I. LANCASTER COUNTY OLMSTEAD PLANNING PROCESS: Original submission 11/20/2016 Revised submission 4/24/2017

As a community, the Lancaster County Mental Health system continues to move forward; expanding our knowledge, recovery-oriented services, employment, and housing opportunities with the ultimate goal of ensuring that all individuals with a mental illness have access to and choices of supports and services they need. The Lancaster County Mental Health Program has several processes in place to ensure regular and ongoing input from adults and older adults with serious mental illness, persons in recovery, transitional age youth, Lesbian, Gay, Bisexual, Transgender, Questioning, Intersex (LGBTQI), Veterans, family members and professionals regarding the county system of mental health care. We firmly believe that interested and involved persons should have many options to provide input throughout the year and that input is utilized to develop new programs or expand existing programs. These processes include a variety of venues from individual conversations with family members and individuals experiencing mental health issues to standing meetings with providers, County agencies, PerformCARE, our managed care organization, Lancaster County Coalition to End Homelessness, Local Lead Agency, Community Support Program, Community Support Plan (CSP) meetings at Wernersville State Hospital, Quality Improvement Council, Lancaster County Jail, Lancaster General Health, Child and Adolescent Services System Program (CASSP) meetings and advocacy organizations. All of the aforementioned meetings occur throughout the year and Lancaster County depends on the input from all stakeholders within the community to identify gaps in services, unmet needs and when existing services may need to be altered/changed to better meet the needs of individuals with a mental illness. These needs are not solely Mental Health treatment needs but also includes physical healthcare, leisure and recreation, employment opportunities, education, transportation, housing and natural supports. Lancaster County actively participates on the Adult, Older Adult and Children's subcommittee of the Mental Health Planning Council to ensure continued partnership with varied stakeholders and we continuously explore funding options from varied sources to expand our service system.

Participation in the CSP process within Wernersville State Hospital and hearing from our Lancaster County residents and their treating teams clearly identifies that our county lacks the many resources to successfully meet the needs for some individuals to transition back to the community. Many of our residents at Wernersville State Hospital are aging and have significant medical issues that require full time nursing supports and we do not have a program outside of a nursing home that is able to meet those complex medical needs.

SERVICES TO BE DEVELOPED:

a) Outreach to our older adult population through education so that they understand services that are available to them and to reduce the misconceptions that this population has regarding mental health services. Working with our provider network to ensure that adequate staff exist that are credentialed and able to bill Medicare for service delivery. Develop educational materials

regarding available services and supports to be distributed to our County Office of Aging staff as well as Senior Centers. Training will also be provided to staff so that appropriate referrals and supports can be accessed. This prevention and early intervention service will continue throughout the year and will expect to reach over 100 older adults annually. Existing staff will be able to provide this outreach and support.

There are many prevention/training opportunities available within the County with Crisis Intervention Training (CIT), Mental Health First Aid (MHFA), Wellness Recovery Action Plan (WRAP) and suicide prevention activities to name a few. As a nationally recognized curriculum on education with regard to mental illness and improving communication with (and understanding of) those experiencing symptomatology, MHFA is being offered by several local providers to specialized professions such as educators and law enforcement. The much more comprehensive Crisis Intervention Training continues to be provided for our police departments, as well as correctional officers within the county jail. The CIT training is a cooperative effort between the Probation and Parole Dept. and Behavioral Health. It is anticipated that by the end of November, 2016, all Lancaster County Prison staff will have successfully completed the 8 hour MHFA training. Similarly, it is hoped that by June, 2017 all law enforcement officers in Lancaster County will have taken the MHFA training. The 40 hour time commitment of CIT presents logistical obstacles, but the Prison and many local police departments have demonstrated a resolve to identify select staff to participate. This is designed to improve supports and services for individuals of any age.

Our suicide prevention committees have continued to grow in membership and include many family members, transitional age youth, professionals and concerned citizens. There are currently two separate but equally important Suicide Prevention Coalition committee meetings to address and talk about suicide as well as prevention. The Stakeholder based Coalition, led by Mental Health America, has been providing events and fundraising activities to educate the community and get people talking about suicide. We are partnering with our managed care organization to expand the education and awareness of suicide strategies through a multi media campaign. The second committee is addressing ongoing needs within the Lancaster County Jail for inmates with a mental illness and suicide prevention. This is a County lead initiative that will continue meeting over the coming year with a vision to reduce/eliminate suicide within our County Jail. Within the coming year, it is anticipated that the Suicide Prevention Coalition will partner with the County's 16 local school districts and Student Assistance Programs in coordinated awareness and prevention presentations for students. Annually, the Coalition will co-sponsor the "Walk for DES," an event created by the father of a young man who took his life several years ago. Last year the event raised more than \$15,000 for suicide prevention and awareness. The County facilitated Prison Suicide Prevention Committee meets on a monthly basis and is credited with identifying various environmental and assessment strategies that have improved conditions in the Lancaster County Prison, among them being the creation of a Suicide

Hotline that friends or family of inmates can call to report concerns for incarcerated loved ones. These initiatives are regarded as being of an ongoing nature and will benefit approximately 200 individuals of all ages. Funding for these groups and their resultant outreach efforts comes solely from fund-raising events and charitable donations, in addition to costs incurred by the County's General Fund. Both committees convene on a monthly or bi-monthly basis for strategic planning purposes.

A service that would benefit this community would be embedded peer support within the crisis intervention services component of Lancaster County Crisis. Funds will be needed either through State Funds or reinvestment funds through PerformCARE. The timeline is dependent on securing the funds and would be able to serve around 100 people per year of varied ages.

Expansion of the services jointly funded with Lancaster General Health to support the needs of individuals with a serious mental illness and physical health needs that (over) utilize both emergency room visits and inpatient stays would be beneficial. The timeline is dependent on securing funds to expand members of the mobile team to include additional social workers, nurses, Emergency Medical Technician's (EMT's) and physicians. The additional staff could serve up to 30 more individuals per year aged 18 years of age and over.

Lancaster County is a large county both geographically and in population size and for that reason accessibility to treatment sites can be difficult. Expansion of treatment providers to varied sites throughout the county would increase both the availability and accessibility to needed mental health and drug and alcohol treatment. These would include both outpatient therapy and psychiatry. For this coming year, we will be working with our managed care organization using reinvestment funds to open an outpatient Drug and Alcohol (D&A) clinic in one of the aforementioned areas. This new program will offer dually diagnosed services using the Hazelden Model and should serve around 80 individuals annually aged 18 years of age and older.

b) The Lancaster County Mental Health Program partners with the Lancaster County Coalition to End Homelessness, which encompasses multiple housing, community agencies, religious organizations and businesses that work together to expand availability of safe and affordable housing in Lancaster County. This Coalition is leading the County's "Heading Home – The Ten Year Plan to End Homelessness in Lancaster County". Through a partnership with the Coalition we were successful in securing three Housing and Urban Development (HUD) grants to specifically secure permanent supported housing for individuals with a mental illness. This is a housing first model and follows both the Coalitions as well as HUD's requirement that all housing be housing first. There are currently 47 subsidized housing opportunities for adults, older adults and transitional age youth to reside in an apartment of their choice with a HUD defined subsidy to make it affordable. Over the last 5 years 46 individuals have successfully graduated from the program as they have been able to secure

an income to support themselves in their own apartment. This allows for additional individuals to enter the programs and to work toward self-sufficiency. It is anticipated that 9 new individuals will enter one of the three programs annually. In addition, we will continue to use Projects for Assistance in Transition from Homelessness (PATH) funds to house individuals who have a mental illness and are in need of permanent housing. We have utilized our PATH funds and housing support funds to assist individuals to successfully transition from our Community Residential Rehabilitation Programs (CRR) to independent living. It is anticipated that 3 individuals will enter independent living from one of our CRR programs annually. In addition, Lancaster County BH/DS continues its partnership with Community Basics Housing Development Corporation to subsidize 6 set aside apartments, using the housing first approach, in the Park Avenue Apartments project funded through PHFA. Six individuals will remain in their own apartments throughout the year. Lancaster County will continue to explore opportunities through our Coalition to End Homelessness and HUD to further expand these programs. All of these housing interventions are designed to meet the needs of the transitional age youth, adults and older adults.

c) Mobile services are an important treatment option in the array of services that are available to individuals seeking services with Lancaster County. Our crisis intervention component offers mobile outreach, phone contact and walk-in services. This program is accessible to anyone 24 hours a day seven days a week. In addition to staffing at our site, there is one identified crisis worker who is stationed at the Lancaster County Police Station to accompany the police to locations when either a call is received regarding someone with a mental illness or when an officer calls back to the station to ask for the crisis worker to respond to their location to assist with a mental health issue.

Case management is an integral part of ensuring that indidivuals get connected with services and supports that they need. Lancaster County offers 4 levels of case management to ensure that anyone who has the need for case management is able to receive the service. To ensure that individuals have a choice in their provider of services, the case management services are provided by both Community Services Group and Behavioral Health/Developmental Services (BH/DS). There is administrative case management, resource coordination, blended case management and intensive case management and both programs meet weekly to ensure fluidity and collaboration between the programs. Case management is available to youth, adolescents, transitional age youth, adults and older adults. In addition to the aforementioned levels of case management we have several specialty case managers to ensure that individuals can easily access case management and other services/supports. There are two case managers who serve individuals participating in Mental Health Court, two case managers who outreach to individuals who are homeless, one case manager who is the contact for acute hospitals and can perform intakes on the mental health unit and one newly developed position of a forensic case manager who spends time within our County Jail and is also the contact for the State Correctional Institutions. Case management supports and services are available to over 2000 individuals annually.

Mobile psychiatric Nursing and mobile therapy for adults is offered to individuals through County funding and PerformCARE. While the mobile psychiatric nurse is experienced and knowledgeable about medical issues, there continue to be gaps in getting medical nursing supports to individuals that we serve. Many individuals have complex medical issues/concerns that would be best served by daily medical nursing visits, however, physical health plans do not cover such intensity in this service. Most plans allow for twice a week nursing to address medial issues and an expanded service is very much needed within the Lancaster Community. Moving forward we will be exploring ways to get needed medical care into individual's homes and Community Residential Rehabilitation programs as well. This added intensity could reduce the number of individuals requiring inpatient medical care and nursing home care. Waivers and other funding opportunities will be explored. This service could reach approximately 40 people per year aged 18 years of age and older.

Psychiatric Rehabilitation is offered as both a mobile service and at our Tempo Clubhouse Program. Engagement in the clubhouse model has many areas for growth and opportunity within our community. There is an effort to educate the community about this service and to assist others to become engaged in the service. As part of this model, individuals have been able to participate in temporary employment opportunities to enhance their resume and to have job coaches support them in permanent employment opportunities. Expanding job opportunities and employer contacts will continue for this coming year in order to have more individuals have the opportunity to be gainfully employed. It is anticipated that with the expansion, five more individuals will be able to have work experience. The focus is to support transitional age youth, adults and older adults.

Socialization is a very important component to recovery and to the individuals that we serve. Lancaster County has both site based and mobile socialization programs that offer individuals an opportunity to make friends, establish relationships with others and to have a good time engaging in various activites. Expansion of this service is not planned as additional funds are not available. In addition, Compeer and CompeerCORPS offer the opportunity to establish lasting friendships and trusted relationships. Compeer is limited only by the number of volunteers willing to engage in the matching with a friend. This service is available to individuals 18 years of age and older.

Outpatient services within the County are offered by varied providers with varied expertise in treatment modalities. The outpatient providers are trained and utilize evidence based services and have expertise in trauma care, Multi Systemic Therapy (MST), Parent Child Interactive Therapy (PCIT), Cognitive Therapy, and Dialectical Behavioral Therapy (DBT). At this time, DBT is only available to individuals with PerformCARE as there are no county dollars to pay for this service. Additional funds from OMHSAS would need to be secured to offer this therapeutic intervention to approximately 10 additional individuals per year. These specialty treatment options vary across the age span with PCIT having focus on youth, MST focusing on adolescents and DBT for adolescents and adults/older adults.

Outpatient services have been expanded this year to our youth and adolescents in a project titled Flexible Outpatient. This service is a joint venture with PerformCARE and allows the clinician,

who is based at an outpatient setting to be able to leave that setting to provide some limited treatment in the community setting as well. This is currently a pilot project with one provider within Lancaster County with the expectation that additional providers will be offering this service as well. The projection is that 30 youth would be able to benefit from this service this fiscal year.

A Common Ground support center is being developed within an outpatient office in order to assist individuals to be prepared for their psychiatric appointment. This will be developed this fiscal year and has the potential to offer 300+ individuals the opportunity to use this web based service with the assistance of a peer to address issues/concerns/ questions during their psychiatric appointment. Research has shown this to be a valuable tool in taking ownership/responsibility for their treatment. This service should begin next fiscal year and will be available to anyone aged 18 years of age or older.

In collaboration with our Intellectual Disabilities (MH/ID) component and PerformCARE we are beginning a mobile Mental Health /Intellectual Disabilities behavioral intervention service. This program will provide a mobile MH/ID team consisting of two professionals who will assist adults ages 21 years of age and older with a mobile team to address behavioral/psychiatric issues. This team will work with the individual and their existing team to provide service interventions and activites to reduce escalations in behavior or divert a crisis situation. Two individuals from Lancaster County will be able to benefit from this service this fiscal year.

Lancaster County residents have the opportunity to engage in peer support services that are offered by two separate programs. One such program, Recovery Insight is peer run and owned and also offers WRAP training within Lancaster and surrounding counties. This program receives funding from both PerformCARE and the County. Our other program, Philhaven Clubhouse is also an option for individuals who would like to engage with a peer and is solely funded by PerformCARE. In addition, we have two drop in centers in separate areas of the city, with Involved Consumer Action Network (ICAN) being consumer run and both programs being funded by the County. Lancaster General Health our largest hospital with inpatient psychiatric treatment has peer support embedded within their unit. A warm line is often discussed at meetings and is a service that we would like to include if funds are able to be identified. This service would serve approximately 200 individuals per year aged 18 years or older.

Expanding resources for our children and youth is always a priority and working with our managed care partner, PerformCARE we are working to develop Functional Family Therapy (FFT) as another option for our families. Additionally, utilizing our CASSP Coordinator and strong partnerships with the child serving agencies within the County we continue to look for gaps and needs within the community and ways to enhance our service delivery system and reduce the number of youth in residential treatment facilities. One such gap was able to be met this fiscal year with the opening of a second child/adolescent partial program. This program is able to meet the needs of youth who otherwise would be waiting for services due the capacity issue of our other partial program.

Families often find themselves unable to participate in treatment if their child is in a Residential Treatment Facility located a great distance from their home. Lancaster County currently has 66 youth receiving services in these facilities. Using reinvestment funds, we will be working with a provider to have the ability to use the same technology as tele-psy to have sessions/visits between families and their children. Two residential providers will be chosen for Lancaster County, however, once the technology is in place at multiple RTF's shared by the Capital Area 5, this will allow a family access to multiple RTF's. This new opportunity will be operational by the end of this fiscal year.

In an effort to meet the changing needs of families with children and adolescents who are struggling due to mental health issues we were able to expand our service delivery to include county funded family based services. The funding is limited and will only be available to 5 families per year but this is a way to support families who do not have medical assistance and would otherwise not be able to use the service.

Goodwill Industries is changing their program structure to focus on supported employment and not site based workshop. Individuals aged 18 years of age or older will be referred for employment opportunities through this program will be supported to meet their goals of gainful employment. We are partnering with Goodwill to support their systemic change to this new philosophy and will continue to provide funding for individuals to gain skills necessary to be gainfully employed. Additionally, Ephrata Area Rehabilitation Services (EARS) is also moving in the direction of supported employment and changing their services from site based workshop. Lancaster County also has an active Clubhouse which focus on supported employment opportunities.

Lancaster County currently has three treatment courts that offer additional supports to their participants. They include Mental Health Court, Drug Court and Veterans Court. Lancaster County BH/DS has staff that participate on both MH court and Drug Court and there are two designated case managers who provide all the case management services for the MH court participants. These courts are designed to assist offenders to take responsibility for their crimes and to get connected with needed services and supports. This integrated involvement with these courts has afforded the participants and our county with a cooperative and collaborative relationship with the judicial system and Adult Probation and Parole. Participation in the treatment courts is for individuals aged 18 years of age and older.

CompeerCORPS, a Veteran-to-Veteran peer monitoring program is available to veterans in Lancaster County aged 18 years of age or older. This program is designed to create a supportive network for veterans who could benefit from a veteran peer mentor. With funding from the Office of Mental Health and Substance Abuse Services, this program matches a veteran resident of Lancaster County who has a diagnosed mental illness with a veteran Volunteer to enjoy friendship activities in the community.

Lancaster County is exploring new ways to support individuals with a mental illness that are incarcerated or have a criminal history. With additional funds from OMHSAS this fiscal year we are developing a new program to serve individuals currently incarcerated at either the Lancaster

County Jail or the State Correctional Institutions. This program will be licensed as an Residential Treatment Facility for Adults (RTFA) and will serve 6 individuals at a time for a period of up to three months. The program will provide an opportunity to get individuals out of incarceration sooner and offer individuals the supports/treatment that they need to be successful. The first three individuals to enter this program will be coming from the Lancaster County Jail who are on the waiting list for Norristown State Forensic Hospital. This program is expected to be operational this fiscal year and will serve 24 individuals per year aged 18 years of age or older.

Within Lancaster County our ability to serve adult or older adult individuals with the greatest need utilizing an evidence based program, Assertive Community Treatment Team (ACT) is hampered by funding. Currently, the only individuals that can be served by ACT are individuals who have PerformCARE, managed care. In order to offer this service to an additional 56 individuals annually, additional funding would need to be provided from OMHSAS. If funding could be secured then full implementation could be done within approximately six months as a provider would need to be secured and staff would need to be hired.

In partnership with PerformCARE, managed care organization, an Extended Acute Care (EAC) program is being developed this fiscal year within Lancaster County utilizing reinvestment funds. Both our current EAC program and the new program are provided by Wellspan/Philhaven and only PerformCARE recipients are able to enter the program. Lancaster County does not have the funds to pay for treatment in either of these programs and additional funds from OMHSAS would need to be secured to offer this service. With funding, 2-3 individuals aged 18 years of age or older could be able to access this service using county funding on an annual basis and this service could be offered immediately.

Acute Crisis Diversion program paragraph has been removed as the program is no longer operational.

HOUSING IN INTEGRATED SETTINGS:

a & b) Please see Attachment A for a complete listing of Housing resources and supports. This list includes our supported housing programs, reinvestment housing programs and supports, specialized subsidized rental program and our HUD programs. Also included is our supportive housing flow chart and facts about our housing programs and our Mental Health Service Matrix. One program that is identified in Attachment A is our Master Leasing program and this program offers four individuals a place to stay who otherwise would be homeless. Individuals can remain at the residence for up to three months while they seek employment/income and housing. In addition, our Philhaven Diversion program is a treatment option available to individuals who are receiving treatment on an acute inpatient unit but need some additional time/supports to be successful. This program is designed to meet the needs of individuals who otherwise would be going to Wernersville State Hospital and has been very successful in diverting many individuals

from institutionalization. Lancaster County has made some referrals to the 811 housing voucher system with one of the referrals for an individual currently receiving treatment at Wernersville State Hospital. Lancaster County also utilizes funds through reinvestment for contingency funds to be used for first months' rent, security deposits, utility needs, bridge subsidies, and household items to include beds. Lancaster County has HUD funds to support housing for families and children in both permanent supported housing options as well as rapid re-housing funds.

c) Lancaster County has 75 Community Residential Rehabilitation (CRR) opportunities scattered throughout the County. The programs are located in varied settings including converted buildings to support multiple people, converted homes to serve multiple people and scattered site apartments within a rental complex. The breakdown for our CRR programs are as follows;

Columbia CRR is located in the town of Columbia and can serve 11 individuals. This is a converted bakery that was developed to have separate apartments within the building with most apartments have two bedrooms. This location also has a handicapped accessible apartment that has two bedrooms.

Lemon Street CRR is located within the city of Lancaster and can serve 6 individuals. This is an older home that was converted to offer shared living space and single bedrooms.

Residential Program for Recovery is located within the city of Lancaster and can serve 14 individuals within two separate buildings. This is an older home that was converted into shared common space with individual bedrooms except for one shared bedroom. There is a separate building on the property that has three bedrooms and a separate living area.

Lancaster Court CRR is located right outside the city of Lancaster and can serve 8 individuals. This program also has the ability to serve 4 individuals as a respite program. These are 6 separate two bedroom apartments within an apartment complex.

Pennshire CRR is located outside the city of Lancaster and can serve 6 individuals. Each individual has their own bedroom and the program is within two duplex homes that are connected and can be accessed by either side.

CHIPP SLP CRR is located outside the city of Lancaster and can serve 30 individuals. These are scattered apartments within an apartment complex with most being two bedroom apartments but a few single apartments.

Lancaster County does not have any plans for conversion of existing CRR's. The majority of our residential programs are in scattered site apartments within an apartment complex and additional funding will need to be secured to make any changes to our CRR's that currently support multiple people in one setting.

d) Lancaster County BH/DS has been the local lead agency for the county for the past several years. The plan is for the Lancaster Housing Opportunities Program to begin that role starting this fiscal year. Our housing worker is in discussions with the Local Lead Agency to secure units in a newly developed complex using a low income tax credit for set aside apartments for individuals with a mental illness. Lancaster County has a very unified Coalition to End

Homelessness where members of the housing authorities, housing providers and the county work together to meet the needs of the community. Lancaster County BH/DS has enjoyed a very cooperative working relationship for several years with our housing partners and through that relationship we were successful in developing 6 set aside apartments at a Park Avenue Project in 2009 using low income housing tax credits for the property. The Lancaster County community meets quarterly with multiple housing authorities and agencies who work with youth, young adults, and adults to ensure ample safe affordable housing for all.

IV.Special Populations:

- a) We are seeing a growing number of individuals who are in need of both mental health and intellectual disabilities services. This population requires skilled professionals who have the knowledge and experience in working with this specialized population. We currently have two identified supports coordinators who work specifically with both adults and youth who are dually diagnosed as having a mental illness and an intellectual disability. This coming year we will be offering a specialized MH/ID mobile treatment program to adult individuals being served by the County's Intellectual Disabilities program and who are experiencing significant MH issues. This is a joint project with our managed care organization and will offer therapeutic interventions to a population of individuals who would not otherwise been able to get such an intensive service. Needs: We continue to have a need for therapy, partial hospitalization services, employment, and housing needs. We are seeing a growing number of refugee youth and adults who need services from multiple programs/providers and language as well as cultural awareness and understanding is creating a barrier for service delivery. Expanding our provider service capacity to meet the needs of our refugees will be explored this year.
- b) The Lancaster County Mental Health Program is a participant and active member on both the Lancaster County Court of Common Pleas Adult Drug Court and the Lancaster County Court of Common Pleas Mental Health Court. Attendance at weekly team meetings promotes coordination of appropriate and varying levels of treatment in addition to providing intensive supervision and judicial monitoring. Both of the treatment courts are a valuable resource and opportunity for individuals, some who are incarcerated, to participate in a process to promote their recovery at the same time that they are taking responsibility for their crimes. The purpose of these courts is to divert individuals from incarceration and if incarcerated to provide services and supports upon release. Due to the expanding participation of individuals within Mental Health Court we have added a second resource coordinator position to provide services to this growing number of participants. Lancaster County has two providers who have been identified as Centers of Excellence, TW Ponessa and Lancaster General Health, to combat the opioid epidemic and address the needs of our citizens addicted to drugs. Additionally, this year we will have the Co-occuring program operational in the Borough of Columbia that will be utilizing the Hazelden Model.
- c) Meeting the physical health needs of many of our community members with no insurance is challenging and resources are very limited. In a partnership with South East Health

Services, a patient certified medical home and community health center, one of our behavioral health providers is embedded within the daily schedule to provide assessment/treatment. If a physician identifies that one of the patients that he/she is seeing could benefit from behavioral health intervention then the patient is seen immediately by the clinician. Utilizing an integrated behavioral health model the individual can receive treatment for both medical and behavioral health issues/concerns at the same site for youth/adolescents, transitional age youth, adults and older adults. **Needs**: Outreach to our community physicians so that they are better able to understand mental illness and ways to connect their patients with our agency for services as well as treatment providers within the community.

d) Individuals with a mental illness and traumatic brain injury affects individual across the life span and there are limited resources within the County to get the needed support and services that are unique to them. While there are some specialized providers within the County for individuals with a Traumatic Brain Injury (TBI), they often are ill equipped to serve the needs of indidivuals who also have a mental illness. Needs: Outreach to the existing providers in order to find ways for them to expand their expertise to include individuals with both a TBI and a mental illness.

e) Through our reinvestment dollars we were able to develop and accept individuals into a Master Leasing program. This program is designed to be short term housing (up to three months) for adults, older adults or transitional age youth who are being released from prison or a local hospital and need housing. This short term housing opportunity for five individuals allows time to have benefits started or reinstated, for services to be started and for permanent housing searches. There are also separate funds available for security deposits, first months' rent, supported housing services and housing searches. In an effort to reduce evictions and utility shut offs for individuals, funds are available to pay for these hardships that individuals face so that they will not lose their housing. Participation in the Forensic Interagency Task Force has afforded the County the opportunity to develop new relationships with the staff from the Department of Corrections (DOC) and to learn about many new processes that other counties have developed in an effort to better serve our justice involved individuals. Through a collaborative effort with our local County Prison, we receive a daily listing of persons who were incarcerated the day prior. We are able to compare this list with individuals who may be open with case management services. This alerts case managers that someone with whom they are working has been incarcerated so that they can work with the prison, attorneys, and the individual to ensure that mental health services are provided to them within the jail and that services can be set up upon their release. If the County Prison identifies someone with a serious mental illness who is not open with case management, then a referral is made to our office and we complete an intake while the individual is still incarcerated. Services/supports can then be arranged prior to their release. Our local Mental Health America (MHA) provides

education and support within the prison utilizing both their staff and a peer educator. **Needs**: More intensive supports within the prison for individuals who need additional group and individual therapy. Ability to connect individuals with medical assistance/insurance so that coverage is available upon release. Availability of at least a 30 day supply of medication upon release and the ability to have that medication refilled.

f) Individuals who are Deaf and hard of hearing must be supported with tools that assist them in communicating with all providers of services/supports. This may include interpretation services, writing, lip reading or other forms of communication that is most comfortable to the individual. All providers of services who receive funding from the county or managed care organization are required to utilize these supports when providing a service.

g) The Lancaster County Mental Health Program also partners with the Lancaster County Coalition to End Homelessness, which encompasses multiple housing, community agencies, religious organizations and businesses that work together to expand availability of safe and affordable housing in Lancaster County. This Coalition is leading the County's "Heading Home – The Ten Year Plan to End Homelessness in Lancaster County". This Coalition addresses the needs of both individual homelessness and family homelessness. Many of our HUD projects offer Permanent Supported Housing to both individuals and families as well as rapid re-housing for individuals and families. Through a partnership with the Coalition we were successful in securing three Housing and Urban Development (HUD) grants to specifically secure permanent housing for individuals with a mental illness. There are currently 47 subsidized housing opportunities for adults, older adults and transitional age youth to reside in an apartment of their choice with a HUD defined subsidy to make it affordable. Over the last 5 years 46 individuals have successfully graduated from the program as they have been able to secure an income to support themselves in their own apartment. This allows for additional individuals to enter the programs and to work toward self-sufficiency. In addition, we will continue to use PATH funds to house individuals who have a mental illness and are in need of permanent housing. We have utilized our PATH funds and housing support funds to assist individuals to successfully transition from our Community Residential Rehabilitation Programs (CRR) to independent living.

h) Our ongoing collaborative relationship with our local Office of Aging has significantly enhanced our ability to improve the services for older adults that are served jointly by our agencies. This relationship extends beyond the normal workday with both the on call Office of Aging worker and our crisis intervention program workers cooperatively addresses the needs of our older adults. With innovative relationships developed with our intake/case management staff and local physicians' offices, we are better able to identify and support the needs of older adults. One of our local hospitals has an inpatient mental health unit that specializes in treating older adults. **Needs:** Outreach to our older adult population through education so that they understand services that are available to them and to reduce the misconceptions that this population has regarding mental health services. Working with our provider network to ensure that adequate staff exist that are credentialed and able to bill Medicare for service delivery.

I) Medically fragile individuals of varied ages have the opportunity to participate in medically necessary services and are supported by their case manager to attend physician appointments, testing and laboratory studies. Lancaster County has a wealth of medical services including four hospitals and multiple physician offices located throughout the county. In a partnership with Lancaster General Health there are three mobile services identified to support individuals with complicated medical issues to ensure that their needs are being met. Care Connections, ambulatory Collaborative Care and Community Health Workers. All three programs offer the support of medical staff and social workers to address the needs of our medically fragile individuals. Working cooperatively with our local AAA and Lancaster General Health to find innovative ways to address the medical concerns of our aging population both within the community and at Wernersville State Hospital will begin this year. Exploring opportunities to expand our services to include an Enhanced Personal Care Home have already begun and will continue to be assessed.

j) Individuals with Limited English proficiency must be supported with tools that assist them in communicating with all providers of services/supports. This may include interpretation services, writing, or other form of communication that is most comfortable to the individual and is available to individuals of all ages. All providers of services who receive funding from the county or managed care organization are required to utilize those supports when providing a service.

k) The Lancaster County Mental Health Program provides specialized transition age intensive case management to our youth as well as a specialized support/educational group. We have five dedicated case managers to provide supports to this age group. In addition there is a transitional age coordinator who works closely with the transitional age population to assist them in preparing for adulthood. The funding for this coordinator position is a result of reinvestment funds through our Health Choices program. Utilizing a specialized Community Residential Rehabilitation Program we are able to provide five (5) transitional age youth the opportunity to develop life skills and practice those skills in a safe environment. This program assists them in locating employment, completing their education, developing budgeting skills, and prepares them to live independently within the community. **Needs:** Expansion of our transitional age/specialized support group to reach additional youth and assist them with needed supports and skills.

| Service | Luis Name | Provider | Utili. Review Approval Required for County Funding | Luis Authorization Required for county funding | Perform Care funded service | County MH funded Service | Comments on County Funded Services |
|----------------------------------|-------------------------------------|-------------------------------|---|---|--------------------------------------|--------------------------------|--|
| Drop-in Center | N/A | Arch Street Center | | | | X | Referral goes to provider. Provider does encounter reports to track units of service |
| Mobile Therapy | Mobile Group Therapy | Behavioral Healthcare Corp | X | X | X | X | Referral goes to provider. 15 min = 1 unit Total Units Based on UR approval |
| Mobile Nursing | Mobile Psychiatric Nursing | Behavioral Healthcare Corp | X | X | X | X | Referral goes to provider. 15 min = 1 unit Total Units Based on UR approval |
| Mobile Social Rehab. | Mobile Social Rehabilitation | Behavioral Healthcare Corp | | X | | X | Referral goes to provider. Must be approved by CHIPP Cord. 15 min = 1 unit |
| Mobile Therapy Group | Mobile Group Therapy | Behavioral Healthcare Corp | | X | | X | Only open to people who live at Columbia CRR and Lemon St CRR. Referral goes to provider 15 min = 1 unit. |
| Tempo Clubhouse | Site Based Clubhouse Services | Community Services Group | | X | | X | Referral goes to provider. 15 min = 1 unit (6hr day = 24 units) Total based on person's plan. |
| Mobile Work | Mobile Work | Community Services Group | | X | | X | Referral goes to provider. 15 min = 1 unit (6hr day = 24 units) Total based on person's plan. |
| Job Loss Prevention | Job Loss Prevention | Community Services Group | | X | | X | Referral goes to provider. 15 min = 1 unit (6hr day = 24 units) Total based on person's plan. |
| Path Outreach Case Management | PATH Homeless MH Case Management | Community Services Group | | | | X | Outreach services to those experiencing homelessness. Call PATH CM to request outreach services for those not open with LCBDHS or CSG. |

| Service | Luis Name | Provider | Utili. Review Approval Required for County Funding | Luis Authorization Required for county funding | Perform Care funded service | County MH funded Service | Comments on County Funded Services |
|---|---|-----------------------------|---|---|--------------------------------------|--------------------------------|---|
| Intensive Case Mgt | Intensive Case Management | Community Services Group | | X | X | X | Referral goes to case assignment. 1 unit = 15 min Total based on person's plan. |
| Blended Case Management | Blended Case Management | Community Services Group | | X | X | X | Referral goes to case assignment. 1 unit = 15 min Total based on person's plan. |
| Mobile Psych Rehab | Mobile Psychiatric Rehab Service | Community Services Group | | X | | X | Referral goes to provider. 15 min = 1 unit Total based on person's plan. |
| Adult MD Psych Eval | Psychiatric Evaluation MD Event Adult | Community Services Group | x | X | X | x | 1 unit = 1 psych evaluation. Only approved for people who are being opened with CSG ICM or approved by Deputy Director |
| Adult MD Psych Eval with Interpreter | Psychiatric Evaluation MD Event Adult w/Interpreter | Community Services Group | X | X | X | x | 1 unit = 1 psych evaluation. Only approved for people who are being opened with CSG ICM or approved by Deputy Director |
| Adult CRNP Psych Eval | Psychiatric Evaluation CRNP Event Adult | Community Services Group | х | x | x | x | 1 unit = 1 psych evaluation. Only approved for people who are being opened with CSG ICM or approved by Deputy Director |
| Individual Therapy 45-50 minutes | Site-based Individual Psychotherapy, 45 minutes | Community Services Group | x | X | X | x | Referral goes to provider. 45-50 min = 1 unit. Maximum of 24 units per fiscal year. Approval of UR for more than 24 units. |

| Service | Luis Name | Provider | Utili. Review Approval Required for County Funding | Luis Authorization Required for county funding | Perform Care funded service | County MH funded Service | Comments on County Funded Services |
|---|---|-----------------------------|---|---|--------------------------------------|--------------------------------|---|
| 5 minute Medication Checks MD | Medication Management MD, Level 1 | Community Services Group | X | X | X | x | 1 unit = 15min. Only approved for people who are open with CSG ICM or approved by Deputy Director for LCBHDS funding |
| 5 minute Medication Checks CRNP | Medication Management, CRNP/PA Level 1 | Community Services Group | Х | X | X | x | 1 unit = 15min. Only approved for people who are open with CSG ICM or approved by Deputy Director for LCBHDS funding |
| 15 minute Medication Checks MD | Medication Management MD, Level 3 | Community Services Group | x | x | X | X | 1 unit = 15min. Only approved for people who are open with CSG ICM or approved by Deputy Director for LCBHDS funding |
| 15 minute Medication Checks CRNP | Medication Management, CRNP/PA Level 3 | Community Services Group | X | X | X | X | 1 unit = 15min. Only approved for people who are open with CSG ICM or approved by Deputy Director for LCBHDS funding |
| 15 minute Medication Checks MD w/ interrupter | Medication Management, MD w/ Interpreter, level 3 | Community Services Group | X | X | X | X | 1 unit = 15min. Only approved for people who are open with CSG ICM or approved by Deputy Director for LCBHDS funding |
| 15 minute Medication Checks CRNP w/ interpreter | Medication Management CRNP/PA, w/Interpreter, Level 3 | Community Services Group | X | X | X | X | 1 unit = 15min. Only approved for people who are open with CSG ICM or approved by Deputy Director for LCBHDS funding |

| Service | Luis Name | Provider | Utili. Review Approval Required for County Funding | Luis Authorization Required for county funding | Perform Care funded service | County MH funded Service | Comments on County Funded Services |
|---|---|-----------------------------|---|---|--------------------------------------|--------------------------------|---|
| Clozaril Clinic | Clozaril Monitor & Eval Visit | Community Services Group | x | X | X | X | 1 unit = 15min. Only approved for people who are open with CSG ICM or approved by Deputy Director for LCBHDS funding |
| Adult Partial Hospital. | Partial Hospitalization, Adult | Community Services Group | X | X | X | x | Referral goes to provider. 1 hr = 1 unit (6 units = 6hr day) Units based on plan of number of days per week the person will attend. |
| Adult Dual Partial Hospital | Partial Hospitalization, Adult Dual MH/ID | Community Services Group | x | X | X | x | Referral goes to provider. 1 hr = 1 unit (6 units = 6hr day) Units based on plan of number of days per week the person will attend. |
| Social Rehabilitation and CHIPP Social Rehabilitation | MH Site Based Social Rehabilitation | Community Services Group | | X | | X | Referral goes to provider. 15 min = 1 unit (24 units = 6hr day) Units based on plan of number of days per week the person will attend. |
| IHELP | Supported Housing | Community Services Group | | X | | X | Referral goes to Provider 1 unit = 15 min |
| Columbia CRR | MH CRR Maximum | Community Services Group | | X | | X | Referral goes to provider and CHIPP Coordinator through email. 1 unit = 1 day |
| Lemon St CRR | MH CRR Intensive | Community Services Group | | X | | X | Referral goes to provider and CHIPP Coordinator through email. 1 unit = 1 day |

| Service | Luis Name | Provider | Utili. Review Approval Required for County Funding | Luis Authorization Required for county funding | Perform Care funded service | County MH funded Service | Comments on County Funded Services |
|------------------------------|---|--------------------------------|---|---|--------------------------------------|--------------------------------|---|
| Family Based | Family Based Rehab Services Behavioral Health Counseling and Therapy | Community Services Group | | X | X | X | Referral goes through Intake and Children's Senior Program Evaluator for approval for County funding. 1 unit = 15 min. |
| Compeer | N/A | Mental Health America | | | | (part) X | Referral goes to provider. |
| Extended Shelter | Facility Based Vocation Rehab | Ephrata Area Rehabilitation | | X | | X | Referral goes to provider. 15 min = 1 unit (24 units = 6hr day) Units based on plan of number of days per week the person will attend. |
| Work Activities | Mobile Work | Ephrata Area Rehabilitation | | × | | x | Referral goes to provider. 15 min = 1 unit (24 units = 6hr day) Units based on plan of number of days per week the person will attend. |
| Deaf Translation Services | N/A | Easter Seals | | | | X | see supervisor on accessing. Only for Lancaster County MH Case Management and Crisis Intervention. |
| Work Activities | Facility Based Vocation Rehab | Goodwill | | X | | X | Referral goes to provider. 15 min = 1 unit (24 units = 6hr day) Units based on plan of number of days per week the person will attend. |
| Work Activities/ MWC | Mobile Work | Goodwill | | X | | X | Referral goes to provider. 15 min = 1 unit (24 units = 6hr day) Units based on plan of number of days per week the person will attend. |

| Service | Luis Name | Provider | Utili. Review Approval Required for County Funding | Luis Authorization Required for county funding | Perform Care funded service | County MH funded Service | Comments on County Funded Services |
|---|---------------------------|----------|---|---|--------------------------------------|--------------------------------|---|
| Acute Crisis Diversion Program (Crisis Diversion) | Acute Crisis Diversion | Holcomb | | X | X | X | Referral goes through Crisis Intervention. Provider Specialist will enter auth for any person approved for LCBHDS funding. (1 unit = 8 hours) Initial authorization will be for 15 units. All people not open with LCBDHS approved for funding will be sent to provide via email to be invoiced. All extensions must be approved by Deputy Director of MH at 48 hour increments. |
| Acute Crisis Diversion Program (stepdown from inpatient) | Acute Crisis Diversion | Holcomb | | X | X | X | Referral for LCBHDS funding goes to State Hospital Liaison. Provider Specialist will enter auth for any person approved for LCBHDS funding. (1 unit = 8 hours) Initial authorization will be for 21 units. All extensions past the initial 5 days must be approved by Deputy Director of MH at 48 hour increments. Referral for PerformCare funding must go through PerformCare. |

| Service | Luis Name | Provider | Utili. Review Approval Required for County Funding | Luis Authorization Required for county funding | Perform Care funded service | County MH funded Service | Comments on County Funded Services |
|---|--|--|---|---|--------------------------------------|--------------------------------|---|
| Drop-in Center | N/A | Involved Consumer Action Network | | | | X | Referral goes to provider |
| Pennshire CRR | MH CRR Intensive | Keystone Service Systems | | x | | X | Referral goes to provider and CHIPP Coordinator through email. 1 unit = 1 day |
| Supportive Living | Supported Housing | Keystone Service Systems | | X | | X | Referral goes to provider. 15 min = 1 unit Total based on person's plan. |
| Wabank Rd CRR | MH CRR Maximum | Keystone Service Systems | | X | | X | Referral goes to provider and CHIPP Coordinator through email. 1 unit = 1 day |
| Respite (30 day) | Respite Care, Adult | Keystone Service Systems | | X | | X | Referral goes to provider through email. 1 unit = 1 day. A person may not exceed 30 days within a fiscal year unless approved by MH Deputy Dir. |
| CHIPP Supportive Living | MH CRR Moderate | Keystone Service Systems | | X | | X | Referral goes to provider and CHIPP Coordinator through email. 1 unit = 1 day |
| Residential Program for Recovery | MH Residential Program for Recovery | Keystone Service Systems | | X | | X | Referral goes to provider and CHIPP Coordinator through email. 1 unit = 1 day |
| Transitional Age Residential Program | MH Transitional Age Residential Program | | | X | | X | Request for service goes to TAP Case Manager Supervisor. Referral is than presented to provider. 1 unit = 1 day. The person must be 18 - 25 years of age. |

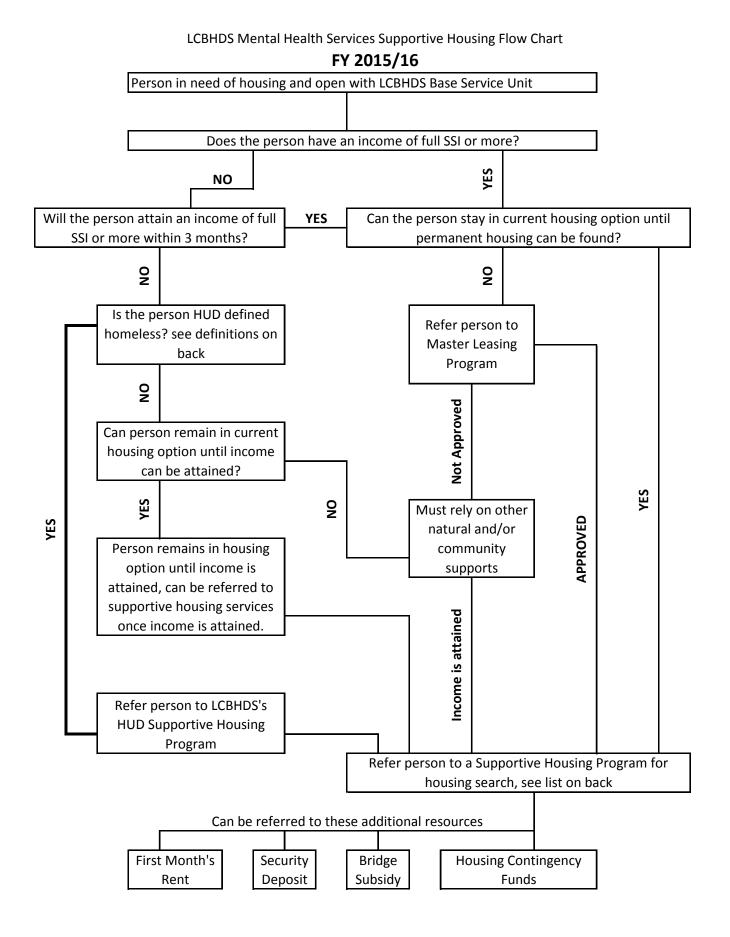
| Service | Luis Name | Provider | Utili. Review Approval Required for County Funding | Luis Authorization Required for county funding | Perform Care funded service | County MH funded Service | Comments on County Funded Services |
|--|------------------------|--------------------------|---|---|--------------------------------------|--------------------------------|---|
| Lab Tests | MH Laboratory Tests | Lancaster General | | X | X | X | Normally 1 unit per test per month. Consumer can be given a note with their BSU# and effective date to start service |
| Language Interpreter | N/A | Language Line | | | | x | see supervisor on accessing. Only for Lancaster County MH Case Management and Crisis Intervention. |
| LCBHDS HUD Programs | N/A | LCBHDS | | | | X | Supportive Housing Referral goes to MH Housing Specialist see Supportive Housing Matrix for criteria |
| First Month's Rent and Security Deposit | N/A | LCBHDS | | | | X | Supportive Housing Referral goes to MH Housing Specialist see Supportive Housing Matrix for criteria |
| Bridge Subsidy | N/A | LCBHDS | | | | X | Supportive Housing Referral goes to MH Housing Specialist see Supportive Housing Matrix for criteria |
| Peer Educator | N/A | Mental Health America | | | | X | Peer Educator visits local inpatient hospitals and Lancaster County Prison to support current patients/inmates. |
| Housing Contingency Funds Programs | N/A | Mental Health America | | | | x | Supportive Housing Referral goes to MH Housing Specialist see Supportive Housing Matrix for criteria MHA is the fiduciary. |

| Service | Luis Name | Provider | Utili. Review Approval Required for County Funding | Luis Authorization Required for county funding | Perform Care funded service | County MH funded Service | Comments on County Funded Services |
|---|---|---------------|---|---|--------------------------------------|--------------------------------|--|
| MH Contingency | N/A | Mental Health | | | | X | Funds request form goes to MH |
| Funds Program | | America | | | | | Deputy Director for approval |
| Family Based | Family Based Rehab Services Behavioral Health Counseling and Therapy | Philhaven | | X | X | x | Referral goes through Intake and Children's Senior Program Evaluator for approval for County funding. 1 unit = 15 min. |
| Diversion Program | MH Diversion Program | Philhaven | | X | | x | Referral goes through Hospital Liaison. 1 unit = 1 day. A person may not exceed 90 days within a fiscal year unless approved by MH Deputy Dir. |
| Adult MD Psych 60 min Eval | Psychiatric Evaluation MD Event Adult | Philhaven | x | x | X | x | Referral goes to provider. 15 min = 1 unit Clerical Supervisor will enter auths |
| Adult MD Psych Eval with Interpreter | Psychiatric Evaluation MD Event Adult w/Interpreter | Philhaven | x | X | x | x | Referral goes to provider. 15 min = 1 unit Clerical Supervisor will enter auths |
| Child MD Psych 60 min Eval | Psychiatric Evaluation MD Event Child | Philhaven | x | X | х | x | Referral goes to provider. 15 min = 1 unit Clerical Supervisor will enter auths |
| Adult CRNP Psych Eval | Psychiatric Evaluation CRNP Event Adult | Philhaven | x | X | x | x | Referral goes to provider. 15 min = 1 unit Clerical Supervisor will enter auths |
| 5 minute Medication Checks MD | Medication Management, MD, Level 1 | Philhaven | x | X | x | x | Referral goes to provider. 15 min = 1 unit Clerical Supervisor will enter auths |

| Service | Luis Name | Provider | Utili. Review Approval Required for County Funding | Luis Authorization Required for county funding | Perform Care funded service | County MH funded Service | Comments on County Funded Services |
|---|--|-----------|---|---|--------------------------------------|--------------------------------|---|
| 5 minute Medication Checks CRNP | Medication Management, CRNP/PA, Level 1 | Philhaven | x | x | X | X | Referral goes to provider. 15 min = 1 unit Clerical Supervisor will enter auths |
| Adult CRNP Psych 60 minute Eval | Psychiatric Evaluation CRNP Event Adult | Philhaven | x | x | x | x | Referral goes to provider. 15 min = 1 unit Clerical Supervisor will enter auths |
| 15 minute Medication Checks MD | Medication Management MD, Level 3 | Philhaven | X | X | X | X | Referral goes to provider. 15 min = 1 unit Clerical Supervisor will enter auths |
| 15 minute Medication Checks CRNP | Medication Management CRNP/PA, Level 3 | Philhaven | X | x | X | X | Referral goes to provider. 15 min = 1 unit Clerical Supervisor will enter auths |
| 15 minute Medication Checks MD w/ interpreter | Medication Management MD W/Interpreter, Level 3 | Philhaven | X | X | X | X | Referral goes to provider. 15 min = 1 unit Clerical Supervisor will enter auths |
| 15 minute Medication Checks CRNP w/ interpreter | Medication Management CRNP/PA, w/Interpreter, Level 3 | Philhaven | X | X | X | X | Referral goes to provider. 15 min = 1 unit Clerical Supervisor will enter auths |
| Clozaril Clinic | Clozaril Monitor & Eval Visit | Philhaven | X | X | X | X | Referral goes to provider. 15 min = 1 unit Clerical Supervisor will enter auths |
| Mental Health Assessment | Mental Health Assessment, by non- Physician Masters level | Philhaven | X | X | X | X | Referral goes to provider. 15 min = 1 unit Clerical Supervisor will enter auths |

| Service | Luis Name | Provider | Utili. Review Approval Required for County Funding | Luis Authorization Required for county funding | Perform Care funded service | County MH funded Service | Comments on County Funded Services |
|-----------------------------------|---|-------------------------------------|---|---|--------------------------------------|--------------------------------|---|
| 30 minute Therapy Consult | Site-based Individual Psychotherapy, 30 minutes | Philhaven | X | X | X | x | Referral goes to provider. 15 min = 1 unit Clerical Supervisor will enter auths |
| Peer Support Services | Peer Support Service | Recovery InSight | | X | X | x | Referral goes to provider. Person must not be eligible for CBHNP funded Peer Support Services unless approved by MH Deputy Dir. |
| 15 minute MD Medication Checks | Medication Management MD, Level 3 | Spanish American Civic Assoc. | | X | X | X | Referral goes to provider. 15 min = 1 unit (med checks = 1 unit) |
| Individual Therapy | Site-based Individual Psychotherapy, 30 minutes | Spanish American Civic Assoc. | | X | X | x | Referral goes to provider. 15 min = 1 unit. Maximum of 48 units per fiscal year. Approval of Deputy Dir for more than 48 units. |
| Group Therapy | Site-based Group Psychotherapy | Spanish American Civic Assoc. | | X | X | X | Referral goes to provider. 15 min = 1 unit. Maximum of 48 units per fiscal year. Approval of Deputy Dir for more than 48 units. |
| Administrative Case Management | N/A | Spanish American Civic Assoc. | | | | X | Must be open with Neustra Clinica for Case Management through SACA. |
| Psychiatric Eval | Psychiatric Evaluation MD Event Adult | Spanish American Civic Assoc. | | X | X | X | Referral goes to provider. 15 min = 1 session (psych eval = 1 session) |

| Service | Luis Name | Provider | Utili. Review Approval Required for County Funding | Luis Authorization Required for county funding | Perform Care funded service | County MH funded Service | Comments on County Funded Services |
|------------------------------------|---|---------------------|---|---|--------------------------------------|--------------------------------|---|
| PATH Critical Time Intervention | PATH Critical Time Intervention Program | Tabor | | X | | X | Supportive Housing Referral goes to MH Housing Specialist see Supportive Housing Matrix for criteria |
| HUD Supported Housing | HUD Supported Housing | The Lodge | | X | | X | Supportive Housing Referral goes to MH Housing Specialist see Supportive Housing Matrix for criteria, must be a participant of LCBHDS HUD programs. |
| Creative Housing Solutions | Health Choices Supported Housing | The Lodge | | X | | x | Supportive Housing Referral goes to MH Housing Specialist see Supportive Housing Matrix for criteria |
| Supportive Housing | Supported Housing | The Lodge | | X | | X | Referral goes to provider. CM must call and send the referral. 15 min = 1 unit Total based on person's plan. |
| Master Leasing | N/A | The Lodge | | | | X | Supportive Housing Referral goes to MH Housing Specialist see Supportive Housing Matrix for criteria |
| Park Ave | N/A | Community Basics | | | | X (partial) | All referrals for openings will be reviewed by Deputy Director, Housing Specialist and CHIPP Cord. No Waiting list will be held. See Supportive Housing Matrix, |
| Prison Group Therapy | N/A | YWCA | | | | X (partial) | Group therapy women in Lancaster County Prison |



- A. HUD's definition of homelessness for eligibility for LCBHDS's HUD Supportive Housing Programs (SHP)
 - a. A person must meet the defined criteria to be eligible for LCBHDS's HUD SHP:
 - i. Category 1 literally Homeless individual who lacks a fixed, regular and adequate nighttime residence, meaning:
 - 1. Has a primary nighttime residence that is a public or private place not meant for human habitation
 - 2. Is living in a publically operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing and hotel and motels paid for by charitable organizations or by federal, state and local government programs
 - 3. Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering the institution
 - 4. If the individual is coming from transitional housing, they must have originally come from the street or emergency shelter
 - 5. Individual must have a disability
 - ii. Must be an unaccompanied adult, no families or children can be accepted
 - iii. Must have an open record with Lancaster County BH/DS Base Service Unit
 - iv. Must be Lancaster County resident for one year or more (administrative review for any person not meeting this criteria)
- B. LCBHDS Supportive Housing Programs (see Supportive Housing Matrix for more details)
 - a. Supportive Housing Service only
 - i. Housing Search
 - 1. Community Services Group IHELP referral to provider
 - 2. Tabor Community Services PATH Critical Time Intervention long term (9 months post housing) referral to LCBHDS Housing Specialist
 - The Lodge Life Services Creative Housing Solutions short term (1-3 months) and medium term (3-6 months post housing) referral to LCBHDS Housing Specialist
 - ii. Maintaining Housing
 - 1. Keystone Supportive Living Program up to two years referral to provider
 - 2. The Lodge Life Services Supported Housing Program up to two years referral to provider
 - The Lodge Life Services PEN SHP (Polaris/Enterprise/North Star) to serve all participants of LCBHDS HUD programs from time of admission to discharge.
 - b. Rental Assistance
 - i. First Month's Rent referral to LCBHDS Housing Specialist
 - ii. Security Deposit referral to LCBHDS Housing Specialist
 - Bridge Subsidy 3-6 months from titrated to 100% subsidy referral to Housing Specialist
 - c. Master Leasing up to 90 days of rent free single room occupancy referral to LCBHDS Housing Specialist

Important Facts About LCBHDS Supportive Housing Programs Fiscal Year 2016/17

d. Housing Contingency Funds – can provide funds for utility deposits, utility assistance, moving costs, mattresses and other housing needs – referral to LCBHDS Housing Specialist

| Supported Housing Program Name | Supportive Housing Program (SHP) (Started in 1995) | Supportive Living Program (started 1998 with the closure of Moderate CRR on College Ave) | (IHELP) (started in 2010 with the closure of the Moderate CRR at Oakview Estates) | Project Assistance for the Homeless (PATH) Critical Time Intervention Program (CTI) (Started in 2009 with grant) |
|---|---|--|---|---|
| Type of Housing Program | Supportive Services Only | Supportive Services Only | Supportive Services Only | Supportive Services Only |
| Funders | Lancaster County BHDS | Lancaster County BHDS | Lancaster County BHDS | Lancaster County BHDS's PATH Grant |
| Provider | The Lodge Life Services | Keystone Human Services of Lancaster | Community Services Group | Tabor Community Services |
| Provider Office | 315 W. James Street Suite 106 | 1139 Wabank Road Apt H302, | 790 New Holland Ave. | 308 E King St Lancaster, PA |
| Location | Lancaster, PA 17603 | Lancaster, PA 17603 | Lancaster, PA 17602 | 17603 |
| Provider Phone | 717-368-5225 | 717-368-1509 | 717-293-5104 | 717-397-5182 |
| Referral Process | Referral is made directly to provider. | Referral is made directly to provider. | Referral is made directly to | Referral is made to Lancaster |
| | No UR or Administrative Review | No UR or Administrative Review | provider. No UR or | County BHDS's Housing |
| | required. | required | Administrative Review required | Specialist. Referral must be approved by LCBHDS Deputy Director of MH |
| Referral form to be | Lodge Referral Form in Fill-in Program | Keystone Supported Living Referral in | CSG IHELP Referral Form in Fill- | Supportive Housing Referral in |
| used | or in Fill-in Forms folder | Fill-in Program or in Fill-in Forms folder | in Program or in Fill-in Forms folder | Fill-in Program or in Fill-in Forms folder |
| Provider Fax | 717-392-0102 | 717-394-0442 | 717-293-5104 | 717-399-4127 |
| Current Program Supervisor/ Program Contact | Amanda Grosh | Brenda Mortimer | Janice Longacre | Diane Brown |
| Supervisor's/ Program Contact Email | <u>Agrosh@lodgelifeservices.org</u> | bmortimer@keystonehumanserv ices.org | longacrej@csgonline.org | <u>dbrown@tabornet.org</u> |
| Number of Full Time | 2 1/2 Fulltime Direct Service Staff, 1/2 | 2 Fulltime direct staff, 1 supervisor | 3 1/2 Fulltime direct staff, 1/2 | 1 direct staff for housing |
| Direct Service Staff | of a Supervisor | (has a 1/2 caseload) | fulltime supervisor | support |
| Maximum Number of People Served | 60 people | 28 people | 20-25 people | 20-25 people |

| Community Housing Program Name | Supportive Housing Program (SHP) | Supportive Living Program | (IHELP) | Project Assistance for the Homeless (PATH) Critical Time Intervention Program (CTI) |
|--|---|---|--|---|
| Approved Referral Sources | Lancaster County LCBHDS's MH Case Management and Supports Coordination, CSG Case Mgt | Lancaster County LCBHDS's MH Case Management and Supports Coordination, CSG Case Mgt, Nuestra Clinica CM | Lancaster County LCBHDS's MH Case Management and Supports Coordination, CSG Case Mgt, Nuestra Clinica CM | Lancaster County LCBHDS's MH Case Management and Supports Coordination, CSG Case Mgt, Nuestra Clinica CM |
| Approvals Needed for Program | None | None | None | Must be approved by LCBHDS MH Deputy Director |
| Criteria for Program | Open with Lancaster MH Services | Open with Lancaster MH Services | Open with Lancaster MH Services. | Must meet PATH defined homeless or at risk of homelessness: This includes all HUD defined homeless plus doubling up, motel, unaffordable and/or unsafe living conditions, jail, institutions and residential |
| Rental Assistance | None by Lancaster County LCBHDS, provider will assist in attaining community resources for subsidies or assistance | None by Lancaster County LCBHDS, provider will assist in attaining community resources for subsidies or assistance | None by Lancaster County LCBHDS, provider will assist in attaining community resources for subsidies or assistance | No rental assistance is offered, supportive services only in finding and maintaining safe and affordable housing. |
| Average Amount of Direct Service Time | Generally a hour to two hours per week | Generally 3 hours per week, more at needed | Generally a hour to two hours per week | In the first three months after housing, three hours per week, second three months is 1-2 hours per week, third three months would be 1-2 hours every other week |
| Program Hours | M-F 9AM-5PM, can be flexible depending on individual's needs | Generally M-F 8AM-9PM, Sat and Sun 9AM-5PM, flexible hours depending on person's needs | Generally M-F 8AM-8PM, weekend and later evening hours are available to meet person's needs. 24 hour On- call is available | Housing Support is offered Mon- Fri 8.30AM - 5PM. |

| Community Housing Program Name | Supportive Housing Program (SHP) | Supportive Living Program | (IHELP) | Project Assistance for the Homeless (PATH) Critical Time Intervention Program (CTI) |
|---|---|--|---|---|
| Length of Time a Person is in the Program | Varies by each person, generally less than two years | 3months - 2 years, additional length of time based on persons' needs | up to 9-12 months for those who are in danger of losing their housing or those who are homeless | The program is evidence-based and set to end nine months after housing. The program is integral to link community and natural supports. |
| Types of Housing Supports | Housing supports in maintaining housing, life skills, budgeting, accessing public transportation, promoting natural and other community supports | Housing supports in maintaining housing, life skills, budgeting, accessing public transportation, promoting natural and other community supports | Housing supports in finding and maintaining housing, life skills, budgeting, accessing public transportation, promoting natural and other community supports | Housing supports in finding and maintaining housing, life skills, budgeting, accessing public transportation, promoting natural and other community supports |

| Supported Housing | Health Choices Reinvestment | Health Choices Reinvestment | Health Choices Reinvestment | Health Choices Reinvestment |
|-----------------------|-------------------------------------|-------------------------------------|---------------------------------------|-------------------------------------|
| Program Name | Bridge Housing (started in 2014 | Master Leasing Housing (started | Contingency Funds (started in 2014 | Supportive Housing Services |
| | with HC Reinvestment) | in 2014 with Health Choices | with Health Choices Reinvestment) | Creative Housing |
| | | Reinvestment) | | Solutions(started in 2014 with |
| | | , | | Health Choices Reinvestment) |
| | | | | , |
| Type of Housing | Short term subsidized Rent only | Rooms provided to people for not | | Supportive Services only |
| Program | | more than 90 days | mattresses, utility deposits and etc. | |
| | | | for housing only | |
| Funders | Health Choices Reinvestment | Health Choices Reinvestment | Health Choices Reinvestment | Health Choices Reinvestment |
| | | | | |
| Provider | Lancaster County BHDS | Lancaster County BHDS and The | Lancaster County BHDS | The Lodge Life Services |
| | | Lodge Life Services | | |
| Provider Office | 150 N. Queen St Suite 610 | 710 Race Avenue Lancaster, PA | 150 N. Queen St Suite 610 | 315 W James Street Suite 106 |
| Location | Lancaster, PA 17603 | 17603 | Lancaster, PA 17603 | Lancaster, PA 17603 |
| Provider Phone | 717-299-8027 | 717-847-5547 | 717-299-8027 | 717-847-5547 |
| Referral Process | Referral is made to Lancaster | Referral is made to Lancaster | Referral is made to Lancaster | Referral is made to Lancaster |
| | County BHDS's Housing Specialist. | County BHDS's Housing Specialist. | County BHDS's Housing Specialist. | County BHDS's Housing |
| | Referral must be approved by | Referral must be approved by | Referral must be approved by | Specialist. Referral must be |
| | LCBHDS Deputy Director of MH | LCBHDS Deputy Director of MH. | LCBHDS Deputy Director of MH | approved by LCBHDS Deputy |
| Referral form to be | Supportive Housing Referral in | Supportive Housing Referral in | Supportive Housing Referral in Fill- | Director of MH |
| | | | | Supportive Housing Referral in |
| used | Fill-in Program or in Fill-in Forms | Fill-in Program or in Fill-in Forms | in Program or in Fill-in Forms folder | Fill-in Program or in Fill-in Forms |
| | folder | folder | | folder |
| Provider Fax | 717-295-3680 | 717-392-0102 | 717-295-3680 | 717-392-0102 |
| Current Program | John Stygler | Lisa Gockley | John Stygler | Lisa Gockley |
| Supervisor/ Program | | | | |
| Contact | | | | |
| Supervisor's/ Program | jstygler@co.lancaster.pa.us | lgockley@lodgelifeservices.org | jstygler@co.lancaster.pa.us | lgockley@lodgelifeservices.or |
| Contact Email | | | | g |
| Number of Full Time | none | none | none | 1 Full time staff |
| Direct Service Staff | | | | |
| | | | | |
| Maximum Number of | not limited, based on funding | 4 single rooms | not limited, based on funding | 18-25 people will vary based on |
| People Served | availability | | availability | needs of people opened |

| Community Housing | Health Choices Reinvestment | Health Choices Reinvestment | Health Choices Reinvestment | Health Choices Reinvestment |
|----------------------|-------------------------------------|-------------------------------|------------------------------------|---------------------------------|
| Program Name | Bridge Housing | Master Leasing Housing | Contingency Funds | Supportive Housing Services |
| | | | | |
| Approved Referral | Lancaster County LCBHDS's MH | Lancaster County LCBHDS's MH | Lancaster County LCBHDS's MH Case | Lancaster County LCBHDS's MH |
| Sources | Case Management and Supports | Case Management and Supports | Management and Supports | Case Management and Supports |
| | Coordination, CSG Case Mgt, | Coordination, CSG Case Mgt, | Coordination, CSG Case Mgt, | Coordination, CSG Case Mgt, |
| | Nuestra Clinica CM, Philhaven | Nuestra Clinica CM, Philhaven | Nuestra Clinica CM, Philhaven ACT, | Nuestra Clinica CM, D&A Case |
| | ACT_D&A Case Mgt | ACT_D&A Case Mgt | D&A Case Møt | Møt |
| Approvals Needed for | Must be approved by LCBHDS MH | | Must be approved by LCBHDS MH | Must be approved by LCBHDS |
| Program | Deputy Director | Deputy Director | Deputy Director | MH Deputy Director |
| Criteria for Program | Based on need of the person | Based on need of the person | Based on need of the person | Based on need of the person |
| | | | | |
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| | | | | |
| Rental Assistance | Program can provide two to six | Single Room Occupancy paid | Program can provide first month's | no subsidy |
| | month subsidy based on a | 100% by the program for a | rent in full | |
| | housing plan which could include | maximum of 90 days | | |
| | titrating rent over a period not to | | | |
| | exceed 6 months. | | | |
| | | | | |
| Average Amount of | None, must be linked to other | None, must be linked to other | None, must be linked to other | Short term with the focus on |
| Direct Service Time | supportive services | supportive services | supportive services | finding a place and moving the |
| | | | | person on to medium term |
| | | | | which can be up to nine months, |
| | | | | including the time of housing |
| | | | | search. |
| Program Hours | None | None | None | M-F 8.30am-5pm |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| Community Housing Program Name | Health Choices Reinvestment Bridge Housing | Health Choices Reinvestment Master Leasing Housing | Health Choices Reinvestment Contingency Funds | Health Choices Reinvestment Supportive Housing Services Creative Housing Solutions |
|---|---|---|---|---|
| Length of Time a Person is in the Program | no more than 6 months | no more that 90 days, no extensions will be considered | one time only | up to nine months from program entry |
| Types of Housing Supports | None, must be linked to other supportive services | None, must be linked to other supportive services | None, must be linked to other supportive services | Housing supports in finding and maintaining housing, life skills, budgeting, accessing public transportation, promoting natural and other community supports |

| Supported Housing Program Name | Park Avenue Project (started in 2009) | HUD Supportive Housing Programs (North Star (2009), Enterprise (2011) and Polaris(2010)) | HUD Supportive Housing Services- PEN SHP (Polaris/Enterprise/North Star Supported Houisng Porgram) (started in 2016) |
|-----------------------------------|--|---|---|
| Type of Housing Program | Subsidized Rent only | Subsidized Rent only | Supportive Services only |
| Funders L | Lancaster County BHDS, Community Basics and The Lodge | HUD and Lancaster County BHDS | HUD and Lancaster County BHDS |
| Provider F | Park Ave Associates, LLC/ The Lodge | Lancaster County BHDS | The Lodge Life Services |
| Provider Office Location | 941 Wheatland Avenue, Suite 204 | 150 N. Queen St Suite 610 | 315 W. James Street Suite 106 |
| | Lancaster, PA 17603 | Lancaster, PA 17603 | Lancaster, PA 17603 |
| Provider Phone | 717-735-9590 | 717-299-8027 | 717-368-5225 |
| Referral Process | No referral taken. CHIP/P | Referral is made to Lancaster | Services are automatic once a person |
| | Coordinator and Deputy Director of | County BHDS's Housing Specialist. | is approved for one of LCBHDS's HUD |
| | MH will select candidates. | Referral must be approved by LCBHDS's Subsidized Housing Panel | programs |
| Referral form to be used | No referral taken. CHIP/P | Supportive Housing Referral in Fill- | no referral needed, based on HUD |
| (| Coordinator and Deputy Director of | in Program or in Fill-in Forms | approval |
| | MH will select candidates. | folder | |
| Provider Fax | 717-509-5714 | 717-295-3680 | 717-392-0102 |
| Current Program | Jo Raff | John Stygler | Amanda Grosh |
| Supervisor/ Program | | | |
| Contact | | | |
| Supervisor's/ Program | jraff@communitybasics.com | jstygler@co.lancaster.pa.us | Agrosh@lodgelifeservices.org |
| Contact Email | | | |
| Number of Full Time | 10 hours per week for all residents | none | 1 Full time staff |
| Direct Service Staff | of Park Ave. No one on one | | |
| | available. | | |
| Maximum Number of | 6 one bedroom apartments | 47 (North Star 12, Polaris 15 and | will support the participants in the 47 |
| People Served | | Enterprise 20) | units of HUD. |

| Community Housing Program Name | Park Avenue Project (projected start date of Sept 2010) | Polaris HUD Housing Project (started) and Enterprise Housing (to begin in Fall of 2011) | HUD Supportive Housing Services- PEN SHP (Polaris/Enterprise/North Star Supported Houisng Porgram) |
|--|---|--|--|
| Approved Referral Sources | No referral taken. CHIP/P Coordinator and Deputy Director of MH will select candidates. | Lancaster County LCBHDS's MH Case Management and Supports Coordination, CSG Case Mgt, Nuestra Clinica CM, Philhaven ACT | no referral needed, based on HUD approval |
| Approvals Needed for Program | Must be approved by MH Deputy Director and Park Ave Associates, LLC | Must be approved by LCBHDS HUD Panel | Must be approved by LCBHDS HUD Panel |
| Criteria for Program | Must meet rental criteria of Park Ave Associates, LLC which includes criminal background check, income verification, credit check and landlord references | Must meet HUD defined Homeless - on the streets, in a homeless shelter or in an approved HUD transitional living and was on the streets or in a shelter prior to going to the transitional living | Must be a participant in LCBHDS's HUD programs |
| Rental Assistance | Person pays 30% of their income to Park Ave and LCBHDS pays the balance of the rent due, include all utilities except telephone. | Person pays 30% of their income to LCBHDS. The person receives an utility allowance. | N/A |
| Average Amount of Direct Service Time | None, must be linked to other supportive services | None, must be linked to other supportive services | Person open in services upon admission to LCBHDS's HUD programs and will remain open until the person either graduates or is discharged from the HUD program |
| Program Hours | None | None | M-F 8.30am-5pm |

| Community Housing | Park Avenue Project (projected | Polaris HUD Housing Project | HUD Supportive Housing Services- |
|-------------------------|-----------------------------------|------------------------------------|------------------------------------|
| Program Name | start date of Sept 2010) | (started) and Enterprise Housing | PEN SHP (Polaris/Enterprise/North |
| | | (to begin in Fall of 2011) | Star Supported Houisng Porgram) |
| | | | |
| Length of Time a Person | Permanent but person is encourage | Program will support the person | until discharge from the HUD |
| is in the Program | to obtain other housing when | until resources are obtained to be | program |
| | income and recovery permit. | self sufficient in housing or if a | |
| | | administrative determination is | |
| | | made of lack of progress toward | |
| | | that goal after a one year lease. | |
| | | | |
| | | | |
| Types of Housing | None, must be linked to other | None, must be linked to other | Housing supports in finding and |
| Supports | supportive services | supportive services | maintaining housing, life skills, |
| | | | budgeting, accessing public |
| | | | transportation, promoting natural |
| | | | and other community supports. |
| | | | Engagement with SHP Worker is not |
| | | | required but will remain open with |
| | | | them during the time in LCBHDS's |
| | | | |