



Office of
Mental Health

Office of Alcoholism and
Substance Abuse Services

Office for People With
Developmental Disabilities

2019 Local Services Plan For Mental Hygiene Services

Oneida Co. Department of Mental Health
July 18, 2018

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Oneida Co. Department of Mental Health	70210	(LGU)
Executive Summary	Optional	Not Completed
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Community Services Board Roster	Required	Certified
Alcoholism and Substance Abuse Subcommittee Roster	Required	Certified
Mental Health Subcommittee Roster	Required	Certified
Developmental Disabilities Subcommittee Roster	Required	Certified
Mental Hygiene Local Planning Assurance	Required	Certified

Mental Hygiene Goals and Objectives Form
 Oneida Co. Department of Mental Health (70210)
 Certified: Todd Stokes (6/29/18)

1. Overall Needs Assessment by Population (Required)

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

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

Please Explain:

The biggest change to our community came with the closure of Mohawk Valley Psychiatric Center, our long term psychiatric hospital, in 2012. This has continued to impact all areas involved in care for seriously and persistently mentally ill individuals in Oneida County.

- Long term inpatient people receiving care were either sent to out of county psychiatric hospitals or discharged to housing providers in the community. This caused the housing opportunities for others in the community to be drastically reduced. Housing programs that had traditionally been transitional became more long term, eliminating the availability of transitional housing.
- Transportation is an ongoing problem in many counties in upstate New York. Upstate is primarily rural with cities, towns and villages scattered throughout. Many of the smaller towns and villages do not provide mental health or substance abuse treatment. Those with a mental illness or substance abuse problem are left to find transportation on their own.
- Oneida County does not currently have any respite beds which presents ongoing difficulties for those in immediate need for crisis care. This puts an enormous burden on emergency rooms and inpatient units. Other more suitable options must be made available.
- Individuals with dual diagnosis of Mentally Ill/Intellectually Disabled require increasingly more high need services. They are caught between the Mental Health and OPWDD system. OPWDD continues to disqualify individuals who often end up in MH system. Without the continued support of the DD system these individuals will not be successful in living in the community.
- Those with mental health and substance issues are placed in housing that does not require any form of SA treatment. As a result, mental health treatment is often adversely affected by this situation.
- Oneida county is rich with cultural diversity due to a large influx of refugees and immigrants. There are currently 59 different languages spoken in the community which makes it extremely difficult to assist them with the many challenges they face, not the least of which is mental health.

b) Indicate how the level of unmet **substance use disorder (SUD) needs**, in general, has changed over the past year: Improved Stayed the Same Worsened

Please Explain:

c) Indicate how the level of unmet needs of the **developmentally disabled** population, in general, has changed in the past year: Improved Stayed the Same Worsened

Please Explain:

2. Goals Based On Local Needs

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 checked="" type="checkbox"/>
d) Workforce Recruitment and Retention (service system)	<input checked="" 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"/>	
g) Inpatient Treatment Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
h) Recovery and Support Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
i) Reducing Stigma	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
j) SUD Outpatient Services	<input checked="" type="checkbox"/>		
k) SUD Residential Treatment Services	<input checked="" type="checkbox"/>		
l) Heroin and Opioid Programs and Services	<input checked="" type="checkbox"/>		
m) Coordination/Integration with Other Systems for SUD clients	<input checked="" type="checkbox"/>		

n) Mental Health Clinic	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
o) Other Mental Health Outpatient Services (non-clinic)	<input checked="" 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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
r) Developmental Disability Children Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
s) Developmental Disability Adult Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
t) Developmental Disability Student/Transition Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
u) Developmental Disability Respite Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
v) Developmental Disability Family Supports	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
w) Developmental Disability Self-Directed Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
x) Autism Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
y) Developmental Disability Person Centered Planning	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
z) Developmental Disability Residential Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
aa) Developmental Disability Front Door	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
ab) Developmental Disability Service Coordination	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
ac) Other Need (Specify in Background Information)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2a. Housing - Background Information

By all appearances Oneida County is rich in housing opportunities for individuals with Severe and Persistent Mental Illness. Catholic Charities in our county provides 41 apartments through the Pathways Apartment Program and 62 beds in their community residences. There are 34 beds at State Operated Community Residences and 52 SRO's through the Utica Rescue Mission. In addition, there are 202 Supported Housing apartments through Catholic Charities and Upstate Cerebral Palsy. With the loss of Mohawk Valley Psychiatric Center, much of the mental health housing filled with high need individuals from the hospitals causing a shortage for new individuals in need of housing. All current housing programs are at or near capacity with wait lists. Older Utica housing also has high lead levels that are unhealthy for anyone.

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

To work with and provide support to agencies advancing housing projects, specifically housing for individuals with mental health issues. There is also a need for housing that specifically addresses certain dual diagnoses including those who are mentally ill and either aging, intellectually delayed or have substance abuse issues.

Objective Statement

Objective 1: Objective 1: Oneida County Department of Mental Health will continue to work closely with the Housing and Homeless Coalition Continuum of Care to encourage and support housing projects for those individuals with a mental illness.

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

Objective 2: OCDMH will also encourage the development of housing projects specifically for those with a dual diagnosis that could provide staffing unique to those individual needs.

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

Change Over Past 12 Months (Optional)

Oneida County Department of Mental Health has developed a strong relationship with the Housing and Homeless Coalition Continuum of Care with a member of the staff serving on the board. Last year the DePaul project was approved for Rome, NY which will create 80 affordable housing units with 50% dedicated to individuals with mental illness. Three full time staff will be dedicated to providing assistance to those individuals. The apartments will be lead safe and there will be a van for transportation for medical and other purposes. Referrals for those units will go through the LGU's ASPOAA. Another DePaul project is in the works for Utica which, if approved, will provide 60 affordable housing units, 50% of which will be dedicated to the mentally ill. The same supports will be provided as those at the Rome project.

The Oneida County Department of Mental Health Department also encourages the development of housing that will specifically address the needs of our dually diagnosed populations.

2b. Transportation - Background Information

Oneida County is both urban and rural. Access to clinic appointments, substance abuse treatment facilities and social day programs can be extremely challenging. With access to bus routes is available they are often cumbersome and long. In addition it is often difficult for individuals with a serious mental illness to even obtain or understand a bus schedule.

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

Oneida County Department of Mental Health will continue to explore possibilities for assisting individuals with a serious mental illness in

obtaining transportation.

Objective Statement

Objective 1: To make available to those individuals needing assistance. A current list of agencies that are currently providing transportation and current bus schedules.

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

Objective 2: To identify innovative ways to address the transportation needs of those with mental health needs.

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

Change Over Past 12 Months (Optional)

There have been few changes in the last 12 months regarding transportation for individuals with a serious mental illness. There are some options available now.

- **The Utica Senior Center Retired and Senior Volunteer Program uses seniors 55 and older who volunteer to take other seniors who need transportation to their medical appointments. They also oversee “Way To Go” which provides resources for obtaining access to transportation.**
- **Catholic Charities provides transportation for individuals with a mental health diagnosis to attend their social recreation programs and in some cases for medical appointments.**
- **The Rescue Mission provides transportation to medical appointments for their 52 residents**
- **The State Operated Community Residences have a van for transporting their 24 residents to medical appointments and their social day programs. They also have a Mobile Intervention Team that can provide transportation for those individuals linked to the York Street State Clinic.**
- **The new housing project in Rome will provide transportation to the 40 living there who are diagnosed with a mental illness.**

All of these programs serve a narrowly defined population which means they are not available to everyone. The goal is to come up with options that make obtaining transportation more available to those we serve.

2c. Crisis Services - Background Information

Oneida County is faced with a large number of homeless individuals who for various reasons are difficult to house. In 2017, 101 individuals who were referred through ASPOAA were homeless at the time of their referral. The largest number of those referrals were individuals dually diagnosed with substance abuse issues coming out of treatment facilities. The combination of their mental illness and substance abuse had caused them to lose their housing. The second largest cause for homelessness was people whose behaviors due to their mental illness had caused them to be evicted. The third largest group were those individuals with a mental illness being released from State OMH Prisons. The end result is that often individuals who are in crisis have nowhere to go.

There are also those individuals who may have housing but experience a mental break and need crisis or respite services.

Oneida County currently does not have any respite beds available for those in crisis and all the housing programs have waitlists.

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 of the Oneida County Department of Mental Health continues to be developing resources to provide crisis respite beds.

Objective Statement

Objective 1: To identify those agencies who will dedicate beds for crisis respite services.

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

Change Over Past 12 Months (Optional)

Local and state government representatives recognize the need for crisis/respite services and are working with The Oneida County Department of Mental Health to find solutions. We continue to work with the Community Service Board, subcommittees, local agencies and Central New York Care Collaborative (DSRIP) to create innovative answers to the problem.

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

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

Objective Statement

Change Over Past 12 Months (Optional)

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

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

Change Over Past 12 Months (Optional)

2f. Prevention - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

2g. Inpatient Treatment Services - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

2h. Recovery and Support Services - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

2i. Reducing Stigma - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

2j. SUD Outpatient Services - Background Information

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

Change Over Past 12 Months (Optional)

2k. SUD Residential Treatment Services - Background Information

At one time Oneida County Department of Mental Health had a Dual Recovery Network that included recovery treatment as a requirement for housing. In 2013 the program was discontinued. Since that time, the number of individuals with mental health and substance abuse issues continues to increase. Without a comprehensive program which addresses substance abuse, mental health and housing needs, positive recovery outcomes are less likely to occur.

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

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? Yes No

Develop a Dual Recovery Program to address the needs of those with mental health/substance abuse diagnoses.

Objective Statement

Objective 1: To provide a comprehensive housing program for mentally ill/chemically addicted (MICA) individuals. This would support a process of change through which individuals improve their overall health and wellness, live a self-directed life, and strive to reach their full potential.

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

Change Over Past 12 Months (Optional)

The Department has recognized the need to go back to a dual recovery network model that will address housing needs while reinforcing recovery.

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

The heroin and opioid epidemic has been recognized nationally and Oneida County is no different. We are marshalling all possible forces to combat the problem.

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

To make accessible all forms of treatment necessary to enable successful recovery and prevent drug related deaths.

Objective Statement

Objective 1: To bring together community leaders, students, affected family members and concerned citizens to review relevant data, bring together their experiences, suggest solutions and advise the Opiate Task Force Committee

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

Objective 2: To determine the needs of our community that must be served by methadone treatment and adjust services as necessary

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

Objective 3: To evaluate the needs and services provided by the Regional Open Access Center for Addictions

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

Objective 4: To expand and enhance prevention efforts

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

Change Over Past 12 Months (Optional)

The Opiate Task Force Steering Committee in Oneida County previously chaired by the county executive is now co-chaired by the County Executive, the Oneida County Sheriff and the Oneida County District Attorney. The committee now also includes professionals from health care, education, faith-based organizations as well as members of the community.

In addition to the Rome Methadone Clinic, a second methadone clinic has opened in Utica.

2m. Coordination/Integration with Other Systems for SUD clients - Background Information

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

Change Over Past 12 Months (Optional)

2n. Mental Health Clinic - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

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

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

Objective Statement

Change Over Past 12 Months (Optional)

2p. Mental Health Care Coordination - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

2q. Developmental Disability Clinical Services - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

2r. Developmental Disability Children Services - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

2s. Developmental Disability Adult Services - Background Information

In 2016, the Director of Oneida County Mental Health's Disability Services retired after many years in the position. Unfortunately this happened at a time when services through OPWDD were declining and individuals with a dual diagnosis of Mentally Ill/Intellectually Delayed were increasingly having difficulties find housing and appropriate programming. In addition, aging parents who had kept their children in the family home believing that housing and services would be available for them when the time came were finding out this was not the case. Those dually diagnosed have quickly become some of the most difficult to help because they are caught between the two systems.

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

Increase communication and collaboration between hospitals, agency providers, crisis intervention services, and OMH/OPWDD state entities to ensure integrative services are provided to this population.

Objective Statement

Objective 1: We continue to work with the Community Service Board, subcommittees, local agencies and Central New York Care Collaborative (DSRIP) to create innovative answers to the problem.

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

Change Over Past 12 Months (Optional)

Over the last year the Developmental Disabilities Sub-Committee has focused on housing need issues. The new Mental Health Director has been attending quarterly meetings at the OPWDD regional office along with reestablishing and building new relationships with key stakeholders. The county has also been a part of planning and implementation of the Systemic Therapeutic Assessment Resources and Treatment (START) program in our region. This program will be fully set to begin in April of 2019. This program's foundation is established through the partnership of Mental Health and OPWDD by providing crisis intervention for the developmentally delayed/mentally ill population.

2t. Developmental Disability Student/Transition Services - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

2u. Developmental Disability Respite Services - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

2v. Developmental Disability Family Supports - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

2w. Developmental Disability Self-Directed Services - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

2x. Autism Services - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

2y. Developmental Disability Person Centered Planning - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

2z. Developmental Disability Residential Services - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

2aa. Developmental Disability Front Door - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

2ab. Developmental Disability Service Coordination - Background Information

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

Objective Statement

Change Over Past 12 Months (Optional)

3. Goals Based On State Initiatives

State Initiative

	Applicable State Agenc(ies)		
	OASAS	OMH	OPWDD
a) Medicaid Redesign	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b) Delivery System Reform Incentive Payment (DSRIP) Program	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c) Regional Planning Consortiums (RPCs)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d) NYS Department of Health Prevention Agenda	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

3a. Medicaid Redesign - Background Information

Oneida County Department of Mental Health has been involved in the development of the DSRIP initiative since the beginning of the 5 year initiative.

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

Goal Statement- Is this Goal a priority goal? Yes No

Oneida County will continue to actively engage in improving access to primary and behavioral health care and reduce hospital admissions.

Objective Statement

Change Over Past 12 Months (Optional)

3b. Delivery System Reform Incentive Payment (DSRIP) Program - Background Information

Oneida County has actively participated in our Regional Care Collaborative being represented on EPAC, Care Transitions and several committees.

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

Goal Statement- Is this Goal a priority goal? Yes No

Objective Statement

Objective 1: To support the ongoing efforts of the Central New York Care Collaborative to reach goals of DSRIP initiative.

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

Objective 2: To establish BHCC and Value Based Payment programs with provider community and improve relationships with MCO's .

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

Change Over Past 12 Months (Optional)

3c. Regional Planning Consortiums (RPCs) - Background Information

Oneida County is actively engaged with RPC and is represented on the Board/Committee to improve health care initiatives.

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

Goal Statement- Is this Goal a priority goal? Yes No

Objective Statement

Change Over Past 12 Months (Optional)

3d. NYS Department of Health Prevention Agenda - Background Information

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

Goal Statement- Is this Goal a priority goal? Yes No

Objective Statement

Change Over Past 12 Months (Optional)

4. Other Goals (Optional)

Other Goals - Background Information

Refugee Resettlement –Background Information

Utica, New York has a 200 year history of inviting immigrants and refugees to settle in the community. Originally this included Italian, Irish, German, Polish and Arab populations.

In 1981 the Mohawk Valley Resource Center for Refugees opened in the city. By 2013 they had resettled 15,000 individuals from countries including Bhutan, Bosnia, Burma, Cambodia, Iraq, Laos, Russia and the former Soviet Union, Vietnam, Sudan and Somalia. As of 2018, there are 59 different languages spoken in the Utica school system!

Needless to say, there are numerous challenges that need to be addressed by a community taking on this high number of non-English speaking residents. Necessities such as public assistance, housing, health insurance, transportation, and a host of other life needs must be considered in addition to medical and healthcare needs that, if unaddressed, contribute to poor health and mental health outcomes. Treating the mental health needs of the refugee population must take into consideration the effects of complex trauma, such as war, torture, extreme poverty, and exposure to violence which may manifest as physical illnesses and impact care-seeking behavior.

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

Goal Statement- Is this Goal a priority goal (Only 5 goals can be selected as priority goals)? Yes No

The Oneida County Department of Mental Health, working in conjunction with the Mohawk Valley Resource Center for Refugees, the Neighborhood Center, Inc. and other agencies will address the many needs that exist for the diverse non-English speaking residents of our community.

Objective Statement

Objective 1: To identify and address the challenges and barriers that exist for the non-English speaking populations that are enriching our city and reversing the decline in the city’s population.

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

Change Over Past 12 Months (Optional)

The Oneida County Department of Mental Health, in collaboration with the Neighborhood Center, Inc., Mohawk Valley Health System (MVHS), Rochester Primary Care Network (RPCN) and the Mohawk Valley Resource Center for Refugees (“the Refugee Center”) has been awarded \$538,893 through the Central New York Care Collaborative. The funds will be used for an innovative project that we believe will increase access to primary care reduce hospital admissions/readmissions and address the social determinant of health (SDH) needs for individuals in the refugee and immigrant community.

Office of Mental Health Agency Planning Survey
 Oneida Co. Department of Mental Health (70210)
 Certified: Todd Stokes (6/29/18)

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

	Recruitment	Retention	Please indicate the reasons for difficulty, when known (e.g., no available workers, salary competitiveness, etc.), along with any other detail that may be useful to understand the iss
Psychiatrist			
Physician (non-psychiatrist)			
Psychologist (PhD/PsyD)			
Nurse Practitioner			
RN/LPN (non-NP)			
Physician Assistant			
LMSW			
LCSW			
Licensed Mental Health Practitioner (LMHC/LMFT/LCAT/Lpsy)			
Peer specialist			
Family peer advocate			

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

Unfortunately, Oneida County only had one agency response to the survey so is unable to provide an accurate account of this information.

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

Unfortunately, Oneida County only had one agency response to the survey so is unable to provide an accurate account of this information.

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

Community Service Board Roster
 Oneida Co. Department of Mental Health (70210)
 Certified: Todd Stokes (5/21/18)

Note: There must be 15 board members (counties under 100,000 population may opt for a 9-member board). Indicate if member is a licensed physician or certified psychologist. Under item labeled "Represents", enter the name of the member's organization or enter "Consumer", "Family", "Public Representative", etc. to indicate the particular community interest being represented. Members shall serve four-year staggered terms.

Chairperson
Name Ken Abramczyk
Physician No
Psychologist No
Represents Community
Term Expires
eMail kennethabramczyk@gmail.com

Member
Name Lorraine Krup
Physician No
Psychologist No
Represents Community
Term Expires
eMail none

Member
Name Mike Romano
Physician No
Psychologist No
Represents Office for the Aging
Term Expires
eMail mromano@ocgov.net

Member
Name Susan Spina
Physician No
Psychologist No
Represents Mohawk Valley Health Systems
Term Expires
eMail sspina@mvnhealth.com

Member
Name Gretchen Sprock
Physician No
Psychologist No
Represents Community Member
Term Expires
eMail csprock@twcnny.rr.com

Member
Name Colleen Fahy-Box
Physician No
Psychologist No
Represents Oneida County DSS
Term Expires
eMail cbox@ocgov.net

Member
Name Dr. Joanne Joseph
Physician No
Psychologist Yes
Represents SUNY POLY
Term Expires
eMail josephj@sunyit.edu

Member
Name Phyllis Ellis
Physician No
Psychologist No
Represents Oneida County Health Department
Term Expires
eMail pellis@ocgov.net

Member
Name Morris Pearson
Physician No
Psychologist No
Represents MVCC
Term Expires
eMail mpearson@mvcc.edu

Member
Name David Bovi
Physician No
Psychologist No
Represents Community
Term Expires
eMail bovef@twcnny.rr.com

Member
Name Burt Danovitz
Physician No
Psychologist No
Represents Community
Term Expires
eMail burt@danovitz.com

Member
Name David Mathis
Physician No
Psychologist No
Represents Oneida County Workforce Development
Term Expires

Member

Name Robin E. O'Brien

Physician No

Psychologist No

Represents Oneida County Dept of Mental Health

Term Expires

eMail robrien@ocgov.net

Alcoholism and Substance Abuse Subcommittee Roster
 Oneida Co. Department of Mental Health (70210)
 Certified: Todd Stokes (5/10/18)

Note: The subcommittee shall have no more than nine members. Three subcommittee members must be members of the board; those members should be identified here. Under item labeled "Represents", enter the name of the member's organization or enter "Consumer", "Family", "Public Representative", etc. to indicate the perspective the member brings to the subcommittee.

Member		Member	
Name	Ambie Daniel	Name	Danyelle Kampf
Represents	Center for Family Life and Recovery	Represents	Utica Rescue Mission
eMail	ADaniel@cflrinc.org	eMail	danyelle.kampf@uticamission.org
Is CSB Member	No	Is CSB Member	No
Member		Member	
Name	Colleen Callaghan-Kirkland	Name	Bonnie Carr
Represents	Liberty Management	Represents	Insight House
eMail	ccallaghan@libertymgt.com	eMail	bcarr@insighthouse.com
Is CSB Member	No	Is CSB Member	No
Member		Member	
Name	Melissa Clake	Name	Sarah Decker
Represents	Tully Hill	Represents	Utica Rescue Mission
eMail	mclake@tullyhill.com	eMail	sarah.decker@uticamission.org
Is CSB Member	No	Is CSB Member	No
Member		Member	
Name	Becky Eisenhut	Name	Patty King
eMail	Becky.eisenhut@nysna.org	Represents	CNY Services
Is CSB Member	No	eMail	pking@cnyservices.org
		Is CSB Member	No
Member		Member	
Name		Name	
eMail		eMail	
Is CSB Member	No	Is CSB Member	No
Member		Member	
Name	Cathy Matusz	Name	Andrea Mazzini
Represents	Catholic Charities	eMail	Andrea.mazzini@rb.com
eMail	cmatusz@ccharityom.org	Is CSB Member	No
Is CSB Member	No		
Member		Member	
Name	Dawn Muldoon	Name	Charles Pucillo
eMail		Represents	Rome Hospital
Is CSB Member	No	eMail	cpucillo@romehospital.org
		Is CSB Member	No
Member		Member	
Name		Name	Reggie Rogers
eMail		eMail	reggie@pyhit.org
Is CSB Member	No	Is CSB Member	No
Member		Member	
Name	Nicole Siriano	Name	Denise Spagnola

Represents Utica Rescue Mission
eMail nicole.siriano@uticamission.org
Is CSB Member No

eMail despag@peoplec.com
Is CSB Member No

Member
Name Admira Spahic
Represents Beacon Center
eMail aspahic@beaconcenter.net
Is CSB Member No

Member
Name Donna Vitagliano
Represents Insight House
eMail dvitagliano@insighthouse.com
Is CSB Member No

Member
Name Johanna Williams
Represents CNY Services
eMail Jwilliams@cnyservices.org
Is CSB Member No

Member
Name Robert Wood
Represents Delta Recovery Services
eMail deltarecoveryservices@verizon.net
Is CSB Member No

Mental Health Subcommittee Roster
 Oneida Co. Department of Mental Health (70210)
 Certified: Todd Stokes (6/29/18)

Note: The subcommittee shall have no more than eleven members. Three subcommittee members must be members of the board; those members should be identified here. Under item labeled "Represents", enter the name of the member's organization or enter "Consumer", "Family", "Public Representative", etc. to indicate the perspective the member brings to the subcommittee.

Member
Name Margaret Batson
Represents UPSTATE CEREBRAL PALSY (CHBS)
eMail margaret.batson@upstatecp.org
Is CSB Member No

Member
Name Melissa Carey
Represents NEIGHBORHOOD CENTER
eMail melissac@neighborhoodctr.org
Is CSB Member No

Member
Name Diane Dimeo
Represents CATHOLIC CHARITIES
eMail ddimeo@ccharityom.org
Is CSB Member No

Member
Name Gordy Dunham
Represents Community Health & Behavioral Services
eMail gordy.dunham@upstatecp.org
Is CSB Member No

Member
Name Dennis English
Represents RCIL
eMail dennis.english@rcil.com
Is CSB Member No

Member
Name Ken Fehlner
Represents Human Technologies Corp
eMail kenf@htcorp.net
Is CSB Member No

Member
Name John King
eMail
Is CSB Member No

Member
Name Beth Meeusen
Represents RCIL
eMail beth.meeusen@rcil.com
Is CSB Member No

Member
Name Hilda Pomeroy
Represents Office for the Aging
eMail hpomeroy@ocgov.net
Is CSB Member No

Member
Name Susan Radell
Represents FAXTON-ST. LUKE'S HEALTHCARE
eMail sradell@mvnhealth.com
Is CSB Member No

Member
Name Jodie Ronan
Represents COMPEER
eMail jronan@compeermv.org
Is CSB Member No

Member
Name Donald Russ
Represents C/O UTICA RESCUE MISSION
eMail jackie.franklin@uticamission.org
Is CSB Member No

Member
Name John Scranton
eMail
Is CSB Member No

Member
Name John Shepherd
Represents NAMI
eMail
Is CSB Member No

Member
Name Hank Visalli
Represents Utica Rescue Mission
eMail hank.visalli@uticamission.org

Is CSB Member

No

Developmental Disabilities Subcommittee Roster
 Oneida Co. Department of Mental Health (70210)
 Certified: Todd Stokes (5/9/18)

Note: The subcommittee shall have no more than nine members. Three subcommittee members must be members of the board; those members should be identified here. Under item labeled "Represents", enter the name of the member's organization or enter "Consumer", "Family", "Public Representative", etc. to indicate the perspective the member brings to the subcommittee.

Member
Name Ashlee Thompson
Represents Rome Hospital
eMail athompson1@romehospital.org
Is CSB Member No

Member
Name Brian Wermter
Represents CNY Quest
eMail brian@cnyquest.com
Is CSB Member No

Member
Name Colleen B.
Represents Neighborhood Center
eMail colleenb@neighborhoodctr.org
Is CSB Member No

Member
Name Christine Valerio
Represents Cayuga Centers
eMail christine.valerio@cayugacenters.org
Is CSB Member No

Member
Name Karen Hoffman
Represents NYSARC, Inc.
eMail kahoffman@thearcolc.org
Is CSB Member No

Member
Name Debra Nowicki
Represents OPWDD
eMail debra.nowicki@opwdd.ny.gov
Is CSB Member No

Member
Name Kathy Bishop
eMail bisbur1@earthlink.net
Is CSB Member No

Member
Name E. Brescia
Represents Family Advocacy Center
eMail ebrescia@familyadvocacycenter.org
Is CSB Member No

Member
Name Kathy Van Nederynen
Represents CABVI
eMail kathyv@cabvi.org
Is CSB Member No

Member
Name Lisa Frank
Represents Sitrin
eMail lfrank@sitrin.com
Is CSB Member No

Member
Name Carole Flinn
Represents Oneida County Dept of Mental Health
eMail cflinn@ocgov.net
Is CSB Member No

Member
Name M. Busa
Represents Family Advocacy Center
eMail mbusa@familyadvocacycenter.org
Is CSB Member No

Member
Name George Graziadei
Represents Resource Center for Independent Living
eMail ggraziadei@rcil.com
Is CSB Member No

Member
Name Mary Beth Redmond
Represents Upstate Cerebral Palsy
eMail marybeth.redmond@upstatecp.org
Is CSB Member No

Member
Name Janis Jones-Flansburg
Represents Resource Center for Independent Living
eMail jjones-flansburg@rcil.com

Member
Name Jean Jacobson
Represents Kelberman Center
eMail jean.jacobson@kelbermancenter.org
Is CSB Member No

Is CSB Member No

Member

Name John Lenhart
Represents OPWDD
eMail john.lenhart@opwdd.ny.gov
Is CSB Member No

Member

Name Kate Warden
Represents Mohawk Valley Health System
eMail kwarden@mvhealthsystem.org
Is CSB Member No

Member

Name Kathy Beaver
Represents Central Association for the Blind & Visually Impaired
eMail kathyb@cabvi.org
Is CSB Member No

Member

Name Joseph Salvemini
Represents Office for the Aging
eMail jsalvemini@ocgov.net
Is CSB Member No

Member

Name Vicki Yarwood
Represents Community Member
eMail vicki.yarwood6@gamil.com
Is CSB Member No

Member

Name Kristin Ward
Represents OPWDD
eMail kristin.s.ward@opwdd.ny.gov
Is CSB Member No

Member

Name Laurie Pendergraft
Represents OPWDD
eMail laurie.pendergraft@opwdd.ny.gov
Is CSB Member No

Member

Name Linda Montemurro
Represents Neighborhood Center
eMail lindam@neighborhoodctr.org
Is CSB Member No

Member

Name Lori Decker
Represents Rome Hospital
eMail ldecker@romehospital.org
Is CSB Member No

Member

Name Manon Gouse
Represents Rome Hospital
eMail mgouse@romehospital.org
Is CSB Member No

Member

Name Marie Mahar
Represents OPWDD
eMail marie.mahar@opwdd.ny.gov
Is CSB Member No

Member

Name Mary Hall
Represents OPWDD
eMail mary.e.hall@opwdd.ny.gov
Is CSB Member No

Member

Name Michael Brigano
Represents OPWDD
eMail michael.o.brigano@opwdd.ny.gov
Is CSB Member No

Member

Name Michelle Langdon
Represents OPWDD
eMail michelle.l.langdon@opwdd.ny.gov
Is CSB Member No

Member

Name Mickey Chilluffo
Represents OPWDD
eMail mickey.chilluffo@opwdd.ny.gov
Is CSB Member No

Member

Name Robin E. O'Brien
Represents Oneida County Dept of Mental Health
eMail robrien@ocgov.net
Is CSB Member No

Member

Name Jeannette Pavlus
Represents Oneida County Dept of Mental Health
eMail jpavlus@ocgov.net

Member

Name Selden Przelomicc
Represents Oneida County Dept of Mental Health
eMail sprzelomicc@ocgov.net

Is CSB Member No

Is CSB Member No

Member

Name Todd Stokes

Represents Oneida County Dept of Mental Health

eMail tstokes@ocgov.net

Is CSB Member No

2019 Mental Hygiene Local Planning Assurance
Oneida Co. Department of Mental Health (70210)
Certified: Todd Stokes (5/21/18)

Pursuant to Article 41 of the Mental Hygiene Law, we assure and certify that:

Representatives of facilities of the offices of the department; directors of district developmental services offices; directors of hospital-based mental health services; directors of community mental health centers, voluntary agencies; persons and families who receive services and advocates; other providers of services have been formally invited to participate in, and provide information for, the local planning process relative to the development of the Local Services Plan;

The Community Services Board and the Subcommittees for Alcoholism and Substance Abuse, Mental Health, and Developmental Disabilities have provided advice to the Director of Community Services and have participated in the development of the Local Services Plan. The full Board and the Subcommittees have had an opportunity to review and comment on the contents of the plan and have received the completed document. Any disputes which may have arisen, as part of the local planning process regarding elements of the plan, have been or will be addressed in accordance with procedures outlined in Mental Hygiene Law Section 41.16(c);

The Community Services Board and the Subcommittees for Alcoholism and Substance Abuse, Mental Health, and Developmental Disabilities meet regularly during the year, and the Board has established bylaws for its operation, has defined the number of officers and members that will comprise a quorum, and has membership which is broadly representative of the age, sex, race, and other ethnic characteristics of the area served. The Board has established procedures to ensure that all meetings are conducted in accordance with the Open Meetings Law, which requires that meetings of public bodies be open to the general public, that advance public notice of meetings be given, and that minutes be taken of all meetings and be available to the public.

OASAS, OMH and OPWDD accept the certified 2019 Local Services Planning Assurance form in the Online County Planning System as the official LGU assurance that the above conditions have been met for the 2019 Local Services planning process.