## Goals and Objectives 2024-2027 Tompkins County Mental Health Services

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#### Goal 1

Goal 1: Title Support the implementation of recruitment/retention strategies by mental hygiene providers in Tompkins County as measured by a reduction in staff vacancies.

Goal 1: Target Completion Date Dec 31, 2027

Goal 1: Description Description of Need: Workforce recruitment was the second most cited need by LGUs in Local Services Plans submitted in 2023 across New York State. The workforce shortage has been identified as a planning priority in 2023 by OASAS and included in the OPWDD 2023-2027 Strategic Plan as an area of need. The OMH Strategic Framework has set a goal to, "develop the public mental health and healthcare workforce (because) approximately 3.1 million New Yorkers live in federal and/or state designated mental health shortage areas." Tompkins County continues to experience workforce shortages across the mental hygiene system that have resulted in reduced access to needed services. In a survey of 162 providers working in agencies offering mental hygiene services, 62% identified the workforce shortage as a priority need, with those working in OPWDD programs the most likely to identify workforce as a priority area. Improving workforce diversity also continues to be a priority in Tompkins County beginning with a better understanding of the demographic makeup of the current workforce.

Goal 1: OASAS? Yes Goal 1: OMH? Yes Goal 1: OPWDD? Yes

Goal 1: Need Addressed 1 Workforce

Goal 1: Need Addressed 2

Goal 1: Need Addressed 3

Goal 1, Objective 1: Title Highlight Severity of the Workforce Crisis in Advocacy Efforts

Goal 1, Objective 1, Target Completion Date Dec 31, 2025

Goal 1, Objective 1, Description Participate in ongoing advocacy efforts to highlight the severity of the workforce crisis at the local and state level.

Goal 1, Objective 2: Title Understand Scope of Workforce Shortage

Goal 1, Objective 2, Target Completion Date Dec 31, 2024

Goal 1, Objective 2, Description Solicit staff vacancy information from provider agencies to better understand the scope of the workforce shortage, requiring LGU contract agencies to provide data annually.

Goal 1, Objective 3: Title Quantify Impact of the Workforce Shortage on Service Delivery

Goal 1, Objective 3, Target Completion Date Dec 31, 2024

Goal 1, Objective 3, Description Solicit data (program closures, wait lists) on the reduction in services related to the workforce shortage from provider agencies, requiring LGU contract agencies to provide this data annually.

Goal 1, Objective 4: Title Support Workforce Diversity Efforts

Goal 1, Objective 4, Target Completion Date Dec 31, 2025

Goal 1, Objective 4, Description Gather Point in Time data on staff diversity in local mental hygiene system, analyze trends, explore strategies to improve staff diversity with providers.

### Goal 2

Goal 2: Title Promote a housing first approach that increases the availability of affordable, emergency, and supportive housing that best meets the needs of individuals who require intensive, specialized, community based interventions for stabilization and recovery across the mental hygiene system.

Goal 2: Target Completion Date Dec 31, 2028

Goal 2: Description Description of Need: The need for housing was identified as a priority by 56 LGUs with 49 LGUs identifying this as a need across mental hygiene services. Both OMH and OASAS identified housing as a state agency planning priority for 2024 and listening sessions conducted by OPWDD in the development of their 2023-2027 Strategic Plan identified improved housing services as a priority. Concerns about current housing available in the Southern Tier were identified in the 2023 Community Engagement Sessions held from February to April 2023. Community members talked about how hotels known for violence were being used for unhoused individuals with addiction disorders and described the need for additional community based residential programs for those individuals needing more support. In the Local Services

Plan Priority Needs Survey, 95% of community members, 89% of agency providers and 100% of board members out of the 279 respondents identified housing as a top priority need.

The housing crisis does not just impact adults. The Ithaca/Tompkins Coordinated Community Plan developed with the Ithaca Youth Action Board in 2022 states that, "Based on 2020 statistics, Tompkins County has an overall poverty rate of 16.9% with a much higher prevalence in the City of Ithaca (39.2%) where most homeless youth are found. Along with this poverty rate, is one of the highest rental rates in Upstate New York, which is a major factor in homelessness in general and particularly in youth homelessness." See The Ithaca/Tompkins Coordinated Community Plan 2022 at https://hsctc.org/wp-content/uploads/2022/06/The-Ithaca-Tompkins-CCP-2022.pdf for more information).

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Goal 2: OASAS? Yes Goal 2: OMH? Yes Goal 2: OPWDD? Yes Goal 2: Need Addressed 1 Housing Goal 2: Need Addressed 2
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Goal 2: Need Addressed 3

Goal 2, Objective 1: Title Better Understand the Interaction Between Homelessness and Disability

Goal 2, Objective 1, Target Completion Date Dec 31, 2024

Goal 2, Objective 1, Description Work with the HSC/Continuum of Care to disaggregate disability related item(s) from homeless data collection efforts in the county, to better understand the interaction between homelessness and disability.

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Goal 2, Objective 2: Title Gather Information About Housing Solutions
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Goal 2, Objective 2, Target Completion Date Dec 31, 2026

Goal 2, Objective 2, Description Learn about current, new and proposed housing solutions including community based residential programming, their challenges and successes that will better address need.

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Goal 2, Objective 3: Title Gather Information about Housing Reductions
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Goal 2, Objective 3, Target Completion Date Dec 31, 2024

Goal 2, Objective 3, Description Prioritize information gathering to learn more about reductions in residential beds due to COVID, the workforce shortage or other factors.

Goal 2, Objective 4: Title Advocacy for Housing Solutions

Goal 2, Objective 4, Target Completion Date Dec 31, 2025

Goal 2, Objective 4, Description Advocate for additional emergency and supportive housing solutions across the mental hygiene system for adults and children including homeless youth.

#### Goal 3

Goal 3: Title Crisis Services - Support the development of comprehensive crisis services that address the mental hygiene needs of Tompkins County residents.

Goal 3: Target Completion Date Dec 31, 2028

Goal 3: Description Description of Need: The need for a comprehensive crisis response for individuals with mental hygiene service needs was the third most common priority area identified in Local Services Plans by LGUs in 2023. There have been improvements in crisis services this past year. The national 988 number for mental health crisis calls was successfully launched and new Crisis Services for Intellectual and Developmental Disabilities (CSIDD) was made available in our region for the first time. Continued public awareness of these new service offerings is still needed to ensure broad access to the support they provide. More work is also needed to ensure all crisis services have the capacity to address the needs of OPWDD clients. The Conference of Local Mental Hygiene Directors has initiated a pilot project between OPWDD and OMH licensed Mobile Crisis Teams to identify best practices in this area that will inform future crisis response in our community. Additionally, the 2023-27 OPWDD Strategic Plan highlights the need for crisis services as an area for continued work as needs outstrip current resources available.

OASAS also partnered with OMH to develop dually licensed intensive and supportive crisis stabilization centers. Both models offer behavioral health stabilization and referral services 24 hours a day, seven days a week. Funding for capital and operational costs was made available in each region through a Request for Proposals (RFP) process. Cayuga Health Partners applied but was not selected. Ongoing efforts are being made to identify a way to meet this need in Tompkins County.

Locally, Family and Children's Service of Ithaca received onetime OMH funding to expand the Outreach Worker Program from the City of Ithaca to the rest of the county last year. Additional funding is now being sought to ensure this highly beneficial program is maintained in the year ahead. Tompkins County also funded a newly created co-response model initiated between the Tompkins County Sheriff's Office and Mental Health Services through the Department of Whole Health to respond quickly to mental health emergencies. The program is expected to be operational in 2023 during weekday business hours.

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Goal 3: OASAS? Yes Goal 3: OMH? Yes Goal 3: OPWDD? Yes Goal 3: Need Addressed 1 Crisis Services
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Goal 3: Need Addressed 2

Goal 3: Need Addressed 3

Goal 3, Objective 1: Title Identify Best Practice Crisis Response Across Mental Hygiene System

Goal 3, Objective 1, Target Completion Date Dec 31, 2025

Goal 3, Objective 1, Description Share findings from CLMHD piloted OMH/OPWDD Mobile Crisis Units and other novel approaches to align local practices across substance use, mental health, and developmental disabilities. Identify lessons learned, implementation, and outcomes.

Goal 3, Objective 2: Title Expand Access to Crisis Supports

Goal 3, Objective 2, Target Completion Date Dec 31, 2025

Goal 3, Objective 2, Description Explore solutions to expand access to crisis supports across the mental hygiene system including improved community awareness of service offerings.

Goal 3, Objective 3: Title Improve Communication between Law Enforcement and Crisis Mental Health Recipients

Goal 3, Objective 3, Target Completion Date Dec 31, 2025

Goal 3, Objective 3, Description Implement at least two activities designed to improve relationships between law enforcement departments and mental health recipients.

Goal 3, Objective 4: Title Support efforts to establish Crisis Stabilization Center or similar program.

Goal 3, Objective 4, Target Completion Date Dec 31, 2025

Goal 3, Objective 4, Description Continue to explore potential funding and collaborations to implement a crisis stabilization unit or similar program.

Goal 3, Objective 5: Title Support Suicide Prevention Efforts

Goal 3, Objective 5, Target Completion Date Dec 31, 2028

Goal 3, Objective 5, Description Support Suicide Prevention Coalition efforts including the implementation of Zero Suicide across healthcare settings to prevent suicide.

#### Goal 4

Goal 4: Title Cross System Services - Improve access to care across the mental hygiene system.

Goal 4: Target Completion Date Dec 31, 2028

Goal 4: Description Description of Need: This was a new category established in 2023 reflecting the growing importance of integrated and coordinated work across the mental hygiene system. 33 LGUs identified Cross System Services as a priority need in their 2023 Local Services Plan. Almost 82% of agencies that participated in the Local Services Plan Priority Needs Survey identified cross systems improvement as a priority need. It is imperative that we understand how to leverage the resources available in each of the three mental hygiene systems to meet the complex needs of individuals who require support across systems and continue to advocate for improved integration of services in the future. Areas of Focus in 2024 are described below.

- The 2024 OASAS Planning Priority Guidelines outline several financial awards, initiatives and piloted projects focused on improving cross system service delivery including Mobile Medication Units (MMUs) designed to help people who may face barriers to accessing traditional treatment such as geographic proximity to an Opioid Treatment Facility or lack of reliable transportation. Cayuga Addiction Recovery Services (CARS) received funding to offer this service in our region.
- Loss of OMH services when becoming OPWDD eligible remains a concern. Ongoing advocacy for greater waiver flexibility in OPWDD programs to ensure clients have access to all the support they need continues to be a priority.
- There are several piloted projects in NY State between mental hygiene agencies that we can learn from for potential local implementation such as the Mobile Crisis Team Pilot Project being conducted between OMH and OPWDD to ensure all people receive quality crisis intervention and ongoing efforts to improve integration between substance use and mental health treatment needs.

Goal 4: OASAS? Yes Goal 4: OMH? Yes Goal 4: OPWDD? Yes

Goal 4: Need Addressed 1 Cross System Services

Goal 4: Need Addressed 2

Goal 4: Need Addressed 3

Goal 4, Objective 1: Title Improve Public Awareness of Available Services Across Systems

Goal 4, Objective 1, Target Completion Date Dec 31, 2025

Goal 4, Objective 1, Description Ensure that families, recipients, and service providers have information about what services are available to individuals with cross systems' needs by collaborating with 211 to ensure mental hygiene programs/ services information is updated, accurate and offers linkages across mental hygiene services to improve access to care.

Goal 4, Objective 2: Title Remove Barriers to Access Services Across Systems

Goal 4, Objective 2, Target Completion Date Dec 31, 2025

Goal 4, Objective 2, Description Advocate for removal of eligibility barriers to better serve people who have needs across systems and continue to educate Care Managers in the DD system about options in Tompkins County.

Goal 4, Objective 3, Target Completion Date Dec 31, 2025

Goal 4, Objective 3, Description Support strategies that improve coordination of services and treatment integration across

mental hygiene system with other community supports.

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Goal 4, Objective 4: Title Use opioid overdose data to guide interventions across the mental hygiene system.
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Goal 4, Objective 4, Target Completion Date Dec 31, 2024

Goal 4, Objective 4, Description Improve data integrity/collection related to opioid overdose to guide prevention efforts across the mental hygiene system.

#### Goal 5

Goal 5: Title Non-Clinical Supports - Recognize the importance of addressing social determinants of health to promote wellness and recovery and improved health equity.

Goal 5: Target Completion Date Dec 31, 2028

Goal 5: Description Description of Need: Treatment alone is not sufficient for change. Social determinants of health like access to housing, employment and educational opportunities, medical, dental, and optical care, and a sense of connection and belonging to community are integral to wellness and recovery. According to the CDC, "...a growing body of research shows that centuries of racism ...has had a profound and negative impact on communities of color... (and) social determinants of health are key drivers of health inequities in communities of color" (See Putting Youth Mental Health First: June 2023 Youth Mental Health Listening Tour Report at https://omh.ny.gov/omhweb/statistics/youth-mh-listening-tour-report.pdf for more information).

According to the 2023 Local Services Plan Priority Needs Survey, Community members identified housing (62%), Employment (60%) and Criminal Justice (58%) as areas of most concern related to racial equity issues impacting adults. One survey respondent said, "There should be more help for people of color to attain home ownership (as a way to better address disparities). Community members identified Schools (62%), Access to Mental Hygiene Services (60%) and Access to Healthcare (53%) as the areas of most concern impacting youth. Agency providers identified housing and access to mental hygiene services as areas of concern related to racial equity for both adults and children.

Most agencies surveyed (70%) are in the process of identifying strategies to better address racial equity. 23% of agencies have already implemented practices to improve health equity and 7% have not started yet. 57% of providers said training and tool kits along with improved local data collection would be most beneficial to supporting their efforts in addressing health equity issues.

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Goal 5: OASAS? Yes Goal 5: OMH? Yes Goal 5: OPWDD? Yes
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Goal 5: Need Addressed 1 Non-Clinical supports

Goal 5: Need Addressed 2

Goal 5: Need Addressed 3

Goal 5, Objective 1: Title Identify Healthcare Access Barriers for Medicaid Recipients Receiving Mental Hygiene Services

Goal 5, Objective 1, Target Completion Date Dec 31, 2026

Goal 5, Objective 1, Description Become familiar with the barriers to healthcare access including dental and optical care for Medicaid recipients.

Goal 5, Objective 2: Title Improve access to quality mental hygiene services for minoritized populations.

Goal 5, Objective 2, Target Completion Date Dec 31, 2024

Goal 5, Objective 2, Description Collect benchmark data from contract agencies on health equity to improve access to quality mental hygiene services for minoritized communities. Work collaboratively with the County DEI lead on data collection and analysis.

Goal 5, Objective 3: Title Improve Health Equity in the Mental Hygiene System

Goal 5, Objective 3, Target Completion Date Dec 31, 2024

Goal 5, Objective 3, Description Identify strategies to improve health equity across Tompkins County Mental Hygiene Service Providers.

Goal 5, Objective 4: Title Support greater awareness and utilization of peer support services.

Goal 5, Objective 4, Target Completion Date Dec 31, 2025

Goal 5, Objective 4, Description Support greater awareness and utilization of peer support services in the community to strengthen engagement and recovery services across the mental hygiene system.

### Goal 6

Goal 6: Title Adverse Childhood Experiences – Build resilience in youth and adults impacted by childhood trauma.

Goal 6: Target Completion Date Dec 31, 2028

Goal 6: Description Description of Need: Adverse Childhood Experiences are potentially traumatic events that occur in childhood (0-17 years). Examples include experiencing violence, abuse or neglect, witnessing violence in the home, or having a family member attempt or die by suicide. Experiences may also include "... aspects of the child's environment that can undermine their sense of safety, stability and bonding such as growing up in a household with substance use problems, mental health problems, or instability due to parental separation or household members being in jail or prison." Adverse Childhood Experiences are common and related to numerous health conditions in adulthood like heart disease and are linked to greater risk of mental health and substance use disorders (See Fast Facts: Preventing Adverse Childhood Experiences at https://www.cdc.gov/violenceprevention/aces/fastfact.html for more information).

Over 80% of agency providers and almost 79% of community members who completed the 2023 Local Services Plan Priority Needs Survey identified ACES as a priority need for both children and adults.

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Goal 6: OASAS? Yes Goal 6: OMH? Yes Goal 6: OPWDD? Yes
Goal 6: Need Addressed 1 Adverse Childhood Experiences
Goal 6: Need Addressed 2
Goal 6: Need Addressed 3
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Goal 6, Objective 1: Title Promote Greater Awareness of the Impact of ACES in the lives of adults and children.

Goal 6, Objective 1, Target Completion Date Dec 31, 2025

Goal 6, Objective 1, Description Promote greater understanding of the impact of Adverse Childhood Experiences (ACES), the importance of early intervention strategies and encourage evidence-based trauma informed services and support across the lifespan.

#### Goal 7

Goal 7: Title Transition Age Youth Services – Ensuring adequate supports are available for youth especially as they transition to adulthood across the mental hygiene system.

Goal 7: Target Completion Date Dec 31, 2028

Goal 7: Description Description of Need: According to the CDC Youth Risk Behavior Survey, in the last decade from 2011 to 2021, the rates of youth who persistently felt sad or hopeless increased from 21% to 29% for teen boys, and from 36% to 57% for teen girls. Those that reported that they seriously considered attempting suicide increased from 16% to 22% over the same period (See Putting Youth Mental Health First: June 2023 Youth Mental Health Listening Tour Report at https://omh.ny.gov/omhweb/statistics/youth-mh-listening-tour-report.pdf for more information).

The National Center for Health Statistics recently released data indicating that, "Kids and young adults were nearly as likely to die by suicide as they were from homicide in 2020 and 2021, according to the CDC." Homicide rates that fell for 10 - 24 year olds from 2006-2014 increased 60% through 2021. The largest annual increase in homicides in the 20-year period happened between 2019 and 2020 with a 37% jump. Homicide rates nearly doubled for 15-19 year olds from 2014-2021 and surpassed suicide rates in 2020. General factors identified for the increased homicide and suicide rates among adolescents and young adults include limited access to mental health services and increased access to firearms. (See Suicides and Homicides Among Youth Reach a 20 Year High at https://www.axios.com/2023/06/15/suicides-homicides-among-youths-high for more information).

Locally, unhoused youth in a recent survey conducted by the Ithaca Youth Action Board and Coordinated Entry identified the need for "... no or low cost mental health care that is confidential, respectful, and culturally competent including increased diversity in mental health providers". These findings are consistent with the need for more mental health services for youth and young adults identified nationally. See The Ithaca/Tompkins Coordinated Community Plan 2022 at https://hsctc.org/wp-content/uploads/2022/06/The-Ithaca-Tompkins-CCP-2022.pdf for more information).

In June 2023, OMH in partnership with the Office of Children and Family Services (OCFS) held listening tours of youth across New York State in response to concerns about youth mental health. OMH and OASAS focused on the increased risk of suicide, the negative impact of social media on youth mental health and the crisis of racism that has a "profound and negative impact on communities of color." A total of 196 youth participated in the listening tours held in Rochester, Binghamton, Long Island, White Plains, and Plattsburgh. Youth provided recommendations including the importance of involving youth voice in decision making, investing in community based resources for recreation and mental wellness promotion, recognizing the critical role schools play in mental health promotion, prevention, and intervention, increasing access to low and no cost mental health services, and supporting students with information about resources available for evaluating a learning disability and other challenges as well as 504 and IEP plans. (See Putting Youth Mental Health First: June 2023 Youth Mental Health Listening Tour Report at https://omh.ny.gov/omhweb/statistics/youth-mh-listening-tour-report.pdf for more information).

Developmental Disabilities: The Tompkins County Developmental Disabilities Subcommittee has been working both on improving access to recreational opportunities for youth receiving OPWDD services and strengthening communication between caregivers and schools about the steps needed to ensure transitional supports are in place for youth at the time of high school completion.

Mental Health: The Collaborative Solutions Network, Tompkins County's System of Care for children, youth, and their families, implemented an action plan based on identified gaps in the local service delivery system with the support of OMH that includes the need for 1) improved communication for caregivers to know what services are available, 2) additional prevention and early intervention services, and 3) the creation of intensive in home services to support high needs youth. The Children's Home of Wyoming Conference located in Binghamton, New York, was recently awarded Children's Assertive Community Treatment (ACT) for Tompkins and Tioga Counties. This new service will better support the intensive treatment needs of families in our community.

Substance Use: In 2023, at least one in eight teenagers abused illicit substances. The rate of drug use has increased 61% nationally for 8th graders between 2016 and 2020, and 62% of teenagers have abused alcohol with half of teenagers misusing a drug at least once. Young adults ages 18-25 in New York State are almost nine percent more likely to use drugs than the average American their age, and the rate of overdose deaths due to opioids has increased 500% among 15-24 year olds since 1999 in the United States. (See Drug Use Among Youth: Facts and Statistics at https://drugabusestatistics.org/teen-drug-use/ for more information).

Increased substance use by middle school students across the United States and the higher than average substance use by young adults in New York State require continued focus on substance use prevention and early intervention to better

support youth and young adults including college students who live in Tompkins County. In the Local Community Services Priority Needs Survey, almost 57% of community members identified substance use prevention services as a priority need.

Goal 7: OASAS? Yes Goal 7: OMH? Yes Goal 7: OPWDD? Yes

Goal 7: Need Addressed 1 Transition age services

Goal 7: Need Addressed 2

Goal 7: Need Addressed 3

Goal 7, Objective 1: Title Provide Seamless Transition to Adult Services for Youth Receiving OPWDD Services

Goal 7, Objective 1, Target Completion Date Dec 31, 2025

Goal 7, Objective 1, Description Identify ways to reduce potential barriers to post-secondary transition support services for transition age youth.

Goal 7, Objective 2: Title Improve Access to Mental Health Services for Youth Including Transition Age Youth

Goal 7, Objective 2, Target Completion Date Dec 31, 2025

Goal 7, Objective 2, Description Support implementation efforts of the Action Plan approved by the Collaborative Solutions Network, the System of Care (SOC) for children's services in Tompkins County, to improve access to care through program expansion and improved communication/coordination of service offerings.

Goal 7, Objective 3: Title Ensure Availability of Effective Substance Use Prevention/Early Intervention Services for Youth and Young Adults

Goal 7, Objective 3, Target Completion Date Dec 31, 2025

Goal 7, Objective 3, Description Support prevention efforts to ensure the availability of effective substance use prevention services programming in schools, colleges and universities, and the community.

# Update to 2024-2027 Goals and Objectives Tompkins County Mental Health Services

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Goal 1			
Title	Support the implementation of recruitment/retention strategies by mental hygiene providers in Tompkins County as measured by a reduction in staff vacancies.		
Update	The workforce shortage and its impact on client services will be measured by requiring state pass through and county funded agencies to complete a survey identifying employee vacancy and turnover rates as well as any program closures, wait lists for services or reductions in services that have occurred as a result by end of 2024. Data will be shared with NY State Assembly and Senate district representatives to advocate for continued support in addressing workforce challenges. Workforce data collected in 2024 will further inform advocacy efforts in 2025. The survey will be expanded upon in 2025 to include point in time demographic data of the workforce to identify any gaps in workforce diversity that may need to be addressed in future years.		
OBJECTIVES			
Highlight Severity of the Workforce Crisis in Advocacy Efforts  Ongoing			
Understand Scope of Workforce Shortage		Complete	
Quantify Impact of the Workforce Shortage on Service Delivery		Complete	
Support Workforce Diversity Efforts		Ongoing	
OBJECTIVE UPDATES			

Goal 2			
Title	Promote a housing first approach that increases the availability of affordable, emergency, and supportive housing that best meets the needs of individuals who require intensive, specialized, community based interventions for stabilization and recovery across the mental hygiene system.		
Update	The Human Services Coalition of Tompkins County oversees Coordinated Entry (CoC). The CoC collects data as it relates to being unhoused and having a mental health, substance use, or developmental disability known collectively as mental hygiene disabilities. The CoC will be asked to present this information to the Community Services Board to better understand the intersection between homelessness and disability status. The Community Services Board and its subcommittees have invited agencies to discuss new housing solutions designed to meet the needs of individuals with mental hygiene disabilities. Guests included Lakeview and Unity House, the newly created SOS team for Tompkins, Tioga and Cortland counties, and the SPOE Coordinator. The Community Services Board and its subcommittees will continue to monitor progress and identify gaps in housing for people with mental hygiene disabilities. The Community Services Board has discussed residential closures that have occurred in the county this past year in OPWDD and OASAS. The OMH Community Residence was closed for several months but has recently reopened to accept clients. Closures have been related to the workforce shortage outlined in Goal Area One. Subcommittee Chairs will submit a written summary of residential reductions in their mental hygiene area to the Community Services Board for a review to ensure full knowledge of reductions in services in housing is understood.  The Community Services Board advocated for and approved LGU Opioid Settlement Funds in partnership with the City of Ithaca's Opioid Settlement dollars to be used to fund a new emergency housing, intensive case management and peer support services program for unhoused individuals with substance use and mental health needs. Catholic Charities of Tompkins Tioga was the successful RFP bidder. The program is launching in June 2024 and is funded for the next three years. Several housing construction projects have begun that will increase the housing supply for individuals with mental hygiene disabilit		
OBJECTIVES			
Better Understand the Interaction Between Homelessness and Disability		Complete	
Gather Information About Housing Solutions		Ongoing	
Gather Information about Housing Reductions		Complete	
Advocacy for Housing Solutions		Ongoing	
OBJECTIVE UPDATES			

#### Goal 3

#### Title

Crisis Services - Support the development of comprehensive crisis services that address the mental hygiene needs of Tompkins County residents.

Collaboration with local law enforcement and the Tompkins County Community Justice Center has resulted in the establishment of mental health and law enforcement crisis co-response team known as the Crisis Alternative Response and Engagement or CARE teams for the City of Ithaca and the rest of the county. The co-response model is based on best practice research and consultation with other successful co-response teams. Additionally, the Tompkins County Sheriffs Office, previous Diversity, Equity and Inclusion Officer of Tompkins County and Deputy Commissioner of Mental Health worked collaboratively to write and receive a CIT Grant that resulted in training for a broad array of local law enforcement and a county wide Sequential Intercept Mapping process. Cornell University just completed a sequential intercept mapping process this year that numerous community stakeholders participated in as well. One of the CARE Team clinicians recently completed the CIT train the trainer course to become a local CIT trainer ensuring ongoing sustainability of the CIT model being used by law enforcement.

### Update

Efforts have been made in 2024 to expand access to crisis supports. Cornell University recently established a crisis response team that coordinates with the county Mobile Crisis and Care Teams as needed. Mental Health Services of Tompkins County Whole Health applied for and received additional funding from New York State Office of Mental Health to add another CARE co-response team in Tompkins County. Mental Health Crisis Services of Tompkins County Whole Health will become an OMH approved crisis services program as a condition of receiving the funds as well. Ongoing efforts are also being made to establish a non-law enforcement response for sub-acute mental health crisis calls that could be received through a 911 diversion program or directly from 988.

The Mental Health Subcommittee plans to implement at least two events in 2025 to improve relationships between law enforcement and individuals who experience a mental health crisis. An event may include supporting CIT Training efforts by securing a panel of individuals with family or personal experience to share what it has been like to have law enforcement involved in the past when they have had a mental health crisis.

Ongoing efforts are being made by Tompkins County to support funding for a much-needed Crisis Stabilization Center that continues to be a gap in care in the county and region. The County has provided 1.5 million dollars to Cayuga Health Systems to pay for a portion of building a center.

Supporting Suicide Prevention Coalition efforts is an objective specific to the Director of Community Services who works closely with Suicide Prevention Coalition members. The Tompkins County Whole Health Website has a page on the coalition's work and promotes meetings. The Coalition has a Steering Committee of healthcare leaders invested in the implementation of Zero Suicide model who meet regularly and are supported by a Zero Suicide Work Group of the Coalition along with a public health fellow and other staff of Tompkins County Whole Health. An Over Target Request (OTR) for funding in 2025 was made by the Tompkins County Suicide Prevention and Crisis Services to create a part time Suicide Prevention Coalition coordinator position. The Community Services Board voted unanimously in support of funding the request for 2025 in their June 2024 meeting to further strengthen suicide prevention efforts.

#### **OBJECTIVES**

Identify Best Practice Crisis Response Across Mental Hygiene System	Complete
Expand Access to Crisis Supports	Ongoing
Improve Communication between Law Enforcement and Crisis Mental Health Recipients	Ongoing
Support efforts to establish Crisis Stabilization Center or similar program.	Ongoing
Support Suicide Prevention Efforts	Ongoing

### OBJECTIVE UPDATES

### Goal 4

### Title

Cross System Services - Improve access to care across the mental hygiene system.

The Whole Health website offers an updated listing of mental health and substance use resources available in the community. Health promotions staff of Tompkins County Whole Health regularly inform the community of resources and events related to mental hygiene services. The Developmental Disabilities subcommittee is compiling a list of OPWDD resources to add to the website and will partner with 211 in 2025 to ensure mental hygiene services data is updated frequently to improve community awareness of available services.

### Update

Removing barriers to accessing services across systems is an objective being addressed by the Developmental Disabilities subcommittee. OPWDD Care Management agencies regularly attend monthly Developmental Disabilities meetings and are able to share issues around access to care. This objective will be a focus of the subcommittee in 2025.

Whole Health has published comprehensive opioid overdose data on its website and is currently exploring partnerships with the local hospital and treatment providers to share overdose data to guide interventions across the mental hygiene system. The Substance Use Subcommittee met with Whole Health staff responsible for data collection and reviewed the newly added information put on the county's website. They also heard a presentation from Narcan providers across the county on distribution practices. As a result, there was a follow up meeting with Narcan providers and a decision to schedule a regular meeting to improve coordination of providing Narcan across the county. Substance Use Subcommittee Co-Chair will be attending regional opioid task force meetings to determine if participating would have added benefits for the county.

#### **OBJECTIVES**

Improve Public Awareness of Available Services Across Systems	Ongoing	
Remove Barriers to Access Services Across Systems	Ongoing	
Improve Coordination of Services Across Mental Hygiene System	Ongoing	
Use opioid overdose data to guide interventions across the mental hygiene system.	Ongoing	
OBJECTIVE UPDATES		

3 - Improve coordination of services across mental hygiene services - change to be completed by 2026 from 2025 due to the high number of objectives identified for 2025.

4 Use opioid overdose data to guide interventions across the mental hygiene system - modify to be completed in 2027 due to the complexity of the issue

Goal #5			
Title	Non-Clinical Supports - Recognize the importance of addressing social determinants of health to promote wellness and recovery and improved health equity.		
Update	The need to improve mental health equity by addressing social health and other barriers to accessing mental hygiene services continues to be expressed by the public and will be an ongoing focus of subcommittees and the Community Services Board efforts in the LSP.  The Director of Community Services will provide a summary of county health equity indicators for minoritized populations provided by OMH, OASAS and OPWDD to the Community Services board by the end of 2024 to establish a benchmark to compare to in the following years of this plan.  Peer services continue to grow in Tompkins County, however there are challenges related to role confusion, barriers caused by two certification processes (OMH and OASAS) and limited access to support for peers in organizations that will be explored further and addressed in future years of this plan.  Peer services have grown in the Personalized Recovery Oriented Program with the expectation to hire peers in the Clinic by the end of 2024. Peer		
services were a requirement of the newly developed emergency housing program funded by LGU opioid settlement dollars as well.  OBJECTIVES			
Identify Healthcare Access Barriers for Medicaid Recipients Receiving Mental Hygiene Services		N/A	
Improve access to quality mental hygiene services for minoritized populations.  N/A		N/A	
Improve Health Equity in the Mental Hygiene System  Ongoing		Ongoing	
Support greater awareness and utilization of peer support services.  Ongoing		Ongoing	
OBJECTIVE UPDATES			

1 and 3 are combined to say Improve mental health equity by addressing social health and other barriers to accessing mental hygiene services. We wanted to remove language related to medical/dental as is too broad a topic for the board. We also wanted to emphasize that there are access challenges to receiving mental hygiene services that have health equity implications.

2 Improve access to quality mental hygiene services for minoritized populations will be broken down into three objectives from the current one. 1) Complete an analysis of current state and local data available to identify gaps in services related to minoritized status, to be completed by end of 2024. 2) Provide outreach and support on best practice data collection processes in 2025 to funded mental hygiene agencies. and 3) collect local data from contract and volunteer agencies in 2026 that measures access to quality mental hygiene services received by minoritized populations.

Please see objective 3 is combined with objective 1 above.

Goal #6		
Title	Adverse Childhood Experiences - Build resilience in youth and adults impacted by childhood trauma.	
Update	The Mental Health Subcommittee will focus on this goal area in 2025.	
OBJECTIVES		
Promote Greater Awareness of the Impact of ACES in the lives of adults and children.  Ongoing		Ongoing
OBJECTIVE UPDATES		

Goal #7			
Title	Transition Age Youth Services - Ensuring adequate supports are available for youth especially as they transition to adulthood across the mental hygiene system.		
Update	The Developmental Disabilities Subcommittee made this a priority objective that was completed in 2024. They have initiated and will now regularly attend various school meetings twice annually with three different groups of school staff: school social workers, school counselors and the Committee of Special Education to advocate for and improve access to transition services for youth receiving OPWDD services.  The Mental Health Subcommittee will continue to work on this goal area. They held a forum with school staff to better understand gaps in services for youth including transition age youth. A board member applied and received System of Care (SOC) grant funds to hold focus groups with youth and their caregivers to better understand treatment needs and barriers including youth transitioning to adult services.  The Substance Use Subcommittee will review CLYDE Survey Data for 2024 and discuss prevention and early intervention needs of students in their June 2024 meeting. An RFP for prevention services will be posted in 2024 by Tompkins County Whole Health and will be designed to address current gaps in services. A Subcommittee Co-Chair provides substance use treatment services to college students and will provide a presentation on the needs of college students later in the year.		
OBJECTIVES			
Provide Seamless Transition to Adult Services for Youth Receiving OPWDD Services  Complete		Complete	
Improve Access to Mental Health Services for Youth Including Transition Age Youth  Ongoing			
Ensure Availability of Effective Substance Use Prevention/Early Intervention Services for Youth and Young Adults Ongoing		Ongoing	
OBJECTIVE UPDATES			

### 2024 Needs Assessment Form Tompkins County Mental Health Services

### Adverse Childhood Experiences Yes

Applies to OASAS? Yes Applies to OMH? Yes Applies to OPWDD? Yes

Need Applies to: Both Youth and Adults

Do any of the Goals on the Goals and Objectives Form address this need? Yes Need description (Optional):

#### Crisis Services Yes

Applies to OASAS? Yes Applies to OMH? Yes Applies to OPWDD? Yes

Need Applies to: Both Youth and Adults

Do any of the Goals on the Goals and Objectives Form address this need? Yes Need description (Optional):

### Cross System Services Yes

Applies to OASAS? Yes Applies to OMH? Yes Applies to OPWDD? Yes

Need Applies to: Both Youth and Adults

Do any of the Goals on the Goals and Objectives Form address this need? Yes Need description (Optional):

### **Housing** Yes

Applies to OASAS? Yes Applies to OMH? Yes Applies to OPWDD? Yes

Need Applies to: Both Youth and Adults

Do any of the Goals on the Goals and Objectives Form address this need? Yes Need description (Optional):

#### Non-Clinical Supports Yes

Applies to OASAS? Yes Applies to OMH? Yes Applies to OPWDD? Yes

Need Applies to: Both Youth and Adults

Do any of the Goals on the Goals and Objectives Form address this need? Yes Need description (Optional):

### Transition Age Services Yes

Applies to OASAS? Yes Applies to OMH? Yes Applies to OPWDD? Yes Need Applies to: Youth Only Do any of the Goals on the Goals and Objectives Form address this need? Yes Need description (Optional):

**Workforce** Yes Applies to OASAS? Yes Applies to OMH? Yes

Applies to OPWDD? Yes

Need Applies to: Both Youth and Adults

Do any of the Goals on the Goals and Objectives Form address this need? Yes

Need description (Optional):

LGU Representative: Harmony Ayers-Friedlander

Submitted for: Tompkins County Mental Health Services

### 2025 Needs Assessment Form Tompkins County Mental Health Services

### Adverse Childhood Experiences Yes

Applies to OASAS? Yes Applies to OMH? Yes Applies to OPWDD? Yes

Need Applies to: Both Youth and Adults

Do any of the Goals on the Goals and Objectives Form address this need? Yes

Need description (Optional):

### Crisis Services Yes

Applies to OASAS? Yes Applies to OMH? Yes Applies to OPWDD? Yes

Need Applies to: Both Youth and Adults

Do any of the Goals on the Goals and Objectives Form address this need? Yes

Need description (Optional):

### Cross System Services Yes

Applies to OASAS? Yes Applies to OMH? Yes Applies to OPWDD? Yes

Need Applies to: Both Youth and Adults

Do any of the Goals on the Goals and Objectives Form address this need? Yes Need description (Optional):

### **Housing** Yes

Applies to OASAS? Yes Applies to OMH? Yes Applies to OPWDD? Yes

Need Applies to: Both Youth and Adults

Do any of the Goals on the Goals and Objectives Form address this need? Yes Need description (Optional):

### Non-Clinical Supports Yes

Applies to OASAS? Yes Applies to OMH? Yes Applies to OPWDD? Yes

Need Applies to: Both Youth and Adults

Do any of the Goals on the Goals and Objectives Form address this need? Yes Need description (Optional):

### **Prevention** Yes

Applies to OASAS? Yes Applies to OMH? Yes Applies to OPWDD? Yes

Need Applies to: Both Youth and Adults

Do any of the Goals on the Goals and Objectives Form address this need? Yes Need description (Optional):

### Transition Age Services Yes

Applies to OASAS? Yes Applies to OMH? Yes Applies to OPWDD? Yes Need Applies to: Both Youth and Adults

Do any of the Goals on the Goals and Objectives Form address this need? Yes

Need description (Optional):

Workforce Yes

Applies to OASAS? Yes Applies to OMH? Yes Applies to OPWDD? Yes

Need Applies to: Both Youth and Adults

Do any of the Goals on the Goals and Objectives Form address this need? Yes

Need description (Optional):

LGU Representative: Harmony Ayers-Friedlander

Submitted for: Tompkins County Mental Health Services

Agency Name	Program Name	Program Type Name
Addiction Center of Broome County	, Addiction Center of Broome County	Specialty Mental Health Care
Inc.	SMH CMA	Management
Cayuga Addiction Recovery Services		Residential Rehabilitation and
(CARS)	(CARS)	Medically Supervised Outpatient
Catholic Charities of Tompkins 9.	Catholic Charities of Tompkins/Tioga	Treatment
Catholic Charities of Tompkins & Tioga County	Catholic Charities of Tompkins/Tioga	Services (ESS)
Catholic Charities of Tompkins &	Catholic Charities of Tompkins/Tioga	
Tioga County	catholic charties of foriphilis, floga	Addit Bit Hebs Habilitation
Catholic Charities of Tompkins &	Catholic Charities of Tompkins/Tioga	Adult BH HCBS Intensive Supported
Tioga County		Employment (ISE)
Catholic Charities of Tompkins &	Catholic Charities of Tompkins/Tioga	Adult BH HCBS Ongoing Supported
Tioga County		Employment (OSE)
Catholic Charities of Tompkins &	Catholic Charities of Tompkins/Tioga	
Tioga County	0 .1 .1 .0	Services
Catholic Charities of Tompkins &	Catholic Charities of Tompkins/Tioga	
Tioga County Catholic Charities of Tompkins &	Parent Partnership	Supports Advocacy/Support Services
Tioga County	ratent ratthership	Advocacy/Support Services
Cayuga Medical Center at Ithaca,	Cayuga Medical Center at Ithaca	Inpatient Psychiatric Unit of a
Inc.	Psychiatric Unit	General Hospital
Challenge Industries, Inc.	Assisted Competitive Employment	Assisted Competitive Employment
Challenge Industries, Inc.	Ongoing Integrated Supported	Ongoing Integrated Supported
	Employment	Employment Services
Challenge Industries, Inc.	Transitional Employment	Transitional Employment Placement (TEP)
Cornell University	Youth Peer Advocate Services	Advocacy/Support Services
Family & Children's Services of	Children's Crisis Outreach Program	Crisis Intervention
Ithaca, Inc.	Ç	
Family & Children's Services of	Elder Mobile Mental Health Unit	Outreach
Ithaca, Inc.		
Family & Children's Services of	Family Mental Health Program	Mental Health Outpatient
Ithaca, Inc.		Treatment and Rehabilitative
Family O. Children's Comisses of	Duncaha al Dunicat	Services (MHOTRS)
Family & Children's Services of Ithaca, Inc.	Preschool Project	Advocacy/Support Services
Franziska Racker Centers, Inc.	Care Coordination	Health Home Care Management
Franziska Racker Centers, Inc.	Care Coordination Non Medicaid	Health Home Non-Medicaid Care
Table Hadier School of His	and decident to the treated at	Management
Franziska Racker Centers, Inc.	SPOA	Single Point of Access (SPOA)
Franziska Racker Centers, Inc.	Turning Point Program	Day Treatment
Ithaca Youth Bureau (IYB)	Recreational Support Services -	Adult Recreational Services
	Ithaca Youth Bureau	
Lakeview Health Services, Inc.	HH CM-Tompkins	Health Home Care Management
Lakeview Health Services, Inc.	Horizon Apartments	Apartment/Treatment

Lakeview Health Services, Inc.	Lakeview Health Services - HH Non-	Health Home Non-Medicaid Care
	Med CM - Tompkins	Management
Lakeview Health Services, Inc.	Lakeview Health Services SMH CMA	Specialty Mental Health Care
	(AOT)	Management
Lakeview Health Services, Inc.	Lakeview MH/MRT Supp Housing	Supportive Housing
,	Tompkins Cty - Comm Svcs	
	,	
Lakeview Health Services, Inc.	Lakeview Special Needs SRO	SRO Community Residence
Lakeview Health Services, Inc.	Lakeview Supp Housing/RCE SH	Supportive Housing
	Tompkins Cty - Comm Svcs	
Lakeview Health Services, Inc.	Lakeview-Supported Housing -	Supportive Housing
, in the second	Tompkins County - Comm. Svcs	
Lakeview Health Services, Inc.	Markham Residence	Congregate/Treatment
Lakeview Health Services, Inc.	West End Heights	Apartment/Treatment
Lakeview Health Services, Inc.	West End Heights ESSHI	Supportive Single Room Occupancy
		(SP-SRO)
Mental Health Association in	Advocacy/Support Services	Advocacy/Support Services
Tompkins County	, lavocacy, support services	navocacy, support services
Mental Health Association in	Family Peer Support Services	Family Peer Support Services -
Tompkins County	runny reer support services	Children & Family
Mental Health Association in	Psychosocial Peer Support	Psychosocial Club
Tompkins County	r sychosociai r eer support	1 Sychosocial Club
Mental Health Association in	Respite Services	Respite Services
Tompkins County	Nespite Services	Nespite Services
REACH Medical	Behavioral Health Outreach	Prevention, Recovery, and Support
REACTI Medical	Deliavioral Fleatti Outreach	Services and
		Coordination/Integration with Other
St. John's Community Services - New	SICS Quitroach	Services Outreach
•	SICS Outreach	Outreach
York	Crisis Intervention	Crisis Intervention
Suicide Prevention & Crisis Services	Crisis intervention	Crisis Intervention
of Tompk	Suicida Dray Tampkins Co. Info 9	Advacacy/Cupport Convices
Suicide Prevention & Crisis Services	Suicide Prev. Tompkins Co Info &	Advocacy/Support Services
of Tompk	Ref.	Outrook
Suicide Prevention & Crisis Services	Suicide Prev. Tompkins PC&E	Outreach
of Tompk	Condinated Children's Comission	Condinated Children's Comics
Tompkins County Mental Health	Coordinated Children's Services	Coordinated Children's Service
Services	5 15 /6 6 : 5: 1	Initiative
Tompkins County Mental Health	Dual Recovery/Co-Occuring Disorder	MICA Network
Services Taxable Control Manual Hardin	Program	Fig. 1. Dec. 10
Tompkins County Mental Health	Family Peer Support Services (SOC	Family Peer Support Services -
Services	Expansion Grant)	Children & Family
Tompkins County Mental Health	Outreach	Outreach
Services		
Tompkins County Mental Health	TCHMC	Monitoring and Evaluation, CSS
Services		

Tompkins County Mental Health Services	Tompkins Co. Mental Health	Crisis Intervention
Tompkins County Mental Health	Tompkins County Mental Health	Mental Health Outpatient
Services	Clinic	Treatment and Rehabilitative
		Services (MHOTRS)
Tompkins County Mental Health	Tompkins County PROS	Comprehensive PROS with Clinical
Services		Treatment
Tompkins County Mental Health	Tompkins County PROS Employment	PROS Employment Initiative
Services	Initiative	
Tompkins County Mental Health	Tompkins County SPOA - C&Y	Single Point of Access (SPOA)
Services		
Tompkins County Mental Health	Transition Management Services	Transition Management Services
Services		
T-S-T BOCES	T-S-T BOCES	Primary Prevention Services
Unity House of Cayuga County, Inc.	CORE Empowerment Services - Peer	CORE Empowerment Services - Peer
	Supports	Supports
Unity House of Cayuga County, Inc.	Tompkins/Tioga County Crisis	Crisis/Respite Beds
	Respite Bed	
Unity House of Cayuga County, Inc.	UH Cayuga Supp Housing/RCE SH	Supportive Housing
	Tompkins Cty - Comm Svcs	
Unity House of Cayuga County, Inc.	Unity House Cayuga SH/PC Long	Supportive Housing
	Stay Tompkins Cty-Comm Svcs	
Unity House of Cayuga County, Inc.	Unity House Cayuga/Supp Housing	Supportive Housing
	Tompkins Cty - Comm Svcs	