### **OLMSTEAD PLAN IMPLEMENTATION**

Original Submission Date: December 20, 2017

Final Submission Date: May 5, 2017

Westmoreland County is the second largest county in southwestern Pennsylvania. The county encompasses over 1,000 square miles and is home to a growing population of approximately 365,0000 residents. Ranked by population, Westmoreland County is classified as a third class county with 65 municipalities composed of 6 cities, 35 boroughs, 3 first-class townships, 18 second-class townships, and 3 home rule municipalities. The median age of Westmoreland County residents is 43.6 years old with approximately 140,421 residents age 18 or older.

Westmoreland County Behavioral Health and Developmental Services continues to have an ongoing commitment to serve the severe and persistently mentally ill population within Westmoreland County through an array of community based services focusing on recovery principles and utilizing evidenced based practices. Presently, there are over 55,000 Medicaid eligible residents within Westmoreland County.

Westmoreland County BH/DS has continued to embrace the Commonwealth of Pennsylvania's mission towards ending the unnecessary institutionalization of adults with serious and persistent mental illness. Beginning in the 2015/2016 Fiscal Year, Westmoreland County BH/DS began a CHIPP (Community Hospital Integration Project Program) initiative to close 10 of the 65 beds occupied at Torrance State Hospital by Westmoreland County residents. Through this initiative a total of 14 individuals have been discharged and multiple services have been developed or expanded with CHIPP funding to support these individuals as they transition into community settings.

The CHIPP proposal submitted to the *Office of Mental Health and Substance Abuse* included a projected budget of approximately \$1.3 million to fund newly created housing services as well as the expansion of existing services to enhance the Westmoreland County Behavioral Health and Developmental Services service continuum. This initiative began with formulating Requests for Programming (RFPs) for the development of two major housing services: Enhanced Personal Care Home and Enhanced Supportive Housing. The Enhanced Personal Care Home RFP was awarded to Paula Teacher and Associates and the Enhanced Supportive Housing RFP was awarded to Southwest Behavioral Health Services. Expansion of services also was conducted with the development of a Modified Assertive Community Treatment (ACT) team to service 50 individuals, additional representative payee services to serve an additional 25 individuals, expansion of funding to support community psychiatric nursing services and additional funding to expand psychosocial rehabilitative services for those being discharged as well as other individuals already residing within the community.

### I. OLMSTEAD PLANNING PROCESS

Westmoreland County Behavioral Health and Developmental Services is committed to partnering with local stakeholders in efforts to meet the ongoing needs of Westmoreland County residents throughout their lifespan. Partnerships with housing, transportation, aging services, psychiatric service providers, employment specialists and advocacy

agencies have assisted in the development and focus of programming and service provision to meet the ongoing needs of Westmoreland County residents. Stakeholders are engaged in the planning process when assessing needs and their feedback is fully utilized in the planning and implementation process.

- A. Community Support Program (CSP) The Westmoreland County CSP meets monthly to discuss issues and provide feedback to the county office regarding their recommendations and concerns on service provision in Westmoreland County. The local CSP is divided into committees that represent topics such as housing, employment and transportation. The CSP committee has representatives that are actively engaged in different facets of strategic planning, Healthchoices, community outreach and advocacy.
- **B.** Consumer Family Satisfaction Team (CFST) Westmoreland County Behavioral Health and Developmental Services staff review all CFST findings and respond to any concerns noted by consumers as needed. This monitoring process assists in addressing consumer concerns and suggestions including housing and living arrangement concerns as well as feedback regarding housing providers.
- C. Elder Abuse Task Force The Elder Abuse Task Force meets monthly and is composed of multiple disciplines and Westmoreland County Agencies that assist with the elderly population. Westmoreland County Behavioral Health and Developmental Services plays an active role in this task force offering training and feedback as well as consultation for mental health resources. Assisting with issues focusing on appropriate housing and living conditions are at the forefront of this task force's mission providing Westmoreland County Behavioral Health and Developmental Services direct recommendations and concerns from community members regarding housing and the county's aging population.
- D. Criminal Justice Advisory Board (CJAB) Westmoreland County Behavioral Health and Developmental Services is an active participant in the county CJAB meetings. These meetings have provided input on issues related to those in the criminal justice system directly from judges, district attorneys, public defenders, district magistrates and other stakeholders. Smaller committees have formed from the main committee that have led to mental health training for judges and district magistrates as well as a collaborative partnership with this system and Westmoreland County Behavioral Health and Developmental Services. Special recommendations and projects are ongoing regarding housing services and options for those involved in the criminal justice system.
- E. Suicide Prevention Task Force The Ray of Hope Suicide Prevention Task Force is a task force built upon collaboration with the county office, advocacy agencies, and other community providers and stakeholders to address suicide awareness and prevention. Through this collaborative effort, Westmoreland County Behavioral Health and Developmental Services is able to solicit feedback and recommendations from various sources on community concerns including housing, transportation, employment and mental health supports.
- **F. Base Service Unit** Westmoreland County has a free standing, independent base service unit. Our base service unit provides case management services for individuals

with Mental Health (MH) needs, individuals with Intellectual Disabilities (ID) and children in need of Early Intervention (EI.) The base service unit also provides employment programs and other community based services for consumers. Westmoreland County Behavioral Health and Developmental Services partners with the base service unit to enlist feedback and recommendations on the needs of special populations within the mental health system. The base service unit in conjunction with the county office manages the centralized housing referral system and in the process is able to identify needs and concerns within the housing continuum from an administrative perspective and from a consumer perspective based upon consumer feedback.

### II. SERVICES TO BE DEVELOPED

### A. Prevention and early intervention services and supports

Westmoreland County has a well-respected, highly responsive crisis telephone and mobile service. Crisis workers conduct a thorough assessment to insure the most appropriate, least restrictive outcome for the individuals involved. The Crisis Walk-In/Crisis Response Center provides additional opportunities for individuals to develop a plan with crisis staff to address the immediate crisis and ways to prevent further crisis events from occurring. The county office coordinates the Disaster Crisis Outreach Referral Team (DCORT). There are approximately 40 DCORT members who are available to respond to crisis events and provide assistance to anyone affected by a traumatic event. The county office is considering development of child specific crisis services in the future. This could entail specially trained crisis workers available to respond to children's needs in the community or school settings.

# B. Non-institutional housing options, with a focus on independent and shared living arrangements. Identify existing "Housing First" approaches and discuss plans to develop future approaches.

Westmoreland County Behavioral Health and Developmental Services supports the "Housing First" approach when assisting consumer and families with housing needs. Currently the county BH/DS office is pursuing approval from the state in a joint county housing reinvestment plan that will offer additional housing options to consumers.

The Westmoreland County Behavioral Health and Developmental Services Housing Continuum offers community based housing options that offer consumers the ability to be active participants within their community to the level they desire. Housing includes such option as: independent homes of their choice with housing supports coming to their location, master leasing options, full care CRR's, Fair-weather Lodge model and shared housing within a community setting. Individuals are free to access community resources of their choice and design their own daily schedules with activities of that are fulfilling to their recovery goals. Individuals are given the opportunity to access resources outside of the behavioral health supports that they choose to receive and community integration is encouraged and supported.

There are many options within the housing continuum that provide accessible, barrier free access to those with disabilities and ADA compliance is supported by the county office.

HOUSING Services/Support Most Supportive to Least Supportive	Number Served	Service Available	Funding Sources
New Enhanced Supportive Housing Program (CHIPP) Opened August 2016 Provider: Southwestern PA Human Services (SPHS) 3 males/3 females – age 18 or older Located in a residential setting in Belle Vernon, PA – remodeled duplex	6 bed capacity 3 males 2 females 1 opening	Yes	CHIPP
New Enhanced Supportive Housing Program Opened July 2016 Provider: Paula Teacher & Associates- age 18 or older Located in a residential setting in Lower Burrell, PA – town house	Currently 3 bed capacity 3 males with possible expansion of 3 more beds	Yes	Initial start-up with Block Grant Currently County Program funded
Community Residential Rehabilitation Services (CRR) 2 Providers Threshold Inc. & Southwestern PA Human Services (SPHS) Total beds 22 – age 18 or older	In past year served Threshold: 66 SPHS: 18	Yes	County Program funded
Community Residential Rehabilitation Partial (CRR) Provider Threshold, Inc. – age 18 or older	Total capacity:22 Scattered sites of townhouses and houses Served 32 in past year	Yes	County Program funded
Shared Housing Provider: Westmoreland Community Action (WCA) 2 sites with 3 beds each – age 18 or older	Total served in past year: 4 males Currently served: 4 males	Yes	County Program funded
Safe Harbor (Haven) Program Provider: Connect, Inc. – age 18 or older	(Must meet Housing and Urban Development- HUD criteria for chronic	Yes	HUD

HOUSING Services/Support Most Supportive to Least Supportive	Number Served	Service Available	Funding Sources
	homelessness)Capacity of 16		
Fair-weather Lodge (FWL) Provider: Family Services of Western PA (FSWP) – age 18 or older	Capacity of 4 Currently serving 4	Yes	Initial start- up with Health Choices Reinvestment funding Currently consumer funded with County funded Housing Supports
Permanent Supportive Housing (PSH) Provider: Union Mission – age 18 or older	(Must meet HUD criteria for chronic homelessness) Capacity of 6 Apartments Currently serving 6	Yes	HUD Other donations & contributions
Permanent Supportive Housing (PSH) Program Provider: Westmoreland Community Action (WCA) – age 18 or older	(Must meet HUD criteria for chronic homelessness) The PSH apartment building is located in Greensburg and has nine furnished apartments able to accommodate 10 individuals. Currently serving 8	Yes	HUD
PSH –Transitional Age (TA) 18-28 yrs of age Provider: Westmoreland Community Action (WCA) Recently HUD approved an addendum to include all ages over 18 with prioritization to TA	(Must meet HUD criteria for chronic homelessness) The PSH-TA apartments are double occupancy and are scattered sites. Capacity of 6 Currently serving 4	Yes	HUD

HOUSING Services/Support Most Supportive to Least Supportive	Number Served	Service Available	Funding Sources
WCA PSH Pittsburgh Street House – age 18 or older WCA PSH Pittsburgh Street House is designed to assist chronically homeless, individuals with a focus on	(Must meet HUD criteria for chronic homelessness) This program can accommodate 8	Yes	HUD
veterans. This program is accepting referrals from any community entity including those individuals who are not veterans.	individuals in a shared living space arrangement.  Currently serving 8		

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# C. Non-residential treatment services and community supports including mobile treatment options.

Westmoreland County Behavioral Health and Developmental Services works diligently to keep children and adults within the least restrictive setting while providing support to assist with mental illness. The county has approximately 30-35 children per month receiving services within a Residential Treatment Facility Setting. While at times this level of care is necessary, the county office works diligently with case management to provide alternatives such as Family Based Services, Partial Hospitalization, Targeted Case management, MST, parent mentor programs and advocacy.

In keeping with the same philosophy, adults being considered for admission to Torrance State Hospital are given multiple options within the community to assist with recovery. A STAR (Service Team for Adults in Recovery) meeting is held with the consumer, providers, county office representative, advocacy representative and supports the consumer wishes to invite to assist in providing diversion options to support recovery within a community setting. These services can range from housing support programs to mobile or site based supports. The consumer is an active participant in choosing services and drives the process. Presently, Westmoreland County has 55 individuals receiving care at Torrance State Hospital. Our bed cap was recently reduced to 55 after the successful discharge of 14 individuals through our CHIPP project which expanded community services and closed 10 beds at Torrance State Hospital.

Westmoreland County has worked diligently to develop and maintain treatment services and community supports in order to have a wide variety of services for individuals to choose from as shown in the chart below. In order to provide support for individuals being discharged from Torrance State Hospital and those being diverted from state hospital admission, several of the existing services were expanded. An additional Assertive Community Treatment (ACT) team, with the ability to serve 50 individuals was developed as the original full team was nearing capacity. Mobile Psychiatric Rehabilitation services were expanded with a focus on the 18-24-year-old population. The Community Psychiatric Nursing Program (Medication, Monitoring and

Education Program – MME) was expanded to provide additional service provision to individuals residing within a variety of community settings to include: independent living, CRR, Supported Housing Programs, Shared Housing Programs, family settings and homeless shelters.

The Community Psychiatric Nursing Program - Medication Monitoring & Education has served over 222 consumers in past year. MME was expanded with FY 2014-2015 Block Grant and CHIPP funding to accommodate the current implementation of the CHIPP Project with discharges from Torrance State Hospital (TSH) The program's primary focus is:

- To assist the consumer in obtaining a medication regime that is both effective and acceptable to them
- To increase consumer skills in recognition and management of symptoms of mental illness
- To facilitate the identification and treatment of physical health issues
- To improve consumer skills related to collaboration with care providers and community resources

The ACE Program; Social Rehabilitation Service: Achieving through Community Experience (A.C.E) program initially began as a CHIPP project in FY 96-97. It originally was named Personal Care Boarding Home Support Program.

Currently, the A.C.E. program is serving approximately 73 individuals. The program was recently expanded through CHIPP funding offering an additional staff person to assist with serving the 14/15 CHIPP discharges and other identified individuals within the community. The program provides mobile psychosocial supports to the individuals within the community and in residential settings.

Service/Support	Number Served FY 2015/2016	Service Available	Funding Sources
Crisis Services- Telephone; Mobile; Crisis Walk- In/Crisis Response Center – Serves adults and children	3,195 Crisis Calls 1,133 Information & Referral calls; 917 Ongoing Support Calls; 718 Mobiles; 816 individuals	Yes	HealthChoices/ County Funded
Disaster Crisis Outreach Referral Team (DCORT) – serves adults and children  Average 12 Deployments per year, serving numerous individuals		Yes	N/A
Assertive Community Treatment (ACT) – age 18 or older	95 individuals- Team 1-Full Team 22 individuals	Yes-Team 1 ACT Team 2 (Partial Team) began	HealthChoices/County Funded

Service/Support	Number Served FY 2015/2016	Service Available	Funding Sources
	Team 2-Partial Team	providing service July 1, 2016	
Outpatient Psychiatric Services - Serves Adults and children	8,308 Adults 1,925 Children	Yes-7 Providers	HealthChoices Commercial insurance Adult Basic County Funded Self-Pay
Partial Hospitalization – serves adults and children	248 Adults- Children/Youth	Yes	HealthChoices County Funded
Case Management  – Serves adults and children	1507 Adults 477Children/Youth	Yes	HealthChoices County Funded
Psychiatric Rehabilitation- Mobile, Site-Based & Clubhouse – age 18 or older	153 individuals	Yes-3 providers	HealthChoices County Funded
Medication, Monitoring & Education – Community Psychiatric Nursing Program –age 18 or older	222 individuals served in past year Pending list: 36	Yes	HealthChoices County Funded CHIPP
Achieving Through Community Experience (ACES) – age 18 or older	101 individuals served in past year 53 on pending list	Yes	Block Grant County Funded CHIPP
Housing Supports  – age 18 or older	Threshold: 145 individuals FSWP: 103 SPHS: 24 Total: 272	Yes-3 providers	County Funded
Representative Payee – age 18 or older	MHA: 137 individuals 4 pending list ARC: 91 individuals 21 on pending list	Yes-2 providers	County Funded

Service/Support	Number Served FY 2015/2016	Service Available	Funding Sources
Dual Diagnosis Treatment Team – age 18 or older	20 individuals	Yes	HealthChoices
Mobile Activities Program – age 18 or older	18 individuals	Yes	County Funded
Employment Programs-Facility Based and Community Employment Programs- age 18 or older	63 individuals	Yes	County Funded Work Investment Board Grant
Multi-Systemic Therapy (MST)	10 individuals	Yes	

# WESTMORELAND COUNTY CHILDREN'S BEHAVIORAL HEALTH - CONTINUUM OF CARE

Advocacy/ Community	Parenting Education	Crisis	School Based	Outpatient Clinics	BHRS Exception	BHRS	Family Based Mental Health	Partial Hospitalization	Community Rehab Residential
Parent Advocate (Mental Health America)	ParentWISE (Family Services of Western PA	Diversion & Stabilization Unit Mars Home for Youth)	Student Assistance Program (St. Vincent College Prevention Projects)	Chestnut Ridge Counseling	Site Based Social Skill Groups (Pressley Ridge, Wesley Spectrum and NHS)	Family Behavioral Resources	Pressley Ridge	Adelphoi Village	Pressley Ridge
Parent Mentor (Adelphoi Village)		Family Support Services (FSS)/ Children's Respite	School Based Outpatient (**see outpatient providers**)	Community Psychiatric Centers	Summer Therapeutic Activity Program (FBR, PRS)	Kid Net (CPC)	Family Services of Western Pa.	Centerville Clinics	Northwestern Human Services
Ombudsman (Mental Health America)		Westmoreland Crisis/mobile crisis	Enhanced Student Assistance Program services- Westmoreland Case Management & Supports, Inc.	Excela Health- Latrobe **	Multi- Systemic Therapy (Adelphoi Village)	Northwestern Human Services	Unity Family Services	Pace School (Allegheny County)	Wesley Spectrum
CASSP (community team meetings and advisory meetings)				Family Behavioral Resources ** (offers PCIT)		Community Alternatives	Wesley Spectrum Services	Family Services of Western Pa (Highlands- Allegheny County)	
Consumer /Family Satisfaction Team Mental Health America (MHA)				Family Services of Western Pa.		Children's Behavioral Health			
Consumer /Family Satisfaction Team Mental Health America (MHA)				Family Services of Western Pa.		Children's Behavioral Health		•	
Child Death Review Team Meetings				SPHS** (offers PCIT)		Nisar Health & Human Services			
Multi- Disciplinary Team Meetings				Ligonier Valley Learning Center (offers PCIT)					
Ray of Hope Suicide Prevention /Youth Suicide Prevention									

### A. Peer Support

Westmoreland County is dedicated to continue to grow peer support and peer-run services. Approximately 3-4 individuals participate in the twice per year certified peer specialist training sponsored by the Southwest Behavioral Health Management Corporation. A new initiative being developed to provide psycho-educational groups in the county prison will include a certified forensic peer specialist. The chart below shows current peer support and peer-run programs.

Service/Support	Number served FY 2015/2016	Service Available	Funding Sources
Certified Peer Specialist – age 18 or older	197- individuals, in addition to the individuals served by the peer specialist in the 2 ACT programs	Yes-3 providers and 2 ACT teams	HealthChoices County Funded
Drop-In Centers- age 18 or older	446 individuals	Yes- 5 Drop-In Centers	County Funded
Community Support Program – age 18 or older	Average 80 individuals attend monthly meetings	Yes	County Funded
Support Groups- National Alliance on Mental Illness (NAMI) Groups; Depression and Bi- Polar Support Group; Loved Ones Stolen By Suicide (LOSS); REACH Family Support Group – age 18 or older	These are participation/ support groups. Numbers vary	Yes	Various
Parent Mentor – age 18 or older	individuals	Yes	County Funded
Consumer/Family Satisfaction Team – age 18 or older	Team conducts varying numbers of surveys each quarter	Yes	HealthChoices County Funded

### B. Supported Employment Services – Age 18 or older

Westmoreland Casemanagement & Supports, Inc. through a grant with the Westmoreland/ Fayette Workforce Investment Board operates CareerSTEPs, an employment program for out of school young adults ages 16-24. Individuals receive

an individualized plan to meet their needs to enable them to enter the workforce. This could include getting their GED, skills training, resume writing and interview practice. The ultimate goal is competitive employment with supports as needed. This program has served 54 individuals. Westmoreland County plans to expand this program in the future to be inclusive of other age groups and meet the Evidence Based Practices of Supported Employment. Westmoreland County BH/DS is in the process of formulating an Request for Programming for Supported Employment Services to build and enhance our service continuum in this area.

#### III. HOUSING IN INTEGRATED SETTINGS

- A. Housing Inventory Please see above tables for the Housing Continuum.
- B. Integration of Housing Services Local Housing Options Team (LHOT) meetings are currently held quarterly. Members at the table include housing, Housing Authority aging, Department of Human Services (DHS), county prison, adult probation, case management, Catholic Charities, homeless shelters, crisis programs, mental health and drug and alcohol providers, advocates, criminal justice liaisons, and transit authority. Since 1994, Westmoreland County has had in existence a Westmoreland Coalition on Housing (WCOH). A Local Housing Options Team was developed with a "kick-off" meeting on June 12, 2007. The LHOT was having monthly meetings until November 2007 when a core group from the LHOT membership agreed to participate on a MH Housing Plan Team. Then the MH Housing Plan Team met monthly until March 2008. Now the LHOT meets quarterly to continue its diligent work in identifying gaps and needs, problem solve and share information and resources.

The LHOT has recently evolved into a stakeholder sharing of information and bringing together those entities to partner on projects.

Westmoreland County BH/DS has a strong collaborative working relationship with the Westmoreland County Housing Authority (WCHA). WCHA provides local preferences for Section 8 HUD Vouchers. The local preferences include coming from transitional housing including mental health residential facilities, and shelters. The WCHA staff are always prompt to respond to needs of our population with Homeless Assistance funds (HAP), Emergency Solution Grant (ESG) funds and other case management assistance and funding. WCHA offers other programs that have been beneficial to needs of behavioral health individuals and families to include but not limited to: Family Self-Sufficiency (FSS) program, Hope In Life at the public housing options, and recently a partnership with Senior Life for wellness planning at 5 sites.

Westmoreland Community Action (WCA) has agreed to be the Local Lead Agency (LLA) for Westmoreland County. They are in the infancy stages of developing a Stakeholders Memorandum of Understanding Supportive Housing Initiative. WCA along with the Westmoreland Coalition on Housing and LHOT sub-committee is looking at retaining a facilitator for the development of a new WCOH planning process. The Group called Dering Consulting is working with the Western PA (COC) Continuum of Care. The Regional Homeless Advisory Board (RHAB) and the COC recently

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conducted their Annual Board retreat to work on our 5-year plan. The plan takes into account the Western Region LHOTS and Coalitions. It appears that the COC will be seeking more interaction with the Coalitions. The same consulting firm that is working with the COC could be helping the WCOH with future planning. It is the hope that during this process the LLA role will be clarified and defined to meet the needs of the systems homeless individuals come in contact with.

Westmoreland County BH/DS staff are actively involved in the Personal Care Home Risk Management Team which consists of partners such as aging, case management, intellectual and developmental disabilities, Mental Health America (MHA), Disability Rights Network, and Adult Residential Licensing. This team assists in diverting individuals into more independent settings and also assists with concerns from consumers and family members.

Westmoreland County BH/DS staff are actively involved in the Torrance Service Area Planning Meetings which bring together individuals receiving services, Torrance Service Area county administrative office staff, peers, and an array of service providers.

Westmoreland County offers two additional housing services within its continuum. An enhance personal care home created and designed to provide support for individuals with complex physical health and behavioral health needs that was created in 2016 Our continuum also supports a long term residential facility that offers diversion option for those referred to the state hospital level of care.

Housing Services	Number Served	Service Available	Funding Sources
New Enhanced Personal Care Home (EPCH) (CHIPP) Opened: August 2016 Provider: Paula Teacher & Associates – age 18 or older	10 bed capacity for Torrance State Hospital discharges	Yes	CHIPP
Long Term Structured Residence (LTSR) Provider: Passavant Memorial Homes Opened in 2000 14 bed capacity – age 18 or older	28 served in past year	Yes	Initial start-up some CHIPP Funding Currently County Program funded

B. Describe the plan for Community Residential Rehabilitation (CRR) conversion—Westmoreland County BH/DS supports two Community Residential Rehabilitation—Programs located in the central and southern ends of Westmoreland County. At this

time neither program has been designated for conversion as both specific supports to our consumers.

### IV. SPECIAL POPULATIONS

#### A. Dual Diagnosis-Mental Health/Intellectual Disability- Age 18 or older

1) Westmoreland County BH/DS is pleased to provide Behavioral Health services specifically tailored to meet the needs of individuals presenting with both a serious and persistent mental illness combined with an intellectual disability through the Dual Diagnosis Treatment Team (DDTT). DDTT is a community-based team approach that provides recovery oriented support through treatment and clinical interventions provided in both community and home settings. This service is provided in Westmoreland County through Northwestern Human Services (NHS).

DDTT is not a crisis-based treatment option; it is designed to provide comprehensive behavioral health treatment over a period of time to increase an individual's level of independence and satisfaction within their home and community. At this time, DDTT is currently at capacity for residents of Westmoreland County residents and is serving twenty individuals residing in Westmoreland County.

2) The Westmoreland County Risk Management process is used to develop practices that will inform of potential risk to individuals receiving Intellectual Disability/Developmental Services (IDD) and to implement support processes to prevent adverse events and/or minimize risk. The goal of the process is to identify individuals at risk that may need additional supports and then to implement strategies/services that will enhance individual health and well-being and improve a person's quality of life. This of

The Risk Management (RM) process covers many areas but one of the main components of RM is the review of all reportable Behavioral Health incidents for dually diagnosed individuals who have four or more reportable incidents within the prior six months. The incidents reviewed include psychiatric hospitalizations, both voluntary and involuntary, and Emergency Room visits for both psychiatric and behavioral reasons. The team reviews any known factors that led to the incident, there is discussion and development of strategies to assist providers in minimizing risks and recommendations to enhance services and/or supports are explored.

The Risk Management team meets on a monthly basis and is truly a collaborative effort. The team consists of professionals in the Development Services and Behavioral Health fields, including the Developmental Services Incident Management Coordinator and Dual Diagnosis Point Person; Behavioral Health Dual Diagnosis Point Person; HCQU Representative; Support Coordination Organization Incident Management Point Person and Dual Diagnosis Person; and BSU Behavioral Health Point Person.

# B. Individuals with Co-Occurring disorders (mental health/substance use disorders)- age 18 or older

Westmoreland County BH/DS works collaboratively with the entities and systems serving persons with substance use disorders who also may have mental health issues. This support can be indirectly or directly provided. The entities and systems include but not limited to the Drug Overdose Task Force (DOTF), Westmoreland Drug & Alcohol Commission (WEDAC), Southwestern PA Human Services (SPHS), Gateway, Excela Health, and the Criminal Justice System along with its newly formed Drug Court.

In 2010 the Day Reporting Center (DRC) was a joint effort between the Westmoreland Drug & Alcohol Commission (WeDAC), the Westmoreland County Adult Probation/Parole Office, Behavioral Health/Developmental Services of Westmoreland County, and SPHS Behavioral Health. Health Choices Reinvestment dollars, Mental Health and Drug/Alcohol Fee for service along with a PCCD Grant assisted with the implementation of the DRC. There are currently as of November 2016, 67 individuals attending the DRC with 16 pending referrals.

Westmoreland County BH/DS has an on-going relationship with WeDAC. Behavioral Health individuals have benefited from the following WeDAC collaborations and initiatives: Oxford Houses- one still in existence; Drug & Alcohol Mobile Case Manager at Excela Hospital; Peer- Guided Certified Recovery Specialist (CRS) Services, case management along with other D/A services such as Outpatient (OPT), Intensive Outpatient (IOP) and Partial (PHP) provided through Gateway Rehab of Greensburg.

Westmoreland County BH/DS has built a collaboration with Gateway since the October 2016 opening of its new D/A facility. The new drug and alcohol treatment facility, a separate operation from that of Excela Health and Frick Hospital, will have beds for 16 patients in a combination of detox and rehab. Additionally, the agreement with Excela Health permits the opportunity for 16 additional beds for a total of 32.

# C. Individuals with both behavioral health and physical needs – Adults and Children

Through funding received from the Health Resource Services Administration (HRSA), Family Services was able to partner with Community Health Clinic, a Federally Qualified Health Center (FQHC) in New Kensington, PA, to provide behavioral health services at the FQHC. Of 1,000 FQHC's that applied for the funding, 200 health centers were awarded and Family Services was one of only two in Western Pennsylvania. The agency has provided a Licensed Clinical Social Worker, Case Manager and a Peer Specialist to integrate behavioral health with the medical care offered at the FQHC.

Case Managers at Westmoreland Casemanagement & Supports, Inc. make it a priority to include physical health needs in their service planning, such as assisting individuals to attend regular doctor, dentist and any necessary specialist appointments.

Children and adults are provided behavioral health supports and assistance with physical health concerns within all levels of care.

### D. Traumatic Brain Injury - age 18 or older

Westmoreland County BH/DS partners with several local Traumatic Brain Injury (TBI) providers to offer support and guidance as necessary to service the unique needs of the TBI population. Westmoreland County BH/DS has provided training and crisis intervention support to these providers as well as correlating service provision through our base service unit to meet the needs of individuals living in community settings. The county office also works with behavioral health providers within the Westmoreland County Behavioral Health continuum to offer guidance and support regarding these individuals to ensure that their needs are met to the highest level possible. The county office has partnered with Keystone Neuro-rehabilitation Center to assist with service provision and the county office has offered training to the Keystone staff as well.

# E. Individuals with Criminal Justice/Juvenile Justice History – Adults and Children

Staff from Westmoreland County BH/DS are actively involved with the Criminal Justice Advisory Board (CJAB) and its Mental Health, Day Reporting Center, Re-entry Sub-Committees. Partners of the CJAB include but not limited to: judges, court administrator, drug and alcohol commission, adult and juvenile probation, veteran's affairs, district attorney, county commissioners, sheriff, aging, public defender, state and county corrections, district justices, police, advocates, drug and alcohol and mental health providers, community action provider, housing, and case management.

The Westmoreland Casemanagement & Supports, Inc. (WCSI) Criminal Justice Liaison Program was developed to help prevent individuals with behavioral health needs from entering or moving further into the criminal justice system. This can be accomplished by intercepting these individuals at the law enforcement and/or magisterial levels.

The Criminal Justice Liaisons provide support and assistance to "intercept" persons with mental illness and co-occurring disorders to ensure: opportunities for diversion, appropriate re-entry to their community, timely movement through the criminal justice system, prompt access to treatment and support services and linkage to community resources. One of the key goals of the Criminal Justice Liaison is to develop strategies for resolving issues of persons with mental illness and co-occurring disorders entering or moving through the criminal justice system at any level of involvement using the concepts of the "Sequential Intercept Model". The Criminal Justice Liaisons work collaboratively with representatives from various entities in the county including local district justices, courts, crisis services, police, adult probation office, public defenders, district attorneys, county jail, local prison and behavioral health providers. The three CJL's have strengthened their relationships with their assigned District Justice's as well as Adult Probation, the District Attorney's office and the Public Defenders.

The three (3) CJLs are assigned to the 17 magisterial districts as well as the 41 police jurisdictions and 4 state police departments. Through the development of these partnerships, CJLs have provided outreach, education and more appropriate

utilization and access to resources. The 3 CJLs have an average caseload of 100-120 per Administrative Case manager.

In addition; Westmoreland Casemanagement & Supports, Inc. (WCSI) offers a Jail Liaison who has a caseload average of 150 and 5 Targeted Case managers (TCM) with an average caseload of 25-30 each.

The Forensic population and those individuals re-entering the community is always a challenge. Westmoreland County is at the level of information sharing and communication. The priorities developed during the 2010 Cross-Systems Mapping workshop provided a strong framework to improve services for persons with mental illness and co-occurring substance use disorders involved in the criminal justice system in Westmoreland County. Regular meetings should be held by this larger group to facilitate information sharing, planning, networking, development and coordination of resources, and problem solving. These recommended meetings did not occur on a consistent basis. Then in 2014 a University of Pittsburgh at Greensburg Center for Applied Research (CFAR) grant was initiated that produced an adult offender Re-entry Plan (Westmoreland County Three Year Offender Re-entry Plan, April 2014). Since these efforts; Criminal Justice Advisory Board (CJAB), Drug Overdose Task Force (DOTF), Behavioral Health agencies and multiple other community entities have been focusing on issues such as decreasing drug overdoses, outreach, education and intervention for providers and their clients who are involved with multiple systems including mental health and drug and alcohol. The integration continuum of collaborations includes but is not limited to: Drug Court, Criminal Justice Liaison implementation, CIT training, Mental Health First Aid training (MHFA), and Disaster Crisis Outreach Response Team (DCORT) partnership with Emergency Management & Public Safety. The Cross Systems Mapping and CFAR reports also identified Housing as a top priority to enhance, improve, and expand. Since 2010, housing has become even more of a challenge and serious issue to address as the demand for safe affordable housing has increased and the availability has decreased. Those involved with multiple systems in addition to having a criminal background often find themselves in a state of homelessness due to lack of landlords willing to rent to them, lack of safe affordable housing, lack of job opportunities and income. Many systems and community stakeholders have come together to tackle the housing problems in our county. Silo funding streams, inconsistent dissemination of information on available resources and lack of on-going cross systems training has stifled the county's efforts to implement the recommendations from the 2010 Cross Systems Mapping and the 2014 CFAR initiatives.

By bringing together these multiple stakeholders again to focus on the first 2 intercepts of the Sequential Intercept Model; our county can implement the recommendations of previous projects.

Several initiatives have been underway with a rejuvenation of interest in Re-Entry from incarceration into the community.

The re-entry committee starting from infancy again is partnering with existing resources and programs moving forward with a plan for those ready to be released successfully into the community.

### F. Deaf and Hearing Impaired – Adults and Children

Westmoreland County Behavioral Health and Developmental Services contracts with The Center for Hearing and Deaf Services of Westmoreland County in order to ensure that those with hearing impairments have adequate interpreting services available as needed. Deaf services offers interpreting services to individuals in all levels of care and has also been utilized for assistance in providing interpreting services during DCORT deployments.

### G. Individuals experiencing homelessness- Adults and Children

For the large geographic area of Westmoreland County, there are limited homeless shelters which are routinely filled to capacity. In November of each year until the end of March, a Cold Weather Shelter in Westmoreland County will open its cold weather shelter, giving community members without reliable shelter or heat a place to turn as temperatures dip into the 'teens. Open on nights 25 degrees or colder, the shelter will operate out of the Welcome Home Shelter in Greensburg and the Union Mission in Latrobe.

Westmoreland County has available for the homeless:

- Emergency Shelter for women and families: Welcome Home Family Shelter.
   This shelter has a capacity of 4 families and 10 single women and is located in Greensburg, PA.
- Women and Families Shelter for men (Union Mission): Union Mission. This program has a capacity of serving 10 men in the Latrobe area.
  - Domestic Violence Shelter: Blackburn Center Against Domestic & Sexual Violence, Alle-Kiski Area HOPE Center, Inc. (located in Allegheny County), Washington Family Shelter in Washington PA and Safe Haven (located in Washington County)

#### Efforts in the schools to identify and serve homeless children/families:

In an effort to identify and support children and families experiencing homelessness, our office has piloted an enhanced Student Assistance Program Liaison initiative; the pilot began with three schools at the start of the 16/17 school year and expanded to a total of serve pilot schools by March, 2017. The enhanced liaison has the ability to provide liaison services to identify appropriate behavioral health services but can also provide case management intake services and provide linkage services to our housing support services that are also provided by our base service unit. The enhanced liaison is able to serve and identify the entire family's needs and serve as a resource consultant to the school system; these opportunities have allowed the behavioral health case management system to engage with schools to identify and serve at risk children and their families.

In addition, the enhanced liaison model has been successful thus far with school districts reporting the following successes:

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- substantial improvement in parental engagement including "hard to reach" parents
- schools are now able to offer assistance and support to the student as well as their parent and family
- parents' trust in the school system is restored following positive experiences during the assessment and case management intake procedures
- the relationship between the school and mental health system is improving;
   services are coordinated and communication is improving

### Efforts in the Infant/Toddler El system to identify homeless children

The mission of the Westmoreland Local Interagency Coordinating Council (LICC) is to assist families, local agencies, state agencies, and the community to support young children with special needs in a variety of community and educational settings; our Infant/Toddler Early Intervention coordinator is a participating member of this committee. As a subgroup of LICC, the *Child Find* committee is to ensure the identification and referral of all eligible children for early intervention services, particularly those who are homeless, migrant families, and children with physical risk factors that would lead to developmental delays.

In the past year to address and reach our homeless and migrant children and families, the committee has worked closely with our homeless liaison coordinator to conduct outreach to local shelters, distributed approximately 7000 flyers about early intervention services to Westmoreland County food bank recipients, distributed flyers to local campgrounds and to local farms who hire seasonal workers. Additional efforts have also included developmental screenings at local low income housing projects in the county; these efforts are an opportunity to engage with early intervention services and to support families who may be at risk for homelessness.

Westmoreland County WCOH, LHOT, Human Services Committee, and multiple community stakeholders work tirelessly together to meet the needs of the homeless population in our area. Each year in January a Point In Time Survey (PIT) is conducted by members of the WCOH. The last official statistics available for the PIT by HUD and Congress was from 2014. In 2014, Homeless Households with at least one Adult and one child # of persons sheltered was 72. Homeless Households without children # of persons sheltered 21.

Chronically Homeless individuals were 14. Other Homeless sub-populations Total # of persons: Severely mentally ill  $\sim$  27; chronic substance abuse  $\sim$  10; Veterans  $\sim$  0; Victims of domestic violence  $\sim$  8. Total unduplicated homeless sub-populations for 2014 was 32.

Westmoreland County Housing Authority (WCHA) is consistently at the table with community stakeholders, WCOH, LHOT and the Human services committee offering assistance within their ability under HUD and regulatory standards. There is currently a 3-5 year waiting list for a Section 8 voucher. There are 1810 vouchers in existence. The WCHA was recently audited and must start pulling 75% from the regular waiting

list and only 25% from the Local Preference list. In recent past people who met the criteria for a Local preference were being served and few were moving off the regular waiting list of approximately 3000 people.

For the forensic homeless population, several initiatives have been underway with a rejuvenation of interest in Re-entry from incarceration into the community. The re-entry committee starting from infancy partnering with existing resources and programs will be moving forward with a plan for those ready to be released successfully into the community. The following are objectives being considered in the planning of addressing across populations but specifically identified for the re-entry population:

- Develop and implement a Cross Systems training curriculum and distribution of current, accurate information across systems.
- Increase consistent multi-level communication efforts to be pro-active instead of re-active to complex co-occurring multiple system using individuals
- Expand multi-system case management partnerships for engagement to help navigate the multiple systems
- Development and expansion of housing appropriate to the level of need and structure (for example: halfway house, MH residential or something more independent like apartment.
- > Engage vocational and educational system resources for assistance integrating those in need with easy accessibility
- Improve/Expand community resources for D/A issues or build a component to address D/A issues into existing programs
- Provide consistent ongoing outreach to natural resources of the person such as family etc. to be part of their planning especially when there are D/A issues
- Develop and enhance employment opportunities with mentoring, job coaching and peer available services
- > Engage Landlords that will work with this population to help maintain, sustain safe affordable housing by offering incentive opportunities for their participation
- > Expand and improve on accessible transportation

Please refer to letter K Section 2 for an overview of service provision for children/youth residing at the Westmoreland County Juvenile Detention Center.

### H. Older Adults – Age 55 and over

Westmoreland County Behavioral Health and Developmental Services has a deep commitment to providing services to our aging population. From participation in our local Elder Abuse Task Force to the State Aging Coalition, the county office continues to work in partnership with the base service unit, Area Agency on Aging and multiple other agencies to provide cohesive service provision that recognizes the challenges that the aging population endures on a daily basis. Through these partnerships Westmoreland County Behavioral Health and Developmental Services not only is able to monitor and support behavioral health needs but also to offer assistance to individuals and families when other needs may arise as well. Housing, transportation

services, meal planning, health care and money management are some of the areas that the county office is working in partnership to address. Service expansion in the behavioral health continuum such as representative payee programs, ACT services, social rehab services and community psychiatric nursing services will be utilized to assist in meeting the identified needs of the aging population. Partnerships with other community programs has offered the county BH/DS office opportunities to provide trainings and education to aging providers.

## I. Individuals who are medically fragile- Adults and Children

The Medication, Monitoring and Education Program provides education to individuals about their physical health needs, as well as their behavioral health issues. They often serve as advocates with the individuals to insure they are receiving excellent physical health and behavioral health care. Some of the medically fragile issues they address are diabetes, hypertension and tardive dyskinesia.

Special consideration is also given to children with chronic medical conditions. The Westmoreland County BH/DS office assists in identifying and offering support to those children in need of behavioral health care, who are also medically fragile. Supports are provided as needed with the county office often taking the lead to assist in coordinating care needs.

### J. Limited English Proficiency – Adults and Children

Westmoreland County Behavioral Health and Developmental Services assists with translation services as the need may arise with consumers in all levels of care. A language line is available and interpreters from a local college may be utilized.

### K. Transition Age Youth Including Young Adults- age 18-26

1) Social Rehabilitation (Transitional Age): In June 2015 the Westmoreland County BH/DS office began an in depth Service Review of the Family Services of Western PA's (FSWP), Community Outreach through Resources and Education Program (CORE); the service review is a strategic planning process that analyzes the quality, accessibility, and cost of county funded programs. The CORE program began in Westmoreland County in 2006 as a base funded service specifically for transitional age (16-24) youth that assists young individuals with transitioning into adulthood and establishing independence. CORE works to support and promote hope and assist individuals in developing to their full potential to become an asset to their community. The outcome of the service review determined that the population identified in the CORE program could be better served in an existing service (Psychiatric Rehabilitation) through Health **FSWP** funding. Westmoreland County BH/DS worked in collaboration with FSWP to update their currently approved service description for Psychiatric Rehabilitation to include a mobile component which will allow this service to be provided in the home and community in addition to the traditional group setting; this was a critical piece in the decision to transition the CORE program into a Psychiatric Rehabilitation model.

Discussions also included creating a Social Rehabilitation program for youth ages 16-17 which would continue through base funding; the social rehabilitation program will provide hope and encouragement while providing assistance to improve functioning to gain/regain a valued role in the community. Eligible individuals could then transition to Psychiatric Rehabilitation or another valuable service as identified once reaching their 18th birthday.

During the 2015-2016 fiscal year the CORE program provided service to 20 youth ages 16-17 and 68 youth ages 18-24. Family Services of Western PA has transitioned the individuals currently in the CORE program who are eligible to transition to the Psychiatric Rehabilitation program; for the individuals who are not eligible for Psychiatric Rehabilitation, FSWP is assisting to identify and secure other alternative supportive services for these individuals.

2) Detention/Shelter Case Management Liaison Services- Ages 12-18: Throughout the past few years, the Westmoreland County Behavioral Health and Developmental Services office has collaborated with the Juvenile Probation and Child Welfare systems to identify systemic protocols to identify, assess, and treat the behavioral health and mental health needs of the youth entering into the detention and/or shelter facilities and to provide the appropriate linkages and referrals to treatment upon discharge and/or transfer to a treatment facility. In response to meet the mental health and behavioral needs of this population, the county supported a psychiatric outpatient clinic on the grounds of the facility; sadly, the clinic was closed in 2014 due to an inability to utilize Healthchoices funding for sustainability.

With the closure of the outpatient clinic site at the detention center in 2014, both the juvenile services system and child welfare systems lost access to psychiatric services including consultation, evaluations, and outpatient treatment therapies. In February, 2016, the Westmoreland County BH/DS office met with the detention center administrator to discuss a program that could offer comprehensive mental health screenings, assessment, case management, referral and linkage to supports and services, as well as consultation to the court system for adjudicated delinquent and/or dependent youth. The purpose of the Juvenile Services Liaison program will be to provide case management services for adolescents who are admitted to the Westmoreland County Detention Center and Shelter; the program is designed to serve as liaison between the mental health systems and assist the court system, child welfare system, and juvenile probation system. The liaison will have three primary responsibilities:

- Diagnostic assessment: including identification and prioritization of the child strengths and needs; the assessment may also include an intake for case management services.
- Consultation services to system partners and court officials about the child and family strengths and psychiatric needs; education and training about youth mental health will be available as needed to system and court partners.
- Referral and linkage to appropriate community services and supports: upon discharge from the detention center/shelter, the liaison will identify community

supports and services to assist in the reintegration process when a child returns to his/her community. As needed, the liaison will work with other departments (such as BHRS, hospital liaison, supports coordination, etc.) within the base service unit for continuity of care and for coordination of services.

Goals for this program match the system needs identified by the detention center administrator and those of the child welfare and juvenile services systems; these include a comprehensive assessment of a child's behavioral health and mental health needs so the staff may provide the appropriate safety interventions and support those responsible for the child's long term treatment planning and court recommendations. The liaison program will also support the detention and shelter staff through education and training in areas of youth mental health first aid, trauma informed practices, and have experience and training in the county's disaster, coordination, outreach, referral team process (DCORT) to provide psychological first aid following a crisis event.

The overall goal of this program will has been to enhance our collaboration and coordination efforts among the child serving systems in the county and for the liaison serve as "bridge" for children experiencing an out-of-home placement at the center or shelter and to ensure that mental health services continue following a child's reintegration into their community and/or the child's psychiatric needs are accurately identified to assist the court system with their recommendations. This program provides case management services only.

3) The Giving Tree Drop-In Center- The Giving Tree Drop-In Center opened its doors on April 21, 2009 and was established to expose transitional aged youth (16 to 26) who are experiencing mental illness to information, education, and skills that will help to make them productive and successful adults and members of the community. The center is an outgrowth of the Community Outreach through Resources and Education (CORE) program which has been providing supportive services to the transitional age population since 2001. The Giving Tree offers positive peer interaction within a safe and supervised location in which to socialize away from many of the problems (drugs, crime, violence, etc.) found on the street. Members have the opportunity to interact, develop leisure skills, and participate in activities that can enhance socialization and increase independence. The center offers a variety of activities from its entertainment center, computers, and pool table to its group activities which include outings into the community such as visiting museums, concerts, and holiday light displays. The center also offers groups to members which address co-occurring disorders, study skills groups, and life skills groups. The youth of the community have been a fundamental part of the planning process including the naming of the center. The youth are the voice of the center and the activities are determined by its members. The program currently serves approximately 50 youth throughout the year.