2019
Local Services Plan
For Mental Hygiene Services

St. Lawrence County Community Srvs Bd
September 11, 2018
# Table of Contents

<table>
<thead>
<tr>
<th>Planning Form</th>
<th>LGU/Provider/PRU</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>St. Lawrence County Community Srvs Bd</strong></td>
<td>70700 (LGU)</td>
<td>Not Completed</td>
</tr>
<tr>
<td>Executive Summary</td>
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</tr>
<tr>
<td>Goals and Objectives Form</td>
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<td>Community Services Board Roster</td>
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<tr>
<td>Alcoholism and Substance Abuse Subcommittee Roster</td>
<td>Required</td>
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<tr>
<td>Mental Health Subcommittee Roster</td>
<td>Required</td>
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<tr>
<td>Developmental Disabilities Subcommittee Roster</td>
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<tr>
<td>Mental Hygiene Local Planning Assurance</td>
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| St. Lawrence County Community Srvs Bd | 70700/70700 (Provider) |               |
| St. Lawrence CD Services OP | 70700/70700/50188 (Treatment Program) |               |
| St. Lawrence CD Services OP 1 | 70700/70700/51417 (Treatment Program) |               |
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:

2019 Updates: Information and initiatives from 2018 Local Services Plan continue.

Overall there continues to be unmet mental health needs in St. Lawrence County as evidenced by continued high rates of emergency room visits and subsequent inpatient psychiatric hospital admissions. Data is somewhat dated, but remains relevant, indicates that the communities of Massena, Ogdensburg, and Gouverneur have the highest needs. Eleven St. Lawrence County Central School districts, who responded to a survey, indicated they would welcome additional mental health support from community providers.

There has been slight increases in the service provision for mental health services in St. Lawrence County. Both Canton Potdam Hospital and Claxton Hepburn Medical have received DSRIP funds in an effort to embed mental health clinicians in their primary care clinics; a combined total of sixteen primary care clinics. The St. Lawrence County Child and Family Support Team, an RIV program, began identifying and treating high risk families and youth in the latter part of February 2018. In an effort to reduce the number of emergency department referrals made by school districts, St. Lawerence County, in collaboration with Reachout, SLPC, and Seaway Valley Prevention created and distributed a Tool Kit for Schools which provided guidance to assist school staff with linking students to the appropriate services providers in response to various mental health presentations frequently encountered.

The St. Lawrence Suicide Coalition teamed up with Reachout in providing eight QPR training with a total of 117 participants. The Fort Drum Regional Health Planning Organization and Reachout provided four Mental Health First Aid trainings for 65 adult participants and FDRHPO trained 61 youth. Both QPR and MHFA trainings are ongoing.

2018 Information: Although there are several local providers who have expanded services or are currently creating plans for expansion there continues to be unmet needs. The most significant is the high rate of utilization of emergency department services by children and families in crisis. The County continues to experience workforce recruitment and retention issues; particularly in relation to psychiatrists and licensed professionals. The St. Lawrence County Suicide Prevention Coalition and county wide initiatives are currently underway to expand prevention efforts and develop strategies to meet the needs of youth and adults.

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:

2019 Updates: Information and initiatives from 2018 Local Services Plan continue.

The NYS OASAS Medicaid Recipient Profile Data for 2015 to 2017 indicates that the number individuals receiving all chemical dependency services in St. Lawrence County in 2017 was 1,187, down from the previous year by 138 individuals. For this same time period, the number of individuals receiving outpatient chemical dependency treatment also declined by 149 individuals. The reason for this may be because the County DA at that time was not prosecuting all of the drug and alcohol related criminal cases. Given the increased opioid abuse in St. Lawrence County and having fewer individuals served than in previous years is indicative that there remains unmet substance use disorder needs.

The most substantial increase in services to meet the substance use disorder need was the opening of a satellite clinic that provided MAT services by St. Joseph's behind the Massena Hospital. In addition Seaway Valley Prevention who works very closely with the Massena Drug Free Coalition opened up the Horizons Club House for youth in Massena. Both the Coalition and Seaway Valley hosted numerous events in the community to battle the drug epidemic. Lastly, since the Fall of 2017 St. Lawrence County Chemical Dependency Program registered with The Department of Health as an Opioid Overdose Prevention Training Program and has trained 245 participants in the use of Narcan kits.

2018 Information: Efforts continue to address the opiate/opioid epidemic in the County. Seaway Valley Prevention has taken a significant lead in coordinating the Massena Drug Free Community Coalition and Resource Center. The agency has combined efforts with St. Joseph's Addiction Treatment and Recovery Centers/Rose Hill to provide peer support, assessment and referral services at the Massena Hospital. The need for site based crisis services are significant as the only site based service in the County is the hospital based service provided by Canton Potsdam Hospital. It is hoped North Country Freedom Homes will pursue 820 Residential Redesign to provide stabilization opportunities for County residents.

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:

2019 Updates: The unmet needs of the developmentally disabled remained the same or slightly worsened. Claxton Hepburn Medical Center reports an increase in individuals with developmental disabilities frequenting the emergency department has increased over the past six months (approximately 15 individuals). Some adults were admitted to the mental health unit and remained there over a month as the residences from which they came refused to allow them to return. In some instances emergency respite care may have been able to be utilized. St. Lawrence County currently does not have crisis respite for the OPWDD population. Providers may be hesitant to develop respite beds due to reimbursement
rates that will not sustain this service

There are concerns the transition of MSC’s to CCO care managers may weaken service delivery. Residential staff appear to be migrating to care manager positions making recruitment for residences difficult. Individuals participating in supportive employment decreased from 131 in 2016 to 101 in 2017, a difference of 30 individuals. Transportation continues to remain problematic for developmentally disabled individuals. Lastly, St. Lawrence NYSARC and Jefferson Rehabilitation Center are in the unification process which will likely strengthen services over time.

2018 Information: It is hoped that the launch of OPWDD DDRO Region 2 NYSTART services will support I/DD individuals at the time of a crisis event. Emergency/Crisis Respite must be available to decrease the impact on local EDs.

2. Goals Based On Local Needs

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<thead>
<tr>
<th>Issue Category</th>
<th>Applicable State Agency</th>
<th>OASAS</th>
<th>OMH</th>
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2a. Housing - Background Information

The St. Lawrence County Community Services Board, the CSB Subcommittees, returned surveys and discussion with other providers concur that affordable housing remains a need in the St. Lawrence Community.

The North Country Health Compass indicator "Severe Housing Problem" indicator rates St. Lawrence County as the most severe in the Tug Hill Region at 16.2%, compared to Jefferson and Lewis Counties at 15.1% and 13.9 respectively. This indicator measures the percentage of households with at least one of the following four housing problems: overcrowding, high housing costs, lack of kitchen, or lack of plumbing facilities. More than 5% of occupied housing units in the County lack either complete plumbing, kitchens or phones. Households in the St. Lawrence County are more likely than statewide to use higher-cost heating fuels, including LP gas (7.4% vs 3.3%); electricity (11.7% vs 9.8%); fuel oil (30.9% vs 27.5%). Over 14% of households in the County use wood as a primary heat sources, compared to 2.0% statewide. The
deindustrialization within the County resulting in increased poverty may account for the housing problems.

Significant scientific evidence gained in the past decade has shown that various aspects of the home environment can have profound, direct measurable effects on both physical and mental health outcomes, particularly adding to the burden of physical illness (and mental illness) among low-income communities (Environ Health 2005; May 113 (5): A310-A317). Poor housing conditions are associated with a wide range of health conditions, including respiratory infections, asthma, lead poisoning, injuries, and mental health. Addressing housing issues offers us an opportunity to address an important social determinant of health (Am J Public Health. 2002 May; 92(5): 758-768).

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

Create opportunities for those in need of safe and affordable housing.

**Objective Statement**

Objective 1: The North County Housing Council, who operates the County-Wide Housing Rehabilitation Program will continue the execution of a NYS Community Development Block Grant until January 2020, aimed at providing financial support to home owners for necessary repairs and improvements.

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

Objective 2: St. Joseph's Addiction Treatment and Recovery Centers/Rose Hill was awarded funding for four permanent supportive housing beds for young women and mothers with substance use disorders in Massena through the Empire State Supportive Housing Initiative; implementation is in progress.

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

Objective 3: United Helpers submitted a grant to DOH Health Home Supportive Housing Project to provide supportive housing funds to serve 25 individuals the first year and could increase incrementally over five years to serve 50 and will implement if awarded.

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

Objective 4: Step by Step was awarded an ESSHI grant for 16 - 20 supportive housing units and is awaiting funding from a HHAP grant for capital renovations of the Lincoln School building in Ogdensburg to develop the project and will begin making capital improvement when received.

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

Objective 5: The DCS/LGU with collaborate with Housing Points North and the County Planning Department to explore grant funds for supportive and affordable housing.

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

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

2b. Transportation - Background Information

St. Lawrence County is a large and predominantly rural county making transportation difficult and costly for many when trying to access services. The St. Lawrence County Community Services Board, the CSB Subcommittees, returned surveys and discussions with other providers are in agreement that transportation remains an area of significant concern.

Data reveals that approximately 10% of this County's population do not own a vehicle and 38% have one vehicle. The use of the current medicaid transportation provider can be rigid in their expectations to individuals with disabilities. St. Lawrence NYSARC operates the public transportation for St. Lawrence County. They have a fleet of nearly 200 vehicles which travel nearly 2 million miles annually. The buses are fully accessible, and anyone can ride. The drawbacks of public transit are the $2 fare and the complexity of attempting to understand and navigate through the route system. Additionally, St. Lawrence County Public Transit and the Volunteer Transportation Center are partnering for First Mile Last Mile. The pilot program is aimed at getting County residents to the public transit bus stops and the later bring them home from the stop.

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

Ensure transportation is available to St. Lawrence County residents for access to services, employment, and recreational opportunities.

**Objective Statement**

Objective 1: The DCS/LGU in collaboration with St. Lawrence Public Transit will provide training opportunities to Health Homes, CMA's, CCO's, and the Peer Support workforce aimed at educating these providers of the times and routes of the public transit system so as to allow them to better educate individuals on their caseload of this system.

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

Objective 2: The DCS/LGU will collaborate with Volunteer Transportation and Peer agencies to explore and seek funding for peer-based transportation

Applicable State Agency: (check all that apply): OASAS  OMH  OPWDD
Objective 3: St. Lawrence County Public Transit and the Volunteer Transportation Center will fully launch the First Mile Last Mile program.
Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Objective 4: Determine whether DSRIP funds are available for a transportation initiative to aid in improving this social determinant of health.
Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Change Over Past 12 Months (Optional)

2c. Crisis Services - Background Information
St. Lawrence County continues to have high rates of emergency department utilization. Data from FDRHPO asserts the average behavioral health emergency department visits per 100,000 from 2011 to 2015 for the most major population centers were: Potsdam 984, Canton 1035, Gouverneur 1813, Ogdensburg 3008, and Massena with the highest at 3691. Claxton-Hepburn Medical Center is too often on diversion resulting in patients spending long hours, sometimes days, waiting for inpatient psychiatric care, in spite of having in-County adult and children units. The Medical Center also reports an increase in individuals with developmental disabilities frequenting the emergency department has increased over the past six months. Additionally, preliminary data as of August 2017 reports in 2016 there were 43 emergency department visits for opioid overdoses alone, based on ICD-10 codes resulting in 17 hospital admissions.

Currently, Reachout provides a mobile crisis response from 9:00 am to 11:00 pm and 24/7 telephonic response which does not meet the crisis intervention guidance of the Offices. St. Lawrence County does not have a crisis and recovery center. There is a need for more comprehensive crisis intervention services and emergency department diversion strategies and programming.

With regard to Raise the Age legislation:
Wasserman et al. (2010) studied 57 communities across the US, with a sample of 9,819 youths, and found that 2 - 4% of youth within the juvenile justice system reported a past-month suicide attempt, and as many as 18% reported a lifetime attempt, compared to 3 - 9% in the general population. Additionally, the youth with multiple justice involvement were 1.5 times more likely to meet criteria for mood, conduct, and substance use disorders. This places such youth more at risk for suicide, with repeat offenders being nearly three times more likely to report recent attempts. Additional interventions for this population appear warranted.

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
St. Lawrence County LGU/Community Services will develop strategies to reduce avoidable, high utilization of hospital emergency department services by children, families, and adults in a behavioral health crisis.

Objective Statement

Objective 1: Canton Potsdam Hospital and Claxton Hepburn Medical Center will fully operationalize the embedment of behavioral health services in their outpatient primary health centers using DSRIP funds.
Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Objective 2: St. Lawrence County Probation, St. Lawrence Community Services and SLPC are partnering with Columbia University Center for the Promotion of Mental Health and will develop and implement the e-Connect program to provide assessment and treatment linkage to at risk youth involved with Juvenile Justice System.
Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Objective 3: Reachout, in conjunction with the DCS, will develop a County-wide crisis plan that meets the Offices' guidance documents and implement per the suggested timeline.
Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Objective 4: The OPWDD Subcommittee and the CSB will monitor the rollout of NYSTART - Systemic, Therapeutic, Assessment, Resources and Treatment, a community-based crisis prevention and response service, and begin to identify providers in our hub.
Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Objective 5: The DCS/CSB and OPWDD agencies will seek to identify service providers for OPWDD crisis respite and for a peer-run crisis and recovery center and seek funding.
Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Change Over Past 12 Months (Optional)

2d. Workforce Recruitment and Retention (service system) - Background Information
Workforce recruitment and retention continues to be a significant concern as evidenced by County Planning System surveys, discussions with the CSB, Subcommittee members, and local providers. A real-time snapshot was performed at the time of this writing. Currently both Canton Potsdam Hospital and SLPC are in need of psychiatric providers. CPH, SLPC, Massena Hospital, Community Health Center of the North Country, Highland Nursing Home, St. Regis Nursing Home, St. Lawrence Public Health and Community Services are all recruiting for nursing staff, with one agency offering a sign-on bonus of $1000 to $5000. BOCES, SLPC, CHMC, St. Lawrence County Community Services, and Morristown Central School District are all recruiting for behavioral health clinical 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

Develop strategies to assist providers in recruitment and retention of professional staff.

**The Subco**

**Objective Statement**

**Objective 1:** Encourage providers to explore and implement the use of telemedicine when indicated.

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

**Objective 2:** Encourage providers to partner with the Tug Hill RPC and NCI (DSRIP) in exploring alternative recruitment strategies and more distant employee pools.

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

**Objective 3:** The Subcommittees will create and distribute a workforce survey allowing for the identification of recruitment strategies and reasons for lack of retention.

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

**Objective 4:** Encourage agencies to enroll in college loan repayment programs.

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

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

Individuals in St. Lawrence County with a developmental disability participating in supportive employment decreased from 131 in 2016 to 101 in 2017, a difference of 30 individuals. As sheltered workshops are decreasing, it is imperative that the OPWDD Community seek to identify local businesses that would be willing to partner in the participation of the Supportive Employment Program.

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

Individuals in St. Lawrence County with a developmental disability participating in supportive employment decreased from 131 in 2016 to 101 in 2017, a difference of 30 individuals. As sheltered workshops are decreasing, it is imperative the OPWDD Community seek to identify local businesses that would be willing to partner in the participation of the Supportive Employment Program.

**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 more opportunity for OPWDD community citizens to participate in the Supportive Employment program.

**Objective Statement**

**Objective 1:** The CSB and its Subcommittees along with OPWDD providers will identify five additional local businesses to participate in Supportive Employment.

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

**Objective 2:** Enhance cross-systems coordination to help link and enhance existing vocational supports in the County.

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

**Objective 3:** The CSB and its Subcommittees will consider issuing a RFP for a PROS Program.

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

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

**2j. SUD Outpatient Services - Background Information**

The discussion among the CSB and its Subcommittees, survey responses, discussions with providers, and local data make it difficult to assess if more clinic services are indicated. As reported in Section 1 Overall Needs, St. Joseph's opened a satellite clinic that provides MAT services behind the Massena Hospital. This clinic is currently at capacity but has the ability of expansion. Gouverneur Hospital is in application for a 822 satellite clinic which will house an intensive outpatient program. The St. Lawrence County SUD clinics are currently not quite to capacity but also have
room for some expansion at some locations. Canton Potsdams Hospital relocated the detox unit to its subsidiary, Gouverneur Hospital, that reportedly had more adequate bed space. Their 17 bed inpatient rehabilitation program will remain in Potsdam along with their main SUD clinic which is currently at capacity, but is also in transition due to staffing needs. Gouverneur Hospital is in application for a 822 satellite clinic and will also plan to house an intensive outpatient program. Given this added service, the addition of another SUD clinic is not a priority goal at the current time but may be a consideration in this 2019 plan year once the impact of having the addition of the Gouverneur outpatient clinic is more fully known.

Discussions with SUD service providers in this County revealed there are no recovery coaches associated with outpatient clinic services. Peer support services play an important role in the recovery-oriented process and the recipients of substance use services, including those incarcerated in the County jail, would greatly benefit by having peer supports in their plan of care. Currently the peer support providers have peer staff that are predominately trained and certified through OMH, rather than OASAS. The Recovery Coach and CRPA workforce should be strengthened.

Currently, individuals in jail with substance use disorders are provided screenings, initial evaluations, and referral. When indicated certain individuals receive a Vivitrol injection from medical staff prior to their release to the Community and are given an outpatient follow-up appointment.

Individual counseling and groups sessions are not being offered within the County Jail.

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

Strengthen County jail substance use services and integrate peer support services into existing treatment programs operating within St. Lawrence County as well as emergency department settings.

Seaway Valley Prevention will re-launch Recovery Coaches provision of services to local emergency departments.

Objective Statement

Objective 1: The DCS/ LGU will encourage peer support agencies to strengthen the Recovery Coach and CRPA workforce.

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

Objective 2: DCS/LGU will encourage the current substance use providers to integrate peer supports into recovery plans for individuals served.

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

Objective 3: Develop a more comprehensive treatment program for those individuals incarcerated in the County jail which includes individual, group, and peer support services and implement, pending the availability of funding.

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

Objective 4: Seaway Valley Prevention will re-launch Recovery Coaches provision of services to local emergency departments.

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

Objective 5: Gouverneur Hospital will fully operationalize an 822 substance use disorder satellite clinic with an intensive outpatient program component.

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

Change Over Past 12 Months (Optional)

2n. Mental Health Clinic - Background Information

Currently there exists varying opinions within the CSB and the respective Subcommittee as to whether a need exists for additional Article 31 Clinics and/or where such needs present within the County. Among the payer mix of clinic services, Medicaid and Medicaid managed Care combined most often, if not always hold the highest percent. Of the high population centers in St. Lawrence County, the ones with the highest rates of public coverage are Ogdensburg at 43.6%, Massena at 42.4%, and Gouverneur at 40.3%. These are followed by Canton at 26.7% and Potsdam at 24.9%. Currently, Odgenburg has three Article 31 clinics, Canton has two Article 31 clinics one being Fostering Futures, as well as the Community Health Center of the North Country. Massena has one Article 31 clinic, as does Gouverneur. Population centers with the highest rates of behavioral health emergency department visits per 100,00 based on data ending in 2015 are Massena with the highest at 3691, Ogdensburg with 3008, Gouverneur with 1813, Canton with 1035, and lastly Potsdam with 984. Additionally there are conflicting reports on wait times to receive clinic services.

United Helpers received DSRIP funds, a two year trial grant, to develop and implement a mobile, community-based treatment team to serve children and families. The team will consist of a mid-level provider, a nurse, and a licensed counselor. The goal is to provide timely, intensive services to at-risk youth that promotes quality recovery-oriented care, while avoiding emergency department visits and out of home placement. It has been named the Pillar Program.

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 timely access to residents in St. Lawrence County who are seeking mental health services (that include peer support services).

Objective Statement
Objective 1: Establish real-time clinic waiting lists based on standardized criteria/definitions so as to assess County gaps in clinic services.
  Applicable State Agency: (check all that apply): ☐ OASAS ☑ OMH ☐ OPWDD
Objective 2: Create a County-wide dashboard of clinic wait times.
  Applicable State Agency: (check all that apply): ☐ OASAS ☑ OMH ☐ OPWDD
Objective 3: Consider additional Article 31 clinics in Massena and/or Gouverneur.
  Applicable State Agency: (check all that apply): ☐ OASAS ☑ OMH ☐ OPWDD
Objective 4: Support United Helpers in the launch on their Pillar Program, a community-based treatment team for children and families.
  Applicable State Agency: (check all that apply): ☐ OASAS ☑ OMH ☐ OPWDD

Change Over Past 12 Months (Optional)

3. Goals Based On State Initiatives

<table>
<thead>
<tr>
<th>State Initiative</th>
<th>Applicable State Agency(ies)</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>OASAS</td>
</tr>
<tr>
<td>a) Medicaid Redesign</td>
<td>☐</td>
</tr>
<tr>
<td>b) Delivery System Reform Incentive Payment (DSRIP) Program</td>
<td>☑</td>
</tr>
<tr>
<td>c) Regional Planning Consortiums (RPCs)</td>
<td>☐</td>
</tr>
<tr>
<td>d) NYS Department of Health Prevention Agenda</td>
<td>☐</td>
</tr>
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</table>

3b. Delivery System Reform Incentive Payment (DSRIP) Program - Background Information
To comply with the guidance for the County-wide crisis plan, Reachout would benefit from having enhanced infrastructure such as updated electronic equipment that would allow them to implement an EHR with a billing component so as to have the benefit of reimbursement from Medicaid Managed Care for crisis services rendered.

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

Goal Statement - Is this Goal a priority goal? ☐ Yes ☐ No
Provide financial resources to Reachout that will allow full implementation of a County-wide crisis response plan.

Objective Statement
Objective 1: The DCS/LGU will partner with Reachout and Canton Potsdam Hospital to secure DSRIP funds aimed at augmenting Reachout crisis services.
  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)

Attachments
- 2016 Community Health Improvement Plan and Community Health Assessment.docx
1. To the extent known and available, please rate the level of difficulty faced by licensed mental health (Article 31) clinic treatment providers in your county for recruiting and retaining the following professional titles. Rank 1 as not difficult at all, and 5 as very difficult. This judgment should be made for clinic programs county-wide, when there is more than one clinic. If the title does not apply, or you are unable to make a determination, select "n/a". This should only apply for staff positions that are available to fill; not unfunded positions.

<table>
<thead>
<tr>
<th>Professional Title</th>
<th>Recruitment</th>
<th>Retention</th>
<th>Reason for Difficulty</th>
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<tbody>
<tr>
<td>Psychiatrist</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>Physician (non-psychiatrist)</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>Psychologist (PhD/PsyD)</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>Nurse Practitioner</td>
<td>3</td>
<td>2</td>
<td>salary competitiveness</td>
</tr>
<tr>
<td>RN/LPN (non-NP)</td>
<td>3</td>
<td>2</td>
<td>salary competitiveness</td>
</tr>
<tr>
<td>Physician Assistant</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>LMSW</td>
<td>n/a</td>
<td>n/a</td>
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</tr>
<tr>
<td>LCSW</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>Licensed Mental Health Practitioner</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
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<tr>
<td>(LMHC/LMFT/LCAT/Lpsy)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Peer specialist</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>Family peer advocate</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
</tr>
</tbody>
</table>

2. Please list any professions or titles not listed above, for which any mental health providers in your county face difficulty recruiting or retaining

n/a

When listed n/a above- it is because we currently are not hiring any of those positions (no open slot). but...we (as a area) have a very difficult time recruiting and retaining Psychiatrist's and Psychiatric Nurse Practitioners.

3. Please indicate how many, if any, programs in your county provided input specific to this questions set.

MH Program Director- Courtney Frank

Thank you for participating in the 2019 Mental Hygiene Local Services Planning Process by completing this survey. Questions regarding the content of this survey should be directed to Jeremy Darman jeremy.darman@omh.ny.gov. For any technical questions regarding the County Planning System, please contact the OASAS Planning Unit at oasasplanning@oasas.ny.gov.
### Chairperson

**Name**  
Mary Jones  
**Physician**  
No  
**Psychologist**  
No  
**Represents**  
Hospice of St. Lawrence County  
**Term Expires**  
12/31/2021  
**eMail**  
mjones@hospiceslv.org

### Member

**Name**  
Ralph Johns  
**Physician**  
No  
**Psychologist**  
Yes  
**Represents**  
Retired from SLC Com Services  
**Term Expires**  
12/31/2022  
**eMail**  
rjohns@twcny.rr.com

**Name**  
Robert Buffham  
**Physician**  
No  
**Psychologist**  
No  
**Represents**  
Retired from SLPC  
**Term Expires**  
12/31/2022  
**eMail**  
one

**Name**  
Margaret Caswell  
**Physician**  
No  
**Psychologist**  
No  
**Represents**  
Community  
**Term Expires**  
12/31/2019  
**eMail**  
kcaswell3@twcny.rr.com

**Name**  
Kristin Weber  
**Physician**  
No  
**Psychologist**  
No  
**Represents**  
St. Lawrence Psychiatric Center  
**Term Expires**  
12/31/2019  
**eMail**  
Kristine.Weber@omh.ny.gov

**Name**  
Lee Scaggs  
**Physician**  
No  
**Psychologist**  
No  
**Represents**  
BOCES  
**Term Expires**  
12/31/2020  
**eMail**  
scaggs337@gmail.com

**Name**  
David Bayne  
**Physician**  
No  
**Psychologist**  
No  
**Represents**  
Peer  
**Term Expires**  
12/31/2020  
**eMail**  
mindwork@ne.twbc.com

**Name**  
Joan Lambert  
**Physician**  
No  
**Psychologist**  
No  
**Represents**  
Family  
**Term Expires**  
12/31/2019  
**eMail**  
momiejoan@hotmail.com

**Name**  
John Burke  
**Physician**  
No  
**Psychologist**  
No  
**Represents**  
Legislature liason  
**Term Expires**  
12/31/2019  
**eMail**  
jburke@stlawco.org

**Name**  
Sherri Hewitson  
**Physician**  
No  
**Psychologist**  
No  
**Represents**  
CP of the North Country  
**Term Expires**  
12/31/2021  
**eMail**  
sherri@cpnorthcountry.org

**Name**  
John Nixon  
**Physician**  
No  
**Psychologist**  
Yes  
**Represents**  
Community  
**Term Expires**  
12/31/2022  
**eMail**  
jandlnixon@gmail.com

**Name**  
Courtney Tom  
**Physician**  
No  
**Psychologist**  
No  
**Represents**  
Housing - MILC  
**Term Expires**  
12/31/2019  
**eMail**  
ctoms@milcinc.org
Alcoholism and Substance Abuse Subcommittee Roster  
St. Lawrence County Community Srvs Bd (70700)  
Certified: Sheena Smith (4/18/18)

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>Member</th>
<th>Name</th>
<th>Represents</th>
<th>eMail</th>
<th>Is CSB Member</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>David Baynes</td>
<td>Step by Step</td>
<td><a href="mailto:mindwork@ne.twcbc.com">mindwork@ne.twcbc.com</a></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Marilyn Beldock</td>
<td>St. Lawrence Addiction Treatment Center</td>
<td><a href="mailto:Marilyn.beldock@oasas.ny.gov">Marilyn.beldock@oasas.ny.gov</a></td>
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<tr>
<td></td>
<td>Kristin Colorusso-Martin</td>
<td>Massena Drug Free Coalition</td>
<td><a href="mailto:kcolorusso-martin@svpc.net">kcolorusso-martin@svpc.net</a></td>
<td>No</td>
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</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. 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.

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<th>Is CSB Member</th>
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<tr>
<td></td>
<td>Joan Lambert</td>
<td>Community Services Board</td>
<td><a href="mailto:momiejoan@hotmail.com">momiejoan@hotmail.com</a></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Vicki Perrine</td>
<td>Community Services Board</td>
<td><a href="mailto:vperrine@chmed.org">vperrine@chmed.org</a></td>
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<tr>
<td></td>
<td>Kristine Weber</td>
<td>Community Services Board</td>
<td><a href="mailto:kristne.weber@omh.ny.gov">kristne.weber@omh.ny.gov</a></td>
<td>Yes</td>
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<tr>
<td></td>
<td>Colleen Aldridge</td>
<td>United Helpers</td>
<td><a href="mailto:csaldridge@unitedhelpers.org">csaldridge@unitedhelpers.org</a></td>
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<tr>
<td></td>
<td>Kim McKnight</td>
<td>Claxton Hepburn Medical Center</td>
<td><a href="mailto:kmcknight@chmed.org">kmcknight@chmed.org</a></td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Heather Rand</td>
<td>St. Lawrence County DSS</td>
<td><a href="mailto:heather.rand@dfa.state.ny.us">heather.rand@dfa.state.ny.us</a></td>
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<tr>
<td></td>
<td>Tischa Toon</td>
<td>Community</td>
<td><a href="mailto:Tischa.toon@ymail.com">Tischa.toon@ymail.com</a></td>
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<tr>
<td></td>
<td>Keith Dennis Mitchell</td>
<td>NRCIL</td>
<td><a href="mailto:keithdennismitchell@gmail.com">keithdennismitchell@gmail.com</a></td>
<td>No</td>
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**Chairperson**

<table>
<thead>
<tr>
<th>Name</th>
<th>Lee Scaggs</th>
</tr>
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<tbody>
<tr>
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<tr>
<td>eMail</td>
<td><a href="mailto:scaggs337@gmail.com">scaggs337@gmail.com</a></td>
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**Member**

<table>
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<tr>
<th>Name</th>
<th>Sheri Hewitson</th>
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<tr>
<td>Represents</td>
<td>Cerebral Palsy of NNY</td>
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<tr>
<td>eMail</td>
<td><a href="mailto:Sherri@cpnorthcountry.org">Sherri@cpnorthcountry.org</a></td>
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<thead>
<tr>
<th>Name</th>
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<tr>
<td>Represents</td>
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<tr>
<td>eMail</td>
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<td>mmcgraw@unitedhelpers</td>
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<tr>
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<tr>
<td>eMail</td>
<td><a href="mailto:311linny@gmail.com">311linny@gmail.com</a></td>
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</tr>
<tr>
<td>Is CSB Member</td>
<td>No</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 2019 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 2019 Local Services planning process.
St. Lawrence County is a large and predominantly rural county located between the Adirondack Mountains and the St. Lawrence River in northern New York. As of 2015, it had a population of 110,007. The County’s population has changed very little since 1960, remaining between 110,000 and 115,000 for the past 55 years. 80% of housing units in St. Lawrence County are occupied, including 56% that are owner occupied and 23% that are rented. The remaining 20% of housing is vacant, including 13% for seasonal or occasional use, 2% for rent or for sale. The remaining 5% of housing units are other vacancies. 70% are detached single units, 11% are mobile homes, 12% are three or more units, 5% are duplexes, and 1% are attached singles. A majority of housing units are more than fifty years old. Housing values are lower compared to regional averages and much lower compared to statewide and national averages. The median value of a house in St. Lawrence County is $86,200, compared to $135,200 in Jefferson County, $111,900 in Lewis County, $283,700 in New York State, and $175,700 in the United States. 19% of housing units in St. Lawrence County are valued at less than $50,000, compared to 11% in Jefferson and Lewis counties, 12% in New York State, and 16% in the United States.73

Among those in the civilian labor force, the unemployment rate was 11%. More recent data from the Bureau of Labor Statistics shows that the unemployment rate declined to an annual average of 6.9% in 2015, mirroring statewide and national declines in unemployment. However, the unemployment rate for St. Lawrence County remained the third highest in the state, only slightly behind only adjacent Lewis County and nearby Oswego County.61

St. Lawrence County has a notably high rate of poverty, both in terms of geographic comparisons and its own history. The 2010-2014 American Community Survey estimate for the county’s poverty rate was 19.7%, compared to 16.8% for the region, 15.6% for New York State, and 15.6% for the United States. This was the third highest among 51 counties in Upstate NY, the fifth highest among 62 counties in New York State, and, and
the thirteenth highest among 221 counties in the Northeastern United States. Prior to 2012, the county's poverty rate had not exceeded 19% in any measurement period since 1960.

Visualizations from the U.S. Census Bureau Small Area Income & Poverty Estimates

73 American Community Survey 5-Year Estimates, 2010-2014.
57 NYSDOH Vital Statistics Mortality File, 2010-2014. Statewide numbers were retrieved using the CDC’s
58 Decennial Census of Population and Housing, Survey of Income and Program Participation, American Community Survey Estimates