2020
Local Services Plan
For Mental Hygiene Services

Herkimer County MH & Chem Services
September 5, 2019
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The Community Partnership Coalition of Herkimer County activities for 2019 thus far: created new brochures, created a newsletter, Youth to provide information to the community.

Collaboration among mental health agencies and the LGU continues to be positive and effective. The Herkimer County Mental Health Clinic and MVPC State Clinic continue to meet community needs but caseloads tend to be in the 70's or 80's. The LGU has monthly contact with the MVPC State clinic and the LGU supervises the county clinic. The community has reported the helpfulness of the 3 school based satellite clinics.

Please describe any unmet mental health service needs that have worsened:

Nothing was noted in this area.

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

Please describe any unmet SUD service needs that have improved:

There are increased opportunities for peer support through the opportunity of training Certified Peer Recovery Advocates (CPRA).

Please describe any unmet SUD service needs that have stayed the same:

Heroin and Opioid abuse has remained a significant issue in Herkimer County, as it has in most counties across NYS. Opioid and Heroin use has strained the existing resources in the county and those accessed outside the county. Heroin laced with fentanyl has proved to be highly dangerous, eliciting many negative consequences. Areas in the region have reported cannabis laced with fentanyl. The Department of Social Services continues to report that substance abuse has contributed to foster care placements.

Access to treatment continues to be an issue as there are wait times to access inpatient treatment and detox services. There is not an inpatient treatment facility or detox services in Herkimer County, and as a result services are utilized out of county in a system that is already overburdened.

Beacon Center continues to meet the community needs by providing outpatient substance abuse services in a timely manner. They have two full-time doctors that prescribe Suboxone and Vivatrol and they have one full-time NP and the are in the process of hiring another NP full-time. Beacon Center will begin providing assessment and group treatment at the Herkimer County Correctional Facility.

Transportation continues to be a barrier for those who live in the rural areas of the county. Those with Medicaid seem to be doing well with Medicaid transportation.

For the 2018/2019 School Year Catholic Charities of Herkimer County Prevention Service Coordinators (PSC) were in 5 school districts (Dolgeville, Frankfort-Schuyler, Herkimer, Poland, and Town of Webb) and Herkimer College. The PSC provides evidenced based education, Student Assistance Counseling, Teen Intervene (evidence-based brief intervention), groups, positive alternatives, trainings/outreach to parents and communities, information and referral services, and distribution of resources. The PSC will continue to work with the Community Partnership Coalition of Herkimer County and the Mohawk Valley Prevention and Recovery Collaborative to meet school requests and continue to provide information to the community.

The Community Partnership Coalition of Herkimer County activities for 2019 thus far: created new brochures, created a newsletter, Youth
The renovation project total is estimated to be over 9.8 million dollars. The Neighborhood Center has also applied.

The Neighborhood Center has begun the process to become a Certified OASAS Provider, and will be filing an OASAS Certification and OASAS Part 820 Residential Redesign Application for stabilization and rehabilitation with NYS OASAS in 2018. Along with that application, the Neighborhood Center will be filing a Schedule C OASAS Capital Project Funding Request (paper copy only) for renovation cost assistance. The renovation project total is estimated to be over 9.8 million dollars. The Neighborhood Center has also applied for 1.75 million dollars in economic infrastructure development funds from the NYS Regional Economic Development Corporation to assist with these costs. As of May of 2019 the process has been held up because the Town of Herkimer has denied the permit and The Neighborhood Center is pursuing this through the courts.

Please describe any unmet SUD service needs that have worsened:

Nothing noted.

c) Indicate how the level of unmet needs of the developmentally disabled population, overall, has changed in the past year:  
   - Improved
   - Worsened

Stayed the Same  Worsened

Please describe any unmet developmentally disability service needs that have improved:

Residential Respite capacity has improved with the increase of 6 TUBS beds at ARC Herkimer's Burwell Residence.

Please describe any unmet developmentally disability service needs that have stayed the same:

Workforce Recruitment and Retention has been identified as a priority area of concern. The rising minimum wage has affected the number of individuals entering the field, as many individuals are opting to take jobs in the community with similar wages but less responsibility. Turnover rates have also increased because of this, and staffing shortages have begun to impact activities and residence shift coverage. These issues highlight the need to pay direct support professionals a fair wage commensurate with their duties and responsibilities. Maintaining and increasing the skill level and professional status of direct support professionals has been identified as an area of critical importance and may provide a solution to these staffing issues.-No change for 2020.

The number of individuals enrolled in self-directed services has slightly increased but remains lower than originally anticipated. ISS rates have slowly increased since 2015, as there 13 individuals in 2015, 15 in 2016, 19 in 2017 and again 19 in 2018. The subcommittee discussed the need to provide more community awareness about the available services. Upstate Cerebral Palsy agreed to coordinate an information sharing event in Herkimer County.

The transformation agenda and the transition from sheltered work to integrated community opportunities has made progress. There is great competition for community based opportunities, as many residents in the area are underemployed and/or are competing for jobs that earn minimum wage.-No change 2020.

There is a lack of public and other transportation options for adults and families in the community.

The need for crisis prevention and response, such as the NYSTART services continues into 2020.

With the creation of Care Coordination Organizations (CCO), there has been a shift in the way that people can begin the enrollment process, creating confusion for individuals who are interested in going through the eligibility process. Over the next year, individuals and families will enroll through CCOs rather than through the local agency. Arc Herkimer will need to increase marketing and outreach initiatives to schools, county service agencies, healthcare professionals and Care Coordination organizations to make them aware of who we are as a provider and to work to receive referrals for services. Unless a family is specifically requesting or asking for services from a local provider they could be funneled to other providers.

Collaboration among developmental disabilities agencies and the LGU continues to be positive and effective.

Please describe any unmet developmentally disability service needs that have worsened:

Providers continue to report low enrollment for self-directed services. Providers continue to report difficulty recruiting and retaining staff.

The second section of the form includes; goals based on local need; goals based on state initiatives and goals based in other areas. The form allows counties to identify forward looking, change-oriented goals that respond to and are based on local needs and are consistent with the goals of the state mental hygiene agencies. County needs and goals also inform the statewide comprehensive planning efforts of the three state agencies and help to shape policy, programming, and funding decisions. For county needs assessments, goals and objectives to be most effective, they need to be clear, focused and achievable. The following instructions promote a convention for developing and writing effective goal statements and actionable objectives based on needs, state or regional initiatives or other relevant areas.

2. Goals Based On Local Needs
Applicable State
Agencies

<table>
<thead>
<tr>
<th>Issue Category</th>
<th>OASAS</th>
<th>OMH</th>
<th>OPWDD</th>
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<tr>
<td>b) Transportation</td>
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<td>c) Crisis Services</td>
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<td>e) Employment/ Job Opportunities (clients)</td>
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<td>ac) Adverse Childhood Experiences (ACEs) (NEW)</td>
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(After a need issue category is selected, related follow-up questions will display below the table)

2a. Housing - Background Information

Supported housing for mental health consumers is a significant need in Herkimer County. The OMH Supported Housing program operated by Upstate Cerebral Palsy (UCP) currently has 31 people on the waiting list. There has been 100% utilization of this program and the program receives an average of three referrals a month from a variety of sources (i.e. care management, clinics, hospitals). Length of time on the waitlist averages about two years. The community residence has two crisis beds that are available at the Aney Community Residence are almost always full. Both community residences are typically full and there is one person who has been on the wait list for about one week.

Upstate Cerebral Palsy completed the ESHHI application requesting to add 5 additional permanent supported housing slots to individuals with a serious emotional disturbance (SMI) who are currently homeless, including those who are street homeless, chronically homeless, and/or residing in a shelter. Waiting lists continue at all the local municipal housing authorities. If approved, UCP will be able to provide the following services to an additional 5 people in the county: case management, monthly rental stipend, assistance with obtaining furniture, active communication with landlord, and assistance completing Section 8 application. Services may include linkage with comprehensive community support system of case management, mental health, rehabilitation, social, employment, and health supports.

Compounding this issue is the lack of safe, decent, affordable housing options in the community for low income families and adults. Since the individuals who are referred to supported housing are homeless or at risk of homelessness, they often need immediate assistance. They often need to use the natural supports in their community (family, friends) and are sometimes forced to reside in substandard housing or even relocate out of the area where there are available shelters.

The LGU serves as a board member on the Mohawk Valley Housing Coalition. There were 5 counties (Herkimer, Fulton, Montgomery, Putnam, and Schoharie) that joined the Balance of State Continuum of Care. The Mohawk Valley Housing Coalition received a grant of $212,000 for rapid rehousing. A part-time care manager will work to link people with safe, affordable housing and wraparound services.

ARC added six residential respite TUBS beds at the Burwell Residence.
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

Develop new and affordable housing options for individuals with a mental health, substance abuse disorder, and/or developmental disability diagnosis.

Objective Statement

Objective 1: The LGU will advocate for additional OMH Certified Housing slots in Herkimer County and will work with UCP to develop strategies to address current housing needs.

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

Objective 2: The LGU will continue to serve on the Valley Housing Coalition Board.

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

Change Over Past 12 Months (Optional)

A request has been made to OMH for additional certified housing beds.

2b. Transportation - Background Information

Transportation is one of the main issues that individuals and families struggle with in Herkimer County. Most communities in Herkimer County are rural and lack public transportation options. Commercial bus service is available during limited timeframes between Little Falls and Utica (in Oneida County) along the Routes 5 and 5S Valley Corridor, providing a limited number of stops in the communities of Little Falls, Herkimer, Ilion, Mohawk and Frankfort. While this service is valuable it does not meet the needs of the majority of Herkimer County residents. Due to schedule limitations there are long lapses between route stops and the service is unavailable on nights and weekends.

Providers and consumers report improvement with Medicaid transportation services. There continues to be concern of the transportation not including transportation to pharmacy but this is a regional issue that is being addressed.

The Office of the Aging provides some transportation services to senior citizens.

Catholic Charities of Herkimer County recently received a transportation grant (First Community Choice Option) that can be utilized by any population for various transportation needs.

Families need to attend mandatory sessions with the Front Door which is run by a state agency. Transportation to attend these meetings in Oneida County vs. Herkimer County will remain a large barrier for many families who do not live along the limited bus routes in place in the Mohawk Valley.

All three Mental Hygiene Services subcommittees identified transportation as a need for the populations they serve.

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

Improve access to behavioral health, SUD, and developmental disability services in Herkimer County.

Improve access to pharmacy services for individuals with Medicaid transportation.

Objective Statement

Objective 1: The LGU will utilize the DD, MH and SUD subcommittees as a forum to discuss transportation needs and identify strategies/solutions.

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

Objective 2: MH Clinic service providers will provide bus passes to service recipients that reside near the bus route and will continue dialogue with Medicaid transportation providers to ensure timely clinic appointment attendance.

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

Objective 3: Whenever possible, the LGU will work with agencies and key stakeholders to develop and implement home, school and local community based service delivery options to address consumer needs.

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

Change Over Past 12 Months (Optional)

Utilizing bus passes for clinic patients has proven to be effective, but less individuals are utilizing this service due to the limited bus schedules.

Providers had positive feedback about the quality and reliability of Medicaid transportation services.
Satellite MH clinics continue to operate in 3 regions of the county.

Catholic Charities of Herkimer County (community non-profit agency and OASAS Prevention service provider) received funds to support a Companionship Program which will provide transportation to/from medical appointments, pharmacies, and entitlement appointments for county residents in need.

2c. Crisis Services - Background Information

According to OASAS data, in 2017, 152 Herkimer County Residents were admitted for inpatient substance abuse treatment. There were 80 crisis admissions, 99 residential treatment admissions, 33 Opioid Treatment Program (OTP) admissions, and 439 outpatient treatment admissions. The following were percentages due to specific drug use admissions to all program types (crisis, inpatient, residential, outpatient, and OTP): heroin-41%, other opioids-10.8%, alcohol-24.8%, crack/cocaine-6.7%, marijuana-13.3%, and other substance-2.9%.

A 50 bed inpatient residential treatment facility is in the process of being developed in Herkimer County. It is proposed that a 5 bed medically monitored withdrawal and stabilization component would be part of that facility. Single rooms will be utilized for stabilization and will be located separate from the rehabilitation treatment allowing for round the clock observation/care.

The Neighborhood Center is working with the Center for Family Life and Recovery and the Rescue Mission (located in neighboring Oneida County) in continuing to develop a 24/7 Open Access Center which will help direct people to addiction treatment services by delivering immediate engagement, assessment, and referral services for people suffering from a substance use disorder. This new initiative also expands mobile crisis assessment and peer support services.

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

Advocate for and support the development of Detox services and inpatient substance abuse in Herkimer County.

Objective Statement

Objective 1: The LGU will work with the Neighborhood Center and NYS OASAS to help facilitate the Neighborhood Center move forward with the proposal to open an inpatient treatment facility that will include the provision of detox services in Herkimer County

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

Objective 2: The LGU will monitor and provide assistance as needed, and will keep the SUD Subcommittee updated on progress.

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

Change Over Past 12 Months (Optional)

The Neighborhood Center continues to communicate with OASAS in regard to the residential facility. Things have been at a standstill because the Town of Herkimer denied the permit and there are ongoing court proceedings.

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

Agencies continue to report difficulty recruiting and retaining direct care staff.

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

Increase the skill level and professional status of direct support professionals.

Increase the number of authorized staff positions that are filled.

Objective Statement

Objective 1: DD agencies will continue to advocate and develop proactive plans for Direct Support Professionals and Self-advocates to participate in advocacy efforts for provider rates more supportive service needs and adequate staff pay to have the Direct Support Professional as a recognized job code/position in federal job listings.

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

Objective 2: Arc Herkimer will implement its 2018 – 2020 Strategic Plan to increase the number of filled authorized staff positions. The agency will do this by providing a combination of financial incentives, enhancing advocacy efforts, and implementing retention strategies.

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

Objective 3: The LGU will monitor progress and will provide support as needed.

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

Change Over Past 12 Months (Optional)

A DSP advisory group has been formed by Arc Herkimer and has been involved statewide to raise awareness regarding issues such as high turnover, recruitment, training and salary compensation. The “Be Fair to Direct Care” campaign resulted in budgetary moves at the state level that will benefit workers in 2018 and additionally in 2019. This initiative will continue the Direct Support Professional position as recognized as a professional job classification by the federal and state governments.
A Direct Support Professional Career (DSP) Ladder has been implemented by Arc Herkimer. The Ladder includes various educational and competency-based skill milestones that are associated with increase in wages for DSPs. Milestones include the College of Direct Support on-line program, DSP credentialing, and Associate’s and Bachelor’s degrees. No change 2020.

UCP is also involved in advocacy efforts for Direct Service Professionals in MH and DD care settings.

Arc Herkimer and UCP have implemented various financial incentives to entice staff to work on certain shifts and/or in select high needs residences. No change 2020.

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

ARC continues to provide consumer employment services through Career Connections.

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

Provide meaningful employment opportunities in a community and/or integrated work setting.

Objective Statement

Objective 1: Arc Herkimer, in coordination with Herkimer College, will continue to grow its Supportive Training and Education, a Plan for Success (STEPS) program which assists individuals 18 – 34 years old enhance their knowledge of possible work opportunities and develop their “soft” employment skills through classroom education and community experiences of work suited to their abilities and interests.

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

Objective 2: Career Connections will enhance the ongoing supports for employed individuals to increase the likelihood of sustained employment, and will advocate for the additional availability of community employment positions.

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

Objective 3: Arc Herkimer will implement its approved plan to transition individuals currently working in a sheltered setting into an integrated business environment located in the Herkimer Business Park. Job positions at this site will also be utilized by MH individuals enrolled in Career Connections services.

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

Objective 4: Upstate Cerebral Palsy will offer additional employment choices and opportunities to individuals in Herkimer County eligible for SEMP, ACCESS and other employment services. Upstate Cerebral Palsy will contact public sector employers in Herkimer County for the purpose of establishing competitive employment opportunities.

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

Objective 5: The LGU will utilize the DD and MH subcommittees as a forum to discuss employment needs and identify strategies/solutions.

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

Change Over Past 12 Months (Optional)

Arc Herkimer has been working to prepare young adults for employment through Project Search. Project Search is an international, trademarked and copyrighted intern program model that focuses solely on employment for young adults 18 – 34 years old. This program is run in collaboration with Herkimer College. Project Search has an intensive focus on achieving competitive employment and maximum independence for each individual. Each intern participates in daily classroom instruction and gains hands on work experience by rotating among three unique unpaid internships. Interns learn skills that are marketable in their search for community employment. As of 2019, 14 young adults have graduated from the program (this is an increase of 4 individuals from last year).

Career Connections of Arc Herkimer has been working with individuals with developmental disabilities through “Pathways to Employment & Community Prevocational Services.” The STEPS (Supportive Training & Education, a Plan for Success) program creates community integrated supports through a community based, integrated learning environment that assists individuals in moving forward in career choice, vocational exploration, and life skill acquisition. This is a person-centered, whole person approach to support the person with a disability in the life they choose. In addition, Career Connections continues to develop supports and services assisting individuals with mental health challenges to obtain and keep employment through the Assisted Competitive Employment Program.

Upstate Cerebral Palsy has provided employment choices and opportunities to developmentally disabled individuals in Herkimer County that are eligible for SEMP, ACCESS and other employment services.

ARC Herkimer was approved to provide OMH Adult Behavioral Health Home and Community Based Services. Career Connections will provide the following services to Adults 21 and over: Education Support, Prevocational Services, Intensive Supported Employment, Ongoing Supported Employment, and Family Support and Training. ARC was also approved to provide OMH Children’s HCBS services which would include: Caregiver Family Support and Services, Community Self Advocacy Training and Support, Community Habilitation, Day Habilitation, Planned Respite, Prevocational Services, and Supported Employment.

2f. Prevention - Background Information

The Mohawk Valley Regional Prevention and Recovery Collaborative (MVPRC), also a program of Catholic Charities of Herkimer County, was started in 2017 to create a partnership among regional coalitions, strengthen and expand county-specific activities, and assist with developing a regional resource guide and database. The MVPRC includes existing coalitions and OASAS prevention providers from Fulton, Herkimer, Montgomery, Oneida, Otsego and Schoharie counties. This initiative is ongoing. In 2019 they provided 3 Narcan trainings in the community.
They have provided several school and community presentations on Vaping. They have done outreach to area hospitals and providers. MVPRC has plans to start a local Al-Anon group.

For the 2018/2019 School Year Catholic Charities of Herkimer County Prevention Service Coordinators (PSC) were in 5 school districts (Dolgeville, Frankfort-Schuyler, Herkimer, Poland, and Town of Webb) and Herkimer College. The PSC provides evidenced based education, Student Assistance Counseling, Teen Intervene (evidence-based brief intervention), groups, positive alternatives, trainings/outreach to parents and communities, information and referral services, and distribution of resources. The PSC will continue to work with the Community Partnership Coalition of Herkimer County and the Mohawk Valley Prevention and Recovery Collaborative to meet school requests and continue to provide information to the community.

The Herkimer County Suicide Coalition continues to meet quarterly and the LGU belongs to the coalition. Goals for 2020 include: 1) Create and develop a standard survey to collect local data. Distribute survey to seniors through various county establishments (doctor, pharmacy, grocery stores, veterinarians, etc). 2) Increase professional and community awareness of suicide prevention efforts and local resources. Establish key informant interviews, senior focus groups and conduct events such as lunch and learns, and increase education and outreach. 3) Create and implement a community crisis response (postvention) team. Identify members and develop a chain of command within the team and community.

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

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

Expand evidence-based prevention education in Herkimer County school districts by including adding a PSC at Herkimer County BOCES for students involved in the VP-TECH and CTE Programs. A request for additional funding was submitted to OASAS.

Provide education and training services for Herkimer County first responders, law enforcement, agency personnel, and community members on current substance abuse trends.

Apply for System of Care Grant with the effort of enhancing early identification and prevention of emotional and behavioral issues in schools.

Objective Statement
Objective 1: The Herkimer County Prevention Council will expand Prevention Education Services to one additional school district in Herkimer County.

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

Objective 2: The Herkimer County Prevention Council, as a Certified Education and Training Provider through OASAS, will collaborate with the Community Partnership Coalition of Herkimer County and other community agencies to provide the most current information through sponsored trainings on the prevention of substance abuse. The HCPC will provide two trainings on current trends in substance abuse in 2018 and 2019

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

Objective 3: Catholic Charities of Herkimer County will facilitate the Mohawk Valley Prevention and Recovery Collaborative and will work with key leaders from six county coalitions to streamline the resources, activities, and events offered in each county. The Collaborative will strengthen and expand activities currently being provided by coalitions and will assist in developing a comprehensive and easy to use database of resources.

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

Objective 4: The Herkimer County LGU will work with Catholic Charities of Herkimer County, the HCPC and the Community Partnership to develop and expand prevention activities in Herkimer County.

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

Objective 5: LGU will coordinate with Herkimer County planning in regard to the System of Care Grant.

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

Change Over Past 12 Months (Optional)

There has been an increase in prevention events in the community and in schools. Peer support services continue to be a priority for development. Herkimer County has applied for a System of Care Grant through SAMHSA. The proposal included providing assessment tools and support to school to identify and provide early intervention services for children with emotional and/or behavioral needs. The grant would included enhancing services that are offered by county contract providers.

2g. Inpatient Treatment Services - Background Information

A 50 bed inpatient residential treatment facility has been proposed by the Neighborhood Center, a non-profit community agency, and it is currently in the development stage in Herkimer County. It is proposed that a 5 bed medically monitored withdrawal and stabilization (detox) component would be part of this facility. The facility will utilize evidenced based holistic clinical and behavioral health recovery/discovery treatment for individuals addicted to chemically altering substances and alcohol with or without a mental health diagnosis. Single rooms will be utilized for stabilization and will be located separate from the rehabilitation treatment allowing for round the clock observation/care. On-going supportive help and follow-up when individuals return to their home community will be a component of the program, and linkages and follow-up with local community treatment providers will occur up to one year following discharge. No change 2020.

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

Advocate for the development of SUD inpatient treatment services in Herkimer County

Objective Statement

Objective 1: The LGU will work with the Neighborhood Center and NYS OASAS to move forward with the Neighborhood Center's proposal to open a treatment facility in Herkimer County

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

Objective 2: The Neighborhood Center will file all OASAS Certification applications required and will pursue grants and sources of funding to assist with capital costs.

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

Objective 3: The Substance Use Disorders subcommittee and the CSB will receive regular updates on facility development. The groups will have an opportunity to provide input on SUD treatment needs and will facilitate collaboration among providers and key stakeholders.

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

Change Over Past 12 Months (Optional)

The Neighborhood Center has had ongoing dialogue with NYS OASAS and the LGU regarding the development of the 50 bed residential treatment facility. The Neighborhood Center has purchased a building in Herkimer County and they are currently working to secure the funding required for capital improvements. The Neighborhood Center has begun the process to become a Certified OASAS Provider, and will be filing an OASAS Certification and OASAS Part 820 Residential Redesign Application for stabilization and rehabilitation with NYS OASAS in 2018. Along with that application, the Neighborhood Center will be filing a Schedule C OASAS Capital Project Funding Request (paper copy only) for renovation cost assistance. Plans are currently delayed because the Town of Herkimer denied their permit and there are ongoing court proceedings.

2h. Recovery and Support Services - Background Information

There are limited peer support services in Herkimer County and the need has been identified for OASAS certified Recovery Coaches. Catholic Charities of Herkimer County was awarded $250,000 for a 2 year period for a Recovery Community and Oureach Center (RCOC).

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

The number of peer support specialists will be increased and there will be a community Recovery Center that will facilitate recovery groups and activities.

Objective Statement

Change Over Past 12 Months (Optional)

Increased funding and opportunity for recovery services.

2i. Reducing Stigma - Background Information

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

Change Over Past 12 Months (Optional)

2j. SUD Outpatient Services - Background Information

In 2018, 279 Herkimer County residents received outpatient OASAS treatment services at The Beacon Center. On average about 130 youth and adults are open to services at The Beacon Center. The Beacon Center prescribes Vivitrol and Suboxone as a component of Heroin and Opioid treatment. The Beacon Center has increased their prescribing staff and they have plans to add an additional NP. They will soon have providers that are certified to provide medical marijuana to treat opioid use disorders.

NYS recently authorized $60,000 to support SUD services in the Herkimer County Correctional Facility. The Herkimer County Mental Health Clinic Director (LGU) and the Sheriff have met and plan to contract with The Beacon Center to provide assessments and groups counseling at the jail. They will also help link with outpatient services upon release from jsl.

The Herkimer County Department of Mental Health continues to provide alcohol/substance abuse screening services to social service beneficiaries identified as having alcohol/substance abuse disorders. These individuals are mandated to participate in screening or treatment services as a condition of program eligibility.

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

Expand the availability and capacity of SUD treatment services in Herkimer County.

Objective Statement
Objective 1: The Herkimer County Mental Health Clinic Director (LGU) and the Sheriff will develop a plan for the use of funds to support SUD treatment services for incarcerated individuals.

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

Objective 2: The Beacon Center will work with organizations such as the Department of Social Services to address increasing local needs.

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

Objective 3: The LGU and Herkimer County Mental Health Clinic staff will meet with Beacon Center staff on a monthly basis to streamline referral processes and better meet the assessment and treatment needs of individuals with co-occurring disorders.

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

Change Over Past 12 Months (Optional)

Communication, coordination and collaboration with the mental health clinic has improved with the initiation of monthly meetings. Communication with the county jail to begin group counseling with inmates.

2k. SUD Residential Treatment Services - Background Information

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

Change Over Past 12 Months (Optional)

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

The Beacon Center has increased their capacity of prescribers and they will begin providing medical marijuana to treat opioid disorders.

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

Develop a community response to enhance prevention and treatment efforts for individuals abusing Opioids and Heroin.

Improve data collection efforts to better assess the scale of the Opioid and Heroin epidemic.

Herkimer County is in the initial discussions of starting an OD Taskforce.

Objective Statement

Objective 1: The LGU will advocate for and support the addition of local SUD treatment options.

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

Objective 2: The HCPC and the Community Partnership will offer training to first responders, law enforcement, agencies and the community on Heroin and Opioid use and the use of Narcan.

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

Objective 3: The Mohawk Valley Regional Prevention and Recovery Collaborative will develop a mechanism to collect and analyze the number of Narcan doses administered by first responders, law enforcement and community members.

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

Objective 4: The LGU will participate on the Herkimer County Community Partnership Coalition with other SUD providers and key stakeholders to support the collaborative efforts to reduce heroin and opioid use.

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

Change Over Past 12 Months (Optional)

The Community Partnership Coalition of Herkimer County (CPCHC) continues to address opioid and heroin use. Community trainings have been held for first responders, law enforcement, agency personnel, and community members on NARCAN use.

2m. Coordination/Integration with Other Systems for SUD clients - Background Information

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):

Change Over Past 12 Months (Optional)

2n. Mental Health Clinic - Background Information

The Herkimer County Department of Mental Health operates an outpatient mental health clinic for adults and youth with serious mental illnesses and emotional disorders. The department employs five full-time Licensed Social Workers and two full-time Community Health Nurses. Part-time clinical staff includes two Licensed Social Workers, one Registered Nurse, a CASAC, two part-time physicians, and a part-time psychiatric nurse practitioner. 
In 2018, department staff provided 8,544 visits to 1049 individuals (233 children and 816 adults). These numbers are consistent with those seen in 2017. There was on average of 519 people open to clinic services each month, which is slightly less than 2017.

Demand for services is high and there has been an increase in the immediate needs of the individuals served. Clinicians have average caseloads of 70-80 clients, which is a slight reduction from last year.

Correctional facility inmates are screened by Herkimer County Department of Mental Health clinic staff to identify those who may be at-risk of doing harm to themselves or others or are requiring treatment of an existing mental illness. An increasing number of inmates are also identified as having alcohol and substance abuse problems in addition to mental health problems. In 2018, 694 visits were provided to 311 correctional facility inmates. The number of visits has decreased which is attributed to a reduced capacity at the jail. The jail has been boarding more individuals out because they are in the process of building a new jail. Once the new jail is built there will be an increased number of inmates in need of screening and possible follow-up services. Out of the 694 visits made, 123 were visits for inmates that were on constant watch.

Department staff continue to provide alcohol/substance abuse screening services to social service beneficiaries identified as having alcohol/substance abuse disorders. These individuals are mandated to participate in screening or treatment services as a condition of program eligibility.

An increasing number of individuals accessing clinic services in Herkimer County have been identified as having co-occurring mental health and substance use issues. Communication, coordination and collaboration between the Mental Health Clinic and Beacon Center has been identified as a significant need.

The Neighborhood Center (agency provider) has established satellite mental health clinics in the Town of Webb, the Mount Markham School District, and the Central Valley School District to address the needs of youth and families in the northern and southernmost regions of the county, and in the most populated school district respectively. Two of these clinics have already added hours of availability to meet the demand for services.

**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

**Expand the availability of Mental Health Clinic services**

Develop a process to move towards Value Based Payment as the LGU continues to participate with Mohawk Valley BHCC and DSRIP.

**Objective Statement**

Objective 1: The DCS will participate in regional initiatives related to the provision of Clinic services (DSRIP Performance Hub, BHCC and RPC).

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

Objective 2: The Herkimer County Mental Health Clinic will continue to participate in the PSYCKES QI project to assist with the move towards Value Based Payment.

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

Objective 3: The LGU will monitor clinic service needs and will work with community providers to develop services in identified schools and communities.

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

**Change Over Past 12 Months (Optional)**

Herkimer County Mental Health staff and Beacon Center staff now meet monthly to discuss mutual cases and to further enhance treatment planning. This change has resulted in improved care coordination and treatment compliance.

The Neighborhood Center satellite clinic at the CVA school continues to increase hours to meet with demand.

The DCS continues to participate in regional initiatives related to the provision of Clinic services (DSRIP Performance Hub, BHCC and RPC).

2°. Other Mental Health Outpatient Services (non-clinic) - Background Information

Project AIM (Achieve-Inspire-Motivate) continues to operate at CVA school district. AIM believes family, school and community engagement is crucial to success; that youth may have experienced trauma, have inadequate coping or planning skills, have poor communication skills, been victims of child abuse/neglect or experienced other stressors including poverty, substance abuse, mental illness, criminal activity, and parental incarceration. Project AIM takes an approach that integrates the Search Institute Perseverance Process with a model that unites youth, natural supports and the community. Over the last year enrollment has increased. The students participate in groups and they go on community outings to help enhance social skills.

The LGU and other county health and human service departments participate in Herkimer County’s Integrated County Planning initiative to identify, prioritize and address county needs across service systems while maximizing resources. One area of need identified by county leaders has been at-risk youth (and their families) who are involved in the juvenile justice system. These youth and families have a multitude of needs that require intensive intervention, including serious emotional and behavioral challenges and substance use disorders. Parent support and skills training, as well as trauma informed approaches to care, have been identified as priority areas of need for this population. The Herkimer County Department of Mental Health contributes funding to the blended services offered by the Family Support PINS Diversion Program to fund family support and counseling services for PINS and JD youth and their families. The LGU and the Center for Family Life and
Recovery have worked with the Herkimer County Department of Social Services and Probation Department to implement best practice trauma-informed treatment and support programs, AF-CBT and AFP respectively, to address the needs of youth and families enrolled in the Program. A Certified Family Peer Advocate is also available to work with families to provide individualized in-home supports, Family Peer Advocacy services, and Common Sense Parenting training.

Mentoring services are continued through UCP for SED youth who are referred through the county's Individualized Support Services (ISS program). In 2018, a Family Peer Advocate was hired to provide support services to the families of the children enrolled in the program and also to provide supports to other families in Herkimer County. The Family Peer Advocate has begun outreach to local schools and there are plans to start a parent support group.

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

Increase the availability of home and school based prevention services that address the needs of SED and at-risk youth and their families.

Objective Statement

Objective 1: The Neighborhood Center will continue to operate the AIM Program in the Central Valley School District and will serve up to 40 youth in the program.

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

Objective 2: CFLR, through it's work in the Family Support PINS Diversion Program, will fully implement the AF-CBT and AFP programs and will continue to provide Family Peer Advocacy Services for SED and at-risk youth and their families.

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

Objective 3: The LGU will continue to monitor contracts with providers and monitor services provided.

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

Objective 4: UCP will provide Family Peer Advocacy services to families whose children are enrolled in the ISS Mentoring Program.

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

Change Over Past 12 Months (Optional)

2p. Mental Health Care Coordination - Background Information

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):

Change Over Past 12 Months (Optional)

2r. Developmental Disability Children Services - Background Information

There is an ongoing need for social and recreational opportunities for children that are in integrated community settings.

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

Expand and enhance social, recreational and educational programming for Herkimer County Children and Youth

Objective Statement

Objective 1: ARC Herkimer will apply for Stewart's Holiday Match grant to support the purchase of recreational supplies for youth in Herkimer County.

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

Objective 2: Arc Herkimer will continue to operate the accessible outdoor recreational park in the Village of Herkimer, and will work with Village of Herkimer. Village of Herkimer received funding to complete pool and bath house renovations in 2019.

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

Objective 3: ARC Herkimer will maintain opportunities and supports for pre-school and school-age youth. The children's respite/recreation program continues to provide day activities for school age children during summer months and school breaks.

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

Change Over Past 12 Months (Optional)
Arc Herkimer continues to operate the Arc Park. ARC Herkimer received funding to install bathrooms and a second pavilion. Previous Stewarts Holiday Match grants have enabled Arc Herkimer to purchase Leap Pad computer-assisted learning technology to help a therapeutic play group of 3 – 5 year olds improve vocabulary and academic skills through recreation activities, and allowed for the purchase of recreation supplies for play and structured activities that promote physical, mental, emotional, social, and creative development. -No change 2020.

2s. Developmental Disability Student/Transition Services - Background Information

Do you have a Goal related to addressing this need?  ☐ Yes  ☐ No
Change Over Past 12 Months (Optional)

2t. Developmental Disability Respite Services - Background Information

Upstate Cerebral Palsy continues to expand recreational and social based inclusion opportunities for individuals in Herkimer 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
Develop and enhance adult recreational programs and supports for individuals with developmental disabilities and those on the Autism Spectrum.

Objective Statement

Objective 1: DD agencies will provide social and recreational opportunities for Herkimer County recipients of services.

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

Objective 2: LGU will continue to participate and receive updates on implementation.

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

Change Over Past 12 Months (Optional)

2u. Developmental Disability Family Supports - Background Information

The Eastern Region of Central New York DDSO Family Support Advisory Council includes four counties (Herkimer, Oneida, Madison and Lewis). The Council meets nine or ten times a year to meet with Agencies and review programs and consumer surveys. The Council acts as advocates for the developmentally disabled population and advisory to the central region director, discussing the unmet needs and evaluating those programs that are in place. Family members contact new members, and any person or family member who is eligible for family support services will be invited to attend meetings. Service coordinators and family members are encouraged to present any concerns and unmet needs they are aware of so that advocacy for future funding of programs can be discussed. -No change 2020.

Family representation on the Family Support Advisory Council has decreased in recent years, and enhanced efforts will be made to work with local providers to identify potential members. -No change 2020.

The Herkimer County LGU will continue to identify and address the unmet needs of the DD population and continue working with providers and representatives of the Family Support Advisory Council to ensure program effectiveness.

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
Continue DDSO Family Support Advisory Council representation on the DD Subcommittee

Objective Statement

Objective 1: The Developmental Disabilities Subcommittee will include a member of the DDSO Family Support Advisory Council. The representative will inform the LGU and subcommittee of the needs, concerns, and issues that affect individuals with developmental disabilities and their families

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

Objective 2: Arc Herkimer will work with the Herkimer FSS representative to help identify families that may wish to attend/participate in Council meetings

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

Change Over Past 12 Months (Optional)

The LGU has had a long standing positive relationship with DDSO Family Support Advisory Council representatives.

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

The number of individuals in Herkimer County enrolled in self-directed services has fluctuated (currently 33) but remains relatively low. It has
been reported that some families have experienced challenges recruiting and retaining staff to provide services.

Upstate Cerebral Palsy continues to provide Self Directed Services that offer an opportunity for individuals with disabilities to make choices about the services they receive and who provides the service, including choices regarding independent community living. UCP plans to develop non-certified apartment living opportunities for individuals identified through referral and public forums that will be funded through Self Direction Services.

RCIL provides the majority of self-directed services currently being offered to residents.

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

Encourage the provision of informational outreach and education forums in Herkimer County regarding the availability of Self Directed Services

Objective Statement
Objective 1: UCP’s Self Directed Services program will provide informational outreach and education forums in Herkimer County to Herkimer County Service Provider Agencies, MSCs, Family Support Advisory Board members, and/or to the public through presentations in the community.

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

Objective 2: The LGU and Developmental Disabilities Subcommittee will discuss the needs, concerns, and issues that affect individuals enrolled in Self Directed Services and will explore strategies for improvement

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

Change Over Past 12 Months (Optional)
UCP is planning a networking event in Herkimer County to help promote in enrollment in self direction services.

2x. Developmental Disability Front Door - Background Information
Arc Herkimer has worked to expand and enhance services and supports to underserved areas in the county, including northern Herkimer 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

Enhance services and supports in the Old Forge area (northern Herkimer County).

Objective Statement
Objective 1: Arc Herkimer, through the Outreach Development Connections program, will provide an outreach coordinator to work with schools, families, agencies and community members in the Old Forge area to link individuals with developmental disabilities to OPWDD screening and services.

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

Objective 2: The LGU will utilize the DD Subcommittee as a forum to discuss outreach and engagement needs and to help identify strategies/solutions.

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

Change Over Past 12 Months (Optional)
There has been progress made with enrollment and access to services but some needs remain unaddressed. Developmental Disabilities stakeholders report ongoing concerns that systemic changes have impacted the availability of services and the ease of access for families in need of services. The eligibility and enrollment process has been identified as lengthy.

2y. Developmental Disability Care Coordination - Background Information

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

Change Over Past 12 Months (Optional)
The following survey is intended to promote alignment with the NYS Prevention Agenda for 2019-2024 as part of local services plan development.

All inquiries regarding this survey should be directed to oasasplanning@oasas.ny.gov.

**Background**

The New York State Prevention Agenda for 2019-2024 aims to make New York State the Healthiest State in the Nation for People of All Ages. The Prevention Agenda's overarching strategy is to implement public health approaches that improve the health and well-being of entire populations and eliminate health inequities. This strategy includes an emphasis on social determinants of health - the social, cultural and environmental factors that influence health status, and are root causes of poor health and adverse outcomes. An agenda that focuses on social determinants necessitates cross-cutting policy development and support for local implementation.

As part of the Prevention Agenda, counties are required to submit Community Health Assessment and Community Health Improvement Plans to the Department of Health. LGUs responsible for mental hygiene services have often been active partners in the development and implementation of these plans that align with the statewide prevention agenda. The 2019-2024 Prevention Agenda includes goals and interventions specific to behavioral health, and overall health and well-being. Within the Prevention Agenda, available here, please review the Healthy Women, Infants, and Children Action Plan (pgs. 97-153) and the Promote Well-Being and Prevent Mental and Substance Use Disorders Action Plan (pgs. 154-171).

To reach the statewide prevention goals, future local service planning should include implementation of identified or other evidence-based interventions. Localities will need to create or identify metrics and data collection methods to determine impact. In some cases, data or metrics may not exist. Therefore, data collection will need to occur at the county/provider levels. These activities will require the support of all stakeholders.

**Questions**

1. Has your LGU developed a plan that aligns with the Statewide Prevention Agenda?
   - [ ] No
   - [x] Yes, please explain:
     Transportation, Housing, and Suicide Prevention are all in the plan and relate to the state agenda.

2. Each of the eight goals in the "Promote Well-Being" focus area and "Prevent Mental and Substance Use Disorders" focus area, have an associated intervention. Please select which of the following interventions you have begun or will begin implementing:

**Focus Area 1: Promote Well-Being**

<table>
<thead>
<tr>
<th>Goal 1.1: Strengthen opportunities to build well-being and resilience across the lifespan</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1 a) Build community wealth</td>
</tr>
<tr>
<td>1.1 b) Support housing improvement, affordability and stability through approaches such as housing improvement, community land trusts and using a &quot;whole person&quot; approach in medical care</td>
</tr>
<tr>
<td>1.1 c) Create and sustain inclusive, healthy public spaces</td>
</tr>
<tr>
<td>1.1 d) Integrate social and emotional approaches across the lifespan and establish support programs that establish caring and trusting relationships with older people. Examples include the Village Model, Intergenerational Community, Integrating social emotional learning in schools, Community Schools, parenting education.</td>
</tr>
<tr>
<td>1.1 e) Enable resilience for people living with chronic illness by increasing protective factors such as independence, social support, positive explanatory styles, self-care, self-esteem, and reduced anxiety.</td>
</tr>
<tr>
<td>1.1 f) Implement evidence-based home visiting programs</td>
</tr>
<tr>
<td>1.1 g) Other</td>
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</tbody>
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<thead>
<tr>
<th>Goal 1.2: Facilitate supportive environments that promote respect and dignity for people of all ages</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.2 a) Implement Mental Health First Aid</td>
</tr>
<tr>
<td>1.2 b) Implement policy and program interventions that promote inclusion, integration and competence</td>
</tr>
<tr>
<td>1.2 c) Use thoughtful messaging on mental illness and substance use</td>
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<tr>
<td>1.2 d) Other</td>
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**Focus Area 2: Mental and Substance Use Disorders Prevention**

<table>
<thead>
<tr>
<th>Goal 2.1: Prevent underage drinking and excessive alcohol consumption by adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 a) Implement environmental approaches, including reducing alcohol access, implementing responsible beverage services, reducing risk of drinking and driving, and underage alcohol access</td>
</tr>
<tr>
<td>2.1 b) Implement/Expand School-Based Prevention and School-Based Prevention Services</td>
</tr>
<tr>
<td>2.1 c) Implement Screening, Brief Intervention, and Referral to Treatment (SBIRT) using electronic screening and brief interventions (e-SBI) with electronic devices (e.g., computers, telephones, or mobile devices) to facilitate delivery of key elements of traditional SBI</td>
</tr>
<tr>
<td>2.1 d) Integrate trauma-informed approaches into prevention programs by training staff, developing protocols and engaging in cross-system collaboration</td>
</tr>
<tr>
<td>Goal 2.2 Prevent opioid overdose deaths</td>
</tr>
<tr>
<td>---------------------------------------</td>
</tr>
<tr>
<td>2.2 a) Increase availability of access and linkages to medication-assisted treatment (MAT) including Buprenorphine</td>
</tr>
<tr>
<td>2.2 b) Increase availability of access to overdose reversal (Naloxone) trainings to prescribers, pharmacists and consumers.</td>
</tr>
<tr>
<td>2.2 c) Promote and encourage prescriber education and familiarity with opioid prescribing guidelines and limits as imposed by NYS statutes and regulations.</td>
</tr>
<tr>
<td>2.2 d) Build support systems to care for opioid users or those at risk of an overdose</td>
</tr>
<tr>
<td>2.2 e) Establish additional permanent safe disposal sites for prescription drugs and organized take-back days</td>
</tr>
<tr>
<td>2.2 f) Integrate trauma informed approaches in training staff and implementing program and policy</td>
</tr>
<tr>
<td>2.2 g) Other</td>
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<table>
<thead>
<tr>
<th>Goal 2.3 Prevent and address adverse childhood experiences (ACEs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.3 a) Address Adverse Childhood Experiences and other types of trauma in the primary care setting</td>
</tr>
<tr>
<td>2.3 b) Grow resilient communities through education, engagement, activation/mobilization and celebration</td>
</tr>
<tr>
<td>2.3 c) Implement evidence-based home visiting programs</td>
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<tr>
<td>2.3 d) Other</td>
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<table>
<thead>
<tr>
<th>Goal 2.4 Reduce the prevalence of major depressive disorders</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.4 a) Strengthen resources for families and caregivers</td>
</tr>
<tr>
<td>2.4 b) Implement an evidence-based cognitive behavioral approach such as Peter Lewinsohn's Coping with Depression course, Gregory Clarke's Cognitive-Behavioral Prevention Intervention</td>
</tr>
<tr>
<td>2.4 c) Implement the Combined Parent-Child Cognitive-Behavioral Therapy (CPC_CBT)</td>
</tr>
<tr>
<td>2.4 d) Other</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal 2.5 Prevent suicides</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.5 a) Strengthen economic supports: strengthen household financial security, and policies that stabilize housing</td>
</tr>
<tr>
<td>2.5 b) Strengthen access and delivery of suicide care â€“ Zero Suicide (a commitment to comprehensive suicide safer care in health and behavioral health care systems)</td>
</tr>
<tr>
<td>2.5 c) Create protective environments: reduce access to lethal means among persons at risk of suicide; integrate trauma informed approaches; reduce excessive alcohol use</td>
</tr>
<tr>
<td>2.5 e) Promote connectedness, coping and problem-solving skills: social emotional learning, parenting and family relationship programs, peer norm program</td>
</tr>
<tr>
<td>2.5 f) Other</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal 2.6 Reduce the mortality gap between those living with serious mental illnesses and the general population</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.6 a) Implement a multilevel intervention model that focuses at the individual, health systems, community and policy-levels. This model describes a comprehensive framework that may be useful for designing, implementing and evaluating interventions and programs to reduce excess mortality in persons with SMD.</td>
</tr>
<tr>
<td>2.6 b) Implement integrated treatment including concurrent therapy for mental illness and nicotine addiction</td>
</tr>
<tr>
<td>2.6 c) Support and strengthen licensing requirement to include improved screening and treatment of tobacco dependence by mental health providers</td>
</tr>
<tr>
<td>2.6 d) Other</td>
</tr>
</tbody>
</table>

Please describe your efforts implementing the interventions selected above (if any). Also, if you selected an "other" category from any set of interventions above, please describe it here:

1. LGU is a part of the Herkimer County Housing Coalition. 2. Through the Herkimer County Suicide Coalition we are working on messaging and outreach materials to help reduce stigma. 3. Expansion of hours in school based clinics. 4. Working with local outpatient substance abuse provider to link people to MAT and to increase screenings and linkage treatment upon release from the jail. 5. Working to expand family support services and peer support services. 6. Working toward improving clinic screening for tobacco use.

3. Have you engaged any local or regional partners in implementing actions related to the New York State Prevention Agenda (e.g., Local Health Department, hospital or hospital system, substance use disorder prevention coalition)?
   - Yes, please explain:
     Working with Mohawk Valley RPC in regard to transportation to pharmacy for Medicaid. Working with the Balance of State in regard to housing projects.

4. As data and metrics related to the Prevention Agenda's behavioral health interventions may not exist, has your LGU considered how to track progress of implementation?
   - Yes, please explain:
     Through the use of the counties Results Based Accountability program which many contract providers already report into.
5. Has your LGU identified statewide policies that assist or impede implementation of Prevention Agenda interventions?  
  - No
  - Yes, please explain:

6. Is your LGU planning for Prevention Agenda alignment by Article 31 and 32 clinics via implementation of evidence-based practices? If so, please describe, and include relevant details on any LGU support of data protocols that would assist clinics in determining outcomes.  
  - No
  - Yes, please explain:

7. Are the Prevention Agenda’s cross-cutting goals and priorities (e.g., environmental concerns, chronic illness reduction) addressed in your health department's Community Health Assessment and Community Health Improvement Plan? If so, how will your LGU support these cross-cutting goals and priorities?  
  - No
  - Yes, please explain:

LGU participates in various county planning meetings-Healthnet, Human Resource, Youth Violence, Suicide Coalition, and Best Start.

8. DSRIP funding has advanced many projects related to the overall improvement of behavioral health and well-being. Of these projects supported by DSRIP, are there local prevention opportunities that your LGU could build upon and sustain?  
  - No
  - Yes, please explain:

Catholic Charities has received DSRIP funding for transportation.

9. Aside from Prevention Agenda activities, please identify any of the following social determinants of mental health that you are addressing in your community:  

- Un/Underemployment and Job Insecurity  
- Food Insecurity  
- Adverse Features of the Built Environment  
- Housing Instability or Poor Housing Quality  
- Discrimination/Social Exclusion  
- Poor Education  
- Poverty/Income Inequality  
- Adverse Early Life Experiences  
- Poor Access to Transportation  
- Other

Please describe your efforts in addressing the selections above:  

LGU belongs to a local planning group that is focusing on a county goal of youth and young adults 16-24 and are not in school and not working. The groups is looking at ways to engage these youth and get them trained and in local employment.

10. In your county, do you or your partners offer training related to strengthening resilience, trauma-informed or trauma-sensitive approaches?  
   a) No  
   b) Yes

Title of training(s):  
- Paper Tigers and further ACES trainings.
- Other clinic related trainings dealing with specific disorders.
- Culturally sensitive training. Training in working with substance abuse disorders and current drug trends.

How many hours: 36
Target audience for training: 50
Estimate number trained in one year: 150

11. New to the 2019-2024 cycle of the Prevention Agenda is the incorporation of a Health-Across-all-Policies approach, initiated by New York State in 2017, which calls on all State agencies to identify and strengthen the ways that their policies and programs can have a positive impact on health. As part of this effort, New York State was designated as the first Age-Friendly State in the nation by the American Association of Retired Persons (AARP).

Does your LGU have policies and procedures in place to support the positive environmental, economic, and social factors that influence the health and well-being of all residents, especially older adults?  
  - No
  - Yes, please provide examples:

We are in contact with Office of the Aging which has some initiatives starting.
The purpose of this survey is to promote continued and improved access to quality mental health services in Medicaid Reform (DSRIP/Value Based Payment). All questions regarding this survey should be directed to Melissa Staats, MA MSW, at 518-408-8533, or Melissa.Staats@omh.ny.gov

Background
On April 14, 2014, New York received a waiver from the federal government that allowed the state to reinvest $8 billion in federal savings generated by Medicaid Redesign Team (MRT) reforms and support the redesign of the health care delivery system. Of this, $6.42 billion is used to support Delivery System Reform Incentive Payments (DSRIP). The DSRIP program promotes community-level collaborations and focus on system reform, specifically a goal to achieve a 25 percent reduction in avoidable hospital use over five years. DSRIP projects focus on system transformation, clinical improvement and population health improvement. All DSRIP funds are based on performance linked to achievement of project milestones.

DSRIP serves as a bridge to value-based payment in New York State.

DOH website

DSRIP Performing Provider Systems (PPS)
Organizations responsible for implementing DSRIP goals via Project Plans are called Performing Provider Systems. Many counties report the value PPS brings to communities as they provide resources that support efforts currently not funded by Medicaid.

DSRIP Project Lists
New York State Delivery System Reform Incentive Payment Program Project Toolkit
DSRIP Performing Provider Systems (PPS Statewide)

Value Based Payment (VBP) - Reduce Costs/Improve Quality
The New York State Medicaid managed care system is transforming from one that pays for service volume to one that rewards value, as defined by the intersection of cost and quality. This transformation is detailed in the NYS VBP Roadmap for Medicaid Payment Reform.

New York State VBP Roadmap
Further details regarding VBP readiness and implementation can be found at: DSRIP - Value Based Payment Reform (VBP) and VBP for Providers

NYS Behavioral Health (BH) Value Based Payment (VBP) Readiness Program
The BH VBP Readiness Program provides funding over 3 years to selected BH provider networks that have formed a Behavioral Health Care Collaborative (BHCC), beginning in 2017. There are 19 BHCCs across the state receiving this funding.

A BHCC is a network of providers delivering the entire spectrum of behavioral health services available in a natural service area. The BHCC includes, but is not limited to, all licensed/certified/designated OMH/OASAS/Adult BH HCBS programs and service types. The Readiness Program is designed to achieve two overarching goals:

1. Prepare behavioral health providers to engage in VBP arrangements by facilitating shared infrastructure and administrative capacity, collective quality management, and increased cost-effectiveness; and
2. Encourage VBP payors, including but not limited to MCOs, hospitals, and primary care practices, to work with BH providers who demonstrate their value as part of an integrated care system.

Value Based Payment Readiness for Behavioral Health Providers
New York State Behavioral Health Value Based Payment Readiness Program Overview
New York State's goal is to have the vast majority of total managed care payments tied to VBP arrangements by 2020. DSRIP funding to support BHCCs and PPS projects ends March 31, 2020.

Questions

1. Have the PPS supported your LGU and community? For example, support for efforts such as: addressing gaps in services, promoting evidence based and best practices, and facilitating clinical integration.
   a) Yes ☐ No ☐
   b) Please provide more information:
   We have worked together with the Behavioral Health Performance Hub created by Bassett.

2. Has your LGU planned for PPS project sustainability beyond March 31, 2020?
   a) Yes ☐ No ☐
   b) Please explain:
   LGU participates in the Mohawk Valley BHCC.

3. Are there any behavioral health providers in your county in VBP arrangements?
   a) Yes ☐ No ☐
   b) Please explain (if "yes" include steps providers have taken to execute contracts):
   Herkimer County Mental Health Clinic participates in Mohawk Valley BHCC.

4. Is the LGU aware of the ways in which managed care organizations and mental health providers plan to leverage VBP resources to implement evidence and best practices like, but not limited to, Collaborative Care Model (CCM), Dual Diagnosis Integration, or Self-Help and Peer Support Services?
   a) Yes ☐ No ☐
   b) Please explain:

5. Is the LGU aware of the development of In-Lieu of proposals?
6. Can your LGU support the BHCC planning process?
   a)  Yes  No
   b) Please explain:
       Participation in Mohawk Valley BHCC.

7. Does your county have access to data and IT systems that will support further transformation to VBP and outcomes management?
   a)  Yes  No
   b) Please explain:
       We have some access through our EHR but it is limited. The BHCC is in the process of discussing and planning for more enhanced data bases. We utilize Psyckes data.
### Community Service Board Roster
Herkimer County MH & Chem Services (70070)
Certified: Kristen Snyder-Branner (4/23/19)

**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.

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Represents</th>
<th>Term Expires</th>
<th>Email Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gina Giacovelli</td>
<td>Physician</td>
<td>Youth Bureau</td>
<td>12/2019</td>
<td><a href="mailto:ginagiacovelli@herkimercounty.org">ginagiacovelli@herkimercounty.org</a></td>
</tr>
<tr>
<td></td>
<td>Psychologist</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Christina Cain</td>
<td>Physician</td>
<td>Public Health Department</td>
<td>04/2021</td>
<td><a href="mailto:ccain@herkimercounty.org">ccain@herkimercounty.org</a></td>
</tr>
<tr>
<td></td>
<td>Psychologist</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Elizabeth Pritchard</td>
<td>Physician</td>
<td>Residential &amp; Home Health Services</td>
<td>12/2019</td>
<td><a href="mailto:elizabeth.pritchard@upstatecph.org">elizabeth.pritchard@upstatecph.org</a></td>
</tr>
<tr>
<td></td>
<td>Psychologist</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tim Seymour</td>
<td>Physician</td>
<td>Department of Social Services</td>
<td>04/2021</td>
<td><a href="mailto:tseymour@herkimercounty.org">tseymour@herkimercounty.org</a></td>
</tr>
<tr>
<td></td>
<td>Psychologist</td>
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</tr>
<tr>
<td>Bonnie Muffett</td>
<td>Physician</td>
<td>Family Peer Advocate</td>
<td>01/2021</td>
<td><a href="mailto:bmuffett@rpcn.org">bmuffett@rpcn.org</a></td>
</tr>
<tr>
<td></td>
<td>Psychologist</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maureen Petrie</td>
<td>Physician</td>
<td>Non-Profit Agency</td>
<td>06/2021</td>
<td><a href="mailto:mpetrie@ccherkimer.org">mpetrie@ccherkimer.org</a></td>
</tr>
<tr>
<td></td>
<td>Psychologist</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Suzannah Wallace-Eaton</td>
<td>Physician</td>
<td>Children's Waiver Services</td>
<td>12/2019</td>
<td><a href="mailto:Suzannah.Wallace-Eaton@parsonscenter.org">Suzannah.Wallace-Eaton@parsonscenter.org</a></td>
</tr>
<tr>
<td></td>
<td>Psychologist</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chris Farber</td>
<td>Physician</td>
<td>Sheriff's Department</td>
<td>12/2019</td>
<td><a href="mailto:cfarber@herkimercounty.org">cfarber@herkimercounty.org</a></td>
</tr>
<tr>
<td></td>
<td>Psychologist</td>
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<td></td>
</tr>
<tr>
<td>Leslie Lynch</td>
<td>Physician</td>
<td>Family Peer Advocate</td>
<td>04/2022</td>
<td>Lesley Lynch</td>
</tr>
<tr>
<td></td>
<td>Psychologist</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Indicate the number of mental health CSB members who are or were consumers of mental health services: 0

Indicate the number of mental health CSB members who are parents or relatives of persons with mental illness: 2
## Alcoholism and Substance Abuse Subcommittee Roster

Herkimer County MH & Chem Services (70070)  
Certified: Kristen Snyder-Branner (5/6/19)

### Note:

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.

<table>
<thead>
<tr>
<th>Name</th>
<th>CSB Member</th>
<th>Represents</th>
<th>Email Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tim Seymour</td>
<td>Yes</td>
<td>Department of Social Services</td>
<td><a href="mailto:tseymour@herkimercounty.org">tseymour@herkimercounty.org</a></td>
</tr>
<tr>
<td>Christopher Farber</td>
<td>Yes</td>
<td>Herkimer County Sheriff</td>
<td><a href="mailto:cfarber@herkimercounty.org">cfarber@herkimercounty.org</a></td>
</tr>
<tr>
<td>Christina Cain</td>
<td>Yes</td>
<td>Public Health</td>
<td><a href="mailto:ccain@herkimercounty.org">ccain@herkimercounty.org</a></td>
</tr>
<tr>
<td>Maureen Petrie</td>
<td>Yes</td>
<td>Catholic Charities</td>
<td><a href="mailto:mpetrie@ccherkimer.org">mpetrie@ccherkimer.org</a></td>
</tr>
<tr>
<td>Helen Burdick</td>
<td>Yes</td>
<td>Beacon Center</td>
<td><a href="mailto:hburdick@beaconcenter.net">hburdick@beaconcenter.net</a></td>
</tr>
<tr>
<td>Sandy Soroka</td>
<td>Yes</td>
<td>Neighborhood Center</td>
<td><a href="mailto:sandys@neighborhoodctr.org">sandys@neighborhoodctr.org</a></td>
</tr>
<tr>
<td>Melissa Snyder</td>
<td>Yes</td>
<td>Herkimer County Prevention Council</td>
<td><a href="mailto:msnyder@ccherkimer.org">msnyder@ccherkimer.org</a></td>
</tr>
<tr>
<td>Gina Giacovelli</td>
<td>Yes</td>
<td>Youth Bureau</td>
<td><a href="mailto:ginagiacovelli@herkimercounty.org">ginagiacovelli@herkimercounty.org</a></td>
</tr>
<tr>
<td>Bonnie Muffett</td>
<td>Yes</td>
<td>Family Member</td>
<td></td>
</tr>
</tbody>
</table>
### Mental Health Subcommittee Roster

Herkimer County MH & Chem Services (70070)
Certified: Kristen Snyder-Branner (4/23/19)

<table>
<thead>
<tr>
<th>Name</th>
<th>CSB Member</th>
<th>Represents</th>
<th>Email Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sandy Sherwood</td>
<td>Yes</td>
<td>BOCES</td>
<td><a href="mailto:ssherwood@herkimer-boces.org">ssherwood@herkimer-boces.org</a></td>
</tr>
<tr>
<td>Tim Seymour</td>
<td>Yes</td>
<td>Department of Social Services</td>
<td><a href="mailto:tseymour@herkimercounty.org">tseymour@herkimercounty.org</a></td>
</tr>
<tr>
<td>Steve Bulger</td>
<td>Yes</td>
<td>Kids Oneida</td>
<td><a href="mailto:sbulger@kidsoneida.org">sbulger@kidsoneida.org</a></td>
</tr>
<tr>
<td>Robin Mattox</td>
<td>Yes</td>
<td>Arc Herkimer Career Connections</td>
<td><a href="mailto:rmattox@herkimerarc.org">rmattox@herkimerarc.org</a></td>
</tr>
<tr>
<td>Lisa Hoffmann</td>
<td>Yes</td>
<td>Central Valley School District</td>
<td><a href="mailto:lhoffman@cvalleycsd.org">lhoffman@cvalleycsd.org</a></td>
</tr>
<tr>
<td>Cassandra Sheets</td>
<td>Yes</td>
<td>Center for Family Life and Recovery</td>
<td><a href="mailto:csheets@cflrinc.org">csheets@cflrinc.org</a></td>
</tr>
<tr>
<td>Sandy Soroka</td>
<td>Yes</td>
<td>Neighborhood Center</td>
<td><a href="mailto:sandys@neighborhoodctr.org">sandys@neighborhoodctr.org</a></td>
</tr>
<tr>
<td>Tara Costello</td>
<td>Yes</td>
<td>Upstate Cerebral Palsy</td>
<td><a href="mailto:tara.costello@upstatecp.org">tara.costello@upstatecp.org</a></td>
</tr>
<tr>
<td>Suzannah Wallace-Eaton</td>
<td>Yes</td>
<td>Parsons Children and Family Services</td>
<td><a href="mailto:Suzannah.Wallace-Eaton@parsonscenter.org">Suzannah.Wallace-Eaton@parsonscenter.org</a></td>
</tr>
<tr>
<td>Bonnie Muffett</td>
<td>Yes</td>
<td>Family Member</td>
<td><a href="mailto:bmuffett@rpcn.org">bmuffett@rpcn.org</a></td>
</tr>
<tr>
<td>Elizabeth Pritchard</td>
<td>Yes</td>
<td>Upstate Cerebral Palsy</td>
<td><a href="mailto:elizabeth.pritchard@upstatecp.org">elizabeth.pritchard@upstatecp.org</a></td>
</tr>
</tbody>
</table>

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.

New York State Mental Hygiene Law requires that "each subcommittee for mental health shall include at least two members who are or were consumers of mental health services, and at least two members who are parents or relatives of persons with mental illness."

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.

Indicate the number of mental health subcommittee members who are or were consumers of mental health services: 0

Indicate the number of mental health subcommittee members who are parents or relatives of persons with mental illness: 1
**Developmental Disabilities Subcommittee Roster**  
Herkimer County MH & Chem Services (70070)  
Certified: Kristen Snyder-Branner (5/6/19)

<table>
<thead>
<tr>
<th>Name</th>
<th>CSB Member</th>
<th>Represents</th>
<th>Email Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gina Giacovelli</td>
<td>Yes/No</td>
<td>Youth Bureau</td>
<td><a href="mailto:ginagiacovelli@herkimercounty.org">ginagiacovelli@herkimercounty.org</a></td>
</tr>
<tr>
<td>Tim Seymour</td>
<td>Yes/No</td>
<td>Department of Social Services</td>
<td><a href="mailto:tseymour@herkimercounty.org">tseymour@herkimercounty.org</a></td>
</tr>
<tr>
<td>Laura Kiefer</td>
<td>Yes/No</td>
<td>Family Member</td>
<td><a href="mailto:lkne57@yahoo.com">lkne57@yahoo.com</a></td>
</tr>
<tr>
<td>Bonnie Muffett</td>
<td>Yes/No</td>
<td>Family Member</td>
<td><a href="mailto:bmuffett@rpcn.org">bmuffett@rpcn.org</a></td>
</tr>
<tr>
<td>Lorene Bass</td>
<td>Yes/No</td>
<td>Arc Herkimer</td>
<td><a href="mailto:lbass@archerkimer.org">lbass@archerkimer.org</a></td>
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<tr>
<td>Dana Guernsey</td>
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<td>Upstate Cerebral Palsy</td>
<td><a href="mailto:dana.guernsey@upstatecp.org">dana.guernsey@upstatecp.org</a></td>
</tr>
<tr>
<td>Julie Baum</td>
<td>Yes/No</td>
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<td><a href="mailto:julie.baum@upstatecp.org">julie.baum@upstatecp.org</a></td>
</tr>
<tr>
<td>Donna Gillette</td>
<td>Yes/No</td>
<td>RCIL</td>
<td><a href="mailto:freid@archerkimer.org">freid@archerkimer.org</a></td>
</tr>
<tr>
<td>Samantha Glenn</td>
<td>Yes/No</td>
<td>OPWDD</td>
<td></td>
</tr>
</tbody>
</table>
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 2020 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 2020 Local Services planning process.