

2018
Local Services Plan
For Mental Hygiene Services

Wyoming County Dept. of Mental Health
October 31, 2017



Office of
Mental Health

Office of Alcoholism and
Substance Abuse Services

Office for People With
Developmental Disabilities

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Planning Form	LGU/Provider/PRU	Status
Wyoming County Dept. of Mental Health	70420	(LGU)
Executive Summary	Optional	Not Completed
Goals and Objectives Form	Required	Certified
Office of Mental Health Agency Planning Survey	Required	Certified
Community Services Board Roster	Required	Certified
Alcoholism and Substance Abuse Subcommittee Roster	Required	Certified
Mental Health Subcommittee Roster	Required	Certified
Developmental Disabilities Subcommittee Roster	Required	Certified
Mental Hygiene Local Planning Assurance	Required	Certified
 Wyoming Co Partners for Prev PriPrev	 70420/70420/90125	 (Prevention Program)

Mental Hygiene Goals and Objectives Form
 Wyoming County Dept. of Mental Health (70420)
 Certified: Kelly Dryja (5/31/17)

1. Overall Needs Assessment by Population (Required)

Please explain why or how the overall needs have changed and the results from those changes.

a) Indicate how the level of unmet **mental health service needs**, in general, has changed over the past year: Improved Stayed the Same Worsened

Please Explain:

No new service provisions have been added to the spectrum of mental health services that are available in Wyoming County.

There continues to be no 24/7 mobile mental health team for Wyoming County. A team from Rochester Psychiatric Center covers the County everyday from 11am-7pm, not counting holidays.

The PROS Program, operated by Spectrum Human Services, is now housed in the mental health clinic site and shares some services within the mental health clinic array of services. It is hoped that this program's transitions will prove efficacious for the residents of County who continue to need PROS services. With the initiation of Certified Community Behavioral Health Center services (CCBHC), it is hoped that more intensive services and the operation of 24/7 mobile mental health services, will significantly fill the service needs in Wyoming County.

b) Indicate how the level of unmet **substance use disorder (SUD) needs**, in general, has changed over the past year: Improved Stayed the Same Worsened

Please Explain:

The heroin problem has increased in Wyoming County as per what is happening in much of New York State. The need for evidenced-based protocols and practices to combat opioid addiction is imperative. Fortunately, the CD treatment provider in Wyoming County is responding with additional medication-assisted treatments and other services, such as a tentative plan to initiate outpatient detox services. Additionally, a regional provider is collaborating with another local provider to tentatively offer methodone clinic services and working with the State to obtain approvals, make capital improvements, etc.

c) Indicate how the level of unmet needs of the **developmentally disabled** population, in general, has changed in the past year: Improved Stayed the Same Worsened

Please Explain:

The DD service array is undergoing massive system changes that are taking a long time to resolve and many issues not yet figured out. Many consumers, families and organizations believe that the person-centered tradition is being compromised as managed care becomes a component of service delivery. For instance, denial of new admissions or re-admissions to sheltered workshops and transition to the Front Door process has been viewed as denial of appropriate and desired services for some individuals, and thus an unmet need.

2. Goals Based On Local Needs

Issue Category	Applicable State Agenc(ies)		
	OASAS	OMH	OPWDD
a) Housing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b) Transportation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c) Crisis Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d) Workforce Recruitment and Retention (service system)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) Employment/ Job Opportunities (clients)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f) Prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Inpatient Treatment Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Recovery and Support Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) Reducing Stigma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) SUD Outpatient Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k) SUD Residential Treatment Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l) Heroin and Opioid Programs and Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m) Coordination/Integration with Other Systems for SUD clients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n) Mental Health Clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o) Other Mental Health Outpatient Services (non-clinic)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p) Mental Health Care Coordination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q) Developmental Disability Clinical Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r) Developmental Disability Children Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s) Developmental Disability Adult Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
t) Developmental Disability Student/Transition Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
u) Developmental Disability Respite Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v) Developmental Disability Family Supports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
w) Developmental Disability Self-Directed Services	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
x) Autism Services	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

- y) Developmental Disability Person Centered Planning
- z) Developmental Disability Residential Services
- aa) Developmental Disability Front Door
- ab) Developmental Disability Service Coordination
- ac) Other Need (Specify in Background Information)

2a. Housing - Background Information

The Adult SPOA Committee and specialized housing providers report insufficient housing to meet the needs of mental health and substance abuse disorder clients. Routinely, there is a wait list for housing for treatment apartments in the mental health area and supported housing programs for mental health and substance abuse disorder. There are only 8 slots for the SUD housing that is operated by Spectrum Human Services at this time. The DD speciality housing is also transitioning to community-based sites.

Do you have a Goal related to addressing this need? Yes No

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? Yes No

Least-restrictive housing opportunities will increase for individuals with mental health, substance abuse and developmental disabilities.

Objective Statement

Objective 1: Collaborate with contract agencies in application for available funding for housing opportunities.

Applicable State Agency: (check all that apply): OASAS OMH OPWDD

Change Over Past 12 Months (Optional)

In the last year, the mental health contracted housing agency has accessed funding for an unlicensed housing project in Perry, NY. Additional funding is being sought and the Village approvals and acquisition of the property are ongoing at this time. CD area treatment providers have indicated willingness to access any available funding for OASAS housing to operate in Wyoming County. DD specialty housing is in the process of transitioning from multi-individual housing projects to smaller, community-based, speciality housing.

2b. Transportation - Background Information

Lack of adequate transportation has historically been a problem in Wyoming County. The public transportation system is limited in operational time and covered County area. The local D.S.S. reports numerous problems with the medicaid transportation program. The transportation systems in place may have to pick clients up hours prior to their appointments and return them home hours after their appointments are completed. Future of transportation services is in flux in the DD service array.

Do you have a Goal related to addressing this need? Yes No

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? Yes No

Individuals with disabilities will have increased opportunities for transportation to get their healthcare needs met.

Objective Statement

Objective 1: The Mental Health Department will collaborate with the transportation systems, other community agencies and County offices to develop creative solutions to decrease the transportation barriers that exist for individuals who lack their own transportation.

Applicable State Agency: (check all that apply): OASAS OMH OPWDD

Objective 2: The Mental Health Department will explore ride sharing opportunities and learn more about how they could decrease transportation barriers.

Applicable State Agency: (check all that apply): OASAS OMH OPWDD

Change Over Past 12 Months (Optional)

The Mental Health Department has increased funding to the MHA Peers Helping Peers for transportation opportunities for individuals with mental health disabilities. The Mental Health Department continues to actively participate in task forces that focus on barriers to transportation and advocate, on a regional and State level, for improved transportation services in all disability areas.

2c. Crisis Services - Background Information

Until the Subregional Reinvestment in 2014 with the downsizing of the Rochester Psychiatric Center, Wyoming County had no mobile mental health team at all. Currently, the MIT from the Rochester Psychiatric Center operates, on-site, in Wyoming County 7 days per week, from 11 am - 7 pm for adults. Mobile mental health treatment for children is provided by WNY Children's Psychiatric Center by referral.

The START program, which is already operational in WNY, has several Counties to cover, yet plans are for a crisis residential program (short-term) is being facilitated for those needing crisis services in the DD population, which will hopefully better meet the crisis service needs of this population.

The occurrence of domestic violence in Wyoming County is an area of concern brought up at a Mental Health Subcommittee meeting and requires more exploration of service delivery system to victims and families.

Do you have a Goal related to addressing this need? Yes No

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? Yes No

24/7 mobile mental health services will be provided in Wyoming County for the mental health population and improved crisis services will be developed for the developmental disability population.

Objective Statement

Objective 1: The Mental Health Department will collaborate with contracted mental health clinic agency in the facilitation of mobile mental health services.

Applicable State Agency: (check all that apply): OASAS OMH OPWDD

Objective 2: The Mental Health Department will support and promote the crisis residential services of START program once started.

Applicable State Agency: (check all that apply): OASAS OMH OPWDD

Objective 3: The Mental Health Department will participate in Integrated Domestic Violence Court stakeholder meeting to determine adequacy of counseling services to victims and families.

Applicable State Agency: (check all that apply): OASAS OMH OPWDD

Change Over Past 12 Months (Optional)

Spectrum Human Services has acquired funding for CCBHC services, starting in July 2017, which will provide mobile mental health services for residents of Wyoming County. START is expanding their service modalities.

2d. Workforce Recruitment and Retention (service system) - Background Information

Families and agencies have reported being challenged by having enough individuals to provide direct care to people with developmental disabilities, who are trained and have good retention.

Do you have a Goal related to addressing this need? Yes No

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? Yes No

Persons working in direct care positions will increase and remain employed in the area of service to those with developmental disabilities.

Objective Statement

Objective 1: The Mental Health Dept. will advocate, with with consumers, families and agencies, components the State needs to address to support improved recruitment and retention of direct care staff in the DD area.

Applicable State Agency: (check all that apply): OASAS OMH OPWDD

Change Over Past 12 Months (Optional)

2e. Employment/ Job Opportunities (clients) - Background Information

Appropriate employment for people with developmental disabilities is limited in the rural area of Wyoming County.

Do you have a Goal related to addressing this need? Yes No

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? Yes No

Employment opportunities will increase for those with developmental disabilities.

Objective Statement

Objective 1: he Mental Health Dept., along with consumers, families and agencies, will advocate for protocols for employment opportunities for those who have developmental disabilities, that are appropriate in the rural area of Wyoming County.

Applicable State Agency: (check all that apply): OASAS OMH OPWDD

Change Over Past 12 Months (Optional)

2g. Inpatient Treatment Services - Background Information

There is no inpatient treatment program in Wyoming County for substance abuse disorders.

Do you have a Goal related to addressing this need? Yes No

If "No", Please discuss any challenges that have precluded the development of a goal (e.g. external barriers):

Inpatient detox services has been discussed with the Wyoming County Community Health System in the past, but the hospital has insufficient resources and limited program space to operate this type of program. Hospital and community-based agencies have data of need that supports utilization of this type of program.

Change Over Past 12 Months (Optional)

2h. Recovery and Support Services - Background Information

Wyoming County does not have formal recovery or support services for individuals or families struggling with addiction.

Do you have a Goal related to addressing this need? Yes No

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? Yes No

Persons in recovery from alcohol and substance abuse, especially high need individuals and their families, will have expanded supports.

Objective Statement

Objective 1: The Mental Health Department will develop more intensive support services for people in recovery and their families.

Applicable State Agency: (check all that apply): OASAS OMH OPWDD

Change Over Past 12 Months (Optional)

Smart Recovery, a community-based self help group for addicts and their families, continues to be active in the county. The Mental Health Department, as well as other organizations and agencies, regularly participate in the Treatment Court (Drug Court) staff meeting and provide strategies for supporting the involved members to remain sober and re-establish their lives as active and productive members of their community. NARCAN trainings are being offered in the county. And friends and families of those struggling with addiction are provided with NARCAN kits in the hospital if appropriate.

2l. Heroin and Opioid Programs and Services - Background Information

As stated previously, the heroin problem has increased in Wyoming County, as per much of the rest of the State.

Do you have a Goal related to addressing this need? Yes No

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? Yes No

Individuals with opioid addictions will have greater access to programs and services, locally and regionally.

Objective Statement

Objective 1: The Mental Health Department will actively participate in the Genesee, Orleans, and Wyoming (GOW) Opioid Task Force to collaborate regarding the development and facilitation of increased evidence-based treatment programs to address heroin and opioid addiction.

Applicable State Agency: (check all that apply): OASAS OMH OPWDD

Change Over Past 12 Months (Optional)

The GOW Opioid Task Force was initiated the last quarter of 2016 and is ongoing.

2w. Developmental Disability Self-Directed Services - Background Information

Do you have a Goal related to addressing this need? Yes No

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? Yes No

An increased number of consumers and families will have improved knowledge of self-directed services.

Objective Statement

Objective 1: The Mental Health Department will coordinate with the DD subcommittee and local providers to hold meetings and disseminate information about the components of self-directed services.

Applicable State Agency: (check all that apply): OASAS OMH OPWDD

Change Over Past 12 Months (Optional)

2x. Autism Services - Background Information

Do you have a Goal related to addressing this need? Yes No

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? Yes No

Wyoming County residents will have increased knowledge of autism services and where to access them.

Objective Statement

Objective 1: The Mental Health Dept., the DD subcommittee and local agencies/schools will disseminate information related to accessing autism services.

Applicable State Agency: (check all that apply): OASAS OMH OPWDD

Change Over Past 12 Months (Optional)

3. Goals Based On State Initiatives

State Initiative	Applicable State Agenc(ies)		
	OASAS	OMH	OPWDD
a) Medicaid Redesign	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Delivery System Reform Incentive Payment (DSRIP) Program	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c) Regional Planning Consortiums (RPCs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) NYS Department of Health Prevention Agenda	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3b. Delivery System Reform Incentive Payment (DSRIP) Program - Background Information

Do you have a Goal related to addressing this need? Yes No

Goal Statement- Is this Goal a priority goal? Yes No

24/7 crisis mobile services will be developed and implemented in Wyoming County.

Objective Statement

Objective 1: Funding will be considered for Wyoming County to facilitate 24/7 mobile crisis services through FLPPS in the Western NOCN region.

Applicable State Agency: (check all that apply): OASAS OMH OPWDD

Change Over Past 12 Months (Optional)

3d. NYS Department of Health Prevention Agenda - Background Information

Do you have a Goal related to addressing this need? Yes No

Goal Statement- Is this Goal a priority goal? Yes No

Efforts to reduce the heroin problem will be developed and facilitated by the GOW opioid task force.

Objective Statement

Objective 1: Workgroups such as Data, Access to Care and Community Education will result in measurable outcomes that reduce the incidences of heroin use in the County.

Applicable State Agency: (check all that apply): OASAS OMH OPWDD

Change Over Past 12 Months (Optional)

4. Other Goals (Optional)

Other Goals - Background Information

Do you have a Goal related to addressing this need? Yes No

Change Over Past 12 Months (Optional)

Office of Mental Health Agency Planning Survey
Wyoming County Dept. of Mental Health (70420)
Certified: Kelly Dryja (5/31/17)

Consult the LSP Guidelines for additional guidance on completing this exercise.

1. For Criminal Procedure Law 730 Chargeback Budgeting: Please indicate the department within your county that is responsible for budgeting CPL 730 restoration chargebacks.

- Mental hygiene/community services
- Sheriff/county law enforcement
- Other

If "other" please indicate how these charges are budgeted

Questions regarding the above survey item should be directed to Hank Hren at hank.hren@omh.ny.gov or 518-474-2962.

2. For Local Administration of the Assisted Outpatient Treatment Program:

a) Please describe the system used in your locality to ensure that petitions are filed for individuals requiring Assisted Outpatient Treatment. AOT petitions are facilitated by the Asst. Director of Adult Services for the Wyoming County Mental Health Department. Weekly meetings take place with care coordinators and the adult SPOA committee separately to assure that residents potentially needing AOT services are identified. The Asst. Director of Adult Services also has ongoing contact with the MIT from Rochester Psychiatric Center to additionally identify potential individuals who may need AOT services.

b) Please describe the system used in your locality to ensure that such individuals requiring Assisted Outpatient Treatment receive the services included in the AOT treatment plan.

The Asst. Director of Adult Services meets with the service providers of all AOT-mandated individuals on a weekly basis and discusses ongoing provision of services.

c) Please list the Care Management Programs your Single Point of Access (SPOA) uses to assign AOT referrals.
Spectrum Human Services

Questions regarding this survey item should be directed to Rebecca Briney at Rebecca.Briney@omh.ny.gov or 518-402-4233.

Thank you for participating in the 2018 Mental Hygiene Local Services Planning Process by completing this survey. Any technical questions regarding the online
County Planning System,
please contact the OASAS Planning Unit at 518-457-5989 or by email at oasasplanning@oasas.ny.gov

Community Service Board Roster
Wyoming County Dept. of Mental Health (70420)
Certified: Nancy Balbick (4/20/17)

Consult the LSP Guidelines for additional guidance on completing this exercise.

Note: There must be 15 board members (counties under 100,000 population may opt for a 9-member board). Indicate if member is a licensed physician or certified psychologist. Under item labeled "Represents", enter the name of the member's organization or enter "Consumer", "Family", "Public Representative", etc. to indicate the particular community interest being represented. Members shall serve four-year staggered terms.

Chairperson
Name Gordon Lew
Physician No
Psychologist No
Represents Community
Term Expires 12/31/2019
eMail GordonLew@frontier.com

Member
Name James Foley
Physician No
Psychologist No
Represents Family
Term Expires 12/31/2018
eMail

Member
Name James Conway
Physician No
Psychologist No
Represents Community
Term Expires 12/31/2019
eMail jcon2934@gmail.com

Member
Name Andrea Aldinger
Physician No
Psychologist No
Represents Office for the Aging
Term Expires 12/31/2018
eMail aaldinger@wyomingco.net

Member
Name Rebecca Ryan
Physician No
Psychologist No
Represents Board of Supervisors
Term Expires 12/31/2016
eMail Townofwarsaw2@frontier.com

Member
Name Kathy Blakeslee
Physician No
Psychologist No
Represents Family
Term Expires 12/31/2017
eMail kblakeslee@hotmail.com

Member
Name Gretchen Jackson
Physician No
Psychologist No
Represents Family
Term Expires 12/31/2018
eMail jacksonwnyadd@yahoo.com

Member
Name James Rutkowski
Physician No
Psychologist No
Represents Community
Term Expires 12/31/2019
eMail jrutkowski1@rochester.rr.com

Member
Name David Rumsey
Physician No
Psychologist No
Represents D.S.S.
Term Expires 12/31/2017
eMail 56A373@dfa.state.ny.us

Alcoholism and Substance Abuse Subcommittee Roster
Wyoming County Dept. of Mental Health (70420)
Certified: Nancy Balbick (4/20/17)

Consult the LSP Guidelines for additional guidance on completing this exercise.

Note: The subcommittee shall have no more than nine members. Three subcommittee members must be members of the board; those members should be identified here. Under item labeled "Represents", enter the name of the member's organization or enter "Consumer", "Family", "Public Representative", etc. to indicate the perspective the member brings to the subcommittee.

Chairperson

Name Joan Kibler
Represents Probation Dept.
eMail jkibler@wyomingco.net
Is CSB Member No

Member

Name Mary Conable
Represents Public Representative
eMail mconable@pls-net.org
Is CSB Member No

Member

Name David Rumsey
Represents D.S.S.
eMail 56A373@dfa.state.ny.us
Is CSB Member Yes

Member

Name Andrea Aldinger
Represents Office for the Aging
eMail aaldinger@wyomingco.net
Is CSB Member Yes

Member

Name Vincent Hemming
Represents D.A. Office
eMail vhemming@wyomingco.net
Is CSB Member No

Member

Name James Messe
Represents Public Representative
eMail jmesse@nycourts.gov
Is CSB Member No

Member

Name Ivan Carrasquillo
Represents Public Representative
eMail icarrasquillo@wyomingco.net
Is CSB Member No

Member

Name Rebecca Demuth
Represents Public Representative
eMail rdemuth@wyomingco.net
Is CSB Member No

Member

Name Justin Chernogorec
Represents Public Representative
eMail justin.l.chernogorec.mil@mail.mil
Is CSB Member No

Mental Health Subcommittee Roster
Wyoming County Dept. of Mental Health (70420)
Certified: Nancy Balbick (4/20/17)

Consult the LSP Guidelines for additional guidance on completing this exercise.

Note: The subcommittee shall have no more than eleven members. Three subcommittee members must be members of the board; those members should be identified here. Under item labeled "Represents", enter the name of the member's organization or enter "Consumer", "Family", "Public Representative", etc. to indicate the perspective the member brings to the subcommittee.

Chairperson

Name David Rumsey
Represents D.S.S.
eMail 56A373@dfa.state.ny.us
Is CSB Member Yes

Member

Name Lisa Gricius
Represents Community
eMail lisagricius@yahoo.com
Is CSB Member No

Member

Name Rick Perez
Represents Veteran's Services
eMail rperez@wyomingco.net
Is CSB Member No

Member

Name Gordon Lew
Represents Community
eMail gordonlew@frontier.com
Is CSB Member Yes

Member

Name James Conway
Represents Community
eMail jcon2934@gmail.com
Is CSB Member Yes

Member

Name Rebecca Ryan
Represents Board of Supervisors
eMail rryan@wyomingco.net
Is CSB Member Yes

Member

Name Angela Milillo
Represents Office for the Aging
eMail amilillo@wyomingco.net
Is CSB Member No

Member

Name Kathy Blakeslee
Represents Family
eMail kblakeslee@hotmail.com
Is CSB Member Yes

Member

Name Kathy Bell
Represents Peer
eMail n/a
Is CSB Member No

Developmental Disabilities Subcommittee Roster
Wyoming County Dept. of Mental Health (70420)
Certified: Nancy Balbick (4/20/17)

Consult the LSP Guidelines for additional guidance on completing this exercise.

Note: The subcommittee shall have no more than nine members. Three subcommittee members must be members of the board; those members should be identified here. Under item labeled "Represents", enter the name of the member's organization or enter "Consumer", "Family", "Public Representative", etc. to indicate the perspective the member brings to the subcommittee.

Chairperson

Name Gretchen Jackson
Represents Family
eMail gjackson@starbridgeinc.org
Is CSB Member Yes

Member

Name Michelle Beyer
Represents Family
eMail mbeyer@hillside.com
Is CSB Member No

Member

Name John Delude
Represents Community
eMail jdelude@darienlake.com
Is CSB Member No

Member

Name Karen Duboy
Represents Family
eMail
Is CSB Member No

Member

Name Karen Gustina
Represents Community
eMail kgustina@sasinc.org
Is CSB Member No

Member

Name Vanessa McCormick
Represents Board of Supervisors
eMail vmccormick@wyomingco.net
Is CSB Member No

Member

Name James Rutkowski
Represents Community
eMail jrutkowski1@rochester.rr.com
Is CSB Member Yes

Member

Name James Foley
Represents Family
eMail n/a
Is CSB Member Yes

Member

Name Martin Miskell
Represents Community
eMail mmiskell@lwarc.org
Is CSB Member No

2017 Mental Hygiene Local Planning Assurance
Wyoming County Dept. of Mental Health (70420)
Certified: Kelly Dryja (5/31/17)

Consult the LSP Guidelines for additional guidance on completing this exercise.

Pursuant to Article 41 of the Mental Hygiene Law, we assure and certify that:

Representatives of facilities of the offices of the department; directors of district developmental services offices; directors of hospital-based mental health services; directors of community mental health centers, voluntary agencies; persons and families who receive services and advocates; other providers of services have been formally invited to participate in, and provide information for, the local planning process relative to the development of the Local Services Plan;

The Community Services Board and the Subcommittees for Alcoholism and Substance Abuse, Mental Health, and Developmental Disabilities have provided advice to the Director of Community Services and have participated in the development of the Local Services Plan. The full Board and the Subcommittees have had an opportunity to review and comment on the contents of the plan and have received the completed document. Any disputes which may have arisen, as part of the local planning process regarding elements of the plan, have been or will be addressed in accordance with procedures outlined in Mental Hygiene Law Section 41.16(c);

The Community Services Board and the Subcommittees for Alcoholism and Substance Abuse, Mental Health, and Developmental Disabilities meet regularly during the year, and the Board has established bylaws for its operation, has defined the number of officers and members that will comprise a quorum, and has membership which is broadly representative of the age, sex, race, and other ethnic characteristics of the area served. The Board has established procedures to ensure that all meetings are conducted in accordance with the Open Meetings Law, which requires that meetings of public bodies be open to the general public, that advance public notice of meetings be given, and that minutes be taken of all meetings and be available to the public.

OASAS, OMH and OPWDD accept the certified 2018 Local Services Planning Assurance form in the Online County Planning System as the official LGU assurance that the above conditions have been met for the 2018 Local Services planning process.