



**Children's Services Guide**

Rev 4/20/2023

*inspiring hope & healthy living*



TrueNorthWellness.org  
With locations serving Central Pennsylvania

Welcome to TrueNorth Wellness Services’s Children’s Services Program. We are pleased that you have chosen us to help meet your child’s emotional, mental, and behavioral health and wellness needs. This guide contains useful information about policies, procedures, and expectations.

Please read through this guide. Our staff may answer questions that you have about anything in this guide. You will be asked to sign a form indicating that you have been given and read this guide.

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## HOW TO ACCESS CRISIS INTERVENTION SERVICES

How do I contact Crisis Intervention Services?

**Call or Text**

**988**

**Suicide and Crisis Lifeline**

**What is Crisis Intervention Services?**

You and your family have access to **24-hour/day** crisis services if there is a crisis situation. Crisis Intervention Counselors are well trained to provide: short-term counseling, information, referrals, and assessment and/or arrangement for psychiatric hospitalization.

**When do I use Crisis Intervention Services?**

When your mental health professionals are not immediately available for crisis services, call and talk to a Crisis Intervention Counselor.

**After-Hours/Crisis Intervention Services**

Adams & York Counties	800-673-2496
Dauphin County Crisis	717-232-7511
Duncannon Area Crisis	717-834-3326
Eastern Cumberland/Perry Counties	717-763-2222
Western Cumberland County	717-243-6005
Franklin County	717-264-2555
Fulton County	1-866-918-2555

## **Welcome to TrueNorth Wellness Services'**

### **Children's Services**

**Mission:** Inspiring hope and healthy living by providing behavioral health and wellness services one person at a time.

**Vision:** A community where everyone has a path to wellness.

#### **About Us:**

For more than 40 years, TrueNorth Wellness Services has been providing our communities with behavioral health and wellness programs, such as Counseling Services, Residential Services, Autism Services, Emergency Crisis Services, and Education and Prevention programs.

TrueNorth is a trauma-informed care agency that strives to create a safe environment of trusting relationships and a culture of hope and healing where all will thrive.

As a result of our exceptional service reputation and proven evidence-based outcomes, our organization has grown substantially over the years – now employing over 450 individuals, operating eight offices spanning seven counties throughout Central Pennsylvania and providing services to over 22,000 clients a year.

Customizing our behavioral health and wellness services to support our clients' needs has, and always will be, our first priority. Quite simply, we are a partner in their success – working together to develop their own individual wellness plan. Our highly-trained staff works to provide a comforting environment that inspires hope and healthy living and moves clients toward achieving a lifetime of wellness.

## **Children's Services Available**

**Amazing Kid's Club\***: is an on-site therapeutic program for children and adolescents ages 2 to 21 with an autism spectrum disorder. The program is now offered in two locations serving York and Adams Counties - Red Lion and Hanover. This program is a combination of behavioral and relationship therapy strategies. The primary focus is developing communication, socialization and play skills. **For more information or to make a referral please contact the Family Liaison, Stephanie Hann-Snyder, at (717) 797-5930.**

**Intensive Behavioral Health Services (IBHS)\***: provides intensive support services to children and their families in the home, school, and community settings. The goal of IBHS is to: stabilize behavior; increase coping and management skills by the youth, their family, and collaterals; and decrease the need for more intensive levels of care. This can include Mobile Therapy, Behavior Consultation, and Behavioral Health Technician services. Services are provided in Adams, Cumberland, Dauphin, Perry, and York Counties. **For more information about IBHS, please contact:**

- **In York and Adams Counties, call Christine Abrams at 717-632-4900 ext. 1202**
- **In the Greater Harrisburg Area, call our Administrative Coordinators at 717-657-2080 ext. 1905**

**Family Based Mental Health Services (FBMHS)\***: provides short-term, intensive, community-based counseling to families with children or adolescents who are at risk for removal from the home due to severe emotional or behavioral challenges. FBMHS can also assist families to transition children and adolescents who were already removed back into the home. The program combines counseling, case management, and family support services provided in the home by trained mental health professionals. Services provided in York and Adams Counties.

**For more information, please contact Dan Karlow at 717-632-4900, x1289.**

**Functional Family Therapy (FFT)\*:** is an intensive, evidenced-based treatment program grounded in the understanding that families sometimes develop patterns of relating and problem-solving that can ultimately promote and maintain problem behaviors. Clients appropriate for FFT are 10-18 years old and typically demonstrate externalizing behaviors such as repeated non-compliance at home and school, truancy, substance use/abuse and other behavioral issues related to life adjustment. Services provided in Adams, Cumberland, Dauphin, Lancaster, Lebanon, Perry, and York Counties.

**For more information about FFT, please contact Kendall Cline at 717-632-4900 ext. 1958.**

**School-Based Therapy Services:** Outpatient therapy services are available within the following school districts:

- Central Dauphin School District
- Central Fulton School District
- Conewago Valley School District
- Eastern York School District
- East Pennsboro Area School District
- Fairfield Elementary School District
- Fannett Metal School District
- Forbes Road School District
- Gettysburg Area School District
- Halifax Area School District
- Hanover Area Public School District
- Littlestown Area School District
- Lower Dauphin School District (elementary only)
- Millersburg Area School District
- South Eastern School District
- South Western School District
- Spring Grove Area School District
- Upper Adams School District
- Upper Dauphin Area School District

**For more information, please contact:**

- **Shannon Williard (Harrisburg area) at 717-657-2080 x1971**
- **Samantha Davis (York/Adams/Franklin/Fulton Counties) at 717-843-0800 x2217**

\*These services typically require active Medical Assistance to be eligible.

## **Mandated Reporters**

The PA Child Protective Services Law (CPLS) was enacted in 1975 to protect children from abuse, allow the opportunity for healthy growth and development, and whenever possible, preserve and stabilize the family. All of Children's Services Program staff are considered Mandated Reporters and are required to report suspected child abuse if they have reasonable cause to suspect that a child is a victim of child abuse. For more information, please go to PA Department of Human Services Mandated Reporters FAQ at [www.keepkidssafe.pa.gov](http://www.keepkidssafe.pa.gov).

## **Safe Crisis Management (SCM) Information for Parents**

Safe Crisis Management (SCM) teaches Behavioral Health professionals how to prevent unwanted behavior incidents, how to help students make better behavior choices, how to safely manage dangerous behavior, and what to do following a behavior incident.

SCM stresses "child safety first" and that Emergency Safety Interventions should only be used when a student is a danger to himself/herself or others.

Some of TrueNorth Wellness Services Children's Services Program staff are trained and use SCM. This will be discussed with you by your Children's Services program staff.

You can find more information about SCM from JKM Training, Inc. website [www.safecrisismanagement.com](http://www.safecrisismanagement.com) or calling (866) 960-4SCM.

## **Quality Improvement**

In order to regularly monitor and assess the quality of services provided by TrueNorth Wellness Services, internal and external audits and reviews are conducted regularly from each program. The QI review includes evaluating various types of documentation, timeliness of its completion, and the quality of its content. The regulations, payer specifications, and service descriptions specific to each program serve as the framework under which the quality is evaluated. The results are analyzed to identify trends for success and areas of



needed improvement, which are used to set program benchmarks and goals. A copy of the annual quality report may be requested by a youth, young adult or parent, legal guardian or caregiver of a child, youth or young adult upon admission to services.

### **Court Testimony**

From time to time, TrueNorth Wellness Services receives requests that staff provide court testimony. These requests come from a variety of sources, including the individuals we work with, subpoenas from attorneys representing individuals we work with, and subpoenas from opposing sides when someone we work with is involved in a legal case.

Below are key points for you, as a consumer of TrueNorth Wellness Services, to know regarding our ability to provide court testimony:

- We do not provide evaluation or testimony related to child custody under any circumstance;
- We do not provide evaluation or testimony related to disability claims or cases under any circumstances;
- If we receive a subpoena, we will send correspondence that acknowledges the request. However, due to confidentiality regulations, we may not release information about you or your treatment without your written consent or a court order to do so.

There is a fee for court testimony, please contact our Billing office at 717-632-4900 to determine applicable fees.

### **Freedom of Choice (PerformCare Members Only)**

I have been given freedom of choice in selecting available providers and realize that I may choose to receive treatment at any agency available through my insurance carrier. I am aware that I have a right to choose between at least two Providers. If I wish, alternate Providers can be made available to me through my insurance company's Member Services Department by contacting the number on the back of my insurance card.

I am also aware that my Provider will discuss with me all treatment options and what the treatment options involve, including advantages and/or disadvantages of each type of treatment. My family and significant others will be included in treatment if I wish them to be.

For those with PerformCare insurance, Member Services can be reached at the following phone numbers.

- Member Line HealthChoices, Bedford/Summerset **1-866-773-7891**
- Member Line HealthChoices Capital Region (Dauphin, Cumberland, Lancaster, Lebanon, and Perry) **1-888-722-8648**
- Member Line HealthChoices, Franklin/Fulton **1-866-773-7917**

## **Client Grievance and Appeal**

TrueNorth is committed to ensuring that your rights and those of others are safeguarded and that the treatment we provide is of the highest quality. From time to time, complaints or concerns may come up.

The following steps should occur if you find yourself needing to express a concern or complaint:

1. Discussion with your primary staff person. If the issue cannot be resolved at this level, you may opt to move to step
2. You may choose to file a formal complaint or grievance at any time, which will be reviewed by the Program Manager and the Chief Operations Officer (COO).
3. If you are not satisfied with the Program Manager's decision, you may submit a written appeal to the COO. This appeal must be made within 10 days of receiving the response from the Program Manager. The COO will investigate the complaint and provide a response within five business days.
4. If you are dissatisfied with the COO's decision, you may submit an additional appeal in writing within 10 days of the decision to the Chief Executive Officer (CEO). The CEO will investigate and provide a decision within five days.
5. If you complete the above steps and your complaint has not been resolved to your satisfaction, you may notify the appropriate outside party verbally or in writing. Staff can assist you in identifying the appropriate place for your complaint (County Administrator, appropriate department of your insurance).

## **Client Bill of Rights**

1. You have the right to be treated with dignity and respect. You will not be subjected to harsh or unusual treatment, nor be neglected. You will retain all civil rights throughout treatment, unless rights are reduced by order of Court.
2. You have the right to be treated in a non-discriminatory manner. TrueNorth Wellness Services is committed to non-discrimination. The agency does not discriminate against clients based on age, ancestry, color, disability, national origin, race, religious creed, marital status, gender or sexual preference.
3. You have the right to file a complaint of discrimination should you have a grievance. You may either file the complaint with TrueNorth Wellness Services' Compliance Officer (who can be reached at 717-632-4900) or you may file a complaint with the relevant government agency. Your program staff or the County can identify the relevant government agency for you.
4. You have the right to be informed about your treatment and possible side effects. You have the right to withdraw from services and/or refuse treatment at any time. You have the right to ask questions about your treatment and get more information in sufficient time to make decisions about your treatment.
5. You have the right to see the staff psychiatrist. Your opinions and reactions to medication are respected. Medications, reviews and adjustments are provided under the direction of the psychiatrist. If you can fulfill your activities of daily living without medication, you will be offered assistance in learning to live purposely without medications. You have the right to refuse medications.
6. You have the right to assist in the development and review of an individual treatment plan that meets your needs. You have the right to know your progress and receive help to improve your situation throughout your treatment.

7. You have the right to express concerns and make suggestions to the staff. Contact your primary worker or follow the agency/program grievance procedure if you have concerns.
  
8. You have the right to request a change of your individual provider. To do this, speak to a staff member in your current program. You also have the right to change to a different agency for services.
  
9. You shall have the right to privacy and confidentiality of information about your treatment offered or given, per the HIPAA policy that was provided to you. You have the right to view your clinical record in accordance with the agency HIPAA policy.
  
10. You have the right to explanations of fees and of the process of determining your liability for these fees and to be free of financial exploitation.

## **Client Responsibilities**

TrueNorth Wellness supports the philosophy that your recovery journey is unique and you are responsible for its success. In addition to the rights listed above, you have certain responsibilities as well.

### **The Client's Responsibilities**

1. For providing accurate and complete information concerning your present concerns, current and past medical conditions, past/present use of any/all medications, past/present use of substances, and other matters relating to your current situation.
2. Reporting any changes regarding your symptoms or demographic information.
3. For reporting any condition that puts you at risk, including allergies, use of over the counter medications or substances that may interfere with prescription medications.
4. Guiding, engaging in, and participating in your treatment by collaborating with your provider to develop a treatment/goal plan and after care plan that you will be able to follow.
5. Attending appointments on time or notifying the office in a timely manner if you are unable to do so.
6. Recognizing responsibility for your actions if you refuse treatment.
7. Being respectful of the rights of other clients and agency staff.
8. Respecting the confidentiality of others.
1. Assuring that the financial obligations of your care are met, regardless of insurance. Payment (including co-payment) is due at the time of service, unless arrangements have been made.
9. Supporting TrueNorth's philosophy of wellness by adhering to the agency policy of not smoking within 25 feet of an entrance and not attending services under the influence.
10. Promoting a safe environment, which is free of illegal substances, weapons, and threats of any type.

## **Children's Services Financial Responsibility Statement**

TrueNorth Wellness Services must, under most circumstances, bill all services to your primary insurance before we are able to bill Medical Assistance. Some services are covered by private insurance, while others are not. Because of this, it is important that we have current insurance information on file. We will periodically ask you to verify your current private insurance and/or Medical Assistance information. Additionally, we ask that you:

- Provide us with information about/copies of all active insurances
- Notify us immediately if you get a new private insurance plan or policy
- Notify us immediately if your medical assistance coverage changes
- Notify us if your private insurance coverage is ending or the coverage is changing
- Notify us if you get a new insurance card
- Respond promptly to any requests from us to produce an insurance card or to verify the accuracy of the information we have on file

Failure to provide us with changes to your insurance coverage may result in a disruption to your child's services.

Please note that while we accept many insurances, we may not be able to accept every one; however we will work with you and your insurance company to the best of our ability.

Notification about insurance changes can be made by calling our Billing Department at **1-800-315-0951** or providing your child's program staff with a copy of BOTH the front and back of your insurance card(s).

## **NOTICE OF PRIVACY PRACTICES**

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW CAREFULLY.

### **Our Duty to Safeguard Your Protected Health Information**

Individually identifiable information about your past, present, or future health or condition, the provision of health care to you, or payment for the health care is considered “Protected Health Information” (“PHI”). We are required to extend certain protections to your PHI, and to give you this Notice about our privacy practices that explains how, when and why we may use or disclose your PHI. Except in specified circumstances, we must use or disclose only the minimum necessary PHI to accomplish the intended purpose of the use or disclosure.

We are required to follow the privacy practices described in this Notice, though we reserve the right to change our privacy practices and the terms of this Notice at any time. You may request a copy of the notice from the front desk of a TrueNorth Wellness office, by contacting Customer Service Staff at 1-800-315-0951, or on our website at [www.truenorthwellness.org](http://www.truenorthwellness.org).

### **How We May Use and Disclose Your Protected Health Information**

We use and disclose PHI for a variety of reasons. We have a limited right to use and/or disclose your PHI for purposes of treatment and payment. For uses beyond that, we must have your written authorization unless the law permits or requires us to make the use or disclosure without your authorization. If we disclose your PHI to an outside entity in order for that entity to perform a function on our behalf, we must have in place an agreement from the outside entity that it will extend the same degree of privacy protection to your information that we must apply to your PHI. However, the law provides that we are permitted to make some uses/disclosures without your consent or authorization. The following offers more of a description of our potential uses/disclosures of your PHI.



**For treatment:** We may disclose your PHI to psychiatrists, nurses and other health care personnel who are involved in the coordination of your care.

**To obtain payment:** We may use/disclose your PHI in order to bill and collect payment from third party insurers (insurance companies, County funders, Medicaid, Medicare, and managed care organizations) for your health care services.

**For health care operations:** We may use/disclose your PHI in the course of operating our programs/agency. For example, we may use your PHI in evaluating the quality of services we are providing, or disclose your PHI to our accountant for audit purposes, or attorneys for commitment hearings. Since we are an integrated system, we may disclose your PHI to designated staff in our other facilities, programs, and support services departments. Release of your PHI might also be necessary to determine your eligibility for publicly funded services.

**Appointment reminders:** Unless you provide us with alternative instructions, we may send appointment reminders via mail or email, or contact you by phone at home to remind you of your appointment.

**Uses and Disclosures Requiring Authorization:** For uses and disclosures beyond treatment, payment and operation purposes, we are required to have your written authorization, unless the use or disclosure falls within one of the exceptions described below. Authorizations can be revoked at any time to stop future uses/disclosures except to the extent that we have already undertaken an action in reliance upon your authorization.

**Uses and Disclosures of PHI from Mental Health Records Not Requiring Consent or Authorization:** The law provides that we may use/disclose your PHI from mental health records without consent or authorization in the following circumstances:

**When required by law:** We may disclose PHI when a law requires that we report information about suspected abuse,

neglect or domestic violence, or relating to suspected criminal activity, or in response to a court order. We must also disclose PHI to authorities that monitor compliance with these privacy requirements.

**For public health activities:** We may disclose PHI when we are required to collect information about disease or injury, or to report vital statistics to the public authority, such as County Administrators or other designated officials auditing the services we provide.

**For health oversight activities:** We may disclose PHI to our central office, the protection and advocacy agency or another agency responsible for monitoring the health care system for such purposes as reporting or investigating unusual incidents, and monitoring of the Medicaid program.

**To avert threat to health or safety:** In order to avoid a serious threat to health or safety, we may disclose PHI as necessary to law enforcement or other persons who can reasonably prevent or lessen the threat of harm.

**Uses and Disclosures of PHI from Alcohol and Other Drug Records Not Requiring [Consent or] Authorization:** The law provides that we may use/disclose your PHI from alcohol and other drug records without consent or authorization in the following circumstances:

**When required by law:** We may disclose PHI when a law required that we report information about suspected child abuse and neglect, or when a crime has been committed on the program premises or against program personnel, or in response to a court order.

**Relating to decedents:** We may disclose PHI relating to an individual's death if state or federal law required the information for collection of vital statistics or inquiry into cause of death.

**For research, audit or evaluation purposes:** In certain circumstances, we may disclose PHI for research, audit or evaluation purposes.

**To avert threat to health or safety:** In order to avoid a serious threat to health or safety, we may disclose PHI to law enforcement when a threat is made to commit a crime on the program premises or against program personnel.

**You Have the Following Rights Relating to Your Protected Health Information:**

**To Request Restrictions on Uses/Disclosures:** You have the right to ask that we limit how we use or disclose your PHI. We will consider your request, but are not legally bound to agree to the restriction. To the extent that we do agree to any restrictions on our use/disclosure of your PHI, we will put the agreement in writing and abide by it except in emergency situations. We cannot agree to limit uses/disclosures that are required by law.

**To Choose How We Contact You:** You have the right to ask that we send you information at an alternative address or by an alternative means. We must agree to your request as long as it is reasonably easy for us to do so.

**To Inspect and Request a Copy of Your PHI:** Unless your access to your records is restricted for clear and documented treatment reasons, you have a right to see your protected health information upon your written request. We will respond to your request within 30 days. If we deny your access, we will give you written reasons for the denial and explain any right to have the denial reviewed. If you want copies of your PHI, a charge for copying may be imposed, depending on your circumstances. You have a right to choose what portions of your information you want copied and to have prior information on the cost of copying.

**To request Amendment of Your PHI:** If you believe that there is a mistake or missing information in our record of your PHI, you may request, in writing, that we correct or add to the record. We will respond within 60 days of receiving your request. We may deny the request if we determine that the PHI is: (i) correct and complete; (ii) not created by us and/or not part of our records, or; (iii) not permitted to be disclosed. Any denial will state the reasons for denial and explain your

rights to have request and denial, along with any statement in response that you provide, appended to your PHI.

**To Find Out What Disclosures Have Been Made:** You have a right to get a list of when, to whom, for what purpose, and what content of your PHI has been released other than instances of disclosure: for treatment, payment, and operations; to you, your family, or pursuant to your written authorization on or after April 2003. We will respond to your written request within 60 days. Your request can relate to disclosures as far back as six years. There will be no charge for up to one such list per year. There may be a charge for more frequent requests.

**To Receive This Notice:** You have a right receive a paper copy of this Notice and/or an electronic copy by email upon request.

**How to Complain About Our Privacy Practices:** If you think we may have violated your privacy rights, or you disagree with a decision we made about access to your PHI, you may file a complaint with the TrueNorth Wellness compliance officer (see below). You also may file a written complaint with the Office for Civil Rights of the U.S. Department of Health and Human Services at 200 Independence Avenue SW, Washington D.C., 20201, online at [hhs.gov](http://hhs.gov), or call 1-800-368-1019, TDD: 1-800-537-7697. We will take no retaliatory action against you if you make such complaints.

**Contact Person for Information, or to Submit a Complaint:** If you have questions about this Notice or any complaints about our privacy practices, please contact the TrueNorth Wellness Compliance Officer at 625 West Elm Avenue, Hanover, PA 17331 or by phone, (717) 632-4900.

**This notice last updated 2/25/21**



**Vision Statement:** TrueNorth Wellness Services strives to create a safe environment of trusting relationships and a culture of hope and healing where all will thrive.

The experience of trauma has widespread impacts on a person's life; often leading to or exacerbating mental health issues, substance use, and physical health conditions. Approximately 90% of consumers seeking behavioral health services have experienced some form of trauma in their lives. Unfortunately, despite best efforts, the very services and systems designed to help people become healthy can be re-traumatizing.

Trauma informed care (TIC) involves shifting our perspective to be more aware of the impact that trauma has on an individual, in order to develop a more compassionate understanding of ourselves and each other. The hope is to develop insight that we are who we are as a result of our significant life occurrences that have shaped and molded us, our families and communities.

TIC has been compared to putting on a pair of glasses that allow us to look more deeply and see

life and the people in it, as it actually is, instead of what it appears to be. Trauma-informed care improves service quality, increases safety, enhances consumer engagement, improves consumer satisfaction, encourages hope and wellness and creates a strong and resilient workforce.

If there is anything else we can do to make your experience more comfortable, please let us know.



Striving for excellence in behavioral health and wellness.

[TrueNorthWellness.org](http://TrueNorthWellness.org)

## Continuum of Care

These are the most commonly used child and adolescent behavioral health services. They are listed here from the least intensive to the most intensive level of care.

### Crisis Services

Crisis services are available 24 hours a day, 7 days a week. They include toll-free telephone hotline services, mobile crisis services, and walk-in crisis services. A mental health crisis is an intensive behavioral, emotional, substance use, or psychiatric situation, which, if left untreated, could result in an emergency situation requiring placement in a more restrictive setting.

### Community Care Care Management

Care managers assess clinical data, monitor adherence to medical necessity, monitor provider adherence to performance standards, and ensure coordination and continuity of care. Care managers can also provide resources and connect members to case management services. Care managers participate in interagency meetings, to understand members' clinical presentations, help the team address important factors related to services, help identify barriers and ways to address them, and ensure discharge goals and plans are clear and agreed upon.

Adams County Member Services: 1.866.738.9849

York County Member Services: 1.866.542.0299.

### Case Management or Service Coordination

Case managers, or service coordinators, help coordinate resources, services, and supports. Types of targeted case management:

- **Intensive Case Management (ICM):** Most intensive level of case management. The ICM has contact with you and your child at least once every 2 weeks.
- **Resource Coordination (RC):** Less intensive and has contact with you and your child at least 1 time per month.
- **Blended Case Management (BCM):** More flexible and the intensity depends on your child's changing needs. The BCM has contact with you at least 1 time per month.

York/Adams MH IDD 717.771.9618 or Service Access Management 717.848.8744

### Outpatient

Treatment/therapy for mental health and substance use disorders provided in a clinic or office setting.

### Parent-Child Interaction Therapy (PCIT)

PCIT is an evidence-based treatment for members ages 2 to 7 with behavioral problems. PCIT is conducted through "coaching" sessions during which a therapist observes behavior between you and your child in a playroom. The therapist watches interactions through a one-way mirror, all while providing real-time coaching skills to you through a "bug-in-ear" device. Providers in York/Adams are PCBH.



### **Amazing Kids Club (AKC)**

A year-round, on-site therapeutic program for members ages 2 to 21 with autism spectrum disorder or social pragmatic communication disorder. AKC focuses on developing communication, socialization, and play skills in a less intense environment than one-on-one. It is designed as either a stand-alone program or a supplement to other forms of treatment. The program is a combination of behavioral and relationship therapy strategies. The highly trained master's level clinicians design treatment plans to meet the developmental needs of each individual. Family involvement and service coordination is a key component of our programs. The provider is True North Wellness Services.

### **Therapeutic Afterschool Program (ASP)**

ASP aims to enable each youth to improve his or her functioning in the home, school, and community through structured treatment services in the afternoon and evening. The program is also designed to prevent deterioration in a youth's functioning that may lead to more intensive or restrictive mental health services. ASP consists of a range of individualized, as well as organized, therapeutic, recreational, and socialization activities with the youth and their families. These individualized and group therapeutic experiences help youth develop social and coping skills; cultivate self-expression, self-awareness, and self-esteem; strengthen impulse control and the ability to manage stress; and build problem-solving and coping skills. CASSP values provide the philosophical basis for this service. The provider is Philhaven.

### **Intensive Behavioral Health Services (IBHS) (Formerly known as BHRS/Wraparound)**

Services provided in your home, community, and/or school to address emotional/behavioral disorders, including autism spectrum disorder (ASD) and developmental disabilities. Using applied behavioral analysis (ABA) or evidenced-based therapy (EBT), services are designed to fit your child in their environment need and can include: assistant behavior consultation- applied behavior analysis (Assistant BC-ABA), Behavior Analytic (BA), behavior consultation (BC), behavior consultation - applied behavior analysis (BC-ABA), behavioral health technician (BHT), behavioral health technician - applied behavior analysis (BHT-ABA), and mobile therapy (MT).

### **Functional Family Therapy (FFT)**

FFT is a short-term program with an average of 12 to 14 sessions over three to five months. FFT works mostly with youth ages 11 to 18 who have been referred by the juvenile justice, mental health, school, or child welfare systems. Services are conducted across settings. Our provider for FFT in York/Adams is True North Wellness Services.

### **Multi Systemic Therapy (MST)**

MST is an evidence-based program created to serve dependent and delinquent members, ages 12 to 17, who are at risk of out-of-home placement or who are currently in an out-of-home placement. MST uses a systems approach including individual, family, and extrafamilial (peer, school, neighborhood) factors. Our provider for MST in York/ Adams is Adelphoi Village.

### **Family-Based Mental Health Services (FBMHS)**

Team-delivered, intensive in-home services. FBMHS combine mental health treatment, family support services, and case management so that you may continue to care for your child with a serious mental illness or emotional disturbance at home. Includes 24/7 crisis support.

### **Partial Hospitalization Program (PHP)**

Daytime program that provides individual, group, and family counseling as well as medication monitoring or management. The partial hospitalization program is provided on a regularly scheduled basis for a minimum of 3 hours, but less than 24 hours in any one day.

*\*This continuum is not representative of all available mental health and drug and alcohol services. Please contact the local Mental Health/Intellectual Disabilities/Drug & Alcohol/Early Intervention organization serving your county of residence for information on additional supports and resources in your area.*

## **Resources Guide**

### **Crisis and Suicide Lifeline**

# **Call or Text**

# **988**

### **2023 Recommended Vaccinations for Infants and Children (birth through 6 years)**

<https://www.cdc.gov/vaccines/schedules/easy-to-read/child-easyread.html>

### **2023 Recommended Vaccinations for Children (7-18 Years Old)**

<https://www.cdc.gov/vaccines/schedules/easy-to-read/adolescent-easyread.html>

### **Education Law Center**

[www.elc-pa.org](http://www.elc-pa.org)

**PA 211** (A free, accessible, 3-digit telephone number available to everyone. All residents have easy access to customized health, housing, and human services information in one place. The 2-1-1 telephone number is a 24 hour, 7 day a week hotline, available when you need to find help.)

[www.pa211.org](http://www.pa211.org)

### **County Assistance Office Contact Information (For Medical Assistance)**

<https://www.dhs.pa.gov/Services/Assistance/Pages/CAO-Contact.aspx>

### **Adams County Resource Guide:**

[http://www.achsaccess.org/uploads/3/0/3/5/30350105/resource\\_guide\\_16-17.pdf](http://www.achsaccess.org/uploads/3/0/3/5/30350105/resource_guide_16-17.pdf)



**Cumberland County Resource Guide:**

<https://www.ccpa.net/3592/Resource-Handbook>

**Dauphin County Resources:**

[https://www.dauphincounty.org/government/departments/mental\\_health\\_and\\_intellectual\\_disabilities/resources.php](https://www.dauphincounty.org/government/departments/mental_health_and_intellectual_disabilities/resources.php)

**Lancaster County Resources:**

<http://pa211east.org/lancaster/>

**Lebanon County Resources:**

<http://lebanoncountyfire.org/Lebanon%20County%20Resource%20Guide.pdf>

**Perry County Resources:**

<https://cumberland.pa.networkofcare.org/pr/links/index.aspx>

**York County Resource Guide**

<https://www.nesd.k12.pa.us/cms/lib/PA01001139/Centricity/Domain/439/2018%20York%20County%20%20Surrounding%20Areas%20Resource%20Guide.pdf>