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Tuesday, September 15, 2020 1:58:19 PM

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Q1

Contact Information

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Title Director of Community Services Tioga County

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Q2 Tioga County Community Services Board

LGU:

Q3

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

Due to operations being at 50 percent of staff on site, there were initial issues with consumers having the technology, knowledge and capabilities to connect via video. Our department was already in the process of implementing telehealth services/but training took place quickly, and within one week we were operational. We provided telephonic from onset of pandemic. Many children had equipment and wifi provided through school system until June/ when school ended and equipment/wifi no longer available. Elementary aged children were / continue to be difficult to engage over tele-service, due to limited attention span, and need for adult guidance while using technology. Tioga County is a rural area and has "deadspots" / limited or no service areas.

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.

We have seen a tremendous increase in crisis services. We have seen a shift in issues as related to children, such as stress related to virtual learning, isolation, and increase in accessing pornography.

Populations who were struggling pre-pandemic most likely have seen exacerbated issues.

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.

There was an increase in relapse and disengagement in treatment for this population. Due to shutdown, support services were unavailable, leading to isolation, fear, and uncertainty.

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.

Regular operations / programming were unavailable, increasing stress for this population and caregivers.

Q7

a. Mental Health providers

Due to local budget and state aid reductions, training funding is unavailable. There is a need for EBP treatment approaches for trauma, meaningful CEUs for licensed professionals.

Q8

b. SUD and problem gambling service providers:

Due to local budget and state aid reductions, training funding is unavailable. Guidance was evolving daily creating stress for providers and staff.

Q9

c. Developmental disability service providers:

Not aware of any unmet need at this time.

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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)

Increased

OUTPATIENT (Clinic, ACT, Day Treatment, PROS, Continuing

Day Treatment, Partial Hospitalization)

Increased

RESIDENTIAL (Support, Treatment, Unlicensed Housing)

EMERGENCY (Comprehensive Psychiatric Emergency

Programs, Crisis Programs)

Increased

No Change

SUPPORT (Care Coordination, Education, Forensic, General,

Self-Help, Vocational)

No Change

Q11

Respondent skipped this question

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

Q12

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

INPATIENT (State PC, Article 28/31 Inpatient, Residential

Treatment Facilities)

Decreased

OUTPATIENT (Clinic, ACT, Day Treatment, PROS, Continuing

Day Treatment, Partial Hospitalization)

No Change

RESIDENTIAL (Support, Treatment, Unlicensed Housing)

EMERGENCY (Comprehensive Psychiatric Emergency

No Change **Decreased**

Programs, Crisis Programs)

SUPPORT (Care Coordination, Education, Forensic, General,

Self-Help, Vocational)

Decreased

Q13

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

Open Access - On Demand Services remained unchanged.

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?

8

Q15 If you would like to add any detail about your responses above All School Sites - closed, clinicians operated remotely. Social Club	
Q16b. What number of mental health program sites in your coufrom transition to telehealth?	ınty remain closed or are offering limited services now, apar
Q17 If you would like to add any detail about your responses above All are opening September 2020	ve, please do so in the space below:
Q18 c. If your county operates services, did you maintain any level of in-person mental health treatment	Yes
Q19 If you would like to add any detail about your responses about On site injections. Crisis Walk-ins.	ve, please do so in the space below:
Q20 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).	No
Q21 If you would like to add any detail about your responses above, please do so in the space below:	Respondent skipped this question

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

Q22

No

Q23

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

Pathways do not have enough staff to provide accommodate demand/need. Glove house CFTSS - lack of providers to provide approved service. Waiting lists for RTF's.

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 None

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

Q31 Respondent skipped this question

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

Q32 Program-level Guidance,

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

Telemental Health Guidance,
Infection Control Guidance,
Fiscal and Contract Guidance,

FAQs

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Q33

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

No Issues

O34

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

Preventive services were limited (virtual) due to schools being closed and new procedures as part of reopening plans.

Q35

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

initially recovery supports were limited, have seen and increase in relapses. Community based resources have adapted to on-line.

Q36

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

Demand for SUD services has increased since the onset of COVID. No change in demand for problem gambling.

Most services are provided via Telehealth/Telephonic. Groups had a delayed start due to preparation to provide them virtually, ie., confidentiality, logistics, consumer comfort level.

Q37

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

INPATIENT

OUTPATIENT

OTP

No Change
Increased

N/A

RESIDENTIAL No Change
CRISIS Increased

Q38 Respondent skipped this question

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

Q39

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

INPATIENT Decreased
OUTPATIENT No Change
OTP 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.

Supplemental Survey		
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	No	
1. Has your county conducted analysis on the impact of COVID related to IDD services/OPWDD service system? If yes, please explain.		
Q44		
2. What are the greatest challenges your county will be facing	ng over the next 12 months related to IDD services?	
Staffing		
Q45		
3. Is there data that would be helpful for OPWDD to provide by order of priority/importance.	to better information the local planning process? Please list	
Our regional office provides data regularly.		
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Q46		
This are a constituted in the continue of the	and the state of the state of COVID 40 and Manager I be added a	

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

The reduction in state aid and aid to localities has put an enormous burden on budget. The effects of COVID have increased consumer needs, long term residual effects, and the ability to maintain continuity of care.