

Notice of Interest
for Off Site Housing of NAS JRB Willow Grove
For Aldie Foundation

Organizational Profile

1. Aldie Foundation
2. 228 North Main Street
Doylestown, PA 18901
215-345-8530
3. Michael Ratajczak, MSS, MBA, Executive Director
4. Michael Ratajczak, MSS MBA, Executive Director (attachment 1)
5. Aldie Foundation is a Private Not for Profit, tax exempt organization under Section 501(C)(3) of the 1986 Internal Revenue Code. (attachment 2)
6. Articles of Incorporation (attachment 3)



Vince Deon
President of the Board



Jim Donahue
Secretary of the Board

7. Business Narrative

a. Aldie Counseling Center was incorporated on July 1, 1977, with the purpose of providing treatment and services for those whose lives were adversely affected by substance abuse. A Board of Directors, composed of local business people and community members, oversees the operations and financial planning of the agency. Initially begun as an inpatient treatment facility in the Aldie Mansion in Doylestown, it is currently the largest outpatient drug and alcohol treatment agency in Bucks County. Located just a block north of the county courthouse in Doylestown, Aldie is in close proximity to many social service centers, including Doylestown Hospital, Lenape Valley Foundation, the Bucks County Correctional Facility, Children and Youth Services, the Bucks County Housing Group, and A Woman's Place.

Management is focused on (1) keeping pace with changing needs of the community, (2) the expanding population in Bucks County, and (3) the metamorphosis of the health insurance industry has enabled Aldie to continue to provide quality clinical services to persons affected by alcohol and other drug abuse.

Aldie's service menu for adults, adolescents, and families includes assessment, traditional counseling therapy, a partial hospital program, an intensive treatment tract, pharmacotherapy, mobile engagement, Peer services and Sheltered Housing.

Aldie purchased the building in which they had had offices for ten years in July, 1990, insuring against possible rent increases as the area grows and real estate in the center of Doylestown becomes more valuable. In 1997, the house located at 236 North Main Street,

adjacent to Aldie's offices, became available, and Aldie purchased this property as a recovery house for men in need of a stable, sober living environment. Because of the project's success, in 1999 Aldie purchased the twin house at 238 North Main Street. These houses always have a full census of 16 men, with a waiting list.

In the spring of 2003, the Bucks County Drug and Alcohol Commission requested that Aldie consider assuming the responsibility of providing drug and alcohol treatment in lower Bucks County. After careful consideration, the Board of Directors agreed to invest in the development of a second Aldie office, that would replicate the commitment, the caring, successful treatment environment, and the administrative skill and experience provided by Aldie in Doylestown for the last 25 years, and an office was opened in Bristol in September 2003. There has been a great demand for services in lower Bucks County. In order to meet this demand Aldie moved from Bristol to a larger office site in Bensalem in April 2006, and the demand for services in this area has not slowed.

Aldie Annually serves approximately 2,400 Bucks County residents with approximately 60% of those served in our lower Bucks County offices. The estimated population of Bucks County is 621,144 persons it is estimated that 80 % of these (496,915) reside in Lower or Central (L/CBC) Bucks County. According to the 2007 National Survey on Drug Use and Health, Approximately 30% of persons age 12 or older report binge or heavy drinking (149,075 L/CBC persons) and 8% (39,753 L/CBC) of persons age 12 or older report abuse of illicit drugs. Of course estimates of actual use/abuse are higher than reported.

Aldie is the acknowledged Assessment site and primary provider of Drug and Alcohol Counseling services in Central and Lower Bucks County and receives referrals from multiple sources, including self referred individuals (27%), other treatment facilities (20%) and criminal justice entities (33%).

Primary sources of reimbursement for services provided to individuals are; Health-Choices Insurance = 41%, Federal/State and County = 37%, Client Fees and other income 22%.

At the end of fiscal year 2008/2009, Aldie is planning (1) continued expansion of services in lower Bucks County with the additional space made available through this project; (2) adding a Suboxone treatment tract to the Pharmacotherapy Program for some opiate-addicted people who could benefit from this prescription medication; (3) adding new community treatment team services for criminal justice clients referred to Aldie to address substance abuse problems and improve successful re-entry into the community and (4) expanding availability of transitional Housing opportunities for men and women in recovery..

b. Board of Directors:

Vincent J. Deon – President

Herbert W. Rose, M.Div. – Vice President

James A. Donahue - Secretary

Joy Stiles - Treasurer

Jim McGuffey

Thomas J. Smith, III, Esq.

Principal Employed Staff

Michael Ratajczak, MSS, MBA (CV attachment 4)

Previous related experience -Operated similar Transitional Housing units for past 12 years. Served as the Executive Director of Aldie Foundation for 26 years.

On-Site Program Manager, (yet to be determined)

c. (attachment 5)

d. Personnel policies and procedures for recruiting , affirmative action and Equal Opportunity outreach, as well as selection, training, evaluation and discipline are well established, reviewed annually by Pennsylvania Department of Health, and are accredited by the Commission on Accreditation of Rehab Facilities (CARF) (attachment 6)

e. Aldie plays a key role in the Bucks County Community as the largest outpatient treatment center for persons and families struggling with alcoholism and other chemical dependency. We regularly interface with housing, medical, psychiatric, criminal justice and children and youth, and occupational rehabilitation organizations to coordinate care for our clients and their families. Proposed Program: "The Passage"

1. A long term family transitional housing program targeted to individuals and families who are in recovery (Minimum 12 months clean and sober) who lack adequate housing that supports recovery and fosters development of independent living skills, parenting skills, and occupational development skills.

"The Passage" would provide the final steps of an individual's and family's road to recovery. The program will be targeted to persons who have established a sustained recovery program or following their placement in sheltered housing or halfway house experiences, where they have gained a period of sobriety and some of the life skills required to maintain sobriety. It would create a therapeutic community and a network of support while allowing the individual further development of coping and independent living skills.

For some "The Passage" program would also provide a family preservation opportunity for those families that have struggled with chemical dependency, lost many of the supports and opportunities as a result of their addiction and have inadequate housing to support a recovering lifestyle. This program (providing acquisition of 20 units) would house an average of 10 families and 16 individuals, a full time resident advisor/supervisor, and clinical support programming. Given the variations in paths of recovery for different individuals for some The Passage program will equate to permanent supportive housing for others it may provide the stability and skills necessary to transition to total independent living arrangements.

Ongoing drug and alcohol treatment, parenting skills training and occupational skills development counseling would be provided as necessary and community group supervision would be provided 24/7.

2. Aldie Foundation treats approximately 2,500 people a year in various stages of recovery at our offices in Bensalem and Doylestown. As the largest Outpatient provider of Drug and alcohol recovery programming in Bucks County we act as the first point of contact and primary assessment site for clients seeking to recover from chemical dependency. We refer clients to inpatient facilities, detox facilities, halfway house facilities, transitional housing facilities and outpatient treatment programs, such as those Aldie operates. The single greatest obstacle observed by 85% of our clients is reported as stable housing free from the influence of other's drug and alcohol use/abuse.

In Pennsylvania, an extremely low income household (earning \$15,940, 30% of the Area Median Income of \$53,134) can afford monthly rent of no more than \$399, while the Fair Market Rent for a two-bedroom unit is \$671. In Bucks County, an extremely low income household (earning \$18,990, 30% of the Area Median Income of \$63,300) can afford monthly rent of no more than \$475, while the Fair Market Rent for a two-bedroom unit is \$871.

A family receiving a Temporary Assistance for Needy Families (TANF) cash grant (\$420/month for a family with one adult and two children) can afford monthly rent of no more than \$126.

A Supplemental Security Income (SSI) recipient (receiving \$572 monthly) can afford monthly rent of no more than \$172, while the Fair Market Rent for a one-bedroom unit is \$548.

The Housing Wage in Pennsylvania is \$12.90, for Bucks County the Housing Wage is \$16.75. This is the amount a full time (40 hours per week) worker must earn per hour in order to afford a two-bedroom unit at the area's Fair Market rent. This is 251% of the minimum wage (\$5.15 per hour). Between 2001 and 2002 the two bedroom housing wage increased by 3.46%.

There have been several recent studies published that document the cost savings and effectiveness associated with permanent supportive housing interventions for chronically homeless individuals.

Recent Cost Offset Studies

The April 1, 2009 issue of the *Journal of the American Medical Association* included the article, "Health Care and Public Service Use and Costs Before and After Provision of Housing for Chronically Homeless Persons with Severe Alcohol Problems," which reports on the results of a Housing First initiative in Seattle, WA known as "1811 Eastlake". This study compared 95 Housing First participants, with 39 wait-list control members and found cost reductions of over 50 percent for the Housing First group. While it is not the first published evidence of the service use reductions and cost savings that permanent supportive housing interventions can provide, it is worth highlighting because the level of the cost savings - almost \$30,000 per person per year after accounting for housing program costs - are greater than some seminal studies that have shown more modest cost offsets through permanent supportive housing. The study is also noteworthy as one of several recent cost offset studies that have been released already this year. For example, a study of permanent supportive housing in Illinois showed a 39 percent decrease in the total cost of service provision, and a study involving 12 homeless service providers across Massachusetts found a 67 percent decrease in Medicaid costs for Housing First participants.

Outcomes of Permanent Supportive Housing

There is also recent research that directly addresses the well-being of permanent supportive housing residents. The April 2009 issue of the *Journal of Community Psychology* included an article entitled, "Housing Stability among Homeless Individuals with Severe Mental Illness Participating in Housing First Programs." The authors of this article reviewed the outcomes of participants in three different Housing First programs in New York City, San Diego, CA and Seattle, WA and found that 84 percent of participants remained stably housed after 12 months. The authors also evaluated level of impairment related to psychiatric symptoms and substance abuse at baseline and 12 months and found no significant improvement in substance abuse or mental health impairment with permanent supportive housing.

These studies provide mounting evidence that supportive housing is a cost effective and humane solution to long-term homelessness that benefits our health care and other publicly funded systems. Because people experiencing long-term homelessness frequently have complex medical and behavioral health challenges, they use a disproportionately high amount of health care services. When people are homeless, their health care is likely to consist of costly emergency, inpatient, and long-term care services. Supportive housing provides an essential foundation for access to primary health care and chronic disease management, services that are less expensive than crisis care but are more likely to address underlying health problems. As these studies demonstrate, this approach saves public dollars and leads to better health outcomes. Jacqueline Anderson is Senior Program Manager at the Corporation for Supportive Housing,

Pearson, C, Montgomery, A.E., and Locke, G. "Housing Stability among Homeless Individuals with Serious Mental Illness Participating in Housing First Programs," *Journal of Community Psychology* 37, no. 3 (2009) 404-417.

Larimer, M.E., Malone, D.K., Gardner, M.; et al. "Health Care and Public Service Use and Costs Before and After Provision of Housing for Chronically Homeless Persons with Severe Alcohol Problems," *Journal of the American Medical Association* 301, no. 13 (2009) 1349-1357.

The Heartland Alliance Mid-America Institute on Poverty. 2009. Supportive Housing in Illinois: A Wise Investment. Click [here](#) for the report.

Massachusetts Housing and Shelter Alliance. 2009. Home and Healthy for Good: A Statewide Housing First Program. Progress Report March 2009. Click [here](#) for the report.

National Low Income Housing Coalition. 2009. Out of Reach 2007-2008: Persistent Problems, New Challenges for Renters. Click [here](#) for the report.

3. a) Existing facilities operated by Aldie Foundation include 2 recovery houses, providing transitional supportive housing for 16 men. In Bucks County there are approximately 23 of these house operated by different private owners or entities. In all it is estimated that there are approximately 200 transitional housing beds in Bucks County. In addition to these, there are approximately 25 Female Halfway house beds and 20 male Halfway house beds. There are also a number of housing groups in Bucks county that provide emergency shelter and housing counseling services. There are no long term or supportive permanent housing opportunities specifically for persons and families in recovery from chemical dependency and in need of the support of a recovery community of care.

b) The Passage program will support expansion of the Bucks County Recovery Community and the availability of not only permanent and long term transitional living opportunities but of supportive services designed to assist in long term recovery, family preservation, prevention of future generations of persons with chemical dependency, and occupational and social skills development for persons in recovery strengthening the Bucks County Community.

c) Not required to meet or comply with established state standards.

d) Aldie Foundation does not currently possess real estate suitable for the proposed program.
4. This program will receive referrals to and refer to shorter term transitional D&A housing as needed. The program will also be coordinated with other homeless programs when there is need for placement of persons meeting the admission requirements of the Passage program. Coordination will occur through the Foundations existing network of contacts and by targeted case-managers and peer recovery specialists.
5. Program could be up and running with 3 months of announcement of award.

Buildings or Property Necessary to carry out the Program

1. 20 townhouse units located in the "Shenandoah Woods" military townhouse complex Units 566, 568, 570, 572, 574, 578, 580, 582, 584, 586, 588, 590, 592, 594, 596, 598, 600, 602, 604, Skyhawk Drive...See (Attachment 7)

The units are suitable for the proposed use as independent living quarters for individuals and families with up to 3 children as currently configured with no need for renovations or improvements. They will meet the needs of homeless families and individuals throughout Bucks County, in need of homes that can provide a supportive recovery community, and services that will improve resident's ability to sustain long term recovery and family preservation, while pursuing educational and occupational opportunities and developing life and recovery skills. Residents will also support each other in their recovery improving self esteem and creating an expanded recovery community.

2. Aldie Foundation is requesting a deed transfer of the identified properties.
3. Land use and zoning will need to accommodate residential R1 uses. No change should be necessary.
4. No rehabilitation or construction is anticipated or necessary for the proposed use.

Organizational Capacity

1. Aldie Foundation has operated 2 transitional living homes for an average of 16 individuals in early recovery from chemical dependency for 12 years.
2.
 - Aldie House
232 and 234 Main Street
Doylestown, PA, 18901
215-489-2545
John Servant

- 2 Residential Homes
16 Transitional Housing Beds
1 on-site manager apartment
 - See (Attachment 8)
 - Full range of drug and alcohol Ambulatory care services including Outpatient, Intensive Outpatient, Partial Hospitalization, Mobile Engagement, Peer Support, and Pharmacotherapy.
 - 12 years 234 North Main Street, 10 years 236 North Main Street.
 - Consolidated Audited Financial Statements for the entire organization including breakout for Sheltered Housing program. (Attachment 9)
3. Expansion of existing programs will consist of 1 additional On-site manager, 1 FTE additional Peer Support staff, and 1 professional counseling staff member specializing in Occupational development and family preservation. Job descriptions attached (attachment 10)
4. Management Functions provided by On-site Project manager will include:
- Provide assistance in application for benefits, MA, SSI, TANF, etc.
 - Visit twice weekly every unit to insure compliance with program rules and optimal living standards and collect random urine drug screens.
 - Conduct monthly review of physical plant to assure repair and optimal functioning of utilities, furnishings, appliances, general appearance and functionality.
 - Assure neighborhood safety and security program through organization and regular meetings of a neighborhood safety watch.
 - Conduct monthly recovery community meetings to address concerns, issues and improvements recommended by residents.
 - Recruit peer specialists and recovery support volunteers to assist persons in early recovery.
 - Coordinate treatment, peer support services, occupational training, and referral services for residents with Aldie Foundation clinical staff and project team.
 - Coordinate purchasing and contracting for supplies repairs etc. through the Foundations purchasing and contracting systems.
 - Review applications, interview potential residents conduct background checks and assign residential units as available.
 - Manage the waiting list and maintain record of rent payments, payments due, etc.
 - Collect rents on a weekly basis.
 - Liason with local county assistance office , Social Security and other County Offices
 - Provide 24 hour emergency maintenance service
 - Orient new tenants to site rules and regulations
 - Communicate "clinical issues" to professional counseling staff
5. a) (Attachment 9) None of the Officers of the Aldie Board of Directors, or principle Employees have declared bankruptcy in the last five (5) years.
b) None of the Officers of the Aldie Board of Directors or principle Employees have been convicted of a felony in the last five (5) years.
- c) Business References**
HPT Systems, Inc. (Approx \$40,000)
283 2nd Street Pike, St. 170
Southampton, PA 18966
215-364-8226