low number of children who require that level of care. The lack of CRR Host homes has been problematic as well since these are diversions or step downs from RTF placements. There simply are not enough providers or beds for this level of care. Venango County struggles with ID children who have CYS involvement which necessitates placement. Typically, there are 2 children with these issues who require placement at any given time. The children need services from a specialized ID provider but the rates for ID providers are 2-3 times higher than traditional CYS placement rates, even shelters.

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: Venango County currently has two “CHIPP” houses that provide supportive housing for individuals transitioning out of Warren State Hospital. The model, which consists of a 3-bed unit with 24 hour staff plus peer specialist time, has proven very beneficial for the individuals served. The County has also contracted with a local service provider to carry out a Community Living Program to assist individuals with a serious mental illness remain in the community reducing the need for in-patient or state hospital level of care. This program works directly with the individual and assists them with sustaining housing and independent living skills. The County continues to offer blended case management to all individuals transitioning out of Warren State Hospital and over 90% accept that service. Venango County also has enhanced personal care beds available for individual coming out of the state hospital. Venango County has a total of three 15-bed enhanced personal care homes serving the needs of individuals with a serious mental illness and/or ID diagnosis.
- Needs: There is a need for more readily accessible housing, both subsidized and unsubsidized. The County’s housing case manager, in conjunction with the individual’s traditional supports coordinator, will work to assist the individual to gain needed supports and skills to find, acquire and maintain safe, affordable, permanent housing. The county is currently working collaboratively with Crawford and Mercer County to develop 1 more “CHIPP” slot to enable another discharge from Warren State Hospital.

- **Co-occurring mental health/substance use disorder**

- Strengths: Venango County Human Services currently performs integrated intakes so that individuals seeking mental health and substance use services only have to attend one appointment. The co-location of all HS Service Coordinators lends itself to improved collaboration on cases with co-occurring disorders. Dual intakes are conducted in jail, community and hospital/ detox settings.

- Needs: Although intake for both systems is completed at one appointment, paperwork for both systems must be completed even though much of it is duplicative. After intake, all services continue to be separate so that individuals with co-occurring disorders could be receiving services from multiple providers.
- **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: There continues to be service coordinator who is dedicated to assessments and referrals for incarcerated individuals. HS staff, including the HS and Substance Abuse administrators have been active members of the county's CJAB for many years. Administrators, jail staff, court supervision staff, housing staff, employment providers and the Public Defender's Office participate in the Re-entry subcommittee of the county's CJAB and collaborate on this effort. The group is currently working to develop and launch a re-entry program in the county. County human service staff attended a 40 hour training on the Crossroad Cognitive Behavioral curriculum. Human Service staff are now providing 10 week cog groups in the jail in conjunction with the county's court supervision program. This was another need identified by the county's Re-entry Committee.
 - Needs: There is a need for a more coordinated re-entry program that starts when individuals are incarcerated and does a warm handoff to community service providers when released. Members of the re-entry subcommittee are currently working to develop this program which will consider social determinant of health issues as well as formal treatment needs.
- **Veterans**
 - Strengths: Veterans make up approximately 10% of Venango County's population. Changes have been implemented to the mental health screening to identify Veterans and their unique needs. A Fairweather Lodge in Venango County is operated specifically for Veterans. The Veterans Affairs office conducts lunch and learn sessions with the HS staff on an as needed basis to continue the conversation on how to collaborate to ensure MH needs are met. Veteran's Affairs staff also participate in the Venango County Suicide Prevention Taskforce. In 2017-201, 16 veterans were served in Community Support Services YTD.
 - Needs: Shelter continues to be identified as one of the strongest needs for Veterans. Transportation outside of the County continues to be a challenge as well.
- **Lesbian/Gay/Bisexual/Transgender/Questioning/Intersex (LGBTQI) Consumers**
 - Strengths: The Student Assistance Program has adapted its screening tools and forms to accommodate the LGBTQIA community. The county is working with The Pointe, a mental health drop in center located in Oil City, to establish its program

as a Safe Zone. The drop-in center will spread the message that anyone with lived mental health experience is welcome at the center regardless of their sexual orientation. In the 2018/19 fiscal year, Venango County plans to bring in a trainer for human services staff in this area.

- **Needs:** In 2017, a focus group of emerging adults was met with to determine the needs of the emerging adults in our county. A few members of the group identified that there is very limited access to activities where the LGBTQ community feels welcome. To address this need, in 2018/19 fiscal year, The Pointe Drop-In Center will work to make its center a Safe Zone for the community and encourage members of the LGBTQ community to have input in to activities offered at the center.
- **Racial/Ethnic/Linguistic Minorities (including Limited English Proficiency)**
 - **Strengths:** HS continues to work internally on keeping racial/ethnic/ linguistic minorities in the conversation to assess for needs and strengths. Venango County continues to be fairly homogenous in its ethnic/racial composition, with a Caucasian population of 96.9%. However, the County continues efforts to identify issues affecting this population.
 - **Needs:** Continued outreach will occur to Venango residents falling into the RELM population.
- **Other (specify), if any** (including Tribal groups, people living with HIV/AIDs or other chronic diseases/impairments, Traumatic Brain Injury, Fetal Alcohol Spectrum Disorders)
- **Neo-natal Abstinence Syndrome-** Neonatal Abstinence Syndrome has spiked to 41.1 per 1,000 newborn hospital stays as reported the PHCA- PA Health Care Cost Containment Council. Venango County is ranked as the 4th highest county in the state with extended days in the hospital after birth.
 - **Strengths:** The Overdose Task Force and partnership with the Department of Health and UPMC Northwest have begun to have meetings to review the data from said report as well as other data points. The Taskforce and partners plan to begin outreach to numerous doctors, MAT providers and general public to educate on the NAS topic.
 - **Needs:** Venango County Human Services will continue to explore this area via participation in the Taskforce as well as work with our service providers to increase penetration with this population.

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

Yes No

If yes, please describe the CLC training being used. Descriptions should include training content/topics covered, frequency training is offered, and vendor utilized (if applicable). If no,

Counties may include descriptions of any plans to implement CLC Trainings in the future. (Limit of 1 page)

Does the county currently have any suicide prevention initiatives?

Yes No

If yes, please describe. Counties without current suicide prevention initiatives may also describe plans to implement future initiatives in the coming fiscal year. (Limit of 1 page)

- Venango County facilitates the Venango County Suicide Prevention Taskforce. Over the course of the last year, membership for the taskforce has grown. The taskforce is planning a community event for September 8th, 2018. The event is named “Shed a Light on Suicide” and is planned as a night-time kayak to take place at a local park. The event will be open to the public and will provide information to the community regarding suicide prevention.
- The Suicide Prevention Taskforce will be working with our local schools as well as our local mental health drop in center, The Pointe, to provide suicide awareness month activities and resources.
- The Suicide Prevention Taskforce is partnering with the local CSP to bring Kevin Hines, a renowned speaker in the area of suicide prevention to this year’s “Let’s Band Together to Prevent Suicide Rally on June 1, 2018.
- Venango County will be joining the Garrett Lee Smith Youth Suicide Prevention Grant to supply the Student Assistance Program with a screening tool for suicide prevention. The goal of this program is to more efficiently identify the mental health/drug and alcohol issues of our youth and refer them for services and supports.
- The Student Assistance Program recently added a contract for liaison services for Venango Catholic High School. The Student Assistance Program is adding additional group curriculum to address the needs of the students it serves.
- SafeTALK will be offered on two occasions in the 2018/19 fiscal year to the public to increase awareness of the issue of suicide and give the public a tool kit on how to refer someone who is experiencing suicidal ideation. ASIST, a suicide intervention training, will continue to be offered to human services staff as well as local provider staff.

c) Supportive Housing:

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 17-18 that is in the implementation process. Please use one row for each funding source and add rows as necessary. (Note: Data from the current year FY17-18 is not expected until next year)*

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 18-19 (only County MH/ID dedicated funds)	Actual or Estimated Number Served in FY 16-17	Projected Number to be Served in FY 18-19	Number of Targeted BH Units	Term of Targeted BH Units (ex: 30 years)		Year Project first started
Notes:									

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 18-19	Actual or Estimated Number Served in FY 16-17	Projected Number to be Served in FY 18-19	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
Notes:									

3. Master Leasing (ML) Program for Behavioral Health					<input checked="" 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 18-19	Actual or Estimated Number Served in FY 16-17	Projected Number to be Served in FY 18 – 19	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
	Re-investment Funding	\$0	\$215,000	0	5	0	0	0	2018
Notes: The Projected amount will cover 5 years of Master Leasing to be paid during the FY 18/19 time period									

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 18-19	Actual or Estimated Number Served in FY 16-17	Projected Number to be Served in FY 18-19		Number of Staff FTEs in FY 16-17	Year Project first started
Notes:								

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 18-19	Actual or Estimated Number Served in FY 16-17	Projected Number to be Served in FY 18-19		Number of Staff FTEs in FY 16-17	Year Project first started
	MH	\$12,000	\$14,000	10	10		2	2016
Notes: The Community Living Program serves individuals in the MH system inclusive of those transitioning from Warren State Hospital and from the CHIPP House setting. This services enables individuals to successfully reside independently within their community. Supports include locating appropriate housing, assistance with budgeting, housekeeping and essential independent living skills.								

6. Housing Contingency Funds for Behavioral Health					<input checked="" 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 18-19	Actual or Estimated Number Served in FY 16-17	Projected Number to be Served in FY 18-19		Average Contingency Amount per person	Year Project first started
Shelter Plus Care Grant for all adult populations not just behavioral health	Shelter Plus Care Grant	\$28,950	\$54,624	8	15		\$3,650	2011
Housing Support Program for all adult populations not just behavioral health	MH Base funds, CSBG	\$4,000	\$4,000	10	10		\$400	2000
Contingency funds to support rent, utilities and household goods targeting MA/VBH eligible	Reinvestment Funds	n/a	\$64,500	n/a	64		1000	2018
Notes:								

7. Other: Identify the Program for Behavioral Health	<input checked="" type="checkbox"/> Check if available in the county and complete the section.
<p>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.</p>	

Project Name (include type of project such as PBOA, FWL, CRR Conversion, etc.)	*Funding Sources by Type (include grants, federal, state & local sources)	Total \$ Amount for FY 16-17	Projected \$ Amount for FY 18-19	Actual or Estimated Number Served in FY 16-17	Projected Number to be Served in FY 18-19		Year Project first started
Fairweather Lodge	MH	\$46,218	\$46,218	7	7		2005
CHIPP Houses	CHIPP	\$230,000	\$290,000	4	5		2014
Sugar Valley Lodge	MH	\$245,882	\$245,882	45	45		2000
Notes:							

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 18-19 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. Increase the availability of permanent, supported housing for individuals recovering from severe mental illness

Narrative including action steps:

Venango County Human Services (VCHS) will continue to focus on housing efforts. Over the past year, a housing case manager position was added to the county human service complement. The primary focus of this position is to link individuals to permanent housing, be knowledgeable about housing opportunities/vacancies throughout the county, and to work directly with individuals in the bridge housing program to help them gain income and obtain permanent housing.

VCHS will use HC reinvestment funds for contingency funding designed to enable individuals to gain or maintain housing. Contingency funds are used primarily to pay for outstanding utilities or first month's rent or deposits. Additional HC reinvestment funds will be used to secure five master lease sites which will serve at least five individuals. If the individuals need assistance with activities needed to maintain their household, supported housing will be funded and provided by a local provider.

Timeline: The housing case manager is currently in place. The contingency funds are being used now and will continue to be used through 2019 or until the funds are exhausted. VCHS will stagger the implementation of master leasing with at least 1 unit leased by August 15, 2018, 3 units by September 30, 2018, and 5 units by November 1, 2018.

Fiscal and Other Resources: The funding for these initiatives will be mixed with funding from HSDF under the block grant, funding from HC reinvestment, and funding from the Child Welfare Needs Based Budget, which will fund a portion of the housing case manager.

Tracking Mechanism: The housing manager will track the numbers of individuals served by both the housing case manager and the contingency funding. He will also be responsible for getting the master lease agreements in place and monitoring them. The Deputy Administrator and Administrator meet monthly with the housing manager and will monitor progress by reviewing reports at each monthly meeting.

2. Increase the choices and availability of peer-delivered services

#1 Venango County Human Services is prioritizing this priority area for FY 18/19. Several new programs will be initiated including the Employment Creation Initiative which will target members of the Fairweather Lodges as well as individuals who attend the local drop in center(The Pointe) or work with our local wok activities provider(Venango Training and Development Center). The plan is to give the Fairweather Lodge provider (VTDC) start-up funding to develop an auto detailing business to clean county cars.

#2 A second peer delivered initiative will be the development of a warming center at the local drop in center, The Pointe. Pointe workers, which include peers, will provide the staffing for the warming center which will be available from 9 pm until 9am on nights that the temperature, including the wind-chill falls below 20 degrees Fahrenheit.

#3 Finally, The Pointe will be given additional funding to increase socialization/community integration for individuals with mental health diagnosis who live at Sugar Valley Lodge. The funding will be to provider additional transportation for individuals to attend The Pointe.

Narrative including action steps:

#1 The Human Service Administrator and Quality Management/ Compliance Officer have met with VTDC who operates the local Fairweather Lodges to discuss program development. The provider is interested and will pursue a site, equipment, and individuals willing to work. A contract will be in place by 8/15/18 with car detailing to start immediately.

#2 The Pointe has been contacted and is willing to host and staff a warming center using Pointe staff and members. Upon approval of this block grant application, a contract will be developed and the program will be available by 11/15/18.

#3 A contract will be developed immediately. Residents of Sugar Valley Lodge should have increased access to the Pointe by 7/1/18.

Timeline: #1 in place by 8/15/18, #2 in place by 11/15/18 #3 in place by 7/1/18

Fiscal and Other Resources: HAP/ MH, CSP community agencies

Tracking Mechanism: Billing/ # utilizing, referral to Housing CM

3. Increase alternatives to locked placements

Narrative including action steps:

Venango County will work to expand the number of “CHIPP” housing slots by 1. This will be accomplished by developing an additional CHIPP house in collaboration with Crawford and Mercer County. The house is projected to be located in Crawford County, with a provider from Venango County operating the house. It will be modeled after the other CHIPP houses and have 24 hour staff availability, although it is operated on a block shift staffing basis with 8 hours of sleep time built in for each staff member. Step 1 is for the 3 counties to get together to further discuss. This will be followed by meeting with, then contracting with, the identified provider to operate the facility as well as locate a suitable property. Once all is in place, the Venango County liaison with Warren State Hospital will work together to identify an appropriate individual to discharge to the facility. Currently, Venango County has at least 2 individuals who are on the discharge planning list at Warren State Hospital but need a staffed facility when discharged. The CHIPP house will be in the community so will both meet the housing needs and provide services in the least restrictive setting. It is also a more integrative setting than a personal care home which would be the other likely discharge option for the identified individuals.

Timeline: The meeting between the three counties will occur prior to July 1, 2018. The facility will be located, the contracts executed, and the staff hired/trained by January 1, 2019, which would be the proposed move in date.

Fiscal and Other Resources: Start-up costs would be funded using HC reinvestment dollars or other available funds. The amount needed will be dependent on the cost of the house selected. Ongoing funding for the slot will be provided using mental health funding from the block grant. Current average annual costs for 1 slot is \$60,000.

Tracking Mechanism: Staff will be identified from each county to take the lead on this project. Progress with staff will be discussed each month at the internal MH/DS staff meeting here. In addition, Crawford, Mercer, and Venango Counties have a formal “NW 3” meeting monthly that all 3 human service administrators attend. An informal discussion will occur at that meeting each month.

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 type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Partial Hospitalization		
Adult	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Child/Youth	<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 type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Crisis Services		
Telephone Crisis Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Walk-in Crisis Services	<input checked="" type="checkbox"/>	<input type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Mobile Crisis Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Crisis Residential Services	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Crisis In-Home Support Services	<input type="checkbox"/>	<input type="checkbox"/> County <input type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Emergency Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" 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 checked="" 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 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 checked="" type="checkbox"/> County <input checked="" 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 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 checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Housing Support Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input type="checkbox"/> HC <input checked="" 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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" 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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" type="checkbox"/> HC <input type="checkbox"/> Reinvestment
Outpatient D&A Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> County <input checked="" 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 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

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	No							
Supportive Housing	No							
Supported Employment	No							
Integrated Treatment for Co-occurring Disorders (MH/SA)	No							
Illness Management/ Recovery	No							
Medication Management (MedTEAM)	No							
Therapeutic Foster Care	No							
Multisystemic Therapy	Yes	8	MST /TSR standards	County/ VBH/ MST Institute	Annually	Yes	Yes	N/A
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>

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/Family Satisfaction Team	Yes	200	
Compeer	No		
Fairweather Lodge	Yes	7	
MA Funded Certified Peer Specialist- Total**	Yes	6	
CPS Services for Transition Age Youth	No	0	
CPS Services for Older Adults	No	6	
Other Funded Certified Peer Specialist- Total**	Yes	0	
CPS Services for Transition Age Youth	No		
CPS Services for Older Adults	No		
Dialectical Behavioral Therapy	No		
Mobile Meds	Yes	5	
Wellness Recovery Action Plan (WRAP)	Yes	45	
High Fidelity Wrap Around/Joint Planning Team	Yes		
Shared Decision Making	No		
Psychiatric Rehabilitation Services (including clubhouse)	Yes	30	
Self-Directed Care	No		
Supported Education	No		
Treatment of Depression in Older Adults	Yes		
Consumer Operated Services	Yes	170	
Parent Child Interaction Therapy	Yes	69	
Sanctuary	No		
Trauma Focused Cognitive Behavioral Therapy	No		
Eye Movement Desensitization And Reprocessing (EMDR)	No		
First Episode Psychosis Coordinated Specialty Care	No		
Other: Employment Supports Services	Yes	2	Not Using Evidence Based Model

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

**Include CPS services provided to all age groups in Total, including those in the age break outs for TAY and OA below

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	1
Number Full Time (30 hours or more)	1
Number Part Time (Under 30 hours)	0

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 and autism 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 and autism 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 Venango County Human Services' Intellectual Disability program (ID)/Administrative Entity (AE), remains committed to having available a diverse system of supports and services that meet the needs of the individuals we serve. The AE strives to support individual needs by ensuring health and safety, and promoting quality of life by serving individuals in the least restrictive setting that meets their needs. The AE strives to provide freedom of choice and supports to individuals and their families to identify and plan for use of both natural and paid supports. A continuum of paid services is available to individuals based on assessed needs. The most commonly utilized services include:

- Supports Coordination
- In-Home and Community Support
- Residential Habilitation
- Lifesharing
- Respite and/or Companion Service
- Community Participation Supports (this service definition replaced Pre-Vocational and Adult Training Facilities)
- Supported Employment

Individual needs are identified during the intake and the annual Individual Support Plan (ISP), Prioritization of Urgency of Need (PUNS) , and Supports Coordinator monitoring processes.

**Please note that under Person Directed Supports (PDS), 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 17-18</i>	<i>Percent of total Individuals Served</i>	<i>Projected Individuals to be served in FY 18-19</i>	<i>Percent of total Individuals Served</i>
Supported Employment	1	20%	3	30%
Pre-Vocational	0	0%	0	0%
Community participation	30	27%	32	28%
Base Funded Supports Coordination	147	51%	160	53%
Residential (6400)/unlicensed	0	0%	0	0%
Life sharing (6500)/unlicensed	0	0%	0	0%

PDS/AWC	14	26%	16	30%
PDS/VF	0	0%	0	0%
Family Driven Family Support Services	40	29%	45	30%

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 competitive 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.

Employment services currently available in the County includes Supported Employment. We previously also had Transitional Work. Those who utilized this service have progressed in their skill levels, and were hired as employees in the agency they were receiving the service from. The primary vocational provider, VTDC, Inc. employs program staff who are certified in Discovery and Customized Employment through Marc Gold & Associates. This staff member is also a certified Community Employment Services Professional through APSE. Employment Pilot funds for Supported Employment will continue to be utilized when a transition-aged individual identifies interest in working. In fiscal year 17-18, base funds were used to serve one individual in Supported Employment. Increasing Competitive Integrated Employment (CIE) remains a key goal on the AE Quality Management Plan. There currently 26 individuals, across all ID funding sources, in CIE.

In an effort in increase employment awareness and opportunities for those we service, the Supports Coordination Organization (SCO) staff were trained by employment related organizations. Trainings were provided by the OVR regional lead, as well as CareerLink personnel. In addition, they received training on benefits counseling from AHEDD.

In addition, numerous individuals have utilized the RIDE Program to provide transportation to/from employment after regular Go-Bus hours. A café is operational in the County Human Services Complex and is staffed by individuals who receive services or are in recovery. A number of individuals with an intellectual disability are employed in the food sales, as well as the front desk of the Human Services Complex.

In 2016, Venango HS became a site for the Oil Region’s Mobile CareerLink. Recently the CareerLink contracted provider changed to ResCare. The AE and SCO staff met with the new contracted CareerLink provider in March 2018. Employment staff come to the Human Service Complex twice a month of offer a wide range of CareerLink services. This makes the referral process much easier, as supports coordinators can accompany individuals and provide support during their intake. Programs such as WIOA Adult and Youth services are also provided by the CareerLink and are beneficial to the ID population.

The County Employment Analysis Workgroup was delayed this year due to the slow launch of the new WIOA/ CareerLink Provider. This group is comprised of contracted Supported Employment service providers, consumers of service, and representatives from the Office of Vocational Rehabilitation (OVR). The group's focus is on identifying obstacles to community employment and working toward elimination of identified barriers.

ODP could assist with employment growth activities by continuing to provide training opportunities for Supports Coordination Organizations (SCO), and by continuing to include OVR in the conversation.

Supports Coordination:

- Describe how the county will assist the supports coordination organization (SCO) to engage individuals and families in a conversation to explore the communities of practice /supporting families model using the life course tools to link individuals to resources available to anyone in the community.
- Describe how the county will assist supports coordinators to effectively engage and plan for individuals on the waiting list.
Describe the collaborative efforts the county will utilize to assist SCO's with promoting self-direction.

Venango County Human Services as a whole encourages the use of natural supports. The SCO has been utilizing the LifeCourse Tools with families, focusing on those in emergency PUNS and new intakes. Toolkits which include the LifeCourse Tools, Venango County's resource booklet, the ODP Everyday Lives booklet, and a carrying case are provided to the SCO for dispersion to families are that the individuals' first meeting with the Supports Coordinator.

Each consumer's needs continue to be reviewed annually at the Individual Support Plan meeting (ISP), as well as during contacts throughout the year by the Supports Coordinator. Should a change in need occur throughout the year, the Prioritization of Urgency of Needs (PUNS) is updated to reflect that need. Should a need be identified and funding is available, a Critical Revision to the ISP can occur at any time of year. In the current fiscal year, the County worked hard to identify and fully serve the consumers on PUNS in the emergency category. Going forward, it is the goal and priority of the County to continue to fully meet the needs of the consumers in the SC Only and Base Funding streams. The Supports Coordination Organization as well as the Administrative Entity work together to fund the needs of the consumers in the programs.

The County will assist the supports coordination organization to develop ISPs that maximize community integration and integrated employment by reviewing this information in its entirety during the course of ISP review. Should the AE reviewer note that the person could benefit from either and is not currently receiving natural or formal supports in a given area, the AE reviewer will inquire with the SCO and encourage them to hold a conversation with the individual/team regarding such.

Lifesharing and Supported Living:

- Describe how the county will support the growth of Lifesharing and Supported Living as an option.

- What are the barriers to the growth of Lifesharing/Supported Living in your county?
- What have you found to be successful in expanding these services in your county despite the barriers?
- How can ODP be of assistance to you in expanding and growing Lifesharing/Supported Living as an option in your county?

Venango County offers Lifesharing as an option to everyone at intake and annually thereafter. Supports Coordinators will continue to present Lifesharing as an option for residential placement annually at ISP meetings, as well as any time the need for residential services arises. A barrier to growth of Lifesharing is the lack of available Lifesharing homes. Venango County currently has eleven individuals who are residing in Lifesharing homes. The ability of family to provide Lifesharing has enabled one individual to return to his family after several years of residential placement in a group home. ODP could be of assistance in the area of expansion of Lifesharing by assisting in the identification of potential providers who may be interested in expanding their program into this rural area.

The SCO has developed a policy regarding the importance of providing Lifesharing options when someone identifies the need for residential supports. In an effort to assure that this information is addressed by the SCO, the following is incorporated in the SCO policy manual:

- Lifesharing information is shared through County events such as provider fairs, forums, media opportunities, and websites
- Supports Coordinators are trained on Lifesharing policies through The Office of Developmental Programs, the Supports Coordination Organization, State Lifesharing Subcommittee meetings, and through available local trainings
- Lifesharing is always the first residential option given to a person and their families if they are seeking residential supports
- A Lifesharing brochure has also been developed and this is shared with the person each time Lifesharing is discussed.

If a person identifies that they are interested in the Lifesharing option, the SC provides assistance finding the individual the supports needed to address the request. If the individual is currently receiving residential supports or is already enrolled in Consolidated Waiver, the SC advises the AE of the identified need and potential providers are contacted. Arrangements are made for the person to meet with each potential provider, enabling the person to choose the provider that will best meet their needs.

If an individual identifies the need for Lifesharing, and does not have funding through consolidated waiver (or community living waiver based on needs group), the need is identified through the Priority Urgency Needs (PUNS) process. If sufficient base dollars are not available and the individual falls in the emergency PUNS category, the AE will alert the region capacity coordinator of the identified need.

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, especially medical 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 and promote the life course /supporting families paradigm.
- 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 community resources as well as formalized services and supports through ODP.

The County will increase the capacity of community providers to fully support individuals with multiple needs by continuing to encourage participation in HCQU trainings. Intensive technical assistance (ITA) requests are forwarded to the HCQU as needed. LINK trainings continue to be available to local provider staff. Behavioral health trainings are regularly provided within the mental health system. AE staff have also provided trainings for law enforcement with respect to ID, mental illness, and autism. In addition, the County Human Services integrated training curricula is available to both in house staff and providers in our system. Trainings available through human services integrated training include the following:

- Critical thinking and problem solving
- De-escalation
- Motivational interviewing
- Engagement
- Assessment and service coordination
- Trauma informed care
- Strengths based service coordination
- Addictions
- Understanding medical terminology
- Understanding psychological/psychiatric reports
- Criminal court proceedings
- Protective services
- Suicide awareness and intervention
- Domestic violence
- MH awareness/hearing voices
- Lifespan developmental
- Veterans services
- Natural supports
- Cultural competency
- Changing perspectives (Intellectual disability)
- Housing/Community Support Services
- Personal safety
- Conflict resolution

A County representative will continue to attend and participate in the local area district transition coordinator meetings. During these meetings, the variety of service offerings are described to district transition coordinators. The importance of these children being known to the ID system prior to graduation is conveyed. Also, our Intermediate Unit 6 (IU6) identifies students with intellectual disabilities. The SCO is invited to IEP meetings for youth in the transition from high school range. If the individual is open with County services, the supports coordinator makes every effort to attend the meeting. If the identified individual is not currently served by the County MH/DS system, a casework

supervisor from the SCO attends the meeting and explains ID services and supports to the IEP team. If the parent/student is interested in opening with the County system, an intake appointment is scheduled.

As the HS system in Venango County is integrated, meeting between children and youth, older adult Services, and the mental health system occur regularly. Additionally, a representative from the ID system attends CASSP meetings to provide perspective, and inform the team of supports that the ID system could offer to those with an intellectual disability and/or autism.

Emergency Supports:

- Describe how individuals in an emergency situation will be supported in the community (regardless of availability of county funding or waiver capacity).

Individuals in the community who encounter an emergency situation, in addition to exploring supports funded by the ID system, will be supported just like any other individual who is served by Venango County. The AE will work cooperatively with the Supports Coordination Organization to keep the individual safe. Natural supports to the individual, such as friends and family, will be sought. If needed, the County Housing Case Manager will be utilized. If the individual also has a MH diagnosis, options for emergency housing under mental health will be explored. Referrals will be completed to other community service agencies/organizations that could be of assistance, along with housing agencies. It should be noted that there is a lack of available respite beds to take individuals on an emergency basis. It would be helpful if ODP would work to increase capacity in this area.

- Provide details on your county's emergency response plan including:
 - Does your county reserve any base or block grant funds to meet emergency needs?

The County does retain a limited number of funds for individuals who present in an emergency situation. Base funds will be used to provide supports to the extent possible. The AE will notify the Block Grant Administrator of the identified need. The submitted information will be reviewed to determine if there are funds available within the Block Grant to meet the identified need. Other service systems will also be explored to determine if the individual could be served by that system. If funds are not available to meet the need, the AE will follow the unanticipated emergency procedure and notify ODP of the emergency need requesting an increase in waiver capacity.

- 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?
- 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?

When an individual needs emergency services during regular business hours, the individual's supports coordinator initially responds, then notifies either the casework supervisor or the SCO director of the emergency situation. The casework supervisor or the SCO director then notifies

the AE. In the event that an individual needs emergency services outside of normal working hours, the Venango County PIC (Protective, Intake, and Crisis) Unit serves all human services as well as the community at large. This unit provides mobile crisis services. Should the need identified during the crisis be one that is outside the scope of the PIC Unit and there is a need for ID specific services (residential or otherwise), the staff have after hours contact information for the SCO, AE, deputy administrator, and administrator.

The PIC Unit is comprised of five units and two screeners. The staff who work in this unit come from a variety of HS categorical backgrounds, including the ID system. Several have experience working with the ID and/or Autism population prior to, or during their tenure as crisis unit staff. Several staff in the PIC Unit have had training in ID. The HCQU developed a curriculum to educate all HS staff, including PIC staff, on ID and autism. This training is scheduled periodically throughout the year.

- Please submit the county 24-hour emergency crisis plan as required under the Mental Health and Intellectual Disabilities Act of 1966.

Policy is attached at end of document.

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 trainers.

- Describe the county's interaction to utilize the network 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?

The County will utilize PA Family Network, ODP, and AE trainers to help individuals, families, providers, and County staff gain skills in order to utilize the resources and techniques available. PA Family Network Training sessions will be scheduled as needed, with at least one training per year provided for families. It is expected that participants in the training will develop skills to create more meaningful Individual Support Plans to help persons with ID obtain an everyday life.

Venango has paired with Mercer County for the ODP Community of Practice initiative. The Community of Practice committee is made up of a variety of providers, SCO, AE staff from both counties, and a family representative. The initiative focuses on the areas of discovery/navigation and connecting/networking and is supported by both regional and central office ODP staff.

As the ODP Community of Practice grant funding will end 6/30/17, the County plans to utilize block grant funds for quarterly family events. These events will include PA Family Network LifeCourse Tool trainings for families, education on the system, and other engagement activities.

At the local level, the County continues to advertise the use of the HS website, mobile app, and social media page. Most recently, business cards have been distributed throughout the community with information on these applications. The website and app include unpaid services, paid supports, and

opportunities for networking. The website can be sorted by choice of ages and stages or categorical based on individual preference, and is available to the community at large. Helpful links to other websites can also be found on the website. The social media page includes information on the services and supports offered by human services, as well as a variety of community events/engagements held within Venango County.

- 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 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?

The County will continue to engage with the Health Care Quality Unit (HCQU) on an ongoing basis. An AE staff member continues to be an active member of the HCQU's Management Oversight Committee (MOC). The assigned HCQU nurse is a regular attendee of provider meetings which include AE and provider representatives, and is also a member of the Community of Practice regional collaborative. When trends in incidents such as individual to individual abuse, or medication errors emerge, the HCQU schedules trainings with local providers. The HCQU also regularly schedules local trainings of need and interest for providers, staff, and individuals who are receiving services. The Intensive Technical Assistance process is utilized for areas of need at the individual level. ITAs will continue to be sought on an as-needed basis. The AE will use HCQU data regarding number of trainings, number of consumer and staff attendees, and number of ITAs requested in the QM plan.

Actions involving the HCQU are included in three target objectives within the Quality Management Plan. These areas are:

1. To reduce the number of individual-to-individual abuse
2. To decrease the number of reported restraints

In Risk Management, the County utilizes the Risk Mitigation Cycle:

- Recognize
- Assess
- Develop Strategies
- Implement
- Evaluate

The County uses Incident Management (IM) data to complete quarterly trend analysis of incident categories and reviews this data quarterly during the provider meeting. This information is also reviewed at the County Quality Management committee meetings. If trends are identified in any area, the committee brainstorms potential reasons for increase and develops an action plan to address the issue. Strategies implemented will be evaluated on an ongoing basis to determine their effectiveness. Should there be an increase in an area where an action plan already exists, the committee will re-evaluate the plan and determine if additional action items are necessary.

At the individual level, potential risk factors are identified during the course of supports coordinator individual monitoring activities. The supports coordinator has the responsibility to promptly identify and address areas of individual risk to mitigate more serious consequences. Supports coordinators will utilize “print issues” and forward any concerns at the individual level on to the AE. The provider is responsible for developing a solution to the issue, and submitting corrective action to the supports coordinator. The effectiveness will be evaluated by SC follow up. If the provider does not resolve the situation, the AE will intervene and come to a solution with the provider.

In addition to monitoring activities, individual risk factors are addressed during ISP process. Once the ISP is submitted, the AE authorizer assures that services identified in the ISP are supported by the content of the plan and appropriate to meet the needs of the individual, as well as their health and safety in the least restrictive way. If the AE reviewer recognizes additional risks or risk factors, the AE reviewer will communicate that information to the team and request revisions to the ISP.

A local IM4Q program representative attends provider meetings and is an active member. Discussions surrounding IM4Q surveys, issues/concerns, and IM4Q data are presented to the committee as needed. The IM4Q also presents the results of their annual report during these meetings.

IM4Q data regarding individual and family satisfaction questions is part of the 2017-19 AE Quality Management (QM) Plan under the QM focus area of Participant-Centered Service Planning and Delivery/Families are supports throughout the lifespan. Results will be reviewed on an annual basis upon release of the County IM4Q Summary Report. The County Quality Improvement/Quality Management committee and MH/DS Advisory Board will review indicator data provided by IM4Q, and address any current trends and develop improvement plans based on the information. ODP could assist with risk management by developing trainings geared toward advocates, consumers, and families.

- Describe how you will utilize the county housing coordinator for people with autism and intellectual disability.

Venango County has an integrated HS system and the housing department is located within the same building as all other County HS programs. Venango County HS Housing and ID staff communicate and collaborate to meet the housing needs of persons with ID and/or autism as needed. The Housing Case Manager benefits the ID population as many need increased supports i.e. visiting landlords, completing housing paperwork and navigating the housing system, and arranging for needed home repair. Access to the Chore Program for basic home repairs is also a benefit to many of the individuals served.

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

The County will engage providers in the development of an Emergency Preparedness Plan by including this agenda item for provider meetings. By holding discussion in this group providers will be able to collaborate with each other, as well as the AE in the development of their individual plans.

Participant Directed Services (PDS):

- Describe how your county will promote PDS (AWC VF/EA) services including challenges and solutions.
- Describe how the county will support the provision of training to SCO's, individuals and families on self-direction.
- Are there ways that ODP can assist you in promoting/increasing self-direction?

The County will continue to promote PDS services by encouraging it as a service option to individuals and families whenever a service need is identified and funding is available. It is also discussed annually at each ISP meeting, as well as any time an individual desires a new service or change in providers of service. The Agency with Choice program is utilized by several consumers of service, with the majority of usage for In Home and Community Supports and Respite. One of the challenges of the use of Agency with Choice is locating staff that will meet the needs of family member or themselves.

Currently, only one consumer utilizes the VF/EA service delivery option. The challenge with this option is the responsibility of the family to maintain accurate records and track utilization, have complete responsibility for training of staff, and lack of understanding of incident management.

The Supports Coordination Organization will continue to present this service option to individuals and families in regards to AWC/VF services. Should an individual or family be interested, the SC will make the referral to either the AWC or VF organization.

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.

Venango County continues to have one state center resident who desires community placement. Attempts to locate an adequate placement that meets this individual's needs have been unsuccessful. The County will continue to make efforts to secure adequate placement for this individual, as well as any other class members who become identified as desiring to leave the state center.

Individuals residing in other congregate settings are offered the choice annually during the ISP process to complete the service preference form to apply for Waiver services. Should an individual indicate interest in placement in the community, PUNS will be completed. The County will plan for these individuals by monitoring the PUNS and will pursue placement as Waiver capacity becomes available for these individuals.

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.

The need for safe, affordable housing continues to be identified as a need in Venango County. Individuals and families come to the attention of the housing department daily in search of housing support. Many are unable to acquire public housing because of past criminal records, lack of income and past unpaid utility bills that make it impossible for individuals to have utilities turned on in their names. The lack of available jobs in the County paying a living wage contributes to the housing crisis. Housing services in the County range from one time assistance such as a month of rental assistance to prevent eviction (using CSBG funds) to more supportive services such as those provided through the Emergency Solutions Grant (ESG) or the Shelter + Care (S+C) program for individuals suffering from a serious mental illness or substance abuse disorder who are chronically homeless. The ESG program encompasses rental assistance for those who qualify. This assistance could continue for up to six months to assist with homeless prevention or rapid rehousing. Information on the Housing Choice Voucher program and available public housing is also disseminated to individuals and families.

For individuals who come to the Housing Department and are literally homeless, the County will assist them with a 1-3 day stay at a hotel at a minimum or provide for a week-long stay at the Sugar Valley Lodge - VTECH rooms if they are open for services through the County HS systems. (These services would be paid for by the categorical funding associated with the individual). The Housing Case Manager and the HS case managers work closely with the individuals to assist them with obtaining permanent housing.

A family shelter located in Franklin opened in fiscal year 2015 via CYFS funding. The apartment complex can house up to three families at any given time. While staying at the family shelter the adults are able to work with their HS case managers and the Housing Case Manager to improve the quality of life for themselves and their families and work to become self-sufficient. Knowing the family has a warm place to stay and a roof over their heads allows them to concentrate on the services needed to enable them to succeed rather than worrying where their children will lay their heads that night. Families continue to be the County's largest referral population.

In late June 2016, a local non-profit acquired a building in which the County operates the Bridge Housing Program. After many renovations, the County now leases three apartment units, each able to house up to two individuals at any given time. The shared facility allows for shared living areas and individual sleeping areas. This program allows clients to move from temporary housing to supportive long-term housing while working with a Housing Case Manager preparing to live independently. While in the program, clients receive case management support and supportive services such as job readiness, mental health and substance abuse services, and linkage to public supports. The goal of the program is to assist clients to return to the most independent life situation possible.

The County staffs two case managers. The case workers perform the intake process and assess the client's available resources and supports and what services the client needs. Following assessment, the case manager in conjunction with the client's HS supports coordinator (as applicable), and the client develop a service plan that includes setting goals in the areas of basic life skills, health needs, financial management, parenting skills, home maintenance, job preparation skills, and/or employment skills. The service plan helps clients access the agencies and programs that can help them achieve their goals. The case managers work to link the family or individuals to ongoing supports, if needed, to help them maintain long-term stability and monitor their progress to ensure the client has access to needed and desired services. Because the housing case manager is part of the larger human services system in Venango County, developing plans through an integrated system better addresses the overall needs of the individual or family.

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.

The County leases three apartments from a local non-profit out of which operates a Bridge Housing Program. Each apartment has shared living space and two individual, private sleeping areas. Thus six individuals can be housed at any given time. Individuals can be referred to the program through County HS, by self-referral, or through community partners and providers. Clients move from temporary housing to supportive long-term housing while working with a case manager preparing to live independently. While in the program, clients receive case management support and supportive services such as job readiness, mental health and substance abuse services, and linkage to public supports. To date there have been 31 individuals through the Bridge House Program of which 70% found permanent housing. The need for Bridge Housing for Families is an unmet need in the County and staff are continuing to pursue options to bring family bridge housing to fruition.

- How does the county evaluate the efficacy of bridge housing services?

The housing manager maintains statistics on all aspects of the housing programs. The case manager offers support follow-up with residents who have obtained permanent housing and offer assistance as needed.

- Please describe any proposed changes to bridge housing services for FY 18-19.

There are no proposed changes.

- If bridge housing services are not offered, please provide an explanation.

N/A

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.

The Housing Department has two case managers who work directly with those individuals and families that present needing housing assistance. Following an initial assessment, the case manager determines the best course to take to address their immediate need but to also develop a plan for future sustainability. The case manager will determine which available program will best address the long term needs of the individual. Options include the six-month support program of ESG, or the Housing and Urban Development program Shelter + Care for those who meet the criteria of chronically homeless and suffering from a severe mental illness or substance abuse disorder where a person pays up to 30% of their monthly income/support and Base Funding which is a limited amount of funding that enables the Housing Department to assist individuals/family's in situations not covered by other programs. Other programs that an individual can be referred to include the Fairweather Lodge for those suffering from a severe mental illness, rental assistance through Community Services Block Grant funding, or emergency shelter using HAP funds. The case manager is required to acquire all pertinent information to verify and determine eligibility.

Due to the overwhelming need for housing case management services, a second case manager was hired in January of 2017 thanks to the flexibility of block grant funding. This allows for more time to be devoted to those in the Bridge Housing program as well as those staying in the family shelter. The Case Manager also networks with landlords to find suitable housing and to also discuss the need for them to rent to the individuals that we serve who are often rejected for housing due to their criminal pasts. With the hiring of the second house case manager, there does not appear to be a gap in case management services at this time.

- How does the county evaluate the efficacy of case management services?

Efficacy is evaluated by tracking the outcomes of the people served. Follow-up contact after permanent housing is achieved is very important. Statistically tracking of the number served, the number who achieve permanent housing, the number who are assisted by other services such as MH, SA, Child Welfare, etc. will demonstrate the efficacy of case management services.

- Please describe any proposed changes to case management services for FY 18-19.
There are no proposed changed.
- If case management services are not offered, please provide an explanation.
N/A

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.

History has demonstrated that it is very difficult to use HAP rental assistance funds due to the strict regulations that individuals and families have to prove sustainability after assistance is made. Many who present to the County for assistance are being evicted for non-payment due to lack of employment. Many have been removed from family homes with no source of income and many have criminal records leaving them without the ability to be hired into jobs with life sustaining wages or to be accepted into public housing. There is a critical need in the County for rental/utility assistance for individuals. Rental assistance is offered through various programs including Shelter Plus Care, ESG, Base Funds and Contingency Funds obtained from Re-Investment Funds

- How does the county evaluate the efficacy of rental assistance services?

The County tracks the information of the programs that are utilized that shows the life stages that are assisted.

- Please describe any proposed changes to rental assistance services for FY 18-19.

For 2018/19 Venango County continues to utilize the Emergency Solutions Grant (ESG) funding for rental assistance but are now a part of a Regional ESG with Lawrence County, Clearfield County, Beaver County and Warren/Forrest Counties.

- If rental assistance services are not offered, please provide an explanation.

N/A

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

For individuals/families experiencing homelessness and in immediate need because they have no shelter, hotel or motel stays for up to three days are made available. The County also contracts with a local non-profit personal care home for three private rooms known as VTECH (Venango Temporary Emergency County Housing). The goal of the program is to have individuals moved to transitional or permanent housing after five days but housing in VTECH could continue for up to 30 days if necessary. Case workers assist the individuals in finding sustainable housing. Categorical funding from MH, SA, and from the Department of Aging is also used to fund emergency shelter assistance when applicable. There are times throughout the year that the availability of emergency shelter housing is scarce.

- How does the county evaluate the efficacy of emergency shelter services?

Efficacy of this program is monitored by the HS Case Management Director and Housing Manager. Outcomes such as obtaining permanent housing, linkages to programs i.e.

CareerLink, linkage to MH/SA services, and linkage to public assistance should they qualify, are tracked.

- Please describe any proposed changes to emergency shelter services for FY 18-19.

No changes planned at this time

- If emergency shelter services are not offered, please provide an explanation.

Emergency Shelter is available.

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

- The County acts as an agent for the Federal LIHEAP/CRISIS and DOE Weatherization Programs
- The County is taking part in a new Regional Emergency Solutions grant program that is administered by Lawrence County that can assist individuals with homeless prevention and rapid rehousing and can assist with more than just one month of rent. This funding ends in August of 2019
- Shelter Plus Care funds can be used to house the severely mentally ill or those suffering from substance abuse who are chronically homeless. This funding was renewed through September of 2019 and provides funding for up to 8 slots
- Mental Health funds are used to support the Fairweather lodge program that houses seven individuals.
- A local provider received Fairweather Lodge funds to support homeless veterans
- Mental Health funds (CHIPP Funds) are used to house and support individuals transitioning out of Warren State Hospital.
- Mental Health and HSDF funds are used to provide enhanced personal care for up to 45 individuals to live in 15-bed personal care homes
- Mental Health funds are used to support severely mentally ill individuals live independently in apartments located in downtown Franklin
- Community Services Block Grant Funds are used for rental and utility assistance for those who qualify under DCED regulations
- The County operates a family shelter that can house up to three families at any given time. The families are identified through the crisis/protective services unit and can remain at the shelter for up to 45 days while working with County staff to acquire safe, affordable housing
- ID funds support individuals who chose to live independently in the community.
- The County has two Housing Authorities that administer the Section 8 Housing Choice Voucher Program to whom referrals are made
- Public Housing options are available in the County to house both individuals and families who meet criteria
- The Housing Unit within the County Human Services Building serves as the Coordinated Entry location for the county. Individuals/Family that are homeless are registered into the data base

that enables them to be considered for housing assistance in a twenty county area of the Western COC.

- How does the county evaluate the efficacy of other housing supports services?

Point in time homeless counts are made allowing the County to look for trends. Case managers across all categoricals monitor their caseloads and assist should housing concerns surface. County Human Services works closely with service providers to determine gaps in service or identified needs.

- Please describe any proposed changes to other housing supports services for FY 18-19. There will be no changes proposed at this time.
- If other housing supports services are not offered, please provide an explanation of why services are not offered.

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 the County uses the Homeless Management Information System (HMIS) when the Housing Department enrolls a client into either the Shelter + Care or ESG program. Reports are run either quarterly or annually as required by either DCED or HUD to enable the County to track enrollments, exits and client information. The HMIS system is also being used with the County's shelter programs.

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

This section should describe the entire substance use service system available to all county residents regardless of funding sources.

Venango County Substance Abuse Program (VCSAP) provides a broad array of services to the county.

- VCSAP provides prevention services to all local county school districts as well as to the general population. The program makes every effort to only implement evidence based programming which follows fidelity standards. The prevention programs that are offered are: Too Good for Drugs, Project Alert, On Applebee Pond, Tobacco Education Group, Tobacco Awareness Program, Wanna Bet, Knowing the Limits, Clean Break, Johnny' Luck Day, Gambling Away The Golden Years and Stacked Deck just to mention a few. Prevention programs are also offered in the summer at housing developments to target at risk families.
- The Student Assistance Program is also monitored by VCSAP. This program offers intervention services such as team consultation, pre-assessments for substance abuse as well as mental health, parent contact, and evidence based groups such as Coping and Support Training (CAST). Venango County provides services for adolescents through the Student Assistance Program, Outreach, Outpatient, and Evidence Based Program for Prevention and

Intervention and after school programs that offer safe environments for youth. During the 2016-2017 school year, four youth were screened for drug and alcohol abuse by the SAP program. Challenges are that underage drinking arrest still remain low in our county even though PAYS data indicate high level of at-risk underage drinking. Adolescents following through with substance abuse screening, assessments and substance abuse programs are the biggest barriers we face at this time.

- The county provides screening and assessment through the Protective Intake and Crisis unit which is an integrated unit for mental health, children and youth services, aging, and substance abuse. This integrated model allows for one door access to HS services regardless of the categorical.
- There are two licensed outpatient drug and alcohol clinics in the county that can serve any age group. The county also offers two Intensive Outpatient Programs
- The most intensive services the county offers are non-hospital detox and short and long term rehabilitation services. These serve both male and female adult population.
- Providers are implementing evidence based programming such as Relapse Prevention Therapy (RPT). RPT is a twelve week evidence based program that provides Individualized Enhancement Therapy and RPT group sessions. This program is intended to improve the individual's ability to prevent relapse and maintain abstinence from substance misuse and manage symptoms of mental health.
- Funds are also available to help people in recovery for a short period of time for emergency shelter for reasons of homelessness and domestic abuse situations.
- The In-Home Family Recovery Program and Effective Safe Parenting (ESP) are two family based programs in our community.
 - The In-Home Family Recovery is an outpatient family-based drug and alcohol treatment program. The target population are adults or adolescents with alcohol or drug misuse as the primary issue affecting the family functioning.
 - Effective Safe Parenting (ESP) is designed to help the adults to reunify with their children and maintain a substance-free lifestyle. New Beginnings is a community based intervention program for families with young children, serving those with substance use disorders in the family. Venango County. Families who are served have been identified with substance misuse/recovery issues who are pregnant or have children through age of three living in Venango County.
 - One treatment provider offers a three session Family Intervention Program and the inpatient patient clinic offers a Family Day on Saturdays. An evidence based program for youth ages 13-17 is the Adolescents Outpatient Program.
- There is a choice of two Recovery Specialists with two different providers. A Recovery Celebration Day was held in September and one-hundred and forty-three individuals signed a pledge to support recovery. The event allowed for several community agencies to share resources as well as having four individuals in recovery to share their stories. The event also spotlighted a person who falls in the definition of Fetal Alcohol Spectrum Disorder (FASD) to share her story since September is also FASD awareness month.

- Human Service staff help incarcerated individuals complete the Compass so that the individual can qualify for Medical Assistance after release. An Inmate Service Coordinator completes mental health, substance abuse and risk assessment for incarcerated individuals in order to assure that these individuals receive appropriate services while in jail as well as arrange appropriate follow up care upon their release. A case coordinator is assigned to help individuals enter into the community. Challenges to providing services is stigma to Medication Assisted Treatment (MAT) and other substance use disorder programs, transportation for after hours, individuals following through with services, and individuals knowing about services that are provided. In addition, A New Direction is an evidence based curriculum used for groups at the Venango County Prison. The curriculum delivers targeted treatment that helps offenders recognize and overcome criminal and addictive thinking. Case management services are offered either through resource coordination for those who need less time or case coordination for those who need more time and assistance.
- The RIDE Transportation Program provides transportation to residents served in the Human Service systems by partnering with volunteers, public transportation, and provider agencies. Transportation includes after hours employment transportation, medical appointments when no other third party reimbursement are available, and activities funded by the County such as D&A prevention activities, and family support groups such as Effective Safe Parenting and Early Head Start Socialization activities. The Medical Assistance Transportation Program serves individuals accessing medication assisted treatment (MAT).
- Venango's Problem Solving Court started on July 1, 2016. The goal of problem-solving courts is to supervise the treatment and rehabilitation of carefully screened and selected defendants to try to change their behavior. Instead of a jail sentence, defendants are given counseling, treatment for their addictions or illnesses, educational assistance and healthcare support. Twenty-one individuals are currently being served.
- Our priority populations include overdose survivors, pregnant women, and women with children, pregnant injection users, injection users, and veterans. These populations are identified through questions on assessments and are also tracked at the county level. Venango County's PIC unit works on connecting our priority populations with level of care and community supports. D&A providers also treat this population as a priority population. Emergency housing is offered to this population.

VCSAP does have a Together We Can Prevention Coalition who teams with the DUI Advisory Board and is active in identifying the needs of the community as well as sponsoring community events. Community events include: the DUI Simulator, Youth Retreat, Agricultural Day, and Hidden in Plain Sight. VCSAP also has an Overdose Drug Task Force that continues to reach out in a variety of venues. A youth retreat was held in September 2017 at Camp Coffman. 10 youth teams from local school districts and community organizations competed in team building and leadership activities. Cooperation, communication and leadership were judged by community members with the Juvenile Probation team taking first place.

Venango County participated in the Commonwealth Prevention Alliance Healthy Baby Signage Initiative. A total of 196 signs and FASD informational materials were distributed throughout the county.

Please provide the following information:

1. Waiting List Information:

	# of Individuals	Wait Time (days)**
Detoxification Services	0	0
Non-Hospital Rehab Services	2	1 to 2 weeks only periodically thru the year.
Medication Assisted Treatment	0	0
Halfway House Services	N/A	N/A
Partial Hospitalization	N/A	N/A
Outpatient	16	2 weeks(for only a couple months during the past year, IOP)

**Use average weekly wait time

2. Overdose Survivors' Data: Describe the SCA plan for offering overdose survivors Direct referral to treatment 24/7 in your county. Indicate if a specific model is used.

Venango County SCA works in collaboration with the Venango County Protective Services, Crisis, and Intake Unit (PIC) to provide screening and assessment as well as being the direct provider to facilitate the transition from emergency room to referral for substance abuse treatment. The emergency/hospital can call the PIC unit 24 hours a day 7 days a week when an overdose arises. A Case Coordinator will work directly with overdose survivors. A leave behind pamphlet is provided by the Venango Corner for the family when an overdose death occurs.

Outreach informational flyers were developed to give to local physicians, nurses, EMT, fire department, law enforcement, treatment clinics, schools and other community agencies to provide information on overdoses and services for an overdose survivor or family members.

On September 21, 2017, the Venango County Drug Overdose Task Force in collaboration with MidAtlantic AIDS Education and Training Center provided two community engagements in Venango County. The first engagement was held from 12:00 PM to 4:15 PM at the First Baptist Church of Franklin, where thirteen nurses, five social workers, fifteen drug and alcohol providers, two educators and twelve community members were educated on opioid misuse and how to reduce the misuse of opioids. The second engagement was UPMC Northwest Courtyard from 5:30-8:30. This engagement addressed how to respond to the opioid misuse. Twenty- three nurses, nine doctors, six social workers, six drug and alcohol providers, one educator, and five community members attended the event.

# of Overdose Survivors	# Referred to Treatment	# Refused Treatment	# of Deaths from Overdoses
198	189	2	9

3. Levels of Care (LOC): Please provide the following information for your contracted providers.

Providers are able to serve our priority populations veterans, co-occurring, adolescents, and women with children, overdose survivors, injection drug users and pregnant females. A provider is our network that serves individuals with MAT needs. Halfway houses our provided in our network.

LOC	# of Providers	# of Providers Located In-County	Special Population Services**
Inpatient Hospital Detox	1	0	2
Inpatient Hospital Rehab	1	0	2
Inpatient Non-Hospital Detox	5	1	4
Inpatient Non-Hospital Rehab	6	1	5
Partial Hospitalization	2	1	1
Intensive Outpatient	2	2	2
Outpatient	2	2	2
Halfway House	3	0	3

*** In this section, please identify if there is a specialized treatment track for any specific population in any of your Levels of care. For example, a program specific for adolescents or individuals with a co-occurring mental health issue.*

- 4. Treatment Services Needed in County:** Provide a brief overview of the services needed in the county to ensure access to appropriate clinical treatment services. Include any expansion or enhancement plans for existing providers or any use of Health Choices reinvestment funds for developing new services.

Housing, child care, and transportation continue to be the main barriers to the individuals served. Reinvestment Funds are being used to provide assistance by working with landlords to secure five apartments to assist with rent and utilities. The goal is to have program be able to self-sustain in five years.

The Neonatal Abstinence Syndrome (NAS) is at 41.1% per 1000 babies born in Venango County which is the fourth highest in the Pennsylvania. There is need for education and treatment for this population. A NAS workgroup is being developed in collaboration with the SCA and an OB/GYN Nurse from UPMC Northwest Medical Center. Adolescent drug use is also on the rise and need for treatment specifically addressing their needs. The Family Recovery Program and Effective Safe Parenting has seen an increase need and has a frequent waiting list.

Venango County provides assessments to co-occurring individuals. These individuals are able to access any of the services mentioned for adults or adolescents. The lack of local treatment options has been identified as the number one gap. There are no dually licensed providers in the county who can treat co-occurring disorders. Individuals are forced to travel at least forty-five to sixty minutes to obtain treatment

There is a need in Venango County to have medication assisted treatment with some type of therapy support but the budget cannot handle the current need as stated.

5. **Access to and Use of Narcan in County:** Include what entities have access to Narcan, any training or education done by the SCA and coordination with other agencies to provide Narcan.

Narcan training was provided to the first responders at Turning Point on March 21, 2018. Narcan kits were given to participants which included librarians, volunteer firepersons and EMT workers, judge, and a constable. Kits have also been provided to court supervision, Sherriff’s office and providers. Narcan kits are available by the county for any first responder in the community. Vouchers are available at the county for the general pupation. Franklin and Oil City Rite Aids carries Narcan for the general population to use their vouchers.

6. **ASAM Training:** Provide information on the SCA plan to accomplish training staff in the use of ASAM. Include information on the timeline for completion of the training and any needed resources to accomplish this transition to ASAM. See below to provide information on the number of professionals to be trained or who are already trained to use ASAM criteria.

Southwest Behavioral Health Management (SW6) is working in collaboration with SCAs and Providers in the network to provide ASAM training. The providers have twelve professionals scheduled in May to receive the ASAM training. There are two professional that have received the two day skill building training and three day implementation training. Three professionals from the SCA are scheduled at the end of April to attend the implementation training. The SCA plans to provide training to as many professionals as possible but due to high number of professionals needing training, the time frame and the space availability not all professional may be trained by July 1, 2018.

	# of Professionals to be Trained	# of Professionals Already Trained
SCA	8	7
Provider Network	22	7

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). ***Dropdown menu may be viewed by clicking on “please choose an item”.***

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: **Home Delivered Meals**

Description of Services: Home Delivered Meals are provided to homebound adults between the ages of 18 and 59 who are physically unable and have no other means of support to prepare meals. This

service assists in meeting the individual's nutritional needs, improves overall health, and fosters independence by enabling the individual to remain independent in the community. It is estimated that 5 homebound individuals will be served.

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.

Aging Services: Please provide the following:

Program Name: Parker Place

Description of Services: It was determined that older adults were in need of socialization activities in a safe, friendly environment where they would have opportunities to obtain pertinent information on a variety of topics. Parker Place offers a bi-weekly socialization opportunity where approximately 50 individuals at any given time will receive a hot lunch and enjoy guest speakers who will enlighten them on a broad range of subjects. Students from the local school district partner with the service provider to serve meals and interact with the seniors. This intergenerational opportunity has proven to be a benefit to both the students and seniors.

Service Category: Socialization, Recreation, Education, Health Promotion - Meets the socialization, recreational, educational and enrichment needs of older persons within a senior center facility or at other locations. Services are available to all older Pennsylvanians.

Program Name: Home & Community Habilitation

Description of Services: Many older adults who are living independently in the community do not have anyone to accompany them to medical appointments and other community based services where they need extra support. This service is delivered by Family Service and Children's Aid Society. Staff work one on one with participants at a frequency identified by the individual's Care Manager. Staff support Older Adults with meal planning/ grocery shopping, basic housekeeping, escort to medical appointments if needed, occasional social outings and other areas that support living in their home and communities. It is estimated that 4 individuals will benefit from this service. Service Coordinators in the Older Adult system identify the need, duration and frequency of the service and document it as part of the Older Adults Care Plan.

Service Category: Home Support - Services include basic housekeeping activities necessary to ensure safe and sanitary conditions. This service may also include the activities of shopping assistance, laundry, etc.

Program Name: Personal Care Supports

Description of Services: As the population of Venango County ages, the need for increased personal care supports to keep Older Adults safely in their home is essential. The typical number on the waitlist for these supports through the Older Adult system is anywhere from 7 to 10. Individuals often stay on this list for 6 months to a year with the potential for referral to protective services to assure health and safety. Personal Care Supports would service 5 individuals by referral to one of several agencies specializing in the delivery of this service. Referrals would be made by Older Adult Service Coordinators with specific frequency and supports based on assessment.

Service Category: Personal Care - Includes assistance with ADL's and IADL's, such as feeding, ambulation, bathing, shaving, dressing, transfer activities, meal preparation, and assistance with self-administration of medications by an agency provider.

Children and Youth Services: Please provide the following:

Program Name: **Effective Safe Parenting program (ESP)**

Description of Service: Venango plans to utilize block grant monies to support half of a community nurse position for the Effective Safe Parenting program (ESP), which is provided by Family Service and Children's Aide Society, a local non-profit. This program is designed to help the family reunify with their children and maintain a substance-free lifestyle. The ESP program has three distinct team members who provide the services to the families: a Social Worker, Parent Educator and Community Nurse. It is projected that 10 additional families can be served in the ESP program. This program focuses on children and families affected by substance use disorder and is a team delivered community based intervention. Venango see this intervention as a support those parents whose children have been born with Neonatal Abstinence Syndrome.

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.

Program Name: **Positive Parenting Program (Triple P)**

Description of Service: The Triple P – Positive Parenting Practice program ® is an evidence based parenting and family support system intervention designed to prevent – as well as treat – behavioral and emotional problems in children and teenagers. It aims to prevent problems in the family, school and community before they arise and to create family environments that encourage children to realize their potential. Triple P draws on social learning, cognitive behavioral and developmental theory as well as research into risk factors associated with the development of social and behavioral problems in children. It aims to equip parents with the skills and confidence they need to be self-sufficient and to be able to manage family issues without ongoing support. Triple P's 17 parenting strategies focus on developing positive relationships, attitudes and conduct. The 2018-19 needs assessment identified the need for additional parenting supports/ classes especially for emerging adults and parents with disabilities needing skills development. Four families at a time will be served under this funding with an estimated length of stay of 12 weeks so 16 families should be served in a fiscal year. The County plans to fund half a position in this existing program enabling a broader use of the service across categoricals.

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.

Generic Services: Please provide the following:

Program Name: **CHORE**

Description of Services: The County Housing Department will provide a Home Repair Chore Service (CHORE) program to approximately 50 individuals/families across all ages. This service will assist handicapped, disabled individuals, or elderly individuals who are in need of minor home repair. The provided services could include health and safety repairs, wheel chair ramps, porch/step/handrails, etc. The County will work closely with the Mustard Seed Mission, a faith based volunteer organization, who will be providing the labor for larger projects, i.e. wheelchair ramps (pre-made or removable costing between \$800 to \$1200 dollars), porch repair, etc. Mustard Seed Mission provides the labor for these projects at no cost to the county. The County does cover the cost of materials and \$20,000 support for liability and administrative support for this non-profit. Mustard Seed is also given a \$500 limit to use at their discretion in support of individuals/ families. Should additional funds be needed, County approval is required. In addition, Mustard Seed Mission can also provide

individuals/ families supports such as appliances, beds and assistance with transportation via the RIDE program. Specialized projects requiring professional services, i.e. sewage drain repairs, mold clean-up, etc., and will be bid out through the County competitive bid process to local contractors. This program will serve adults and older adults.

Service Category: Chore - Provides for the performance of unskilled or semi-skilled home maintenance tasks, normally done by family members, and needed to enable a person to remain in his own home, if the person or family member is unable to perform the tasks.

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

Adult Aging CYS SUD MH ID HAP

Program Name: The RIDE Program

Description of Services: The County will continue to fund the RIDE Transportation Program. This program provides transportation to residents served in the Human Service systems by partnering with volunteers, public transportation, and provider agencies. Hand in Hand Christian Counseling is the primary source of transport, with two volunteer organizations Venango Senior Volunteer Program and Mustard Seed Mission assisting with out of county trips. Transportation includes after hours employment transportation, medical appointments, when no other third party reimbursement are available, and activities funded by the County such as D&A prevention activities, Fatherhood Initiative activities, and family support groups such as Effective Safe Parenting and Early Head Start Socialization activities. The RIDE program also assists with transport for children in need of essential dental services not available in county. The vast majority of the transportation provided by the RIDE Program via Hand & Hand Christian Counseling is for employment. Riders are provided with 60 days of cost-free transport to/ from work with the objective of building natural supports for transportation during that time. After the 60 days, riders may continue with the program by purchasing the service directly from the provider at the per mile rate. The program is projected to serve approximately 75 individuals during the 2018-19 year.

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.

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

Adult Aging CYS SUD MH ID HAP

Program Name: Housing Case Management

Description of Services: The Housing Unit staffs two case managers. The case workers perform the intake process and assess the client's available resources and supports and what services the client needs. Following assessment, the case manager will determine if the client is eligible for any program funding or if homeless, need to be entered into the Coordinated Entry System. Also the case manager will work in conjunction with the client's HS supports coordinator (as applicable), and the client to develop a service plan that includes setting goals in the areas of basic life skills, health needs, financial management, parenting skills, home maintenance, job preparation skills, and/or employment skills. The service plan helps clients access the agencies and programs that can help them achieve their goals. The case managers work to link the family or individuals to ongoing supports, if needed, to help them maintain long-term stability and monitor their progress to ensure the client has access to needed and desired services. Because the housing case manager is part of the larger human services system in Venango County, developing plans through an integrated system better addresses the overall needs of the individual or family. 65% of 1 Housing Case Manager will be supported by the HSDF funding in the 2018-19 year.

Service Category: Service Planning/Case Management - a series of coordinative staff activities to determine with the client what services are needed and to coordinate their timely provision by the provider and other resources in the community.

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

Adult Aging CYS SUD MH ID HAP

Program Name: “Crossroads” – Cognitive Behavior Change Training

Description of Services: Venango County Human Services and County Criminal Justice Advisory Board’s Re-Entry subcommittee has recognized the need for increased Cognitive Behavior Change training for inmates at the Venango County Jail. Statistics indicate that 41% of those incarcerated at the Venango County Jail in 2015 were known to the Mental Health system with 30% of those inmates having a serious mental illness. 84% of Substance Abuse Program referrals came from the Criminal Justice System with 21% of SAP assessments being completed for the inmate population. The Re-Entry Committee of CJAB has identified an evidence-based cognitive behavior training curricula, “Crossroads” as the preferred model for Venango County. The curriculum is led by co-facilitators who are certified by the National Curriculum and Training Institute in partnership with the American Probation and Parole Association. HSDf funds will be used to support an additional six 10-week sessions including the books and supplies necessary for the groups.

Service Category: Counseling - Nonmedical, supportive or therapeutic activities, based upon a service plan developed to assist in problem solving and coping skills, intra- or inter-personal relationships, development and functioning.

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 1 paragraph per service description)

Program Name: Driver’s Training & Licensing Class

Description of Services: Transportation continues to be a major need in Venango County. In the 2018-19 needs assessment, emerging adults identified the need for supports in obtaining their PA Driver’s License. Several individuals have obtained their permits, but have difficulty passing the test at the DMV due to the anxiety associated with the process. Many Emerging Adults report having vehicles available to them through family members or methods to obtain their own vehicle. Venango County plans to contract with Transportation Solutions to provide 6 sessions of behind the wheel training and administration of the PA Drivers test to a maximum of 10 Emerging Adults in the 2018-19 FY. The instructor who provides the lessons will also conduct the testing, making the process much less intimidating for the student driver. Referrals will be made by area providers and Service Coordinators and will target the Emerging Adult population ages 18 – 25.

Program Name: Specialized Supports for Disabled Adults

Description of Services: It has been determined that many disabled adults in the County are in need of assistance while attending medical appointments and community activities that enable them to live in the community as independently as possible. A program was developed to assist these individuals in meeting their health and safety needs delivered via one to one support by provider staff. It is estimated that 20 individuals will be assisted by this program. Individual referrals to this specialized service are reviewed on a case by case basis to determine if the individual is HSDf eligible and if other available and adequate resources and were considered first. For individuals with an ID

diagnosis the program is accessed on a case by case basis via recommendation from the individual's team. Need for the service is documented in the Individual Support Plan (ISP) inclusive of service frequency and duration. The Provider submits monthly progress reports per individual and team's meet quarterly to review continued need and/or develop a fade plan when applicable. Funding for this service, with its enhanced level supports, rapid implementation and varied level of service need, is not available within other categorical funding.

Program Name: Enhanced Personal Care

Description of Services: Individuals with Intellectual Disabilities are often unable to live independently but do not require group home level of care. These individuals are left without the needed supports necessary to live everyday lives. These individuals are in Personal Care homes and are in need of enhanced personal care to live successfully. ID funding will not cover this "middle road" level of care. Venango County will utilize funding to support the enhancement of positions in the local Personal Care home where a majority of the individuals reside. Services are provided by employees of the PHC who are added to the staffing pattern in support of the program. This includes additional nursing staff, an activities coordinator and a floater aide. This staffing compliment exceeds the required ratio and provides the extra supports needed by the population identified. As the PHC cannot receive payment for more than the per-diem rate, Block grant funds support the enhancements with approximately 10 individuals benefitting from this enhanced level of care.

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.

Venango County Human Services (VCHS) has a number of positions that are funded by the block grant through the HSDf budget. These positions support cross collaboration between categoricals in the areas of quality, compliance and individual/ family access to service and supports. Administratively, the Quality Management/ Compliance Officer position works across multiple categoricals and departments with responsibilities for HIPAA and Fraud, Waste and Abuse training and compliance. In addition, this position is also the chief quality officer for VCHS with responsibility for the annual need assessment, and quality management activities including the integrated quality management plan which focuses on system based and life stage performance outcomes. Additional positions include 10% of the VCHS Clinical Manager position, and 50% of the Resource Communications Officer is covered with these funds. The Clinical Manager works with children and families who are involved with any of our categorical funding streams and coordinates cross system collaboration meetings to ensure all needed services are in place and that service providers are working with each other to benefit the family. The Resource Communications Coordinator ensures that the VCHS' website, Facebook page, and mobile application have current information. These three social media sites serve all categorical programs under the VCHS umbrella. Needs assessment data indicates that individuals and families are learning about event and services via these applications.

VCHS continues to work to implement integrated case management teams with 7 families currently receiving services from teams of mental health or intellectual disability service coordinators paired

with child welfare case managers. This effort is being implemented by our deputy administrator of services. She also functions in the cross system role of managing our Protective, Intake, and Crisis Unit, the single unit responsible for intake functions for Aging, Child Welfare, Mental Health and Substance Abuse, Aging and Child Welfare Protective Service functions, and Mental Health crisis and delegate. In fact, most of the administrative staff have multiple roles, serving both as categorical program administrators and leaders for life stages under our system of care model.

VCCHS continues to move towards the life stage versus disability based human service system model. The senior management team meets monthly with a focus on overcoming funding and other regulatory barriers to our approach. We have a system of care Advisory Committee that meets bi-monthly. The committee is comprised of 1 traditional service provider, 1 community service provider, and 1 individual/family member representing each life stage. The purpose of the committee is to provide community input into the identification of needs and the provision or development of services from a life stage perspective.

Venango County Administrative Entity 24 Hour Emergency Response Policy and Procedure

POLICY:

The Venango County Administrative Entity is available 24 hours/day 7 days/week. This will be accomplished via the use of the Venango County Human Services Protective Intake and Crisis (PIC) Unit during non-business hours and collaboration with the Supports Coordination Organization.

PROCEDURES:

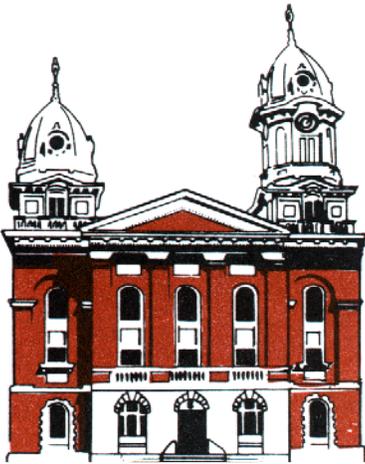
Business Hours:

- Venango County Human Services hours of operation are 8:00 am to 4:30 pm. Monday – Friday excluding County Observed Holidays. During this time, individuals and families may contact the Supports Coordination Organization or Administrative Entity to gain assistance in emergency and/or crisis situations.
- If the individual is currently enrolled in SC services, their assigned Supports Coordinator will assess the situation and take appropriate action. Should the individual's assigned Supports Coordinator be unavailable, the Supports Coordination Supervisor will attend to the individual. Should the individual either not be linked with SCO services or the person is unknown to the County system, the ID Systems Manager will attend to the individual.

Non-Business Hours:

- The Venango County administration (AE) after-hours phone message specifies the number for the PIC Unit to be used in cases of emergency or crisis.
- Venango County PIC Unit will provide initial intervention in all situations that require direct assistance from the Mental Health / Developmental Services Departments. Initial crisis calls are accepted from the community and routed from the Venango County 911 Call Center to the PIC Unit during non-business hours and on all holidays and weekends.
- In the event that the PIC Unit receives an emergency / crisis call from a current or potential consumer with an Intellectually Disability that does not involve a routine mental health intervention, the staff will notify a Supports Coordination Supervisor and/or the SCO Director and/or the MHDS AE representative and/or Administrator.
- The Supports Coordination Supervisor or SCO Director will determine if the PIC Unit staff can proceed with intervention or more specific interventions related to the individual's intellectual disability diagnosis are required. If the individual is not open with the SCO the case will be referred to the Administrative Entity for follow up.
- The Supports Coordination Supervisor and/or SCO Director and/or the MHDS AE representative and/or Administrator will also review the information and determine if a face to face meeting with the consumer is necessary or if phone contact will meet the individual's needs.
- If face to face intervention is required, the Supports Coordination Supervisor and/or SCO Director and/or the MHDS AE representative and/or Administrator meets with the individual/family and takes appropriate action to support.

- If the need cannot be met without the provision of additional services and supports, The AE representative will notify the Block Grant Administrator of the identified need. The submitted information will be reviewed to determine if there are funds available within the Block Grant to meet the identified need. Concurrently the AE will follow the unanticipated emergency procedure should the situation fit, and notifies ODP of the emergency need requesting an increase in waiver capacity.
- In situations an incident report or investigation is required, the procedure identified in the Office of Developmental Program's Incident Management Bulletin will be followed.



Venango County Human Services Block Grant Plan

Fiscal Year 2018-2019



COUNTY PLANNING / NEEDS ASSESSMENT 2018-2019 Block Grant

Venango County Human Services continues to operate under its System of Care model across four life stages (i.e., children and families, emerging adults, adults, and older adults). While the County continues to work within the regulatory parameters of the traditional categorical systems that make up the County Human Services department (i.e., Area Agency on Aging, Children and Youth Services, Mental Health and Developmental Services, the Substance Abuse Program, and a variety of programs collectively managed by the Community Supports Services unit funded through DCED, MATP, HAP, HUD, CSBG), the System of Care Model continues to provide a more life stage specific structure for gathering vital needs assessment information, quality management and outcome data.

Venango County Human Services has involved the following stakeholder groups in the annual needs assessment process supporting the 2018-19 submission:

- Individuals/ families receiving services from all Life Stages/ Categoricals:
 - Children & Families
 - Emerging Adults
 - Adults
 - Older Adults
- Senior Center Participants
- Venango County Human Services - Service Coordination staff
- Community Partners
- Transportation Committee Members
- Providers across categoricals
- County Commissioners
- Human Service Leadership staff and categorical supervisors

Venango County's annual needs assessment efforts for the 2018-19 Block Grant submission consisted of the following activities. (E-mail announcements and flyers informing stakeholders of the surveys and events were distributed.)

- Online Surveys for Venango Human Service Staff – 47 Respondents
- Individual/Family Surveys – 120 Respondents (This is a paper survey was distributed by Service Coordinators/ County HS staff to individuals/ family members receiving services from Venango Human Services across all life stages/ categoricals.)
- 211 data specific to Venango County was also utilized this year. Data related to 211 calls which captured the specific needs of each caller was analyzed from January through December 2017.
- Focus Groups were conducted with the following:
 - Older Adults – held March 23, 2018 at Cranberry Place with 26 participants
 - Emerging Adult – held March 21, 2018 at HS Complex with 13 participants
 - Transportation Stakeholders – held March 26, 2018 at HS Complex with 12 participants.
 - MH Providers – held April 20, 2018 at HS Complex with 5 participants
 - ID Providers – held April 26, 2018 at HS Complex with 12 participants

The table below lists the top 3 areas of need identified from each activity. The common themes among all activities are below. These remain consistent with prior year's assessments.

1. Transportation

2. Housing
3. Utilities / Employment (tied)

Data Source	Top areas of Need
211 Data Calendar Year 2017 (1152 calls)	<ol style="list-style-type: none"> 4. Utilities 5. Housing 6. Food
Individual & Family Surveys	<ol style="list-style-type: none"> 4. Employment/ Job Training 5. Utility Assistance 6. Transportation (med apt/ out of cty/ after hrs)
HS Staff Needs Assessment Survey	<ol style="list-style-type: none"> 4. Transportation (med apt and after hours) 5. Utilities 6. Housing
MH Provider Focus Group	<ol style="list-style-type: none"> 4. Employment 5. Housing 6. Transportation
ID Provider Focus Group	<ol style="list-style-type: none"> 4. Transportation after hours 5. Increased Community Awareness of ID 6. Parenting Classes
Emerging Adults Focus Group	<ol style="list-style-type: none"> 4. Jobs/ Employment Supports 5. Pregnant and/ or parenting programs 6. Housing
Older Adults Focus Group	<ol style="list-style-type: none"> 4. Home Supports 5. Lack of knowledge about services – “we don’t use social media that much”. 6. Information awareness of scams and fraud targeted seniors.
Transportation Committee Focus Group	<ol style="list-style-type: none"> 4. Fix Go Bus Schedule and wait times 5. Need unified intake for transportation services at county level 6. Increase access to RIDE Program

OVERVIEW OF BLOCK GRANT PLAN

Overall the Block Grant Plan that the County will submit for Fiscal Year 2018-2019 provides for continuation of all the services currently supported with funds contained in the Block Grant (BG). Based on the 2018-19 Needs Assessment data and focus areas identified by Advisory Boards and Human Service Leadership the following additional services/ supports will added in the 2018-19 submission.

Children & Families:

- Venango plans to utilize block grant monies to support half of a nurse position for the Effective Safe Parenting program (ESP), which is provided by Family Service and Children’s Aide Society, a local non-profit. It is projected that 10 additional families can be served in the ESP program. This program focuses on children and families affected by substance use disorder and is a team delivered community based intervention. This intervention also will support those parents whose children have been born with Neonatal Abstinence Syndrome.

Emerging Adults:

- Enhancement of the Triple P (Positive Parenting Program) by ½ a staff position. Triple P is an evidence based approach that addresses child behavioral and emotional problems by giving parents proven tools and skills to build stronger families. Triple P is currently available in Venango County but only to families with Children and Youth Service (CYS) involvement. By funding half of a FTE, the program will be made available to families involved with the mental health or intellectual disability system without CYS involvement, and it is hoped that completion of this program will negate the need for CYS involvement. The need for increase parenting classes and supports was clearly identified by the emerging adult population. Four families at a time will be served under this funding with an estimated length of stay of 12 weeks so 16 families should be served in a fiscal year.
- Transportation continues to be a major need in Venango County. Emerging adults identified the need for supports in obtaining their PA Driver's License. Several individuals have obtained their permits, but have difficulty passing the test at the DMV due to the anxiety associated with the process. Venango County plans to contract with Transportation Solutions to provide 6 sessions of behind the wheel training and administration of the PA Drivers test to a maximum of 10 Emerging Adults in the 2018-19 FY at a cost of \$610 per participant.

Adults:

- FY 2018-19 funding will be used to support a community living slot in a home targeted for individuals discharging from Warren State Hospital. This home will be developed in conjunction with Crawford and Mercer Counties, with each participating county funding 1 slot in the 3 person home. Venango County currently has 4 similar slots and the program has proven successful at maintaining individuals with chronic mental illness in the community.
- An additional program to combat recidivism is the implementation of the Adult Crossroad Cognitive Groups in the jail. This evidence based curricula is designed to help offenders modify problematic behaviors. The groups require two trained staff members to facilitate. This year, the block grant was used to fund the week long facilitator training for 3 human service staff members, then to pay the facilitators to offer the groups in the county prison. It is anticipated that at least three ten week sessions of the group will be offered in the coming fiscal year. Costs to provide these sessions will be funded by the block grant.

Older Adults:

- Venango County intends to use block grant monies to provide personal care services to older adults in the county who need assistance with bathing activities. Current funding received by Venango County's Older Adult Services does not support providing this service and individuals are often on a waiting list for extended periods of time. This often results in more restrictive levels of care being needed. This service will be targeted to serve 5 older adults who receive high scores on Aging assessments.

Multi-Life Stage:

- In the 2018-19 FY year, Venango County will launch an Employment Creation Initiative targeting individuals from the ID and MH categoricals. As the county maintains a fleet of approximately 47 vehicles, the plan will be to contract with a provider to operate a detailing service for county cars and possibly open this to the public. This opportunity would also include the Fairweather Lodge Members. The initiative is a further enhancement on the existing collaboration for operation/ staffing of the County Perks Café, which employs 5 individuals at present.
- A Warming Center will be funded in the 2018-19 year. A warming center is a short-term emergency shelter that operates when temperatures or a combination of precipitation, wind chill, wind and temperature become dangerously inclement. County Human Service will partner with The POINTE drop-In Center to provide this support to area homeless. The Warming Center will be open overnight when temperatures are 25° or sustained wind chills are at 20° or below. Individuals and families who are homeless, or otherwise unable to have shelter through the night, can come in from the cold to get warm, have something to eat, talk to someone, watch a movie and above all, be safe.
- Additional funding will be provided to support a collaboration between Sugar Valley Lodge and The POINTE Drop-In Center to transport and engage SVL residents in community events and activities.
- Block Grant funding will also support additional training for Human Service staff. 2 staff will be targeted to obtain trainer certification in Applied Suicide Intervention Skills Training (ASIST). This will enable 2 day workshops to continue to be provided to Human Service and partner staff throughout County. In addition, staff will also be identified to obtain trainer certification in the Child and Adolescent Needs and Strengths (CANS). This assessment tool is now being utilized not only in CYS but also Mental Health with more staff requiring the training.

Categorical:	2017-2018 Amount	2018-2019 Amount
Housing Assistance Program	\$ 45,179.00	\$ 45,179.00
Human Service Development Fund	\$ 68,900.00	\$ 68,900.00
Intellectual Disabilities	\$ 1,560,054.00	\$ 1,575,051.00
Mental Health	\$ 2,079,572.00	\$ 2,079,320.00
Substance Abuse	\$ 288,316.00	\$ 288,316.00
Required County Match	\$ 217,674.00	\$ 217,651.00
Additional County Match	\$ 200,000.00	\$ 200,000.00
Estimated total allocation:	\$ 4,459,695.00	\$ 4,474,417.00

**APPENDIX C-1 : BLOCK GRANT COUNTIES
HUMAN SERVICES PROPOSED BUDGET AND INDIVIDUALS TO BE SERVED**

County:	1.	2.	3.	4.	5.	6.
Venango	ESTIMATED INDIVIDUALS SERVED	HSBG ALLOCATION (STATE & FEDERAL)	HSBG PLANNED EXPENDITURES (STATE & FEDERAL)	NON-BLOCK GRANT EXPENDITURES	COUNTY MATCH	OTHER PLANNED EXPENDITURES
MENTAL HEALTH SERVICES						
ACT and CTT						
Administrative Management	7		\$ 140,000			
Administrator's Office			\$ 266,189		\$ 53,811	
Adult Developmental Training						
Children's Evidence-Based Practices						
Children's Psychosocial Rehabilitation						
Community Employment	15		\$ 17,625			
Community Residential Services	46		\$ 312,000			
Community Services	411		\$ 160,000			
Consumer-Driven Services	33		\$ 18,500			
Emergency Services	223		\$ 48,000			
Facility Based Vocational Rehabilitation	11		\$ 45,000			
Family Based Mental Health Services	12		\$ 8,000			
Family Support Services	9		\$ 27,000			
Housing Support Services	112		\$ 395,000			
Mental Health Crisis Intervention	182		\$ 12,000			
Other						
Outpatient	2,407		\$ 390,000			
Partial Hospitalization	30		\$ 18,000			
Peer Support Services						
Psychiatric Inpatient Hospitalization						
Psychiatric Rehabilitation						
Social Rehabilitation Services	105		\$ 153,500			
Targeted Case Management	113		\$ 400,450			
Transitional and Community Integration						
TOTAL MENTAL HEALTH SERVICES	3,716	\$ 2,079,320	\$ 2,411,264	\$ -	\$ 53,811	\$ -
INTELLECTUAL DISABILITIES SERVICES						
Administrator's Office			\$ 445,000			
Case Management	175		\$ 71,000			
Community-Based Services	102		\$ 440,000			
Community Residential Services						
Other						
TOTAL INTELLECTUAL DISABILITIES SERVICES	277	\$ 1,575,051	\$ 956,000	\$ -	\$ -	\$ -

**APPENDIX C-1 : BLOCK GRANT COUNTIES
HUMAN SERVICES PROPOSED BUDGET AND INDIVIDUALS TO BE SERVED**

County:	1.	2.	3.	4.	5.	6.
Venango	ESTIMATED INDIVIDUALS SERVED	HSBG ALLOCATION (STATE & FEDERAL)	HSBG PLANNED EXPENDITURES (STATE & FEDERAL)	NON-BLOCK GRANT EXPENDITURES	COUNTY MATCH	OTHER PLANNED EXPENDITURES
HOMELESS ASSISTANCE SERVICES						
Bridge Housing	22		\$ 25,000			
Case Management	320		\$ 23,879		\$ 20,000	
Rental Assistance			\$ -			
Emergency Shelter	8		\$ 3,500			
Other Housing Supports						
Administration			\$ 4,517			
TOTAL HOMELESS ASSISTANCE SERVICES	350	\$ 45,179	\$ 56,896		\$ 20,000	\$ -
SUBSTANCE USE DISORDER SERVICES						
Case/Care Management	1,092		\$ 150,074		\$ 52,884	
Inpatient Hospital	-		\$ -			
Inpatient Non-Hospital	69		\$ 94,927			
Medication Assisted Therapy	-		\$ -			
Other Intervention	30		\$ 9,750			
Outpatient/Intensive Outpatient	227		\$ 13,000			
Partial Hospitalization	1		\$ 500			
Prevention	1,048		\$ 12,782			
Recovery Support Services	5		\$ 7,283			
Administration						
TOTAL SUBSTANCE USE DISORDER SERVICES	2,472	\$ 288,316	\$ 288,316	\$ -	\$ 52,884	\$ -
HUMAN SERVICES DEVELOPMENT FUND						
Adult Services	5		\$ 8,000			
Aging Services	10		\$ 25,400			
Children and Youth Services	26		\$ 52,500			
Generic Services	475		\$ 57,500		\$ 75,000	
Specialized Services	100		\$ 67,000		\$ 50,000	
Interagency Coordination			\$ 127,000		\$ 150,000	
Administration			\$ 6,890		\$ 100,000	
TOTAL HUMAN SERVICES DEVELOPMENT FUND	616	\$ 68,900	\$ 344,290		\$ 375,000	\$ -
GRAND TOTAL	7,431	\$ 4,056,766	\$ 4,056,766	\$ -	\$ 501,695	\$ -