



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

Cattaraugus Co Community Services Dept
July 16, 2018

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Planning Form	LGU/Provider/PRU	Status
Cattaraugus Co Community Services Dept	70690	(LGU)
Executive Summary	Optional	Not Completed
Goals and Objectives Form	Required	Certified
Office of Mental Health Agency Planning Survey	Required	Certified
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
 Cattaraugus Co Community Services Dept (70690)
 Certified: Mary O'Leary (6/1/18)

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:

In reviewing the major goals of the Local Services Plan, Cattaraugus County's mental health services needs have remained the same. We are fortunate to have multiple agencies in the county that effectively collaborate to ensure services continue to be provided to the mentally ill population. An area that has worsened is the Workforce Recruitment/Retention, which has been ongoing for many years and is slowly progressing. We are beginning to focus more on employment and determining success of finding and maintaining employment. We also continue to struggle with transportation needs. We also continue to struggle with finding psychiatric providers. We currently work with a psychiatric practice who is spread out in New York and Pennsylvania in no less than 10 locations.

- 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:

Cattaraugus County is not alone in its fight against the heroin and opioid epidemic in New York State. Although Narcan is administered to save lives after a heroin/opioid overdose, the drug itself is not a preventative and further education and outreach are needed to combat the problem. There are no existing inpatient detox or stabilization beds in Cattaraugus County, and there are not adequate housing to support community integration for SUD individuals. There is only one provider agency in Cattaraugus County, and even though CARES (Council on Addiction Recovery Services, Inc.) expanded services to other regions of the county, there are not adequate services available to treat the numbers of people who need intervention. The gaps in service are worsening before adequate improvements can be put in place to combat the multiple problems. Incarcerated individuals in the county jail may be given vivitrol therapy, but then the individuals must be appropriately referred to CARES to continue that same therapy on discharge from the jail. Barriers include transportation, insurance coverage, community integration, and program space to accommodate another individual in need of medically assisted therapy. Until CARES can complete its Rapid Expansion project in 2018 to add licensed beds, detox, and stabilization as well as improved community integration, the conditions continue as they were last year. Cattaraugus County would also look at other opportunities for capital funding or grants to expand their capacity for substance abuse especially for women as at this time there is more of a need to house women than men in their supportive living program. CARES is expanding its' MAT capabilities by planning a move to a new location in Salamanca NY that offers medical offices in the same location as the substance abuse provider. This allows for the MAT program to meet the requirements needed to be successful. Cattaraugus County is also hoping to be funded to begin substance abuse treatment in the jail so that the person receiving treatment in the jail can be treated while in the jail, move to the CARES program officially upon release from jail and can be referred to the appropriate level of care to reduce the recidivism rate.

- 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:

Overall, the provision of services for the Developmentally Disabled population in Cattaraugus County has remained the same, with the exception of worsening concerns regarding Workforce Recruitment/Retention, Children's Services, and Autism Services. In general, Workforce and Children's Services are closely related by the lack of adequate staff to meet the needs of this population, including provision of services and completion of necessary assessments to determine eligibility or level of services to be provided. The changing landscape for care coordination in Developmental Disabilities also makes it difficult to do long term planning for this population. The model being used mimics the Care Coordination model used in Mental Health but it is unclear whether this will truly meet the needs of the population. This change is slated for 7/1/2018 and the two CCO's have been identified and have begun the process of changing the MSC's to their employees and implementing the new program including identifying any new providers. This has created a lot of stress due to the "unknown". Our Developmental Disabilities Committee has spent a lot of time discussing how these changes might impact the clients and families served. There is ongoing discussion around transportation as well.

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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f) Prevention	<input checked="" 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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

i) Reducing Stigma	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
j) SUD Outpatient Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k) SUD Residential Treatment Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l) Heroin and Opioid Programs and Services	<input checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>
o) Other Mental Health Outpatient Services (non-clinic)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
p) Mental Health Care Coordination	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>
s) Developmental Disability Adult Services	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
t) Developmental Disability Student/Transition Services	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
u) Developmental Disability Respite Services	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" 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 checked="" 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

The 2018 Point-In-Time (PIT) sweep for homeless census did not reflect a large number of people; however, the numbers presenting themselves at the local shelter and housing agencies show there continues to be a need for appropriate affordable housing in our County. In 2017 Housing Options Made Easy(HOME) averaged assisting 19 people with housing needs. Southern Tier Environments for Living(STEL) filled their 30 beds over 95% of the time, and Cattaraugus County Community Action had 128 people enrolled in their housing program in 2017. Community Actions Homeless Shelter assisted 128 people as well in 2017. Department of Social Services (DSS) for housing assistance continues to show the need for appropriate housing. In 2017, the Temporary Assistance Unit (TAU) in DSS continued to process a high number of emergency cases(417 cases which is over 200 less than in the 2016 numbers. Emergencies are usually situations where a household is facing eviction or a utility shut-off. The TAU also provides aid to individuals and families who become homeless as a result of relapse from jail or prison, including sex offenders. This puts high stress on the housing resources that are available to meet the needs of the other residents of the county. Even though individuals need housing and may be appropriate for scattered site beds (supportive housing), the individual often does not meet criteria for the housing facility that actually has a vacancy (i.e., beds licensed for step-down from psychiatric centers or acute inpatient). There continues to be a waiting list for each of these housing programs for example, there are typically 10-15 people waiting for STEL Housing, due to the limiting criteria for placement. STEL Residents must also apply for Section 8 Housing, which referral process often delays discharge from the STEL program and creates a long-term wait list.

Eagles Nest Respite House is an OMH-funded shared service with Chautauqua County and is located in Jamestown, NY (Chautauqua County). Eagles Nest documented 68 guests from Cattaraugus County in 2017 with a total of 44 guests being return guests and 24 being new to the Eagles Nest. The Eagles Nest continues its' mission of providing respite to avoid psychiatric hospitalization.

Additionally, women and women with children are in need of inpatient addictions treatment and community residence level of services to prevent relapse after discharge to the community, but there are no beds currently licensed for women and women with children in Cattaraugus County at this time. It is planned that the Rapid Expansion through OASAS will address this need in Cattaraugus County but other resources may be needed for overflow. Chautauqua County may be one of the resources.

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

CARes (Council on Addiction Recovery Services, Inc.) will add 20 beds at its Weston Manor residence facility, including beds for women and women with children.

Objective Statement

Change Over Past 12 Months (Optional)

CARes (Council on Addiction Recovery Services, Inc.) applied for a Rapid Expansion Grant in 2016 to increase bed capacity under new OASAS 820-regulations. The funding awarded CARes the opportunity to add 20 licenses for beds at Weston Manor. CARes is hoping to have this completed by the Fall of 2018.

DSS also provides emergency housing for 417 people in 2017. This number is down from the 2016 numbers.

2b. Transportation - Background Information

Transportation is always a struggle in vastly rural Cattaraugus County. Olean Area Transit Services (OATS) is the only public transit system and serves only the City of Olean with a single connection to the City of Salamanca, where the Seneca Nation of Indians created its own transit system from Salamanca to Irving, including a stop at the county seat in Little Valley. Individuals who cannot navigate the limited public transportation due to physical needs (i.e., no wheelchair access on the local bus) must use other modes of transportation, such as a taxi service where available. There is a lack of flexibility in Medicaid Travel, likely due to the rural nature of county demographics. Medicaid Travel continues to use several different drivers and agencies even when local providers could meet the needs of the local programs. Using more local providers could result in lower costs for the transportation and waiting time reduction. Discussion around this issue has not resulted in changes being made.

The Rehabilitation Center now independently provides medical transport for their clients because they can navigate and manage the individual's appointment schedule more successfully than trying to coordinate with a third party vendor, such as Medical Answering Services, LLC (Medicaid Travel). Kinley Hill Homeless Shelter, Eagles Nest Respite House, Veterans' Services, and Foundations for Change PROS Program all provide limited (van) transportation for their agencies' ridership, but only individuals directly involved with those agencies have access to that transportation. As an example, Kinley Hill provided transportation 563 times in 2017 averaging 4.4 rides per person due to inability to use public transportation for appointments although the majority of transports would have been provided by some other form of transportation (Medicaid travel, public transportation or family /friends).

Simply put, there are few transportation options for consumers to participate in general life activities (such as employment, shopping, or church and social activities) or to attend necessary appointments (such as social security hearings or medical and dental appointments). Sadly, many consumers in our county rely on local ambulance services to transport them to the Emergency Room when illness strikes.

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):
There is no long-term plan to resolve the transportation issue in Cattaraugus County, and funding a feasibility study or expansion of the public transit system is unlikely due to fiscal constraints of the New York State Property Tax Cap.

Change Over Past 12 Months (Optional)

2c. Crisis Services - Background Information

Eagles Nest Respite House peer staff answer the Warm Line (phone) and Text Line for Cattaraugus and Chautauqua Counties, and over 50% of callers typically report the Warm Line helps them to avoid going to a hospital or ED for mental health assessment. Olean General Hospital maintains the Crisis Hotline and answered 60 calls in October and 150 calls in January 2017. The Crisis Hotline is often used as a referral line for housing needs, transportation, and more recently increased substance abuse referrals. The ability to give information about Substance Abuse services has been a new component in Cattaraugus County. Community Services provides after-hours crisis service for 30 people, as well as taking over 80 crisis calls during business hours.

Due to closure of inpatient psychiatric beds, the County needs more wrap-around services; however, there is a shortage of personnel, transportation, and licensed staff to provide face-to-face crisis service. The Mobile Intervention Team cannot really provide ongoing crisis intervention, and Mobile Transitional Support Team (serving adults only) is involved more in engaging people in services than in crisis intervention. The Mobile Transitional Support Team provided services to 119 people this year (an average of 25 a month)

Youth in Community Residence placement were evaluated at the Emergency Room 16 times in 2017. The CR staff express concerns regarding the long ER wait times to be assessed and that often times the initial concern has passed in the several hours the child waited to be assessed.

Six regional proposals were submitted to OPWDD for \$200,000 in Regional Developmental Disabilities Family Support Services for ages 21 and over. Rates are set and regulations are being established for Respite and Crisis Respite, and agencies will be charged with providing the service. However, the only respite for kids is through HCBS Waiver at the Community Residence. Additionally, START services for the developmentally disabled population have never fully been established in Cattaraugus County, so there are currently no crisis intervention services for the developmentally disabled. Cattaraugus County is one of the counties receiving Family Support Services for Substance Abuse through Savethemichaelsoftheworld, who was awarded the grant to provide these services in this county. This organization has presented at the Heroin Opioid Task Force and has held a public forum in Cattaraugus County.

Southern Tier Health Care System (STHCS, an FQHC) continued to distribute Narcan kits in 2017. There were 18 reported overdose deaths in 2017 an increase of one from 2016. Other overdose deaths are likely but death statistics are not considered accurate as most death certificates state "cardiac arrest," even if an overdose is known. Narcan was used 45 times in 2017, while 68 kits were used in all of 2016. Three or more doses were administered 8 times in 2017 and 4 times in 2016. Although each of these instances is considered an SUD Crisis, there is no clear process after any "save" to ensure the individual is referred for treatment or follow-up. STHCS reports these distribution and emergency/save statistics to the Cattaraugus County Heroin/Opioid Task Force and to the LGU.

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

Cattaraugus County will provide a crisis hotline for SUD. Cattaraugus County will benefit from the Open Access Center grant through Horizon Health Services in Erie County.

Objective Statement

Objective 1: CARES will establish a 24/7/365 toll-free Crisis Hotline for SUD services in Cattaraugus County.

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

Objective 2: Cattaraugus County will actively participate in the development /planning of an Open Access Center in Cattaraugus County

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

Change Over Past 12 Months (Optional)

New York State Office of Mental Health offered Cattaraugus County the opportunity to create an ACT Team, and the LGU is awaiting the funding guidelines in order to proceed with the RFP process. The ACT team will begin services in Cattaraugus County in June 2018.

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

Agencies can't fill entry-level positions and can't keep trained staff with Masters' level of education in rural Cattaraugus County. Workforce retention is difficult for any direct care service agency. Some agencies offers recruitment incentives to existing staff for bringing referrals who actually stay 30- to 90-day durations. Although generous benefit packages and pay increases are offered, along with management training, to assist with staff retention, there are still several factors working against such efforts. Specifically, entry level wages have been stagnant due to lost revenues as a result of "rate rationalization;" Medicaid reimbursement rates simply are not adequate to support living wages for Direct Service Providers even with increases in pay for direct service staff. The economy has improved, so jobs are also more readily available at higher rates of pay. The Affordable Care Act made healthcare more affordable, so benefits are not as much of a retention factor as they were previously. Staff at local agencies report in exit interviews that they are leaving for better pay or because they no longer want to do a direct service job with its inherent stress and regulations when they can take a similar paying job without the level of demands.

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):
It is hoped that the minimum wage increase in 2018 will help to alleviate some of the direct care workforce shortages.

Change Over Past 12 Months (Optional)

Craig Zuckerman, PhD, provides psychological assessments for children's services in Cattaraugus County announced his retirement in 2017 but apparently is still practicing but is the only other psychologists/neuro-psychologists are located in other counties. There are only a very few psychiatrists or nurse practitioners in Cattaraugus County, and Community Services contracts psychiatric services with Jamestown Psychiatric, PC, located in Chautauqua County. Jamestown Psychiatric contracts services with many local mental health, SUD, and inpatient facilities, with their team of providers sharing provision of psychiatric coverage throughout the Southern Tier. This puts an extra burden on the agencies to provide adequate psychiatric coverage to the individual recipients they serve. Many professionals and doctors seek a more urban/cultural center, and it is difficult to recruit in rural Cattaraugus County, even with the sign-on bonus that Jamestown Psychiatric, PC, has offered in the past year. Cattaraugus County will be exploring a waiver with the Office of Mental Health to provide telepsychiatry services and has also had recent conversations with a bordering county in reference to sharing a new provider they are bringing on this Summer.

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

Directions in Independent Living, The Rehabilitation Center, and Community Services all provide employment services and collaborate with other agencies, i.e., Dept. of Social Services, OneStop, ACCESS-VR, etc. There remain gaps in services for "work exempt" individuals (i.e., recently discharged from acute inpatient or enrolled in active addictions treatment) who could still be researching employment options while in treatment. Providers recognize that clients have more success in treatment when they are actively "working at something," whether it's compensated employment or other community activities, such as volunteer work. We continue to work toward increasing our employment/training/volunteering opportunities in Cattaraugus County.

Needs of the developmentally disabled are being met since transition from Sheltered Workplace, as agencies provide individuals with several options for prevocational and employment supports, including Community Prevocational (consumers developed skills and strong work ethic through more than 2500 hours of volunteer activities at food banks, schools, hospital, colleges, and non-profits), Pathways to Employment (career exploration and intensive work experience), Employment Training Program (NYS-sponsored program provides wage coverage for individual to work for local employer/s), and Supported Employment (assist individuals to obtain and maintain competitive employment with career exploration, job placement, and job coaching with guarantee of long-term supports). ACCESS-VR also assists the developmentally disabled population with obtaining and maintaining competitive employment.

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

Consumers who receive employment services will achieve a 30% rate of successful employment for a 90-day duration.

Objective Statement

Objective 1: Agencies that offer employment services will report to the LGU on a quarterly basis the numbers of individuals referred for employment services, the number of referrals that actually enroll in an employment program, the number of participants that obtain successful employment or volunteer work, and the number of those same participants who maintain employment for at least 90 days.

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

Change Over Past 12 Months (Optional)

2f. Prevention - Background Information

Cattaraugus County is the fifth largest county in New York State. The Allegany Indian Reservation of the Seneca Nation of Indians is located within Cattaraugus County, making up 3.1% of the population in the County. There are disproportionate outcomes for the native population in our county, including drug and alcohol use, disproportionate rates of involvement in the criminal justice system, and higher rates of school dropout. Archival and qualitative data indicates there are a growing number of individuals in Cattaraugus County who are at risk for alcohol and prescription drug abuse, and more recently the heroin epidemic.

Southern Tier Health Care System (an FQHC) continued to distributed Narcan kits in 2017. There were 18 reported overdose deaths in 2017. Other overdose deaths are likely but death statistics are not considered accurate as most death certificates state "cardiac arrest," even if an overdose is known. Narcan was used 45 times in 2017 an decrease of 23 from 2016, this may be due to the ability to get Narcan independently. Three or more doses were administered 8 times in 2017 up from 2016. Women accounted for 14% of the people aided with Narcan in 2017. The predominant age group continued to be the 25-34 age group as reported in 2016. The percentage of users aged 35-44 years decreased in 2017.

In Cattaraugus County, Child Protective Services cases involved a parent's or child's drug/alcohol misuse in 85%(589 cases) of their cases. DSS also has strived to find relative placements for any foster care needs so the number of families being involved in "official" foster care has dropped significantly. Department of Social Services had to add new staff in Cattaraugus County to deal with the number of cases that involved drug/alcohol misuse.

Community Services continues to see struggles with gambling in the county and can do an assessment and motivational interviewing but CARES does not provide gambling addiction services at this time.

Additionally, Cattaraugus County struggles with the systemic issue of individuals with addiction and mental illness being channeled into the criminal justice system. The county jail population shows a significant percentage of individuals diagnosed with a substance abuse disorder. The mixture of mental health and substance abuse diagnoses follows: 80% Substance Abuse, 65% Mental Health, and over 55% have been identified with a dual diagnosis. Cattaraugus County's Mobile Transitional Support Team works with individuals discharging from jail in an effort to redirect those individuals into appropriate treatment and prevent relapse or return to incarceration. Cattaraugus County would be interested in becoming a pilot project for showing that providing substance abuse treatment in jail reduces recidivism in the jail and increases success with substance abuse treatment when released from the jail.

All provider agencies in Cattaraugus County recognize the need for prevention services, and strive to offer interventions that prevent relapse or readmission to the hospital for mental health or substance abuse, the jail or criminal justice system. SPOA is often the first point of referral to put services in place to engage individuals in appropriate treatment. Dept. Of Health provides prevention/wellness classes at the county jail, and if the jail refers individuals for mental health services, the individual is offered services at the clinics or at the PROS program. The Mobile Transitional Support Team saw 119 clients in 2017 and was successful in assisting with engagement in ongoing treatment and an average length of involvement between 3 and 6 months. The Mobile Intervention Team provides a wide array of services to children and families in Cattaraugus County but cannot provide regular face-to-face or crisis intervention service. Multiple providers routinely schedule Cross Systems meetings in Cattaraugus County to ensure appropriate services are in place to prevent relapse or readmission.

Finally, CARES provides alcohol and drug prevention education at public schools in Cattaraugus County through the Healthy Cattaraugus program. CARES staff also attend discharge planning meetings at the county jail and the hospital's behavioral health unit. CARES has trained Peer Recovery Coaches and is moving forward with credentialing of these individuals. This will be a benefit for the community.

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

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

50% of individuals who are referred for outpatient mental health or SUD treatment will attend their initial appointment.

Objective Statement

Objective 1: CARES and Community Services (Clinics and PROS) will report to the LGU on a quarterly basis the number of discharge referrals received from the Jail and the Behavioral Health Unit, the numbers of those referrals that keep their initial discharge/intake referral appointment, and the numbers of those who successfully enroll in treatment.

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

Change Over Past 12 Months (Optional)

Cattaraugus County has been tracking initial appointment attendance. The average for 2017 for MH discharge appointments averages 50%. The initial appointment attendance rate for SUD is averaging 30%. This will be reviewed in 2018 to see if improvements can be made. Many of our previously noted barriers point to why these numbers might be low.

2g. Inpatient Treatment Services - Background Information

Insurance companies are holding hospitals accountable for rapid readmissions, so Olean General Hospital must collaborate with provider agencies to decrease those readmission rates in Cattaraugus County. Provider Agencies attended discharge planning meetings at Olean General Hospital's Behavioral Health Unit prior to 2016. However, these meetings are not being held face to face but by phone which impacts the ability to collaborate. The hospital is also unwilling to discuss discharge planning with Cattaraugus County residents without a specific release which impacts collaboration negatively. The hospital has cited HIPAA compliance factors. Readmission to the inpatient acute care facility directly correlates to the individual's success in outpatient mental health or SUD treatment. Outpatient providers must have the inpatient treatment information to effectively intervene and prevent further relapse or readmission. One of the DSRIP focus groups is attempting to address the rapid readmission, discharge planning and initial hospital discharge appointments in a work group held at Olean General Hospital.

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

Outpatient Providers will request that every enrolled recipient of services sign a reciprocal Release of Information for Olean General Hospital to provide the individual's behavioral health unit or ER records for any assessment, admission, treatment, and/or discharge.

Objective Statement

Change Over Past 12 Months (Optional)

The releases have been signed by most discharges but the inability to meet for discharge planning with collaborative agencies has resulted in more barriers to the most appropriate care for clients. An example of this is a client whose primary diagnosis is substance abuse but is refusing a referral to the substance abuse provider is referred instead to mental health. A collaborative meeting would assist in all agencies working

together to get the most appropriate referral completed. CAREs has offered to come on the unit regularly to educate staff and clients however if a client says they don't want to go to CAREs the CAREs staff is told not to come to the unit rather than allowing the CAREs staff to provide education.

2h. Recovery and Support Services - Background Information

As noted previously with respect to housing and prevention services, there has been a gap in SUD recovery and support services. There is currently no detox or stabilization service in Cattaraugus County, and there are gaps in service for community integration from the drug/alcohol inpatient setting.

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

As noted above, CAREs will add 20 beds to its Weston Manor facility, to include detox and stabilization services as well as service to women and women with children. This will hopefully take place by the end of summer 2018.

Objective Statement

Change Over Past 12 Months (Optional)

2i. Reducing Stigma - Background Information

Housing Options Made Easy, Inc., provided training, presentations, and workshops for peer education in Cattaraugus County in 2017. CAREs provided Recovery Coach training in early 2018 and will provide additional courses so that enrollees can attain the 500-course hours required to become "Certified Recovery Coaches." Southern Tier Health Care Systems provides Narcan training to all EMS providers, law enforcement, friends and family of addicted people as noted in the Crisis section above.

Lenny Liguori, Executive Director of Directions in Independent Living, Inc., also sponsors a weekly television show, at which guest speakers are invited to promote services provided by their agencies. Most provider agencies recognize that people in need are on a mission to find services but otherwise do not look for additional education. The same families often attend local/town forums, and parents impacted by special needs seem to attend meetings and training more frequently than the general public. Some local high school students also meet graduation requirements for community service hours by providing childcare during meetings. Typically, after individuals are enrolled in appropriate services (i.e., OPWDD or housing needs are met), they tend to stop coming to education or outreach meetings. Cattaraugus County continues to provide education, support groups and psychoeducational groups through Directions in Independent Living or Housing Options Made Easy. These peer run agencies have a strong commitment to be an active part of their communities.

Cattaraugus County's Healthy Livable Communities Consortium is a strong collaboration of providers and agencies that meets quarterly to share service delivery and education information that each participant can then pass on to the individuals it serves. These quarterly meetings host 50 to 75 people each time. They continue to be awarded grants to improve the health and vitality of the residents of Cattaraugus County.

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

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

Provide at least 2 presentations for community education and outreach regarding mental health peer advocacy, SUD recovery, and Narcan training and support, as well as general distribution of referral/resource information.

Objective Statement

Objective 1: Housing Options Made Easy Inc. will provide 2 Community Trainings to Cattaraugus County about resources in the community

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

Objective 2: CAREs will provide at least 2 trainings on Peer Recovery Coaches and/or credentialing for this

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

Objective 3: Southern Tier Health Care System will provide Narcan training to EMS and Friends/Families; quarterly report to LGU the dates and number of attendees and kits distributed.

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

Objective 4: LGU or designee will attend quarterly Healthy Livable Communities Consortium meetings and report information back to Community Services Board and its Subcommittees to that all providers/agencies have referral/resource information.

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

Change Over Past 12 Months (Optional)

There have been alot of trainings this past year by all of these agencies and this will continue.

2j. SUD Outpatient Services - Background Information

CAREs (Council on Addiction Recovery Services, Inc.) provides SUD Outpatient Services in Cattaraugus County. Their main office is located in Olean, and they have satellite offices in Salamanca and in Gowanda. The main office in Olean also has a newly established MAT (Medically Assisted Treatment) Wing to monitor medication therapies of Suboxone and Vivitrol. CAREs also recently expanded its staff and provision of services to accommodate immediate treatment options, including inpatient referrals. CAREs is planning on expanding thier Salamanca office to allow for MAT too.

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

CAReS will open MAT Wings at both Salamanca and Gowanda satellites.

Objective Statement

Change Over Past 12 Months (Optional)

2k. SUD Residential Treatment Services - Background Information

CAReS applied for a Rapid Expansion Grant in 2016 to increase bed capacity under new OASAS 820-regulations. The funding awarded CAReS the opportunity to add 20 licenses for beds at Weston Manor. CAReS broke ground for that expansion in early 2018 with the hope of it being completed by the end of the Summer 2018 with the goal of opening those beds in early 2019. That expansion will also include detox and stabilization services, which are currently unavailable in Cattaraugus County, and will enhance the continuum of care for residential and outpatient programs. Women with children are currently in need of inpatient addictions treatment and community residence level of services to prevent relapse after discharge to the community. Over 50% of the women discharged from inpatient services relapse due to the drop-off in support. It remains very difficult to access inpatient treatment for chemical dependence in a timely manner. Although individuals are no longer required to fail outpatient treatment before even being considered for inpatient treatment, there is a currently very limited number of beds available regionally, and fiscal barriers still exist with insurance coverage. Currently the individual with medicaid cannot access treatment because medicaid will not pay for it, however a managed care company will pay for inpatient care. The process of switching from medicaid to managed care often takes so long to complete the person is no longer in inpatient treatment and then the insurance will not cover the inpatient stay because the person was not enrolled in managed care during their inpatient episode of care. This has recently been looked at and changes made to assist those individuals with medicaid.

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

CAReS will add 20 beds to its Weston Manor residential treatment facility.

Objective Statement

Change Over Past 12 Months (Optional)

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

Cattaraugus County is the fifth largest county in New York State. The Allegany Indian Reservation of the Seneca Nation of Indians is located within Cattaraugus County, making up 3.1% of the population in the County. There are disproportionate outcomes for the native population in our county, including drug and alcohol use, disproportionate rates of involvement in the criminal justice system, and higher rates of school dropout. Archival and qualitative data indicates there are a growing number of individuals in Cattaraugus County who are at risk for alcohol and prescription drug abuse, and more recently the heroin epidemic.

Southern Tier Health Care System (a non-profit, rural healthcare network) distributed Narcan kits in 2017 and did trainings with law enforcement, first responders, family and friends of addicted people. There were 11 reported overdose deaths in 2017. Other overdose deaths are likely but death statistics are not considered accurate as most death certificates state "cardiac arrest," even if an overdose is known. Narcan was used 45 times in 2017. Three or more doses were administered 8 times in 2017. Women accounted for 31% of the population administered Narcan in 2017, which is up from 23% in 2016. The predominant age group remained 25-34 years old in 2017. The percentage of users aged 35-44 years decreased in 2017.

As the opioid epidemic continues to impact Cattaraugus County, agencies are adapting to new services as funding becomes available and programs can be put into place. CAReS applied for a Rapid Expansion Grant to increase bed capacity under new OASAS 820-regulations. The funding awarded CAReS the opportunity to add 20 licenses for beds at Weston Manor. CAReS broke ground for that expansion in early 2018 with the goal of opening those beds in early 2019. That expansion will also include detox and stabilization services, which are currently unavailable in Cattaraugus County, and will enhance the continuum of care for residential and outpatient programs. Women with children are currently in need of inpatient addictions treatment and community residence level of services to prevent relapse after discharge to the community. Over 50% of the women discharged from inpatient services relapse due to the drop-off in support. It remains very difficult to access inpatient treatment for chemical dependence in a timely manner. Although individuals are no longer required to fail outpatient treatment before even being considered for inpatient treatment, there is a currently very limited number of beds available regionally, and fiscal barriers still exist with insurance coverage as discussed previously.

In Cattaraugus County, 85% of Child Protective Services cases involved a parent's or child's drug/alcohol misuse allegation in 2017. Cattaraugus DSS is striving to place children with relatives to decrease the number of out of home placements needed when this situation arises. The Department of Social Services had to add new staff in Cattaraugus County allowing the workers to address these difficult cases as well as others.

Additionally, Cattaraugus County struggles with the systemic issue of individuals with addiction and mental illness being channeled into the criminal justice system. The county jail population shows a significant percentage of individuals diagnosed with a substance abuse disorder. The mixture of mental health and substance abuse diagnoses follows: 80% Substance Abuse, 65% Mental Health, and over 55% have been identified with a dual diagnosis. Cattaraugus County's Mobile Transitional Support Team works with individuals discharging from jail in an effort to redirect those individuals into appropriate treatment and prevent relapse or return to incarceration. Cattaraugus County is also hoping to be chosen to pilot a substance abuse treatment in the jail to decrease recidivism and increase engagement.

CAReS receives referrals from multiple sources and provider agencies, as well as self-referrals from consumers, and CAReS has modified its internal policy and procedures to accommodate earlier and faster entry into outpatient treatment. If an individual is referred for inpatient treatment, staff can accompany that individual directly to the inpatient facility to ensure effective engagement. Past statistics showed that individuals who were not immediately enrolled in treatment (either outpatient or inpatient), often relapsed before enrollment and continued to struggle with recovery efforts. CAReS is participating in Rapid Expansion and Residential Redesign, which will help to ensure consumers have an opportunity for immediate entry into treatment and have better chance at successful recovery.

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

At least 50% of individuals referred for SUD treatment will enroll in appropriate outpatient treatment or be referred to inpatient treatment.

Objective Statement

Objective 1: CAREs will report to the LGU quarterly the total number of referrals received from outside sources or self-referrals and the number of those referrals enrolled in outpatient treatment or referred to an inpatient facility.

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

Change Over Past 12 Months (Optional)

2n. Mental Health Clinic - Background Information

Cattaraugus County is the fifth largest county in New York State. As of the 2010 census, New York State had a population of 19,378,102, of which Cattaraugus County's population was 80,317, including approximately 3% Native American residents and 26.5% of the total population being age 18 and under. In reviewing major goals of the Local Services Plan, Cattaraugus County has remained somewhat the same as far as mental health services. Cattaraugus County Department of Community Services had an average of over 1800 open cases in its clinics and satellite sites and an average of 117 clients seen monthly in the PROS program in 2017. The number of clients served in these mental health programs accounts for approximately 4% of the county's total population. We are fortunate to have multiple agencies in the county to ensure services continue to be provided to the mentally ill population. However, as noted above in the Workforce Recruitment section, it is increasingly difficult to recruit and retain professional staff, direct service staff (for the residential programs). It is very difficult to maintain psychiatrists and nurse practitioners. This difficulty directly impacts our clients.

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):

Referring to the Workforce Recruitment section, it is difficult to establish any goals for professional staff recruitment as benefits and sign-on packages have not proved successful. Basically, it will take a person with the right personality and values to appreciate the rural beauty of Cattaraugus County. Although cultural opportunities are attainable in a 2-hour drive, most young professionals prefer to live and work in the more urban areas while direct service staff struggle with the salary in relation to the amount of stress the job entails.

Change Over Past 12 Months (Optional)

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

As noted in Crisis Services above, Cattaraugus County has a shortage of crisis intervention services and would benefit from a Crisis Team. The ACT team (contracted through Spectrum Services out of Erie county) will be starting to provide their services in June 2018.

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

Cattaraugus County will provide a mobile crisis team for mental health crisis intervention.

Objective Statement

Objective 1: Cattaraugus County will explore programs that offer mobile crisis teams in western ny. With the planned IPA shared services will be expected.

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

Change Over Past 12 Months (Optional)

2p. Mental Health Care Coordination - Background Information

Health Homes are established and serve both adults and children. Health Home referrals are increasing and Care Coordinators seem to be successfully transitioning from case management roles and, as always, refer individuals to the OPWDD Front Door if diagnosis is appropriate. SPOA continues to work with the OPWDD population to assist with referrals to the Front Door when appropriate.

However, outreach and engagement is changing and the reimbursement rate is always in a state of change. This makes it very difficult to budget appropriately to meet the needs of the clients and referrals. Waiver Services for Children's Health Homes is also converting to Health Home Care Coordination. This is scheduled to begin in July 2018 and many questions are still unanswered about how this will impact the clients served by the Waiver Program.

The impact of these changes is not yet known.

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):

As always, the provider agencies in Cattaraugus County will collaborate to maintain the best possible provision of services to consumers we serve. In reality, our providers were collaborating and coordinating services for our consumers long before "Care Coordination" became a standard term in the field.

Change Over Past 12 Months (Optional)

Cattaraugus County continues to try to keep abreast of changes in information, expectations and agency involvement.

2r. Developmental Disability Children Services - Background Information

Craig Zuckerman, PhD, has been providing psychological assessments for children's services in Cattaraugus County, and he has indicated he will be retiring. The only other psychologists/neuro-psychologists are in other counties. Schools are mandated to provide the assessments for OPWDD referrals but can't diagnose. Thus, individuals in need can't get the appropriate assessments because there are no local providers. An outreach coordinator to engage with parents and explain services that are available would help to ease the distrust often evident in families first approaching the OPWDD system. It's more difficult to enroll children to start services because approved services are being provided by the schools, which are responsible for certain activities until a child reaches age 22. Parents tend to rely on the school system, and Respite, Care Coordination, and Crisis Behavior Intervention are basically the only services available outside of the school setting for kids, who are not yet eligible for the full range of services made available to adults.

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):
The Developmental Disabilities Subcommittee and agency representatives recognize the barriers identified above, but goals have not yet been identified to overcome those barriers and improve the level of services available to children. As noted in Workforce Recruitment/Retention above, there is a shortage of professional psychologists and psychiatrists to provide the childrens services (i.e., assessments) to determine OPWDD eligibility or to provide the actual services approved if the child is enrolled in OPWDD. There are programs in Erie County that would allow for and credential someone to be able to perform the assessments to assist with the identification and planning for the DD population.

Change Over Past 12 Months (Optional)

2s. Developmental Disability Adult Services - Background Information

There are no Adult Respite providers/agencies for the developmentally disabled population in Cattaraugus County. There has been discussion around funding for a program (START) program that would address emergent needs in the DD population but the program has not been available in Cattaraugus County. Efforts to find more information will need to be made.

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):
Even if the individual's "Consumer-Directed Services Plan" includes Adult Respite, the individual or family must still find an agency/staff to provide that service, and there is simply a shortage of direct care providers in Cattaraugus County for a number of reasons and as noted previously, reimbursement is a component of this.

Change Over Past 12 Months (Optional)

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

Directions in Independent Living has enrolled many children in Transition Services through schools in Cattaraugus County.
United Way's youth funding provides ticket passes to Boundless Connections, a new program that helps youth learn technology in Olean, NY.
Directions in Independent Living also just created an Employment Training program for youth.
Summer Camp is also widely available to developmentally disabled kids as an additional means of community integration.

Melissa Ball, SPOA Director, presents information in the community about resources available in the community(including the schools) for those with any type of disability. Although the Development Disabilities Subcommittee recognized this gap in services and provided links to referral resources over the past year, school CSEs must regularly receive updated service delivery information to ensure adequate supports are in place for the children they serve. As noted above, families trust the schools to provide mandated services until their child reaches age 22, and then transition becomes increasingly difficult if not already initiated.

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

Melissa Ball, SPOA Director, will continue to offer the community (including schools) updated referral resource information and will collaborate with Committees on Special Education if requested.

Objective Statement

Change Over Past 12 Months (Optional)

2u. Developmental Disability Respite Services - Background Information

As noted in Crisis Services above, six regional proposals were submitted to OPWDD for \$200,000 in Regional Developmental Disabilities Family Support Services for ages 21 and over. The organization savethemichaelsoftheworld was awarded the funding to provide Family Support Services in Cattaraugus County. They do not provide respite and are focused on substance abuse. This organization has come to Cattaraugus two times this Spring to present the services they can offer However, the only respite for kids is through HCBS Waiver at the Community Residence.

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

If "No", Please discuss any challenges that have precluded the development of a goal (e.g. external barriers):

Change Over Past 12 Months (Optional)

2x. Autism Services - Background Information

Anecdotally, Transition Services staff from Directions in Independent Living report having attended more manifestation hearings for children who are autistic, fighting to show that students' actions are directly related to their disability. That staff reports the amount of local services available for children on the autism spectrum are slim to none, and there are no openings at either Falk or Summit Schools. Directions in Independent Living has started an autism group for children, as the population of kids with autism has increased and there remains a lack of appropriate supports for that increase in the county. There are also no local ABA's (Adaptive Behavior Analysts) to help create effective plans for children with autism, and Committees on Special Education seem to lack a thorough understanding of special behavior needs for autistic children. There is a program in Erie county to credential a professional to be able to do this but it would be a decision made personally rather than a agency requiring it.+

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):

The Developmental Disabilities Subcommittee of the Cattaraugus County Community Services Board continues to discuss gaps in services. The broad range of concerns and lack of specific inventory or statistics makes it difficult to establish an immediate goals. The Subcommittee will review school population data with CSEs, along with service information for support groups and community education and the newest reports from OPWDD made available to the LGU's. The Subcommittee will also monitor the initiation of any new program that is initiated in the county to assure quality and adherence to person centered approaches.

Change Over Past 12 Months (Optional)

2z. Developmental Disability Residential Services - Background Information

There appeared to be adequate residential services for the developmentally disabled population. However, with increased community integration efforts, it is becoming more apparent that Cattaraugus County lacks safe and secure housing for consumers. Supported beds are limited to placement criteria, and as consumers age and transition to independent living, there must be adequate supports in place to meet their needs. OPWDD agencies are aware of this growing need and are not aware of a firm plan to address this. Additionally, as family members age and parents or caretakers become less capable of meeting the consumer's needs, it will put the burden back on the local agencies to find appropriate housing for these consumers. OPWDD has shared statistics with the LGU's about enrollment, those "actively seeking treatment" , completion of education (broken down by different settings) and new Front Door applications, residential services, "other services" , demographics and the ISPM and Level of Functioning. These statistics are still being reviewed and interpreted so that LGU's can obtain meaningful statistics that will help with short and long term planning.

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):

There is no specific goal for Residential Services other than to carefully monitor existing beds to ensure future needs are met as consumers age or transition to independent living and continue to advocate as the county experiences specific situations.

Change Over Past 12 Months (Optional)

Consumers in Cattaraugus County often have difficulty obtaining the required assessments to complete the Front Door application for OPWDD eligibilty detemination. As mentioned above the only psychologist in the county will be retiring soon and the clients will need to travel outside of Cattaraugus County fto obtain the needed assessments. Additionally , families tend to distrust new services especially for younger children who needs are met through the school system. SPOA reviews cases that might be appropriate for OPWDD and is beginning the process of working with 3 yo's who are in need of care coordination. Care Coordinators will often assist a family in the Front Door application if appropriate. Cattaraugus County providers also assist with scheduling a face to face interview with OPWDD if the application is initially declined. The LGU will monitor the timeliness of applications to ensure time frames are met for determination. Agencies who refer to the Front Door will report quarterly to the LGU the total number of applications pending , the number of applications submitted and he status of these applications.

3. Goals Based On State Initiatives

State Initiative	Applicable State Agenc(ies)		
	OASAS	OMH	OPWDD
a) Medicaid Redesign	<input checked="" 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 type="checkbox"/>
c) Regional Planning Consortiums (RPCs)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d) NYS Department of Health Prevention Agenda	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3a. Medicaid Redesign - Background Information

Community Services participates in Care Transitions Network through the OMH Continuous Quality Improvement initiative. Community Services and other provider agencies are participating in various groups and plans to become viable in the new rate system of Medicaid Managed Care Organizations and Value Based Payments. Several agencies are joining with IPAs (Independent Practice Associations) to collaborate to provide for the most efficient and effective services. Cattaraugus County providers continue to be involved in Millennium Collaborative Care's Community Crisis Stablization Treatment Response Protocols and the Behavioral Health component as well as a special project through DSRIP, but few of the agencies have any specific goals in DSRIP. Cattaraugus County Community Services and Housing Options Made Easy, Inc.,

Directions in Independent Living, and CAREs have all actively attended and participated in the RPC meetings and regional planning. All local direct care agencies have been invited to join one or another IPA. Thirteen rural counties have initiated the process to create Integrity Partners for Behavioral Health(Integrity) IPA(Independent Practice Association). Direct care agencies all assist with the Healthy Livable Community Consortium's health prevention agenda to promote mental health and prevent substance abuse, which include specific goals for Cattaraugus County. However, there are not specific disparities identified for mental health and substance abuse, so those will be the Consortium's focus in 2018-2019.

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):
There are no specific measurable goals, but Value Based Payments and the over-arching goal of reducing hospital readmission rates and ED visits are the primary focus of all oversight agencies at this time. Value Based Payments will not be addressing risk until 2019. Cattaraugus County was included in an award of 3.3 million dollars to Integrity as part of a Value Base Payment Readiness Grant. Integrity submitted their application to become an IPA and it is still pending.

Change Over Past 12 Months (Optional)

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

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

Change Over Past 12 Months (Optional)

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

RPC background and goals are included in the Medicaid Redesign narrative above. The RPC continues to survey its' members to determine the priorities for the region and the county.

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

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)

Office of Mental Health Agency Planning Survey
 Cattaraugus Co Community Services Dept (70690)
 Certified: Mary O'Leary (5/23/18)

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	5	5	psychiatrists do not live in the area; there are not enough psychiatrists interested in living in the rural western NY area; most of the psychiatrist the area are affiliated with one psychiatric group (Jamestown Psychiatri PC)
Physician (non-psychiatrist)	3	3	many physicians in our area will not accept Medicaid or uninsured individuals; they also tend to be unwilling to write psychotropic medications for stable patients
Psychologist (PhD/PsyD)	5	5	as referenced with psychiatrists, it's difficult to recruit/retain in our rural area
Nurse Practitioner	3	3	limited number of staff in this area; NPs from urban areas will not travel rural areas
RN/LPN (non-NP)	5	5	nursing positions are very difficult to fill; salary is an issue because urban providers are able to pay a higher salary
Physician Assistant	5	5	see comments above
LMSW	5	5	the ability to have this degree is time sensitive, around graduation there is a larger candidate pool but then employment is found in larger cities
LCSW	5	5	same as LCSW; salaries are not competitive in our rural area
Licensed Mental Health Practitioner (LMHC/LMFT/LCAT/Lpsy)	3	3	St. Bonaventure University offers this degree, and many of our staff are pulled from that alumni source, especially after internships with agencies
Peer specialist	3	3	peers are available but not certified, which impacts billing for services
Family peer advocate	2	2	The Rehab Center's Family Support Services program is very active and works with 35-40 families on average

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

3. Please indicate how many, if any, programs in your county provided input specific to this questions set.
 We have ongoing conversations in our SPOA Committee, Community Services Board and Subcommittees, and Cross Systems meetings regarding the recruitment and retention needs for service providers. Cattaraugus County has always exhibited solid collaboration among agency providers for mental health, substance abuse, and developmental disabilities. The same licensed professionals often provide services for many agencies within the county. For example, the psychiatric providers working for Jamestown Psychiatric provide hours of service at the mental health clinic, at the behavioral health unit at the hospital, and at the substance abuse provider agency in Cattaraugus County. Those same psychiatric providers also provide similar hours and services to agencies in adjoining counties.

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
 Cattaraugus Co Community Services Dept (70690)
 Certified: Rebecca Dash (5/22/18)

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.

Co-chairperson

Name Robert C. Wood
Physician No
Psychologist No
Represents Public Representative
Term Expires 12/31/2021
eMail robertwood@wildblue.net

Co-chairperson

Name Leonard X. Liguori
Physician No
Psychologist No
Represents Directions in Independent Living (Peer Agency)
Term Expires 12/31/2020
eMail lliguori@oleanilc.org

Member

Name William F. Mills, MD
Physician Yes
Psychologist No
Represents Upper Allegheny Health System (Hospitals)
Term Expires 12/31/2020
eMail wmills@uahs.org

Member

Name Sondra J. Fox, RN, MSN
Physician No
Psychologist No
Represents Public Representative
Term Expires 12/31/2021
eMail sondra@fox-financial.com

Member

Name Kevin D. Watkins, MD, MPH
Physician Yes
Psychologist No
Represents Cattaraugus County Dept. of Health
Term Expires 12/31/2021
eMail kdwatkins@cattco.org

Member

Name Amy George
Physician No
Psychologist No
Represents Cattaraugus County Sheriff's Office
Term Expires 12/31/2020
eMail aegeorge@cattco.org

Member

Name Daniel P. Piccioli
Physician No
Psychologist No
Represents Cattaraugus County Dept. of Social Services
Term Expires 12/31/2020
eMail dpiccioli@cattco.org

Member

Name Jon Baker
Physician No
Psychologist No
Represents School Admin. Retiree, Public Representative
Term Expires 12/31/2019
eMail basilira@gmail.com

Member

Name Gail F. Hammond
Physician No
Psychologist No
Represents School Psychologist, Special Education, Family
Term Expires 12/31/2019
eMail gailfhammond@gmail.com

Member

Name Mari L. Howard
Physician No
Psychologist No
Represents The Rehabilitation Center, Inc. (Peer Agency)
Term Expires 12/31/2019
eMail mhoward@rehabcenter.org

Member

Name Susan Labuhn
Physician No
Psychologist No

Member

Name Steve E. McCord
Physician No
Psychologist No

Represents Cattaraugus County Legislature
Term Expires 12/31/2019
eMail slabuhn@cattco.org

Member
Name Michael H. Prutsman, CPP, MA
Physician No
Psychologist No
Represents Council on Addiction Recovery Services,
Inc. (D&A Agency)
Term Expires 12/31/2021
eMail mprutsman@councilonaddiction.org

Represents Veterans' Services
Term Expires 12/31/2019
eMail semccord@cattco.org

Member
Name Douglas J Pisano
Physician No
Psychologist No
Represents Health Services Education
Term Expires 12/31/2020
eMail dpisano@sbu.edu

Alcoholism and Substance Abuse Subcommittee Roster

Cattaraugus Co Community Services Dept (70690)

Certified: Rebecca Dash (5/22/18)

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.

Co-chairperson

Name Michael H. Prutsman, CPP, MA
Represents CARES (D&A Agency)
eMail MPrutsman@CouncilOnAddiction.org
Is CSB Member Yes

Co-chairperson

Name Derah Black-Day, MS, MPA, CASAC-G
Represents TLC Health Network, Seneca Nation of Indians
eMail dblack-day@tlchealth.org
Is CSB Member No

Member

Name Donna L. Kahm, SPHR
Represents Southern Tier Health Care System, EMS
eMail DKahm@STHCS.org
Is CSB Member No

Member

Name William F. Mills, MD
Represents Upper Allegheny Health System (Hospital)
eMail WMills@UAHS.org
Is CSB Member Yes

Member

Name Kevin Watkins, MD, MPH
Represents Cattaraugus County Dept. of Health
eMail KDWatkins@CattCo.org
Is CSB Member Yes

Member

Name Wendy R. Maines
Represents Road to Recovery House, Public Representative
eMail WMain3@aol.com
Is CSB Member No

Member

Name Daniel P. Piccioli
Represents Cattaraugus County Dept. of Social Services
eMail DPPiccioli@CattCo.org
Is CSB Member Yes

Member

Name Galvin Anderson, MD
Represents University of Buffalo Medical
eMail UBGalvin1@yahoo.com
Is CSB Member No

Member

Name Megan M. Schmitt, CASAC
Represents TLC Health Network
eMail MSchmitt@TLCHealth.org
Is CSB Member No

Mental Health Subcommittee Roster
 Cattaraugus Co Community Services Dept (70690)
 Certified: Rebecca Dash (5/22/18)

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.

Co-chairperson

Name Jodi Fuller
Represents Cattaraugus Community Action, Public Representative
eMail JFuller@CCAction.org
Is CSB Member No

Co-chairperson

Name Kirsten Vincent
Represents Eagles Nest Respite Home (Peer Agency), Public Representative
eMail kirky317@yahoo.com
Is CSB Member No

Member

Name Sondra J. Fox, RN, MSN
Represents Public Representative
eMail Sondra@Fox-Financial.com
Is CSB Member Yes

Member

Name Amy George
Represents Sheriff's Office, Public Representative
eMail AEGeorge@CattCo.org
Is CSB Member Yes

Member

Name Leonard X. Liguori
Represents Directions in Independent Living (Peer Agency)
eMail LLiguori@OleanILC.org
Is CSB Member Yes

Member

Name Steve E. McCord
Represents Veterans' Services
eMail SEMcCord@CattCo.org
Is CSB Member Yes

Member

Name Mari L. Howard
Represents The Rehabilitation Center, Inc. (Peer Agency)
eMail MHoward@RehabCenter.org
Is CSB Member Yes

Member

Name Stephen S. Morgan III, CTRS, LMHC
Represents The Rehabilitation Center, Inc. (Peer Agency)
eMail SMorgan@RehabCenter.org
Is CSB Member No

Developmental Disabilities Subcommittee Roster
 Cattaraugus Co Community Services Dept (70690)
 Certified: Rebecca Dash (5/22/18)

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.

Co-chairperson

Name Gail Hammond
Represents Special Education, Family
eMail GFHammond@gmail.com
Is CSB Member Yes

Co-chairperson

Name Dan Gayton
Represents The Rehabilitation Center, Inc. (Peer Agency)
eMail DGayton@RehabCenter.org
Is CSB Member No

Member

Name Linda M. Edstrom
Represents School Special Ed, Public Representative
eMail LMEdstrom47@gmail.com
Is CSB Member No

Member

Name Jon Baker
Represents School Admin. Retiree, Public Representative
eMail basilira@gmail.com
Is CSB Member Yes

Member

Name Susan Labuhn
Represents Cattaraugus County Legislature, Public Representative
eMail SLabuhn@CattCo.org
Is CSB Member Yes

Member

Name Jeffery H. Capitani
Represents Directions in Independent Living (Peer Agency)
eMail jc628tc@yahoo.com
Is CSB Member No

Member

Name Leonard X. Liguori
Represents Consumer, Directions in Independent Living (Peer Agency)
eMail LLiguori@OleanILC.org
Is CSB Member Yes

Member

Name Kristine Plummer
Represents Peer
eMail KristinePlummer20@gmail.com
Is CSB Member No

Member

Name Sadie Jay-Edwards
Represents Advocats Peer Support Group & Directions in Indep. Living
eMail SadieJay@hotmail.com
Is CSB Member No

2019 Mental Hygiene Local Planning Assurance
Cattaraugus Co Community Services Dept (70690)
Certified: Mary O'Leary (4/23/18)

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.