

2021 Mental Hygiene Executive Summary

Herkimer County MH & Chem Services

Certified: [Kristen Snyder-Branner](#) (7/27/20)

The Herkimer County Mental Hygiene Services Advisory Board was created in 2010 to advise and guide the local planning process, discuss needs and share information across service systems. The group includes OASAS, OMH and OPWDD service providers, family representatives and advocates, key agency, government and community stakeholders, and the members of the Community Services Board. Mental Hygiene Services Advisory Board members serve on the Mental Health, Developmental Disabilities and Substance Use Disorders Subcommittees as well as various other ad-hoc planning committees and groups.

The Herkimer County Mental Hygiene Services Advisory Board meets during each planning cycle to discuss the implementation of the current year's Herkimer County Mental Hygiene Services Local Services Plan (LSP), to review data, and to update on current initiatives and emerging trends in Herkimer County, including those related to federal and state policy changes which have impacted current operating environments and strategic directions within OMH, OASAS and OPWDD. Examples of these changes include the implementation of HARP, HCBS Waiver and Medicaid Redesign, the OPWDD Transformation Agenda, the RPC and the DOH DSRIP and PHIP initiatives. The next meeting of this group will be held in August 2018.

The Developmental Disabilities, Mental Health and SUD Subcommittees each held meetings in May 2018 to review data, discuss policy changes and identify current priority areas to be addressed in the 2019 Mental Hygiene Services Local Services Plan (i.e. substance use disorder treatment).. Discussions were also held with Integrated County Planning partners, including the Directors of Public Health, Department of Social Services and Probation, to review current needs and establish strategies that address collaborative areas of focus (i.e. suicide prevention and services for the juvenile justice population). Relationships with local school districts were enhanced, as districts became involved in suicide prevention efforts and implemented satellite mental health clinic services and enhanced prevention efforts. Overall, the planning process elicited much discussion related to emerging trends and priority needs in Herkimer County, and as a result identified many new strategies to effectively address needs. These strategies were incorporated into the 2019 Mental Hygiene Services Local Services Plan.

In addition to this work, the LGU and key mental hygiene services system representatives and community stakeholders have participated in multiple regional planning initiatives, to include the Mohawk Valley RPC, the Leatherstocking DSRIP, the Mohawk Valley PHIP, and the newly formed BHCC, to improve the current service delivery system and address statewide goals and objectives. The LGU has played an active role in the Mohawk Valley RPC and will co-chair the Children and Families Subcommittee beginning in June 2018.

Office of Addiction Services and Supports

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Mental Hygiene Goals and Objectives Form
Herkimer County MH & Chem Services (70070)
Certified: [Kristen Snyder-Branner](#) (8/3/20)

Mental Hygiene Law, § 41.16 "Local planning; state and local responsibilities" states that "each local governmental unit shall: establish long range goals and objectives consistent with statewide goals and objectives." The Goals and Objectives Form allows LGUs to state their long-term goals and shorter-term objectives based on the local needs identified through the planning process and with respect to the State goals and objectives of each Mental Hygiene agency.

The information input in the 2020 Goals and Objectives Form is brought forward into the 2021 Form. LGUs can use the 2020 information as starting point for the 2021 Plan but should ensure that each section contains relevant, up-to-date responses.

Please indicate below if the overall needs of each disability population got better or worse or stayed about the same over the past year. Completion of these questions is required for submission of the form.

New To assist LGUs in the assessment of local substance use disorder (SUD) needs, OASAS Planning has developed a county-level, core-dataset of SUD public health data indicators. These reports are based on the recommendations of the Council of State and Territorial Epidemiologists and the regularly updated county-level datasets available in New York State. Each indicator compares county-level population-based rates to statewide rates. Reports for all counties are available in the County Planning System Under **Resources -> OASAS Data Resources -> Substance Use Disorder Key Indicators**

1. Overall Needs Assessment by Population (Required)

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

The question below asks for an overall assessment of unmet needs; however certain individual unmet needs may diverge from overall needs. Please use the text boxes below to describe which (if any) specific needs have improved, worsened, or stayed the same.

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

Please describe any unmet **mental health** service needs that have **improved**:

Please describe any unmet **mental health** service needs that have **stayed the same**:

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

Overall the committee and local mental health providers believed that things have slightly worsened since COVID-19. Although the local mental health clinics continue to do mainly telehealth and visits and no-show rates have improved some of the other non-clinical services report things worsening. Care coordination and many of the non-traditional counseling services are not able to go out to homes and contact has been through telephone.

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**:

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

Please describe any unmet **SUD** service needs that have **worsened**:

The majority of the sub-committee believes things have worsened since COVID-19. The local substance abuse provider, Beacon Center has been doing mainly telehealth since the middle of March. They recently started doing some individual in-person and some small groups. Beacon Center reported that engagement had slightly decreased since doing telehealth. Herkimer County Overdose Response Team who tracks overdose data reported that they had seen an increase in overdoses since COVID-19 started. Herkimer County Overdose Response Team monthly numbers for 2020: January-2, February-6, March-2 (1 fatality), April-5, May-8 (1 fatality), and June-14(2 fatalities).

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

Improved Stayed the Same Worsened

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

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

Workforce recruitment and retention continues to be a concern. In regard to COVID-19 Herkimer ARC reported the following: Starting March 16 the day services provided within a congregate care or work setting were closed. ARC redeployed staff to provide services in the agency residential facilities or within a family home as necessary. The agency quickly ramped up technological opportunities and provided some services via the internet. Families were called at least weekly to determine their needs for the following week. Classes and other services were then provided both face to face and virtually. ARC reopened the day rehab services on July 22 at a smaller scale. ARC hopes to continue to build day programming options for people they support in the communities and ramp back up to serving all families.

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

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

Please select any of the categories below for which there is a **high level of unmet need** for LGU and the individuals it serves. (Some needs listed are specific to one or two agencies; and therefore only those agencies can be chosen). When considering the level of need, compare each issue category against all others rather than looking at each issue category in isolation.

- **For each need identified you will have the opportunity to outline related goals and objectives, or to discuss the need more generally if there are no related goals or objectives.**
- **You will be limited to one goal for each need category but will have the option for multiple objectives.** For those categories that apply to multiple disability areas/state agencies, please indicate, in the objective description, each service population/agency for which this unmet need applies. **(At least one need category must be selected).**

Issue Category	Applicable State Agenc(ies)		
	OASAS	OMH	OPWDD
a) Housing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b) Transportation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c) Crisis Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d) Workforce Recruitment and Retention (service system)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e) Employment/ Job Opportunities (clients)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f) Prevention	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g) Inpatient Treatment Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h) Recovery and Support Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i) Reducing Stigma	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
j) SUD Outpatient Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k) SUD Residential Treatment Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l) Heroin and Opioid Programs and Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
m) Coordination/Integration with Other Systems for SUD clients			

		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n)	Mental Health Clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
o)	Other Mental Health Outpatient Services (non-clinic)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
p)	Mental Health Care Coordination	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
q)	Developmental Disability Clinical Services			<input type="checkbox"/>
r)	Developmental Disability Children Services			<input type="checkbox"/>
s)	Developmental Disability Student/Transition Services			<input type="checkbox"/>
t)	Developmental Disability Respite Services			<input checked="" type="checkbox"/>
u)	Developmental Disability Family Supports			<input checked="" type="checkbox"/>
v)	Developmental Disability Self-Directed Services			<input type="checkbox"/>
w)	Autism Services			<input type="checkbox"/>
x)	Developmental Disability Front Door			<input type="checkbox"/>
y)	Developmental Disability Care Coordination			<input type="checkbox"/>
z)	Other Need 1(Specify in Background Information)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
aa)	Other Need 2 (Specify in Background Information)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ab)	Problem Gambling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ac)	Adverse Childhood Experiences (ACEs)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

(After a need issue category is selected, related follow-up questions will display below the table)

2a. Housing - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more 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 40 people on the waiting list. There has been 100% utilization of this program and the program receives an average of four referrals a month from a variety of sources (i.e. care management, clinics, hospitals). Length of time on the waitlist averages about two years.

Both community residences, the George Aney CR and the James Bucklin CR, are generally at 100% utilization. There are currently 3 people on the waiting list for the CR program and length of time on the waiting list usually averages 2 months. Each month, several phone calls are received inquiring about services and there is an average of 2 referrals received each month. Several of the phone calls received are from referents who need immediate placement for the individual. The community residence has two non-crisis beds that are located at the Aney Community Residence. Utilization for the non-crisis respite bed is often at 100%.

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. The Valley Housing Coalition (VHC) met 11 times in 2019, 7 full-member plenary meetings and 4 board meetings, and the Chair of the VHC was elected as the Co-Chair for the NYS Balance of State Continuum of Care (BoS CoC). The BoS CoC submitted its first HUD CoC Application in 2019 which included a funding request for up to 8 Permanent Supportive Housing beds to be provided for homeless individuals in Herkimer County; results of the competition are expected in the first quarter of 2020. The VHC conducted the first official Homeless Point in Time Census in January of 2019 and identified 18 homeless individuals and families; another PIT count will be conducted in January of 2020. Catholic Charities began serving homeless individuals through the NYS OTDA funded CoC-Rapid Rehousing Program and served over 20 individuals and families within a few months of starting. Funds were used for rental assistance and case management and will continue to serve more individuals through 2020 as those from the first group exit the program. The VHC is also working with DePaul Properties out of Rochester, NY to develop new affordable housing in Herkimer. The goal is for DePaul to acquire a property in early 2020 and apply for the final funding cycle of the Empire State Supportive Housing Initiative (ESSHI).

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 Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

Increase affordable housing for lower income individuals and persons with a mental health diagnosis, developmental disability, or substance abuse disorder.

Objective Statement

Objective Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

[Add an Objective](#) (Maximum 5 Objectives per goal) | [Remove Objective](#)

Objective 1: The LGU will advocate for additional affordable housing for OASAS, OMH, and OPWDD populations.

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

Objective 2: The LGU will continue to participate in the Herkimer County Housing Board.

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

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

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OPWDD: The Herkimer Area Resource Center 6 respite TUBS beds are currently closed due to COVID-19.

2b. Transportation - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more 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 consistent public transportation options. It is particularly difficult for the residents of Herkimer County who do not live near a commercial bus route. 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. The county and partner agencies continue to focus on ways to assist residents getting to and from appointments, support groups, delivery of medications and other needs where lack of transportation is a barrier. Providers and consumers continue to work with Medicaid transportation services and MH Clinic service providers to provide bus passes to service recipients that reside near the bus route and to work alongside Medicaid transportation providers to ensure timely clinic appointment attendance. Utilizing bus passes for clinic patients has proven to be effective, but less individuals are utilizing this service due to the limited bus schedules. Additionally, The Office of the Aging provides some transportation services to senior citizens.

All three Mental Hygiene Services subcommittees identified transportation as a need for the populations they serve across all areas of programming.

In response to the concerns over the need for transportation related to medications, the Mohawk Valley RPC continues to address this need through partnership with local agencies. Catholic Charities of Herkimer County offers transportation services as a result of the transportation grant (DSRIP funding) they received last year. The Transportation Companionship Program can be utilized by any population for various transportation needs including: transportation to/from medical appointments, pharmacies, and entitlement appointments for county residents in need. Additionally, local businesses have seen an increase in offering door to door medication and grocery delivery. There has also been a push to sign up residents to medication delivery by mail services to offset barriers around transportation. Although, there is coordination efforts being addressed with mail services considering new medication and renewal prescriptions often require an in-person appointment before delivery services can take place.

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 4 school-based satellite clinics (through The Neighborhood Center). MH Clinic service providers worked to provide bus passes to service recipients that reside near the bus route and continued to work alongside Medicaid transportation providers to ensure timely clinic appointment attendance. In addition, the LGU continued to work with agencies and key stakeholders to develop and implement home, school and local community-based service delivery options to address consumer needs.

Since the start of COVID-19 agencies report transportation being much less of a problem as most services have been delivered via tele health. Transportation services changed drastically during COVID-19, particularly in months of March, April, May and June. Many agencies halted transportation services for clients due to both the stay-at-home order and safety concerns for clients and staff. Many agencies began using Tele health to communicate with clients and provide virtual mental health services. Although, organizations like Catholic Charities began using their vehicles to deliver food and other resources to clients in need. Neighborhood Center also utilized their vehicles to deliver medications and other resources to clients who either lack transportation and/or are limited to accessing needs during COVID-19. Another noted change around transportation was an increase in medication and food delivery by area grocery stores and pharmacies. Kinney's, CVS, Big M and Walmart offered these services. Price Chopper, Aldi and CVS offered services through the Instacart app. Herkimer County and partner agencies created a list to share helping clients' access contact free services. In June, Catholic Charities began reintroducing their Transportation Companionship Program, following all CDC guidelines and guidance from New York State. They introduced enhanced cleaning protocols and are committed to only transporting one client at a time to keep safe social distances. Agencies are predicating that the need for transportation will increase again as the county continues to safely reopen amid the pandemic.

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 Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

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 Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

[Add an Objective](#) (Maximum 5 Objectives per goal) | [Remove Objective](#)

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)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2c. Crisis Services - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more information.

According to 1/21/20 OASAS Client Data System (CDS), in 2018, 106 Herkimer County Residents were admitted for inpatient substance abuse treatment (compared to 152 in 2017). There were 55 crisis admissions (compared to 80 in 2017), 82 residential treatment admissions (compared to 99 in 2017), 23 Opioid Treatment Program (OTP) admissions (compared to 33 in 2017), and 431 outpatient treatment admissions (compared to 439 in 2017). Heroin and other opioids continue to be the leading cause of admissions with alcohol in second.

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 continues to provide mobile crisis services for Herkimer County. They are reporting an increase in calls from this time last year and they believe that this may be related to the COVID-19 pandemic. Stats provided by The Neighborhood Center show the number of crisis calls for June 2019 to be 117 as compared to the increase in June 2020 to 250 crisis calls.

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 Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

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

Objective Statement

Objective Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

[Add an Objective](#) (Maximum 5 Objectives per goal) | [Remove Objective](#)

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 three subcommittees updated.

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

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

The Neighborhood Center continues to communicate with OASAS in regard to the residential facility.

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

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more information.

Agencies continue to report difficulty recruiting and retaining direct care staff. 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. Efforts continue to have the Direct Support Professional position as recognized as a professional job classification by the federal and state governments.

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 Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

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

Increase the number of authorized staff positions that are filled.

Objective Statement

Objective Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

[Add an Objective](#) (Maximum 5 Objectives per goal) | [Remove Objective](#)

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

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

OMH and OPWDD providers continue to report difficulty recruiting and retaining direct care staff.

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

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more 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

The Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

Provide skill development through classroom education and community experiences.

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

Objective Statement

Objective Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

[Add an Objective](#) (Maximum 5 Objectives per goal) | [Remove Objective](#)

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)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

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 2020, 19 young adults have graduated from the program (this is an increase of 5 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.

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.

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. UCP reported serving 13 individuals in Herkimer County for Individual Support Services.

2f. Prevention - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more 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 AI-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 Goal a priority goal (Maximum 5 Objectives per goal)? Yes No

The Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

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.

Objective Statement

Objective Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

[Add an Objective](#) (Maximum 5 Objectives per goal) | [Remove Objective](#)

Objective 1: The Herkimer County Prevention Council will collaborate with Community Partnership Coalition of Herkimer County and other community agencies to provide at least two community trainings on current trends.

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

Objective 2: Catholic Charities of Herkimer County will facilitate the Mohawk Valley Prevention and Recovery Collaborative and will work with 6 county coalitions to streamline resources and events offered in each county.

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

Objective 3: The LGU will attend the Partnership Coalition monthly meetings and remain in close contact with providers.

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

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

In September of 2019, Herkimer County was awarded a four-year Substance Abuse and Mental Health Services Administration (SAMHSA) grant aimed at the expansion and sustainability of our existing comprehensive community mental health services for children with serious emotional disturbances. The purpose of this program is to improve mental health outcomes for children and youth, birth through age 21, with serious emotional disturbance (SED), and their families. This four-year grant supports the implementation, expansion, and integration of the SOC approach by creating sustainable infrastructure and services. Our SOC initiatives are federally-evaluated on the progress we make toward helping children,

youth, and families using scientifically and statistically reliable instruments and methods. In partnership with SUNY Polytechnic Institute of Technology, these aggregate data points are evaluated at the local level to inform policies and practices that best help children and youth with serious mental health needs in Herkimer County.

2g. Inpatient Treatment Services - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more 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. For 2021 plan The Neighborhood Center reports that they continue to work with OASAS to open the facility.

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 Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

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

Objective Statement

Objective Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

[Add an Objective](#) (Maximum 5 Objectives per goal) | [Remove Objective](#)

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)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

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. 2021 update: The Neighborhood Center continues to work with OASAS to open the facility.

2h. Recovery and Support Services - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more information.

RISE Recovery Community Outreach Center Summary of 2019-2020 services

RISE Recovery Community Outreach Center is a program of Catholic Charities of Herkimer County and the Albany Catholic Diocese. Funding for the program is provided by a grant from the NY State Opioid Response and SAMHSA -grant # H79TI081708. The RISE Recovery Community Outreach Center opened its door to the community on October 7, 2019. From that date through March 16, 2020, RISE welcomed a total of 1,124 visitors, enrolled 74 new members, and had 302 unique visitors (individuals presenting to RISE for the first time in a given month). During this time period, members had the opportunity to attend and participate in the various groups, activities, and services offered including peer support services, recovery coaching, skill building and educational groups, wellness activities, self-help groups, socialization, recreation, and special recovery supporting special events in a safe, welcoming and substance-free environment. We also assisted in arranging referrals to community based providers to meet the needs members expressed including addiction, mental health, primary medical care, housing, legal, social services and educational/vocational services. We also provided services to family or loved ones affected by addiction.

On March 16, 2020, in-person services were temporarily suspended due to the COVID 19 pandemic and the NYS PAUSE. RISE services began to be delivered in virtual format via ZOOM in April, 2020. These virtual services included groups offering peer support, coffee chat, exercise, guided meditation, women supporting women discussion, grief support, and SMART Recovery. In addition to these groups staff continued to reach out to individual members to provide support via phone, email and text. Additionally, RISE continued to post links to virtual self-help groups and services, and other services, groups and activities provided by RISE staff and in the community on the RISE Facebook page.

While RISE currently remains closed to the community, in-person individual appointments began to be offered 2 days per week starting on June 15, 2020. These in-person services are provided through new policies and protocols focusing on the safety of the facility, members/visitors, and staff regarding COVID 19. These policies address phone screening of individuals prior to individual appointment, expected safety precautions for meeting with individuals in the facility, and the regular cleaning sanitizing of the facility.

GOALS FY 2020-2021

- For the remainder of this fiscal year (October-September), and for the upcoming fiscal year, additional policies and protocols will be developed to gradually expand accessibility to the facility. This movement to expand will be implemented at the direction of Catholic Charities of Herkimer County and the Albany Catholic Diocese.
- Work with OASAS and SAMHSA to secure renewal of grant funding
- Develop and implement a Sustainability Plan for RISE.
- Increase membership by 50%.
- Add at least 3 new volunteers who have taken, or will take, Recovery Coach Academy and Peer Ethics and volunteer at least 200 hours.

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 Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

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

Objective Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

[Add an Objective](#) (Maximum 5 Objectives per goal) | [Remove Objective](#)

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2i. Reducing Stigma - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more information.

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

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2k. SUD Residential Treatment Services - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more information.

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

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

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

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more information.

The Beacon Center has increased their capacity of prescribers and they will begin providing medical marijuana to treat opioid disorders. Herkimer County Overdose Response Team who tracks overdose data reported that they had seen an increase in overdoses since COVID-19 started. Herkimer County Overdose Response Team monthly numbers for 2020: January-2, February-6, March-2 (1 fatality), April-5, May-8 (1 fatality), and June-14(2 fatalities).

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 Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

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 Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

[Add an Objective](#) (Maximum 5 Objectives per goal) | [Remove Objective](#)

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)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2n. Mental Health Clinic - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more 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 one Licensed Social Worker, one Registered Nurse, one part-time physician, and a part time psychiatric nurse practitioner .

In 2019, department staff provided 8,157 visits to 1018 individuals (200 children and 818 adults). These numbers are consistent with those seen in 2018. In June of 2020 the county clinic modified the clinic license to include adults only as the child psychiatrist retired. The Neighborhood Center opened an Article 31 Clinic in Herkimer County to serve children and youth. The Neighborhood Center also continues to operate 4 satellite clinics in Herkimer County schools.

Clinicians have average caseloads of 70-80 clients, which is consistent with 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. In 2019, 584 visits were provided to 270 correctional facility inmates. The number of visits has decreased due to new bail reform laws. Out of the 584 visits made, 65 were visits for inmates that were on constant watch. We have seen a reduction in the number of individuals on constant watch and this appears to be related to less inmates presenting with substance abuse issues.

The Neighborhood Center (agency provider) maintains 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. They are adding a satellite clinic to Dolgeville School.

The Herkimer Mohawk Valley Psychiatric satellite clinic reports a slight increase in caseloads with a typical caseload being 80-90 clients.

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 Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

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 Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

[Add an Objective](#) (Maximum 5 Objectives per goal) | [Remove Objective](#)

Objective 1: The DCS will participate in regional initiatives related to the provision of clinic services (RPC, BHCC)

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

Objective 2: The Herkimer County Mental Health Clinic will continue to participate in PSYCKES.

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

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

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

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

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

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more 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. Since COVID-19 groups have been provided virtually.

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.

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 an active caseload and receives referrals from many area schools and agencies. The Family Peer Advocate participates in monthly SPOA meetings.

Herkimer County continues to offer the Family Ties Program which provides counseling services in-home and at school with a licensed social worker working with children and their families. Cases are typically open up to 6 months providing short-term behavioral interventions and helping parents to implement the interventions.

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 Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

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 Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

[Add an Objective](#) (Maximum 5 Objectives per goal) | [Remove Objective](#)

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)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2p. Mental Health Care Coordination - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more 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)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2t. Developmental Disability Respite Services - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more information.

ARC and Upstate Cerebral Palsy continue 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

The Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

Develop and enhance adult recreational programs and supports for individuals with developmental disabilities and those on the Autism Spectrum.

Objective Statement

Objective Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

[Add an Objective](#) (Maximum 5 Objectives per goal) | [Remove Objective](#)

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)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2u. Developmental Disability Family Supports - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more 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

The Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

Continue DDSO Family Support Advisory Council representation on the DD Subcommittee

Objective Statement

Objective Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

[Add an Objective](#) (Maximum 5 Objectives per goal) | [Remove Objective](#)

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)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

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

2z. Other Need (Specify in Background Information) - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more information.

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

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2ac. Adverse Childhood Experiences (ACEs) - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more information.

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

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

Office of Addiction Services and Supports

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COMPLETE

Friday, July 24, 2020 11:15:45 AM

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Q1

Contact Information

Name	Kristen Snyder-Branner
Title	Director of Community Services
Email	kbranner@herkimercounty.org

Q2 Herkimer County MH & Chem Services

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.

Mental health, substance abuse, and developmental disabilities all report that much of the services were changed to offer tele-health (sometimes phone only and some video).

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.

Both the county and state mental health outpatient clinics have seen referrals stay about the same but current clients have presented with an increased level of need (requiring more frequent sessions). Engagement has improved and no-show rates have declined. Clients appreciate being able to have the option of phone sessions. Both clinics continue to do in person visits for injections, crisis, and psychiatric evaluations. In regard to residential, OMH community residences report steady referrals (no noted changed with COVID-19). Care Management reports steady referrals with no change. Care management services are delivered by phone unless related to crisis. The Mobile Crisis Assessment Team reports an increase in calls since the start of COVID-19. Most of the MCAT services are delivered remotely unless a crisis needs a face to face assessment. All agencies are following COVID-19 protocols. DCS provided face masks to care management and the community residences.

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.

Outpatient substance abuse treatment was delivered through tele-health from mid-March to recently. Now they are doing some in person visits following COVID-19 guidelines. Prevention services went to virtual and phone only and report that have continued to provide the same level of services to schools and community members.

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.

Local developmental disability providers also began doing remote work with mostly telephone contact. Starting March 16 the day services provided within a congregate care or work setting were closed. Herkimer ARC redeployed staff to provide services in the agency residential facilities or within a family home as necessary. The agency quickly ramped up technological opportunities and provided some services via the internet. Families were called at least weekly to determine their needs for the following week. Classes and other services were then provided both face to face and virtually. ARC reopened the day-rehab services on July 22 at a smaller scale. They hope to continue to build day programming options for people they support in the communities and ramp back up to serving all families. DCS provided ARC with cloth masks from OMH.

Q7

a. Mental Health providers

Providers report adequate training and that OMH resources have been helpful.

Q8

b. SUD and problem gambling service providers:

Providers report adequate training and that OASAS resources have been helpful.

Q9

c. Developmental disability service providers:

Providers report adequate training and that OPWDD resources have been helpful.

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)	No Change
OUTPATIENT (Clinic, ACT, Day Treatment, PROS, Continuing Day Treatment, Partial Hospitalization)	No Change
RESIDENTIAL (Support, Treatment, Unlicensed Housing)	No Change
EMERGENCY (Comprehensive Psychiatric Emergency Programs, Crisis Programs)	Increased
SUPPORT (Care Coordination, Education, Forensic, General, Self-Help, Vocational)	No Change

Q11

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

Outpatient clinics are reporting that existing clients need to be seen more frequently due to increased anxiety and stress since COVID-19 started.

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)	Decreased
OUTPATIENT (Clinic, ACT, Day Treatment, PROS, Continuing Day Treatment, Partial Hospitalization)	No Change
RESIDENTIAL (Support, Treatment, Unlicensed Housing)	No Change
EMERGENCY (Comprehensive Psychiatric Emergency Programs, Crisis Programs)	No Change
SUPPORT (Care Coordination, Education, Forensic, General, Self-Help, Vocational)	No Change

Q13

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

Outpatient mental health providers reported that they had observed more emergency room visits but it appeared that inpatient admissions were less frequent.

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?

0

Q15

Respondent skipped this question

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

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

Respondent skipped this question

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

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:

Persons are seen in person for injections, crisis, and psychiatric evaluations. Also individuals who do not have access to a phone are seen in person.

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:

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

Q22

No

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

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

No

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.

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?

2

Q27

Respondent skipped this question

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

Q28

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

0

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

LGU

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,
FAQs**

Page 3

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:

None.

Q34

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

Prevention providers continue to provide the same level of services remotely through virtual forums.

Q35

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

RISE Recovery Center went to virtual groups and meetings in March and they recently began some in person individual contact while following COVID-19 guidelines.

Q36

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

Slight increase in outpatient demand. Beacon Center started providing services via zoom on 3/18/20 and on 7/6/20 they began some in person contact and small groups while following COVID-19 guidelines.

Q37

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

INPATIENT	No Change
OUTPATIENT	Increased
OTP	No Change
RESIDENTIAL	No Change
CRISIS	Increased

Q38

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

Local outpatient provider reported an increase in outpatient referrals and an increase in crisis. The overdose taskforce reported an increase in overdoses since the start of COVID-19.

Q39

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

INPATIENT	No Change
OUTPATIENT	No Change
OTP	No Change
RESIDENTIAL	No Change
CRISIS	No Change

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.

Page 4

Q43

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

Yes (please explain):

Phone calls with local providers to gain input in regard to needs for education and PPE and to speak about delivery of services.

Q44

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

Resuming in person services.

Q45

Respondent skipped this question

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.

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Q46

Respondent skipped this question

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:
