### 2021 Mental Hygiene Executive Summary

Hamilton County Community Services

The needs and priorities noted below specifically reflect desired outcomes identified through Hamilton County's own continuing strategic planning process. The county has utilized regularly scheduled public forums, archival data and surveys to identify needs and assets that support the development and implementation of initiatives that promote the delivery of effective mental hygiene services to its residents. These needs/priorities, in addition to being the product of a comprehensive needs assessment process, also reflect the realities of Hamilton County's very rural existence.

More specifically, Hamilton County is New York States only county that meets the federal governments criteria for designation as a frontier county (under six persons per square mile; Hamilton = 2.9). The needs and priorities below must then also be seen in the context of a county that –despite being the geographical equivalent of the state of Rhode Island –has no public transportation, no pharmacy, no hospital, and a population density that cannot viably support the vast majority of mental health programs designed to be funded through Medicaid. This reality leads to significant concerns on the part of the Hamilton County Community Services Board that current efforts to reform Medicaid, through a transition to a managed care model, may make it impossible to deliver accessible behavioral health services to the county's residents.

Discussions with OMH and OASAS to date have not been reassuring with respect to how Hamilton County can continue to provide in-county services, and the prospect of its residents needing to travel one to two hours one-way for services outside the county is simply not realistic.

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Wednesday, December 02, 2020 10:43:05 AM

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Q1

**Contact Information** 

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Q2 Hamilton County Community 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.

The pandemic has created an opportunity to re-imagine how services can be delivered to our county's population. The use of Telehealth in particular has been invaluable in meeting the service needs of our clients/ patients. We have worked closely with our Public Health Department, Probation, Jail, DSS and behavioral health treatment and prevention providers to insure continuation of services. Those without internet access have been disproportionately impacted but the use of telephonic services -while not necessarily as effective -have been used when necessary. These approaches have been used with both children and adult services.

#### 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.

See comments above. We do not currently have a waiting list for MH or SUD services and no-show rates are historically low.

#### 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.

Same as for MH as noted above.

#### 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.

I/DD services have been impacted mostly in the community where in-home waiver services have been negatively impacted as in-home services have been temporarily curtailed. Residential services have been impacted by quarantines which have limited family/ visitor contacts and community inclusion activities.

#### Q7

a. Mental Health providers

None identified at this time

#### Q8

b. SUD and problem gambling service providers:

None identified at this time

#### Q9

c. Developmental disability service providers:

None identified 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)

No Change

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

Day Treatment, Partial Hospitalization)

**Increased** 

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)

Increased

Q11

Respondent skipped this question

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

#### Q12

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

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

Treatment Facilities)

No Change

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

Day Treatment, Partial Hospitalization)

No Change

RESIDENTIAL (Support, Treatment, Unlicensed Housing)

Decreased

**EMERGENCY** (Comprehensive Psychiatric Emergency

Programs, Crisis Programs)

No Change

SUPPORT (Care Coordination, Education, Forensic, General,

Self-Help, Vocational)

No Change

#### Q13

Respondent skipped this question

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

#### Q14

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

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 co from transition to telehealth?	unty remain closed or are offering limited services now, apart
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	Respondent skipped this question
If you would like to add any detail about your responses above, please do so in the space below:	
Q20	No
d. As a result of COVID-19, are any mental health programs in your county closing operations permanently? If yes, list program name(s) and type(s).	
Q21	Respondent skipped this question
If you would like to add any detail about your responses above, please do so in the space below:	
Q22	No
e. Did any mental health programs in your county close due to workforce issues (e.g. staff infections, recruitment/retention issues)?	
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 w operations plans?	ithin your county implemented existing continuity of
0	
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

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

Program-level 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:

We did not experience any obstacles to treatment provision as describe above

#### Q34

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

the county's provider continued to provide services via telehealth

#### Q35

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

the county's provider provided services via telehealth

#### **Q36**

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

the county's provider provided services via telehealth

#### **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 Increased
RESIDENTIAL No Change
CRISIS No Change

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 Decreased

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.

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Q43 No

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

#### Q44

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

accessibility to in-home services, day treatment options

### Q45

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

It would be helpful to understand the impact of service delivery in home and community-based services

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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: