COMPLETE

Monday, September 28, 2020 9:17:59 AM

Page 1

Q1

Contact Information

Name	**Jason R. Fredenberg, PsyD**
Title	**Director of Community Services**
Email	**jfredenberg@discovergreene.com**

Q2

Greene County Community Services

LGU:

Q3

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

The COVID-19 pandemic has had significant impact on all groups and systems. While most services transitioned to remote/telehealth services, that presented both benefits and challenges to people seeking services during this unprecedented time.

Q4

b.   Indicate how your mental health service needs, overall, have been affected by the COVID-19 pandemic:Please specifically note, Any specific racial/ethnic groups or populations that have been disproportionately impacted by COVID-19; and Any differences between adult services and children's services.

Most mental health services had to move to remote/telehealth services. While this was certainly helpful to some, it presented challenges to others, especially those with limited access to the technology needed for telehealth. Children's services were also impacted because many services are often provided in the schools, which have been closed or are now opened in a limited capacity. Additionally, many children had a harder time making use of telehealth services.

Q5

c.   Indicate how your substance use disorder (SUD) and problem gambling needs, overall, have been affected by the COVID-19 pandemic:Please specifically note, Any specific racial/ethnic groups or populations that have been disproportionately impacted by COVID-19; and Any differences between adult services and children's services.

SUD and problem gambling needs were also affected by the pandemic. Similar to the mental health services, prevention services which are often offered in the schools were limited with the school closings. And most SUD treatment transitioned to remote services. This also had similar challenges to the mental health services noted above.

Q6

d.   Indicate how the needs of the developmentally disabled population, overall, have been affected by the COVID-19 pandemic:Please specifically note, Any specific racial/ethnic groups or populations that have been disproportionately impacted by COVID-19; and Any differences between adult services and children's services.

The developmentally disabled population has also been drastically affected. While services continue the clients are much more limited in their ability to attend services and leave their residences. Further, because of mandated reductions in transportation capacity, other services have also proven to be limited.

Q7

a. Mental Health providers

No noted negative issues.

Q8

b.   SUD and problem gambling service providers:

No noted negative issues.

Q9

c.   Developmental disability service providers:

No noted negative issues.

Page 2

Q10

a.   Since March 1, 2020, how would you describe DEMAND for mental health services in each of the following program categories?

INPATIENT (State PC, Article 28/31 Inpatient, Residential Treatment Facilities)	**No Change**
OUTPATIENT (Clinic, ACT, Day Treatment, PROS, Continuing Day Treatment, Partial Hospitalization)	**Increased**
RESIDENTIAL (Support, Treatment, Unlicensed Housing)	**No Change**
EMERGENCY (Comprehensive Psychiatric Emergency Programs, Crisis Programs)	**Increased**
SUPPORT (Care Coordination, Education, Forensic, General, Self-Help, Vocational)	**No Change**

Q11

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

Respondent skipped this question

Q12

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

INPATIENT (State PC, Article 28/31 Inpatient, Residential Treatment Facilities)	**No Change**
OUTPATIENT (Clinic, ACT, Day Treatment, PROS, Continuing Day Treatment, Partial Hospitalization)	**No Change**
RESIDENTIAL (Support, Treatment, Unlicensed Housing)	**No Change**
EMERGENCY (Comprehensive Psychiatric Emergency Programs, Crisis Programs)	**No Change**
SUPPORT (Care Coordination, Education, Forensic, General, Self-Help, Vocational)	**No Change**

Q13

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

Respondent skipped this question

Q14

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

0

Q15   **Respondent skipped this question**

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

Q16

b.   What number of mental health program sites in your county remain closed or are offering limited services now, apart
from transition to telehealth?

0

Q17   **Respondent skipped this question**

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

Q18   **Yes**

c. If your county operates services, did you maintain any
level of in-person mental health treatment

Q19

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

From March 17, 2020 through September 8, 2020, the primary in-person service was medication injections while all other services were
offered remotely. Since September 8, 2020, in-person services have resumed with telehealth still being an option.

Q20   **No**

d.   As a result of COVID-19, are any mental health
programs in your county closing operations permanently?
If yes, list program name(s) and type(s).

Q21   **Respondent skipped this question**

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

Q22   **No**

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

Q23   **Respondent skipped this question**

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

Q24

a.   Apart from telehealth, during COVID-19, did your county or mental health providers within your county develop any innovative services or methods of program delivery that may be continued post-COVID? If yes, please describe.

Yes (please describe):
Telehealth services are the main adaptations that will be continued post-COVID. But other in-person services and care coordination services have also made adaptations that will continue.

Q25

b.   During COVID-19, did any mental health providers within your county form any partnerships with other providers that may be continued post-COVID? If yes, please describe.

No

Q26

a.   During COVID-19, how many mental health providers within your county implemented existing continuity of operations plans?

0

Q27

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

Respondent skipped this question

Q28

b.   During COVID-19, how many mental health providers within your county did not implement existing continuity of operations plans?

2

Q29

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

Respondent skipped this question

Q30

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

None

Q31

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

Respondent skipped this question

Q32

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

Program-level Guidance,

Telemental Health Guidance,

Infection Control Guidance,

Fiscal and Contract Guidance,

FAQs

Page 3

Q33

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

Twin County Recovery Services works collaboratively with the region's suppliers to acquire PPE. Currently, theydo not have any barriers to obtaining the necessary PPE for operations.

Q34

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

Twin County Recovery Services continues to work with regional schools to implement evidence-based prevention programming. The landscape of providing prevention services has changed to a remote learning environment. This has presented challenges in the development, distribution, and delivery of prevention materials and related programming. However, they have been able to adapt to these needs in most of their prevention programs. They did need to cancel prevention programming in one district as the remote learning demand was double the original staffing commitment.

Q35

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

Recovery services continue to be a high need in the population of Greene and Columbia County. The delivery and demand for SUD recovery services has increased during COVID-19.

Q36

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

The delivery and demand for treatment services in our region has increased. Delivery has increased through the utilization of telemedicine. The demand for services has increased as COVID has placed additional stressors on the population.   Twin County Recovery Services continues to adjust their intake, scheduling, and assessment processes to adapt to the needs of the client population.

Q37

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

INPATIENT	**N/A**
OUTPATIENT	**Increased**
OTP	**Increased**
RESIDENTIAL	**Increased**
CRISIS	**Increased**

Q38   **Respondent skipped this question**

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

Q39

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

INPATIENT	**Increased**
OUTPATIENT	**No Change**
OTP	**No Change**
RESIDENTIAL	**Decreased**
CRISIS	**No Change**

Q40   **Respondent skipped this question**

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

Q41

a.   Apart from telehealth, during COVID-19, did your county or SUD and problem gambling service providers within your county develop any innovative services or methods of program delivery that may be continued post-COVID? If yes, please describe.

Yes (please describe):
Greener Pathways continues to be instrumental in providing community support services and outreach. This innovative approach has allowed them to reach clients who are difficult to connect with. The Narcan distribution program and the Greener Pathways van have been impactful. Those programs are data driven and informed by the ODMAP technology and integration with regional law enforcement. TCRS is also evaluating the integration of centralized scheduling in our outpatient clients to facility more availability for intake, assessments and clinical appointments.

Q42

b.   During COVID-19, did SUD and problem gambling service providers within your county form any partnerships with other providers that may be continued post-COVID? If yes, please describe.

Yes (please describe):
Twin County Recovery Services continues to work with multi-sector providers within the region and participation in these efforts allowed them to adapt their focus and priorities in response to COVID. Those partnerships will continue throughout the next several months.

Page 4

Q43

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

Yes (please explain):
DCS has had discussions with the provider reps (also the OPWDD subcommittee chair).

Q44

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

Some of the greatest challenges will be the ongoing challenge of meeting COVID safety protocols. With the population they serve some of these protocols and skills present additional challenges. Further, many of the clients activities have been significantly limited; Visitations are limited, community volunteering is eliminated, outings are eliminated, transportation to Day Program is reduced to 50% capacity thereby reducing attendance at Day Programing, etc.

Q45

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

Nothing additional.

Page 5

Q46

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

Respondent skipped this question