

PUBLIC HEARING/CENTER FOR FAMILY ENGAGEMENT MEETING MINUTES

OCTOBER 12, 2012

The Center for Family Engagement is a public/private collaboration that will coordinate and enhance community resources and foster new initiatives to meet the needs of families in Lackawanna County.

In attendance (from the sign-in sheet):

W. Browning	Director of Lackawanna County Human Services
E. Walsh	NBHCC
G. Dikeman	OMHSAS
L. Wright	OMHSAS
T. Bohenek	Lackawanna County Children & Youth Services
D. Albert	Greater Scranton YMCA
C. Holmes	Lackawanna County Area Agency on Aging
P. Sack	Lackawanna County Human Services
J. Zerechak	Lackawanna/Susq. D&A Programs
M. Hanley	United Neighborhood Centers
S. Arnone	Behavioral Health/Intellectual Disabilities/Early Intervention Program
L. Durkin	United Neighborhood Centers/co-chair
K. Browning	Lackawanna County Children & Youth Services
M. Sylvester	CCIS of Lackawanna County
S. Salerno	The Advocacy Alliance/CASA
B. Hoban	The Advocacy Alliance
S. Drob	UCP of NEPA
J. Hess	EOTC
T. Salva	Lourdesmont
J. Ueric	Lourdesmont
G. Drapek	United Way of Lackawanna/Wayne Counties
J. Altenhain	Lackawanna County Children & Youth Services
S. Cecacci	Scranton Lackawanna Human Development Agency/Headstart
J. Copeland	Women's Resource Center
M. Onukiavage	NAMI
S. Abdo	JFS of Lackawanna County
J. Wesley	Lackawanna County Children & Youth Services
J. Carrol	Lackawanna County Children & Youth Services
A. Rink	St. Joseph's Center
K. Thomas	Penn State Extension
D. Peterson	Voluntary Action Center
J. Jefferies	Catholic Social Services
S. Miller	Catholic Social Services
D. Gaudenzi	Tri-Valley Care
E. Griguts	SLHDA/Headstart
E. Donly	EOTC
Sr. Jacquinot	St. Joseph's
Sr. Walsh	Friends of the Poor
C. Seroka	Friends of the Poor

Kerry Browning and Lisa Durkin, co-chairs of the Center for Family Engagement group, opened the meeting. After brief introductions, they requested that anyone who has not attended the Center for Family Engagement meetings in the past, to please consider joining. Enrollment is always open and welcomed.

The meeting was then turned over to William Browning, Director of Human Services for Lackawanna County. Mr. Browning stated that the CFE forum was used for the public hearing as the information is also important to the expectations and needs of the Center for Family Engagement group. (Note: The CFE provides a link to the needs of the community with active service development through its partnerships with service providers, governmental entities and the HealthChoices Managed Care network.)

Lackawanna County had applied for an Act 80 2012-2013 block grant which it did not receive. Although the county did not receive the grant, it is still required to submit a coordinated plan regarding the 7 items contained in the block grant. The program would have given some flexibility to shift money among programs in order to meet specific needs for services and to provide these services more efficiently. The seven programs include community mental health services and mental disability services, the human services development fund, homeless assistance, child welfare grants, the Behavioral Health Services Initiative and Act 152 drug and alcohol programs.

A copy of the draft of the Human Services categoricals proposed budget and service recipients (Appendix B), the 2012-2013 Coordinated Plan booklet and an explanation of how the planning and needs assessment will flow were distributed to all attendees. Mr. Browning stated that the proposed budget is posted on the web and comments will be accepted on the site until October 29, 2012. The final product must be completed by October 31<sup>st</sup>.

Mr. Colin Holmes, Lackawanna County Area Agency on Aging, reported that their agency is not included in the Block Grant. Looking at their anticipated budget, the agency will be headed for tough times. Both providers and consumers will be affected. They are hoping to work through this fiscal year as best as they can. (Please refer to pages 3-4 of the Human Services booklet)

Mr. Steve Arnone, representing BHIDEI, announced that they are faced with a 10% fund reduction to their 6.7 million dollar behavioral health budget and their 4.4 million dollar intellectual disabilities budget. Many prospective changes are factored in including provider counsel, buffered funds and a new rate structure. Changes are considered necessary – they cannot continue their programs as they have in the past. Less costly programs are needed. BHIDEI providers have taken some measures to cost-effectiveness. Their goals and objectives remain the same - they are keeping health and safety foremost. It is their hope that the based funds will complement each other. (See pages 9-21)

Mr. Jeff Zerechak, Drug & Alcohol, stated that their service plan as listed on page 7 of the Coordinated Plan will remain unchanged. Thirty-one percent of the budget is allocated to Drug and Alcohol Services. However, as they are faced with a 10% cut, some of the processes to deliver these services have changed. Internal changes as well as provider cuts were made to help continue services. They are

seeking other funding options through the Department of Drug and Alcohol. This money is normally used for prevention services.

Mr. William Browning, Children & Youth Services, explained that some departmental changes have been made which have reduced duplication of services within the agency. Most CYS cases involve serious behavioral problems, drug and alcohol issues, and trauma due to violence, etc. Another issue is the increasing homeless population. Although there are other supports in the community, there is just not enough money.

The agency has a huge challenge – and will utilize better assessment tools without sacrificing safety. Many changes have been made within the agency to get to where they are now. CYS will be very assessment driven. The agency will use a clinically-based program through the examination of data and the support of the agency clinical unit to achieve their goals. Integration of services is greatly needed.

Sister Ann Walsh, Friends of the Poor, asked if the assessment will be done within the agency as CYS has only a small clinical department at this time. Mr. Browning explained that the planning and assessment is not just for CYS – service trends and needs of all services will be looked at. The Center for Family Engagement group (founded in 2006) began as a forum for identifying needs and brainstorming. Both line and administrative personnel are included in this process. Now, the role of the CFE will be to act as the forum for problem solving, referrals, and delivery of services connections. Past projects, such as The Integrated Service Plan and PAYS data are important tools, but we need more collaboration between agencies. Current services will be assessed to see if they are needed/out-dated. A plan will be made to maintain a provider network.

As funds are constantly decreasing, it is imperative that we be able to meet the needs of the community with the monies available. A 4% tax hike is necessary to maintain services, however, the commissioners do not want to raise taxes again as it may create more needed services for the constituents.

The deadline for the submittal of the Block Grant including a prospective analysis of needs is October 31, 2012.

HealthChoices Managed Care network: Ms. E. Walsh was on-hand to explain the NBHCC, in existence since 2006. The NBHCC is a not-for-profit agency in Lackawanna/Susquehanna/Wyoming/Luzerne County which holds the Medicaid contract with the Department of Public Welfare. They subcontract with Community Care who handles the provider network. The program is data-driven and offers information and information gathering assistance regarding funding and quality of services.

Mr. Browning added that the direct link-quality assessment with linkage to providers is necessary as the pie is getting smaller. We need to meet the needs as well as we can. It is very important to be at the table (of the CFE) and to be a part of this forum. If you need to get in touch with Mr. Browning regarding any of the above, please e-mail the CFE – which will forward your e-mail to Mr. Browning.

Ms. E. Donly, EOTC, asked if Mr. Browning felt that the structure of the CFE would be sustainable.

Mr. Browning replied that this has been the goal. Input will need to be elevated to make a difference. Direct services are very hard to provide with less money. A higher level of collaboration is needed in order to appreciate an outcome.

What changes will be made to the Center for Family Engagement?

1. More committees
2. More formalized
3. Work groups will be formed as necessary per data collection
4. Outcome data will be looked at re: partnerships, etc.
5. The County will decide which services will be used after assessing their helpfulness and genuine need
6. Referrals will be made where the money will make the most meaningful impact re: needs
7. Education and Faith-Based committees will continue based on the PAYS data
8. Grants will be sought
9. More data and a formal linkage will be available
10. Quality assessment reviews will be made showing where parallels and intercepts appear including staff reductions/role changes.

Ms. Deb Peterson, VAC, asked what the priority areas will be....Mr. Browning replied that the priorities will be based on the data and the money available. The current priorities have been realized by the liaisons with the school's coordination and quality assurance. The priorities may change – and cannot be isolated anymore.

Ms. Judy Copeland, WRC, asked if we should invite the Housing Authority to join our group. It was agreed that the Housing Authority is a needed member. We may be missing out on grants and may be eligible for more with their input. Ms. Copeland added that she has received many calls for shelter assistance. WRC runs a safe house for battered women only – and she must refer the homeless to other agencies – but there is no funding.

CYS has also recently seen an alarming increase in homelessness. What programs can be developed? Can money be re-allocated from another source?

It was also asked if the CFE would keep its existing forum or add other providers. Can Behavioral Health be represented? Yes, BH will be represented and the CFE will try to sustain as many programs as possible.

S. Ceccacci, SLHDA/Headstart, proposed that CFE become a clearing house and partnership/consortium for grant writing. This would be a great opportunity for funding with a linkage to the community justice advisory board.

D. Albert, YMCA, asked for an inventory of current providers. D. Peterson, VAC, informed the group that her agency has a hard copy of service providers within the community. The list is also available on-line.

Mr. Browning added that the Arts/Recreation Programs need to be sustained. Approximately 2,000 children can and have been served with the same cost as placing four children in detention. Prevention services are critical. Pennsylvania is 8<sup>th</sup> in the nation for incarcerations -

The Center for Family Engagement meets the second Friday of the month at 1:30pm – you must RSVP to the email you receive in order for the group to have enough space available for those attending. The location will be announced based on the number of attendees.

The Center for Family Engagement is always welcoming new members – anyone can and is encouraged to attend.

Respectfully submitted,

Mary Sylvester