

COMPLETE

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Q1

Contact Information

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Q2

Otsego County Community Services Board

LGU:

Q3

a. Indicate how your local mental hygiene service system (i.e., mental health, substance use disorder and problem gambling, and developmental disability populations), overall, has been affected by the COVID-19 pandemic: Please specifically note, Any cross-system issues that affect more than one population; Any specific racial/ethnic groups or populations that have been disproportionately impacted by COVID-19; and Any differences between adult services and children's services.

Accessing telehealth services is the greatest challenge in the rural areas. The lack of broadband/internet/cell service and the affordability of them restricts access for many. The social isolation and anxiety have been the greatest emotional challenges. Loss of care for primary and other specialty health conditions including access to nutritional food, medications, and safe housing. Staff were challenged by the lack of training and experience in delivering services via telehealth.

Q4

b. Indicate how your mental health service needs, overall, have been affected by the COVID-19 pandemic: Please specifically note, Any specific racial/ethnic groups or populations that have been disproportionately impacted by COVID-19; and Any differences between adult services and children's services.

Individuals with SPMI are more reluctant to access services in person when unable to use telehealth. Access to a safe, confidential living environment has also been a challenge for some individuals especially with the rise in domestic violence. The isolation has exacerbated psychiatric conditions. Lack of primary medical care has increased medical complications of chronic conditions. Younger children and children with ADHD and other behavioral challenges struggled with telehealth. The privacy issues also came up more with youth.

Q5

c. Indicate how your substance use disorder (SUD) and problem gambling needs, overall, have been affected by the COVID-19 pandemic: Please specifically note, Any specific racial/ethnic groups or populations that have been disproportionately impacted by COVID-19; and Any differences between adult services and children's services.

Crisis services reported a significant increase in SUD related crisis calls. The loss of in person support and access to appropriate social activities has presented challenges to those in early recovery. The limited court operations significantly impacted this population with many unable to move through their legal processes in a timely way. However the lifting of waiting periods for homelessness was a great benefit and eligibility of unemployment had a mixed responses. In person requirements for MAT induction was a great benefit for the SUD/ODU population. Lack of in person services made enhancing motivation for recovery a challenge.

Q6

d. Indicate how the needs of the developmentally disabled population, overall, have been affected by the COVID-19 pandemic: Please specifically note, Any specific racial/ethnic groups or populations that have been disproportionately impacted by COVID-19; and Any differences between adult services and children's services.

Given the high risk nature of this population and the percentage in group settings their day to day life was most greatly effected. There was an exceptionally high need to provide a safe, secure environment with a high demand for PPE. Organizations providing services went to great effort to realign staffing and services within a closed environment.

Q7

a. Mental Health providers

Educational materials for utilization of telehealth had to be developed for both staff and clients. Clinical staff required training on best practices for the delivery of clinical services via telehealth.

Q8

b. SUD and problem gambling service providers:

Educational materials for utilization of telehealth had to be developed for both staff and clients. Clinical staff required training on best practices for the delivery of clinical services via telehealth. Specific to the SUD population was the use of tobacco during sessions when delivered via telehealth and the need to reinforce the important of privacy.

Q9

c. Developmental disability service providers:

This group made the most significant changes to policies and procedures many of which has to be individualized to their specific organization.

COVID-19 Pandemic Effects on Mental Hygiene Services Delivery System Local Services Plan
Supplemental Survey

Q10

a. Since March 1, 2020, how would you describe DEMAND for mental health services in each of the following program categories?

INPATIENT (State PC, Article 28/31 Inpatient, Residential Treatment Facilities)	Decreased
OUTPATIENT (Clinic, ACT, Day Treatment, PROS, Continuing Day Treatment, Partial Hospitalization)	Increased
RESIDENTIAL (Support, Treatment, Unlicensed Housing)	Decreased
EMERGENCY (Comprehensive Psychiatric Emergency Programs, Crisis Programs)	Increased
SUPPORT (Care Coordination, Education, Forensic, General, Self-Help, Vocational)	Decreased

Q11

Respondent skipped this question

If you would like to add any detail about your responses above, please do so in the space below:

Q12

b. Since March 1, 2020, how would you describe ACCESS to mental health services in each of the following program categories?

INPATIENT (State PC, Article 28/31 Inpatient, Residential Treatment Facilities)	No Change
OUTPATIENT (Clinic, ACT, Day Treatment, PROS, Continuing Day Treatment, Partial Hospitalization)	No Change
RESIDENTIAL (Support, Treatment, Unlicensed Housing)	Decreased
EMERGENCY (Comprehensive Psychiatric Emergency Programs, Crisis Programs)	Increased
SUPPORT (Care Coordination, Education, Forensic, General, Self-Help, Vocational)	Decreased

Q13

Respondent skipped this question

If you would like to add any detail about your responses above, please do so in the space below:

Q14

a. Since March 1, 2020, what number of mental health program sites in your county closed or limited operations due to COVID-19, apart from transition to telehealth?

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COVID-19 Pandemic Effects on Mental Hygiene Services Delivery System Local Services Plan
Supplemental Survey

Q15

If you would like to add any detail about your responses above, please do so in the space below:

The integrated employment site closed to the public and provided food services to the consumers.

Q16

b. What number of mental health program sites in your county remain closed or are offering limited services now, apart from transition to telehealth?

0

Q17

If you would like to add any detail about your responses above, please do so in the space below:

Peer support services increased via a Warm-Line.

Q18

Yes

c. If your county operates services, did you maintain any level of in-person mental health treatment

Q19

If you would like to add any detail about your responses above, please do so in the space below:

Maintained in person injections, walk-in access and in person for client who could not do telehealth.

Q20

No

d. As a result of COVID-19, are any mental health programs in your county closing operations permanently? If yes, list program name(s) and type(s).

Q21

Respondent skipped this question

If you would like to add any detail about your responses above, please do so in the space below:

Q22

No

e. Did any mental health programs in your county close due to workforce issues (e.g. staff infections, recruitment/retention issues)?

COVID-19 Pandemic Effects on Mental Hygiene Services Delivery System Local Services Plan
Supplemental Survey

Q23

Respondent skipped this question

If you would like to add any detail about your responses above, please do so in the space below:

Q24

a. Apart from telehealth, during COVID-19, did your county or mental health providers within your county develop any innovative services or methods of program delivery that may be continued post-COVID? If yes, please describe.

Yes (please describe):

Significant expansion of our peer operated Warm-line which was embraced by the Office for the Aged for their clients and encouraged for use by anyone in the community.

Q25

No

b. During COVID-19, did any mental health providers within your county form any partnerships with other providers that may be continued post-COVID? If yes, please describe.

Q26

a. During COVID-19, how many mental health providers within your county implemented existing continuity of operations plans?

0

Q27

If you would like to add any detail about your responses above, please do so in the space below:

All were able to move to telehealth.

Q28

b. During COVID-19, how many mental health providers within your county did not implement existing continuity of operations plans?

3

Q29

Respondent skipped this question

If you would like to add any detail about your responses above, please do so in the space below:

Q30

None

c. During COVID-19, did your county LGU or Office of Emergency Management (OEM) assist any mental health providers in the development or revision of continuity of operations plans?

Q31

Respondent skipped this question

If you would like to add any detail about your responses above, please do so in the space below:

Q32

During COVID-19, what OMH guidance documents were beneficial to your disaster management process?

**Program-level Guidance,
Telemental Health Guidance,
Infection Control Guidance,
Fiscal and Contract Guidance,
FAQs**

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Q33

1. Please indicate any needs for or issues with SUD and problem gambling prevention, treatment, and recovery providers acquiring Personal Protective Equipment (PPE), face masks, cleaning or disinfectant supplies, or similar materials related to the COVID-19 pandemic:

Some delays in getting cleaning supplies.

Q34

a. How has COVID-19 affected the delivery of and demand for SUD and problem gambling prevention services in your county?

They were unable to delivery the majority of there community level interventions. With schools remote they had to rely on given worksheets for be given to students.

Q35

b. How has COVID-19 affected the delivery of and demand for SUD and problem gambling recovery services in your county?

With the use of telehealth their services increased.

Q36

c. How has COVID-19 affected the delivery of and demand for problem gambling treatment services in your county?

no change

Q37

d. Since March 1, 2020, how would you describe DEMAND for SUD Treatment services in each of the following program categories?

INPATIENT	Decreased
OUTPATIENT	Decreased
OTP	N/A
RESIDENTIAL	Decreased
CRISIS	Increased

Q38

Respondent skipped this question

If you would like to add any detail about your responses above, please do so in the space below:

Q39

e. Since March 1, 2020, how would you describe ACCESS to SUD Treatment services in each of the following program categories?

INPATIENT	Decreased
OUTPATIENT	No Change
OTP	Decreased
RESIDENTIAL	Decreased
CRISIS	Increased

Q40

Respondent skipped this question

If you would like to add any detail about your responses above, please do so in the space below:

Q41

No

a. Apart from telehealth, during COVID-19, did your county or SUD and problem gambling service providers within your county develop any innovative services or methods of program delivery that may be continued post-COVID? If yes, please describe.

Q42

No

b. During COVID-19, did SUD and problem gambling service providers within your county form any partnerships with other providers that may be continued post-COVID? If yes, please describe.

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Q43

No

1. Has your county conducted analysis on the impact of COVID related to IDD services/OPWDD service system?
If yes, please explain.

Q44

2. What are the greatest challenges your county will be facing over the next 12 months related to IDD services?

The financial impact on the changes in service delivery and funding.

Q45

3. Is there data that would be helpful for OPWDD to provide to better information the local planning process? Please list by order of priority/importance.

services indicated vs services delivered

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Q46

Please use the optional space below to describe anything else related to the effects of COVID-19 on Mental Hygiene service delivery that you were not able to address in the previous questions:

The ability to deliver telehealth services has been a transformation in the delivery of services.
