Indiana County
Human Services Block Grant Plan
FY 2026-2027

This picture is part of the mural painted by volunteers at the ACMH Inpatient Unit. Details are provided in the highlight section of the plan.

Armstrong-Indiana Behavioral and Developmental Health Program
Armstrong-Indiana- Clarion Drug and Alcohol Commission
Indiana County Department of Human Services
Homeless Assistance Program
Human Services Development Fund

Appendix B
Indiana County Human Services Plan
FY 2026-2027

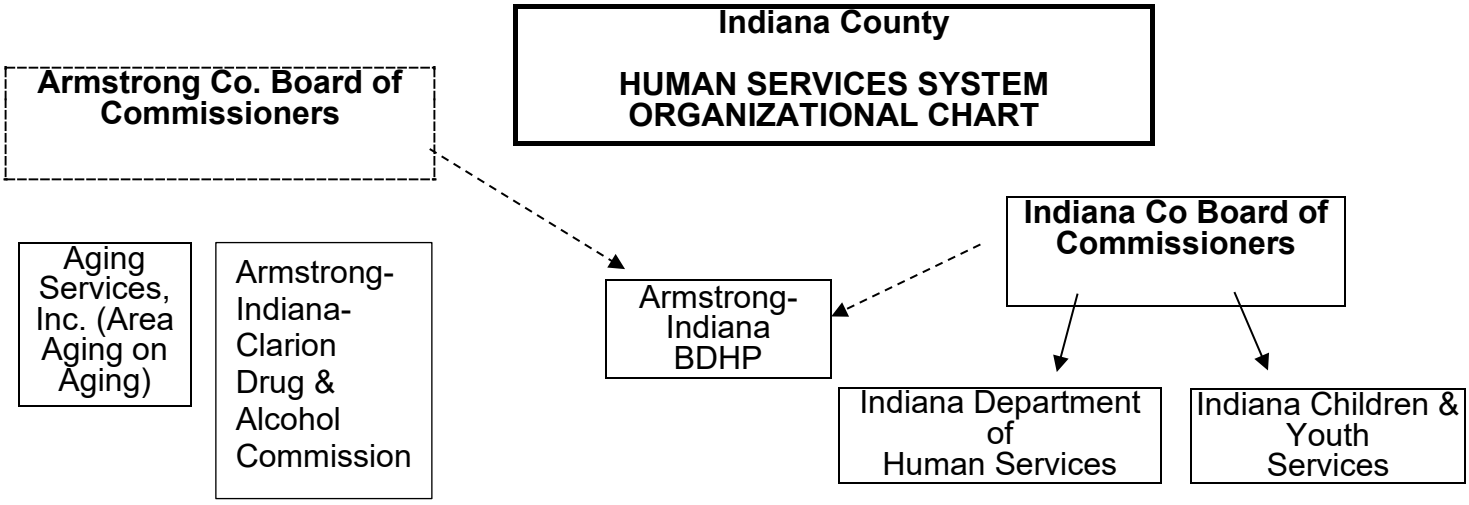
Indiana County Organizational Structure

Indiana County Commissioners have direct authority over Indiana County Department of Human Services (ICDHS) and Indiana County Children and Youth Services; both directors report directly to the Commissioners.

Through a joinder agreement between Armstrong County and Indiana County, the Armstrong-Indiana Behavioral and Developmental Health Program (AI-BDHP) was created as a quasi-governmental agency that operates as the Administrative Entity for oversight of the Mental Health, Intellectual Disabilities and Early Intervention Programs. AI-BDHP is governed by the Commissioners of both counties. A commissioner from each county sits on the 13 member AI-BDHP Advisory Board.

Aging Services, Inc. (the Area Agency on Aging) is a single county private, non-profit agency.

Armstrong-Indiana-Clarion Drug and Alcohol Commission (AICDAC), the designated Single County Authority, is also a private, non-profit agency serving a three-county joinder.



PART I: COUNTY PLANNING PROCESS (Limit of 3 pages)

The following section describes the county planning and leadership team, and the process utilized to develop the Plan for the expenditures of the human services funds.

1. **Critical stakeholder groups, Community input (Individuals, Families, Consumer Groups), and County Human Services System Partners**
   Indiana County Department of Human Services (ICDHS) uses a variety of mechanisms, including the public hearings and Children and Youth's needs-based budgeting hearing to gather information to determine how funds will best be utilized for the human services systems. The last "Indiana County Speaks Up" countywide survey was completed December 31, 2022. The survey received 2,285 responses with well over 1,600 comments. Top priorities included in this order:

help youth develop life skills, provide mental health services, reduce drug and alcohol use among youth, provide recreational activities for youth, affordable housing for the elderly, provide education on suicide prevention in the schools, provide emergency food, address domestic violence and abuse, provide recreational activities for families, reduce drug and alcohol use among adults. The results of the survey were shared with all of the municipalities, boroughs, townships, etc., almost all of the non-profit agencies, businesses mentioned in the survey, county commissioners, legislators, United Way, police departments, fire departments, veteran groups, all county department heads, Indiana University of Pennsylvania, Indiana Regional Medical Center, Community Guidance Center, Housing Authority of Indiana County, school superintendents and principals, Head Start, Aging Services, YMCA, UPMC, Primary Health Network/Indiana Dental Center, Citizen's Ambulance, IndiGO transportation, judges and magistrates, parks and recreation departments, churches, community members, etc. The survey and all the results are posted on our department website for all community members to review. Our next countywide survey will be in the fall of 2027.

The county gathers feedback through different forums, including the Children's Advisory Commission (CAC), Criminal Justice Advisory Board, Armstrong-Indiana Behavioral and Developmental Health Program (AI-BDHP) Advisory Board, Local Interagency Coordinating Council, Transition Council, Suicide Task Force of Indiana County, Safe Children's Network, Drug Free Communities Coalition, Drug Free Communities, Housing Consortium, Veteran Providers' Group, Health and Human Services Subcommittee of the County's Emergency Disaster Planning Committee, Project SHARE and other groups. These groups try to identify resources for people in need and determine gaps in the system.

2. **Stakeholder opportunities for participation in the planning process, including information on outreach and engagement efforts**.

Anybody from the public is able to attend the meetings listed above and is able to volunteer time for any of these causes. We try to garner survey feedback from individuals and family members after events are held by use of a paper, QR code, or by email. We encourage individuals and family members to tell us what they would like to see occur in the community or where services are lacking.

Throughout the fiscal year, there are a number of meetings that are held not only to provide information to stakeholders but also to provide opportunities for stakeholders to share concerns and input into improving and shaping the behavioral and developmental health service system for Indiana County. Because two of our human service programs are joinders (AI-BDHP, AICDAC), there will be references to both Armstrong and Indiana Counties throughout this section.

A brief summary of stakeholder engagement meetings follow:

- Monthly Community Support Program (CSP) meetings are held in Armstrong and Indiana Counties. During these meetings consumers discuss relevant topics such as transportation, support needs and system gaps. County representation is present at all CSP meetings to compile this information and to keep abreast of current needs. This information is then used in the planning process.
- Annually Consumer Focus Groups are held in Armstrong and Indiana Counties. The focus groups were facilitated by the Consumer and Family Satisfaction Team Supervisor who is employed by National Alliance on Mental Illness (NAMI). A list of relevant questions is

developed each year in order to solicit input from consumers and other stakeholders who utilize or work in our local behavioral health system. The Armstrong County Focus Group meeting was held June 25, 2026, with 19 people participating (15 in person and 4 virtual) and the Indiana County Focus Group was held on June 4, 2026, with 26 in attendance (20 in person and 6 virtual). Both meetings offered a virtual option for attending.

- Five times per year, the Armstrong-Indiana BDHP Advisory Board meets. This is a published public meeting and time is allotted in each meeting for public comment.

- Semi-annually, AI-BDHP hosts both Behavioral Health and Intellectual Disabilities Provider meetings. At these meetings providers are updated on pertinent program information and given the opportunity to provide feedback regarding service needs.

- Monthly individual ACMH and IRMC hospital meetings with local providers and D&A Commission are held to discuss individual case issues and problem resolution.

- Quarterly joint hospital meetings are held at each of our local hospitals and facilitated by staff from Armstrong-Indiana BDHP. Various in-patient providers who admit our consumers are in attendance, as are local outpatient providers of both behavioral health and substance abuse. This gives our local providers and stakeholders a forum to review admission and discharge protocols, get updates on local initiatives and provide input as we collaborate to review and improve our service delivery system.

- The AI-BDHP staff participate in numerous committees where information is exchanged for proposed system changes and providing input into the plan. Some of these committees are: Suicide Task Force, Personal Care Home Risk Management Committee, County Criminal Justice Advisory Boards (CJAB); and the Housing Consortium meetings.

- Also, on an ongoing basis, AI-BDHP staff works closely with the CFST teams in each county. CFST feedback helps highlight gaps with services or with system issues in general. This feedback is especially important to our process since this comes directly from consumers and/or family members.

- AI-BDHP Staff regularly participates in the Western Region Behavioral Health Stakeholder Advisory Committee meetings which offers a regional and state perspective on topics relevant to the consumers we serve.

- The AI-BDHP Administrator and various staff are involved with the Pennsylvania Association of County Administrators of Mental Health and Developmental Services (PACA MH/DS). We regularly attend committee meetings that address current topics and issues related to mental health, intellectual disabilities, early intervention and HealthChoices programs. This information is shared with our local stakeholders.

In order to get the applicable stakeholders engaged in the previously described meetings, numerous announcements were distributed via email, mail, social media forums and as specifically identified for the Advisory Board meetings through public notice in the newspaper. Additionally, the Indiana Department of Humans Services publishes the Human Services Informer twice a month. This comprehensive list provides information about all Human Service Agencies and happenings in Indiana and surrounding counties.

3. **Advisory boards that participated in the planning process**

   Five times per year, the Armstrong-Indiana BDHP Advisory Board meets. There are thirteen members of the AI-BDHP Advisory Board. Seven members are appointed by the board of commissioners from Indiana County and six from Armstrong County. The Board is kept abreast of the activities occurring in all of the BDHP programs as well as regional and state issues impacting our programs. This is a published public meeting and time is allotted in each meeting for public comment.

4. **How the county uses funds to provide services to its residents in the least restrictive setting appropriate to their needs.**

   In both the behavioral health and the intellectual disabilities systems, an intake and assessment process is utilized to determine the needs of the consumer. A plan of care is developed and services are initiated. Once individuals have started receiving services, ongoing meetings are held to determine the most appropriate level of care for the consumer. In all cases funds are utilized to meet the individual's needs in the least restrictive appropriate level of care.

   HSDF funding will be used to partially fund a Homeless Assistance Program (HAP) Homeless Case Manager (HCM) to work with individuals and families to find affordable, sustainable housing. This funding is being provided to try to maintain stabilization in this program. Unfortunately, turnover in staff members remains a continued concern.

5. **Substantial programmatic and funding changes being made as a result of last year's outcomes**.

   A substantial programmatic change for Armstrong or Indiana Counties was the opening of a regional walk-in crisis center on the campus of the Indiana Regional Medical Center in Indiana, PA which occurred on June 13, 2026. A $3.3 million dollar CMHSBG ARPA grant was obtained for the creation of this center in late 2022. Since then, there have been countless hours of work on the development of the program along with leadership changes at the Open Door, uncertainties about the new Crisis Regulations and various other barriers and obstacles along the way but everyone involved in the project persevered. Now that the center is open, we will be able to utilize these funds.

   Another project that has taken over a year to get started is our CHIPP funded Enhanced Supportive Housing project. Finding the right home for the development of this three bed home has been extremely challenging for the provider but finally a property was purchased in May 2026 so these funds will now be able to be utilized. Both of these projects will have a significant programmatic impact on our local behavioral health system. By having increased walk in crisis services available along with offering an additional housing option, individuals can live and receive services in their local community.

   The Armstrong-Indiana Human Services Block Grant Oversight Committee is responsible for not only providing oversight and monitoring the human services block grant for Armstrong and Indiana Counties but also for the creation and oversight of the block grant retained earnings plan. The members of the committee were the Armstrong-Indiana Behavioral and Developmental

Health Program, the Armstrong, Indiana, Clarion Drug and Alcohol Commission, the Indiana County Department of Human Services, and the Armstrong County Community Action Agency. All the agencies in the block grant retained their existing allocation levels.

The retained earning funds for FY 25-26 were used to support plans submitted by our Mental Health, Intellectual Disabilities and D&A Providers. These plans will be used to fund an educational advocate, training programs, computer equipment, upgraded electronic health records, online psychiatric testing tools, a new roof, and much needed furniture, appliances and vehicles.

PART II: PUBLIC HEARING NOTICE

Indiana County Two Public Hearings Documentation
Two public hearings were held to review the programs funded through the block grant and to solicit input to the development of the 26-27 Human Services Block Grant plan. The dates and times of the public meetings were July 9, 2026, at 3:00 PM and July 16, 2025, at 3:00 PM.

1. Proof of publication;
    a. The following copy provides proof of the notice placed in the Indiana Gazette announcing the meetings.
    b. The notice was published on June 25th, July 2nd, and July 7th, 2026.
    c. Additionally the meeting announcement was made public by the following means:
        - Posted on the AI-BDHP website at www.aibdhp.org
        - Distributed through the Indiana Department of Human Services E-Newsletter "The Informer"
        - Sent out through our email distribution lists.
        - The Director of the Indiana Department of Human Services spoke about the upcoming meetings on the radio on July 1, 2026, presenting the info for in-person and online and what it is all about.

2. The following is a summary of each of the hearings along with copies of the sign-in sheet from each public hearing.
    a. The July 9, 2026 – 3:00 PM Indiana County meeting was held in person at Indiana County Department of Human Services Conference Room located at 300 Indian Springs Road, Indiana PA 15701 and via Zoom. There were four attendees in person and seven attendees that participated through the Zoom option. The agenda for the meeting included a welcome and introductions, an overview of the plan process and what is included in the plan and plan due date. Presentations were then made by the Indiana County Department of Human Services regarding the Homeless Assistance Program and HSDF sections; the Armstrong-Indiana-Clarion Drug and Alcohol Commission presented on the Act 152, BHSI D&A sections; and the Armstrong-Indiana Behavioral and Developmental Health Program, presented on the Mental Health and Intellectual Disabilities sections of the plan. This was followed by a time for questions and comments.

    b. The July 16, 2026 – 3:00 PM Indiana County meeting was held in person at the Indiana County Department of Human Services Conference Room located at 300 Indian Springs Road, Indiana PA 15701 and via Zoom. There were four attendees in person and four attendees that participated through the Zoom option. The agenda for the meeting included a welcome and introductions, an overview of the plan process and what is included in the plan and plan due date. Presentations were made by the Indiana County Department of

Human Services regarding the Homeless Assistance Program and HSDF sections; the Armstrong-Indiana-Clarion Drug and Alcohol Commission presented on the Act 152, BHSI D&A sections; and the Armstrong-Indiana Behavioral and Developmental Health Program, presented on the Mental Health and Intellectual Disabilities sections of the plan. This was followed by a time for questions and comments.

NOTICE
NOTICE OF INDIANA COUNTY HUMAN SERVICES PLAN FOR 2026-2027

On behalf of the Indiana County Commissioners, staff will be presenting the consolidated County Human Services Plan for fiscal year 2026-2027 at two public hearings on July 9, 2026 at 3:00 PM and on July 16, 2026 at 3:00 PM. A hybrid meeting will be held. To attend in person, go to the CareerLink building located at 300 Indian Springs Rd, Indiana, PA 15701. The meeting will be held in the small human services conference room. To attend by Zoom, please go to **www.aibdhp.org** website and look under events for the Zoom information. The Block Plan includes Homeless Assistance Program, Human Service Development Fund, Behavioral and Developmental Health Programs, Intellectual Disability Services, and Drug and Alcohol Programs. The purpose of this hearing is to provide an opportunity for input into the plan and to hear how the funding will be used, which will be presented at a commissioners' meeting at a later date. For additional information, contact 724-463-8200, extension 4.

6/25, 7/2, 7/7

RECEIVED
JUL 10 2026
By

Proof of Publication

State of Pennsylvania
County of Indiana] SS

On this 7TH day of July 2026 A.D. before me, the subscriber, a Notary Public in and for said County and State, personally appeared:

Sherri L. Bash

who being duly sworn according to laws, deposes and says, that (s)he is the Solicitor of the Indiana Gazette, that the said Indiana Gazette is a daily newspaper of general circulation, published in the borough of Indiana, in the County of Indiana, State of Pennsylvania, by the Indiana Gazette Inc., and was established in said Borough on the second day of July 1890, since which date, said daily newspaper has been regularly issued in said Borough and County, that annexed hereto is a true copy of a notice in the above matter exactly as the same was printed in the regular editions and issues of the said daily newspaper on the following dates, viz:

6/25, 7/2, 7/7

Affiant further deposes and says that (s)he is an employee of the publisher of the said daily newspaper and has been authorized to verify the foregoing statement and the (s)he is not interested in the subject matter of the aforesaid notice or publication and that all allegations in the foregoing statement as to time, place, and character of publication are true.

By: Sherri L. Bash

Sworn to and subscribed before me the day and year aforesaid.

Commonwealth of Pennsylvania - Notary Seal
DAWN HAYES - Notary Public
Indiana County
My Commission Expires August 31, 2029
Commission Number 1406600

Signature of notarial officer

Proof of Publication		$270.93
Proof of Intent	$	15.00
Total		$285.93

Indiana Gazette Inc., publishers of the Indiana Gazette, a daily newspaper, hearby acknowledges receipt of the aforesaid publication costs, and certifies the same have been fully paid.

Indiana Gazette Inc.
899 Water Street, Indiana, PA 15701

By _____

Indiana Human Services Plan Public Meeting

Sign In Sheet

Meeting Date/Time and Location: July 9, 2026 @ 3:00 p.m. @ Indiana Co. Dept. of Human Services
300 Indian Springs Road, Indiana, PA 15701

Name	Agency	Phone	E-mail
1. Kami Anderson	AICOAC	724-388-0600	kanderson@aicdac.org
2 Lisa Spencer	ICDHS	724-463-8200	lspencer@indianacountypa.gov
3. Jen Villa	ICDHS / CAC	724-463-8200	cacp indianacountypa.gov
4. Tammy Calderone	AI-IBDHP	724-548-3458	tlcalder@aibdhp.org
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16.			
17. Virtual			
18. Jim Decker	Community Guidance Center		
19. Heather Gelles	I+A Residential Services		
20. David Maxwell	Alice Paul House		
21. Kayla Marshall	Alice Paul House		
22. Amy Cline	AIBDHP		
23. Christa Zubik	AIBDHP		
24. Shaari Montgomery	AIBDHP		
25.			
26.			
27.			
28.			
29.			
30.			

Human Services Conference Room at 3:00 PM

July 16, 2026

Indiana County Human Services Block Grant Public Meeting

In-person	By Zoom
1. Lisa Spencer	1. Amy Cline
2. Zoni Dmkp	2. Becky Perkovich
3. Kami Anderson	3. Aggie Hockenberry
4. Tammy Calderone	4. Maureen Pounds
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PART III: CROSS-COLLABORATION OF SERVICES

For each of the following, please explain how the county works collaboratively across the human services programs; how the county intends to leverage funds to link residents to existing opportunities and/or to generate new opportunities; identify partners and agencies involved in the provision of services; and provide any updates to the county's collaborative efforts and any new efforts planned for the coming year. (Limit of 4 pages)

1. **Employment:**

The Indiana County Commissioners work to improve the economic and business opportunities in the county. Indiana County has a 4.7% (April 2026) unemployment rate compared to PA rate at 4.2% (April 2026). Indiana County's rate of unemployment has increased from last year, and more recently up 3 tenths of a percent from last month. The Commissioners are involved with labor and workforce development. All three sit on the Tri-County WIB Board. The Commissioners, Office of Planning and Development, Center for Economic Operations and the Chamber of Commerce continue work on increasing job opportunities in the county.

Indiana County Department of Human Services and PA CareerLink
The human services, schools and workforce development services, such as the Indiana County PA CareerLink and CareerT.R.A.C.K., work together to promote job skills, job training and employment opportunities for residents of the county.

ICDHS promotes all of the functions of the PA CareerLink by sharing information on events through the ICDHS "Informer", an electronic newsletter. In the past year, the Informer has been sent to over 850 people/two times per month. ICDHS shares information on the Job Fair offered from Renda Broadcasting and/or CareerLink. All information is sent to our local newspapers to be printed in the Human Service Calendar.

ICDHS supports CareerT.R.A.C.K. by sharing information on their Youth Programs with all the human service agencies and the public via the same means as mentioned above with the CareerLink activities. The youth programs provide employment, training and academic enrichment services to young adults from ages 18-24 in a program that combines both work and learning. Human service agencies are utilized as training and work sites. Some of those sites include: ARIN Evergreen After School Club, The Housing Authority of Indiana County, Chevy Chase Community Center, local libraries, the Senior Social Centers, Communities at Indian Haven (county nursing home), the County Parks system and others. One eligibility requirement for these programs is to possess at least one or more specific barriers to employment. Barriers may be: high school dropout needing a GED, homeless or runaway, pregnant single female, single parent, deficient in basic reading and/or math skills, an individual with a disability, substance use past, transportation, etc.

CareerLink and Veterans
From what we understand, the CareerLink is no longer going to fund a Disabled Veterans Outreach Specialist to assist with employment needs for any disabled veteran, but veterans will be able to access the resources at CareerLink with their career advisors. The Veteran Provider Group (VPG) supports veterans and their families in the county by sharing resources and

information to help this population. Employment and housing needs are addressed. The Veterans Leadership Program, the Veteran's Affairs, Veterans Administration, and Soldier On work closely with the VPG on behalf of all veterans. ICCAP Case Managers link homeless individuals with the CareerLink for their classes, Job Club and job search activities. In 2024 Indiana County veteran unemployment rate was 6.4% compared to PA veteran unemployment rate of 4.0% (www.workstats.dli.pa.gov).

CareerLink connections to Local Support Agencies
The CareerT.R.A.C.K. collaborates with several human service agencies and their clients. The staff members are actively involved and offer services to qualifying individuals to increase skills and training for employment. In addition, CareerT.R.A.C.K. is able to assist job seekers with resume writing, job searches, and interviewing techniques.

2. **Housing:**
In Indiana County, cross-collaboration of human service agencies is strong, especially when it comes to providing shelter and safe and affordable housing. The following points highlight these efforts:

Indiana County Veteran's Community Gardens
Indiana County Veterans' Community Gardens is a permanent housing project. This project includes 5 one-bedroom apartments and 1 two-bedroom apartment. This facility is currently full. The Veteran's Providers Group supports veterans and their families in the county by sharing resources and information to help this population of our county. As mentioned above, employment and housing services for Indiana County are part of those needs. The Veterans' Parsonage is used as a "transitional" housing option while the veterans explore other resources. The Parsonage, the VA, as well as the HAP programs have been a referral source to the Veteran's Community Gardens.

Family Promise of Indiana County
Indiana County low-income families, experiencing homelessness, with children under the age of 18, can be referred to Family Promise of Indiana County, an Interfaith Hospitality Network. Family Promise brings the faith community together to help families regain their independence and their dignity. The program provides shelter, hospitality and case management services to their guests. Family Promise also provides transitional housing for qualified families in Indiana County. In addition, Family Promise operates Beyond Shelter where individuals and families are able to purchase common household products, hygiene items, cleaning items, etc. at an extremely low cost. Clients across systems can be referred to the store.

Support for Pathway Homeless Shelter
ICCAP continues using apartments for emergency shelter. Presently, six designated ICCAP apartments (2 one bedroom and 4 two bedrooms) were used as the emergency shelter spaces. This has worked out well. The shelter serves many different populations in the county. HAP homeless case managers (HCMs) provide case management and collaborate with the various human service agencies and housing agencies to assist in finding housing for individuals. Referrals are made to access other services which can help people overcome and eliminate barriers that lead to homelessness.

Finally, there are also a number of ways that funding has been leveraged to help residents secure available housing in our communities. AI-BDHP has been able to leverage Health Choices Reinvestment and PATH funding with other resources such as Section 8 Housing Choice Vouchers

to help residents secure housing. A specific example includes AICDAC being able to provide funding for a shelter client with substance use disorder if the client is currently enrolled in D&A services. The Housing Authority of Indiana County also handles the VASH vouchers for eligible veterans.

Ongoing and New Housing Projects
With the past use of the Opioid Settlement funding, Indiana County continues to have a forensic facility where people released from a substance abuse treatment facility or jail with a criminal record can move into this recovery housing, A New Way of Life. The facility can hold up to 30 clients. The clients are able to stay there for months to get back on their feet and reengage into the community while working with AICDAC programs.

Indiana County and ICCAP will be breaking ground this year for our new $3.8 million emergency shelter located in White Township (just outside the Indiana Borough where most of the jobs are located), and most importantly located on the bus route! This new facility will be built on the adjacent lot to ICCAP's Food Bank. This has been a need that was identified many years ago, and it is finally happening! Opening date is hopeful by the end of the year or by early next year.

PART IV: HUMAN SERVICES NARRATIVE

The narrative for the MENTAL HEALTH SERVICES and the INTELLECTUAL DISABILIITIES SERVICES is included in the Armstrong County Human Services Plan Document for FY 2026-2027.

SUBSTANCE USE DISORDER SERVICES (Limit of 10 pages for entire section)

The following sections should be used to describe the entire substance use service system available to all county residents *regardless* of funding sources.

Please provide the following contact information for the individual who is filling out the information in this section:

Name: Kami Anderson Title: Executive Director
Entity (Single County Authority (SCA) or other county agency: Armstrong-Indiana-Clarion Drug and Alcohol Commission, Inc.
Email address: kanderson@aicdac.org
Phone number: 724-354-2746, ext. 302

Please provide the following information for FY 25-26:

1. **Wait List Information:** Please complete the table below for fiscal year 25-26. If the average weekly wait time (days) for placement does not adhere to placement as referenced in the Department of Drug and Alcohol Programs (DDAP's) Case Management & Clinical Services (CMCS) Manual for withdrawal management (within 24 hours) or all others (within 14 days after LOCA completion), a narrative explanation should be provided.

LOC American Society of Addiction	Services	Average Weekly Number of Individuals*	Average Weekly Wait Time (days)

Medicine (ASAM) 3rd Edition Criteria			
4 WM	Inpatient Withdrawal Management	1	0
4	Medically Managed Intensive Inpatient	1	2
3.7 WM	Medically Monitored Inpatient WM	1	0
3.7	Medically Monitored Intensive Inpatient	1	0
3.5	Clinically Managed High Intensity Residential	5	1
3.1	Clinically Managed Low Intensity Residential	1	0
2.5	Partial Hospitalization Program	0	0
2 WM	Ambulatory Withdrawal Management with Extended On-Site Monitoring	0	0
2.1	Intensive Outpatient	1	0
1 WM	Ambulatory Withdrawal Management without Extended On-Site Monitoring	0	0
1	Outpatient	4	2
Other	Specify	0	0

*Average weekly number of individuals for FY 25-26

**Average weekly wait time (days) for placement in FY 25-26

a. What is the source of the data reported in the table above?
Staff report/SCA EHR System

2. **Overdose Survivors' Data**: Please identify which model (SCA Agency, Contracted Provider, Certified Recovery Specialist (CRS), Treatment Provider, Hospital Staff, or other DDAP models, as identified in DDAP's CMCS Manual) the county uses to offer overdose survivors direct referral to treatment for FY 25-26.

Referral Model(s)	# of Overdose survivors*	# Referred to Treatment	# Refused Treatment
Other DDAP Approved Model SCA/CRS model	21	14	7

*An overdose, as defined in DDAP's Case Management & Clinical Services Manual, is a situation in which an individual is in a state requiring emergency medical intervention as a result of the use of drugs or alcohol.

a. What is the source of the data reported in the table above?
SCA EHR System

3. **Levels of Care (LOC)**: Please provide the following information for the county's contracted providers.

LOC American Society of Addiction Medicine (ASAM) 3rd Edition Criteria	# of Providers	# of Providers Located In-County	# of Co-Occurring/enhanced Programs

4 WM	3	0	0
4	3	0	0
3.7 WM	14	0	1
3.7	5	0	5
3.5	21	0	6
3.1	11	1	0
2.5	5	0	0
2 WM	0	0	0
2.1	6	1	0
1 WM	0	0	0
1	7	1	0
Other	2	1	0

a. What is the source of the data reported in the table above?
SCA Excel Contract worksheet

4. **Treatment Services Needed in County**: Please provide a brief overview of the current services needed in the county for FY 26-27 in sections a, b, and c below.

a. Provide a brief overview of the current services needed in the county to afford access to appropriate clinical treatment services:

Transportation is the biggest need in Indiana County for people to access treatment and recovery services. Indiana County does have an MATP Program for in-plan treatment services, however clients need transportation to recovery services, such as support group meetings and to attend groups and activities at the local recovery centers. They also need transportation to employment-related appointments and back and forth to work. Clients also need transportation to and from other appointments, such as probation, and obtaining signatures for required forms for services. Non-MA eligible clients struggle with transportation and the SCA tries to provide ride services for them. The SCA received opioid settlement funds to provide rides through the UBER government program, however Indiana County has a limited number of UBER drivers operating.

Safe and sober housing is also another need in Indiana County. The SCA is working with an entity to establish licensed Recovery Houses through Opioid Settlement funds, but we need more recovery housing and affordable housing for those that don't want to live in Recovery Houses. Many clients still use medical marijuana and may not be accepted into Recovery Houses.

b. Provide an overview of any expansion or enhancement plans for existing or new providers to meet the current treatment needs within the county:

As far as expansion or enhancement plans, there are currently no plans in place in Indiana County for additional treatment facilities or modalities at this time. Indiana County had a new men's halfway house open in 2025 and a women's halfway house open in 2026.

The SCA will be working with our area O/P providers to increase the variety of group topics that are offered. We are also looking at starting a new "food as medicine" O/P treatment program, depending on if the SCA receives a federal grant that was applied for in July.

c. Provide an overview of any use of HealthChoices reinvestment funds to develop new services during the reporting year:

The reinvestment plans in use in Indiana County include 1) a new recovery center in Indiana, PA; 2) SDOH plan for funds for MA eligible clients who have emergent needs; and 3) rent for licensed recovery housing.

1) The SCA opened a new recovery center in Indiana County called the Indiana County Recovery Capital on January 1, 2026. The purchase and renovations are complete and we are using the remaining funding for personnel and operating costs through the end of 2026. The center is doing well and has 247 members.
2) The SCA has a plan to fund Social Determinants of Health for MA eligible clients that have emergent needs for such things as housing, transportation, food, clothing, childcare, etc. This plan has been very successful in helping people in our County.
3) The SCA has a plan to pay for rent for licensed recovery housing. There is only one licensed men's recovery house in the County, but we have accessed those funds.

5. **Access to and Use of Naloxone in County**: Please describe the entities that have access to Naloxone, any training or education done by the SCA or other entities and coordination efforts to provide Naloxone.

The Armstrong-Indiana-Clarion Drug and Alcohol Commission (AICDAC) acts as the Central Coordinating Entity (CCE) for the training and distribution of Narcan for Indiana County. All Police Departments, Fire Departments, EMS Agencies, Treatment Providers, School Districts, County Agencies and Human Service Agencies have access to Narcan if they so choose. The public also has access to Narcan through AICDAC.

AICDAC has collaborated with the following agencies in Indiana County to provide Narcan training and distribution: The Open Door, Indiana Agency on Aging, Indiana County District Attorney, Children and Youth Services, Department of Human Services, Probation, Indiana University of PA students, various Fire Departments, and all School Districts.

AICDAC offers on-site training to all area first responders and other groups that may request a formal group training. Through a federal grant from the Health Resources and Services Administration (HRSA), AICDAC has purchased and installed over 200 naloxone boxes in the three Counties. Naloxone boxes look like an AED box and provide space for 4 Narcan doses, gloves, and mouth guards. The naloxone boxes have been installed in hotels, school buildings, county buildings, stores, malls, etc. where the public can easily access them.
AICDAC has purchased 8 outdoor vending machines and has placed them in areas such as outside the Emergency Department at Armstrong and Indiana hospitals, recovery centers, FQHCs, etc. The Indiana County outdoor vending machines are located outside IRMC's ED, IRMC's satellite clinics in Blairsville and Marion Center, PA. Indoor vending machines have also been purchased and are located at the SCA offices, jails, provider agencies, etc. The vending machines are free of charge and contain Narcan, Drug testing strips, and wound care kits. Individuals can also call the SCA to have kits mailed to them if they don't have transportation.

6. **County Warm Handoff Process:** Please provide a brief overview of the current warm handoff protocols established by the county including challenges and program successes. Protocols include offering 24/7 direct referrals to treatment services for individuals who experienced an overdose or have been hospitalized.

The SCA's Addiction Recovery Mobile Outreach Team (ARMOT) consists of a Case Manager and Certified Recovery Specialist who provide warm hand-off services through Indiana Regional Medical Center (IRMC) and community partners. Individuals identified with a substance use disorder are offered an immediate connection to the ARMOT Team. Based on the individual's needs, services can include screening, level of care assessments, case coordination, recovery support, direct referrals to treatment, and connections to community resources for various needs. When emergent care needs are identified, staff coordinate timely referrals and admission whenever possible.

The program also includes a 24/7 Warmline when ARMOT staff are not onsite. Warmline provides hospitals, first responders, and community partners with direct access to on-call staff who connect individuals to appropriate services in a timely manner.

Our program successes include increased referrals from additional hospital units beyond the Emergency Department to include the new Mountains Behavioral Health Inpatient Unit, strengthened partnerships with hospitals, first responders, and community providers. We have also expanded education and collaboration with healthcare providers to improve substance use disorder identification and increase treatment options in the Emergency Department and Primary Care Settings.

Program challenges include limited availability of Emergency Department providers prescribing medications for opioid and alcohol use disorder (MOUD/MAUD). This can delay treatment or increase risk of individual initiated discharges. Another challenge is medetomidine in the drug supply, which makes withdrawal management and medical stabilization more complex.

a. **Warm Handoff Data: FY 25-26**

# of Individuals Contacted	# of Individuals who Entered Treatment	# of Individuals who Completed Treatment
338	237	177

1. What is the source of the data reported in the table above?
   SCA EHR System

HOMELESS ASSISTANCE PROGRAM SERVICES

Continuum of Services Description

Indiana County Community Action Program, Inc. (ICCAP) is a vital service provider in Indiana County's Continuum of Care and is designated as the local lead agency for housing in Indiana County. Homeless or near homeless individuals are referred to ICCAP through state or local police, township supervisors, other human service agencies, the faith-based community, through the Coordinated Assessment for Homeless Providers and self-referral. From the time ICCAP is notified of a person's homeless or near homeless status, a case manager begins to work with them. An assessment is completed to determine eligibility for programs and to meet the client's immediate needs: food, shelter, rental assistance in the form of security deposits and/or rents to move them out of homelessness or past due rent to resolve an

eviction. Supportive services are provided along with information and referral to other agencies that may be able to help. ICCAP maintains a current database of safe, affordable, rental properties in the county for distribution to clients.

ICCAP provides services to assist homeless individuals or those facing eviction in finding and maintaining permanent housing. Services are provided through Pathway (ICCAP'S Emergency Shelter Apartments), Bridge Housing Program, Rental Assistance and Homeless Case Management services. ICCAP also master leases eleven apartments for the Project PHD Program, (permanent supportive housing program for the disabled), and provides permanent housing through Emergency Solution's Grant Rapid Re-Housing Program funded through McKinney Vento HEARTH Act funds. ICCAP has partnered with Armstrong Indiana Behavioral Developmental Health program (AI-BDHP), to provide case management services and transitional housing for those who are homeless and have a mental health diagnosis through the PATH program.

The ICCAP Executive Director serves on the local Veteran's Provider's Group, Hunger Free PA Board of Directors, Emergency Food and Shelter Program Board of Directors, and Health and Human Services Subcommittee (part of the disaster plan for Indiana County), United Way Prevention Coalition, and the Opioid Settlement Committee. ICCAP staff attend the Southwest RHAB meetings. The Housing Consortium chose two members to represent Indiana County on the Coordinated Entry Committee of the Western COC. They are a representative from ICCAP and one representative from the Alice Paul House (Domestic Violence Shelter). In addition, the ICDHS Assistant Director has attended meetings for Southwest's RHAB and Western COC. The Veteran's Provider's Group meets monthly to discuss issues and resources pertaining to Veterans, including homelessness. One of the churches in Indiana (Veterans Parsonage) continues to offer a house to help veterans experiencing homelessness have a place to stay while in transition.

Financial Literacy Classes are being offered virtually by appointment. One bank representative provided all the classes for the past year. Clients from the Emergency Shelter and Bridge Housing are referred to the Financial Literacy class by the Homeless Case Managers. The Rental Assistance Program Counselor also refers clients to this class.

HAP programs have been a referral source to Indiana County's Veterans' Community Garden's permanent housing project. This project includes 5 one-bedroom apartments and 1 two-bedroom apartment. The units remain full with veterans who had been experiencing homelessness.

Indiana County's low-income families, experiencing homelessness, with children under the age of 18, can be referred to Family Promise of Indiana County, an Interfaith Hospitality Network. Family Promise brings the faith community together to help families regain their independence and their dignity. The program provides shelter, hospitality and case management services to their guests. Family Promise also provides transitional housing for qualified families in Indiana County. Family Promise opened Beyond Shelter in 2017 where individuals and families are able to purchase common household products, hygiene items, cleaning items, etc. at an extremely low cost. Another program is Promise of Prevention Program (POPP) that enables participants to come to a café and meet one on one with a case manager. This program is open to interested members of the community and those referred from agencies.

Some potential clients remain on a waiting list throughout the year, particularly when the weather is much colder. ICCAP works with Coordinated Entry, sharing openings across Pennsylvania for people experiencing homelessness. ICCAP has partnered with the VA to pay for residents being served at the shelter as long as they meet criteria. AI-BDHP has also provided funding for Pathway for individuals

served with a mental health diagnosis. The actual shelter has been closed for the entire 23-24 fiscal year to present, but alternative housing was provided during this time. ICCAP designated 2 one-bedroom and 4 two-bedroom apartments as Pathway Emergency Shelter beds. HCMs work directly with clients to find stable housing. Indiana County and ICCAP's $3.8 million dollar grant will build a new emergency shelter in White Township which is on the bus route! It will break ground this year!

Our county's "extra HAP" allotment of $60,312 will go to primarily to RAP. Our regular allotment for HAP is $223,106. So, our total allotment will be $283,418.

Bridge Housing Services:

- Please describe the bridge housing services offered. Include achievements and improvements in services to families at risk or experiencing homelessness, as well as unmet needs and gaps.

  Bridge Housing assists homeless clients by providing transitional housing, case management, and supportive services, with the goal of empowering clients to attain the highest possible degree of self-sufficiency. The county owns a building with 4 apartments. The primary objective is to work with parents who have children, who are always the priority, but we have opened this up to couples or individuals needing housing on a case-by-case basis. This program provides up to 18 months transitional housing. Intensive case management assists the client in providing a self-assessment, goal identification, and a service plan. Case managers facilitate community support services and act as an advocate for clients while also assisting clients with maintaining and assuring compliance of house rules. Documentation and reports are completed in Outcomes Results System (ORS) and include client demographic information, contacts, case notes, referrals, development plans, and outcomes.

  Clients seeking Bridge Housing are interviewed by the Direct Services/Shelter Director who assesses household needs. Clients are assessed through a point system to prioritize. Parents with children under 5 years of age and families who are victims of domestic violence receive more points, so they are a higher priority. Comprehensive service plans are developed, and the case manager provides contact with each client two times monthly and as needed. Continued progress on goals, payment of housing fees, and observance of program standards are the basis for the continued residency. At the conclusion of a client's stay, clients are encouraged to complete an exit interview.

  A three-month, six month and one-year follow-up is completed. The ICCAP Board of Directors Program Evaluation Committee annually conducts a comprehensive evaluation of the program, which is used for the basis of annual program review and improvement. Outcomes are measured as follows: 50% of the head of households will obtain/maintain employment or attend educational training, job readiness programs, and/or vocational training and 75% will obtain/maintain permanent housing upon exiting Bridge. The Direct Services/Shelter Director completes monthly reports for ICDHS which also monitors the program annually. This program continues for the 2026-2027 fiscal year with the goal of assisting 4 to 12 individuals.

  One thing that is difficult is the location of this house. People without cars will have a difficult time with transportation from this location. The bus schedule availability is very low for this area. The goal of serving 4 to 12 individuals was met this year.

- How does the county evaluate the efficacy of bridge housing services? Please provide a brief summary of bridge housing services results.

  The ICDHS annual monitoring was completed in April 2026. In FY 25-26, Bridge housed 3 families and 8 individuals at the time of monitoring. Average stay is about 8 months with one family staying for 7 months, one family staying for 12 months, and one staying for 5 months. Of the 3 charts reviewed on monitoring, 1 of the 3 clients was employed prior to entering Bridge. One was applying for SSDI. One client was supposed to get employment, but health issues arose causing work to be on hold. One family obtained permanent housing, and the other 2 clients were still at Bridge.

- Please describe any proposed changes to bridge housing services for FY 26-27.

  Direct Services/Shelter Director supervises the HAP HCMs and work with them to get eligible families into Bridge. No other changes to be made to Bridge except to emphasize to families the chance to have more time to get self-sufficient than being in the emergency shelter.

- If bridge housing services are not offered, please provide an explanation of why services are not offered.

Case Management:

- Please describe the case management services offered. Include achievements and improvements in services to families at risk or experiencing homelessness, as well as unmet needs and gaps.

  Homeless Case Management (HCM) is the ongoing coordination with the individual or family of all the supportive services needed from the administering agency and other resources in the community to achieve the goal of self-reliance. Objectives include providing HCM to 130 homeless individuals (70 households) and will continue for the 2026-2027 fiscal year. HCM assesses household needs and develops service and action plans in conjunction with the client and household; acts as an advocate on behalf of clients; coordinates services among multiple provider agencies; develops linkages with other agencies to coordinate service plan goals as needed; provides ongoing, intensive case management based on the service plans; directly provides supportive services such as transportation, budget counseling, and other needed services when no alternative exists; maintains regular contact and provides 6 month follow-ups; and completes all necessary documentation and reports as required and utilizes the ORS client database.

  Potential clients are referred by self-referral, ICCAP staff, domestic violence shelter, housing counselor, or other community agencies. HCM staff meet with the clients to complete a comprehensive needs assessment. Within ten days the goal plan is completed and signed by the case manager and client. This includes individual/family goals and short- and long-term goals. During the first 30 days, weekly contacts occur. Continual evaluation of progress towards goals is completed using ORS which includes client demographic information, contacts, referrals, case notes, and development plans. Services are coordinated with the housing staff of ICCAP. Supervision is being done by the Direct Services/Shelter Director. In addition to the annual evaluation conducted by the ICCAP Board of Directors Program Evaluation Committee, the Direct Services/Shelter Director monitors case files and progress regularly. Client evaluations are

anonymously completed, rating usefulness and quality of service. Monthly reports are completed and given to ICDHS to monitor program.

Case managers continue to be trained on all areas of documentation. There is still transition within the program, and it was difficult to find employees during the FY 25-26. This has been an on-going issue.

This program continues this next fiscal year with the outcome goal of 65% of households receiving HCM will have achieved permanent housing.

- How does the county evaluate the efficacy of case management services? Please provide a brief summary of case management services results.

  The county completes annual monitoring of these services. This occurred on April 2026. Case managers worked with 42 households and 65 individuals. At the time of monitoring, 15 households of 24 households that have completed the program achieved stable housing or 63%. Monthly reports of clients served are given to ICDHS. The county maintains good communication with ICCAP's director and supervisors.

- For FY 26-27, ICDHS is designating $13,000 of HSDF funding towards the HCM program to maintain some consistency in staffing. This program is needed to help guide individuals and families back to stable housing. The goal is to work with an additional 45 individuals bringing the total number of individuals to be served by HAP HCM to 175 (75 individuals assisted at the time of monitoring between HAP and HSDF HAP HCM goals). HSDF HAP HCM only monitoring, 11 households and 14 individuals were assisted with most of the 4th quarter left in the year.

- Please describe any proposed changes to case management services for FY 26-27.

  No changes noted with the exception of the biggest goal this year remains to keeping the HCM program fully staffed year-round. It is incredibly difficult to do this when people can make more money at different businesses/agencies with far less stress. ICCAP is really trying to sell its generous benefits package to prospective employees.

- If case management services are not offered, please provide an explanation of why services are not offered.

Rental Assistance:

- Please describe the rental assistance services offered. Include achievements and improvements in services to families experiencing or at risk for homelessness, as well as unmet needs and gaps.

  This component provides payments for rent and security deposits on behalf of eligible clients to prevent and/or end homelessness or near homelessness. It is projected that 158 households will be assisted during fiscal year 26-27. This estimate includes the extra HAP funding factored in (an estimated 48 HH will be assisted with the extra funding). RAP usually exceeds its number of individuals assisted. Rental Assistance is provided to individuals or families who meet the criteria

(200% poverty level) and are homeless or near homelessness. Client receives budget counseling on intake and is provided information and referral to appropriate services, including a Financial Literacy class. All documentation and reports utilize ORS which includes demographic information, contacts, case notes, referrals, development plans, and outcomes.

Individuals are referred to Rental Assistance Program (RAP) through ICCAP's HCMs/navigator, other county human service organizations, landlords, self-referral, or by word of mouth through friends or relatives. The client is screened as to income verification and information necessary to be eligible for the RAP. The client completes an intake, needs assessment, and a service plan with income verification. A workable budget is developed.

The Housing Counselor makes a determination of the household's ability to pay rent after the assistance is provided. The Counselor may initiate contact with the prospective landlord to explain the Rental Assistance Program. The client is given forms for the landlord to complete, verifying their agreement to ICCAP's assistance. Client evaluation forms are anonymously completed. Annual monitoring is completed by the ICCAP Board of Directors Program Evaluation Committee. This program continues for the 2026-2027 fiscal year with the outcome goal that 65% of households served are able to establish and maintain permanent housing. Follow ups are conducted at 90 days and 6 months.

One area of continued concern is our housing stock availability is very low, particularly for one-bedroom apartments.

- How does the county evaluate the efficacy of rental assistance services? Please provide a brief summary of rental assistance services results.

  Monthly reports are given to ICDHS to monitor program along with an annual monitoring of the program. Monitoring was completed April 2026. During the monitoring, ICDHS found that from July 1, 2025, to April 16, 2026, 85 households and 155 individuals had been served with most of the 4th quarter left to in the year. At the time of monitoring, 43 out of 85 households (81%) were in stable housing. Without this program, clients would be unable to come up with enough money to access stable housing.

- Please describe any proposed changes to rental assistance services for FY 26-27.

  We have increased the number of households served from 110 to 158 solely because of the extra HAP funding that we are expecting to receive again. Should this money not be available this fiscal year, our estimated number of households served would return to 110. RAP will continue working with households in need, according to the guidelines.

- If rental assistance services are not offered, please provide an explanation of why services are not offered.

Emergency Shelter:

- Please describe the emergency shelter services offered. Include achievements and improvements in services to families at risk or experiencing homelessness, as well as unmet needs and gaps.

  The shelter was closed down for the entire FY 25-26. ICCAP used alternative housing to shelter clients but continued to use shelter funding to house individuals and families. ICCAP reserved 6 apartments (4 two-bedrooms and 2 one-bedrooms) as emergency shelter apartments only. The apartments can house as many people as our shelter did. Since losing the shelter staff when the emergency shelter closed due to the pandemic, ICCAP has not been able to find staffing and cannot afford the costs of reopening the congregate shelter at this time. The apartments are working well at this time.

  Pathway, Indiana County's emergency shelter program, provided 30 days of shelter in conjunction with supportive services to homeless individuals and families who are moving towards self-sufficiency. The goal is to provide emergency shelter for up to 110 individuals for this fiscal year. Support services include information and referral, case management, food, and assistance in obtaining clothing, medical care, and other services as necessary.

  Shelter was provided to individuals who met the following criteria, in addition to the Pennsylvania DHS HAP I&R: due to a situational crisis, must not have any other appropriate place to live; family income must not exceed 200% of FPIG; if a member of the household is a victim of domestic violence then that individual must have a current protection from abuse order; if an individual is chemically dependent that individual must be an active participant in an approved rehabilitation program or self-help and random drug testing; must agree to 30-day maximum stay and must be willing to actively pursue alternative housing and work on goals while at the shelter; at least one adult in the household must have a demonstrated capacity for independent living; and former Pathway residents are considered on a case by case basis. Clients were encouraged to complete an exit interview upon leaving Pathway. ICCAP's Board of Directors Program Evaluation Committee completes an annual evaluation and discusses outcomes with Direct Services/Shelter Director. This program will continue in 2026-2027 with the goal of 65% of people served locating stable housing.

- How does the county evaluate the efficacy of emergency shelter services? Please provide a brief summary of emergency shelter services results.

  Monthly reports are sent to ICDHS to monitor, and an annual monitoring was completed on April 13, 2026. 37 households or 57 individuals have been served at the time of monitoring. The shelter has a waiting list all year long, so we know that this is a critical service to our community.

- Please describe any proposed changes to emergency shelter services for FY 26-27.

  We are very hopeful that our new emergency shelter will be built this year! We are hoping for it to be opened by the end of this year depending on construction timeframes. If not, by early next spring ICCAP will be working with this new facility. This will be a 20 unit building with shared kitchen/living spaces. This is much needed in our community. The new shelter will be located on a reliable bus route to help with employment opportunities and transportation barriers!

- If emergency shelter services are not offered, please provide an explanation of why services are not offered.

Innovative Supportive Housing Services:

- Please describe the other housing supports services offered. Include achievements and improvements in services to families experiencing or at risk for homelessness, as well as unmet needs and gaps.

  Separate from HAP funding and ICCAP, families experiencing homelessness with children under age 18 are able to be referred to Family Promise of Indiana County, part of the Interfaith Hospitality Network. Family Promise works collaboratively with churches in Indiana County. Indiana County also has a domestic violence shelter for individuals/families escaping abusive situations. In addition, our county has a Veteran's Parsonage that is privately funded, and it works to house veterans experiencing homelessness.

- How does the county evaluate the efficacy of other housing supports services? Please provide a brief summary of other housing supports services results.

  The county has no authority over the programs listed above, so the county does not evaluate these services.

- Please describe any proposed changes to other housing supports services for FY 26-27.

  N/A

- If other housing supports services are not offered, please provide an explanation of why services are not offered.
  It is not possible to start new programs without a substantial amount of funding to be able to sustain the programs. Even with the additional funding for HAP, it is unclear that this funding can be relied on for future years. The county would not be able to pick up the costs incurred to sustain new programs if funding is cut.

Homeless Management Information Systems:

DHS encourages counties and HAP partners to participate in their Continuum of Care (CoC) and for eligible providers to collect and track client-level data and services in their CoC's Homeless Management Information System (HMIS). HMIS tracks and analyzes the characteristics and service needs of people at-risk or experiencing homelessness.

Please describe the county's utilization of HMIS to include how HAP providers enter data and enrollments into HMIS for any or all components of the program.

ICCAP is the lead housing agency in Indiana County. All clients experiencing homelessness who are referred to ICCAP are entered into the database Homeless Management Information System (HMIS). These same individuals are also entered into HMIS's Coordinated Entry system. ICCAP is able to assist these housing clients through the following housing programs: Pathway Emergency Shelter, Bridge Housing, Rental Assistance, ESG Rapid Re-housing, PATH Housing Liaison, and

HUD's Permanent Supportive Housing Programs. Indiana County Office of Planning and Development uses the HMIS system to pull reports for funders. Alice Paul House, Indiana County's domestic violence shelter, also enters their residents into the HMIS system and Coordinated Entry. However, to protect the identity of their residents, a code is entered and not a name.

ICCAP staff have attended Housing First trainings, Fair Housing Trainings, and COC/RHAB trainings/meetings and will continue attending trainings offered in 2026-2027.

Emergency Housing Vouchers through HUD have been received, and the HMIS system will be used. Our local Housing Authority of Indiana County also has HUD VASH vouchers for veterans.

- If the HAP provider does not utilize HMIS, describe how the provider collects client-level data and data on the provision of housing services. Is this data provided to the CoC that coordinates housing and services funding for families and individuals experiencing homelessness?

  N/A

- Describe any change the county has identified in the service needs of families or individuals experiencing homelessness over the past program year.

  ICCAP is continuing to work with all individuals/families in need of assistance. The majority of the extra funding for HAP will go a long way to help out the Rental Assistance Program. This usually runs very low on money by the end of the fiscal year. We will continue our outreach efforts alongside of ICCAP through the Point in Time Count annually. It is a good way to engage the community and businesses that may be able to direct people in need to ICCAP. During this year's PIT Count, we identified 3 people the night of the count, and 1 person the next morning. Homelessness continues to be a big issue for our county. We have many "unseen" homeless who live in their cars or places that we cannot find them. We also have a shortage of affordable housing units. Our Planning & Development Office is working on some new low-income senior housing options which is good, but more housing is needed.

HUMAN SERVICES AND SUPPORTS/ HUMAN SERVICES DEVELOPMENT FUND (HSDF)

Please use the fields and dropdowns to describe how the county intends to utilize HSDF funds on allowable expenditures for the following categories. (Please refer to the HSDF Instructions and Requirements for more detail.)

Dropdown menu may be viewed by clicking on "Please choose an item." Under each service category.

Copy and paste the template for each service offered under each categorical, ensuring each service aligns with the service category when utilizing Adult, Aging, Children and Youth, or Generic Services.

Program Name: Administration

Description of Services: $7,300 for activities and services provided by the Administrator's Office of the Human Services Department. This is less than the maximum amount 10% that can be taken for Admin Costs.

Adult Services*: Please provide the following:*
Program Name: **$13,000 Homeless Assistance Program, Homeless Case Management**
Description of Services: ICDHS has a contract with Indiana County Community Action Program (ICCAP) to implement HAP programming. Due to fluctuating funding streams for ICCAP, HSDF funding of $13,000 will go to assist with costs to continue to stabilize the homeless case management program. Case managers will not work with Bridge clients. Case managers will work with individuals experiencing homelessness in and out of our emergency shelter and in the community. The goal for FY 26-27 is for HSDF HAP HCMs to work with an additional 45 individuals in addition to the 130 individuals just in the HAP HCM program.

Service Category: Service Planning/Case Management - a series of coordinative staff activities to determine with the client what services are needed and to coordinate their timely provision by the provider and other resources in the community.

Aging Services: Please provide the following:
Program Name:
Description of Services:
Service Category: Please choose an item.

Children and Youth Services: Please provide the following:
Program Name:
Description of Services:
Service Category: Please choose an item.

Generic Services: Please provide the following:
Program Name: **$2500 Information and Referral**
Description of Services: This is lower than last year by $950. No wages/benefits are paid from this money. Assistant Director is responsible for providing all information and referrals from our office for the entire county. This specific funding includes printing and mailing costs, supplies (paper), travel to disperse information around the county when requested by schools and/or senior centers, etc., all website contacts (can email our department with requests for information), all electronic mailings, website contract, and Constant Contact fees.

We have a website with an electronic directory for Human Services in our county, which lists agencies from A-Z. Assistant Director is responsible for continually keeping this updated. Assistant Director assists with outreach throughout the county to ensure our residents are aware of the 2-1-1 system.

Service Category: Information & Referral - The direct provision of information about social and other human services, to all persons requesting it, before intake procedures are initiated. The term also includes referrals to other community resources and follow-up.
Please indicate which client populations will be served (must select at least **two**):
☒ Adult ☒ Aging ☒ CYS ☒ SUD ☒ MH ☒ ID ☒ HAP

Specialized Services: Please provide the following: (Limit 1 paragraph per service description)
Program Name: Toddler Time Program

Description of Services: **$8523 of HSDF** funding is being allotted to continue this program for this next year. ARIN IU28 is to offer this program to families residing in housing communities throughout Indiana County. This program will be held weekly at the various community rooms/spaces where low-income housing is located (where we can secure space) and will also be available to income-eligible families at no cost. Each session will include 30 minutes of free play, followed by a structured circle of time featuring songs, weather discussions, and story reading. Children will then participate in a craft activity and enjoy a nutritious snack. The program is free and open to all families, with both children their parents or caregivers invited to attend. In addition to promoting early childhood development and strengthening parent-child interaction, the program will provide parents and caregivers with valuable information on a range of topics. These may include parenting strategies, child development milestones, local events, and available community resources. The goal is to foster a supportive environment that builds trust and a sense of community among participants. Program goals: Support Early Childhood Development, Enhance Parent-Child Interaction, Educate and Empower Caregivers, Promote Community Building, and Increase Access to Services. HSDF funding will pay for the case manager who will plan, set up, coordinate, implement, and clean-up all the sessions offered. We are estimating that at least 100 individuals will be served. This past year we were hoping for 30 participants. We were stunned to know by monitoring in early spring that we surpassed 65 participants with some being duplicate participants who are finding much value in this program! We want to give this program time to grow for another year!

Interagency Coordination: (Limit of 1 page)
If the county utilizes funds for Interagency Coordination, please describe how the funding will be utilized by the county for planning and management activities designed to improve the effectiveness of categorical county human services. The narrative should explain both:

- how the funds will be spent (e.g., salaries, paying for needs assessments, and other allowable costs).

  $21,262 Children's Advisory Commission Coordinator
  The county commissioners want this position to continue. This position is critical to coordinate over 50 agencies/businesses/community groups/community members to collectively and efficiently collaborate and coordinate family and children programming for residents of our county and across all categoricals (Human Services, CYS, D&A, MH/ID).

  $36,000 Assistant Director, ICDHS
  This funding will offset the cost of this position. The county also contributes to this position's salary. This is a slight increase from last year due to rising costs of wages and benefits. This position is key for compiling volunteer opportunities and events from the categoricals/community agencies. This includes submitting the media listing and the volunteer guide to our local newspapers and marketing through the department Facebook page and newsletters (newsletter is sent twice a month and reaches over 850 people each time). This newsletter compiles all the events/trainings/happenings/etc. for all the county and community agencies. Categoricals rely on this dissemination of information to the community.

  In addition, this position is responsible for coordinating Project Share. This is a committee, comprised of about 19 human services/faith-based groups, that pulls together all resources available for assistance to families in need. It was necessary to collaborate as resources are not increasing. Assistant Director is responsible to maintain the spreadsheet where all committee members document assistance for individuals and households. Because of this committee, Indiana County has been able to greatly reduce fraudulent activity and repetitive requests for assistance. The Assistant Director is also responsible to be on many planning and work committees for several

of the categoricals and/or human service agencies that continually find ways to improve human services systems. The Assistant Director volunteers at many events and has direct access to the public where she is able to receive direct feedback from community members.

- how the activities will impact and improve the human services delivery system.

  These two positions have the ability to work with multiple agencies. Increased communication between agencies and great collaborative work is accomplished because these two positions create the opportunities for agencies to work together. The amount of resource sharing that our county is able to complete because of programs like Project Share is incredible. Our commissioners have seen the work that is done from these two positions, and they want these positions to stay in place. Both of these positions maintain regular meeting schedules for all of the involved agencies.