

**STRATEGIC PLAN FOR
BEHAVIORAL HEALTH**

SUBMITTED BY

**KENT COUNTY
BEHAVIORAL HEALTH**

CAROL B. WISE, DIRECTOR

STRATEGIC PLAN FOR BEHAVIORAL HEALTH

PRIORITY AREA: Goal(s) or individual objective(s) within a Goal:

Goal 3, Objective 3: Develop a regional halfway house to serve adults some of whom have co-occurring disorders.

ACTION PLAN: (specific methods by which the goal(s) or objective(s) are to be accomplished)

- **Establish statement of need** – This is fairly easy to do since A. F. Whitsitt Center is a steady referral source for halfway housing for its patients and frequently travels to western Maryland, Delaware and Pennsylvania to obtain halfway house placement. There is only one halfway house (8 beds) in the Upper Eastern Shore region of Maryland. This is for males only. There are no halfway houses for females on the entire Eastern Shore. The closest female facility is located in Harford County.
- **Establish program model, space and staffing pattern needed.** There are two options. One would be to rent a halfway house and run it and the other would be to build a wing onto the Upper Shore Community Mental Health Center where A. F. Whitsitt Center is housed. The second option would be the most expensive in the short term but would offer greater flexibility by the sharing of staff of the A.F. Whitsitt Center, and Kent County Behavioral Health which encompasses both outpatient addictions and mental health. This would also provide a sense of permanence, and would provide accessibility to wrap around services and the ability to expand.
- **Determine budget.** Again, this would be driven by the type of model (as indicated above).
- **Review existing resources for potential sources of funding.**
- **Establish referral connections and admission criteria, including connections to criminal justice, health and mental health.** The addition of a halfway house to Kent County's continuum of care makes good sense in that the referral structure is built into Whitsitt Center and outpatient treatment would be available through the outpatient Health Departments. Approximately 25% of Whitsitt patients were admitted into halfway house placement in FY 2004. This number has decreased due to the competition from other intermediate care facilities for the slots and the fact that we are now 24 beds, up from 20 beds and

there are simply not enough beds to accept our patients within the state of Maryland. Another big factor emphasizing the increased need for the addition of halfway house beds is the increase of 8-507's that are referred for treatment to A. F. Whitsitt Center.

In most instances, the court order reflects long term treatment, something which A. F. Whitsitt Center does not provide. The addition of halfway house beds would provide that – a 28 day inpatient stay with transitioning to a halfway house.

Also, with the integration of mental health and substance abuse services here in Kent County, co-occurring disordered individuals would be served with wrap around services being provided by outpatient substance abuse and mental health professionals.

INTENDED MEASURABLE OUTCOMES (specific estimated result of the change)

- Approximately 16 addicted men/women per year will be provided halfway house services following discharge from the A. F. Whitsitt Center.
- Substance use will decrease among adults completing treatment by at least 80%.

CONNECTION TO IDENTIFIED TARGETED OUTCOMES FROM INITIAL STRATEGIC PLAN:

- Reduce the number of addicted individuals in the upper Eastern Shore.

BUDGET:

Budget					
Priority Action Area	Current Funding Amount	Current Source of Funding	Amount of Funding Increase Needed	Source(s) of Funding Needed to accomplish priority	Anticipated Increase in the # of Slots and # to be Served
To Develop a regional halfway house for 8 male/females	None	N/A	\$ 139,898	ADAA: \$ 110,000 Local Funding: \$ 29,898	8 slots/ 16 individuals (based upon a six-month residency)

BUDGET FY 2007

Halfway House	\$ Amount
Staff Salaries	28,000
FICA	2,050
Retirement	1,613
Def Comp	700
Health Insurance	5,300
Retiree Health Insurance	1,855
Unemployment Insurance	93
Workman's Compensation	400
Special Payments Payroll	63,000
FICA	4,818
Unemployment Insurance	69
Postage	150
Telephone	1,200
In-state Travel	300
Training	1,000
Gas & Oil	3,000
Advertising	450
Medicine	500
Lab Testing	200
Food / Patients	12,000
Office Supplies	700
Utilities	12,000
Extermination	300
Building Rent	24,000
Trash Removal	<u>1,200</u>
	\$164,898

NET COLLECTIONS	\$25,000 – Resident Rent
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TOTAL COSTS NET OF COLLECTIONS	\$139,898
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DHMH FUNDING	\$110,000
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LOCAL FUNDING	\$ 29,898
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