



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

Seneca County Community Services Board
July 18, 2018

Table of Contents

Planning Form	LGU/Provider/PRU	Status
Seneca County Community Services Board	70330	(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
 Seneca County Community Services Board	 70330/70330	 (Provider)
 Seneca Co Community Services Gam OP	 70330/70330/53098	 (Gambling Treatment Program)
 Seneca County Addictions Program OP	 70330/70330/50431	 (Treatment Program)

Mental Hygiene Goals and Objectives Form
 Seneca County Community Services Board (70330)
 Certified: Margaret Morse (5/16/18)

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:

Within the past year we have experienced an increase in demand for child and adolescent services in our County. In response to both local and national events, in addition to increased community efforts to educate about mental health, our community has become increasingly vigilante in regards to the community's mental health needs. As a result, we are receiving more requests for both school based and outpatient clinic services resulting in the need to grow our staffing resources, which is always challenging. In the midst of the increased need for children's and adult services, the state continues to close beds. CPEP reports higher than usual numbers of children presenting in their ER with no beds to place them resulting in long waits in the ER while awaiting placement, sometimes being sent as far away as the Bronx for an appropriate level of care. Residential resources out of county remain the bulk of the mental health bed options for our rural county. Crisis residential bed are almost entirely out of county.

The systems transformation to a Health Homes Care Management Model has not resulted in improved care or outcomes. Care Management agencies serving our community have very high caseloads and are not particularly effective with the higher needs population. We believe this transition has created additional stressors to those requiring care management/case management services.

Access to psychiatric care in our community continues to be a challenge. Despite hiring a full time psychiatrist, our County Mental Health Clinic does not have enough psychiatric providers to meet the need. Finding and retaining qualified, licensed mental health and psychiatric staff in our rural community continues to be a challenge. Rural communities such as ours, struggle to find staff, let alone provide competitive wages to retain them. As we develop our community coalition to address Suicide Prevention and provide education to our community on available services, we have experienced an increase in referrals for services that we find challenging to meet as we struggle to fill vacant mental health clinic positions.

- 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:

New OASAS programs supporting in community services, COTI, Peer Navigators and Open Access Centers are attempts at improving access to care for those need immediate SUD services in our community. Seneca County is planning with adjacent counties who received funding to provide these services in order to gain benefits for our community members.

Unfortunately, as was the case last year, while we have seen some improvements, opioid use and resulting consequences including arrests and overdose, continue to be a growing concern in Seneca County. While access to MAT has improved in our outpatient settings, access to detox and stabilization beds has not improved despite efforts by the state to increase these numbers. Seneca County residents experience waiting periods and other barriers to accessing detox beds in our region.

Prevention efforts continue to be robust in our community, however decreased funding for prevention over the past years creates fiscal burdens to small rural counties with limited financial resources.

- 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:

The unmet needs appear to have remained the same during the past year. We continue to monitor changes as the system transformation moves forward. Residential options remain a critical need in our community as we experience long waiting lists for placement. While The START Program is providing greater outreach and promotion of it's services, the mental health system and CPEP continue as the crisis response system in our community.

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 type="checkbox"/>
b) Transportation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c) Crisis Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d) Workforce Recruitment and Retention (service system)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e) Employment/ Job Opportunities (clients)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f) Prevention	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

g) Inpatient Treatment Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Recovery and Support Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) Reducing Stigma	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
j) SUD Outpatient Services	<input 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 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 checked="" 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

There exists a lack of safe, affordable housing in Seneca County. This fact is experienced acutely by those members of our community challenged by mental illness and/or substance use disorder. Providers and consumers alike describe housing options as sub-standard. Supported Housing waiting lists are long in large part due to the difficulties providers experience in finding adequate housing for consumers. There exists only one Supportive Living bed in Seneca County. Community members at recent forums facilitated throughout the county indicated housing as a priority concern. From a 'housing first' perspective, our community is not conducive to recovery when we cannot meet the basic housing needs of our residents.

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

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

Develop new housing initiatives in conjunction with community based organizations to provide adequate, safe, affordable housing in Seneca County.

Objective Statement

Objective 1: Work with FLACRA on development of new housing initiatives that will provide affordable housing access to those in Seneca County struggling with SUD.

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

Objective 2: Work with Lakeview Mental Health on development of new housing initiatives that will provide affordable housing access to those in our community struggling with mental illness.

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

Objective 3: Work with Seneca County Housing Coalition on development of new housing initiatives to bring affordable housing opportunities to Seneca County.

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

Change Over Past 12 Months (Optional)

2b. Transportation - Background Information

Access to transportation, particularly for residents on the south end of the county is an ongoing challenge for Seneca County. This barrier to accessing services, as well as employment, was a common theme in our Community Forums. Residents on the south end have little to no access to public transportation options. Those options that are available are inadequate, and it can take individuals an entire day utilizing public or medicaid transportation to attend one appointment on the north end. Transportation for non-medicaid individuals is even more limited. The county has made

some efforts via a volunteer transport service on the south end, however this is for medical appointments only and is limited in it's scope of service due to it's volunteer workforce.

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

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

Increase access to transportation services for those with Substance Use Disorder of Mental Health Disorders in Seneca County.

Objective Statement

Objective 1: LGU will collaborate with United Way, Seneca Strong and FLPPS to explore opportunities/funding to increase access to transportation services.

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

Objective 2: LGU will explore community based solutions that could contribute to increasing access to transportation including Park and Ride and Ride Share website.

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

Change Over Past 12 Months (Optional)

2c. Crisis Services - Background Information

Seneca County is unfortunately in sync with the rest of the state in regards to the increased use of opiates in our community. Our County Clinic has already seen a 13% increase in 2018 in opioid admissions over 2018 final statistics. Our Community has no current 24/7 access center, however Wayne Behavioral Health has been awarded OASAS funding to develop this service, and we will be partnering with them for provision of crisis service to Seneca County residents in need. Additionally, while FLACRA was awarded 25 additional stabilization beds, this project is in development and we have experienced no benefit in 2018.

County residents in need of mental health crisis services are routinely transported to area 9.39 hospitals, as we have limited access to mobile crisis services and therefore limited ability to divert transports via stabilization in the community. We are in the process of participation in the NYS CIT Initiative and plan to partner with Wayne Behavioral Health and Rochester Regional Health to enhance our local access to 24/7 crisis services in 2019.

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

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

Increase access to crisis services for Seneca County residents diagnosed with a behavioral health disorder.

Objective Statement

Objective 1: Seneca County will participate in the proposed 24/7 Crisis Center planning and implementation process with Wayne Behavioral Health.

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

Objective 2: Seneca County will continue to plan with regional partners including Ontario County Mental Health, Wayne Behavioral Health and Rochester Regional Health in development of a Regional Crisis Plan that includes mobile crisis capacity for Seneca County.

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

Objective 3: Seneca County will partner with Wayne Behavioral Health for provision of COTI mobile services to Seneca County residents.

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

Change Over Past 12 Months (Optional)

Wayne Behavioral Health has been awarded an OASAS 24/7 Access Center Grant and STR/COTI funds to support crisis services in the Finger Lakes Region. Additionally, Seneca County was included in the NYS CIT Initiative in 2018. Both are opportunities for enhancements to our current crisis service options.

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

Workforce recruitment and retention continues to be an issue for rural counties attempting to staff both mental health and SUD services. Seneca County in particular struggles with recruitment and retention due to low county wages. Recruitment of psychiatric providers also continues to be a struggle for our rural community. We have no private psychiatrists or psychiatric nurse practitioners in our county. Access to psychiatric care exists only with the County and State clinics particularly now that Finger Lakes Health has not renewed it's contract with a psychiatrist who provided services out of their Ontario County Medical Offices.

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

We will improve recruitment and retention of staff in both mental health and SUD services.

Objective Statement

Objective 1: We will continue to work with our County Legislator to bring wage parity to Seneca County.

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

Objective 2: We will develop a recruitment strategy in collaboration with County HR and IT departments.

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

Objective 3: We will appropriately increase contract amounts to reflect governor's increase in direct care wages.

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

Change Over Past 12 Months (Optional)

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

Employment and job opportunities for Seneca County residents is a larger community challenge, which has had particular impact on those individuals living with SUD and mental illness who face additional barriers to employment because of their disabilities. Seneca County unemployment rate is higher than the state and national averages. Unfortunately with the transition of workshops, limited community options are available.

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

Improve employment opportunities for Seneca County residents with MH, SUD and DD.

Objective Statement

Objective 1: Work with community based service providers to increase opportunities for Peer positions within their organizations.

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

Objective 2: Work with community providers to identify barriers to integrated employment .

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

Objective 3: Identify increased opportunities for employer incentives.

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

Objective 4: Provide community education to reduce stigma.

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

Change Over Past 12 Months (Optional)

2f. Prevention - Background Information

While the Mental Health field has not typically embraced the concept of "prevention", the county has some mental illness prevention initiatives. However, Seneca & Tompkins County Early Recognition and Screening Grant has concluded and it is vital that we continue in these efforts despite no longer having specific funding to support these efforts. Mental Health screening is not currently being administered with most non-behavioral health providers in the county. Delivering MH screenings in probation, CPS, DHS and primary care settings would increase the likelihood of earlier detection and therefore treatment.

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

Improve early detection and intervention services to children in Seneca County.

Objective Statement

Objective 1: LGU in collaboratin with Systems of Care will engage with alternative non-formal providers of mental health care to facilitate implementation of early screening tools.

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

Objective 2: LGU will monitor progress of Systems of Care Initiatives in Seneca County.

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

Objective 3: LGU will work with Seneca County's Children's Services Coordinator to monitor early intervention initiatives as well as provision of services to children in Seneca County.

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

Objective 4: LGU will work with Systems of Care and Children's Services Coordinator to develop a Mental Health community outreach and support campaign in Seneca County.

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

Change Over Past 12 Months (Optional)

2018 Plan goals/objectives were not achieved and we will continue them into 2019 plan.

2h. Recovery and Support Services - Background Information

SUD Recovery Support Services are not currently realized in Seneca County. The county would do well to develop Recovery Support services (in addition to the usual 12-step programs offered in the County) as there is strong evidence that these services, which assist people in navigation and ultimately engagement into system of care, are effective in removing barriers to recovery, helping people stay engaged in the recovery process in order to live fulfilling lives in their communities (SAHMSA). Additionally, while the county has an very active social club, it has not embraced recovery support activities.

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

Seneca County will develop an array of SUD and Mental Health Recovery Support Services.

Objective Statement

Objective 1: Seneca County Addictions Program will sponsor individuals to complete OASAS Peer Advocate Training.

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

Objective 2: Seneca County Addictions Program will grow it's peer services.

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

Objective 3: LGU will facilitate development of Peer Recovery Services at the Seneca County Drop in Center.

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

Change Over Past 12 Months (Optional)

2i. Reducing Stigma - Background Information

Stigma in our community continues to create barriers to employment, services, adequate healthcare, social services, housing etc.... Stigma was commonly mentioned in all of our Community Forums as being experienced by both youth and adults in our community living with SUD and MH.

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

Work to reduce the stigma associated with MH and SUD in Seneca County.

Objective Statement

Objective 1: LGU will work with Seneca Strong to facilitate Community Awareness Campaign aimed at reducing stigma.

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

Change Over Past 12 Months (Optional)

In the past 12 months, Seneca County has developed a Suicide Prevention Coalition and a collaborative coalition called Seneca Strong. Community Forums and Awareness presentations have been facilitated throughout the county and the feedback has been very positive. We have also developed a Facebook Page and are working collaboratively with local Media to promote awareness about SUD and MH in our community.

2k. SUD Residential Treatment Services - Background Information

Access to residential treatment services is limited for our community members. The only providers of SUD Residential Treatment in our region have long waiting lists to access beds. Access to beds can take months. Demands for residential SUD beds have increased in our community due to the growing heroin/opioid problem.

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

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

Seneca County will collaborate with regional OASAS licensed community based organizations to increase the number of available OASAS licensed residential beds.

Objective Statement

Objective 1: Seneca County will provide support to community based agencies including Finger Lakes Addiction Counseling Referral Agency's efforts to increase the number of residential beds available to Seneca County residents.

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

Change Over Past 12 Months (Optional)

FLACRA was awarded an additional 25 Rehabilitation/Stabilization beds however they have not been realized as of yet in 2018.

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

Seneca County lacks access to crisis services and stabilization/detox beds for residents living with Heroin/Opioid Use Disorders. OASAS admission statistics show a 13% increase in admitted clients with Opioid Use Disorder Diagnosis in our outpatient clinic over 2017 statistics in the first 5 months of 2018. Additionally, Department of Health county level statistics evidence increasing rates of opioid overdose in Seneca 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

Enhance the variety of services in Seneca County with the goal of engaging more individuals into SUD treatment and decreasing opioid overdose and deaths.

Objective Statement

Objective 1: Implement Ancillary Withdrawal Services in the Seneca County Addictions Program.

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

Objective 2: Facilitate development of an emergency room overdose response program for Seneca County residents, to include suboxone bridging services, in collaboration with Finger Lakes Health.

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

Objective 3: Expand addiction services to the south end of the county via acquisition of an integrated clinic license.

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

Objective 4: Explore Seneca County Community Counseling Center expansion to physical space on the south end of the county in collaboration with the County Manager and Board of Supervisors.

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

Objective 5: Expand Community Narcan Training Program.

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

Change Over Past 12 Months (Optional)

2aa. Developmental Disability Front Door - Background Information

Waiting periods for access to DD services in Seneca County have historically been a barrier for residents with DD and their families. Additionally, we are concerned that systems transformation may have unintended consequences to service access.

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

Reduce barriers to service access for those individuals in Seneca County with DD and their families.

Objective Statement

Objective 1: LGU will monitor Front Door access via reporting from Seneca/Cayuga ARC.

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

Objective 2: LGU will collaborate with OPWDD and Seneca/Cayuga ARC to support systems transformation.

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

Change Over Past 12 Months (Optional)

3. Goals Based On State Initiatives

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

d) NYS Department of Health Prevention Agenda

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

There exists a need to fully operationalize the two main DSRIP behavioral health projects (integration of behavioral health and primary care and crisis stabilization).

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

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

Seneca County will provide integrated care for those with SUD and MH and additionally will implement a fully realized crisis plan to meet the needs of the community.

Objective Statement

Objective 1: Seneca County DCS will continue participation in FLPPS crisis stabilization project.

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

Objective 2: Seneca County Community Counseling Center will apply for integrated licensure with OMH as the host entity.

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

Objective 3: LGU will collaborate with Ontario and Wayne counties in development of a Regional Crisis Plan.

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

Change Over Past 12 Months (Optional)

Seneca County continues to participate in FLPPS and is collaborating with Wayne and Ontario Counties on development of a regional crisis plan. Additionally, Wayne Behavioral Health was awarded OASAS 24/7 access and COTI grants and Seneca County will partner with Wayne Behavioral Health in these efforts.

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
 Seneca County Community Services Board (70330)
 Certified: Margaret Morse (4/17/18)

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	2	Recruitment of psychiatrists is nearly impossible due to lack of available psychiatrists in our community. Additionally, we are unable to provide competitive salaries as compared to the large regional hospitals. We have not had difficulty retaining our current psychiatric staff.
Physician (non-psychiatrist)	n/a	n/a	
Psychologist (PhD/PsyD)	4	4	There are no available workers and we are unable to provide competitive compensation.
Nurse Practitioner	5	n/a	There are few available workers with lots of other competing organizations and we are unable to provide competitive compensation.
RN/LPN (non-NP)	5	5	There are few available workers with lots of other competing organizations and we are unable to provide competitive compensation.
Physician Assistant	n/a	n/a	
LMSW	5	5	There are lots of competing agencies for LMSW's in the region and we are unable to provide competitive salaries.
LCSW	5	5	There are lots of competing agencies for LCSW's in the region and we are unable to provide competitive salaries.
Licensed Mental Health Practitioner (LMHC/LMFT/LCAT/Lpsy)	4	4	There are lots of competing agencies for LMHC's in the region and we are unable to provide competitive salaries.
Peer specialist	4	n/a	There do not appear to be many available workers who have peer certification.
Family peer advocate	n/a	n/a	

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

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

One, however I have had many conversations in the past with EPC who reports experiencing many of the same staffing challenges as I have described above.

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
Seneca County Community Services Board (70330)
Certified: Margaret Morse (4/17/18)

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 Todd Horton
Physician No
Psychologist No
Represents Public
Term Expires 6/9/2020
eMail thorton1@rochester.rr.com

Co-chairperson

Name Lisa Heitman
Physician No
Psychologist No
Represents Public
Term Expires 11/10/2020
eMail lisajan1962@yahoo.com

Member

Name Greg Lazzaro
Physician No
Psychologist No
Represents Seneca County Board of Supervisors - MH Committee Chair
Term Expires 1/10/2019
eMail glazzaro@senecafalls.com

Member

Name Ted Papperman, Ph.D.
Physician No
Psychologist Yes
Represents Family & Provider - Yates County MH
Term Expires 2/11/2020
eMail tjpapperman@gmail.com

Member

Name Tom Premo
Physician No
Psychologist No
Represents Consumer & Provider - Seneca Connections Drop In Center
Term Expires 3/8/2020
eMail tom_premo972@yahoo.com

Member

Name Stanley Hatch
Physician No
Psychologist No
Represents Family
Term Expires 11/13/2020
eMail srhatch67@yahoo.com

Member

Name Patricia Plyter
Physician No
Psychologist No
Represents Family & Provider - Nurse, Geneva General Hospital
Term Expires 2/9/2019
eMail patriciaplyter@yahoo.com

Member

Name Dr. John Barnoski
Physician No
Psychologist No
Represents Consumer
Term Expires 1/12/2020
eMail jbnarnoski@rochester.rr.com

Member

Name Dr. Veronica Mittak
Physician No
Psychologist No
Represents NYS Chiropractic College
Term Expires 9/10/2020
eMail vmittak@nycc.edu

Member

Name Susan Ganser
Physician No
Psychologist No
Represents Consumer & Provider - Elmira Psych Center Rehab Counselor/MIT
Term Expires 11/10/2019
eMail slganser15@gmail.com

Member

Name Jennifer Mander
Physician No
Psychologist No

Member

Name Peter Same
Physician No
Psychologist No

Represents

Consumer & Provider - Elmira Psych
Center (MIT)

Term Expires

12/10/2020

eMail

jlmander24@yahoo.com

Represents

Public

Term Expires

2/11/2020

eMail

psame@rochester.rr.com

Alcoholism and Substance Abuse Subcommittee Roster
 Seneca County Community Services Board (70330)
 Certified: Margaret Morse (4/17/18)

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 Dr. Ted Papperman
Represents Public Representative
eMail tjppapperman@gmail.com
Is CSB Member Yes

Member

Name Pat Plyter
Represents Family Member
eMail patriciaplyter@yahoo.com
Is CSB Member Yes

Member

Name Dr. Veronica Mittak
Represents NYS Chiropractic College
eMail vmittak@nycc.edu
Is CSB Member Yes

Member

Name Tammy Orlopp
Represents Seneca County Addiction Program
eMail torlopp@co.seneca.ny.us
Is CSB Member No

Member

Name Tim VanDamme
Represents Council on Alcohol and Substance Abuse
eMail vandamme@twcmetrobiz.com
Is CSB Member No

Member

Name Tania Doverspike
Represents Seneca County Jail
eMail tdoverspike@co.seneca.ny.us
Is CSB Member No

Member

Name Marty Teller
Represents FLACRA
eMail martin.teller@flacra.org
Is CSB Member No

Member

Name Beth Clark
Represents Hillside Children's Center
eMail bclark@hillside.com
Is CSB Member No

Mental Health Subcommittee Roster
 Seneca County Community Services Board (70330)
 Certified: Margaret Morse (4/17/18)

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.

Chairperson

Name Tom Premo
Represents Consumer
eMail tom_premo1972@yahoo.com
Is CSB Member Yes

Member

Name Lisa Heitmann
Represents Elmira Psych Center
eMail lisajan1962@yahoo.com
Is CSB Member Yes

Member

Name Pat Plyter
Represents Family Member
eMail patriciaplyter@yahoo.com
Is CSB Member Yes

Member

Name Susan Ganser
Represents Peer/EPC MIT
eMail slganser15@gmail.com
Is CSB Member Yes

Member

Name Jennifer Mander
Represents Lakeview Mental Health
eMail jlmander24@yahoo.com
Is CSB Member Yes

Member

Name Todd Horton
Represents Public Representative
eMail thorton1@rochester.rr.com
Is CSB Member Yes

Member

Name Carol Faivre
Represents NYS Chiropractic College
eMail cfaivre@nycc.com
Is CSB Member Yes

Member

Name Robert Dinan
Represents Seneca County Community Counseling Clinic
eMail rdinan@co.seneca.ny.us
Is CSB Member No

Member

Name Kelly Hale
Represents Unity House of Cayuga County
eMail khale@unityhouse.com
Is CSB Member No

Member

Name Terri Clark
Represents Glove House
eMail tclark@glovehouse.org
Is CSB Member No

Developmental Disabilities Subcommittee Roster
 Seneca County Community Services Board (70330)
 Certified: Margaret Morse (4/17/18)

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 Stanley Hatch
Represents Community Representative
eMail srhatch67@yahoo.com
Is CSB Member Yes

Member

Name Tom Premo
Represents Consumer
eMail tom_premo1972@yahoo.com
Is CSB Member Yes

Member

Name Lisa Heitman
Represents Elmira Psychiatric Center
eMail lisajan1962@yahoo.com
Is CSB Member Yes

Member

Name Todd Horton
Represents Community Representative
eMail thorton1@rochester.rr.com
Is CSB Member Yes

Member

Name Carol Faivre
Represents NYS Chiropractic College
eMail cfaivre@nycc.edu
Is CSB Member Yes

Member

Name Kaitlyn Laskowski
Represents Seneca County Jail
eMail klaskowski@co.seneca.ny.us
Is CSB Member No

Member

Name Denise Vreeland
Represents Seneca/Cayuga ARC
eMail dvreeland@sencayarc.org
Is CSB Member No

Member

Name Daniel Smith
Represents OPWDD
eMail daniel.smith@opwdd.ny.gov
Is CSB Member No

2019 Mental Hygiene Local Planning Assurance
Seneca County Community Services Board (70330)
Certified: Margaret Morse (5/16/18)

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.