Present: Brian Hart, Pam Overdurf, Michelle Nicholas, Rene’ Snyder, AJ Kircher, Leisa Alger, Melissa Stafford, Melissa Streeter, Anthony Alvernaz, Rebecca Robertshaw

Excused:

Minutes:

Approved without changes.

Director of Community Services Report – Brian Hart

- **Utilization of Services:** For those of you providing direct care services; how are staffing shortages, and funding impacting your agency?

  - **Person Center Services** – due to staffing shortages those who have been waitlisted are only getting a fraction of the services they are eligible to receive. The resources are just not available due to staffing.

  - **AIM** – Things are improving a little. They are having individual apply for jobs but most do not fit the qualifications, so they are having to do a lot more hands-on training. They are looking to work on training collectively and attract a new work force. With some of the positions Degrees are required, along with so many years of experience. These requirements are coming from the State, not the Agency. We cannot bill for services until the staff have the experience required, as applicants have just received the Degree requirement for the job, but not the experience. There is a salary competition and compression issue that needs to be fixed. We are looking at a consultant to assist with our HR infrastructure and life cycle, and what we can do to attract applicants and keep them.

  - **Able2** – There have limitations on resources and the number of clients that can be seen. There have been issues with transportation and space. We can only provide services for 35 individuals when before Covid, we provided for a lot more people. They have increased the applicant pool with the increase in direct care wages. This has caused a wage chase/compression, which as impacted the clinical and management workforce. The Clinic is still going, but it will only take one person to leave to make a significant impact on it. We are concerned that these dollars that are attached to specific funding my hurt the workforce and layer of organization. These funds are required to be distributed within a certain time frame. When funding is gone, will there be retention issues? Many of the staff rely of benefits, and these lump sums may impact their benefits. Most live paycheck to paycheck and most likely did not save the extra money to help cover the loss in benefits.
Capabilities – There has been an operational strain, as funding as well as the business side took a hit. We have had an increase in referrals from Access VR. Our salary budget increased $50,000 just because of the wage increase. The Business side took a 50/50 hit, and we are hopeful that it will pick up and be back to pre-Covid numbers soon.

Brian asked if any Agencies are closing, or are temporarily on hold and answer was no for all the agencies represented in the meeting.

➢ CRISIS: 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. This will not work for the DD population as their will be huge gaps. The State was not aware that every County has Mobile CRISIS unit that does not discriminate, and serves everyone. Brian stated that everyone has been doing well at contacting him and giving him information on individuals go to the ER. He needs to remind everyone to not cross the border and go into Pennsylvania. Brian asked if anyone was seeing any issues with CRISIS services. A Committee member stated that it is a beast that cannot be tamed. They try within the constraints, but have not stumbled on the right threads for this population. A committee member said that this is only a patch not a solution. Another Committee member stated that they have seen large scale behavioral and mental health issues. There are so many limitations on how you can connect with the community services. If they are put on a waitlist, then there is not a lot of hope for them. Another Committee member stated that there are no resources for high behavioral issues.

➢ Local Plan: Brian asked the Committee members what they felt needed to be on our Local Plan. A Committee member stated that there is a lack of specialized CRISIS services for the DD population. They do not understand the DD population, and how to work with their family members. We need to continually educate those in the field, and do some cross-system learning, while supporting the families as a unit.

CRISIS Respite is needed as well as regular caregiver respite. Caregivers need some relief and time away. It would be helpful if the youth had a recreational component, but because of Covid, they are suffering. Pathways used to have a program, not sure if they still do, that would send a person into the home to provide Respite services for the individual, and then send the family members to a hotel to have some relief. ARC had a residential in-home respite and recreational program, but with the pandemic it has all gone away. We need to get that back up and running. Able2’s Respite program is on its way out. With the structured programming and limited funding, they are not breaking even. Families want it on demand, and as they wish, but the numbers in need and low staffing are issues. It needs additional funds to run, but need data to show that there is not enough available, or not enough time. A Committee member stated that their agency is community based and give individual consumer personal care services, so when they go into the home they let the family go run errands, take a walk, go out to dinner, go get groceries etc. to take some time for themselves. Their enrollment and approvals have increased, but they do not do residential respite as it is not possible with the available funding.
A committee member asked how Counties can be informed of Policy Changes, Regulation and Rate Changes. They have a Conference of Mental Hygiene Directors that have direct contact with the State Senators and Administrators of State Agencies. They bring everyone together once a year to go over issues. NYSAC meet two times a year and they have a specific committee that puts forth resolutions for change. NYSAC’s executive body votes on what resolution will be sent to the State Governor’s Office.

Brian stated that he would send out what we had on last year’s plan along with these ideas to everyone on the Committee and he would like each one of you to rate the top three. When we come to have our meeting in April we will put the top 3 into the Local Plan.

➢ Sharing by Community Members:

- No one had anything to share.

The next meeting is scheduled for April 20, 2021 via ZOOM.