

North Country Behavioral Health Network Pathfinder 2021

Network Relocates to New Offices in Saranac Lake

In January, NCBHN completed its move to new office space at 589 AMA Way in Saranac Lake. Since June 2000 the Network has been housed within the Fiorile Accounting firm building at 126 Kiwassa Rd, in Saranac Lake. According to Executive Director Barry Brogan, "since 2005 we have been in a very nice five

office suite that included a project room and dedicated conference space. We were right along Lake Flower, and near members St. Joes and Lakeside House." However, much changed with the on-set of the COVID 19 pandemic. "Two of our staff that had been coming into the office are now permanently working from home and dedicated conference room space was not making sense. We needed to downsize." Following an extensive search of available office space in the tri-lakes area the board and staff settled on recently renovated office space on the campus of the former Trudeau TB Sanitarium. According



Leaving 126 Kiwassa...Thankfully before the winter snow.

to Mr. Brogan, "We are actually located in the former infirmary and we are surrounded by historical buildings dating back to the turn of the last century." Now under new management, buildings are being brought up to date and made available for development. NCBHN is

the second tenant to occupy the converted infirmary sharing the building with the billing department of Adirondack Medical Center. The Network's new offices include two offices for Mr. Brogan and Sr. Office Manager Robin Calkins along with a combination, break, conference and project room. There is ample space for a temporary worker and for storage of our archived files.

"Though we miss the view of the lake this space suits us well and allows us a significant reduction in rent...it's been a good move," said Mr. Brogan.



Our New Home!

The Ethel Sultus Luddington Memorial Infirmary, Built 1926 that we upgraded to a Class A office space.



All hands on deck!
Pictured: Robin Calkins, Senior Office Manager moving in the first load of boxes!

NCBHN Active with State-wide Advocacy Partners Promoting Behavioral Health and Rural Issues.



The NCBHN Policy Committee has been extremely engaged this entire year and none more so than during the NYS "Budget Season". NCBHN wrote and presented NYS budget testimony to the Joint Committees on Mental Hygiene, Health/Medicaid and Human Services, and distributed it to our North Country Legislators as well as to the chairs of the Finance and Ways and Means committees, and other key legislators. Also, receiving the North Country's message were the Governor, Commissioners of DOH, OMH and OASAS. Elements of the NCBHN message were also included in the NYS Association for Rural Health's advocacy message. NCBHN testimony provides analysis to elected officials as to the impacts of various budget proposals and alternative proposals as appropriate.

This year's key initiatives included advocacy in the following areas:

- Supported restoration of the cuts to behavioral Health Care (BHC) programs and enhance funding in order to deal with the current opioid pandemic and BHC needs exacerbated by the COVID-19 pandemic
- Enact the investment called for by the "3-for-5" campaign; a 3% cost of living adjustment (COLA) for all human service workers for the next five years, beginning with this budget
- We recommend that the State offer a more robust Child Health Plus program that includes coverage for residential SUD and MH services
- Supported additional SUD and MH Housing programs
- The State must continue to reinvest the monies saved from the closure of intensive inpatient MH beds in the community-based supports and services, including housing, that provide for the success of transitioning individuals
- Restoration of the funding reductions to the Rural Health Network Development and Rural Health Access Hospital programs
- NCBHN called for more flexible telehealth (including telephonic) regulations that have been adopted a result of operating during the COVID-19 pandemic be made permanent, and for the equitable payment for those services. To facilitate effective telehealth services, NYS needs to support the deployment of and access to rural broadband internet.



Marisa Gaddor Named NCBHN 2020-2021 Rural Behavioral Healthcare Champion

The North Country Behavioral Healthcare Network (NCBHN), in conjunction with the New York State Association for Rural Health and the DOH State Office for Rural Health, has established the Rural Health Champion Award Program which



recognizes outstanding achievement in the promotion of rural health here in the North Country. Ms. Marisa Gaddor of the

Mental Health Association in Essex County, nominated by her supervisor, has been named this year's recipient. Ms. Gaddor is the Chief of Care Coordination at MHA and supervises a staff of five health home care coordinators, one non-Medicaid care coordinator all the while carrying a caseload of 12 herself. Marisa started with the agency as an Intensive Case Manager and was instrumental in the transition to health home in 2012. Marisa and her staff consistently earn high marks in AHI audits and she initiated a unique program of emergency room diversion utilizing transport to urgent care clinics. Her accomplishments in meeting several other DSRIIP metrics contributed to the overall success of the PPS. Marisa has a long history of going above and beyond for clients and she is highly respected by her counterparts at other agencies. Marisa joined a dozen other Rural Health Champions that were recognized by the seven North Country Rural Health Networks. The Champions were collectively recognized on National Rural Health Day this past November 19th and were featured in media ad and articles throughout the North Country.



Congratulations Marisa Gaddor!

NCBHN Pitches its Value Based Payment Peer Engagement Demonstration Project

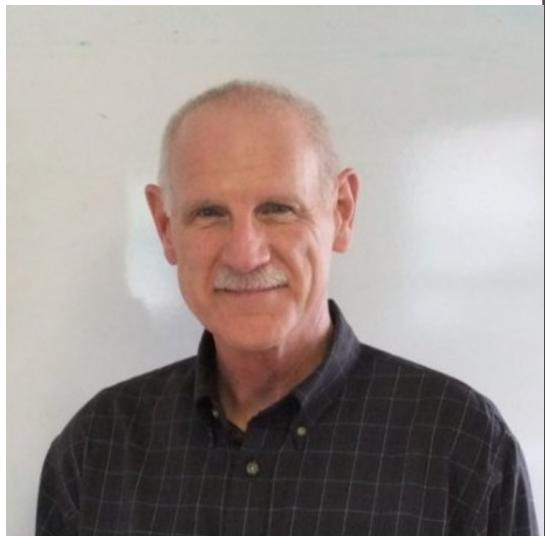
NCBHN and a number of Jefferson and Lewis County members are pitching the Peer Integrated Care (PIC) as a vehicle that will position members to compete in a value based payment environment. NCBHN staff have been engaged in discussions with the largest Managed Care Organization (MCO) in the Watertown area to implement a demonstration of the efficacy of the PIC model. While the proposal has not been finalized, important features include: focus on high emergency department (ED) utilizers and possibly the Health and Recovery Plan (HARP) and HARP-eligible population; a demonstration to include up to 200 MCO members with expansion a possibility subject to availability of peer resources. Next steps include discussions with other regional provider organizations to ensure all regional demonstration projects are both funded and coordinated. The PIC project has been developed as part of a three year Health Resources and Services Administration (HRSA) Rural Health Network Development grant. In related activity, NCBHN conducted a Peer Capacity Assessment in January to gain a better understanding of the number and type of peers in the region and challenges to the delivery of peer services. Findings focused on recruitment and retention, disparities in OMH and OASAS certifications, and reimbursement for peer services.



Changing of the Guard: The Prevention Team's Doug Terbeek Announces Retirement

Doug has served as Executive Director (ED) of the Prevention Team in Essex County since July 1986. He originally joined as a part-time ED and part-time out-patient Drug Counselor as part of Moses-Ludington Hospital in Ticonderoga. In 1993 the new Prevention Team was incorporated as a standalone 501.c.3 not-for-profit agency, headquartered in Ticonderoga with Mr. Terbeek as full time Executive Director. Doug has announced his retirement from the Prevention Team after 35 years at the helm.

When asked about how the Prevention Team has grown over the years and its impact on the community, Mr. Terbeek mentioned a number of achievements during his tenure. "Our staff have served literally thousands of Essex County youth over the years through our school-based prevention education and student support counseling services, our primary services. Many are now parents and even grandparents; we hear from time-to-time of our impact, and the positive messaging continuing through them. We have helped several local communities mobilize and form coalitions to address local concerns related to substance use and healthy youth and family development."



He noted that there have been a lot of changes affecting the prevention field over his 35 years, not the least of which was changing oversight and funding streams as state agencies have consolidated (and may further consolidate again soon). He credits his staff for their creativity and dedication to the mission of the Prevention Team that has allowed the agency to continue to do its work through changing times. "Staffing over the years has ranged from four to twelve, and is now at nine individuals to include CASACs, Credentialled Prevention Professionals (CPP), certified teachers and licensed Social Workers. Doug shared: We've been blessed with great staff, and low turn-over. We have never had to eliminate a position due to funding cuts."

Other major changes Doug has experienced over the years is the positive maturing of the practice of prevention. The profession has moved from the days of "just say no" to a science based approach that has identified a constellation of research-validated risk and protective factors. The presence of the risk factors increases the likelihood of youth involvement in several high-risk teen behaviors, while the protective factors mitigate the influence of the risks. Both risk and protection are identified in the domains of youth experience in the family, the community, the school and their peer relationships and individual choices. The science based approach seeks to reduce risk factors while strengthening protective factors. This model of prevention focuses on the conditions that foster substance use or protect against it, rather than trying to directly impact the use of harmful substances.

Looking forward Mr. Terbeek is excited about the collaborative work the Prevention Team has been part of bringing together a wide range of human service agencies to communicate and coordinate services. The BRIEF initiative which stand for Building Resiliency in Essex Families is a county-wide initiative that brings together county and private human service agency staff, community stakeholders and families to build community resiliency, and deploy strength based models for prevention treatment and recovery. Doug says: "The BRIEF initiative is bringing clarity around a county-wide system of care where all components of the system are aware of the resources and capacity of all the other components."

"No one agency can do it all, and we are building on our long history of collaboration. It's a good place to be".

Sally Walrath Retires from Lakeside House



Sally Walrath who has served as Executive Director of the Lakeside House for over 15 years retired at the end of 2020. Sally continues her involvement consulting with Lakeside House's new Executive Director Mr. Marc Czadzeck and the Board as requested. We asked Sally to reflect back on the challenges and changes that she experienced as the Director.

"Initially, we faced both regulatory as well as some financial challenges when I took over." Working with our Board and Community partners we weathered those storms and emerged in a strong position to grow our programs." said Ms. Walrath.

Sally then turned her attention to growing and diversifying the Lakeside House's portfolio of services. "First we needed to change the culture from a permanent residential facility to a transitional residential facility that facilitated treatment and transitions to independent living. After accommodating this change, we developed, and were approved to become a supported housing provider, which allowed for a seamless transition from residential program to an independent, but supported living environment."

Lakeside House further expanded programs through involvement in collaborative community effort to address homelessness in the south end of Franklin County. Samaritan House which is managed through Lakeside House opened in 2017 and serves as an immediate housing solution for those faced with homelessness. Samaritan House too is transitional housing in which residents must work with staff to seek permanent housing arrangements.

Ms. Walrath feels Lakeside House is in a good position to continue to grow and offer new services as it moves forward under new leadership. "Marc is looking at the Health Home Care Manager program as well as opportunities available through New York State's Home and Community Based Services programs. Both of these may be a good fit for Lakeside House, and will continue to offer Franklin County residents a choice of service providers." Sally concludes by saying, "Marc is a strong leader, he understands Lakeside House's strengths and I think he is the right person to lead the organization into the future."

Sally enjoys her retirement in the Town of Black Brook with her two dogs Abby and Molly



Member Agencies

Homeward Bound

Families First

Maximizing Independent Living Choices

St. Joseph's Treatment and Recovery Center/Rose Hill

Mental Health Association of Jefferson County

Pivot

Credo Community Center

Citizen Advocates

Transitional Living Services of Northern NY

North Country Freedom Homes

Adirondack Health

St. Regis Mohawk Tribe Health Services

Northern Regional Center for Independent Living Inc.

The Prevention Team

Lakeside House

Mental Health Association of Essex County

Mountain View Prevention Services

North Country Family Health Center