

DREXEL UNIVERSITY &  
UNIVERSITY OF PITTSBURGH



# Lycoming County

Report of the Cross-Systems Mapping Workshop

May 17<sup>th</sup> & 18<sup>th</sup>, 2011

Transforming Services  
for Persons with Mental Illness in  
Contact with the Criminal Justice System

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## Lycoming County, Pennsylvania

### Transforming Services for Persons with Mental Illness in Contact with the Criminal Justice System

#### Introduction

The purpose of this report is to provide a summary of the Pennsylvania Mental Health and Justice Center of Excellence *Cross-Systems Mapping* workshop held in Lycoming County, Pennsylvania, on May 16<sup>th</sup> and 17<sup>th</sup> 2011, conducted at The Genetti Hotel, 200 West Fourth Street, Williamsport PA. Lycoming County Prison and other stakeholders hosted the workshop as part of an ongoing process of developing collaborative systems of support for individuals who have mental illness and who come in contact with criminal justice. This report (and accompanying electronic file) includes:

- A brief review of the origins and background for the workshop;
- A summary of the information gathered at the workshop;
- A cross-systems intercept map as developed by the group during the workshop;
- A description of each intercept along with identified gaps and opportunities;
- An action planning matrix as developed by the group; and
- Observations, comments, and recommendations to help Lycoming County achieve its goals.

#### Background

Lycoming County Criminal Justice Advisory Board mental health subcommittee requested the Center of Excellence *Cross-Systems Mapping* workshop to promote progress in addressing criminal justice diversion and treatment needs of adults with mental illness in contact with the criminal justice system. As part of the workshop, they were requested to provide assistance to Lycoming County with:

- Creation of a map indicating points of interface among all relevant Lycoming County systems;
- Identification of resources, gaps, and barriers in the existing systems; and
- Development of priorities to promote progress in addressing the criminal justice diversion and treatment needs of adults with mental illness in contact with the criminal justice system.

Prior to the workshops, the Center of Excellence gathered information about Lycoming County through a *Community Collaboration Questionnaire* and gathering of documents relevant to the population.

The participants in the workshops included 48 individuals representing multiple stakeholder systems including mental health, substance abuse treatment, human services, corrections, advocates, consumers, law enforcement, and the courts. A complete list of participants is available in Appendix A (pg. 35) of this document. Patricia A. Griffin, PhD and D.J. Rees facilitated the workshop sessions. Sarah Filone, MA and Katy Winckworth-Prejsnar also provided support.

## About the Workshop

Upon receiving a grant from the Pennsylvania Commission on Crime and Delinquency and the Pennsylvania Department of Public Welfare's Office of Mental Health and Substance Abuse Services in late 2009, the Pennsylvania Mental Health and Justice Center of Excellence was developed as a collaborative effort by Drexel University and the University of Pittsburgh. The mission of the Center of Excellence is to work with Pennsylvania communities to identify points of interception at which action can be taken to prevent individuals with mental illness from entering and penetrating deeper into the justice system.

The Center of Excellence workshops, *Cross-System Mapping* and *Taking Action for Change*, are unique services tailored to each Pennsylvania community. These workshops provide an opportunity for participants to visualize how mental health, substance abuse, and other human services intersect with the criminal justice system.

This workshop is unlike other types of consultations or staff development training programs. A key element is the collaborative process. Meaningful cross-system collaboration is required to establish effective and efficient services for people with mental illness and co-occurring substance use disorders involved in the criminal justice system. This makes the composition of the group extremely important. While some workshops involve advertising to the entire provider community, it is essential in the *Cross-System Mapping* workshops that the organizers gather a group that represents key decision makers and varied levels of staff from the relevant provider systems. Center of Excellence staff worked with this group, serving as expert guides to help:

- Create a cross-systems map indicating points of interface among all relevant local systems;
- Identify gaps, opportunities, and barriers in the existing systems;
- Optimize use of local resources;
- Identify and prioritize necessary actions for change; and
- Develop an action plan to facilitate this change.

Upon completion of the workshops, the Cross-Systems Map included in the report is provided in both print and electronic formats. It is meant to be a starting point. The electronic files can be revised over time to reflect the accomplishments and changes in the planning process.

## Objectives of the Cross-Systems Mapping Exercise

The *Cross-Systems Mapping Exercise* has three primary objectives:

1. Development of a comprehensive picture of how people with mental illness and co-occurring substance use disorders move through the Lycoming County criminal justice system along five distinct intercept points: Law Enforcement and Emergency Services, Initial Detention/Initial Court Hearings, Jails and Courts, Re-entry, and Community Corrections/Community Support.
2. Identification of gaps, resources, and opportunities at each intercept for individuals in the target population.
3. Development of priorities for activities designed to improve system and service level responses for individuals in the target population.

## Keys to Success

### Existing Cross-Systems Partnerships

Lycoming County's history of collaboration between the criminal justice and behavioral health systems is reflected in a number of existing local efforts that were identified prior to the mapping. For example:

- Lycoming County Criminal Justice Advisory Board includes members from:
  - Lycoming-Clinton County MH/MR
  - Adult Probation
  - Lycoming County Prison - Warden
  - District Attorney
  - Public Defender (Chief and Deputy Chief)
  - Lycoming County Law Enforcement Association
  - Lycoming County Commissioners
  - West Branch Drug & Alcohol
  - Crossroads (Drug & Alcohol Treatment Provider)
  - Lycoming County Courts - Director of Court Services
  - County Sheriff
  - Prothonotary
  - Director - Information Systems
  - PA State Police Commander – Troop F
  - Director – Dept of Public Safety
  - President Judge
  - Chief – Juvenile Probation
  - Court Administrator
  - Chiefs of Police – Williamsport and Montoursville
  - Mayor of City of Williamsport
  - County grant administrator
  - Director of Wise Options (for women) YWCA
  - PCCD CJAB REPRESENTATIVE
- The Lycoming County Forensics Committee meets bimonthly and includes members of substance abuse facilities, mental health facilities, probation, etc.
  - Screening and assessment procedures have been instituted to identify people with mental illness and co-occurring substance use disorders through MH assessments and treatment discussions at these bimonthly meetings.
- Pennsylvania Behavioral Health & Aging Coalition
  - The Pennsylvania Behavioral Health and Aging Coalition (PBHAC) is a statewide coalition of individuals and organizations concerned about the unmet mental health and substance abuse needs of older adults across the Commonwealth. Lycoming's regional group representing Northeast, Northwest, Central, Southeast and Southwest Pennsylvania work together on local and statewide levels in order to collaboratively address the mental health/substance abuse needs of older adults. PBHAC's mission is to advocate expansion, improvement, and development of affordable, appropriate, and accessible behavioral health prevention and treatment services for older Pennsylvanians.
- Lycoming County Law Enforcement Association

#### Consumer/Family Involvement in the Workshops

- Consumers were represented by UCBH/The Meadows, adding valuable information to the discussion, especially concerning the role of forensic peer support specialists in Lycoming County.

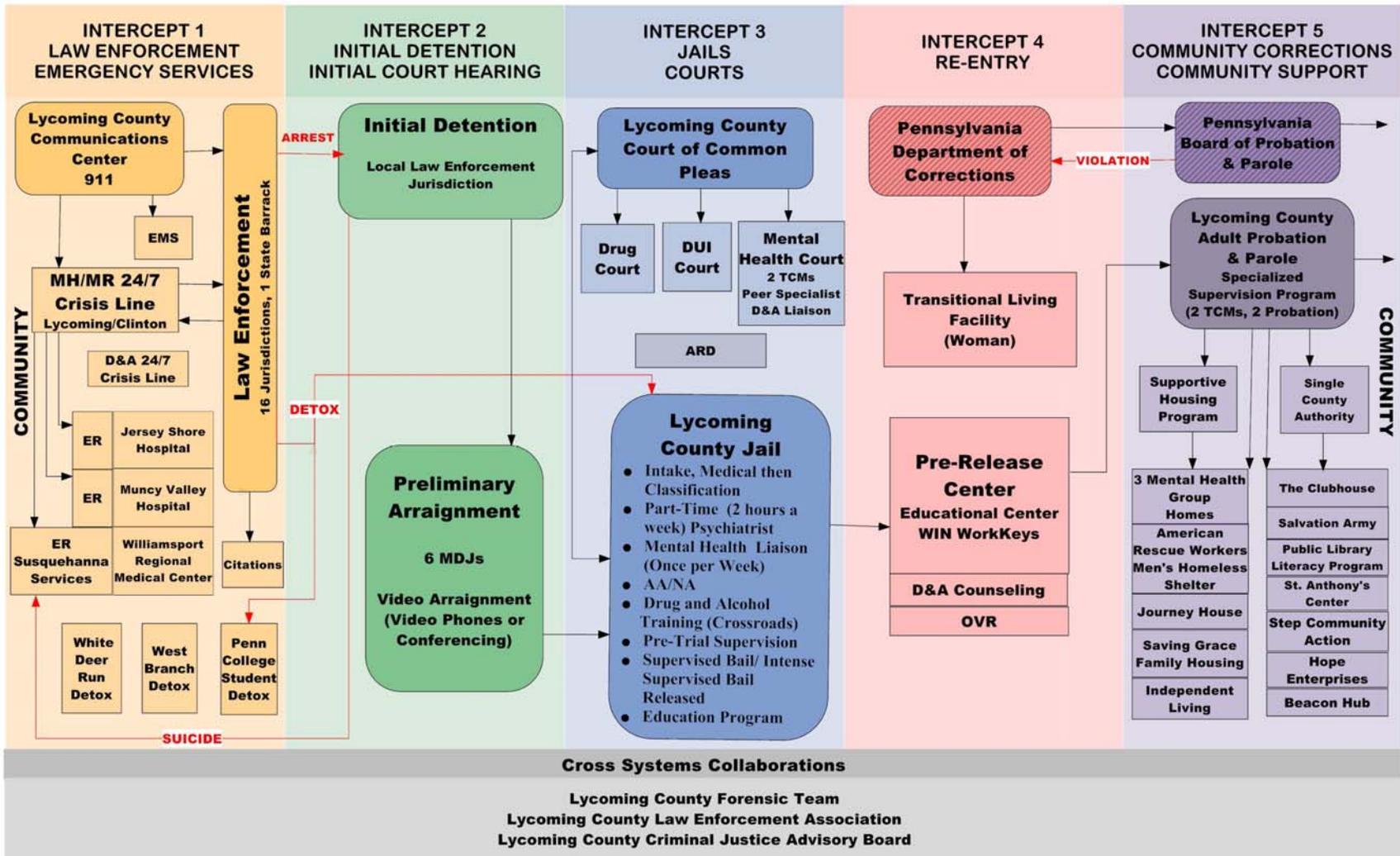
#### Representation from Key Decision Makers in the Workshops

- The workshops included wide cross-system representation and involved many of the key decision makers. Opening remarks by The Honorable Richard Gray, Lycoming County Court of Common Pleas, and Tim Mahoney from Lycoming County Jail set the stage and established a clear message as to the importance of the workshop. Deb Duffy, Lycoming/Clinton County Joinder MH/MR Administrator, welcomed participants and introduced the facilitators.

#### Data Collection

- In addition to the information gained during the workshop, the information in this report was developed from conversations with and questionnaires completed by key stakeholders in Lycoming County in preparation for the workshop.

# Lycoming County Cross Systems Map



## Lycoming County Cross Systems Narrative

The *Cross-Systems Mapping* exercise is based on the Sequential Intercept Model developed by Mark Munetz, M.D. and Patty Griffin, Ph.D.,<sup>1</sup> in conjunction with the National GAINS Center. In this workshop, participants were guided to identify gaps in services, resources, and opportunities at each of the five distinct intercept points of the criminal justice system.

This narrative reflects information gathered during the *Cross-Systems Mapping Workshop*. It provides a description of local activities at each intercept point, as well as gaps and opportunities identified at each point. This narrative may be used as a reference in reviewing the Lycoming County Cross-Systems Map. The cross-systems local task force may choose to revise or expand information gathered in the activity.

The gaps and opportunities identified in this report are the result of “brain storming” during the workshop and include a broad range of input from workshop participants. These points reflect a variety of stakeholder opinions and are, therefore, subjective rather than a majority consensus.

### General Description of Services and Cross-System Collaboration

Lycoming County is located in the north central region of Pennsylvania. As of the 2010 census, the population was 116,111. Its county seat is Williamsport. Lycoming County is approximately 130 miles (209 km) northwest of Philadelphia and 165 miles (266 km) east-northeast of Pittsburgh. According to the U.S. Census Bureau, the county has a total area of 1,244 square miles (3,221 km<sup>2</sup>). 1,235 square miles (3,198 km<sup>2</sup>) of the county is land and 9 square miles (23 km<sup>2</sup>) of it (0.72%) is water. Lycoming County is the largest county in terms of area in Pennsylvania, and is larger than the state of Rhode Island.

Known as the “Lumber Capital of the World” during the second half of the 19th century, Williamsport and Lycoming County’s extensive lumber supply and the large timber industry produced many local millionaires referred to as “lumber barons.” Today, Williamsport is best known as home of the Little League World Series and organization.

The County has been building a continuum of criminal justice and mental/behavioral health services that provide a basic foundation for continued growth and reorganization on all levels. There are a number of established links, both formal and informal, between the courts, probation, police departments, corrections, and the mental health system that include but are not limited to:

- The Lycoming County Forensics Committee
- The Lycoming County Criminal Justice Advisory Board with its forensic mental health committee

The **Lycoming-Clinton MH/MR** office is located at 200 East Street Williamsport, PA 17701. Lycoming-Clinton MH/MR offers information and referral, assessment, crisis intervention, commitment procedures and varying levels of case-management. Additional treatment and support services are available via authorization to service providers for eligible individuals. Lycoming-Clinton MH/MR also operates two social-rehabilitation programs for adults (Mulberry House and The Haven).

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<sup>1</sup> Munetz, M. & Griffin, P. (2006). A systemic approach to the de-criminalization of people with serious mental illness: The Sequential Intercept Model. *Psychiatric Services*, 57, 544-549.

Mental Health services are primarily available for adults with a serious mental illness and children/adolescents with or "at risk" of developing a serious emotional disturbance.

The Office works closely with the county Medical Assistance/Health Choices program to coordinate all publicly funded behavioral health services and supports. Many individuals with serious and persistent mental illness qualify for both Medical Assistance/Health Choices supports and county-funded supports

A description of resources for adult services are available at:  
<http://lycoming.pa.networkofcare.org/mh/resource/find.cfm>

## Intercept I: Law Enforcement / Emergency Services

### 911

The **Lycoming County Communications Center** provides a county-wide communications system that permits 9-1-1 access to any individual in need of assistance in the County, dispatch of the appropriate police, fire, emergency medical services, emergency management personnel, and other affiliated agencies to emergency incidents by certified telecommunicators. Lycoming County Communications Center works in conjunction with the County Emergency Management Agency, Regional Emergency Medical Services Council, and Hazardous Materials Planning Division of the Department of Public Safety.

The Lycoming County Communications Center has been serving residents since 1976. The Center provides a state-of-the-art Communications System for Lycoming and Sullivan Counties dispatching 44 Fire Departments, 26 Ambulance Service, 4 Paramedic Services, 17 Quick Responder Units, 13 Police Departments, and 52 EMA Coordinators.

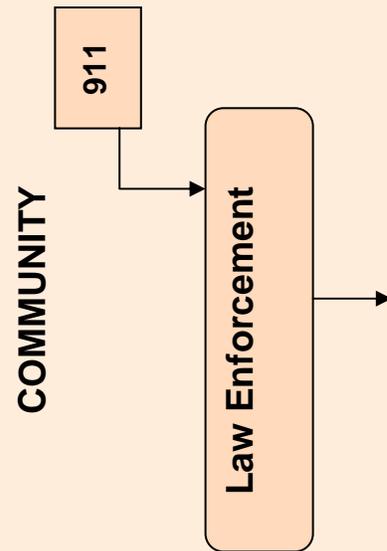
The center currently has 18 full-time employees and one part-time employee on staff. Lycoming-Clinton MH/MR provides staff with training regarding mental health and suicide related emergency calls. In addition, the Communications Center computer system is equipped with a searchable database that provides tips to call takers who are dealing with difficult calls (e.g., a search for 'suicide' will retrieve prompts for handling a suicidal caller).

In 2010, the Lycoming County Communications Center received 69,072 calls. Of those 69,072, 452 calls were considered 'mental health calls', and 160 were specifically related to suicidal ideation. If the 9-1-1 call taker believes an involuntary commitment (302) will be necessary, he/she typically contacts the county MH/MR office to request a mobile worker meet the individual at the emergency room. In 2012, 220 involuntary commitments were recorded.

### Crisis Lines

Lycoming-Clinton MH/MR provides a 24 hour **Emergency Assessment Line** [570-326-7895 or 800-525-7938] for Lycoming and Clinton counties. This hotline is staffed by two supervisors and four crisis workers. The Emergency Assessment Line receives between 300 and 350 calls a month during non-business hours (outside of Monday – Friday 8:00 to 4:30). This line also provides crisis hotline services for Lycoming County Children and Youth.

### Intercept 1 Law enforcement



In addition, West Branch Drug & Alcohol Abuse Commission provides a 24/7 **Drug & Alcohol Crisis Response System** [570-323-8543], which receives approximately 25 'after hours' calls each month.

### **Law Enforcement**

Lycoming County houses 14 police jurisdictions and one State Police Barrack. The largest jurisdiction is the City of Williamsport Police Department with 52 officers.

All Lycoming County officers complete basic training and refresher training curricula required by the Municipal Police Officers' Education and Training Commission (MPOETC).

The **Lycoming County Law Enforcement Association** was initiated by Muncy Borough Chief of Police Richard Sutton and currently includes 35 agencies in monthly meetings. In 2009, the association received a Community and Officer Safety Grant which helped provide a **Family Training and Advocacy Center for Mental Illness (FTAC)** training to all Lycoming County law enforcement agencies.

### **Crisis Services**

**Lycoming-Clinton MH/MR** has a Crisis Intervention/Emergency Services Program. All individuals receiving Targeted Case Manager services have a Crisis Plan.

### **Detoxification and Substance Abuse Services**

Lycoming County residents have access to detoxification and treatment services at the **White Deer Run** facilities in Allenwood and Williamsport. Inpatient detoxification is provided by the Allenwood facility and is staffed by physicians, RN's, LPN's, and PA's who are all trained in the complexity of the withdrawal of substances.

The treatment program at White Deer Run of Williamsport is modeled after partial hospitalization programs for clients who do not require 24 hour care but need more intensive treatment than is available in outpatient services. Patients participate from 8:00am to 4:30 pm, Monday through Saturday, and 9:00am to 1:00 pm on Sunday. The program also offers a transitional living facility, which provides a structured, supervised environment for patients requiring further support. There are 264 beds available with an average daily census of approximately 250 individuals.

In addition, **West Branch Drug and Alcohol Commission (WBDAC)** provides Inpatient, Non-Hospital Detoxification and Rehabilitation and Inpatient, Hospital-Based Detoxification and Rehabilitation. . It is estimated that 30% of those individuals have both substance use and mental health diagnoses. Additional services include; outpatient counseling (individual and group), intensive outpatient counseling (individual and group), partial hospitalization, and methadone maintenance therapy. In 2010, West Branch funded 823 individuals for community-based services, 132 for detoxification services, and 121 for residential treatment. Approximately 62% of the referrals received by West Branch come directly from the criminal justice system.

The **Pennsylvania College of Technology** also houses a three bed facility for intoxicated students. They serve roughly 30 to 40 students per semester.

## **Hospitals**

The **Susquehanna Health Center** is a three-hospital regional health system including: **Williamsport Regional Medical Center** (777 Rural Ave Williamsport, PA; 570-321-1000), **Divine Providence Hospital** (1100 Grampian Blvd # 3 Williamsport, PA 17701-1995; 570-320-7470), and **Muncy Valley Hospital** (215 East Water Street, Muncy, PA; 570-327-8137).

Susquehanna Behavioral Health services include: Inpatient Services, Psychotherapy Services, Medication Management Clinic, Depression Group, and a Partial Hospitalization Program located at Divine Providence Hospital. Psychology services are provided at the Williamsport Hospital. Psychotherapy services and Medication Management Clinic are provided two days a week at a satellite office in Lock Haven. The center also employs an **Assessment Referral Collaborator** who conducts assessments and links individuals to treatment.

The Inpatient Unit at **Divine Providence Hospital** is a licensed 21-bed, short-term, intensive treatment program for adults 18 and older. Services are provided 24 hours a day, seven days a week.

An individual may be admitted to the unit once he or she receives a medical evaluation by a doctor and it is determined that criteria have been met for acute psychiatric care. Patients are most commonly admitted from an emergency department, but may be referred by their family doctor, outpatient psychiatrist or therapist. A psychiatrist provides final approval for admission. Within the first 24 hours of admission, patients receive a psychiatric evaluation, physical examination and comprehensive nursing assessment. Further testing is provided when deemed necessary.

Divine Providence Hospital also houses an **Older Adult Inpatient Unit**. This is a 10-bed, specialized inpatient unit designed to meet the unique needs of persons over the age of 60. Treatment includes daily appointments with the Psychiatrist, structured programming, and 24 hour per day Registered Nursing observation and care. This inpatient unit provides intensive medical-psychiatric treatment and medication stabilization.

In addition, Lycoming County houses the **Jersey Shore Hospital** (1020 Thompson Street Jersey Shore, PA 17740) and offers a comprehensive scope of inpatient and outpatient services. Cancer screening; Hunters screening; Safe sitter classes; Bike safety; Osteoporosis and Mammography screenings; General surgery; Orthopedic surgery; Surgical Ophthalmology; Internal medicine; Family Practice; Cardiac care; Emergency services; Urology; Otolaryngology (ENT). Jersey Shore Hospital accepts most medical insurances, Medicaid/Medicare and managed care plans.

## **Victims' Services**

**Lycoming County Victim Services** is located in the District Attorney's Office (48 West Third Street Williamsport, PA) and provides a **Victim Witness Program** as well as specialized services for victims of juvenile offenders.

The **YWCA - Wise Options** program is a Comprehensive Victim Service Agency that offers a Domestic Violence Support Group, Sexual Assault Support Group, and Teen Sexual Assault Support Group.

In addition, Lycoming County residents have access to the following statewide victims' organizations:

**PA Coalition Against Domestic Violence**  
6400 Flank Drive, Ste. 1300  
Harrisburg, PA 17112

**daytime:**  
800-932-4632  
**website:**  
[www.pcadv.org](http://www.pcadv.org)

**PA Coalition Against Rape**  
125 North Enola Drive  
Enola, PA 17025

**daytime:**  
717-728-9740  
**24 hour hot line:**  
888-772-PCAR  
**website:**  
[www.pcar.org](http://www.pcar.org)

**PCCD Victims Compensation Program**  
3101 N. Front Street  
Harrisburg, PA 17108

**daytime:**  
717-783-5153  
800-233-2339  
**website:**  
[www.pccd.state.pa.us](http://www.pccd.state.pa.us)

**MADD, PA State Office**  
2323 Patton Road  
Harrisburg, PA 17112

**daytime:**  
717-657-3911  
**24 hour hotline:**  
866-439-6233  
(Pittsburgh)  
800-848-6233  
(Harrisburg)  
**website:**  
[www.maddpa.org](http://www.maddpa.org)

➤ **Identified Gaps**

- No warm-lines established
- Police report 302 commitments at ER centers can be extremely time consuming
- Across all intercepts, the Marcellus Shale gas Industry is bringing in people from out of town who have affected the county in the following ways:
  - Seeing significant impact on various systems (behavioral health, criminal justice, juvenile, schools, housing, D&A) in the county
  - Bringing in offenses – Parole can't track, parole/probation's case loads have increased
  - Clashes over cultural differences
  - Local resources shrinking while boom-town effect from gas industry occurring
- Lack of education about MH/MR services for the Lycoming community
  - How do people get access to MH services?
- Lack of treatment services before MH/MR individuals come in contact with the criminal justice system
  - Limited established outpatient psychiatry
- Gambling is an increasing problem and is being addressed with a \$120,000 grant
- Law enforcement does not have the funding to bring individuals to White Deer Run detox in Union County. WBDAC has an established on call number to arrange services.

➤ **Identified Opportunities**

- Lycoming County 911 Center-computer program, "Emergency Medical Dispatch", automatically generates a list of questions to ask when dispatchers receive suicide calls
- MH/MR Crisis Team has established working relationship with law enforcement agencies
- Monthly Law Enforcement Association Meetings
  - 35 Agencies Involved
  - FTAC - Joint Training for probation and law enforcement
- Initial planning stages in measuring the effects of the gas development industry
  - Gas Industry Workers Database is being kept
  - All county agencies now reporting to their county commissioners regarding impact on their agencies
  - Council of Gas Industry Companies
- Initial training for Lycoming residents to work in the gas Industry
- Penn College Impaired Facility for Penn College students provides detoxification services.
- Collaboration across intercepts
- Crossroads has a certified gambling addictions counselor

## Intercept II: Initial Detention / Initial Court Hearing

### Arrest and Initial Detention

When an individual is arrested in Lycoming County, he/she is taken to the local law enforcement jurisdiction for booking. Five Lycoming County police jurisdictions have specified holding areas. The others monitor detainees by securing them to objects in the building (e.g. pole, bench).

### Preliminary Arraignment

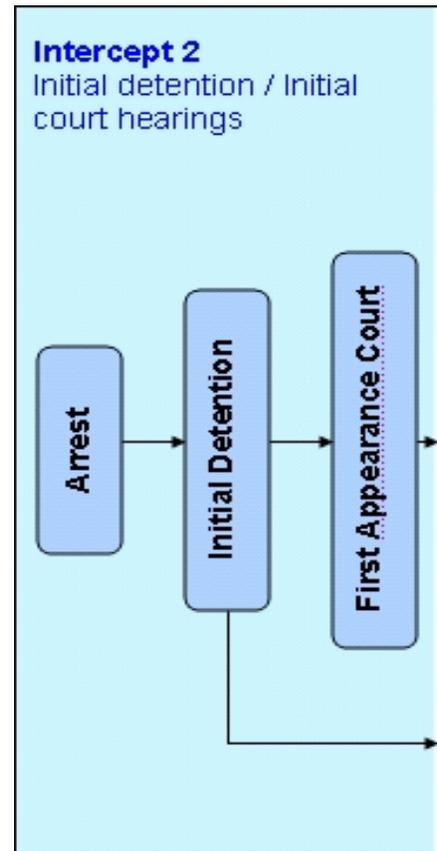
Preliminary Arraignment is conducted by one of six Lycoming County Magisterial District Judges (MDJs) either via video arraignment technology at the local police jurisdiction (about 50% of arraignments are conducted this way) or through an in-person arraignment at the office of an MDJ.

Bail is set at the time of arraignment by the District Magistrate. Bail may be posted at the arraigning Magistrate's office during normal business hours. Inmates are required to obtain their own legal representation. Those that fall under the indigent category or that have limited income can qualify for a Public Defender at little or no cost to the inmate.

### Supervised Bail and Intensive Supervised Bail Programs

The Lycoming County Prison System operates and maintains two alternative specialized bail programs as an alternative to incarceration: the **Supervised Bail Program** and an **Intensive Supervised Bail / Release Program**. In 1982, Lycoming County Prison System implemented the Supervised Bail Program through a grant from Pennsylvania Commission on Crime and Delinquency (PCCD). The Supervised Bail Program is an alternate method of bail allowing pre-trial first-time offenders, indigents, or other applicable offenders to obtain community supervision. In 1996, the Lycoming County Prison System implemented the Intensive Supervised Bail Program, and then several years later the Release Program component was implemented. The Intensive Supervised Bail Program / Release Program was also established through a grant from Pennsylvania Commission on Crime and Delinquency (PCCD). The Intensive Supervised Program / Release Program is an alternate method of bail and a sentenced alternative to incarceration utilizing a global positioning component.

Once an inmate is placed in a Supervised Bail program, an intake process occurs in which conditions are imposed. These conditions are similar to conditions placed upon probationers and parolees, including urine surveillance and field visits from the ISBR Officer. When appropriate, clients are referred to agencies for special problems (e.g. alcohol, narcotics, psychiatric). Clients are usually interviewed on a weekly basis until their sentence is completed. When conditions are violated, the client is returned to the prison where a disciplinary hearing is held.



In 2010, the Supervised Bail Program and Intensive Supervised Bail/Release programs together averaged 46.51 offenders. All offenders were supervised in the community and not incarcerated within the County Prison System.

➤ **Identified Gaps**

- No mental health training for MDJs

➤ **Identified Opportunities**

- Video arraignments
- Looking into Centralized Booking

## Intercept III: Jails / Courts

### Lycoming County Prison

The Lycoming County Prison is located at 277 West Third Street in Williamsport. The jail opened its doors on January 19, 1986 and now has a capacity of 255 inmates in various segregation levels including minimum, medium, and maximum security as well as holding cells. Kevin DeParlos currently serves as the Warden and Timothy Mahoney is the Director of Treatment.

The Lycoming County Prison receives approximately 2500 commitments each year. The Jail has a capacity to hold 255 inmates and currently houses both male (currently around 200) and female (currently around 30) inmates.

Recent data indicates that 20% of Lycoming County Prison inmates are receiving psychotropic meds prescribed by the jail physicians.

### Screening

During intake, inmates are screened for both medical and mental health issues. Any individual reporting mental health symptoms or who has previously received county mental health services is referred to the Mental Health Liaison

Lycoming-Clinton MH/MR provides Mental Health Training to the correctional officers.

### Mental Health and Substance Abuse Treatment

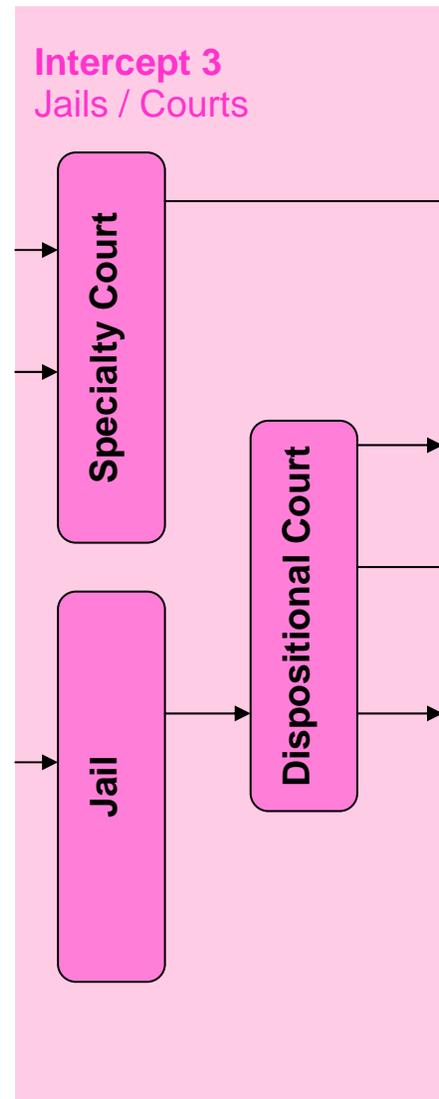
**Lycoming-Clinton MH/MR** provides psychiatric, psychological, Targeted Case Management, and mental health liaison services to the Lycoming County Prison.

The **psychiatrist** visits the jail for two hours every Monday to review inmate files and meet with individuals that have been identified with mental health issues. He also provides assessments for individuals on suicide watch. In 2010, approximately 65 suicide assessments were conducted.

The MH-MR **Mental Health Liaison** visits the jail once each week to meet with referrals. In 2010, the Mental Health Liaison met with 268 individuals.

Lycoming County inmates also have access to a **Correctional Counselor**.

Substance abuse services include: **drug and alcohol education program** from Crossroads Counseling, **drug and alcohol assessments** from the West Branch Drug and Alcohol Commission, **outpatient drug and alcohol counseling** (funded through a PCCD grant), **Narcotics Anonymous**, and **Alcoholics Anonymous**.



Individuals in the Lycoming County Prison and Pre-Release Center (see Intercept 4) also have access to an **Educational Program**. The program began 12 years ago and currently houses 20-30 individuals between the ages of 12 and 21. Participants can earn either a high school diploma or GED during their time in the program. In the past 11 years, 235 individuals have earned a degree through this program.

## **Courts**

Lycoming County has an extensive **Treatment Court Program** including a **Mental Health Court, Drug Court, DUI Court, Underage Drinking Court, and Juvenile Drug Court**. The crux of the Treatment Court Programs is a heightened level of judicial involvement and intensive probation supervision. Direct and frequent contact between the offender and judge motivates program compliance.

Eligible offenders must submit a Treatment Court application and release of information form to the Treatment Court Judge's office. Upon receipt of the application, the Judge's office will record the date received and forward it to the District Attorney's office for recommendation. The District Attorney will recommend (or not recommend) the applicant, noting the level of offense and reasons for the decision. If recommended by the District Attorney or Treatment Court Judge, the applicant will be referred for evaluation to the West Branch Drug and Alcohol Abuse Commission.

Once the evaluation is complete, the application will be returned to the Judge's office and scheduled for staffing by the Treatment Court Committee. The Committee will vote on acceptance. In case of a tie, the Treatment Court Judge will decide admission. If the application is denied, the Judge's office will notify the applicant. Counsel for the offender may request reconsideration and may request to be present to speak with the Committee. If approved, the applicant will receive notice of the hearing date and be advised to contact Adult Probation for review of conditions of the program. Once the applicant accepts the conditions, he or she will report to the next scheduled Treatment Court session for guilty plea and placement on the Treatment Court Program.

The Lycoming County **Drug Court Program** began in July of 1998. This program aims to reduce recidivism caused by drug abuse and drug related crimes by early diversions of selected nonviolent cases into a strict judicially supervised program of offender responsibility, accountability, and cooperation between various components of the criminal justice system program, and maximization of resources within the community. Since its inception, approximately 440 offenders have been active drug court participants. Of those 438 participants, 220 have graduated and 169 were removed from the program. On average, 49 participants are supervised each month by two specialized probation officers. In 2010, a total of 1377 patch, urine, and portable breath tests were collected from Drug Court participants. Thirty-two positive tests were obtained. There are currently 80 individuals on the Drug Court docket.

The Lycoming County **DUI Court** began in April of 2005. This goal of this program is to allow offenders to recover within the community, as well as assist with the development of relationships with others in recovery. The DUI Court Treatment Program focuses on second tier DUI cases with blood alcohol content (BAC) of .16% or higher, third tier DUI cases with a BAC of .10% to .15%. The court will also accept DUI cases with a BAC of less than .10% when the offender falls into the problematic area of alcohol use and the sentence can be structured to fit the program requirements.

From January 1, 2010 to December 31, 2010, 65 participants were active in the DUI Court Treatment Program. Thirty-seven participants were enrolled on the In-Home Detention (IHD) Program (29 males, 8 females); and 47 participants were monitored for alcohol utilizing SCRAM units (34 males, 13 females). The program experienced one revocation and one transfer to the Drug Court Program. There are currently approximately 80 individuals on the DUI Court Docket.

The Lycoming County **Mental Health Court** began on February 13, 2008. In its first year of implementation, the Mental Health Treatment Court Program accepted ten offenders. Out of the ten offenders, eight were accepted with new charges and two were accepted as a result of a probation/parole violation hearing.

All offenders accepted into the program are diagnosed with mental health problems and receive MH/MR services. The program accepts both misdemeanor and felony charges, although individuals charged with sexual offenses, weapons offenses, or seriously violent crimes are excluded from consideration. Each offender is assigned to one of two **targeted case managers (TCMs)** to help with their daily activities. Mental Health Court participants must be seen in Court a minimum of one time per month, as well as contacted outside of court three times a month.

Mental health services for Court participants are provided by community based programs. In addition, participants have access to a **forensic peer support specialist**, who takes referrals directly from the court. There are currently approximately 13 individuals on the Mental Health Court docket; six receive forensic peer support services.

➤ **Identified Gaps**

- Female Jail Numbers have steadily risen over the last couple of years
  - Taking females wouldn't normally take because of jail beds
- When entering jail some inmates are indicating they take psychotropic meds, however, they have not been taking them on the street or have never been prescribed psychotropic meds in the past
- Sometimes issues concerning what problem solving court individuals should go to (Drug versus Mental Health Court)
- Concern about future Spanish speaking gas workers especially in the courts
- Some individuals think that Problem Solving Courts are a get out of jail free card-- don't realize the commitment
- Misconception about dropping charges after completion of ARD
- Inmates "trapped" in jail who have no housing options

➤ **Identified Opportunities**

- MH Liaison checks the list of inmates with current behavioral health services lists to improve continuity of care
- Mental Health Liaison (MH/MR) gets a weekly list of jail admissions
- WISE Options (Domestic Violence Group) Victims Services represented in Court
- Mental Health Court expedites the criminal justice process in most cases
- Pre-Trial Supervision located right in the jail
- Supervised Bail/ Intensive Supervised Bail Release
  - Beneficial working relationship with law enforcement and Public Defenders Office

- Educational Center in the jail and Pre-Release Center (Since 2000, 235 have earned high school diploma or GED)
- Prison is working closely with MH/MR to make sure inmates are starting the application process for social security before they are released
- State awarded Lycoming County with the “Jail Best Practices” distinction 3 years in a row for their efforts in maintaining the prison population

## Intercept IV: Re-Entry

### Re-Entry Services

Lycoming County parolees are typically released from the jail at 9:00 AM. Pre-trial inmates can be released at any time during the day. Individuals are released with three days of medication.

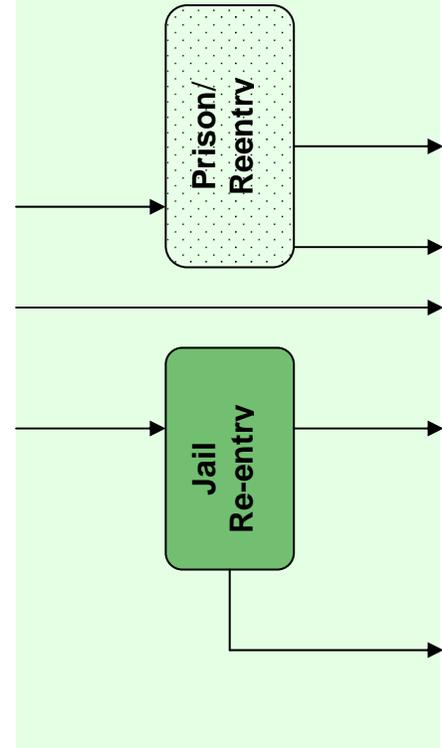
### Pre-Release Center

The Lycoming **Pre-Release Center (PRC)** is a residential community corrections program for sentenced male and female offenders which houses 105 male beds and 32 female beds in a minimum-security setting, all of which are currently full. The program is a restrictive intermediate punishment program that provides work training, life skills and substance abuse services. While housed at the facility, residents participate in AA/NA meetings, drug and alcohol groups, GED studies, religious programs, cognitive restructuring groups, a fathering program and a parenting program. In July of 2007, the Pre-Release Center opened a female unit.

The Pre-Release Center also houses a **Work Release Program**. Residents with full-time employment are placed on work release and are charged for room and board. As a resident, responsibilities include paying costs and fines, magistrate fines, domestic support and are paying for required drug tests. When possible, monies are sent to their family or the resident saves money for their eventual release. Residents who are unemployed are assigned to 1 of the 9 community work crews such as the County Landfill or the County Recycling Center. Other work crews assist townships, boroughs with projects; help maintain County Bridges; assist at the County Farm and build and renovate community houses. Overall, the purpose is to train the offender in basic work skills and to improve or acquire other skills.

In addition, the pre-release center sponsors the **WIN/WorkKeys** program that allows inmates to acquire work skills and take the WorkKeys work readiness test, which is valued by local employers.

### Intercept 4 Reentry



➤ **Identified Gaps**

- Some newly released pre-trial individuals are not being tracked
- Three days of aftercare medications are provided when individuals are leaving jail; prescriptions are not provided
- Lack of identification for some inmates delays trying to re-in state benefits when leaving the jail. Burden falls on case managers
- List from Pennsylvania Department of Corrections (DOC) that is provided to MH/MR is often confusing, lacks continuity of care information, and coordination is poor
- Probation/Parole's caseload from state prison often fall through the gap in terms of developing continuity of care
  - Often the solution is to send these inmates to ER to have a mental health evaluation and continued medication

➤ **Identified Opportunities**

- Prison psychiatrist works closely with MH/MR to provide prescription to inmates coming out of jail especially when their release falls on Friday
- Crossroads have a psychiatrist who can write prescriptions for the mental health court caseload
- Individuals on probation used to fall through the gap with a 3 or 4 month waiting list to see a psychiatrist outside the prison; this has improved significantly
- Educational Center in the Jail and Pre-Release Center (Since 2000, 235 have earned high school diploma or GED)
- Pre-Release Center works with individuals to get benefits re-instated
- 30 days of meds are provided by the Pennsylvania Department of Corrections when an individuals with mental illness is being released from state prison

## Intercept V: Community Corrections / Community Support

### Lycoming County Probation and Parole

The Lycoming County Adult Probation Office is responsible for the supervision of individuals sentenced by the Lycoming County Courts to probation, parole, intermediate punishment, ARD probation, and probation without verdict. Special programs include the electronic monitoring program, intensive drug and alcohol unit, specialized supervision unit and the community service program.

Lycoming County has an **Accelerated Rehabilitative Disposition (ARD)** program that is a one-time alternative to trial, conviction, or a possible jail sentence. Upon application and completion of a probationary period and an application for expungement, charges are dismissed.

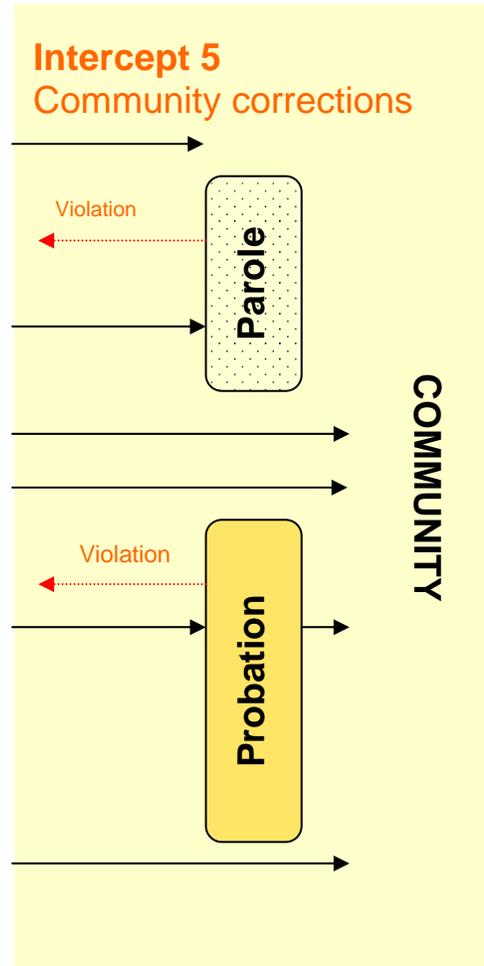
### Specialized Supervision Program

The **Specialized Supervision Program** was established in 1984 to meet the needs of offenders with mental challenges and mental illness under the supervision of the Adult Probation Department and who are incarcerated offenders in the Lycoming County Prison. The objective of the Specialized Supervision Program is to build competency in adjudicated offenders so the individual functions successfully within the community.

The Specialized Supervision Program currently employs one targeted case manager (TCM), and two probation officers. The TCM and probation officers work closely to provide supervision, with offices in the Targeted Case Management office.

In 2010, the Specialized Supervision Program averaged 44.3 clients per month and received a total of 14 new cases. There were a total of 60 drug/alcohol urines performed on clients at the office, in the field, or at the Lycoming County Prison. An average of 4-6 drug/alcohol tests were performed per month and a total of 10 positive tests were obtained for drug/alcohol use (16.6%). All positive tests were for illegal controlled substances. In 2010, there were 18 Probation/Parole violation hearings conducted. Of the 18 hearings, 9 cases incurred revocations. Five of the hearings were associated with new criminal charges (55%) while 4 hearings were due to technical violations (45%). The new criminal charges included 4 Felony arrests, and 1 misdemeanor arrest.

### Community Resources



Lycoming County residents have access to the **Blue Sky Clubhouse**, a community center that offers daily activities for individuals with mental illness. **Wellness Recovery Action Plan (WRAP)** groups are also offered at the Clubhouse.

**Saint Anthony's Center** in Williamsport offers a free medical clinic, meals, and clothing to individuals in need.

The **Beacon Hub Drop-in Center** is a consumer driven and consumer run organization for individuals with mental health and cognitive disabilities. It is Located at 1307 Park Avenue, Building 7, Second Floor, Suite 40 in Williamsport. The Center is operated by Skills of Central Pennsylvania, Inc. with support from the Lycoming/Clinton MH/MR program.

Members of Beacon Hub socialize with their peers, get support, watch TV, play Wii, or try Karaoke. Currently, Members have scheduled a day for crafts and a day for healthy discussions. Hours of operation are: 8:30 a.m. to 4:30 p.m. Monday through Friday and 9:00 a.m. to 5:00 p.m. the first and third Saturdays of every month.

The **Salvation Army** in Lycoming County provides residents with clothing, furniture, parenting classes, life skills classes, and rent rebates.

Lycoming-Clinton Counties **Commission for Community Action Success Through Engagement and Partnership (STEP)**, Inc. is a private, non-profit community action agency whose mission is to engage diverse individuals, families and communities in the pursuit of economic and social success. This organization provides transportation to treatment and probation appointments, as well as employment help to individuals in Lycoming County.

### **Housing**

Lycoming County has an active **Local Housing Options Team (LHOT)**, as well as the **Lycoming County Family Housing Alliance** which is composed of the professional staff from 22 human service and social service organizations to address the homeless needs of individuals, families and veterans of our city and county.

The **Williamsport American Rescue Workers** has operated a men's shelter (a seven day transient homeless shelter) program for now over 75 years and currently has a capacity for 47 men. In addition, they provide a newly opened Family Shelter.

Lycoming-Clinton also has a **Supported Housing Unit**, which houses 16 individuals with forensic involvement.

Lycoming County individuals also have access to four **Mental Health Group Homes**, three in Lycoming County and one in Clinton County.

The **Community Service Group: MH Residential** is a group home offering community mental health services designed to assist people with psychiatric disabilities re-adjust to independent living at various levels. It offers a continuum of services ranging from programs that are staffed seven days a week around the clock to our supportive living arrangements where our staff go into people's homes and offer varying levels of assistance as needed.

**Saving Grace** is a 24-bed shelter designed for individuals, families and veterans in a homeless crisis. This shelter often houses individuals with criminal justice involvement and provides 14 days of lodging.

In addition, **Journey House** provides a shelter where individuals can stay and learn to be self-sufficient. To date, 72 % of the homeless families who have gone through the program are now living on their own in Williamsport.

➤ **Identified Gaps**

- Across all intercepts, the gas Industry bringing in people from out of town who are bringing in offenses – parole/probation can't track, parole/probation's case loads have skyrocketed
- Difficult to link individuals to housing
- Supportive Housing Program funded by CJAB
  - Lose funding at the end of the year
  - Results from the program were not 100 percent successful
    - Unable to get back on their feet even after housing was provided
  - Lack of Employment for criminal justice and mental health population
- Rents are drastically increasing because of the influx of people coming in to work in the gas industry
- Services for children of incarcerated parents are not being addressed (high risk population)

➤ **Identified Opportunities**

- Two specialized Probation officers are housed in Targeted Case Management Office
- Good collaborative relationship between the Supportive Housing Program and Housing Authority (Opportunity for the continuation of funding)
- Three Mental Health Group Homes (26 beds)
- Step Community Action provides very low cost transportation

## Lycoming County Priorities

Subsequent to the completion of the *Cross-Systems Mapping* exercise, the assembled stakeholders began to define specific areas of activity that could be mobilized to address the gaps and opportunities identified in the group discussion about the cross-systems map. Listed below are the priority areas identified by the workshop participants and the votes received for each proposed priority.

### Lycoming Top Priorities

1. Housing! (32 Votes)
2. Strategies to increase adherence to treatment in order to reduce recidivism (16)
  - WRAP facilitators that are already trained can go into the jail to run groups
3. Work on continuity of care for medications for inmates released that are not involved in MH Court (15)
4. Intercept much earlier in the CJ system (13)
5. Intercept before CJ System (12)
6. Insight from counties/states re: impact of gas drilling boom (10)
  - Specifically effects on target population (both negative and positive)
7. Better tracking of the MH students (5)
  - Starting at school age and into CJ System
  - Better mental health support system at an early age
  - Plus different programming



	authorities and private landlords re: section 8 and educate private landlords re: available supports	<p>could be purchased and renovated to house folks</p> <ul style="list-style-type: none"> <li>• Talk to planning commissions about available properties</li> <li>• Reach out to faith-based groups and encourage the same model used for Liberty House</li> </ul>		
1.3	Family group decision making for housing and other needs	<ul style="list-style-type: none"> <li>• Continue MH/MR planning of this, expand it to more family members</li> <li>• Make it more available for adults (already available for kids)</li> </ul>	MH/MR Staff	
1.4	Address Funding challenges	<ul style="list-style-type: none"> <li>• Apply for new funding in November (new PCCD announcement)</li> <li>• Identify strategies for sustaining grant funded activities after the grant ends</li> </ul>		
1.5	Look at surrounding counties for promising practices			

<b>Priority Area 2: Strategies to increase adherence to treatment in order to reduce recidivism</b> ○ WRAP facilitators that are already trained can go into the jail to run groups Action Planning Group: <i>Rae, Karey, Nicole, and Belinda</i>				
Objective		Action Step	Who	When
2.1	Self motivated participation in tx (long term) WRAP Groups in the prison	<ul style="list-style-type: none"> <li>• Program Description development</li> <li>• Identify population/providers</li> <li>• Identify WRAP Facilitators</li> <li>• Present Information to LCP/PRC Officials</li> <li>• Identify protocol, job description</li> <li>• WRAP and Personal Medicine in the jail</li> </ul>		Fall 2011  Spring 2012
2.2	Increase peer support options	<ul style="list-style-type: none"> <li>• Identify and train additional peer support specialists</li> <li>• Male Peer support specialist?</li> <li>• Work with Corrections officers and probation officers to allow peer support into the jail</li> </ul>	MH/MR  Forensic Treatment Team  CBHMP	
2.3	Strategize re what to do with individuals who need continuous support (community example of animal hoarding)	<ul style="list-style-type: none"> <li>• Person centered planning</li> <li>• Family group decision making</li> </ul>		



				working group
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<b>Priority Area 5: Intercept <u>before</u> CJ System</b> Action Planning Group: <i>Melissa, Jess, John, Beth, Marian, and Karen</i>				
Objective		Action Step	Who	When
5.1	Institute mechanism for linking all service providers including police and CJ system to provide families with services	<ul style="list-style-type: none"> <li>Increasing public awareness → Lycoming County Health Improvement Collaboration (i.e. public service announcement, MH Fairs, Info @ Restaurants, etc.)</li> </ul>		Monthly Meetings (Brown Bag Lunch)
5.2	Stronger advocacy for MH and D&A services for Lycoming county at state level; funding	<ul style="list-style-type: none"> <li>Invite local legislatives to join the network</li> </ul>		

<b>Priority Area 6: Insight from counties/states re: impact of gas drilling boom</b> ○ Specifically effects on target population (both negative and positive) Action Planning Group: <i>Chuck, Tonya and Rob</i>				
Objective		Action Step	Who	When
6.1	Proactively Identify Grow & Provide enduring solutions for social services	<ul style="list-style-type: none"> <li>Compile Data / Contact Outside Agencies</li> <li>Create Community task Force</li> <li>Best Practice from prior experience</li> <li>Establish relationship with gas company HR</li> <li>Community Awareness</li> <li>Homeless, Drugs, Alcohol, Children</li> </ul>		NOW
6.2	Education	<ul style="list-style-type: none"> <li>Create/ID cultural diversity</li> <li>Educate both sides</li> <li>County preparedness</li> <li>MT'G (county officials,</li> </ul>		

		Rep. Mirabito, Lamses Mayor, MH/MR, SDA, Services, L.E., Gas Company Reps)		
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**Priority Area 7: Better tracking of the MH students**

- Starting at school age and into CJ System
- Better mental health support system at an early age
- Plus different programming

Action Planning Group: *Judy, Bruce, Kevin, Matt, Tonya, and Sandy*

Objective		Action Step	Who	When
7.1	Better MH programming K-12 that is cost effective	<ul style="list-style-type: none"> <li>• Mental Hygiene K-3</li> <li>• Education for children of substance abuse parents</li> <li>• Wellness Program (WRAP)</li> </ul>	<ul style="list-style-type: none"> <li>• Outreach Workers</li> <li>• Valley Prevention, West Branch</li> <li>• SAP Team</li> </ul>	<ul style="list-style-type: none"> <li>• K-3</li> <li>• K-12</li> <li>• 7-12</li> </ul>
7.2	Better representation at interagency transition meetings	<ul style="list-style-type: none"> <li>• Make sure E.S./I.D. transition meetings have representation from MH</li> <li>• Continued communication between school and community service providers</li> </ul>	Transition Coordinator  School/Community Service Providers	11th -12 <sup>th</sup>  School Age

## Conclusion

Participants in the *Cross-Systems Mapping* workshop showed genuine interest in improving the continuum of resources available for people with severe mental illness and often co-occurring substance use disorders involved in the Lycoming County criminal justice system. Lycoming County is poised to tackle a number of critical issues that will greatly improve services for this group. The assembled stakeholders spent time gaining a greater understanding of their shared systems, as well as crafting strategies related to improving the collaborative infrastructure for the group and addressing the gaps and opportunities at each intercept.

Considerable work has already been undertaken to improve services for people with severe mental illness and often co-occurring substance use disorders involved in the Lycoming County criminal justice system. Lycoming County's Drug Court, DUI Court, Mental Health Court, the Specialized Supervision Program, and Pre-Release Center are expansive programs that have already proven to be effective in diverting or providing treatment to this population across many points of interception in the criminal justice system. Furthermore, the Lycoming County Forensics Committee, Lycoming County Law Enforcement Association, and Lycoming County Criminal Justice Advisory Board are cross systems collaborative efforts that have put forward significant effort and creative solutions to improving the outcomes for people with severe mental illness and other behavioral health problems in the criminal justice system in Lycoming County.

Local stakeholders participating in the *Cross-Systems Mapping* were clearly interested in building on these successes to better improve tracking systems for data collection and analysis around this population, generating more housing opportunities in Lycoming County, developing diversion strategies before individual come into contact with the criminal justice system, and strategies to increase adherence to treatment in order to reduce recidivism. The expansion of the planning group to tackle the priorities established during the *Cross-Systems Mapping* workshop is an essential next step in a true systems change process. It will be important to create effective working relationships with other groups that did not attend the workshop, including other police jurisdictions, the Department of Veterans Affairs, the Social Security Administration, family members, Magisterial District Judges, and others. Regular meetings should be held by this larger group to facilitate information sharing, planning, networking, development and coordination of resources, and problem solving.

## Closing

Lycoming County is fortunate to have a wide range of stakeholders across the mental health, substance abuse, and criminal justice systems that have made significant efforts to understand and support the challenging issues discussed in this workshop. The *Cross-Systems Mapping* workshop gave these stakeholders a chance to develop a coordinated strategy to move forward with the identified priorities.

By reconvening and supporting the work of the group in coming months, it will be possible to maintain the momentum created during the *Cross-Systems Mapping* workshop and build on the creativity and drive of key local stakeholders. The Pennsylvania Mental Health and Justice Center of Excellence hopes to continue its relationship with Lycoming County and to observe its progress. Please visit the Pennsylvania Mental Health and Justice Center of Excellence website for more information, [www.pacenterofexcellence.pitt.edu](http://www.pacenterofexcellence.pitt.edu).

## Appendix A – Participant List

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