



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

Madison Co. Mental Health Department
July 18, 2018

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Madison Co. Mental Health Department	70750	(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
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Mental Hygiene Goals and Objectives Form
Madison Co. Mental Health Department (70750)
Certified: Teisha Cook (5/29/18)

I. 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:

Following are updates on relevant projects or services:

- Pathways Wellness Center- OMH recovery center has continued to grow and expand their services provided. Currently they offer on and off site services to about 80 peers in the community. They also provide peer groups to the jail and have hosted several community events, including Father's Group.
- Family Counseling Services has opened a second OMH clinic in Morrisville. This much needed service provides easy access to services for folks in the Southern part of the county. FCS has been collaborating with colleges and hospitals in their new location, and continue to ramp up with staff and clients.
- Mobile Crisis Services – Liberty Resources provides mobile crisis services to children and adults, regardless of their insurance coverage. The program operates from 5pm-12am weeknights and from 6 am-12am weekends. Mobile crisis have served several residents in their homes in order to divert hospitalizations. Referrals come from police, clinic providers or the community, and this newer services has already enhanced the care that the community has access to.
- Family Support of CNY – After a county RFP process, Family Support of CNY was awarded the RFP for family peer support services for Madison County. The providers work with caregivers/parents of children with severe behavioral and emotional concerns. Peer support is offered individually or in groups, and Family Support of CNY has also hosted several trainings for caregivers since they were awarded the RFP.
- Crisis Intervention Team – In the fall 2017, the county hosted the second Crisis Intervention Training for police. The CIT team meets monthly to discuss high needs people and to also implement protocols/troubleshoot mobile crisis. During the day, in cooperation with the Oneida City Police, we have been able to divert hospitalizations by having the police bring people to the county MH clinic for support and evaluation.
- Liberty Resources Crisis Beds – Liberty continues to operate a peer-run crisis beds program in Oneida.
- Suicide Coalition – see additional attached document.
- Consumer Services PROS – Madison County and the Community Services Board approved a new contract with the PROS clinic to expand the services that they would be able to provide to people without Medicaid and to provide more funding for vocational services.

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:

- SBH: SBH has been implementing a few different projects over the past year. They were awarded STR grant money to provide peer services in this county through their Center of Treatment Innovation project (COTI). The peers have been involved in existing committees such as CIT, and have also been reaching out to community agencies, elected officials and libraries. SBH also has the Regional Open Access Crisis Center which has given the peers a place to bring folks in need of treatment. Lastly, SBH has started providing services to inmates at the county jail.
- Liberty Resources – Liberty Resources' application to convert existing 819 services to 820 and offer rehabilitation and reintegration services was submitted and approved by OASAS. The next step is to submit a proposed budget for the services. After taking into consideration the staffing requirements and the rate of reimbursement other agencies offering these services are receiving, Liberty has determined that the costs would significantly exceed revenue, therefore, the agency is developing some alternate proposals for consideration.
- FCS: As stated above, FCS has opened a second site in Morrisville. FCS also has a SUD clinic on site. Due to a staffing shortage, the SUD clinic has not opened, but FCS plans to open in the next couple of months.

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

Please Explain:

Member of the DD committee have discussed the staffing shortage and the negative impact this has had on programs. Also, the DD population and providers are getting ready to move to care coordination which has been challenging. OPWDD will be implementing the NY START program in this region and have been meeting with stakeholders to discuss the implementation plan. NYSTART is a community-based program that provides crisis prevention to individuals with intellectual or developmental disabilities and who also have complex behavioral and mental health needs. Of course, individuals with I/DD are also able to access Liberty's mobile crisis program.

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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Employment/ Job Opportunities (clients)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Prevention	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>
i) Reducing Stigma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) SUD Outpatient Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k) SUD Residential Treatment Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l) Heroin and Opioid Programs and Services	<input type="checkbox"/>	<input 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 type="checkbox"/>
o) Other Mental Health Outpatient Services (non-clinic)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p) Mental Health Care Coordination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q) Developmental Disability Clinical Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r) Developmental Disability Children Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s) Developmental Disability Adult Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
t) Developmental Disability Student/Transition Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
u) Developmental Disability Respite Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v) Developmental Disability Family Supports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
w) Developmental Disability Self-Directed Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
x) Autism Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
y) Developmental Disability Person Centered Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
z) Developmental Disability Residential Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
aa) Developmental Disability Front Door	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ab) Developmental Disability Service Coordination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ac) Other Need (Specify in Background Information)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2a. Housing - Background Information

Access to safe and affordable housing continues to be a need for all three disability areas. Madison County does not have a homeless shelter, so homeless people need to be housed at hotels or shelters in other counties. This is not ideal and can disrupt the client's participation in services locally. Madison County's local DSS has been in initial talks with agencies to establish a small shelter for this county. However, this project would likely take several years to develop and have approved. Liberty Resources has both OASAS and OMH housing in this county as well as the crisis beds program. Unfortunately, there are often lengthy wait lists to get into these programs, which means that the person still needs housing assistance while waiting to be admitted into a long-term housing program. Often this falls on local DSS to pay for a hotel for the person. Women who need OASAS housing have to go out of the county for this, as we have no option in this county for that population. Lastly, individuals who are sex offenders have extremely limited housing options and the LGU is often tasked with working with local providers to sort out housing for these individuals.

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

Goal is improving access to quality behavioral health services for Madison County residents.

Objective Statement

Objective 1: Prepare a comprehensive multi-year plan for the development of integrated housing for people with behavioral health and physical health related concerns

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

Change Over Past 12 Months (Optional)

As stated earlier, Liberty Resources is in the process of re-vamping their current housing OASAS structure to provide more clinical services in the program. Most other housing options in the county have remained the same over the last 12 months.

2b. Transportation - Background Information

As has been identified in the past, the lack of transportation options impacts residents' ability to get to appointments. Also, although Medicaid transportation is available for medical appointments, for individuals who do not have Medicaid, their transportation options are virtually non-existent. For all individuals who have transportation needs, there is limited transportation available to run errands or attend non-medical appointments. The Director of Community Services is a board member of the Madison County Rural Health Network, and the RHN has been developing a mobility management plan over the last year. The RHN has brought together groups of stakeholders and consultants to discuss the needs of the community, including the needs of special populations.

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

Goal is improving access to quality behavioral health services for Madison County residents.

Objective Statement

Objective 1: Active LGU participation in county-wide transportation meetings including advocacy for special needs.

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

Change Over Past 12 Months (Optional)

As stated above, the Madison County Rural Health Network has obtained a grant to do a needs assessment related to mobility management. This process includes meetings with key stakeholder groups as well as one on one interviews regarding special populations. The DCS did have an interview where topics addressed were: transportation needs for those who do not have Medicaid, non-medical transportation needs, the lack of knowledge/accessible information regarding current transportation options and lack of availability after 5 pm. This process will continue over the next six months and LGU will continue to be involved and advocate for special populations.

For update see attached document from Rural Health Network.

2c. Crisis Services - Background Information

Background/Need: In the last six months, Liberty Resources has started providing mobile crisis services to Madison County. This regional initiative takes different funding sources (State Aid, PPS funding, and CNY Director's Planning group funds) and offers mobile crisis to 5 counties, including Madison. We have used the infrastructure of the Crisis Intervention Team to develop protocols for the roll-out and implementation of the service, and have continued to troubleshoot the implementation at the CIT group meeting. Both the county OMH clinic and Family Counseling Services use mobile crisis as an enhancement to their after-hours crisis line service. Eventually, Liberty plans to have 24/7 access to this service and we will continue to educate the community on any changes.

The CNY Director's Planning group has a children's crisis respite contract with Cayuga Centers, and Madison County Children's SPOA has been able to use this services for a handful of high needs children over the past year. Due to some changes at Cayuga Centers, there has temporarily been a hold on referrals to them, but we anticipate in the next month or so being able to use them again, which would significantly enhance the mobile crisis programming, who may need respite for children they serve.

OPWDD will be implementing the NY START program in this region and have been meeting with stakeholders to discuss the implementation plan. NYSTART is a community-based program that provides crisis prevention to individuals with intellectual or developmental disabilities and who also have complex behavioral and mental health needs. Of course, individuals with I/DD are also able to access Liberty's mobile crisis program.

Lastly, SBH has opened the Regional Crisis Center for Addictions in Syracuse. This allows for individuals who are in need of substance abuse screening and referrals to have a 24/7 point of access for those services. Although there have not been many residents of Madison County to use the service, it is slowly expanding and integrating more into the service delivery system in the county. SBH peers have access to the program, and it is anticipated that they will be accessing the Regional Crisis Center for the individuals they serve.

The goal area of crisis services is also one identified through DSRIP as a need, and as identified above, funding from the PPS has allowed Liberty Resources to implement mobile crisis services.

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

Goal is improving access to quality behavioral health services for Madison County residents.

Objective Statement

Objective 1: Increase the availability of crisis services for consumers of behavioral health services

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

Change Over Past 12 Months (Optional)

See above for update.

2g. Inpatient Treatment Services - Background Information

Madison County does not have any psychiatric beds in the county, nor are there any inpatient substance abuse beds. Therefore, anyone seeking these services naturally goes out of county. The likelihood of getting inpatient beds in this county is not very high, but thankfully, there are a couple of new projects in the region that Madison County residents will benefit from. This was one of the highest needs identified on the local plan survey. A significant portion of the survey feedback focused on the heroin and opiate epidemic, and it is likely that the high number of responses indicating inpatient beds were needed were in fact related to the opiate crisis.

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):
 Developing either psychiatric beds or inpatient substance abuse beds in this county is largely out of the LGU's hands. As stated earlier, with the addition of some SBH services for this county, there will/is hopefully improved access to inpatient beds, through the Open Access Crisis Center. The COTI peers who are integrated into the community have the best chance of engaging folks who need treatment and are not involved in treatment. Also, the mobile crisis program will hopefully de-escalate crises and decrease the need for hospital beds.

Change Over Past 12 Months (Optional)

See above.

3. Goals Based On State Initiatives

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

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

As stated above, the mobile crisis program braids funding from the PPS, and the CNY Director's planning group to have establish the program in 5 counties. This regional initiative has taken a considerable amount of effort from the LGU's in the 5 counties partnering with the provider. The CNYDPG has assisted the provider in implementation, establishing target groups for the roll-out, and developing how to access the service in each county.

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

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

Goal is improving access to quality behavioral health services for Madison County residents.

Objective Statement

Change Over Past 12 Months (Optional)

4. Other Goals (Optional)

Other Goals - Background Information

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

Change Over Past 12 Months (Optional)

Attachments
<ul style="list-style-type: none"> • Mobility Management - summary for Teisha Cook 5.25.18.docx • Suicide Prevention Coalition activities 2017.docx

Office of Mental Health Agency Planning Survey
 Madison Co. Mental Health Department (70750)
 Certified: Teisha Cook (5/18/18)

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 issue
Psychiatrist	4	4	A lack of qualified providers in addition to extremely high pay rates for providers that are able to be hired.
Physician (non-psychiatrist)	3	3	Easier to locate providers, but some doctors are reluctant to work in MH setting.
Psychologist (PhD/PsyD)	2	2	Does not seem to be a priority for hiring, and most respondents identify that they do not hire psychologists. County clinic contracts for court-ordered exams.
Nurse Practitioner	4	4	Difficult to locate willing providers who want to travel to rural area; NP salary is increasing as demand increases, making this prohibitive as well
RN/LPN (non-NP)	2	2	Most RN/LPN candidates prefer hospital work due to higher salaries; sometimes difficult to find and reimbursement rates are low
Physician Assistant	3	3	Some agencies do not hire PAs; those that do have struggles related to high salary request and low reimbursement rates
LMSW	2	2	Lots of applicants; sometimes a struggle for commute to rural areas; use internships as feeder for hiring
LCSW	3	3	Some issues with finding qualified staff; high pay expectations; state changed HRSA score, dequalifying Madison County as HPSA
Licensed Mental Health Practitioner (LMHC/LMFT/LCAT/Lpsy)	2	2	Large supply, but quality can be low.
Peer specialist	2	2	Quality/retention is significant issue due to personnel problems
Family peer advocate	N/A	N/A	All respondents do not hire.

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

CASAC's are extremely difficult to hire and those that are available have extremely high pay expectations often with no work experience.

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

Four programs responded to this - The county mental health clinic; Family Counseling Services of Cortland County, and Consumer Services PROS.

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
 Madison Co. Mental Health Department (70750)
 Certified: Teisha Cook (3/30/18)

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 Virginia Whitford
Physician No
Psychologist No
Term Expires 12/31/2020
eMail virginiaaw@hgs-utica.com

Member
Name G. Richard Kinsella
Physician No
Psychologist No
Term Expires 12/31/2021
eMail kinsella@twcny.rr.com

Member
Name Sherry Willis Buglione
Physician No
Psychologist No
Represents Nursing
Term Expires 12/31/2019
eMail sbuglione@oneidahealthcare.org

Member
Name Brian McKee
Physician No
Psychologist No
Term Expires 12/31/2021
eMail bmckee38@icloud.com

Member
Name Joseph Pinard
Physician No
Psychologist No
Term Expires 12/31/2021
eMail johnp@diemolding.com

Member
Name Donald Moore
Physician No
Psychologist No
Term Expires 12/31/2021
eMail donald.moore@madisoncounty.ny.gov

Member
Name Andy Ali
Physician No
Psychologist No
Represents past consumer
Term Expires 12/31/2018
eMail andyali718@yahoo.com

Member
Name Denise Cavanaugh
Physician No
Psychologist No
Represents Community Agency Director
Term Expires 12/31/2020
eMail dcavanaugh@ccharityom.org

Alcoholism and Substance Abuse Subcommittee Roster

Madison Co. Mental Health Department (70750)

Certified: Teisha Cook (3/30/18)

Approved: Teisha Cook (4/12/18)

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.

Chairperson

Name Susan Jenkins
Represents prevention
eMail susan.jenkins1@gmail.com
Is CSB Member No

Member

Name Janelle Powell
Represents Peer
eMail jpowell@liberty-resources.org
Is CSB Member No

Member

Name Alan Stillman
Represents Provider
eMail astillman@fscortland.org
Is CSB Member No

Member

Name Melissa Jillson
Represents Housing provider
eMail mjillson@liberty-resources.org
Is CSB Member No

Member

Name Penny Williams
Represents prevention
eMail pwilliams@ocmboces.org
Is CSB Member No

Member

Name Rick Kinsella
Represents CSB
eMail rick.kinsella@gmail.com
Is CSB Member Yes

Member

Name Andy Ali
Represents Recovery/CSB
eMail andyali718@yahoo.com
Is CSB Member Yes

Mental Health Subcommittee Roster
 Madison Co. Mental Health Department (70750)
 Certified: Teisha Cook (3/30/18)
 Approved: Teisha Cook (4/12/18)

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		Member	
Name	Denise Cavanaugh	Name	Virginia Whitford
Represents	CSB	Represents	CSB
eMail	dcavanaugh@cchairtyom.org	eMail	virginiaw@hgs-utica.com
Is CSB Member	Yes	Is CSB Member	Yes

Member		Member	
Name	Janelle Powell	Name	Kimberly Centore
Represents	Peers	Represents	MH provider
eMail	jpowell@liberty-resources.org	eMail	kimberly.centore@madisoncounty.ny.gov
Is CSB Member	No	Is CSB Member	No

Member		Member	
Name	Paula Cerio	Name	Alan Stillman
Represents	behavioral health provider	Represents	MH provider
eMail	pcerio@liberty-resources.org	eMail	astillman@fcscotland.org
Is CSB Member	No	Is CSB Member	No

Member		Member	
Name	Mary Vanlieshout	Name	Sherry Buglione
Represents	PROS provider	Represents	Hospital
eMail	m.vanlieshout@csomc.org	eMail	sbuglione@oneidahealthcare.com
Is CSB Member	No	Is CSB Member	Yes

Member		Member	
Name	Brian McKee	Name	Donald Moore
Represents	child provider	Represents	community
eMail	bmckee@hgsutica.com	eMail	donald.moore@madisoncounty.ny.gov
Is CSB Member	Yes	Is CSB Member	Yes

Member	
Name	John Pinard
Represents	community
eMail	johnp@diemolding.com
Is CSB Member	Yes

Developmental Disabilities Subcommittee Roster
 Madison Co. Mental Health Department (70750)
 Certified: Teisha Cook (3/30/18)
 Approved: Teisha Cook (4/12/18)

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 Fran Burnham
Represents agency provider
eMail fran.burnham@arcofmc.org
Is CSB Member No

Member
Name Lori Zorn
Represents agency provider
eMail lzorn@ariseinc.org
Is CSB Member No

Member
Name Steve Russell
Represents agency provider
eMail srussell@liberty-resources.org
Is CSB Member No

Member
Name Mark Piersall
Represents agency provider
eMail mark@heritagefarminc.org
Is CSB Member No

Member
Name Christian Gutowski
Represents agency provider
eMail cgutowski@liberty-resources.org
Is CSB Member No

Member
Name Chris Evans
Represents DD provider
eMail chris.evans@arcofmc.org
Is CSB Member No

2019 Mental Hygiene Local Planning Assurance
Madison Co. Mental Health Department (70750)
Certified: Teisha Cook (5/29/18)

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.



Madison County Rural Health Council

100 Eaton Street, PO Box 187, Morrisville, NY 13408

www.mcruralhealthcouncil.org Telephone: 315-447-7625/315-454-2108

In early 2016, the Madison County Rural Health Council applied for funds through the Madison County Planning Department from the New York State Department of Transportation to begin a Mobility Management Plan. The funds were received in late 2016, the planning process began in early 2017 with key Madison County Stakeholders and the Mobility Management Plan was completed in December 2017.

Mobility Management is a transportation strategy that focuses more on the customer and their needs and meeting these needs through the coordinated use of transportation providers.

In 2018, to begin implementing the Mobility Management Plan, the Madison County Rural Health Council will hire a Mobility Manager when the next round of funding from the New York State Department of Transportation is released. These funds are anticipated to be released in mid-2018.

Key actions outlined in the plan for 2018 also include establishing an Advisory Committee (which has been accomplished) and developing a database that will include all transportation options in Madison County to facilitate efforts to coordinate transportation resources. Exploring and seeking funding to support expanded transportation services is also a key action for 2018-19.

Access to transportation services is considered a social determinant of health. Transportation services are fundamental for healthy communities.



Activities, Events and Programs- January - December 2017

Trainings/Presentations

- Mental Health First Aid
- Perinatal Depression
- safeTALK – 3 deliveries
- Trauma Informed Care
- Impact of Trauma- CIT
- Safe Zone Training
- EAPA presentation on Family Support
- Formula for a Happy Life

Community Awareness Events/ Tabling Events

- Community Event- Be the Voice- Anthony DeMario- speaker
- Community Event- Beyond the Silence- Kyle Schaeffer- speaker
- Informational table at Senator Valesky's Senior Fair
- Informational table at Out of the Darkness Walk

Postvention

- Two trainings- July and December facilitated by Garra Lloyd-Lester

Meetings

- Regular Suicide Prevention Coalition meetings
- Monthly Crisis Intervention Team meetings

Miscellaneous

- Teen suicide prevention video produced by Mayo Clinic <https://www.youtube.com/watch?v=3BBYqa7bhto> was on BRiDGES Facebook page with paid ad, PSAs in Glenwood and Hamilton movie theaters- #BeThe1To Be There in Hamilton and Talk Saves Lives video at the Glenwood in Oneida.
- #BeThe1To materials for community events, Open Houses, etc.- #BeThe1To on one side and suicide hotline number on the other- wallet sized cards
- Candles in the window at BRiDGES in September for suicide prevention month
- Annual Suicide Prevention Conference in Albany- coalition members attending
- Enamel suicide prevention pins were delivered to approximately 40 Human Resource professionals in our region, with ribbons and resources for employees on the hotline
- LGBTQIA support group for individuals ages 13-21 started December 13
- Distributed information on crisis services for Veterans to 15 area businesses

