

Current OMHSAS/SAMHSA Grant Partnerships

PA CARE Partnership Expansion and Sustainability Cooperative Agreement

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The purpose of the Pennsylvania CARE Partnership Expansion and Sustainability Initiative is to improve behavioral health outcomes for children and youth (birth-21) with serious emotional disturbances, and their families. This will be done through the wide-scale operation, expansion, and integration of the System of Care approach through creating sustainable infrastructure and providing evidence-based services and supports. In the first year, this approach will be applied in two counties, Crawford and York. The experience of these counties will serve as the basis for guiding other counties in Years 1.5-4 in a sequential and continuous expansion of Systems of Care in Pennsylvania.

The Pennsylvania CARE Partnership (The Partnership) will build on the work of previous System of Care, and other SAMHSA Grants, to support counties in developing comprehensive Systems of Care for children, youth, and families. A Learning and Support Collaborative will support expansion, and sustainability, in the number of counties as well as in the array of services and supports, including a focus on trauma and early onset of serious illness.

Healthy Transitions Partnership

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The Pennsylvania Healthy Transitions Partnership promotes awareness and early identification of individuals age 16-25 with, or at risk of, serious mental health conditions, and improve access to a broad array of effective and integrated services and supports for these youth and young adults. The population served includes Caucasian, Black, and Hispanic/Latina, as well as Lesbian, Gay, Bisexual, and Transgender individuals, with targeted outreach to traditionally underserved populations. This Partnership works with three counties, Berks, Bucks, and Washington focusing on three goals: 1) to increase awareness throughout the community about early indications of signs and symptoms for serious mental health conditions; 2) to identify and begin services for those who are at-risk of serious mental health conditions; and 3) to improve the effectiveness of services and supports for those youth and young adults with serious mental health conditions.

The HT partnership collaborates with other systems to assist Youth and Young Adults of transition age, and their families. The national literature, and the Pennsylvania experience in developing Systems of Care and Healthy Transitions, tells us that an individualized approach, with young adults, families and system representatives working together in a culturally and linguistically competent way, and taking into account the various life domains of the youth/young adult, is critical to properly plan for their transition to adulthood. An approach that provides an array of individualized supports and services, in advance of significant problems, is needed to intervene and prevent significant system(s) involvement and to ensure a seamless transition between the children's and adult systems. The HT Partnership is working with the partner counties to develop such an approach.

Suicide Prevention in PA Schools and Colleges:

Lead Contact: Perri Rosen, Project Director c-prosen@pa.gov

The Youth Suicide Prevention in Schools and Colleges grant utilizes the existing structure of the Pennsylvania Student Assistance Program (SAP) to implement suicide prevention activities and increase early detection and referral of youth that may be at risk for suicide.

Awarded by SAMHSA in October of 2014, this five-year grant focuses on implementing suicide prevention (awareness and training) and early intervention (screening and treatment) strategies for youth ages 10-24 across Pennsylvania. OMHSAS receives \$736,000 per year, and partners with both Drexel and Thomas Jefferson Universities to implement the goals and objectives of the grant.

To date, 52 Counties are involved in grant-related training and/or screening activities, and over 2200 youth have been screened and identified with suicide ideation as a result of the work of this program. In addition, the newly launched Suicide Prevention Online Learning Center will provide free online suicide prevention training statewide.

Pennsylvania Project LAUNCH (Linking Actions for Unmet Needs in Children's Health)

Lead Contact: Brandy Fox, Project Director brafox@pakeys.org

The Pennsylvania LAUNCH Partnership will help parents raise healthy, happy and thriving children who enter school ready to learn and able to succeed. We will take a public health approach and utilize universal promotion and prevention efforts. We will introduce screening to identify young children and risk and facilitate referral to evidence based interventions. Our population of focus will be pregnant mothers, children 0-8 who are at-risk for social, emotional, and other mental health concerns, and their families. There will be 2,000 individuals served annually and 10,250 individuals served throughout the 5 years through screening and referral. We project that 8,000 will be Caucasian, 1,500 will be African American, and 750 will be Hispanic, Asian, or of various European or other

cultures.

A project of the Office of Mental Health and Substance Abuse Services, Department of Health, and the Office of Child Development and Early Learning with Allegheny County Department of Human Services, funded by the federal Substance Abuse and Mental Health Services Administration (SAMHSA), PA Project Launch is for all children (ages 0-8), their families, and pregnant women to flourish through the benefits of a comprehensive, seamless system of promising and evidence-based approaches that promote physical, behavioral, and emotional well-being, thus enhancing school and life success.

Project LAUNCH's 5 Prevention and Promotion Strategies

- Screening and assessment in a range of child serving settings.
- Integration of behavioral health into primary care settings.
- Mental health consultation in early care and education settings.
- Enhanced home visiting through increased focus on social and emotional well-being.
- Family strengthening and parent skills training

PA Project LAUNCH Goals:

1. Ensure young children at risk for poor developmental outcomes (especially social emotional) are screened and provided appropriate resources, including referrals.
2. Enhance integration of physical health and behavioral health practices to improve access of care for children birth to 8 years, their families, and pregnant women.
3. Strengthen existing Early Childhood Mental Health consultation and extend services to children birth to 8 years, their families, and pregnant women, integrating into multiple early childhood settings.
4. Promote integrated, evidence-based, high-quality home visiting services that ensure access to those who need it.
5. Ensure families with young children are connected to needed information and services.
6. Create a sustainable infrastructure to promote social emotional and physical wellness for PA children birth to 8 years, their families, and pregnant women.

Projects for Assistance in Transition from Homelessness (PATH)

Lead Contact: Michelle Baxter, Human Services Program Specialist, OMHSAS mibaxter@pa.gov

SAMHSA's PATH program is a national formula grant authorized by the Stewart B. McKinney Homeless Assistance Amendments Act of 1990. The goal of the PATH Program is to reduce or eliminate homelessness for individuals with serious mental illnesses, or serious mental illness and substance use disorders, who also are experiencing homelessness or are at imminent risk of becoming homeless.

PA's PATH grant is administered through OMHSAS. The State allocates funds to 24 counties/joiners, with a total of 40 providers across the State to provide PATH services in 36 PA counties. PATH funds are used to provide a menu of allowable services, which hinge on street outreach, case management, and services which are not supported by mainstream services and/or behavioral health programs. Each program chooses specific services to provide based on area needs.

PATH's broader definitions of homelessness and imminent risk of homelessness are major differentiating factors from programs sponsored by HUD, SSA and even educational facilities. PATH's broader view allows funds to be used for populations typically excluded by other funding streams. With this flexibility, PATH funds are meant as a last option funding source. Once participants obtain mainstream funding, they are transitioned out of the PATH program.

SSI/SSDI Outreach Access and Recovery (SOAR) is a complimentary SAMHSA best practice initiative that shares the same broad definitions as PATH and can additionally be used for those with severe physical illnesses who are also experiencing homelessness or at imminent risk of homelessness. The SOAR process includes gathering complete, targeted, and relevant information for SSA and DDS to substantially raise the probability of clients obtaining SSI/SSDI benefits on initial application. PATH providers are highly encouraged to incorporate use of SOAR into their PATH work.

Community Mental Health Services Block Grant (CMHSBG)

Lead Contact: Jill Stemple Section Chief, Planning, OMHSAS jistemple@pa.gov

The Community Mental Health Services Block Grant is the largest single Federal Grant dedicated to improving mental health services systems across the country. As Pennsylvania's mental health services are based in the county mental health systems, 81% of CMHSBG funds are allocated directly to the counties. These funds are non-categorical and CMHSBG funding may be used to provide a wide spectrum of community based mental health services to individuals with Severe Mental Illness or children with Serious Emotional Disturbance. Funds may also be utilized to improve the mental health system including providing the startup costs for a new services or funding trainings to enhance the mental health workforce.

Ten percent of the CMHSBG must be set aside to address Early Serious Mental Illness. Pennsylvania is utilizing the 10% set aside to fund ten First Episode Psychosis Programs across the state. Pennsylvania has identified eight additional priorities for CMHSG Funding:

1. Supportive Housing
2. Services to Older Adults
3. Peer Support Services
4. Olmstead Planning
5. Reduction of Residential Treatment Facility Usage
6. Youth and Family Involvement
7. Prevention- Early Childhood Mental Health Services
8. Suicide Prevention

The remaining 9% of the grant is managed directly by OMHSAS and is utilized for administrative costs related to the grant (maximum of 5%) and for statewide or regional special projects and training.

Clinical High Risk for Psychosis (CHR-P) Grant Summary:

Lead Contact: Jill Stemple Section Chief, Planning, OMHSAS jistemple@pa.gov

The Pennsylvania Stepped-Care Approach to Clinical High Risk for Psychosis (PASC-CHR-P) will provide community outreach, identify young people in Philadelphia (PHL) and Pittsburgh (PIT) who meet CHR criteria, and enroll them in a stepped care model of graded intensity levels of family and individual psychoeducation and therapy, substance use counseling, supported education and employment, peer support, and medication management, if necessary. This effort is crucial for early identification, followed by graduated interventions based on severity of clinical symptoms and dysfunction involving both the client with CHR-P and their families. CHR-P refers to behavior changes in adolescence and early adulthood that indicate possible later onset of psychosis. The Pennsylvania Office of Mental Health and Substance Abuse Services is partnering with PERC at the Neuropsychiatry Program of the University of Pennsylvania and HOPE at the University of Pittsburgh, who have extensive experience in assessment and management of young persons with early psychosis symptoms and partner with community based organizations to provide extensive outreach and CSC that is sensitive to the special needs of this population. Young persons at CHR-P experience highly variable clinical symptoms, impaired functioning and quality of life, while their families experience distress, yet delayed access to treatment and prolonged duration of untreated psychosis if psychosis emerges. Goals of stepped care approach include improvement in clinical symptoms and functioning, preserving the steep developmental trajectory expected in adolescence and early adulthood, and, if necessary, limiting duration of untreated psychosis. Performance Assessment and Quality Improvement will be performed quarterly in conjunction with outcome measure data collection as program-level data, using selected tools to assess program effectiveness and track pathways to care, and clinical, functional, and economic outcomes. Our goal is to help those with CHR-P flourish in the community and continue on their chosen life paths.

Integrating Primary and Behavioral Health Care

Lead Contact: Shaye Erhard, Executive Assistant to the Deputy Secretary eserhard@pa.gov

Promoting Integration of Primary and Behavioral Health Care Project Abstract Pennsylvania's Promoting Integration of Primary and Behavioral Health Care includes four local physical health / behavioral health partnerships. These sites provide an opportunity to explore integration in diverse rural and urban areas of the state and with different populations of focus. The two urban and two rural sites propose to serve 463 individuals each year / 2,315 individuals during the five-year project period including adults with substance use disorder, children with serious emotional disturbance, and adults with mental illness.

The purpose of the project is to:

- Promote full integration and collaboration in clinical practices between primary and behavioral health care.
- Support the improvement of integrated care models for primary and behavioral health care to improve the overall wellness and physical health status of adults with a mental illness, substance use disorder, SMI or children with a SED.
- Promote integrated care services related to screening, diagnosis, prevention, and treatment of mental illness, substance use disorders, co-occurring physical health conditions, and chronic diseases.

2018 Hurricane Supplemental SAMHSA Emergency Response Grant (SERG)

Lead Contact: Michelle Baxter, Human Services Program Specialist, OMHSAS mibaxter@pa.gov

PA Supplemental Emergency Response Grant (SERG) efforts have been developed in response to emergency mental/behavioral health and/or substance abuse needs directly resulting from hurricanes Irma and Maria that devastated Puerto Rico and surrounding areas in September 2017. As a result, a total of 3480 displaced students from Puerto Rico, Florida, the United States Virgin Islands, and other affected areas, have been enrolled in PA schools. Most of the schools responding to this need are already financially burdened and resource-exhausted since schools' annual budgets are based on their previous year's census.

In addition to the financial strain on both the families of receiving relatives and the local schools, the effects of associated psychosocial stress have been identified. Language, cultural, resource and documentation barriers often lead to inability to obtain employment and/or meet basic needs. Inability to cope can lead to mental health issues, substance abuse, or both. As SAMHSA notes, Adverse Childhood Experiences “are strongly related to the development and prevalence of a wide range of health problems throughout a person’s lifespan.” The ability of educational staff to identify and effectively link children and families to appropriate resources is paramount for long-term stability.

Through SERG funding, PA intends to reach displaced families and children through bilingual collaborative outreach and training efforts in affected school districts. Activities under this grant will include educating school employees, students, families and affected communities to reduce barriers, heighten recognition of need, and effectively link individuals to the appropriate resources. Programs to be utilized include: Mental Health First Aid for Children; Question, Persuade, Refer (QPR); resiliency training; and trauma-informed care training. To supplement these activities, materials identifying local resources will be disseminated in both English and Spanish. Trainings will be coordinated with existing grants such as Garrett Lee Smith, Projects for Assistance in Transition from Homelessness (PATH), System of Care (SOC), Safe Schools Healthy Students (SSHS), and Healthy Transitions, to minimize staffing and promotional costs while maximizing impact of limited funds.