2021 Mental Hygiene Executive Summary
Tompkins County Mental Health Services
Certified: Frank Kruppa (12/7/20)

Tompkins County Mental Health Services (TCMHS) is dedicated to identifying and filling the gaps in our local substance use, mental health, and developmental disability services. The system transformation occurring throughout the state and country brings our focus on prevention, treatment, and recovery services. TCMHS is focused on outcomes for our community memebers facing mental illness, substance use disorders, and developmental disabilities. In recognizing the need to address the transformational challenges within our department and community, TCMHS has identified four priorities to focus resources and encourage opportunity for collaboration, outlined in this plan. These areas align with our state partners planning efforts as well as managed care transformation plans. The goals will enable TCMHS to respond to the needs identified by our behavioral health community and agencies. Many of the goals cut across prioritized state identified goals within the behavioral health system such as housing, workforce, and community services. This plan will guide TCMHS toward changes affecting our community health system in coordination with our state and regional partners.

Office of Addiction Services and Supports

Accessibility   **Contact**

Disclaimer   **Language Access**

Privacy Policy

Mental Hygiene Goals and Objectives Form
Tompkins County Mental Health Services (70130)
Certified: Frank Kruppa (12/2/20)

Mental Hygiene Law, § 41.16 "Local planning; state and local responsibilities" states that "each local governmental unit shall: establish long range goals and objectives consistent with statewide goals and objectives." The Goals and Objectives Form allows LGUs to state their long-term goals and shorter-term objectives based on the local needs identified through the planning process and with respect to the State goals and objectives of each Mental Hygiene agency.

The information input in the 2020 Goals and Objectives Form is brought forward into the 2021 Form. LGUs can use the 2020 information as starting point for the 2021 Plan but should ensure that each section contains relevant, up-to-date responses.

Please indicate below if the overall needs of each disability population got better or worse or stayed about the same over the past year. Completion of these questions is required for submission of the form.

New To assist LGUs in the assessment of local substance use disorder (SUD) needs, OASAS Planning has developed a county-level, core-dataset of SUD public health data indicators. These reports are based on the recommendations of the Council of State and Territorial Epidemiologists and the regularly updated county-level datasets available in New York State. Each indicator compares county-level population-based rates to statewide rates. Reports for all counties are available in the County Planning System Under **Resources -> OASAS Data Resources -> Substance Use Disorder Key Indicators**

1. Overall Needs Assessment by Population (Required)

Please explain why or how the overall needs have changed and the results from those changes.

The question below asks for an overall assessment of unmet needs; however certain individual unmet needs may diverge from overall needs. Please use the text boxes below to describe which (if any) specific needs have improved, worsened, or stayed the same.

a) Indicate how the level of unmet **mental health service needs**, overall, has changed over the past year: ◯ Improved ◯ Stayed the Same ⦿ Worsened

Please describe any unmet **mental health** service needs that have **improved**:

Tompkins Mental Health service needs remain unmet, directly relating to the unique issues at our local level. These are discussed further with our goals and priorities outlined throughout this plan. Main Mental Health unmet needs:

- Housing - access to safe and affordable housing of all levels to cover the care continuum to address unmet needs in Tompkins.
- Workforce recruitment & retention and employment high need for - licensed professionals, direct and residential care staff, fair/living wage, peer workforce development, and overall workforce support for high stress environment.
- Treatment & service opportunities - expand ACT, expand youth treatment & supports, OASAS medication assisted treatment & crisis, and improve access.
- Transportation - expand reliable, accessible, and affordable transportation within Tompkins' unique rural and urban environment.
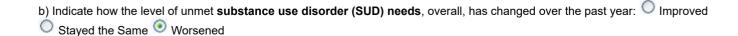
Please describe any unmet **mental health** service needs that have **stayed the same**:

Housing supply fails to meet the demand.
Housing quality remains poor given high demand.

Please describe any unmet **mental health** service needs that have **worsened**:

Housing costs exceed reimbursement support to providers offering restoritive and crisis levels of services.
Workforce recruitment and retention for clinicians and residental staff is critial. Clinical professionals availability is limited.
Reimbursement is limited and not at a living or fair wage given Tompkins outlyer status with cost of living.
Streamlined access to treatment and services is worsening given excessive documentation requirement for intake and admission.
Access to and availability of transportation service needs from our rural community to services centralized in Ithaca, NY is increasing.
Peer workforce struggles to complete certification process with inconsistency between OMH & OASAS certification process.

b) Indicate how the level of unmet **substance use disorder (SUD) needs**, overall, has changed over the past year: ◯ Improved ◯ Stayed the Same ⦿ Worsened

Please describe any unmet **SUD** service needs that have **improved**:

Successful start of expanding medication assisted treatment.
Successful start of new open access program.
Improved collaboration between providers and services.

Please describe any unmet **SUD** service needs that have **stayed the same**:

Outpatient clinic program services have stayed the same - with hope for expanding prevention and MAT via OTP further.
Pending SUD residentail treatment services expansion based on capital project from 2017.

Please describe any unmet **SUD** service needs that have **worsened**:

Housing need for OASAS Supportive housing services and apartment treatment program for successful step down in treatment from residential and inpatient treatment.
Critial level of need for crisis/inpatient treatment services specific to chemical dependence withdrawal and stabilization services and/or chemical dependence inpatient rehabilitation services (aka: detox).
Expanding outpatient treatment via OTP for additional medication assisted treatment.
Access to and availability of transportation service needs from our rural community to services centralized in Ithaca, NY is increasing.
Workforce availability and retention for licensed professionals and residential staff at all levels of the care continuum.

c) Indicate how the level of unmet needs of the **developmentally disabled** population, overall, has changed in the past year: ○

Improved ○ Stayed the Same ◉ Worsened

Please describe any unmet **developmentally disability** service needs that have **improved**:

Improving collaboration with state partners and local field office.

Please describe any unmet **developmentally disability** service needs that have **stayed the same**:

Access to services has shifted and maintained.

Please describe any unmet **developmentally disability** service needs that have **worsened**:

Workforce recruitment and retention for clinicians and residental staff is critial. Clinical professionals availability is limited.
Reimbursement is limited and not at a living or fair wage given Tompkins outlyer status with cost of living.
Housing and crisis service/rehabilitation services expansion needed to meet unmet need.
Threat to highly needed beds via high risk housing at DDSO due to workforce recruitment and retention issues at OPWDD.
Streamlining access process for families to access crisis & rehabilitiaton services and treatment supports.

The second section of the form includes; goals based on local need; goals based on state initiatives and goals based in other areas. The form allows counties to identify forward looking, change-oriented goals that respond to and are based on local needs and are consistent with the goals of the state mental hygiene agencies. County needs and goals also inform the statewide comprehensive planning efforts of the three state agencies and help to shape policy, programming, and funding decisions. For county needs assessments, goals and objectives to be most effective, they need to be clear, focused and achievable. The following instructions promote a convention for developing and writing effective goal statements and actionable objectives based on needs, state or regional initiatives or other relevant areas.

2. Goals Based On Local Needs

Please select any of the categories below for which there is a **high level of unmet need** for LGU and the individuals it serves. (Some needs listed are specific to one or two agencies; and therefore only those agencies can be chosen). When considering the level of need, compare each issue category against all others rather than looking at each issue category in isolation.

- **For each need identified you will have the opportunity to outline related goals and objectives, or to discuss the need more generally if there are no related goals or objectives.**
- **You will be limited to one goal for each need category but will have the option for multiple objectives.** For those categories that apply to multiple disability areas/state agencies, please indicate, in the objective description, each service population/agency for which this unmet need applies. (At least one need category must be selected).

Issue Category		OASAS	OMH	OPWDD
a)	Housing	☑	☑	☑
b)	Transportation	☑	☑	☑
c)	Crisis Services	☑	☑	☑
d)	Workforce Recruitment and Retention (service system)	☑	☑	☑
e)	Employment/ Job Opportunities (clients)	☑	☑	☐
f)	Prevention	☐	☑	☐
g)	Inpatient Treatment Services	☐	☐	☐

h)	Recovery and Support Services	☐	☑	☐
i)	Reducing Stigma	☐	☐	☐
j)	SUD Outpatient Services	☑	☐	☐
k)	SUD Residential Treatment Services	☑	☐	☐
l)	Heroin and Opioid Programs and Services	☑	☐	☐
m)	Coordination/Integration with Other Systems for SUD clients	☐	☐	☐
n)	Mental Health Clinic	☐	☐	☐
o)	Other Mental Health Outpatient Services (non-clinic)	☐	☑	☐
p)	Mental Health Care Coordination	☐	☑	☐
q)	Developmental Disability Clinical Services			☐
r)	Developmental Disability Children Services			☐
s)	Developmental Disability Student/Transition Services			☐
t)	Developmental Disability Respite Services			☑
u)	Developmental Disability Family Supports			☑
v)	Developmental Disability Self-Directed Services			☑
w)	Autism Services			☐
x)	Developmental Disability Front Door			☐
y)	Developmental Disability Care Coordination			☑
z)	Other Need 1(Specify in Background Information)	☐	☐	☐
aa)	Other Need 2 (Specify in Background Information)	☐	☐	☐
ab)	Problem Gambling	☐	☐	☐
ac)	Adverse Childhood Experiences (ACEs)	☐	☑	☐

(After a need issue category is selected, related follow-up questions will display below the table)

2a. Housing - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more information.

Housing is in high demand and a critical need for Tompkins OMH, OASAS, & OPWDD populations. Tompkins recognizes that housing is a key social determinant of health that is essential in promoting recovery and best possible outcomes for our vulnerable populations. The Homeless and Housing Task Force, facilitated by the Human Services Coalition, presents topics that educate and update members on emergency shelter, supplemental food programs, affordable housing, transportation, and other emerging basic needs of homeless individuals or persons at risk of homelessness. The Homeless & Housing Task Force is also the educational arm of the Continuum of Care (CoC). The Ithaca Housing assessment has helped to further assess the high need of housing within Tompkins. Tompkins has a prioritized need for housing services and supports of all levels. Tompkins has over a decade of planning, assessment, and activities attempting to address this high need for our population including our OMH, OASAS, & OPWDD consumers. Data sources supporting this priority:
https://hsctc.org/wp-content/uploads/2018/07/Homeless-Resource-Chart.pdf
https://hsctc.org/wp-content/uploads/2017/07/Ithaca-Tompkins-10-Year-Plan-10_11.pdf
https://issuu.com/cityofithacaplanninganddevelopment/docs/2015_planithaca_individual_pages_is
http://www.cityofithaca.org/557/Action-Plans
http://tompkinscountyny.gov/files/planning/housing_choices/documents/HNA_2016/Survey%20of%20Special%20Needs%20Providers.pdf
http://www.tompkinscountyny.gov/files/planning/housing_choices/documents/NOFA_CHDF_2017OpenRound.pdf
http://tompkinscountyny.gov/planning/housing-needs
http://hsctc.org/uploads/documents/HSC%20Resources/2015%20Summary%20Homeless%20Shelter%20Figures.pdf
http://hsctc.org/uploads/documents/AR2016.pdf
http://www.housingtompkins.com/
http://www.tompkinscountyny.gov/files/planning/housing_choices/documents/OverviewofSubsidizedHousingOrganizations.pdf

Do you have a Goal related to addressing this need? ⦿ Yes ◯ No

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? ⦿ Yes ◯ No

The Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity

that simply maintains the status quo.

Increase supply of OMH, OASAS, & OPWDD housing services to meet the increasing demand by developing new housing options licensed or supported by OMH, OASAS, and OPWDD as well as other unique transitional and crisis housing options in Tompkins.

Objective Statement

Objective Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

Add an Objective (Maximum 5 Objectives per goal) | Remove Objective

Objective 1: Expand levels of care in crisis, transitional, and supported housing community bed opportunities
    Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Objective 2: Develop new projects for mixed use housing options
    Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Objective 3: Address housing as a key social determinant of health
    Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Objective 4:
    Applicable State Agency: (check all that apply): ☐ OASAS ☐ OMH ☐ OPWDD

Objective 5:
    Applicable State Agency: (check all that apply): ☐ OASAS ☐ OMH ☐ OPWDD

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

 Tompkins population continues to increase with an average of 2-3% growth each year. Since 2008 Tompkins continues to see an increase in our population yearly. Tompkins unique location includes being a main NYS regional catchment for multiple state OMH, OASAS, & OPWDD hosital and treatment center discharges - as well as NYS Prison releases. Reinvestment of state psychiatric and institutional bed closures savings to Tompkins would help to address housing for these vulnerable populations. This need is supported by research and outcomes in social determinants of health and through the medicaid transformation planning.

http://population.us/county/ny/tompkins-county/
https://www.newyorkupstate.com/news/2017/03/new_york_population_numbers_census_shows_which_counties_are_growing_shrinking.html

2b. Transportation - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more information.

Access to safe, affordable, and reliable transportation is in high demand for our OMH, OASAS, & OPWDD populations. Tompkin's rural populations have the highest needs for transportaion to treatment and services centralized in the city of Ithaca. Travel to employment, health and human service agencies, shopping, and family and social supports is limited. This disconnects them from the social determinants of health resources and activities they need to lead active and productive lives. Tompkins county has multiple meetings and coalitions working to address transportation needs of our population including TCAT, Way-To-Go, and rural networks. The unique and urban and rural environment make this difficult for our OMH, OASAS, & OPWDD population.
https://www.tccoordinatedplan.org/the-plan.html
http://onlinepubs.trb.org/onlinepubs/nchrp/docs/NCHRP20-65(68)_FR.pdf
www.tompkinscountyny.gov/files/planning/ComprehensivePlan/FINAL-March%2012-low%20res.pdf
https://www.tcatbus.com/about/boards-committees/
https://www.tccoordinatedplan.org/transportationcamp-2018.html
https://www.aarp.org/content/dam/aarp/livable-communities/documents-2016/Age%20Friendly%20Ithaca%20and%20Tompkins%20County%20Action%20Plan.pdf
 http://www.tompkinscountyny.gov/files/cofa/Medical%20Transportation%20Resources%20%203-20-2014%20dem_1.pdf

Do you have a Goal related to addressing this need? ⦿ Yes ◯ No

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? ⦿ Yes ◯ No

The Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

Expansion via collaboration with existing transportation coalitions and services to improve Tompkins County access to transportation to community social supports, services, and treatment for our OMH, OASAS, & OPWDD populations.

Objective Statement

Objective Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

Add an Objective (Maximum 5 Objectives per goal) | Remove Objective

Objective 1: Imporve access to transportation for rural and high need populations to treatment and services
    Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Objective 2: Collaborate with county and regional committees and networks to meet this demand
    Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

 Transportation availability and accessibility has reduced in the last year. Accessing medicaid transportation is problematic - an appointment can require multiple phone calls with over an hour of time waiting on the phone for clients and clinicians.

2c. Crisis Services - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more information.

Crisis services needs are emphasized in our housing and treatment expansion needs in Tompkins. An expanded array of crisis services in our community requires improved resources and reimbursement to ensure that emerging needs are identified and appropriate supports are available. Options to address crisis needs of Tompkins OMH, OASAS, & OPWDD expanded to include a 24 hour, 7 day per week available county wide behavioral health mobile crisis team. Third consecutive year of critical need (and increasing) for OASAS chemical dependence withdrawal and stabilization services and/or chemical dependence inpatient rehabilitation services. Sustainability for crisis respite or OMH HCBS crisis services is not supported by early attempts and cost of staffing.

Do you have a Goal related to addressing this need? ⦿ Yes ◯ No

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? ⦿ Yes ◯ No

The Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

Expansion of crisis related services to address gaps in our community support and treatment options for our OMH, OPWDD, & OASAS service population.

Objective Statement

Objective Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

Add an Objective (Maximum 5 Objectives per goal) | Remove Objective

Objective 1: Expand and crisis respite options.
    Applicable State Agency: (check all that apply): ☐ OASAS ☑ OMH ☑ OPWDD

Objective 2: Initiate OASAS chemical dependence withdrawal and stabilization / medically supervised withdrawal service/treatment.
    Applicable State Agency: (check all that apply): ☑ OASAS ☐ OMH ☐ OPWDD

Objective 3: Expand services available via the Crisis services with sustainability
    Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Objective 4: Comprehensively assess current criminal justice diversion and re-entry services and supports.
    Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

 Options to address crisis needs of Tompkins OMH, OASAS, & OPWDD expanded to include a 24 hour, 7 day per week available county wide behavioral health mobile crisis team. Tompkins submitted a Crisis Plan to OMH in 2018. Statainability for these needs is always being assessed in the new managed care environments.

2d. Workforce Recruitment and Retention (service system) - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more information.

Tompkins County has a high demand for licensed clinicians and direct care staff for our OMH, OASAS, & OPWDD agencies, at a competitive wage. Tompkins high cost of living furthers this need, causing difficulty in recruitment and retention of a qualified workforce.
http://www.tcworkerscenter.org/2017/08/tompkins-county-living-wage-biannual-update-announced-today-15-11hour/
http://tcad.org/content/uploads/2018/04/TCAD18_forweb.pdf
http://livingwage.mit.edu/counties/36109
http://tompkinscountyny.gov/wfny
 http://tompkinscountyny.gov/files/workforceny/LaborExecSum08.pdf
https://www.alternatives.org/social-responsibility/impacting-our-community/living-wage-study.html
http://tompkinscountyny.gov/files/workforceny/Tompkins%20PY14-15%20Local%20Plan_2.pdf
http://tcad.org/economic-data/#workforce
https://www.tompkinschamber.org/ojt

Do you have a Goal related to addressing this need? ◉ Yes ○ No

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? ◉ Yes ○ No

The Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

Promote Tompkins and information sharing about community workforce opportunities, trainings, and development.

Objective Statement

Objective Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

Add an Objective (Maximum 5 Objectives per goal) | Remove Objective

Objective 1: Promote and encourage professional training in evidence-based practices, person-centered care, and dual diagnosis.
    Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Objective 2: Identify and target training gaps
    Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Objective 3: Recruitment planning in collaboration with local universities & colleges.
    Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Objective 4: Partnership for living and fair wages for residential and direct care workforce
    Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Objective 5: Increase local recruitment/retention of qualified candidates through collaborative employee development planning.
    Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

 Tompkins continues to show increased need for trained workforce at a competative wage (living and fair wage).

http://tcad.org/content/uploads/2013/12/TCAD_AR_2017_web.pdf
https://www.alternatives.org/social-responsibility/impacting-our-community/living-wage-study.html

2e. Employment/ Job Opportunities (clients) - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more information.

Inconsistency between OMH & OASAS Peer certification process affecting development of this needed resource.
Peer certification streamline process will improve development, recruitment and reimbursement in the managed care environment.
Positive collaboration with OMH & OASAS for support in development of peer resources at the local level via field office support.

Do you have a Goal related to addressing this need? ○ Yes ⦿ No

If "No", Please discuss any challenges that have precluded the development of a goal (e.g. external barriers):

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2f. Prevention - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)

- Narrative describing importance of goal

This form will allow attachments, so in the Background Information box you could reference an attached document for more information.

Tompkins is working to increase coordination with the public health department regarding addressing eh prevention agenda via the Community Health Assessment and Community Health Improvement Plan. Need for more education, prevention, and public awareness of signes and symtpoms of mental illness and substance use disorders. Development and expansion of key adult and youth OMH, OASAS, & OPWDD treatment and services, expecially for our highest risk and rural population. Development and expansion of adult SUD treatment services: detox, crisis, peers, harm reduction and youth prevention. Increase support and opportunities for local prevention efforts regarding the increase in substance abuse. Development and expansion of adult and youth MH services: ACT, peers, crisis, suicide prevention, forencis, youth and HCBS.
http://www.clmhd.org/img/uploads/Southern%20Tier%20RPC%20Region%20HCBS%20Contact%20List1.pdf
http://hsctc.org/uploads/documents/AR2016.pdf
http://www.collaborativesolutionsnetwork.org/pdf/spoa-resource-guide.pdf
http://www.tompkinscountyny.gov/files/health/pnc/cha/CHIP-Tomp-2016-2018.pdf
http://www.tompkinscountyny.gov/files/health/pnc/cha/CHA-Tomp-2013-2017.pdf

Do you have a Goal related to addressing this need? ⊙ Yes ○ No

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? ○ Yes ⊙ No

The Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

Develop and expand outpatient adult and youth OMH, OASAS, & OPWDD treatment and prevention services, especially for our highest risk and rural populations to reduce unnecessary hospitalizations and incarcerations.

Objective Statement

Objective Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

Add an Objective (Maximum 5 Objectives per goal) | Remove Objective

Objective 1: Expand SUD treatment for medication assisted treatment and dual recovery
    Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☐ OPWDD

Objective 2: Expand MH service delivery with ACT, peers, crisis, suicide prevention, forensic, youth, and HCBS
    Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Objective 3: Service provider collaboration engagment towards National and NYS healthcare transformation efforts for integrated care
    Applicable State Agency: (check all that apply): ☑ OASAS ☑ OMH ☑ OPWDD

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

Struggle to address needs and objectives given workforce recruitment and retention needs.

2h. Recovery and Support Services - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

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Integration and collaboration of the state and local systems of care is key to the service needs in Tompkins. Community education efforts emphasizing that MH, SUD, & DD are health needs. Increase use of data informed decision making across the system of

care to address cost, value, and quality. Tompkins will coordinate with wellness, recovery, and rehabilitation. Plans to expand recovery and support services through public health, anti-stigma campainges, schools, rural networks, and social media.

Do you have a Goal related to addressing this need? ○ Yes ◉ No

If "No", Please discuss any challenges that have precluded the development of a goal (e.g. external barriers):

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2j. SUD Outpatient Services - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

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Tompkins is supportive efforts to expand medication assisted treatment via Jail programing, University of Buffalo MD training, Care Compass Network (PPS) planning, and OASAS Clinic expansion requests.

Do you have a Goal related to addressing this need? ○ Yes ◉ No

If "No", Please discuss any challenges that have precluded the development of a goal (e.g. external barriers):

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2k. SUD Residential Treatment Services - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

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Tompkins supports the efforts of Cayuga Addition Recovery Services (CARS) and Alcohol and Drug Council to expand residential and treatment SUD treatment services.

Do you have a Goal related to addressing this need? ◉ Yes ○ No

Goal Statement- Is this Goal a priority goal (Maximum 5 Objectives per goal)? ◉ Yes ○ No

The Goal Statement should be a specific, clear, and succinct statement of a desired outcome. It should be focused on a change that is tangible, achievable and within the control of the LGU. Avoid vague statements that focus on "maintaining" or "continuing" activity that simply maintains the status quo.

Providing safe and stable supportive and rehabilitation housing for those living with alcohol and drug dependence in addition to having wrap around and other supports and services available, is essential in promoting their chances for the best possible outcomes.

Objective Statement

Objective Statements should describe a shorter-term action the LGU will take to achieve the longer-term goal. Each goal should have at least one objective. You may have multiple objectives for each goal. The objective should identify the approach to be taken to help achieve the desired outcome. It answers the question, "How will the goal be achieved?"

(Maximum 5 Objectives per goal) |

Objective 1: Promote affordable, safe and integrated treatment options within Tompkins County.
    Applicable State Agency: (check all that apply): ☑ OASAS ☐ OMH ☐ OPWDD

Objective 2: Sober housing for those coming out of Rehab or are presently in treatment and are in sobriety, proper housing is critical for their continued recovery.
    Applicable State Agency: (check all that apply): ☑ OASAS ☐ OMH ☐ OPWDD

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2l. Heroin and Opioid Programs and Services - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

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Tompkins county is concerned about population health in the current opioid crisis and finding reduction in overdose. A full spectrum of supports and services are being explored to address this issue such as diversion and medication assisted treatment. Positive outcomes are reflective of increased training and availability of Naltrexone.
http://www.tompkinscountyny.gov/files/health/pnc/cha/CHA-Tomp-2013-2017.pdf
http://www.cityofithaca.org/documentcenter/view/4224

Do you have a Goal related to addressing this need? ◯ Yes ⦿ No

If "No", Please discuss any challenges that have precluded the development of a goal (e.g. external barriers):
 This need is already included in crisis, housing, SUD residential, and other areas of this plan.

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2o. Other Mental Health Outpatient Services (non-clinic) - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

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The schools in our community are increasingly the place where the needs of our children are first identified. Schools are searching for expertise and understanding that will build their capacity to serve all children more successfully. The complexity of children's needs only seems to be increasing and there is increased awareness of the value of and need to partner with community services. The specific needs of Transition Aged Youth would benefit from more focused support. Inclusive recreational opportunities for children with developmental, behavioral and mental health needs are limited in our community. Even when a child identifies an opportunity they have an interest in being part of, the supports that will maximize their success may not be available. We know that when these experiences go well, self-esteem is enhanced, more relationships are developed and children can become more motivated to learn new skills. Educate providers, schools and families about "the system" and changes in the system when they occur. Improve connection with 211 services to keep information current. Involve CSE chairs and guidance counselors.

Do you have a Goal related to addressing this need? ◯ Yes ⦿ No

If "No", Please discuss any challenges that have precluded the development of a goal (e.g. external barriers):
The OMH youth transition to managed care continues to disrupt services and planning efforts at the local level. Youth providers and our schools would benefit from clear direction and guidance on the future transition of these services. Governmental insecurity related to the managed care roll out and future value based payment models makes local planning difficult.

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2p. Mental Health Care Coordination - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

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Health Home care management was supported through OMH involvement and expansion of health home plus in 2018. High needs remain for this population and expansion of criteria of inclusion to this extra level of service and support to cover non-medicaid and forensic re-entry care management.
Care management is the critical sorce of synthesizing integrated treatment while addressing social determinants of health. Workforce retention and recruitment through living and fair wage is critical to achieve statewide goals for HARP clients linkage to HCBS. HCBS statewide goals are dependent on Health Home care managers and urgent need to streamline the documentation for outreach, admission, HARP, and all other documentation. Over-reaching documentation and data gathering expectations of Health Home care management far exceeds waiver agreement with federal goverment and are directing interfering with the success of this program.

Do you have a Goal related to addressing this need? ◯ Yes ⦿ No

If "No", Please discuss any challenges that have precluded the development of a goal (e.g. external barriers):

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2t. Developmental Disability Respite Services - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

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Developmental Disability assessment and service access improvement for our OPWDD population would help with linkages. Changes and transformation in the OPWDD system continue to leave unmet needs for our local consumers and families. Respite services availability may be over an hour drive away for Tompkins OPWDD consumers. Increased local availability and access would help meet this need.

Do you have a Goal related to addressing this need? ◯ Yes ⦿ No

If "No", Please discuss any challenges that have precluded the development of a goal (e.g. external barriers):

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2u. Developmental Disability Family Supports - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

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Multiple changes over the last few years and instability in the OPWDD system have left families confused about services and access.

Do you have a Goal related to addressing this need? ◯ Yes ◉ No

If "No", Please discuss any challenges that have precluded the development of a goal (e.g. external barriers):

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2v. Developmental Disability Self-Directed Services - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

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Multiple changes in the OPWDD system and leadership have caused confusion in system services and availability.

Do you have a Goal related to addressing this need? ◯ Yes ◉ No

If "No", Please discuss any challenges that have precluded the development of a goal (e.g. external barriers):
OPWDD system leadership and development.

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2y. Developmental Disability Care Coordination - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

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Rapid development and transformation of DD services requires further local assessment to meet the need of Tompkins DD population.

Do you have a Goal related to addressing this need? ◯ Yes ◉ No

If "No", Please discuss any challenges that have precluded the development of a goal (e.g. external barriers):
Included within other goals.

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to

identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.

2ac. Adverse Childhood Experiences (ACEs) - Background Information

The Background Information box is a free-text box for LGUs to provide any additional information or more details related to the need and the Goal, such as:

- Data sources used to identify need (e.g. hospital admission data)
- Assessment activities used to indicate need or formulate goal (e.g. community forum)
- Narrative describing importance of goal

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Care Compass Network (PPS) is working toward ACEs taskforce at local and regional level to address assessment and prevention utilizing resilency building.

Do you have a Goal related to addressing this need? ◯ Yes ◉ No

If "No", Please discuss any challenges that have precluded the development of a goal (e.g. external barriers):
Currently in the development with regional initiative via the PPS.

Change Over Past 12 Months (Optional)

This optional, free-text box allows LGUs to describe any change in the need driving the goal or any progress made towards the goal in the last year. Where possible, include specific measurable accomplishments and milestones achieved. You may also want to identify barriers to achieving stated goals and objectives and describe the rationale for any changes made to the goal statement or associated strategies.