

**Hillcrest Family Services Intended Use Plan
July 1, 2014 through June 30, 2015**

1. Local Provider Description - Provide a brief description of the provider organization receiving PATH funds, including name, type of organization, region served, and the amount of PATH funds the organization will receive.

Hillcrest Family Services, the recipient of PATH funds, is a well-known, innovative organization which strives to assist people to remain in their own homes and communities by wrapping a wide variety of services around the individual and/or family. Hillcrest has primarily served persons who are low-income and/or disabled since the agency's inception, 118 years ago. Hillcrest continues to evolve to meet community needs and offers the most comprehensive continuum of social and health services in the area to infants, children, and adolescents; adults with serious and persistent mental illnesses, brain injuries, intellectual disabilities, co-occurring substance abuse issues or developmental disabilities; and persons needing reproductive and maternal health services. Some services provided include: special education, adolescent residential treatment, emergency shelter, adult supported community living, peer support services, adult vocational services, adult and adolescent Intensive Psychiatric Rehabilitation Services, family counseling, individual and group therapy, psychiatric and medication management services, emergency services, school-based counseling and mentoring services, Dubuque Mentoring Program, adoption services, Integrated Health Homes, transitional and supported housing for homeless families, 5- bed group homes for adults with a mental illness in Dubuque and Iowa City, two large residential care facilities for chronically mentally ill in Dubuque and Ottumwa, WIC program, and the PATH-funded homeless outreach program. In fact, last year, Hillcrest served over 25,244 individuals and families from 66 Iowa Counties and 24 other states. We have offices in the following Iowa locations: Dubuque, Cedar Rapids, Iowa City, Ottumwa, Maquoketa, Clinton, Monticello, Mt. Pleasant, Wapello and Washington. Hillcrest programs continue to be licensed by the State of Iowa and Accredited by the Joint Commission.

In addition to the above noted services, Hillcrest continues to provide Crisis Stabilization Services out of the same office as the PATH program five days a week, Monday through Friday. This program began in December 2010 and is focused on counseling those in crisis with the hope of avoiding hospitalization. This service is being funded through Magellan presently and does offer on call services after normal business hours during the week and on the weekends. Crisis Stabilization Services has been a great complement to Homeless Outreach and much collaboration between the two services continues to occur, with several individuals being referred to PATH services.

PATH funds the Hillcrest Homeless Outreach Program. It serves adults of all

ages with serious mental illness or co-occurring mental illness and substance abuse. Last year 89% of those enrolled in the Hillcrest Homeless Outreach Program were literally homeless. This year, the Hillcrest PATH Program will receive \$39,250 in PATH funds.

2. Collaboration with HUD Continuum of Care Program - Describe the organization's participation in the HUD Continuum of Care program and any other local planning, coordinating or assessment activities.

Several local providers, including Hillcrest, actively participate in the local HUD Continuum of Care and Homeless Advisory Board. This board meets monthly. The Continuum includes representatives from all agencies, former homeless individuals, and some local churches. The PATH provider serves on the Opening Doors Committee. The PATH provider also serves on the Dubuque County Housing Sub-committee and the Dubuque County Jail Diversion Initiative.

Additionally, the PATH Coordinator continues his work with the community partnership with the Veterans Freedom Center, local Veteran Advocate, recruiters, family members, veterans, and other community agencies. The purpose of this group is to form a grassroots initiative to focus on the invisible wounds, the psychological and spiritual impacts which make deployment and post deployment life more difficult. They are currently working on gaining a transitional housing facility for homeless veterans.

3. Collaboration with Local Community Organizations - Provide a brief description of partnerships with local community organizations that provide key services (i.e., primary health, mental health, substance abuse, housing, employment, etc.) to PATH eligible clients and describe coordination of activities and policies with those organizations.

Community Organizations include Hillcrest Family Services Community Mental Health Center, Hillcrest – Mercy Maternal Health, Hillcrest Crisis Services, Hillcrest Professional Health Clinic, Hillcrest Adoption Program, the Dubuque Rescue Mission (for men over 18), Catholic Worker Houses (families), Teresa Shelter (women and children), Goodwill Industries, City of Dubuque Housing Services, Domestic Violence Program, Hillcrest Residential Care Facility, Dubuque County Office of Veteran’s Affairs and General Relief, Substance Abuse Services Center, Operation: New View (community action agency), People in Need (PIN), the Visiting Nurse Association, Finley and Mercy Hospitals, Maria House, Davis Place (SRO), Manasseh and Salvia House (SRO), Dept. of Corrections- Elm Street Residential Facility and Jail Diversion Officer, WIC, Dubuque County Sheriff’s office, Iowa Workforce Development Center, Social Security Lawyers, Iowa Legal Aide, local hotels and landlords, the Dubuque Food Pantry, Crescent Community Health Center, Social Security, Dept. of Human Services, St. Vincent De Paul, the Salvation Army and several local and rural community churches. On a regular basis, Project Concern’s Homeless Outreach Counselor and staff conduct outreach within the community. We

work with the above organizations to provide/obtain assistance or services in the following areas: financial, housing, medical, mental health, food, resources, substance abuse, legal, nursing, vocational, and payeeship.

4. Service Provision - Describe the organization's plan to provide coordinated and comprehensive services to eligible PATH clients, including:

4(a) Describe how the services to be provided using PATH funds will align with PATH goals to target street outreach and case management as priority services and maximize serving the most vulnerable adults who are literally and chronically homeless.

The PATH Coordinator regularly visits the Mission, Theresa Shelter, and Catholic Charities housing in order to identify and assess the needs of the homeless population. However, due to the longevity of the current PATH Coordinator in the present position, the centralized location of the office and the smaller size of our community, many individuals “find” our office and coordinator to receive assistance and street outreach is not always needed, as shown by our reported numbers of individuals served. The Homeless Outreach Coordinator will generally focus on “Housing First” permanent housing with these individuals, in addition to assessing what other gaps may exist with regard to other areas of their lives, in essence becoming their short-term case manager. Any outside referrals that can be made at this time are also made. The PATH Coordinator has and will also conduct street outreach within the Dubuque area, visiting known places for the transit population to occupy.

4(b) Describe any gaps that exist in the current service systems.

Gaps in the current service system include but are not limited to: adequate access to psychiatric services due to the reduced number of psychiatrists, inability of nurse practitioners licensed under family practice or primary care to perform initial assessments/evaluations under Chapter 24 regulations, a lack of affordable 3rd party payer coverage for mental health and substance abuse treatment, Sect.8 Housing waiting list, a lack of permanent and affordable supported housing, lack of emergency shelter for couples and males 14 -18 of age, lack of funding assistance for veterans who do not have active duty, lack of financial resources for utilities and first month’s rent, lack of available volunteer payee services, lack of places available to shower, lack of transportation, very little case management for non Title XIX mentally ill adults, a lack of timely and accessible substance abuse treatment, a lack of the means with which people can pay for medication, and a lack of treatment for those with co-occurring disorders.

Additionally, homeless individuals experience barriers to employment and housing due to their criminal backgrounds, and their lack of education and skills.

4(c) Provide a brief description of the current services available to clients who have both a serious mental illness and a substance use disorder.

Substance Abuse Services Center (SASC) is the only agency that currently provides treatment for those with co-occurring disorders. Hillcrest will continue to refer adults with co-occurring disorders to SASC. Additionally, Hillcrest provides a residential PMIC unit for adolescents with a mental health and substance abuse diagnosis. For inpatient care, referrals are made to the Mt. Pleasant State treatment center. As an ongoing support, staff refers to NA, AA, Wellness Center and The Source, for continued peer support.

4(d) Describe how the local provider agency pays for providers or otherwise supports evidenced-based practices, trainings for local PATH-funded staff, and trainings and activities to support migration of PATH data into HMIS.

Many of the programs that exist at Hillcrest Family Services are developed around evidence-based practices, such as Mandt and WRAP, and we do follow the core recovery philosophy of SAMHSA. We have trained WRAP facilitators and offer the program year round in Dubuque.

This year, we added peer-support services to our PATH program and plan on that individual getting trained by a Magellan approved agency in the Georgia model of Peer Support this summer. Offering peer-support has been a most valuable service for many individuals.

The PATH Coordinator is SOAR trained and assists Homeless Outreach clients in accessing social security benefits. In addition, the PATH Coordinator, his Administrative Assistant, and PATH supervisors/directors, regularly attend HMIS update trainings. The PATH Coordinator also remains current with the regularly scheduled Social Security benefits trainings.

All PATH staff have also attended a training on diversity this year.

The Administrative Assistant/Peer Support Specialist became a CAC (Certified Application Counselor) for the Affordable Care Act and enrolled many individuals this past year.

The PATH Coordinator and Adm. Asst/Peer Support Specialist are Level 2 trained in Trauma-Informed Care through the Midwest Trauma Service Network (MTSN). The Program Director has certification of Level 1-Understanding Trauma.

Additionally, Hillcrest professionals from MHC/RE/Crisis Stabilization are attending Eye Movement Desensitization Reprocessing EMDR - very strong research evidence support trauma/maltreatment therapy. We have many practitioners trained in Level 1 and at least five are trained in level 2.

We value continuing education and as relevant trainings arise, we will

encourage staff to participate.

5. Data - Describe the provider's status on HMIS migration and a plan, with accompanying timeline, to migrate data in the next 1 to 3 years. If you are fully utilizing HMIS for PATH services, please describe plans for continued training and how you will support new staff.

All PATH staff are currently certified users of the system. The PATH Coordinator does receive assistance from the Peer Support Specialist/Administrative Assistant in entering data into Service Point and she is a veteran staff and has a good understanding of HMIS. As training occurs, staff will be supported to attend. Additionally, as new staff would be hired, we would support them to attend the training.

At least quarterly, data is migrated and analyzed from HMIS and shared with the State Coordinator and State PATH Providers.

6. SSI/SSDI Outreach, Access, Recovery (SOAR) - Describe the provider's plan to train PATH staff on SOAR. Indicate the number of PATH staff trained in SOAR during the grant year ended in 2012 (2011-2012), the number of PATH funded consumers assisted through SOAR, and the approximate number of staff to be trained in SOAR for grant year 2013 (2013-2014).

Currently, the PATH Coordinator is trained in SOAR. We have attempted to send more staff to the training, however the number of trainings have been limited in the state of Iowa and have filled up very quickly. In the upcoming year, we will continue our attempts to have more staff trained in SOAR. So far, the PATH Coordinator has assisted 10 individuals in applying for benefits.

7. Access to Housing - Indicate what strategies are used for making suitable housing available for PATH clients (i.e., indicate the type of housing provided and the name of the agency).

Suitable housing availability for PATH participants has been enhanced in the past years.

- Hillcrest opened the Transitional Housing Program for homeless families in 2002. It has been our experience that at least 75% of the adults in this program have had a mental health diagnosis.
- Davis Place (SRO) has opened another facility and is now able to house 62 men.
- Dubuque Rescue Mission operates emergency and transitional housing for men. In addition, the Rescue Mission worked with St. John's Church to operate a Seasonal "Over-Flow" Shelter that operates from September-April. It allows shelter for 12 men. Recently, the Rescue Mission also renovated two homes

to provide permanent housing for homeless individuals who are employed. It serves a total of 8 individuals at one time between the two homes.

- Maria House operates transitional supported housing for single women or women with children (no male children over age 12)
- Teresa Shelter is an emergency shelter for single women and women and their young children, and can house a total of 40 persons.
- Manassah House, a permanent supported housing facility for 19 women with substance abuse or co-occurring disorders opened in the fall of 2007.
- Salvia House is another permanent-supported housing facility and is an SRO option for 18 women.
- Project Concern offers Shelter+Care, including families in which a family member has a mental health/substance abuse diagnosis; and they have opened a 24-hour hotline.
- The Dubuque Community Y Domestic Violence Program offers an emergency shelter for women and children who have experienced domestic abuse and have renovated and expanded their facility.
- St. Johns Church offers emergency shelter to handle the overflow from the Dubuque Rescue Mission. Maximum capacity is 12 individuals.

8. Staff Information - Describe the demographics of staff serving the clients; how staff providing services to the population of focus will be sensitive to age, gender, disability, lesbian, gay, bisexual and transgender, racial/ethnic, and differences of clients; and the extent to which staff receive periodic training in cultural competence and health disparities. A strategy for addressing health disparities is use of the recently revised national Culturally and Linguistically Appropriate Services (CLAS) standards: (<http://www.ThinkCulturalHealth.hhs.gov>).

The PATH Counselor and Peer Support Specialist/Administrative Assistant have participated in the trainings “Bridges Out of Poverty” and Diversity Training and utilize information gained on a daily basis in their service to others. The Coordinator is very well-liked by the individuals with whom he works. He is of white ethnicity, male, is a father and grandfather and is in his 50’s. He is able to relate to individuals and families of all ages very well. He has at least nine years experience working with homeless individuals experiencing a mental illness. The Hillcrest PATH Coordinator also takes a prevention approach to the services that he provides. He works diligently with homeless individuals to secure them permanent housing and will conduct follow-up meetings with them to ensure success, providing such services as budgeting and goal setting.

The Peer Support Specialist/Administrative Assistant who assists the PATH provider is a female, originally from South Wales, UK, and is a single-mom

in her 40's, and has been serving the homeless population at Hillcrest for over five years already. She has a lived experience of homelessness that she was able to overcome. She is also able to work very well with individuals and families of all ages and provides a valuable service to the people we serve. Hillcrest staff are able to receive training in cultural competence as well as evidence based practices in the treatment of mental illnesses.

Staff serving PATH clients will be experienced in the helping professions and using recovery based models to provide PATH services. Recovery based models such as IPR, WRAP and Peer Support, provide the philosophy necessary to be respectful of the role the consumer plays in his/her own recovery. Training for staff at Hillcrest also emphasizes cultural competency, strengths based approaches and empowerment of the consumer. Hillcrest employs a translator to work with Hispanic consumers, especially in the Hillcrest Clinic, WIC and Maternal Health. Additionally, we have staff employed who are fluent in sign language.

In addition to a recovery-based and consumer-directed approach to care, Hillcrest makes client confidentiality a priority by making sure that meetings with homeless individuals are conducted in private spaces and that collaboration with other community entities takes place primarily with the client present. The Hillcrest PATH Team members are also strong advocates for their clients and will often times personally accompany them to important meetings relating to their mental health and housing needs.

9. Client Information - Describe the demographics of the client population, the projected number of adult clients to be contacted, enrolled, and the percentage of adult clients served using PATH funds to be literally homeless.

Projected for the fiscal year-end of 2014, of 280 persons served, ages ranged from 18 to 70+ years. Furthermore, the population was 45% male and 54% female and 1% were unspecified. Our largest group served are the ages 31-50 years old at 39%. The second most common group served is the age group of 18-30 at 24%. Predominantly, the ethnicity has been white (71%), however our second largest group is African American at 25%. The least served race is Asian and Native Hawaiian or Other Pacific Islander and the least served ethnicity is Hispanic-Latino. Many clients locate here from surrounding states, including Wisconsin and Illinois primarily.

We project that the demographics will generally remain the same as the reported above information, as we have seen these trends in demographics for awhile.

For the upcoming FFY 2015 it is projected that we will contact 280 adult persons and enroll 82 (65%). We project that at least 145 enrolled individuals will be literally homeless.

10. Consumer Involvement - Describe how individuals who are homeless and have serious mental illnesses, and family members will be involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. For example, indicate whether individuals who are PATH-eligible are employed as staff or volunteers or serve on governing or formal advisory boards. See Appendix J "Guidelines for Consumer and Family Participation".

Hillcrest Family Services does have an Advisory Board that serves all of the Adult Mental Health Community Services that some PATH consumers regularly attend and some serve on the current board. Additionally, PATH participants are invited to share feedback at any time but, Hillcrest provides a formal opportunity to do so at least annually through satisfaction surveys.

Additionally, we have added peer-support services to the PATH program. The current Administrative Assistant has added this role to her duties. She has lived experience that is invaluable to the people we serve. We are very excited to offer this additional service.

Additionally, the Coordinator invites individuals served to further become part of the community through volunteer peer support in the Homeless Outreach Program. Hillcrest has established a list of former and current clients that have agreed to provide volunteer peer support and outreach to the PATH program. The focus of this support will be to assist persons in the following: navigating the "system", advocating for themselves, orienting to the Dubuque community and other resources, conducting plan of care activities, and making positive social connections. Furthermore, the Peer Volunteers may assist the Homeless Outreach Coordinator in community outreach activities. This leverages outreach assistance from someone who was/is homeless and is able to identify successful strategies for working with others in a similar situation. Hillcrest would also like to eventually utilize consumer volunteers for data entry and other clerical work.

The Hillcrest Wellness Center opened in the fall of 2007. We employ additional consumers as Peer Support Specialists in that program that is also located in the building that offers PATH services. The majority of the Peer Support Specialists have attended the Iowa Peer Support Training Academy and graduated successfully. PATH participants have been very active in referring new individuals to the program. Currently, there are no consumers serving on the Hillcrest Board of Trustees; however, there is representation of persons with disabilities by family members on the board.

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To publicly comment on the Hillcrest PATH Program you can e-mail Homeless Coordinator Jim Munson at jim.munson@hillcrest-fs.org or Iowa DHS state PATH administrator Karen Hyatt at khyatt@dhs.state.ia.us . For more information on the Hillcrest PATH program go to www.hillcrest-fs.org

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