

2018
Local Services Plan
For Mental Hygiene Services

Tompkins County Mental Health Services
October 31, 2017



Office of
Mental Health

Office of Alcoholism and
Substance Abuse Services

Office for People With
Developmental Disabilities

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Executive Summary	Optional	Certified
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Alcoholism and Substance Abuse Subcommittee Roster	Required	Certified
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Mental Hygiene Local Planning Assurance	Required	Certified

2017 Mental Hygiene Executive Summary
Tompkins County Mental Health Services
Certified: Sharon MacDougall (6/1/17)

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 intends to provide better outcomes for our community members 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 five priorities to focus resources and encourage opportunity for collaboration, outlined in this report. 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, integration, and community services. This plan will guide TCMHS toward changes affecting our community health system in coordination with other local plans such as the Community Health Improvement Plan.

The community members of Tompkins County are at the heart of everything we do. We are proud that our county continues to grow - one of the highest growth rates in upstate New York. Our community growth strengthens our commitment to address our citizen's needs. Our goals will guide TCMHS work throughout 2018 to help our population. These goals focus on community care, reduced healthcare costs, recovery models of care, and preventative health for our community. TCMHS goals are grounded in an integrated care approach as they address the effect that behavioral health and developmental disabilities have on our citizens. Like physical illness, behavioral and developmental disorders have a financial and personal cost if they are not prevented, are left untreated, or are poorly addressed. This community has always supported dynamic, academic, and progressive approaches to address the needs of the Tompkins County community. Our dedication to those values remains with our intention to lead the recovery and prevention approach to care in New York State.

Mental Hygiene Goals and Objectives Form
 Tompkins County Mental Health Services (70130)
 Certified: Frank Kruppa (6/1/17)

1. Overall Needs Assessment by Population (Required)

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

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

Please Explain:

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 - a full spectrum of affordable and safe housing options from Crisis to Supportive Housing are unmet needs in Tompkins.
- Community based service gaps remain unmet. Specifically: ACT, transitional age youth supports, inclusive recreational opportunities, school system integration, homeless supports, criminal justice diversion, and integration with OASAS, DOH, & OPWDD.
- Reliable, accessible, and affordable transportation is needed within Tompkins' unique rural and urban environment.

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

Please Explain:

Tompkins SUD service needs have worsened directly related to the unique issues at our local level. These are discussed further with our goals and priorities outlined throughout this plan. Main SUD unmet needs:

- Housing - a full spectrum of affordable and safe housing options from Crisis to half way house community services are in high need in Tompkins.
- Community based service gaps remain unmet. Specifically: homeless supports, criminal justice diversion, and integration with OASAS, DOH, & OPWDD.
- Reliable, accessible and affordable transportation is needed within Tompkins' unique rural and urban environment.

c) Indicate how the level of unmet needs of the **developmentally disabled** population, in general, has changed in the past year: Improved Stayed the Same Worsened

Please Explain:

Tompkins developmentally disabled population service needs have worsened directly related to the unique issues at our local level. These are discussed further with our goals and priorities outlined throughout this plan. Main development disability unmet needs:

- Housing - a full spectrum of affordable and safe housing options from respite to community residential services are in high need in Tompkins.
- Community based service gaps remain unmet. Specifically: family supports, criminal justice diversion, clinical assessment and treatment, educational inclusive supports, and integration with OASAS, DOH, & OPWDD.
- Reliable, accessible and affordable transportation is needed within Tompkins' unique rural and urban environment.

2. Goals Based On Local Needs

Issue Category	Applicable State Agenc(ies)		
	OASAS	OMH	OPWDD
a) Housing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b) Transportation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c) Crisis Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d) Workforce Recruitment and Retention (service system)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e) Employment/ Job Opportunities (clients)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Prevention	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g) Inpatient Treatment Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h) Recovery and Support Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) Reducing Stigma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) SUD Outpatient Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k) SUD Residential Treatment Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l) Heroin and Opioid Programs and Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m) Coordination/Integration with Other Systems for SUD clients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n) Mental Health Clinic	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
o) Other Mental Health Outpatient Services (non-clinic)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
p) Mental Health Care Coordination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q) Developmental Disability Clinical Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r) Developmental Disability Children Services	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
s) Developmental Disability Adult Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
t) Developmental Disability Student/Transition Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- u) Developmental Disability Respite Services
- v) Developmental Disability Family Supports
- w) Developmental Disability Self-Directed Services
- x) Autism Services
- y) Developmental Disability Person Centered Planning
- z) Developmental Disability Residential Services
- aa) Developmental Disability Front Door
- ab) Developmental Disability Service Coordination
- ac) Other Need (Specify in Background Information)

2a. Housing - Background Information

Housing is a critical need. Each of us needs the security of having our basic necessities met before we can turn our attention to other matters. Providing safe and stable housing for those living with mental illness, alcohol and drug dependence and developmental disabilities, in addition to having wrap around and other supports and services available, is essential in promoting their chances for the best possible outcomes. Having stable housing allows consumers to access and maintain necessary services while generally resulting in lower costs, since those with housing and services are less likely to use expensive emergency services such as hospitals, jails & shelters. 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 summit 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:

- 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://www.tompkinscountyny.gov/files/planning/ComprehensivePlan/FINAL-March%202012-low%20res.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

Promoting and providing safe and stable housing for those living with mental illness, alcohol and drug dependence and developmental disabilities, 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 1: Promote affordable, safe, and integrated housing and crisis respite options.
Applicable State Agency: (check all that apply): OASAS OMH OPWDD
- Objective 2: Advocate for State stipends that reflect increased local housing/rental costs.
Applicable State Agency: (check all that apply): OASAS OMH OPWDD
- Objective 3: Creation of an OASAS detox crisis stabilization program.
Applicable State Agency: (check all that apply): OASAS OMH OPWDD
- Objective 4: Sober housing for those coming out of rehab or who are presently in treatment.
Applicable State Agency: (check all that apply): OASAS OMH OPWDD
- Objective 5: Encourage builders to include units for specific populations (include SUD).
Applicable State Agency: (check all that apply): OASAS OMH OPWDD

Change Over Past 12 Months (Optional)

2b. Transportation - Background Information

Reliable, accessible and affordable transportation is both a necessity and a challenge for those living with disabilities, substance abuse, and mental health issues. Many of these individuals live in rural areas where rents are cheaper but transportation is not readily available. They may not drive or may have less-than-reliable vehicles. Travel to employment, health and human service agencies, shopping, and family and social activities may be inconsistent. This can leave them disconnected from the 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. The unique and urban and rural environment make this difficult for our OMH, OASAS, & OPWDD population. Tompkins studies and research attempting to address this need:

- <http://hsctc.org/uploads/documents/AR2016.pdf>
- www.tompkinscountyny.gov/files/planning/ComprehensivePlan/FINAL-March%202012-low%20res.pdf
- http://www.tompkinscountyny.gov/files/cofa/Medical%20Transportation%20Resources%20%203-20-2014%20dem_1.pdf
- <http://www.tompkinscountyny.gov/files/itct/upwp/upwp1718/UPWP17-18-FINAL-030717.pdf>
- <http://www.tompkinscountyny.gov/files/itct/uop/UOP2015-051915-final.pdf>
- <http://www.tompkinscountyny.gov/itct/tip>
- <http://www.tompkinscountyny.gov/itct/lrtp>
- <http://www.tompkinscountyny.gov/files/itct/rts/RTS%20FINAL%20REPORT.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

Many of our individuals affected by mental health, substance use disorders and developmental disabilities live in rural areas where rents are cheaper but transportation is not readily available. They may not drive or may have less-than-reliable vehicles. Travel to employment, health and human service agencies, shopping, and family and social activities may be inconsistent. Improve availability and expand options for transportation to services within Tompkins.

Objective Statement

Objective 1: Increase supportive and integrated services and transportation in the community.

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

Change Over Past 12 Months (Optional)

2c. Crisis Services - Background Information

Tompkins County is an area rich with resources and services. To be most effective, these resources must be coordinated, with opportunities to share, learn, and grow together to best meet the needs of the county. This includes within disability service organizations, local government disability services, and resources outside of the disability systems. While our community has many resources, there continues to be both unmet needs in some areas and newly identified needs for certain groups of individuals. We believe that the array of services in our community needs ongoing review to ensure that emerging needs are identified and appropriate development is occurring. Options to address crisis needs of Tompkins OMH, OASAS, & OPWDD are limited at this time.

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

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

Objective Statement

Objective 1: Promote affordable, safe, and integrated housing and crisis respite options.

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

Objective 2: Creation of an OASAS detox crisis stabilization program.

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

Objective 3: Expand supports and services available to people in Tompkins County, including ACT program expansion, and the Mobile Crisis Team.

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)

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

Tompkins County is an area rich with resources and services. To be most effective, these resources must be coordinated, with opportunities to share, learn, and grow together to best meet the needs of the county. This includes within disability service organizations, local government disability services, and resources outside of the disability systems. Tompkins high cost of living limits the availability, recruitment and retention of a qualified workforce.

<http://tompkinscountyny.gov/wfny>

<http://tompkinscountyny.gov/files/workforceny/LaborExecSum08.pdf>

http://tompkinscountyny.gov/files/workforceny/Tompkins%20PY14-15%20Local%20Plan_2.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

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

Objective Statement

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 define training gaps related to the three strategic areas: evidence-based practices, person-centered care, and dual diagnosis.

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

Objective 3: Develop a training plan in collaboration with local universities & colleges.

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

Objective 4: Establish a training subcommittee to research and report on needs and local resources to include promotions of training opportunities within the community.

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)

2f. Prevention - Background Information

Tompkins is working to increase coordination with the public health department regarding the results of there Community Health Assessment and Community Health Improvement Plan, and the need for more education, prevention, and public awareness of signes and symptoms of mental illness. Increase support and opportunities for local prevention efforts regarding the increase in substance abuse.

<http://hsctc.org/uploads/documents/AR2016.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

Increase support and oppotunities for local prevention efforts regarding the increase in substance abuse.

Objective Statement

Objective 1: Increase capacity for prevention efforts by Tompkins OASAS certified providers.

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

Objective 2: Improve promotion and collaboration for prevention accross systems.

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

Change Over Past 12 Months (Optional)

2g. Inpatient Treatment Services - Background Information

Tompkins supports Cayuga Medical Center's PAR application to OMH for their Psychiatric inpatient treatment service renovations capital project. This project improves care and uniquely enables inpatient flexibility for adults and youth needs while inpatient.

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):
Pending approval from OMH for the PAR application remains.

Change Over Past 12 Months (Optional)

Cayuga Medical Center received full approval for this project from all local resources and LGU oversight. This renovation reduces barriers to seeking inpatient services at our local 9.39 hospital. This improves access, treatment, and client re-engagement with community treatment.

2k. SUD Residential Treatment Services - Background Information

Tompkins fully supports the efforts of Cayuga Addition Recovery Services (CARS) and Alcohol and Drug Council to expand residential SUD treatment services. Regulatory and reimbursement changes have made expansion difficult for these agencies. The recent pilot switch to 820 continues to affect fiscal reimbursement and OASAS assistance to correct the 820 managed care reimbursement is critical for the success of this program.

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

Providing safe and stable 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 1: Promote affordable, safe and integrated housing and crisis respite 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

Objective 3: Encourage builders to include units for specific populations (include SUD).

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

Change Over Past 12 Months (Optional)

Housing for the substance abuser is lacking in our community. When a client is in recovery they need sober housing supports as they leave rehabilitation back to the community. Encouraging builders to include units for specific populations like SUD.

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

Tompkins county is urgently concerned about population health in the current opioid crisis. A full spectrum of supports and services are being explored to address this issue such as Law Enforcement Assisted Diversion (LEAD). LEAD is a community-based diversion approach with the goals of improving public safety and public order, and reducing unnecessary justice system involvement of people who participate in the program. The City of Ithaca has worked toward addressing this crisis as well by their Municipal Drug Policy Community (MDPC) meetings.

<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)

2n. Mental Health Clinic - Background Information

Tompkins mental health clinics have worked to switch to managed care and are preparing for future value based payment models in the healthcare system. Instability in the current governmental health care transition creates difficulties for local planning to prepare for the value based payment models. Support from OMH and DOH is critical for local planning and support of mental health clinics - especially for our SMI population. Regulatory restructuring to improve integration efforts with SUD and healthcare needs of our clinic population with help to ease this transition. Fiscal supports by maintaining fee for service rates during this difficult transition to value based payment models is critical.

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)

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

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)

2r. Developmental Disability Children Services - Background Information

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.

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)

2u. Developmental Disability Respite Services - Background Information

Developmental Disability respite services are limited for our OPWDD population. 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)

2z. Developmental Disability Residential Services - Background Information

OPWDD system changes continue to challenge our providers with offering needed residential service supports. Cost of Living in Tompkins results in workforce limitations for our OPWDD residential providers. COLA adjustments recently enacted help but do not make up the full need associated with workforce needs.

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):
COLA adjustments recently enacted help but do not make up the full need associated with workforce needs.

Change Over Past 12 Months (Optional)

2ac. Other Need (Specify in Background Information) - Background Information

Statistically, the mentally ill are more vulnerable and more likely to be incarcerated in prisons and local jails. Those who have a dual diagnosis or multiple disabilities that include substance abuse, developmental disabilities, and mental illness are even more at risk. Pre and post release practices too frequently

negatively impact these most vulnerable in our communities. The most vulnerable also spend a disproportionate time in local jails and prisons and they have higher recidivism rates. This situation affects the mental health of families and generations. Tompkins County has demonstrated that it is committed to addressing systemic issues that allow this inequity to take place. However, there is a lack of knowledge on the part of providers within healthcare, criminal justice, and local government sectors.

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

There are gaps related to pre-trial diagnostics and the coordination of post-release services. In that regard, this department and the Community Service Board can play a more critical role and guide the way to alternative treatments. The belief of The Tompkins County Mental Health Department and the CSB is that coordinated efforts through community partnerships within the criminal justice system, with local government, and with local service agencies will improve current practices and identify best practices.

Objective Statement

Objective 1: Comprehensively assess current diversion and re-entry programs in Tompkins County in relation to developmental disabilities, mental illness and substance abuse, and in terms of multiple disabilities to determine gaps that fall within the purview of TCMHD, the efficacy of reporting practices, and the capacity of agencies within the TCMHD jurisdiction.

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

Objective 2: On behalf of the disabled and those with mental illnesses, explore the viability of nonexistent services in Tompkins County such as mental health courts, which studies show are significantly distinctive from other diversionary courts.

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

Objective 3: Cooperatively develop a training program for legal services in relation to mental illnesses and multiple disabilities to improve their knowledge of diagnostic practices and community services.

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

Objective 4: Work with the Tompkins County Sheriff's department to identify viable programs such as a Jails to Jobs initiative that starts in jail and connects youth to employers and/or a program that helps address landlord and employers' concerns about rent to or hiring someone who has a disability and a criminal record.

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

Change Over Past 12 Months (Optional)

Some of the services made available to jail inmates are provided by the Mental Health Department, the Probation Department, the Alcohol and Drug Council, Aids Work, Offender Aid & Restoration, the Advocacy Center, and the Jail Transition Program. Programs available for inmates while incarcerated include: HIV testing, WRAP (Wellness Recovery Action Plan), Boces and The Mary Bogan College Initiative Program, CPR, OSHA training, and also the Garden Project. Tompkins community is working to improve all levels of services and supports for our population to avoid incarceration of our OMH, OASAS, & OPWDD population.

3. Goals Based On State Initiatives

State Initiative	Applicable State Agenc(ies)		
	OASAS	OMH	OPWDD
a) Medicaid Redesign	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b) Delivery System Reform Incentive Payment (DSRIP) Program	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c) Regional Planning Consortiums (RPCs)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d) NYS Department of Health Prevention Agenda	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

3a. Medicaid Redesign - Background Information

Tompkins County is following the guidance of the NYS Behavioral Health (BH) Transition Team for Medicaid, OASAS, OMH, DOH for implementing the transition of these services into managed care and future value based payment models. LGU has attended multiple training events and conferences lead by OASAS, OMH, DOH and is using that knowledge to prepare county providers for this transition. This guidance has been helpful and especially OMH field office representatives to address specific managed care issues.

Tompkins would benefit from additional redesign supports and services recommended by the Medicaid Redesign Team:

- Supportive Housing Initiative seeks to ensure that Medicaid members have proper housing, which promotes a healthy environment and lifestyle.
- Clear guidance on Medicaid quality of care and population health indicators and measurement expectations.
- "Care Management for All" improvements in the provision of care management to allow care managers to serve clients rather than just providing data metrics to Health Homes and DOH.
- Reduce fragmentation and lack of coordination across the system starting with state level, through collaboration and integration among OMH, OASAS, OPWDD, & DOH to integrate regulatory, state aid, grant, and other guidance.
- Clear guidance and support in the transition from fee for service models to value based payment models which recognizes the uniqueness of safety net providers offering services for our highest need population in OMH, OASAS, & OPWDD.

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 is an overall goal being addressed in all areas of planning and development in Tompkins County.

Change Over Past 12 Months (Optional)

Increased insecurity in governmental changes at the federal level are affecting local planning efforts.

3b. Delivery System Reform Incentive Payment (DSRIP) Program - Background Information

Tompkins county has worked to participate and collaborate with the local Delivery System Reform Incentive Payment (DSRIP) performance provider system (PPS) Care Compass Network (CCN). Tompkins goals and needs match well with the CCN priorities. Multiple OMH OASAS providers within Tompkins are participating in CCN projects and exploring other DSRIP goals. Tompkins acknowledges the DSRIP's purpose is to fundamentally restructure the health care delivery system by reinvesting in the Medicaid program, with the primary goal of reducing avoidable hospital use by 25%. Additional reinvestment to help with this restructuring is needed within Tompkins. We are glad to see some early progress through our involvement with CCN at all levels for our services. Tompkins DSRIP achievements and continued needs:

- Cayuga Medical Center collaboration with CCN as our main hospital system and main 9.39 hospital for Tompkins and region.
- Tompkins' OASAS provider, Alcohol and Drug Council, was awarded a CCN innovation grant of \$500,000 to start a unique detoxification with crisis stabilization and rehabilitation program within Tompkins and available to the region.
- TCMHS partnership with Suicide Prevention Crisis Services to expand crisis services 24 hours per day/ 7 days per week within Tompkins county.
- OASAS providers offering integrated behavioral health care via CCN projects.
- OMH providers are exploring CCN crisis respite projects for future development.
- Planning for improved collaboration and coordination across the silos of OMH, OASAS, & DOH.

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 is an overall goal being addressed in all areas of planning and development in Tompkins County.

Change Over Past 12 Months (Optional)

Increased insecurity in governmental changes at the federal level are affecting local planning efforts.

3c. Regional Planning Consortiums (RPCs) - Background Information

Tompkins has participated with the Regional Planning Consortiums (RPC) via the Southern Tier RPC. Multiple Tompkins providers and DCS are on the Southern Tier RPC board of directors and lead planning workgroups. The RPC process allows collaboration, problem solving and system improvements for the integration of mental health, addiction treatment services and physical healthcare can occur in a way that is data informed, person and family centered, cost efficient and results in improved overall health for adults and children in our county. The Tompkins and Southern Tier RPC continues to assess needs and prioritize concerns.

<http://www.clmhd.org/img/uploads/ST%20RPC%20Meeting%20Minutes%20Packet%203-9-17.pdf>

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 is an overall goal being addressed in all areas of planning and development in Tompkins County.

Change Over Past 12 Months (Optional)

Increased insecurity in governmental changes at the federal level are affecting local planning efforts.

3d. NYS Department of Health Prevention Agenda - Background Information

<http://www.tompkinscountyny.gov/files/health/pnc/cha/CHA-Tomp-2013-2017.pdf>

<http://www.tompkinscountyny.gov/files/health/pnc/cha/CHIP-Tomp-2016-2018.pdf>

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

Goal Statement- Is this Goal a priority goal? Yes No

This is an overall goal being addressed in all areas of planning and development in Tompkins County.

Objective Statement

Change Over Past 12 Months (Optional)

Increased insecurity in governmental changes at the federal level are affecting local planning efforts.

4. Other Goals (Optional)

Other Goals - Background Information

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

Change Over Past 12 Months (Optional)

Office of Mental Health Agency Planning Survey
Tompkins County Mental Health Services (70130)
Certified: Frank Kruppa (6/1/17)

Consult the LSP Guidelines for additional guidance on completing this exercise.

1. For Criminal Procedure Law 730 Chargeback Budgeting: Please indicate the department within your county that is responsible for budgeting CPL 730 restoration chargebacks.

- Mental hygiene/community services
- Sheriff/county law enforcement
- Other

If "other" please indicate how these charges are budgeted

Questions regarding the above survey item should be directed to Hank Hren at hank.hren@omh.ny.gov or 518-474-2962.

2. For Local Administration of the Assisted Outpatient Treatment Program:

a) Please describe the system used in your locality to ensure that petitions are filed for individuals requiring Assisted Outpatient Treatment. LGU full oversight of AOT program.

b) Please describe the system used in your locality to ensure that such individuals requiring Assisted Outpatient Treatment receive the services included in the AOT treatment plan.

Twice monthly collaborative meetings with all providers involved in client's AOT plan in coordinated by the LGU.

c) Please list the Care Management Programs your Single Point of Access (SPOA) uses to assign AOT referrals.

Twice monthly adult SPOA meetings held by LGU. Tompkins County Mental Health Health Homes program.

Questions regarding this survey item should be directed to Rebecca Briney at Rebecca.Briney@omh.ny.gov or 518-402-4233.

Thank you for participating in the 2018 Mental Hygiene Local Services Planning Process by completing this survey. Any technical questions regarding the online County Planning System, please contact the OASAS Planning Unit at 518-457-5989 or by email at oasasplanning@oasas.ny.gov

Community Service Board Roster
Tompkins County Mental Health Services (70130)
Certified: Sharon MacDougall (6/1/17)

Consult the LSP Guidelines for additional guidance on completing this exercise.

Note: There must be 15 board members (counties under 100,000 population may opt for a 9-member board). Indicate if member is a licensed physician or certified psychologist. Under item labeled "Represents", enter the name of the member's organization or enter "Consumer", "Family", "Public Representative", etc. to indicate the particular community interest being represented. Members shall serve four-year staggered terms.

Chairperson

Name Sheila McEnery
Physician No
Psychologist No
Term Expires 12/31/2019
eMail smcenery@icsd.k12.ny.us

Member

Name David Shapiro
Physician No
Psychologist No
Term Expires 12/31/2018
eMail DShapiro@fcsith.org

Member

Name Janette Lynch
Physician No
Psychologist No
Term Expires 12/31/2019
eMail jan@fliconline.org

Member

Name Paula Winner
Physician No
Psychologist No
Term Expires 12/31/2018
eMail pj54winner@gmail.com

Member

Name Cris Donovan
Physician No
Psychologist No
Term Expires 12/31/2018
eMail cris@RACKERCENTERS.org

Member

Name Carol Booth
Physician No
Psychologist No
Term Expires 12/31/2019
eMail cabteachworld@hotmail.com

Member

Name Mary Hutchens
Physician No
Psychologist No
Term Expires 12/31/2017
eMail maryhcss@rackercenters.org

Member

Name Larry Roberts
Physician No
Psychologist No
Represents Consumer
Term Expires 12/31/2019
eMail larry@fliconline.org

Member

Name Stu Bergman
Physician No
Psychologist No
Term Expires 12/31/2017
eMail stubergman@gmail.com

Member

Name John Bezirgianian
Physician Yes
Psychologist No
Term Expires 12/31/2019
eMail jbezigarianian@tompkins-co.org

Member

Name Auguste Duplan
Physician Yes
Psychologist No
Term Expires 12/31/2017
eMail aduplan@cayugamed.org

Member

Name Kevin McKenna
Physician No
Psychologist No
Represents Law Enforcement
Term Expires 12/31/2017
eMail mckenna114@hotmail.com

Member

Name Harmony Ayers-Friedlander
Physician No
Psychologist No
Term Expires 12/31/2018
eMail hayers@twcnny.rr.com

Member

Name Susan Crowell
Physician No
Psychologist No
Represents family member
Term Expires 12/31/2018
eMail scrowell808@gmail.com

Member	
Name	Khaki Wunderlich
Physician	No
Psychologist	No
Term Expires	12/31/2017
eMail	KBW@TC3.edu

Alcoholism and Substance Abuse Subcommittee Roster
Tompkins County Mental Health Services (70130)
Certified: Sharon MacDougall (6/1/17)

Consult the LSP Guidelines for additional guidance on completing this exercise.

Note: The subcommittee shall have no more than nine members. Three subcommittee members must be members of the board; those members should be identified here. Under item labeled "Represents", enter the name of the member's organization or enter "Consumer", "Family", "Public Representative", etc. to indicate the perspective the member brings to the subcommittee.

Chairperson

Name Stu Bergman
eMail stubergman@aol.com
Is CSB Member Yes

Member

Name Kevin McKenna
Represents Law Enforcement
eMail makenna14@hotmail.com
Is CSB Member Yes

Member

Name Susan Crowell
Represents Family Member
eMail scrowell808@gmail.com
Is CSB Member Yes

Member

Name Ronald Schoneman
eMail howjog@aol.com
Is CSB Member No

Member

Name Tom Lipa
eMail LipaT@tc3.edu
Is CSB Member No

Member

Name Amie Hendrix
eMail ahendrix@tompkins-co.org
Is CSB Member No

Member

Name Kathleen Marco-Blair
eMail kam377@cornell.edu
Is CSB Member No

Member

Name Tom Parsons
Represents First Responder/Fire Department
eMail ctp^@mac.com
Is CSB Member No

Mental Health Subcommittee Roster
Tompkins County Mental Health Services (70130)
Certified: Sharon MacDougall (6/1/17)

Consult the LSP Guidelines for additional guidance on completing this exercise.

Note: The subcommittee shall have no more than eleven members. Three subcommittee members must be members of the board; those members should be identified here. Under item labeled "Represents", enter the name of the member's organization or enter "Consumer", "Family", "Public Representative", etc. to indicate the perspective the member brings to the subcommittee.

Chairperson

Name Larry Roberts
Represents consumer
eMail larryroberts@fliconline.org
Is CSB Member Yes

Member

Name Mary Hutchens
eMail maryhcss@rackercenters.org
Is CSB Member Yes

Member

Name Paula Winner
eMail pj54winner@gmail.com
Is CSB Member Yes

Member

Name Leslie Connors
eMail lconnors@tompkins-co.org
Is CSB Member No

Member

Name Paul Blumenthal
Represents consumer
eMail pb3333333333@yahoo.com
Is CSB Member No

Member

Name Chris Decker
Represents Geriatric
eMail ckdecker4@hotmail.com
Is CSB Member No

Member

Name Jean Poland
Represents family
eMail jp126@cornell.edu
Is CSB Member No

Member

Name Edward Bergman
eMail ebergman12345@gmail.com
Is CSB Member No

Member

Name Tracy Decker
eMail tdecker@lakeviewmhs.org
Is CSB Member No

Developmental Disabilities Subcommittee Roster
 Tompkins County Mental Health Services (70130)
 Certified: Sharon MacDougall (6/1/17)

Consult the LSP Guidelines for additional guidance on completing this exercise.

Note: The subcommittee shall have no more than nine members. Three subcommittee members must be members of the board; those members should be identified here. Under item labeled "Represents", enter the name of the member's organization or enter "Consumer", "Family", "Public Representative", etc. to indicate the perspective the member brings to the subcommittee.

Chairperson

Name Cris Donovan
eMail cris@rackercenters.org
Is CSB Member Yes

Member

Name Sheila McEnery
eMail smcenery@icsd.k.12.ny.us
Is CSB Member Yes

Member

Name Jan Lynch
eMail janlynch83@gmail.com
Is CSB Member Yes

Member

Name Jeffrey Boles
Represents consumer
eMail jeff@fliconline.org
Is CSB Member No

Member

Name Ellice Switzer
eMail es656@cornell.edu
Is CSB Member No

Member

Name Joanie Groome
eMail joang@cityofithaca.org
Is CSB Member No

Member

Name Nancy Saltzman
Represents family
eMail nsanse@gmail.com
Is CSB Member No

Member

Name Stacey Caskey
eMail SRCASKEY8@yahoo.com
Is CSB Member No

2017 Mental Hygiene Local Planning Assurance
Tompkins County Mental Health Services (70130)
Certified: Sharon MacDougall (6/1/17)

Consult the LSP Guidelines for additional guidance on completing this exercise.

Pursuant to Article 41 of the Mental Hygiene Law, we assure and certify that:

Representatives of facilities of the offices of the department; directors of district developmental services offices; directors of hospital-based mental health services; directors of community mental health centers, voluntary agencies; persons and families who receive services and advocates; other providers of services have been formally invited to participate in, and provide information for, the local planning process relative to the development of the Local Services Plan;

The Community Services Board and the Subcommittees for Alcoholism and Substance Abuse, Mental Health, and Developmental Disabilities have provided advice to the Director of Community Services and have participated in the development of the Local Services Plan. The full Board and the Subcommittees have had an opportunity to review and comment on the contents of the plan and have received the completed document. Any disputes which may have arisen, as part of the local planning process regarding elements of the plan, have been or will be addressed in accordance with procedures outlined in Mental Hygiene Law Section 41.16(c);

The Community Services Board and the Subcommittees for Alcoholism and Substance Abuse, Mental Health, and Developmental Disabilities meet regularly during the year, and the Board has established bylaws for its operation, has defined the number of officers and members that will comprise a quorum, and has membership which is broadly representative of the age, sex, race, and other ethnic characteristics of the area served. The Board has established procedures to ensure that all meetings are conducted in accordance with the Open Meetings Law, which requires that meetings of public bodies be open to the general public, that advance public notice of meetings be given, and that minutes be taken of all meetings and be available to the public.

OASAS, OMH and OPWDD accept the certified 2018 Local Services Planning Assurance form in the Online County Planning System as the official LGU assurance that the above conditions have been met for the 2018 Local Services planning process.