Lindsay Ragona- Program director of the CCBHC (Certified Community Behavioral Health Clinic) at CNG joining us to present the services that they have to offer.

* Eligibility- accepts almost all insurance, Medicaid/Medicare and sliding scale for uninsured. Need- any type of behavioral health need that is not sufficiently met. Treatment is voluntarily. Willingness to have a conversation with peer specialist.
  + All Nassau and western Suffolk (Ronkonkoma)- Suffolk permitting willingness for telehealth.
  + Referrals go to- Stephanie Deshommes- 516-396-2778 or sdeshommes@centralnassau.org
    - Other program contacts- Lindsay Ragona: [lragona@centralnassau.org](mailto:lragona@centralnassau.org) and Keisha Graham-Wilson: kgraham-wilson@centralnassau.org
    - During referral Stephanie collect persons name, address (if one), other basic information (phone #). If person is with you Stephanie can speak with them directly, but if not make sure client knows that a peer would be calling that individual within a few hours. Person has to be ready and willing to speak with the peer. A person can choose to engage on-going, or a short time, after the engagement they can choose a provider.
    - Important to tell Stephanie that the person doesn’t have a phone. Can help individuals get phones. CCBHC would have to arrange to speak with client when they have access to a phone.
* Deliver services by telehealth, in person, at a location of their choice. Can bring the services to the person. Currently doing telehealth but looking to expand back into face-to-face in the coming weeks.
* Other difference from clinic- does have individual and group therapy and psychiatry. Intensive case manager, psychiatric rehabilitation looking to build skills (vocational).
* Strong peer services program- can go out and engage with people and help to center conversations surrounding their own experience.
* Medication assisted treatment- detox Opioids and benzo can also assist in connecting client to inpatient or outpatient treatment depending on what they are interested/ready for.

Mobile recovery unit- large RV and two mini vans-

* Peers, RN, clinicians, a prescriber, and a case manager on the team.

Prior to COVID-

* Provide services in the community and in RV and provide telehealth services with the prescriber. On-going medication management. Suboxone and vivitrol for opioid dependent/alcohol use.
* Clinicians can provide on going therapy in the community or in the home.

Response to COVID- moved a lot to telehealth. Just started taking the RV out in the community again. Doing some face to face outside.

* Big on education and Narcan trainings, provide with training and kits to individuals, friends and family members of individual with substance use.
* Can connect individuals to additional mental health resources, sober homes, in-patient rehabilitation, etc.
* Case manager on team can help individuals get insurance as long as they are eligible.
* Undocumented individuals- still provide services. Sliding scale for uninsured folks.

If a person is not ready to work with all services, they can just work with the peer specialist.