

**Substance Abuse Committee**  
**February 16, 2022**

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**Present:** Brian Hart, Bailey O'Rourke, Glenn Jarvis, Jennifer Emery, Melissa Streeter, Rebecca Robertshaw, Erin Doyle, Heather Holmes, Anthony Alvernaz

**Excused:**

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**Minutes:**

Approved without changes.

**Director of Community Services Report – Brian Hart**

- **Mandated MAT:** This was an option and is now becoming an unfunded mandate. The numbers are down in the jail. A meeting was held with Ann Domingos (Trinity) and Sheriff Schrom to put a plan in place. There is a need to identify the appropriate medications and connect the individual with outpatient providers. A community member stated that they are just exhausted with all the unfunded mandates that come from Albany. The OASAS money will pay for the provider's staff in the jail, but will not cover the medications. They put these mandates through out of the budget cycle, without advanced notice. Agencies then have overages and need to amend their budgets. Anthony Alvernaz stated that he is aware that the numbers down in the jail but does not know by how much. He stated that this is due to Bail Reform and it has also affected individual sentencing. Brian stated that he knows that Albany is looking at Bail Reform.
  
- **Regional CRISIS Centers:** There is an RFP with OMH and OASAS coming together to form Regional CRISIS Centers. Our Region is from Chemung County to Delaware County. The County that uses this Center the most will be the County in which the actual Center will be located. There will be 9 proposed Centers in the State. There will be huge gaps. How does this collaborate with the Mobile CRISIS team that each County is required to have? There are so many questions. This is bringing Mental Health and Substance Abuse together. There is more to come as CASA Trinity will be having discussions locally and with Binghamton.
  
- **Local Plan:** Brian asked the Committee Members what they felt needed to be on our Local Plan. A Committee Member stated that Law Enforcement could do a better job, at making the community aware of what drugs are trending in our area through Committee meetings like this. We need to get the information out there quickly to Agencies that work with Substance Abuse. We need to work on a dialog to connect these individuals with services. Law Enforcement is administering Narcan and saving lives from drug overdoses. When someone overdoses the majority of them accept the referral to the hospital. There have been about 8 to 10 individuals out of 100 who have refused treatment. We need to figure out how we can immediately start dialog with these individuals. Brian stated that he feels this would be a great roll for CRISIS, as there is no confidentiality issue. If you have PEERS and similar programs, then confidentiality becomes an issue and consent forms need to be signed.

A Committee Member stated that housing continues to be an issue with increased referrals to the shelter. Because of this increase they are housing individuals in hotels. They are hearing from clients that there have been lots of issues at the hotels. PEERS have dropped off Narcan at the hotels. At hotels there is no oversight like at the Shelter, so issues do arise. They recently had a fire at a hotel that housed homeless individuals. During Code Blue (freezing temps), the County has to offer free housing. In this hotel there was not much damage, but there were several code violations which made it unsafe for individuals to stay there. Individuals disconnect the fire alarms to cook, and electrical outlets were pulled out of the walls. We need to do something differently. Maybe having warming stations with cots. This might deter them and be less likely to be homeless because they do not have the hotel luxury. Should we be pushing out PEERS to connect with these individuals? The big chain hotels do not like the rates that are paid, or the homeless individuals that go with it. The less desirable hotels will take in the homeless. Brian asked if there are any other housing needs such as substance related supported housing. A Committee member stated that kind of housing is limited in this area, but we do better than other Counties. Maybe another Half-Way House, as we do not have options. The issue is that this should not be a permanent housing. There is little movement in supportive housing. A viable option once services have discontinued is Section-8, because they can't afford housing. It was mentioned that it would be nice to have an all-female Half-Way House, like they have in Rochester. If we open up another half-way house then make the current one all male and the new one all-female. Brian stated that he does not know when it became an acceptable discharge plan to send individuals to the homeless shelter hotel, as this is not the best option to help them stay sober or drug free.

Are we meeting all the needs of adolescence and treatment? What happened to the Alternative School for Recovery on the BOCES campus? This fell through as the home schools were not supportive because they would be fiscally responsible for each student that was within their district. It is more expensive to place a student out of district. BOCES was very supportive of the Alternative School. This could be revisited in the future. The schools are being cooperative with preventative efforts being brought into the schools. The school districts are starting to see the value of preventative efforts being brought into the elementary and intermediate levels. The Clinicians are seeing an increase in younger children. The Clinicians need more appropriate training on how to work with children, as most have only worked with adults. They are trying to find more resources. In the summer there is a drop off of the numbers for the children they see. They are trying to work on age specific groups if possible. As for inpatient adolescent treatment it is few and far between. They have had several cases recently where finding a bed was very difficult. If they do find a bed it is hours away and not for marijuana use.

There needs to be more intensive/supportive day programming in the community. IOP is a model out there and with the rules and regulations this is something possible. We need an agency to step forward with an RFP. You need to support this concept with actual numbers, not anecdotal. You should track when it is needed and not available.

Brian stated that in last year's plan we needed transportation to get individuals to services, we had workforce issues, we needed inpatient treatment for dual recovery, and youth support. Brian stated that he would send out all these ideas to everyone on the Committee and he would like each one of you to rate the top three. When we come have our meeting in April we will then put the top 3 into the Local Plan. Brian stated that we

need to get better at doing our due diligence to work on the goals. He understands that Covid brought many challenges at getting people together and checking to see how we are doing at what we recommended in our Local Plan.

➤ **Sharing by Community Members:**

**New Dawn** – They just finished up an OASAS audit and found they have no Community Partnership Agreements with other agencies. They will be working on getting these agreements together and sending out to multiple agencies, so they have them on file.

**The next meeting is scheduled for April 20, 2022 via ZOOM.**