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

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## Goal 1

Goal 1: Title Support the implementation of recruitment/retention strategies by mental hygiene providers in Tompkins County as measured by a reduction in staff vacancies.
Goal 1: Target Completion Date Dec 31, 2027
Goal 1: Description Description of Need: Workforce recruitment was the second most cited need by LGUs in Local Services Plans submitted in 2023 across New York State. The workforce shortage has been identified as a planning priority in 2023 by OASAS and included in the OPWDD 2023-2027 Strategic Plan as an area of need. The OMH Strategic Framework has set a goal to, "develop the public mental health and healthcare workforce (because) approximately 3.1 million New Yorkers live in federal and/or state designated mental health shortage areas." Tompkins County continues to experience workforce shortages across the mental hygiene system that have resulted in reduced access to needed services. In a survey of 162 providers working in agencies offering mental hygiene services, 62% identified the workforce shortage as a priority need, with those working in OPWDD programs the most likely to identify workforce as a priority area. Improving workforce diversity also continues to be a priority in Tompkins County beginning with a better understanding of the demographic makeup of the current workforce.

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

Goal 1, Objective 1: Title Highlight Severity of the Workforce Crisis in Advocacy Efforts
Goal 1, Objective 1, Target Completion Date Dec 31, 2025
Goal 1, Objective 1, Description Participate in ongoing advocacy efforts to highlight the severity of the workforce crisis at the local and state level.

Goal 1, Objective 2: Title Understand Scope of Workforce Shortage
Goal 1, Objective 2, Target Completion Date Dec 31, 2024
Goal 1, Objective 2, Description Solicit staff vacancy information from provider agencies to better understand the scope of the workforce shortage, requiring LGU contract agencies to provide data annually.

Goal 1, Objective 3: Title Quantify Impact of the Workforce Shortage on Service Delivery
Goal 1, Objective 3, Target Completion Date Dec 31, 2024
Goal 1, Objective 3, Description Solicit data (program closures, wait lists) on the reduction in services related to the workforce shortage from provider agencies, requiring LGU contract agencies to provide this data annually.

Goal 1, Objective 4: Title Support Workforce Diversity Efforts
Goal 1, Objective 4, Target Completion Date Dec 31, 2025
Goal 1, Objective 4, Description Gather Point in Time data on staff diversity in local mental hygiene system, analyze trends, explore strategies to improve staff diversity with providers.

## Goal 2

Goal 2: Title Promote a housing first approach that increases the availability of affordable, emergency, and supportive housing that best meets the needs of individuals who require intensive, specialized, community based interventions for stabilization and recovery across the mental hygiene system.
Goal 2: Target Completion Date Dec 31, 2028
Goal 2: Description Description of Need: The need for housing was identified as a priority by 56 LGUs with 49 LGUs identifying this as a need across mental hygiene services. Both OMH and OASAS identified housing as a state agency planning priority for 2024 and listening sessions conducted by OPWDD in the development of their 2023-2027 Strategic Plan identified improved housing services as a priority. Concerns about current housing available in the Southern Tier were identified in the 2023 Community Engagement Sessions held from February to April 2023. Community members talked about how hotels known for violence were being used for unhoused individuals with addiction disorders and described the need for additional community based residential programs for those individuals needing more support. In the Local Services

Plan Priority Needs Survey, 95% of community members, 89% of agency providers and 100% of board members out of the 279 respondents identified housing as a top priority need.
The housing crisis does not just impact adults. The Ithaca/Tompkins Coordinated Community Plan developed with the Ithaca Youth Action Board in 2022 states that, “Based on 2020 statistics, Tompkins County has an overall poverty rate of 16.9% with a much higher prevalence in the City of Ithaca (39.2%) where most homeless youth are found. Along with this poverty rate, is one of the highest rental rates in Upstate New York, which is a major factor in homelessness in general and particularly in youth homelessness.” See The Ithaca/Tompkins Coordinated Community Plan 2022 at https://hsctc.org/wp-content/uploads/2022/06/The-Ithaca-Tompkins-CCP-2022.pdf for more information).

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

Goal 2, Objective 1: Title Better Understand the Interaction Between Homelessness and Disability
Goal 2, Objective 1, Target Completion Date Dec 31, 2024
Goal 2, Objective 1, Description Work with the HSC/Continuum of Care to disaggregate disability related item(s) from homeless data collection efforts in the county, to better understand the interaction between homelessness and disability.

Goal 2, Objective 2: Title Gather Information About Housing Solutions
Goal 2, Objective 2, Target Completion Date Dec 31, 2026
Goal 2, Objective 2, Description Learn about current, new and proposed housing solutions including community based residential programming, their challenges and successes that will better address need.

Goal 2, Objective 3: Title Gather Information about Housing Reductions
Goal 2, Objective 3, Target Completion Date Dec 31, 2024
Goal 2, Objective 3, Description Prioritize information gathering to learn more about reductions in residential beds due to COVID, the workforce shortage or other factors.

Goal 2, Objective 4: Title Advocacy for Housing Solutions
Goal 2, Objective 4, Target Completion Date Dec 31, 2025
Goal 2, Objective 4, Description Advocate for additional emergency and supportive housing solutions across the mental hygiene system for adults and children including homeless youth.

**Goal 3**
Goal 3: Title Crisis Services - Support the development of comprehensive crisis services that address the mental hygiene needs of Tompkins County residents.
Goal 3: Target Completion Date Dec 31, 2028
Goal 3: Description Description of Need: The need for a comprehensive crisis response for individuals with mental hygiene service needs was the third most common priority area identified in Local Services Plans by LGUs in 2023. There have been improvements in crisis services this past year. The national 988 number for mental health crisis calls was successfully launched and new Crisis Services for Intellectual and Developmental Disabilities (CSIDD) was made available in our region for the first time. Continued public awareness of these new service offerings is still needed to ensure broad access to the support they provide. More work is also needed to ensure all crisis services have the capacity to address the needs of OPWDD clients. The Conference of Local Mental Hygiene Directors has initiated a pilot project between OPWDD and OMH licensed Mobile Crisis Teams to identify best practices in this area that will inform future crisis response in our community. Additionally, the 2023-27 OPWDD Strategic Plan highlights the need for crisis services as an area for continued work as needs outstrip current resources available.
OASAS also partnered with OMH to develop dually licensed intensive and supportive crisis stabilization centers. Both models offer behavioral health stabilization and referral services 24 hours a day, seven days a week. Funding for capital and operational costs was made available in each region through a Request for Proposals (RFP) process. Cayuga Health Partners applied but was not selected. Ongoing efforts are being made to identify a way to meet this need in Tompkins County.
Locally, Family and Children’s Service of Ithaca received onetime OMH funding to expand the Outreach Worker Program from the City of Ithaca to the rest of the county last year. Additional funding is now being sought to ensure this highly beneficial program is maintained in the year ahead. Tompkins County also funded a newly created co-response model initiated between the Tompkins County Sheriff’s Office and Mental Health Services through the Department of Whole Health to respond quickly to mental health emergencies. The program is expected to be operational in 2023 during weekday business hours.

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

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

Goal 3, Objective 1, Target Completion Date Dec 31, 2025
Goal 3, Objective 1, Description Share findings from CLMHD piloted OMH/OPWDD Mobile Crisis Units and other novel approaches to align local practices across substance use, mental health, and developmental disabilities. Identify lessons learned, implementation, and outcomes.

Goal 3, Objective 2: Title Expand Access to Crisis Supports
Goal 3, Objective 2, Target Completion Date Dec 31, 2025
Goal 3, Objective 2, Description Explore solutions to expand access to crisis supports across the mental hygiene system including improved community awareness of service offerings.

Goal 3, Objective 3: Title Improve Communication between Law Enforcement and Crisis Mental Health Recipients
Goal 3, Objective 3, Target Completion Date Dec 31, 2025
Goal 3, Objective 3, Description Implement at least two activities designed to improve relationships between law enforcement departments and mental health recipients.

Goal 3, Objective 4: Title Support efforts to establish Crisis Stabilization Center or similar program.
Goal 3, Objective 4, Target Completion Date Dec 31, 2025
Goal 3, Objective 4, Description Continue to explore potential funding and collaborations to implement a crisis stabilization unit or similar program.

Goal 3, Objective 5: Title Support Suicide Prevention Efforts
Goal 3, Objective 5, Target Completion Date Dec 31, 2028
Goal 3, Objective 5, Description Support Suicide Prevention Coalition efforts including the implementation of Zero Suicide across healthcare settings to prevent suicide.

**Goal 4**
Goal 4: Title Cross System Services - Improve access to care across the mental hygiene system.
Goal 4: Target Completion Date Dec 31, 2028
Goal 4: Description Description of Need: This was a new category established in 2023 reflecting the growing importance of integrated and coordinated work across the mental hygiene system. 33 LGUs identified Cross System Services as a priority need in their 2023 Local Services Plan. Almost 82% of agencies that participated in the Local Services Plan Priority Needs Survey identified cross systems improvement as a priority need. It is imperative that we understand how to leverage the resources available in each of the three mental hygiene systems to meet the complex needs of individuals who require support across systems and continue to advocate for improved integration of services in the future. Areas of Focus in 2024 are described below.
• The 2024 OASAS Planning Priority Guidelines outline several financial awards, initiatives and piloted projects focused on improving cross system service delivery including Mobile Medication Units (MMUs) designed to help people who may face barriers to accessing traditional treatment such as geographic proximity to an Opioid Treatment Facility or lack of reliable transportation. Cayuga Addiction Recovery Services (CARS) received funding to offer this service in our region.
• Loss of OMH services when becoming OPWDD eligible remains a concern. Ongoing advocacy for greater waiver flexibility in OPWDD programs to ensure clients have access to all the support they need continues to be a priority.
• There are several piloted projects in NY State between mental hygiene agencies that we can learn from for potential local implementation such as the Mobile Crisis Team Pilot Project being conducted between OMH and OPWDD to ensure all people receive quality crisis intervention and ongoing efforts to improve integration between substance use and mental health treatment needs.

Goal 4: OASAS? Yes Goal 4: OMH? Yes Goal 4: OPWDD? Yes
Goal 4: Need Addressed 1 Cross System Services
Goal 4: Need Addressed 2
Goal 4: Need Addressed 3

Goal 4, Objective 1: Title Improve Public Awareness of Available Services Across Systems
Goal 4, Objective 1, Target Completion Date Dec 31, 2025
Goal 4, Objective 1, Description Ensure that families, recipients, and service providers have information about what services are available to individuals with cross systems' needs by collaborating with 211 to ensure mental hygiene programs/ services information is updated, accurate and offers linkages across mental hygiene services to improve access to care.

Goal 4, Objective 2: Title Remove Barriers to Access Services Across Systems
Goal 4, Objective 2, Target Completion Date Dec 31, 2025
Goal 4, Objective 2, Description Advocate for removal of eligibility barriers to better serve people who have needs across systems and continue to educate Care Managers in the DD system about options in Tompkins County.

Goal 4, Objective 3: Title Improve Coordination of Services Across Mental Hygiene System
Goal 4, Objective 3, Target Completion Date Dec 31, 2025
Goal 4, Objective 3, Description Support strategies that improve coordination of services and treatment integration across

mental hygiene system with other community supports.

Goal 4, Objective 4: Title Use opioid overdose data to guide interventions across the mental hygiene system.
Goal 4, Objective 4, Target Completion Date Dec 31, 2024
Goal 4, Objective 4, Description Improve data integrity/collection related to opioid overdose to guide prevention efforts across the mental hygiene system.

**Goal 5**
Goal 5: Title Non-Clinical Supports - Recognize the importance of addressing social determinants of health to promote wellness and recovery and improved health equity.
Goal 5: Target Completion Date Dec 31, 2028
Goal 5: Description Description of Need: Treatment alone is not sufficient for change. Social determinants of health like access to housing, employment and educational opportunities, medical, dental, and optical care, and a sense of connection and belonging to community are integral to wellness and recovery. According to the CDC, "…a growing body of research shows that centuries of racism …has had a profound and negative impact on communities of color… (and) social determinants of health are key drivers of health inequities in communities of color" (See Putting Youth Mental Health First: June 2023 Youth Mental Health Listening Tour Report at https://omh.ny.gov/omhweb/statistics/youth-mh-listening-tour-report.pdf for more information).
According to the 2023 Local Services Plan Priority Needs Survey, Community members identified housing (62%), Employment (60%) and Criminal Justice (58%) as areas of most concern related to racial equity issues impacting adults. One survey respondent said, " There should be more help for people of color to attain home ownership (as a way to better address disparities). Community members identified Schools (62%), Access to Mental Hygiene Services (60%) and Access to Healthcare (53%) as the areas of most concern impacting youth. Agency providers identified housing and access to mental hygiene services as areas of concern related to racial equity for both adults and children.
Most agencies surveyed (70%) are in the process of identifying strategies to better address racial equity. 23% of agencies have already implemented practices to improve health equity and 7% have not started yet. 57% of providers said training and tool kits along with improved local data collection would be most beneficial to supporting their efforts in addressing health equity issues.

Goal 5: OASAS? Yes Goal 5: OMH? Yes Goal 5: OPWDD? Yes
Goal 5: Need Addressed 1 Non-Clinical supports
Goal 5: Need Addressed 2
Goal 5: Need Addressed 3

Goal 5, Objective 1: Title Identify Healthcare Access Barriers for Medicaid Recipients Receiving Mental Hygiene Services
Goal 5, Objective 1, Target Completion Date Dec 31, 2026
Goal 5, Objective 1, Description Become familiar with the barriers to healthcare access including dental and optical care for Medicaid recipients.

Goal 5, Objective 2: Title Improve access to quality mental hygiene services for minoritized populations.
Goal 5, Objective 2, Target Completion Date Dec 31, 2024
Goal 5, Objective 2, Description Collect benchmark data from contract agencies on health equity to improve access to quality mental hygiene services for minoritized communities. Work collaboratively with the County DEI lead on data collection and analysis.

Goal 5, Objective 3: Title Improve Health Equity in the Mental Hygiene System
Goal 5, Objective 3, Target Completion Date Dec 31, 2024
Goal 5, Objective 3, Description Identify strategies to improve health equity across Tompkins County Mental Hygiene Service Providers.

Goal 5, Objective 4: Title Support greater awareness and utilization of peer support services.
Goal 5, Objective 4, Target Completion Date Dec 31, 2025
Goal 5, Objective 4, Description Support greater awareness and utilization of peer support services in the community to strengthen engagement and recovery services across the mental hygiene system.

**Goal 6**
Goal 6: Title Adverse Childhood Experiences – Build resilience in youth and adults impacted by childhood trauma.
Goal 6: Target Completion Date Dec 31, 2028
Goal 6: Description Description of Need: Adverse Childhood Experiences are potentially traumatic events that occur in childhood (0-17 years). Examples include experiencing violence, abuse or neglect, witnessing violence in the home, or having a family member attempt or die by suicide. Experiences may also include "… aspects of the child's environment that can undermine their sense of safety, stability and bonding such as growing up in a household with substance use problems, mental health problems, or instability due to parental separation or household members being in jail or prison." Adverse Childhood Experiences are common and related to numerous health conditions in adulthood like heart disease and are linked to greater risk of mental health and substance use disorders (See Fast Facts: Preventing Adverse Childhood Experiences at https://www.cdc.gov/violenceprevention/aces/fastfact.html for more information).

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

Goal 6: OASAS? Yes Goal 6: OMH? Yes Goal 6: OPWDD? Yes
Goal 6: Need Addressed 1 Adverse Childhood Experiences
Goal 6: Need Addressed 2
Goal 6: Need Addressed 3

Goal 6, Objective 1: Title Promote Greater Awareness of the Impact of ACES in the lives of adults and children.
Goal 6, Objective 1, Target Completion Date Dec 31, 2025
Goal 6, Objective 1, Description Promote greater understanding of the impact of Adverse Childhood Experiences (ACES), the importance of early intervention strategies and encourage evidence-based trauma informed services and support across the lifespan.

**Goal 7**
Goal 7: Title Transition Age Youth Services – Ensuring adequate supports are available for youth especially as they transition to adulthood across the mental hygiene system.
Goal 7: Target Completion Date Dec 31, 2028
Goal 7: Description Description of Need: According to the CDC Youth Risk Behavior Survey, in the last decade from 2011 to 2021, the rates of youth who persistently felt sad or hopeless increased from 21% to 29% for teen boys, and from 36% to 57% for teen girls. Those that reported that they seriously considered attempting suicide increased from 16% to 22% over the same period (See Putting Youth Mental Health First: June 2023 Youth Mental Health Listening Tour Report at https://omh.ny.gov/omhweb/statistics/youth-mh-listening-tour-report.pdf for more information).
The National Center for Health Statistics recently released data indicating that, “Kids and young adults were nearly as likely to die by suicide as they were from homicide in 2020 and 2021, according to the CDC.” Homicide rates that fell for 10 - 24 year olds from 2006-2014 increased 60% through 2021. The largest annual increase in homicides in the 20-year period happened between 2019 and 2020 with a 37% jump. Homicide rates nearly doubled for 15-19 year olds from 2014-2021 and surpassed suicide rates in 2020. General factors identified for the increased homicide and suicide rates among adolescents and young adults include limited access to mental health services and increased access to firearms. (See Suicides and Homicides Among Youth Reach a 20 Year High at https://www.axios.com/2023/06/15/suicides-homicides-among-youths-high for more information).
Locally, unhoused youth in a recent survey conducted by the Ithaca Youth Action Board and Coordinated Entry identified the need for “… no or low cost mental health care that is confidential, respectful, and culturally competent including increased diversity in mental health providers”. These findings are consistent with the need for more mental health services for youth and young adults identified nationally. See The Ithaca/Tompkins Coordinated Community Plan 2022 at https://hsctc.org/wp-content/uploads/2022/06/The-Ithaca-Tompkins-CCP-2022.pdf for more information).
In June 2023, OMH in partnership with the Office of Children and Family Services (OCFS) held listening tours of youth across New York State in response to concerns about youth mental health. OMH and OASAS focused on the increased risk of suicide, the negative impact of social media on youth mental health and the crisis of racism that has a “profound and negative impact on communities of color.” A total of 196 youth participated in the listening tours held in Rochester, Binghamton, Long Island, White Plains, and Plattsburgh. Youth provided recommendations including the importance of involving youth voice in decision making, investing in community based resources for recreation and mental wellness promotion, recognizing the critical role schools play in mental health promotion, prevention, and intervention, increasing access to low and no cost mental health services, and supporting students with information about resources available for evaluating a learning disability and other challenges as well as 504 and IEP plans. (See Putting Youth Mental Health First: June 2023 Youth Mental Health Listening Tour Report at https://omh.ny.gov/omhweb/statistics/youth-mh-listening-tour-report.pdf for more information).
Developmental Disabilities: The Tompkins County Developmental Disabilities Subcommittee has been working both on improving access to recreational opportunities for youth receiving OPWDD services and strengthening communication between caregivers and schools about the steps needed to ensure transitional supports are in place for youth at the time of high school completion.
Mental Health: The Collaborative Solutions Network, Tompkins County’s System of Care for children, youth, and their families, implemented an action plan based on identified gaps in the local service delivery system with the support of OMH that includes the need for 1) improved communication for caregivers to know what services are available, 2) additional prevention and early intervention services, and 3) the creation of intensive in home services to support high needs youth. The Children’s Home of Wyoming Conference located in Binghamton, New York, was recently awarded Children’s Assertive Community Treatment (ACT) for Tompkins and Tioga Counties. This new service will better support the intensive treatment needs of families in our community.
Substance Use: In 2023, at least one in eight teenagers abused illicit substances. The rate of drug use has increased 61% nationally for 8th graders between 2016 and 2020, and 62% of teenagers have abused alcohol with half of teenagers misusing a drug at least once. Young adults ages 18-25 in New York State are almost nine percent more likely to use drugs than the average American their age, and the rate of overdose deaths due to opioids has increased 500% among 15-24 year olds since 1999 in the United States. (See Drug Use Among Youth: Facts and Statistics at https://drugabusestatistics.org/teen-drug-use/ for more information).
Increased substance use by middle school students across the United States and the higher than average substance use by young adults in New York State require continued focus on substance use prevention and early intervention to better

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

Goal 7: OASAS? Yes Goal 7: OMH? Yes Goal 7: OPWDD? Yes
Goal 7: Need Addressed 1 Transition age services
Goal 7: Need Addressed 2
Goal 7: Need Addressed 3

Goal 7, Objective 1: Title Provide Seamless Transition to Adult Services for Youth Receiving OPWDD Services
Goal 7, Objective 1, Target Completion Date Dec 31, 2025
Goal 7, Objective 1, Description Identify ways to reduce potential barriers to post-secondary transition support services for transition age youth.

Goal 7, Objective 2: Title Improve Access to Mental Health Services for Youth Including Transition Age Youth
Goal 7, Objective 2, Target Completion Date Dec 31, 2025
Goal 7, Objective 2, Description Support implementation efforts of the Action Plan approved by the Collaborative Solutions Network, the System of Care (SOC) for children's services in Tompkins County, to improve access to care through program expansion and improved communication/coordination of service offerings.

Goal 7, Objective 3: Title Ensure Availability of Effective Substance Use Prevention/Early Intervention Services for Youth and Young Adults
Goal 7, Objective 3, Target Completion Date Dec 31, 2025
Goal 7, Objective 3, Description Support prevention efforts to ensure the availability of effective substance use prevention services programming in schools, colleges and universities, and the community.

NEW YORK STATE | Office of Addiction Services and Supports | Office of Mental Health | Office for People With Developmental Disabilities

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

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

| **OBJECTIVES** | |
|---|---|
| Highlight Severity of the Workforce Crisis in Advocacy Efforts | Ongoing |
| Understand Scope of Workforce Shortage | Complete |
| Quantify Impact of the Workforce Shortage on Service Delivery | Complete |
| Support Workforce Diversity Efforts | Ongoing |
| **OBJECTIVE UPDATES** | |

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

| **OBJECTIVES** | |
|---|---|
| Better Understand the Interaction Between Homelessness and Disability | Complete |
| Gather Information About Housing Solutions | Ongoing |
| Gather Information about Housing Reductions | Complete |
| Advocacy for Housing Solutions | Ongoing |
| **OBJECTIVE UPDATES** | |

## Goal 3

| | |
|---|---|
| **Title** | Crisis Services - Support the development of comprehensive crisis services that address the mental hygiene needs of Tompkins County residents. |
| **Update** | Collaboration with local law enforcement and the Tompkins County Community Justice Center has resulted in the establishment of mental health and law enforcement crisis co-response team known as the Crisis Alternative Response and Engagement or CARE teams for the City of Ithaca and the rest of the county. The co-response model is based on best practice research and consultation with other successful co-response teams. Additionally, the Tompkins County Sheriff's Office, previous Diversity, Equity and Inclusion Officer of Tompkins County and Deputy Commissioner of Mental Health worked collaboratively to write and receive a CIT Grant that resulted in training for a broad array of local law enforcement and a county wide Sequential Intercept Mapping process. Cornell University just completed a sequential intercept mapping process this year that numerous community stakeholders participated in as well. One of the CARE Team clinicians recently completed the CIT train the trainer course to become a local CIT trainer ensuring ongoing sustainability of the CIT model being used by law enforcement.<br><br>Efforts have been made in 2024 to expand access to crisis supports. Cornell University recently established a crisis response team that coordinates with the county Mobile Crisis and Care Teams as needed. Mental Health Services of Tompkins County Whole Health applied for and received additional funding from New York State Office of Mental Health to add another CARE co-response team in Tompkins County. Mental Health Crisis Services of Tompkins County Whole Health will become an OMH approved crisis services program as a condition of receiving the funds as well. Ongoing efforts are also being made to establish a non-law enforcement response for sub-acute mental health crisis calls that could be received through a 911 diversion program or directly from 988.<br><br>The Mental Health Subcommittee plans to implement at least two events in 2025 to improve relationships between law enforcement and individuals who experience a mental health crisis. An event may include supporting CIT Training efforts by securing a panel of individuals with family or personal experience to share what it has been like to have law enforcement involved in the past when they have had a mental health crisis.<br><br>Ongoing efforts are being made by Tompkins County to support funding for a much-needed Crisis Stabilization Center that continues to be a gap in care in the county and region. The County has provided 1.5 million dollars to Cayuga Health Systems to pay for a portion of building a center.<br><br>Supporting Suicide Prevention Coalition efforts is an objective specific to the Director of Community Services who works closely with Suicide Prevention Coalition members. The Tompkins County Whole Health Website has a page on the coalition's work and promotes meetings. The Coalition has a Steering Committee of healthcare leaders invested in the implementation of Zero Suicide model who meet regularly and are supported by a Zero Suicide Work Group of the Coalition along with a public health fellow and other staff of Tompkins County Whole Health. An Over Target Request (OTR) for funding in 2025 was made by the Tompkins County Suicide Prevention and Crisis Services to create a part time Suicide Prevention Coalition coordinator position. The Community Services Board voted unanimously in support of funding the request for 2025 in their June 2024 meeting to further strengthen suicide prevention efforts. |

**OBJECTIVES**

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

**OBJECTIVE UPDATES**

## Goal 4

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|---|---|
| **Title** | Cross System Services - Improve access to care across the mental hygiene system. |
| **Update** | The Whole Health website offers an updated listing of mental health and substance use resources available in the community. Health promotions staff of Tompkins County Whole Health regularly inform the community of resources and events related to mental hygiene services. The Developmental Disabilities subcommittee is compiling a list of OPWDD resources to add to the website and will partner with 211 in 2025 to ensure mental hygiene services data is updated frequently to improve community awareness of available services.<br><br>Removing barriers to accessing services across systems is an objective being addressed by the Developmental Disabilities subcommittee. OPWDD Care Management agencies regularly attend monthly Developmental Disabilities meetings and are able to share issues around access to care. This objective will be a focus of the subcommittee in 2025.<br><br>Whole Health has published comprehensive opioid overdose data on its website and is currently exploring partnerships with the local hospital and treatment providers to share overdose data to guide interventions across the mental hygiene system. The Substance Use Subcommittee met with Whole Health staff responsible for data collection and reviewed the newly added information put on the county's website. They also heard a presentation from Narcan providers across the county on distribution practices. As a result, there was a follow up meeting with Narcan providers and a decision to schedule a regular meeting to improve coordination of providing Narcan across the county. Substance Use Subcommittee Co-Chair will be attending regional opioid task force meetings to determine if participating would have added benefits for the county. |

**OBJECTIVES**

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|---|---|
| Improve Public Awareness of Available Services Across Systems | Ongoing |
| Remove Barriers to Access Services Across Systems | Ongoing |
| Improve Coordination of Services Across Mental Hygiene System | Ongoing |
| Use opioid overdose data to guide interventions across the mental hygiene system. | Ongoing |
| **OBJECTIVE UPDATES** | |
| 3 - Improve coordination of services across mental hygiene services - change to be completed by 2026 from 2025 due to the high number of objectives identified for 2025. | |
| 4 Use opioid overdose data to guide interventions across the mental hygiene system - modify to be completed in 2027 due to the complexity of the issue | |

## Goal #5

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|---|---|
| **Title** | Non-Clinical Supports - Recognize the importance of addressing social determinants of health to promote wellness and recovery and improved health equity. |
| **Update** | The need to improve mental health equity by addressing social health and other barriers to accessing mental hygiene services continues to be expressed by the public and will be an ongoing focus of subcommittees and the Community Services Board efforts in the LSP.<br><br>The Director of Community Services will provide a summary of county health equity indicators for minoritized populations provided by OMH, OASAS and OPWDD to the Community Services board by the end of 2024 to establish a benchmark to compare to in the following years of this plan.<br><br>Peer services continue to grow in Tompkins County, however there are challenges related to role confusion, barriers caused by two certification processes (OMH and OASAS) and limited access to support for peers in organizations that will be explored further and addressed in future years of this plan.<br><br>Peer services have grown in the Personalized Recovery Oriented Program with the expectation to hire peers in the Clinic by the end of 2024. Peer services were a requirement of the newly developed emergency housing program funded by LGU opioid settlement dollars as well. |

| | |
|---|---|
| **OBJECTIVES** | |
| Identify Healthcare Access Barriers for Medicaid Recipients Receiving Mental Hygiene Services | N/A |
| Improve access to quality mental hygiene services for minoritized populations. | N/A |
| Improve Health Equity in the Mental Hygiene System | Ongoing |
| Support greater awareness and utilization of peer support services. | Ongoing |
| **OBJECTIVE UPDATES** | |
| 1 and 3 are combined to say Improve mental health equity by addressing social health and other barriers to accessing mental hygiene services. We wanted to remove language related to medical/dental as is too broad a topic for the board. We also wanted to emphasize that there are access challenges to receiving mental hygiene services that have health equity implications. | |
| 2 Improve access to quality mental hygiene services for minoritized populations will be broken down into three objectives from the current one. 1) Complete an analysis of current state and local data available to identify gaps in services related to minoritized status, to be completed by end of 2024. 2) Provide outreach and support on best practice data collection processes in 2025 to funded mental hygiene agencies. and 3) collect local data from contract and volunteer agencies in 2026 that measures access to quality mental hygiene services received by minoritized populations. | |
| Please see objective 3 is combined with objective 1 above. | |

## Goal #6

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|---|---|
| **Title** | Adverse Childhood Experiences - Build resilience in youth and adults impacted by childhood trauma. |
| **Update** | The Mental Health Subcommittee will focus on this goal area in 2025. |

| | |
|---|---|
| **OBJECTIVES** | |
| Promote Greater Awareness of the Impact of ACES in the lives of adults and children. | Ongoing |
| **OBJECTIVE UPDATES** | |

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

| **OBJECTIVES** | |
|---|---|
| Provide Seamless Transition to Adult Services for Youth Receiving OPWDD Services | Complete |
| Improve Access to Mental Health Services for Youth Including Transition Age Youth | Ongoing |
| Ensure Availability of Effective Substance Use Prevention/Early Intervention Services for Youth and Young Adults | Ongoing |
| **OBJECTIVE UPDATES** | |

# 2026 Update to 2024-2027 Goals and Objectives
# Tompkins County Mental Health Services

Harmony Ayers-Friedlander, Director of Community Services
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**Goal 1**

Goal 1, 2026 Status Update: Ongoing

Goal 1, 2026 Status Update Description: All agencies that receive passthrough State and local funding and other agencies that volunteered to participate completed a workforce survey in the fall of 2024. The purpose of the survey was to better understand the current workforce shortage and its impact on Tompkins County residents. The survey will be completed again in the fall of 2025. Additional questions about workforce diversity will be added, including if any strategies have been implemented to improve diversity in the workforce and if any assistance in implementing best practice strategies through training, consultation or other means would be beneficial. Workforce data is being used to advocate for policy solutions that address the current workforce crisis emphasizing the detrimental impact the shortage has caused on service recipients. The 2025 survey will also inform future work to increase workforce diversity necessary to better meet the needs of minority community members who have experienced structural racism and marginalization. Objectives to be completed in the rest of 2025 are highlighted in yellow. Objectives to be completed in 2026 are highlighted in green. Objectives that have been completed but have ongoing work appear in the second column (ongoing) below.

Goal 1 Objective 1, 2026 Status Update: Complete

Goal 1 Objective 1, 2026 Status Update Description:
The Community Services Board (CSB) will submit a letter to the Tompkins County Legislature and State representatives highlighting the negative impact the workforce shortage has had on county residents in 2025. The letter will advocate for increased funding to ensure competitive wages and other policy recommendations in order for nonprofit agencies to recruit and retain staff.

The closure and temporary suspensions of numerous OPWDD licensed housing programs in the county has resulted in residents being forced to relocate and is a serious concern.
The CSB will continue to monitor the impact of the workforce shortage on Tompkins County residents.

The Chamber of Commerce will be invited to attend a CSB meeting in 2025 to discuss the importance of the nonprofit mental hygiene sector in the local economy with a request for assistance in identifying ways to support efforts by agencies to attract and retain employees.

Additionally, the MH, DD, SU subcommittees will become familiar with State Initiatives to build the future workforce needed.

Goal 1 Objective 2, 2026 Status Update: Ongoing

Goal 1 Objective 2, 2026 Status Update Description: A workforce survey of agencies providing mental hygiene services was conducted in the fall of 2024 to better understand the current workforce shortage. Findings from the survey included what types of positions are most challenging to fill, strategies organizations were using to hire and retain qualified staff, and the reasons many felt they were experiencing a staffing shortage. The information was compiled and shared with all three subcommittees and the CSB during regularly scheduled meetings.

The survey will be completed annually by contracted and voluntary agencies to better understand trends in the workforce overtime.

Goal 1 Objective 3, 2026 Status Update: Ongoing

Goal 1 Objective 3, 2026 Status Update Description: The survey also measured the impact of the workforce shortage on the delivery of services by gathering information on program closures, the creation of wait lists, increased caseload, overtime or other factors. The survey was designed to measure both the staffing shortage and the direct impact it has on client care.

The survey will be completed annually to track local capacity to deliver services related to staffing and identify any impact this has on care received.

Goal 1 Objective 4, 2026 Status Update: Ongoing

Goal 1 Objective 4, 2026 Status Update Description: The annual workforce survey will ask additional questions in 2025 that explore strategies agencies are using or plan to use in the coming year to improve staff diversity if they have identified this as a need. They will also be asked if they need any support in increasing staff diversity, and if so, what would be most helpful.

The added survey questions will be completed annually to measure progress over time.

**Goal 2**

Goal 2, 2026 Status Update: Ongoing

Goal 2, 2026 Status Update Description: The Community Services Board (CSB) and subcommittees learned about housing concerns that impacted Tompkins County residents in 2024 and 2025. The CSB hosted a panel of five housing providers to discuss the current housing needs of youth and adults and heard from the DSS Commissioner about plans to build a new shelter. The DSS Commissioner also described the services provided during Code Blue in 2025. Demographic information of those who used shelter services during that time was also provided along with a discussion on how best to meet the needs of program participants who are elderly, have physical disabilities, mental health disorders and substance use treatment needs. Presentations by various housing and residential programs licensed by OMH and OASAS were made by services providers along with the Continuum of Care Coordinator and the Single Point of Entry Coordinator either to the subcommittees or the Community Services Board in 2024 and 2025.

There is a growing concern around the number of OPWDD IRAs that have been either permanently or temporarily closed in the county. These closures have frequently resulted in the displacement of county residents to facilities outside of the county. The reason for the closures is due to the significant workforce shortage of direct support professionals. A second housing concern is the lack of services for homeless/runaway youth in the county after the closure of a program serving this population last year. A third concern is the long wait time for applicants to be housed in OMH licensed housing programs that go through Single Point of Entry. This has resulted in residents being housed in Broome County while waiting for an opening in Tompkins County. Applicants may be on the waitlist for over a year or more. Additional housing services are needed to meet this need in the community.

Opioid Settlement funds received by the Local Government Unit (LGU) and the City of Ithaca were used to establish a housing program for individuals with substance use and those with co-occurring mental illness using a housing first approach. Catholic Charities of Tompkins Tioga was awarded the contract. The new housing program expanded the agency's A Place to Stay program for women and now services both men and women. The updated program has been in operation since June 2024. Renee Spear, the Executive Director of Catholic Charities, presented to the CSB in May 2025, reviewing positive outcomes for residents of the program in its first year of operation. The SOS team that provides outreach and housing to street homeless individuals with mental health, substance use, and developmental disabilities also presented to the CSB and subcommittees in 2025. Two new housing programs should open in 2026 through Rehabilitation Support Services (RSS) and Catholic Charities of Tompkins Tioga helping to provide additional services to a growing homelessness problem in the county.

Goal 2 Objective 1, 2026 Status Update: Complete

Goal 2 Objective 1, 2026 Status Update Description: The Tompkins County Continuum of Care (CoC) presented to the CSB sharing information on the percentage of unhoused individuals who identified as having mental hygiene treatment needs in 2024. The Commissioner of the Department of Social Services presented to the CSB in 2025 describing the high need for treatment services among individuals who use the shelter.

Goal 2 Objective 2, 2026 Status Update: Ongoing

Goal 2 Objective 2, 2026 Status Update Description: The CSB and its subcommittees invited agencies to discuss new housing solutions designed to meet the needs of individuals with developmental disabilities, substance use, and mental health treatment needs during monthly meetings. Presentations by Lakeview, the SPOE Coordinator and the newly created SOS team were made in 2024.

A housing panel discussion was held by the CSB with five housing service providers participating in 2025. Providers described services currently offered and highlighted the need for housing support especially for homeless runaway youth.

New NYS Empire State Supportive Housing (ESSHI) is being built by Rehabilitation and Support Services (RSS) and Catholic Charities of Tompkins and Tioga. Both are scheduled to open in 2026. The CSB will ask both agencies to provide an update when these services begin. RSS has already begun offering Treatment Apartment Program (TAP) housing with eight new units approved by OMH. Housing services for runaway and homeless youth continue to be a major concern as well as emergency housing services that support individuals with mobility challenges, complex medical and other disability needs. The CSB and subcommittee will learn about and advocate for programming to meet these needs.

Goal 2 Objective 3, 2026 Status Update: Ongoing

Goal 2 Objective 3, 2026 Status Update Description: OPWDD program suspensions in both state- and privately-run IRAs have resulted in significant number of disabled people being displaced from Tompkins County. These closures have primarily been due to workforce challenges. The DCS met with the OPWDD regional office in May 2025 to express concern with the limited housing resources remaining in the county. The Developmental Disabilities Subcommittee has focused efforts on advocacy for an increased COLA to bring depressed wages up to what is considered a living wage in Tompkins County.

The OMH Community Residence suspended services temporarily in 2024 due to workforce challenges. The program has

reopened and is currently full. Closures due to a workforce shortage will be highlighted in the letter to county and State government officials (Goal #1, Objective #1)
The significant reduction of OPWDD housing services in the county is an area of concern and is related to the high cost of living and low wages for residential staff. Advocacy efforts to address the workforce challenges will be addressed under Goal #1 Objective #1.

The DCS will continue to monitor program closures and notify the Board if they occur.

Goal 2 Objective 4, 2026 Status Update: Ongoing
Goal 2 Objective 4, 2026 Status Update Description: The CSB approved the use of LGU Opioid Settlement funds in partnership with the City of Ithaca to develop a new emergency housing program with intensive case management support for individuals with substance use and co-occurring mental health treatment needs who are homeless. The program uses the HMIS data collection system that is used by the CoC to improve the coordination of housing services provided in the county. The contract has been awarded to Catholic Charities of Tompkins Tioga who opened the program in mid-May 2024.

Catholic Charities of Tompkins Tioga presented to the CSB in their May 2025 meeting sharing highlights of the program's success. Eighteen people have participated in the program since its inception. Over 40% are now living in permanent housing having successfully discharged from the program. Over 80% of current residents participate in vocational, mental health and substance use treatment services. The flexibility of the model as well as the intensity of support services for an extended length of time leads to greater stability and long-term success. The contract for the piloted phase of the housing program is for two additional years. An additional three years of full funding is possible if the outcomes continue to indicate that the model is a success. Catholic Charities also presented on their new housing model along with the DCS and a public health fellow at this year's NYS Public Health Conference held in Ithaca earlier this year.

The CSB and City of Ithaca will continue to hold an annual review of "A Place to Stay", the housing program developed with LGU and City of Ithaca Opioid Settlement Funds and approved by the CSB as outlined in the contract.

**Goal 3**
Goal 3, 2026 Status Update: Ongoing
Goal 3, 2026 Status Update Description: The Crisis Alternative Response and Engagement or CARE co-response teams continue to be operational with tentative plans to expand in the City of Ithaca in 2026. Tompkins County Whole Health has applied to OMH to become a designated Mobile Crisis Team allowing them to bill insurance for services delivered once approved. Cayuga Health Services (CHS) has been given permission by OASAS and OMH to pursue an Intensive Crisis Stabilization Center license. CHS plans to have the program operational by 2026 and is using American Rescue Plan Act (ARPA) funds received from the county to cover construction costs.
The Suicide Prevention Coalition received county funding in 2025 for a coordinator position that has resulted in new content advertising the work of the coalition on the Suicide Prevention and Crisis Services website, significant changes in the meeting schedule and leadership structure and a newly established membership committee. The first goal of the new coordinator is to reinvigorate the coalition by increasing the number of members who actively participate. Coalition members are currently working on updating the strategic plan. They have already seen an increase in new members participating in meetings.
Family and Children's Service of Ithaca chose to discontinue the outreach worker program that was expanded in 2023 to include both the City of Ithaca and the county with funding received from OMH for the first year and then funded by the county. No other agency was identified through an RFP process to continue the work. As a result, funding for the expanded program was cut by the county. REACH Medical now operates a smaller outreach worker program that is limited to the original model serving the downtown corridor in the City of Ithaca alone. This program is funded by the city and the county. The outreach program is a pilot with an RFP to be issued next year based on findings from this initial phase. The CSB will explore the need to develop a limited law enforcement response in 2026 either through a new program entirely or through the expansion of services provided by an outreach worker program that is already established. Daniel's Law funding may be used to help cover the costs of a program like this if it is needed and the funding is available by OMH.

Goal 3 Objective 1, 2026 Status Update: Complete
Goal 3 Objective 1, 2026 Status Update Description: Collaboration with local law enforcement along with a literature review and consultation with counties providing similar services has resulted in the establishment of the Crisis Alternative Response and Engagement or CARE Teams, a co-response model between law enforcement and mental health.

Sequential Intercept Mapping and CIT training have been completed. A clinician on the CARE Team has become a train-the-trainer in the CIT model with the goal of providing regularly scheduled CIT training to law enforcement officers to increase the number of officers trained in the model.

Goal 3 Objective 2, 2026 Status Update: Complete
Goal 3 Objective 2, 2026 Status Update Description: Suicide Prevention and Crisis Services is the local 988 provider. They have expanded services to include a warm line and present data to the CSB upon request.

Cornell University has established a crisis response team and recently participated in a sequential intercept mapping process with OMH. They plan to train more campus police in Crisis Intervention Team (CIT) and expand support for

students, faculty and staff in the future.

OMH has requested that Whole Health become a designated Mobile Crisis Team in order to bill insurance for crisis services. OMH provided additional funding that was used to expand the CARE (co-response) team in Tompkins County. It is anticipated that crisis services provided by Whole Health will become a designated Mobile Crisis Team by OMH by the end of 2025.

Goal 3 Objective 3, 2026 Status Update: Ongoing
Goal 3 Objective 3, 2026 Status Update Description: Mental Health Subcommittee members will assist in identifying individuals with lived experience who would like to participate in CIT training efforts by local law enforcement. The goal of participation is to improve communication and understanding between law enforcement and crisis mental health recipients.

If no CIT training is scheduled, the Mental Health Subcommittee will invite local law enforcement members to a subcommittee meeting to discuss their experiences when responding to people in crisis with mental hygiene needs. Members and guests from PROS, MHA and NAMI along with certified and non-certified peers from various organizations will also share their experiences as recipients of mental health, substance use, or developmental disabilities services. Sharing experiences will help ensure that the humanity of people experiencing a crisis is not lost under difficult circumstances.

The Ithaca City Police Chief has applied to be a member of the Community Services Board and if approved by the legislature, will share the perspective of law enforcement in supporting individuals who are experiencing a mental health crisis.

Goal 3 Objective 4, 2026 Status Update: Ongoing
Goal 3 Objective 4, 2026 Status Update Description: Anticipate the opening of an Intensive Crisis Stabilization Center in February 2026 by Cayuga Health Services (CHS). CHS was awarded funding by Tompkins County for capital improvements related to this project through a local RFP process.

Representatives from CHS provided an update on the work being done to open the center at the June 2025 Substance Use Subcommittee meeting.

Goal 3 Objective 5, 2026 Status Update: Ongoing
Goal 3 Objective 5, 2026 Status Update Description: Suicide Prevention and Crisis Services received one time county funding in 2025 to provide coordination of Suicide Prevention Coalition activities. County enhancement funding to retain the coordinator position is being requested in the 2026 budget.

The coalition has been restructured to have three workgroups instead of five. A new membership committee has also been created with a first ever membership application required by participants. The membership committee provides outreach to potential new members and encourages active participation or passive support as the two membership types available. The coalition's strategic plan is being updated to reflect these changes and will be posted on the Suicide Prevention and Crisis Services website and linked with the Tompkins County Whole Health website later this year.

The coalition hosts an annual town hall in the fall of each year. The town hall that was held in 2024 focused on youth wellness. This year's town hall is currently being planned.

**Goal 4**
Goal 4, 2026 Status Update: Ongoing
Goal 4, 2026 Status Update Description: The CSB and all three subcommittees will establish a communication plan to regularly highlight information about mental hygiene needs and services available by the end of 2025. They will consider developing an anti-stigma campaign to address fears some members of the public may have in participating in services in 2026.

The Developmental Disabilities Sub-committee will establish a roadmap of services for individuals and families using OPWDD services that will be published on the Tompkins County Whole Health website. They will continue to hold their annual provider fair to support caregivers in identifying services that may be helpful for their families.

Narcan providers now regularly meet to coordinate Narcan delivery across the county. Tompkins County Whole Health provides comprehensive data on substance use and overdose rates along with contact information for substance use treatment providers and other support services that are available on their website. Instructions on how to use Narcan are also posted on the website and available in a brochure first produced in 2024. New Narcan vending machines were provided through a grant received by Addiction Center of Broome County to several locations in the county in 2025.

Goal 4 Objective 1, 2026 Status Update: Ongoing
Goal 4 Objective 1, 2026 Status Update Description: The Whole Health website now offers an updated listing of mental health and substance use resources available in the community. The Developmental Disabilities subcommittee will add a listing of OPWDD services to the website by 12.31.25.

The Mental Health Subcommittee met with the Tompkins County and Whole Health communications staff to learn about effective strategies that could be used to improve public awareness around mental illness and substance use in their May 2025 meeting. They discussed the development of a communication plan that will proactively highlight mental hygiene topics throughout the year to create greater public awareness. They also discussed the possibility of establishing an anti-stigma campaign.

A communication plan to increase public awareness around mental health, substance use, and developmental disabilities will be developed by the three subcommittee chairs after receiving feedback from each of their subcommittees. The final draft plan will be presented to the CSB for approval by the end of 2025.

The subcommittee chairs will also begin discussing a possible partnership with the county communications staff in launching an anti-stigma campaign in 2026. They will explore OMH's "Be Well" public awareness campaign that increases understanding of the importance mental health, resilience, and the impact of stress and trauma as a possible model to be applied locally.

The Developmental Disabilities Subcommittee hosted their third annual Resource Fair in May 2025. They have already begun to identify ways to improve community awareness of the event that is designed to increase access for families to OPWDD services for next year's Resource Fair. Ideas include 1) participating in a well-established event instead of creating their own event and 2) updating marketing materials using a parent perspective instead of language used by providers that may be confusing to the intended audience.

Members of the CSB and the mental health subcommittee participate in and support the newly created "Better Together" May Mental Wellness event that is held annually in Stewart Park. Local service providers table at the event where free food, live music and free use of the Merry Go Round have made it a main attraction in the community. Members of the Suicide Prevention Coalition are one of the many groups represented. The event brings public awareness to the importance of wellness and provides access to information on available mental health services.

Goal 4 Objective 2, 2026 Status Update: Ongoing
Goal 4 Objective 2, 2026 Status Update Description: The DD subcommittee has discussed barriers to care delivery. They are currently working to establish a roadmap of resources to educate people on what services are available and the order required to successfully utilize services. Care management agencies regularly attend meetings and provide input.

Goal 4 Objective 3, 2026 Status Update: Ongoing
Goal 4 Objective 3, 2026 Status Update Description: The deadline was extended to 2027 due to high number of objectives in 2026. Support strategies that improve coordination of services and treatment integration across the mental hygiene system with other community supports.

Goal 4 Objective 4, 2026 Status Update: Complete
Goal 4 Objective 4, 2026 Status Update Description: Whole Health has published comprehensive data on its website.

Narcan providers began meeting regularly in 2024 to discuss trends and coordinate services.

Narcan Vending Machines have been donated from ACBC in Broome County and will be placed at both Tompkins County Whole Health locations in June 2025.

The Substance Use Subcommittee is evaluating the need and potential benefits of establishing an opioid task force or participation in a regional task force. The subcommittee is also considering the creation of a taskforce that addresses deaths of despair - combining the data of both suicide deaths and attempts with substance use deaths (intentional and accidental) and overdoses. The focus of this type of group would be to identify and mitigate risk factors associated with both suicide and substance use.
Data is updated regularly, and meetings continue to be held monthly.

**Goal 5**
Goal 5, 2026 Status Update: Ongoing
Goal 5, 2026 Status Update Description: The Substance Use Subcommittee held a forum of local peer serving organizations and has begun to develop a comprehensive listing of peer support services in the county. The Mental Health Association of Tompkins County will be hosting peers to create a supportive space for them to meet regularly. The Director of Community Services (DCS) will provide an overview of state and local data that identifies health disparities in Tompkins County in 2025 to begin a planning process to address these disparities in future planning years.

Goal 5 Objective 1, 2026 Status Update: N/A
Goal 5 Objective 1, 2026 Status Update Description:

Goal 5 Objective 2, 2026 Status Update: Complete
Goal 5 Objective 2, 2026 Status Update Description: The three subcommittees will review data in 2025 to include:
- NY State Health Indicators by Race & Ethnicity

- County Health Rankings & Roadmaps (Tompkins County Demographics)
- Vital Signs Dashboard (Tompkins County OMH Medicaid Utilization Data) and discuss its implications for service delivery and access to care in 2025.

Goal 5 Objective 3, 2026 Status Update: Not started
Goal 5 Objective 3, 2026 Status Update Description: Survey information on what is currently being done and what support would be helpful will be collected in 2025 to identify what types of training or consultation would be beneficial to agencies in 2026.

Goal 5 Objective 4, 2026 Status Update: Complete
Goal 5 Objective 4, 2026 Status Update Description: The second annual LGU Workforce Shortage Survey in 2025 will include questions on activities agencies are using to diversify the workforce. The survey will also ask agencies what support/training would be beneficial to them. Findings from the survey will be shared with participating organizations, the CSB and the subcommittees. This information will inform strategies that will be used to complete Objective #3 listed above in 2026 and Objective 5 listed below in 2027.

Goal 5 Objective 5, 2026 Status Update: Ongoing
Goal 5 Objective 5, 2026 Status Update Description: The SU Subcommittee invited all peer serving organizations (including OASAS and OMH certified and non-certified settings) to attend a meeting, share updates on the services they offer, outline challenges they experience and identify support that could be beneficial to them. Many peers identified the need for a place to meet regularly in order to maintain their professional identity. The Mental Health Association of Tompkins County started hosting a meeting space for peers to address this unmet need soon afterwards.

The SU Subcommittee Chair compiled the first ever comprehensive list of peer services in the county. The list includes contact information as well as a brief description of the peer services available at each program. The Chair will provide a summary of these services to the CSB during the October 2025 meeting.

Continue to meet with peer services periodically to better understand the resources available, support needed, and challenges experienced.

**Goal 6**
Goal 6, 2026 Status Update: Not started
Goal 6, 2026 Status Update Description: The Mental Health Subcommittee has developed a plan to learn more about ACES in 2026. This work will be used to inform future steps taken to ensure services are provided in a trauma informed manner.

Goal 6 Objective 1, 2026 Status Update: Not started
Goal 6 Objective 1, 2026 Status Update Description: This objective was extended to 2026 from 2025. The Mental Health subcommittee will include guest speakers who are using ACES in their work both with children (CSPOA Coordinator, Family and Children's, Children and Youth BSU at Cayuga Health, children's services at the Mental Health Clinic, etc.). They will also invite guest speakers who work primarily with adults to talk about the role ACES still plays in the lives of their clients. Programs to consider include jail re-entry, the treatment of co-occurring disorders and others. This initial work will be used to better understand how agencies are implementing trauma-informed practices.

**Goal 7**
Goal 7, 2026 Status Update: Ongoing
Goal 7, 2026 Status Update Description: The Developmental Disabilities Subcommittee regularly meets with school districts/BOCES to ensure youth, and their families are aware of services available and the timeline to enroll while in high school by attending regularly scheduled school meetings. This will continue to be an area of focus to ensure young adults who should receive OPWDD services do not graduate from high school "to the couch".
A second OASAS prevention provider was selected through an RFP to replace services lost with the closure of Alcohol and Drug Council. CLYDE survey data of middle and high school students is reviewed annually by the Substance Use Subcommittee as well as receiving updates on the establishment of a Collegiate Recovery program at Tompkins Cortland Community College and plans by Cornell University to start a recovery program in the future.
The Mental Health Subcommittee met with the Children's SPOA Coordinator. New services including Children's ACT (Assertive Community Treatment) and Home-Based Crisis Intervention Services (HBCI) for both youth in the mental health system and those receiving OPWDD services have been launched in 2025. This goal will remain a priority for the Mental Health Subcommittee in 2026 due to the continued need for respite services in the county and the need for housing support for homeless/runaway youth.

Goal 7 Objective 1, 2026 Status Update: Complete
Goal 7 Objective 1, 2026 Status Update Description: The Developmental Disabilities Subcommittee has regularly scheduled meetings with school officials to provide information on ways to improve transition support services. They have encouraged school officials to participate in subcommittee meetings and have worked to improve communication between OPWDD providers and school staff in 2024.

Developmental Disabilities Subcommittee members are now attending two CSE Chair Meetings along with the OPWDD transition team. They also attend two school counselors and two social workers meetings for all school districts annually.

Goal 7 Objective 2, 2026 Status Update: Ongoing
Goal 7 Objective 2, 2026 Status Update Description: The Mental Health Subcommittee held a forum with school officials to better understand gaps in services for youth including transition age youth. A board member applied for and received System of Care (SOC) grant funds to hold focus groups with young people and their caregivers to better understand their needs.

Children's ACT and Home and Community Based Services are now available in the county.

A program serving unhoused youth closed in 2025 resulting in very limited support for youth who are often couch surfing. There are no respite services in the county, making it difficult for families to access this service. County officials including DSS, Probation, Youth Services and Mental Health are working together to identify possible solutions.

This objective will be extended to provide additional time to address the need for local respite and youth homelessness services.

Goal 7 Objective 3, 2026 Status Update: Complete
Goal 7 Objective 3, 2026 Status Update Description: The Substance Use subcommittee reviews CLYDE survey data regularly and discusses prevention services offered for children and youth.

An RFP was written by the county and approved by OASAS for prevention services after the closure of Alcohol and Drug Council. The Rural Health Institute was awarded the contract and will share an update on the services they are beginning to provide in the July Substance Use Subcommittee meeting.
Ashley Dickson, from Tompkins Cortland Community College, also presented to the Substance Use Subcommittee on the university's Collegiate Recovery Program and the credentialing process for OASAS approved peers. Cornell is in the process of exploring fundraising opportunities with the hope of launching a Collegiate Recovery Program in the coming years.

Continue to monitor CLYDE survey data and invite prevention providers to present at the Substance Use Subcommittee meetings.

Support efforts to expand Collegiate Recovery Programs.

# The Tompkins County
# Local Services Plan Review for 2026

**Introduction:** The Tompkins County Mental Hygiene Local Services Plan (LSP) for 2024-2027 was developed by a committee composed of the Chair of the Community Services Board, Chair and Co-Chairs of the Mental Health, Substance Use and Developmental Disabilities Subcommittees and the Director of Community Services. The LSP Review Committee solicited feedback from community members, local provider agencies, and Community Service Board and subcommittee members through a Local Services Plan Priority Needs Survey conducted in May and June 2023. In addition, various State and local guidance documents and sources of data were used to inform the goals established.

The review of the LSP for the year 2026 used a similar process. The LSP Review Committee included the Chair of the Community Services Board, the Chairs and Co-Chairs of the three subcommittees and the Director of Community Services. They gathered feedback from members of the Community Services Board along with members and guests of the three subcommittees during their monthly meetings. They learned about growing needs, progress made in achieving planning goals and objectives and considered different perspectives on how challenges could be resolved. Presentations were made throughout the year by various community stakeholders with content expertise on topics addressed in the LSP. These interactions provided greater awareness of service delivery within OMH, OASAS and OPWDD programs in Tompkins County. The Community Services Board, for example, heard from a panel of local housing providers to better understand the treatment needs of those served. They also heard from the Commissioner of DSS who provided an overview of their housing services along with demographic data and an analysis of needs for individuals who use the shelter during Code Blue.

The Substance Use Subcommittee met with peers from various community agencies to better understand the types of programming available, the challenges with certification and the need for peers to have a place to meet with each other to further develop and support their professional identity. The Mental Health Subcommittee tackled the needs of children and youth, bringing representatives from local school districts and healthcare together to discuss the growing mental health needs of youth. Finally, the Developmental Disabilities Subcommittee recently met with a new respite program provider to understand the ongoing challenges in receiving respite services and the impact this program is having locally.

In addition to this information, the LSP Review Committee reviewed the following reports and sources of data to better understand State priorities as well as local areas of strength and need for improvement.

- 2024 OPWDD Strategic Annual Report (Review of 2023-2027 Strategic Plan)
- 2026 State Agency Planning Priority Guidelines – OPWDD
- 2025-2029 OASAS Strategic Plan
- 2026 State Agency Planning Priority Guidelines – OMH
- 2024 Report on Suicide Prevention Activities
- 2022 Reducing Disparities within the Public Mental Health System

- 2023 Annual Report Geriatric Mental Health and Substance Use Disorders: Interagency Geriatric Mental Health & Substance Use Disorder Planning Council
- 2023 Youth Mental Health Listening Tour Report: Putting Youth Mental Health First
- 2026 Tompkins County Community Assessment (CHA)
- OMH Vital Signs Dashboard (county mental health services scores on health metrics)
- Building Power for Health and Equity: 2025 County Health Rankings and Roadmaps

The LSP Review Committee will submit the updated plan for 2026 to the full Community Services Board for their review and approval during the July 7, 2025, meeting. Once approved by the Board, the plan will be submitted to the State for their review and analysis.

A total of seven goal areas were identified based on community need. They are listed below:

1. Workforce
2. Housing
3. Crisis Services
4. Cross System Services
5. Non-Clinical Supports
6. Adverse Childhood Experiences
7. Transition Age Services

The identified community needs addressed by each priority goal area are listed along with the objectives designed to achieve each goal area. Those responsible for completing the work and the timeline to complete each objective is also included. Activities in the plan that are due at the end of 2025 are highlighted to ensure this work is finalized by the end of the year.

**Year 2025 Goal # 1:**
**Title: Workforce**
**Description:** Support the implementation of recruitment/retention strategies by mental hygiene providers in Tompkins County as measured by a reduction in staff vacancies.
**Priority Areas:**
**OASAS:** Yes
**OMH:** Yes
**OPWDD:** Yes
**Needs Addressed: (1)** Workforce
**2026 Summary:** All agencies that receive passthrough State and local funding and other agencies that volunteered to participate completed a workforce survey in the fall of 2024. The purpose of the survey was to better understand the current workforce shortage and its impact on Tompkins County residents. The survey will be completed again in the fall of 2025. Additional questions about workforce diversity will be added, including if any strategies have been implemented to improve diversity in the workforce and if any assistance in implementing best practice strategies through training, consultation or other means would be beneficial. Workforce data is being used to advocate for policy solutions that address the current workforce crisis emphasizing the detrimental impact the shortage has caused on service recipients. The 2025 survey will also inform future work to increase workforce diversity necessary to better meet the needs of minority community members who have experienced structural racism and marginalization. Objectives to be completed in the rest of 2025 are highlighted in yellow. Objectives to be completed in 2026 are highlighted in green. Objectives that have been completed but have ongoing work appear in the second column (ongoing) below.

| Objective | Complete | Ongoing |
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| **Objective #1 To Be Completed 12.31.25**<br><br>Highlight the severity of the workforce crisis in advocacy efforts<br><br>**Assigned: CSB, Subcommittees & DCS** | The Community Services Board (CSB) will submit a letter to the Tompkins County Legislature and State representatives highlighting the negative impact the workforce shortage has had on county residents in 2025. The letter will advocate for increased funding to ensure competitive wages and other policy recommendations in order for nonprofit agencies to recruit and retain staff.<br><br>The closure and temporary suspensions of numerous OPWDD licensed housing programs in the county has resulted in residents being forced to relocate and is a serious concern. The CSB will continue to monitor the impact of the workforce shortage on Tompkins County residents.<br><br>The Chamber of Commerce will be invited to attend a CSB meeting in 2025 to discuss the importance of the nonprofit mental hygiene sector in the local economy with a request for | |

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| | assistance in identifying ways to support efforts by agencies to attract and retain employees.<br><br>Additionally, the MH, DD, SU subcommittees will become familiar with State Initiatives to build the future workforce needed. | |
| **Objectives 2**<br>**Completed 12.31.24**<br>Understand the scope of the workforce shortage by soliciting staff vacancy information from provider agencies. | A workforce survey of agencies providing mental hygiene services was conducted in the fall of 2024 to better understand the current workforce shortage. Findings from the survey included what types of positions are most challenging to fill, strategies organizations were using to hire and retain qualified staff, and the reasons many felt they were experiencing a staffing shortage. The information was compiled and shared with all three subcommittees and the CSB during regularly scheduled meetings. | The survey will be completed annually by contracted and voluntary agencies to better understand trends in the workforce overtime. |
| **Objective 3**<br>**Completed 12.31.24**<br>Quantify the impact of the workforce shortage on service delivery by soliciting data (program closures, wait lists, etc.) from provider agencies. | The survey also measured the impact of the workforce shortage on the delivery of services by gathering information on program closures, the creation of wait lists, increased caseload, overtime or other factors. The survey was designed to measure both the staffing shortage and the direct impact it has on client care. | The survey will be completed annually to track local capacity to deliver services related to staffing and identify any impact this has on care received. |
| **Objective #4**<br>**To Be Completed 12.31.25**<br>Support Workforce Diversity Efforts<br><br>**Assigned: Subcommittee Chairs & Co- Chairs, DCS** | The annual workforce survey will ask additional questions in 2025 that explore strategies agencies are using or plan to use in the coming year to improve staff diversity if they have identified this as a need. They will also be asked if they need any support in increasing staff diversity, and if so, what would be most helpful. | The added survey questions will be completed annually to measure progress over time. |
| **Year 2025 Goal #2**<br>**Title: Housing**<br>**Description:** Promote a housing first approach that increases the availability of affordable, emergency, and supportive housing that best meets the needs of individuals who require intensive, specialized community-based interventions for stabilization and recovery across the mental hygiene system.<br><br>**Priority Areas:** | | |

**OASAS:** Yes
**OMH:** Yes
**OPWDD:** Yes
**Needs Addressed: (1)** Housing
**2026 Summary**: The Community Services Board (CSB) and subcommittees learned about housing concerns that impacted Tompkins County residents in 2024 and 2025. The CSB hosted a panel of five housing providers to discuss the current housing needs of youth and adults and heard from the DSS Commissioner about plans to build a new shelter. The DSS Commissioner also described the services provided during Code Blue in 2025. Demographic information of those who used shelter services during that time was also provided along with a discussion on how best to meet the needs of program participants who are elderly, have physical disabilities, mental health disorders and substance use treatment needs. Presentations by various housing and residential programs licensed by OMH and OASAS were made by services providers along with the Continuum of Care Coordinator and the Single Point of Entry Coordinator either to the subcommittees or the Community Services Board in 2024 and 2025.

There is a growing concern around the number of OPWDD IRAs that have been either permanently or temporarily closed in the county. These closures have frequently resulted in the displacement of county residents to facilities outside of the county. The reason for the closures is due to the significant workforce shortage of direct support professionals. A second housing concern is the lack of services for homeless/runaway youth in the county after the closure of a program serving this population last year. A third concern is the long wait time for applicants to be housed in OMH licensed housing programs that go through Single Point of Entry. This has resulted in residents being housed in Broome County while waiting for an opening in Tompkins County. Applicants may be on the waitlist for over a year or more. Additional housing services are needed to meet this need in the community.

Opioid Settlement funds received by the Local Government Unit (LGU) and the City of Ithaca were used to establish a housing program for individuals with substance use and those with co-occurring mental illness using a housing first approach. Catholic Charities of Tompkins Tioga was awarded the contract. The new housing program expanded the agency's A Place to Stay program for women and now services both men and women. The updated program has been in operation since June 2024. Renee Spear, the Executive Director of Catholic Charities, presented to the CSB in May 2025, reviewing positive outcomes for residents of the program in its first year of operation. The SOS team that provides outreach and housing to street homeless individuals with mental health, substance use, and developmental disabilities also presented to the CSB and subcommittees in 2025. Two new housing programs should open in 2026 through Rehabilitation Support Services (RSS) and Catholic Charities of Tompkins Tioga helping to provide additional services to a growing homelessness problem in the county.

| Objective & Due Date | Complete | Ongoing |
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| **Objective 1**<br>**Completed in 2024 with follow up in 2025**<br><br>Better understand the interaction between homelessness and disability. | The Tompkins County Continuum of Care (CoC) presented to the CSB sharing information on the percentage of unhoused individuals who identified as having mental hygiene treatment needs in 2024. The Commissioner of the Department of Social Services presented to the CSB in 2025 describing the high need for treatment services among individuals who use the shelter. | |
| **Objective #2**<br>**Due 12.31.26**<br>Gather information about housing solutions. (Learn about current, new, and proposed housing solutions including community based residential programming, their challenges, and successes that will better address need.)<br><br>**Assigned: CSB & DCS** | The CSB and its subcommittees invited agencies to discuss new housing solutions designed to meet the needs of individuals with developmental disabilities, substance use, and mental health treatment needs during monthly meetings. Presentations by Lakeview, the SPOE Coordinator and the newly created SOS team were made in 2024.<br><br>A housing panel discussion was held by the CSB with five housing service providers participating in 2025. Providers described services currently offered and highlighted the need for housing support especially for homeless runaway youth. | New NYS Empire State Supportive Housing (ESSHI) is being built by Rehabilitation and Support Services (RSS) and Catholic Charities of Tompkins and Tioga. Both are scheduled to open in 2026. The CSB will ask both agencies to provide an update when these services begin. RSS has already begun offering Treatment Apartment Program (TAP) housing with eight new units approved by OMH. Housing services for runaway and homeless youth continue to be a major concern as well as emergency housing services that support individuals with mobility challenges, complex medical and other disability needs. The CSB and subcommittee will learn about and advocate for programming to meet these needs. |
| **Objective 3**<br>**Completed 12.31.25**<br>Gather information about Housing Reductions | OPWDD program suspensions in both state- and privately-run IRAs have resulted in significant number of disabled people being displaced from Tompkins County. These closures have primarily been due to workforce challenges. The DCS met with the OPWDD | The significant reduction of OPWDD housing services in the county is an area of concern and is related to the high cost of living and low wages for residential staff. Advocacy efforts to address |

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| | regional office in May 2025 to express concern with the limited housing resources remaining in the county. The Developmental Disabilities Subcommittee has focused efforts on advocacy for an increased COLA to bring depressed wages up to what is considered a living wage in Tompkins County.<br><br>The OMH Community Residence suspended services temporarily in 2024 due to workforce challenges. The program has reopened and is currently full. Closures due to a workforce shortage will be highlighted in the letter to county and State government officials (Goal #1, Objective #1) | the workforce challenges will be addressed under Goal #1 Objective #1.<br><br>The DCS will continue to monitor program closures and notify the Board if they occur. |
| **Objective #4**<br>**Completed 2024 with follow up in 2025**<br>Advocacy for Housing Solutions. (Advocate for additional emergency and supportive housing solutions across the mental hygiene system for adults and children.) | The CSB approved the use of LGU Opioid Settlement funds in partnership with the City of Ithaca to develop a new emergency housing program with intensive case management support for individuals with substance use and co-occurring mental health treatment needs who are homeless. The program uses the HMIS data collection system that is used by the CoC to improve the coordination of housing services provided in the county. The contract has been awarded to Catholic Charities of Tompkins Tioga who opened the program in mid-May 2024.<br><br>Catholic Charities of Tompkins Tioga presented to the CSB in their May 2025 meeting sharing highlights of the program's success. Eighteen people have participated in the program since its inception. Over 40% are now living in permanent housing having successfully discharged from the program. Over 80% of current residents participate in vocational, mental health and substance use treatment services. The flexibility of the model as well as the intensity of support services for an extended length of time leads to greater stability and long-term success. The contract for the piloted phase of the housing program is for two additional years. An additional three years of full funding is possible if the outcomes | andThe CSB and City of Ithaca will continue to hold an annual review of "A Place to Stay", the housing program developed with LGU and City of Ithaca Opioid Settlement Funds and approved by the CSB as outlined in the contract. |

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| | continue to indicate that the model is a success. Catholic Charities also presented on their new housing model along with the DCS and a public health fellow at this year's NYS Public Health Conference held in Ithaca earlier this year. | |

**Year 2024 Goal #3**
**Title: Crisis Services**
**Description:** Support the development of comprehensive crisis services that address the mental hygiene needs of Tompkins County residents.
**Priority Area**
**OMH:** Yes
**OASAS:** Yes
**OPWDD:** Yes
**Needs Addressed: (1)** Crisis Services

**2026 Update:** The Crisis Alternative Response and Engagement or CARE co-response teams continue to be operational with tentative plans to expand in the City of Ithaca in 2026. Tompkins County Whole Health has applied to OMH to become a designated Mobile Crisis Team allowing them to bill insurance for services delivered once approved. Cayuga Health Services (CHS) has been given permission by OASAS and OMH to pursue an Intensive Crisis Stabilization Center license. CHS plans to have the program operational by 2026 and is using American Rescue Plan Act (ARPA) funds received from the county to cover construction costs.

The Suicide Prevention Coalition received county funding in 2025 for a coordinator position that has resulted in new content advertising the work of the coalition on the Suicide Prevention and Crisis Services website, significant changes in the meeting schedule and leadership structure and a newly established membership committee. The first goal of the new coordinator is to reinvigorate the coalition by increasing the number of members who actively participate. Coalition members are currently working on updating the strategic plan. They have already seen an increase in new members participating in meetings.

Family and Children's Service of Ithaca chose to discontinue the outreach worker program that was expanded in 2023 to include both the City of Ithaca and the county with funding received from OMH for the first year and then funded by the county. No other agency was identified through an RFP process to continue the work. As a result, funding for the expanded program was cut by the county. REACH Medical now operates a smaller outreach worker program that is limited to the original model serving the downtown corridor in the City of Ithaca alone. This program is funded by the city and the county. The outreach program is a pilot with an RFP to be issued next year based on findings from this initial phase. The CSB will explore the need to develop a limited law enforcement response in 2026 either through a new program entirely or through the expansion of services provided by an outreach worker program that is already established. Daniel's Law funding may be used to help cover the costs of a program like this if it is needed and the funding is available by OMH.

| Objective | Complete | Ongoing |
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| **Objective #1**<br>**Completed 12.31.24**<br>Identify Best Practice Crisis Response Across | Collaboration with local law enforcement along with a literature review and consultation with counties providing similar services has resulted in the establishment of the Crisis Alternative | |

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| Mental Hygiene System. (Identify lessons learned, implementation process and outcomes from others in the field). | Response and Engagement or CARE Teams, a co-response model between law enforcement and mental health.<br><br>Sequential Intercept Mapping and CIT training have been completed. A clinician on the CARE Team has become a train-the-trainer in the CIT model with the goal of providing regularly scheduled CIT training to law enforcement officers to increase the number of officers trained in the model. | |
| **Objective #2**<br>**Completed 12.31.25**<br>Expand access to crisis supports. | Suicide Prevention and Crisis Services is the local 988 provider. They have expanded services to include a warm line and present data to the CSB upon request.<br><br>Cornell University has established a crisis response team and recently participated in a sequential intercept mapping process with OMH. They plan to train more campus police in Crisis Intervention Team (CIT) and expand support for students, faculty and staff in the future.<br><br>OMH has requested that Whole Health become a designated Mobile Crisis Team in order to bill insurance for crisis services. OMH provided additional funding that was used to expand the CARE (co-response) team in Tompkins County. It is anticipated that crisis services provided by Whole Health will become a designated Mobile Crisis Team by OMH by the end of 2025. | |
| **Objective #3**<br>**Extended from 2025 to be completed by 12.31.26 due to no CIT training scheduled**<br>Improve Communication between law enforcement and Crisis Mental Health Recipients<br><br>**Assigned: Mental Health Subcommittee** | Mental Health Subcommittee members will assist in identifying individuals with lived experience who would like to participate in CIT training efforts by local law enforcement. The goal of participation is to improve communication and understanding between law enforcement and crisis mental health recipients.<br><br>If no CIT training is scheduled, the Mental Health Subcommittee will invite local law enforcement members to a subcommittee meeting to discuss their experiences when responding to people in crisis with mental hygiene needs. Members and guests from PROS, MHA and NAMI along with | The Ithaca City Police Chief has applied to be a member of the Community Services Board and if approved by the legislature, will share the perspective of law enforcement in supporting individuals who are experiencing a mental health crisis. |

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| | certified and non-certified peers from various organizations will also share their experiences as recipients of mental health, substance use, or developmental disabilities services. Sharing experiences will help ensure that the humanity of people experiencing a crisis is not lost under difficult circumstances. | |
| **Objective #4**<br>**Due 12.31.26**<br>Support efforts to establish a Crisis Stabilization Center or similar program.<br><br>**Assigned: CSB, Substance Use Subcommittee & DCS** | Anticipate the opening of an Intensive Crisis Stabilization Center in February 2026 by Cayuga Health Services (CHS). CHS was awarded funding by Tompkins County for capital improvements related to this project through a local RFP process.<br><br>Representatives from CHS provided an update on the work being done to open the center at the June 2025 Substance Use Subcommittee meeting. | |
| **Objective #5**<br>**Due 12.31.26**<br>Support Suicide Prevention Efforts<br>(Support Suicide Prevention Coalition efforts including the implementation of Zero Suicide across healthcare settings to prevent suicide.)<br><br>**Assigned: DCS** | Suicide Prevention and Crisis Services received one time county funding in 2025 to provide coordination of Suicide Prevention Coalition activities. County enhancement funding to retain the coordinator position is being requested in the 2026 budget.<br><br>The coalition has been restructured to have three workgroups instead of five. A new membership committee has also been created with a first ever membership application required by participants. The membership committee provides outreach to potential new members and encourages active participation or passive support as the two membership types available. The coalition's strategic plan is being updated to reflect these changes and will be posted on the Suicide Prevention and Crisis Services website and linked with the Tompkins County Whole Health website later this year.<br><br>The coalition hosts an annual town hall in the fall of each year. The town hall that was held in 2024 focused on youth wellness. This year's town hall is currently being planned. | |

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| | The Zero Suicide Steering Committee is now led by a psychiatrist from Cayuga Health Services responsible for supporting primary care doctors in treating mental illness. The Healthcare Workgroup of the coalition is led by a psychologist from Guthrie Health who provides mental health support to primary care doctors. Both leaders will meet regularly to ensure coordination between the county's healthcare systems, the Zero Suicide Steering Committee and the Healthcare Workgroup that focuses on ensuring quality assessment, prevention and treatment for suicidality in the healthcare system. | |
| **Objective # 6**<br>**Due 12.31.26**<br>This objective was added in 2025.<br>Determine if there is a need for a sub-acute limited law enforcement response model in addition to the newly established CARE Team Co-Response Model<br><br>**Assigned: DCS** | A work group of subcommittee members, content experts and people with lived experience will be established to better understand how a dedicated limited law enforcement response team could complement the co-response model already in place.<br><br>The workgroup will be charged with understanding the current outreach worker programs and services available to residents. They will also evaluate any new programs under development by the county or city. They will determine if the creation of a limited law enforcement team is needed or if the services are already provided or could be provided through an established or a new program under development. The goal of any service is that it would be available to all county residents. If a service is available to those living in the City of Ithaca, but not the rest of the county, the workgroup may explore ways to expand that service. The work group will report their findings to the CSB clarifying best-practice models and any current gaps in services they have identified. They will make a recommendation as to the potential need for a distinct limited law enforcement program based on their work. The work group will also be responsible for monitoring state funding available through Daniel's Law. | |
| **Year 2024 Goal # 4** | | |

**Title: Cross System Services**
**Description:** Improve access to care across the mental hygiene system.

**Priority Areas:**
**OASAS:** Yes
**OMH:** Yes
**OPWDD:** Yes
**Needs Addressed: (1)** Cross System Services
2026 Update: The CSB and all three subcommittees will establish a communication plan to regularly highlight information about mental hygiene needs and services available by the end of 2025. They will consider developing an anti-stigma campaign to address fears some members of the public may have in participating in services in 2026.

The Developmental Disabilities Sub-committee will establish a roadmap of services for individuals and families using OPWDD services that will be published on the Tompkins County Whole Health website. They will continue to hold their annual provider fair to support caregivers in identifying services that may be helpful for their families.

Narcan providers now regularly meet to coordinate Narcan delivery across the county. Tompkins County Whole Health provides comprehensive data on substance use and overdose rates along with contact information for substance use treatment providers and other support services that are available on their website. Instructions on how to use Narcan are also posted on the website and available in a brochure first produced in 2024. New Narcan vending machines were provided through a grant received by Addiction Center of Broome County to several locations in the county in 2025.

| Objective | Complete | Ongoing |
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| **Objective #1**<br>**To be Completed 12.31.25 with ongoing activities scheduled in 2026**<br>Improve Public Awareness of Available Services Across Systems including those that address social health needs.<br><br>**Assigned: MH, DD and SU Subcommittees, CSB & DCS** | The Whole Health website now offers an updated listing of mental health and substance use resources available in the community. The Developmental Disabilities subcommittee will add a listing of OPWDD services to the website by 12.31.25.<br><br>The Mental Health Subcommittee met with the Tompkins County and Whole Health communications staff to learn about effective strategies that could be used to improve public awareness around mental illness and substance use in their May 2025 meeting. They discussed the development of a communication plan that will proactively highlight mental hygiene topics throughout the year to create greater public awareness. They also discussed the possibility of establishing an anti-stigma campaign.<br><br>A communication plan to increase public awareness around mental health, substance use, | The Developmental Disabilities Subcommittee hosted their third annual Resource Fair in May 2025. They have already begun to identify ways to improve community awareness of the event that is designed to increase access for families to OPWDD services for next year's Resource Fair. Ideas include 1) participating in a well-established event instead of creating their own event and 2) updating marketing materials using a parent perspective instead of language used by providers that may be confusing to the intended audience.<br><br>Members of the CSB and the mental health subcommittee |

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| | and developmental disabilities will be developed by the three subcommittee chairs after receiving feedback from each of their subcommittees. The final draft plan will be presented to the CSB for approval by the end of 2025.<br><br>The subcommittee chairs will also begin discussing a possible partnership with the county communications staff in launching an anti-stigma campaign in 2026. They will explore OMH's "Be Well" public awareness campaign that increases understanding of the importance mental health, resilience, and the impact of stress and trauma as a possible model to be applied locally. | participate in and support the newly created "Better Together" May Mental Wellness event that is held annually in Stewart Park. Local service providers table at the event where free food, live music and free use of the Merry Go Round have made it a main attraction in the community. Members of the Suicide Prevention Coalition are one of the many groups represented. The event brings public awareness to the importance of wellness and provides access to information on available mental health services. |
| **Objective # 2**<br>**Due 12.31.27**<br>Originally scheduled for completion by 12/31/25 extended due to the need for state-wide changes in the OPWDD system<br>Remove barriers to accessing services across the system.<br><br>Advocate for removal of eligibility barriers to better serve people who have needs across systems and continue to educate Care Managers in the DD system about options in Tompkins County.<br><br>**Assigned: DD Subcommittee** | The DD subcommittee has discussed barriers to care delivery. They are currently working to establish a roadmap of resources to educate people on what services are available and the order required to successfully utilize services. Care management agencies regularly attend meetings and provide input. | |
| **Objective #3**<br>**Due 12.31.27**<br>The deadline for this objective was extended | Description: Support strategies that improve coordination of services and treatment integration across the mental hygiene system with other community supports. | |

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| from 2025 to 2027 due to the high number of objectives in the 2025 plan year.<br><br>Care Coordination Across the Mental Hygiene System.<br><br>**Assigned: All Subcommittees, CSB and DCS** | | |
| **Objective #4**<br>**Due 12.31.27**<br>**This was originally scheduled for completion on 12.31.24**<br>Use opioid overdose data to guide interventions across the mental hygiene system. (Improve data integrity/collection related to opioid overdose to guide prevention efforts)<br><br>**Assigned: Substance Use Subcommittee & DCS** | Whole Health has published comprehensive data on its website.<br><br>Narcan providers began meeting regularly in 2024 to discuss trends and coordinate services.<br><br>Narcan Vending Machines have been donated from ACBC in Broome County and will be placed at both Tompkins County Whole Health locations in June 2025.<br><br>The Substance Use Subcommittee is evaluating the need and potential benefits of establishing an opioid task force or participation in a regional task force. The subcommittee is also considering the creation of a taskforce that addresses deaths of despair – combining the data of both suicide deaths and attempts with substance use deaths (intentional and accidental) and overdoses. The focus of this type of group would be to identify and mitigate risk factors associated with both suicide and substance use. | Data is updated regularly.<br><br>Meetings continue to be held monthly. |
| **Objective # 5**<br>**Anticipated Completion 12.31.25**<br>This objective was added in 2024 due to the loss of these services with the closure of Alcohol Drug Council.<br>Re-establish and maintain a withdrawal and stabilization program in Tompkins County to re-establish the | An RFP issued by Tompkins County with OASAS approval was awarded to Cayuga Addiction and Recovery Services (CARS), an affiliate of Cayuga Health Services (CHS). In June 2025, the Substance Use Subcommittee met with staff from CARS and CHS who stated their intention to have the program operational by the end of the year. | The subcommittee will continue to monitor progress and anticipates this objective will be met by the end of 2025. |

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| full continuum of care in OASAS. | | |

**Year 2024 Goal #5**
**Title: Non-Clinical Supports**
**Description:** Recognize the importance of addressing social determinants of health to promote wellness, recovery and improved health equity.
**Priority Area**
**OMH:** Yes
**OASAS:** Yes
**OPWDD:** Yes
**Needs Addressed: (1)** Non-clinical Supports (Social Determinants of Health)
**2026 Update:** The Substance Use Subcommittee held a forum of local peer serving organizations and has begun to develop a comprehensive listing of peer support services in the county. The Mental Health Association of Tompkins County will be hosting peers to create a supportive space for them to meet regularly. The Director of Community Services (DCS) will provide an overview of state and local data that identifies health disparities in Tompkins County in 2025 to begin a planning process to address these disparities in future planning years.

| Objective | Complete | Ongoing |
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| **Objective #1 Removed** Identify Healthcare Access Barriers for Medicaid Recipients Receiving Mental Hygiene Services (Become familiar with the barriers to healthcare access including dental and optical for Medicaid recipients). | | Objective removed in 2024 due to being out of the scope of the CSB and subcommittees. Language was added to Goal #4 Objective #1 to support people in accessing services that meet their social health needs. |

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| **Objective #2**<br>**To Be Completed 12.31.25**<br>Improve access to quality mental hygiene services for minoritized populations by completing an analysis of current state and local data available to identify gaps in access to care.<br><br>**Assigned: MH, DD, SU Subcommittees & DCS** | The three subcommittees will review data to include:<br>• NY State Health Indicators by Race & Ethnicity<br>• County Health Rankings & Roadmaps (Tompkins County Demographics)<br>• Vital Signs Dashboard (Tompkins County OMH Medicaid Utilization Data)<br>and discuss its implications for service delivery and access to care in 2025. | Data identifying gaps in care will be reviewed by the DCS in the DD, MH and SU subcommittees annually to identify trends, areas of strength and areas for future improvement. |

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| **Objective #3**<br>**Due 12.31.26**<br>Improve access to quality mental hygiene services for minoritized populations by supporting contract agencies with best practice data collection and processes<br><br>**Assigned: CSB, All three Subcommittees, DCS** | This objective was moved to be completed in 2026 instead of 2025 because it was out of order. Objective # 4 (below) must be completed prior to completing Objective #3. Survey information on what is currently being done and what support would be helpful must be collected first to identify what type of training or consultation would be beneficial to agencies. | |

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| **Objective # 4**<br>**To Be Completed 12.31.25**<br>Improve access to quality mental hygiene services for minoritized populations by collecting and analyzing local data from contract and volunteer agencies<br><br>**Assigned: CSB, All three Subcommittees, DCS** | This objective was moved to be completed in 2025 instead of 2026 because it was out of order. The second annual LGU Workforce Shortage Survey will include questions on activities agencies are using to diversify the workforce. The survey will also ask agencies what support/training would be beneficial to them. Findings from the survey will be shared with participating organizations, the CSB and the subcommittees. This information will inform strategies that will be used to complete Objective #3 listed above in 2026 and Objective 5 listed below in 2027. | |
| **Objective #5**<br>**Due 12.31.27**<br>Improve health equity in the mental hygiene system. (Identify strategies to improve health equity | This objective has not yet been started and will be dependent on the completion of objectives 2-4 above 12/31/27 | |
| **Objective # 6**<br>**Completed 12.31.25**<br>Support greater awareness of peer support services to strengthen engagement across the mental hygiene system. | The SU Subcommittee invited all peer serving organizations (including OASAS and OMH certified and non-certified settings) to attend a meeting, share updates on the services they offer, outline challenges they experience and identify support that could be beneficial to them. Many peers identified the need for a place to meet regularly in order to maintain their professional identity. The Mental Health Association of Tompkins County started hosting a meeting space for peers to address this unmet need soon afterwards.<br><br>The SU Subcommittee Chair compiled the first ever comprehensive list of peer services in the county. The list includes contact information as well as a brief description of the peer services available at each program. The Chair will | Continue to meet with peer services periodically to better understand the resources available, support needed, and challenges experienced. |

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| | provide a summary of these services to the CSB during the October 2025 meeting. | |

**Year 2024 Goal # 6**
**Title: Adverse Childhood Experiences**
**Description:** Build resilience in youth and adults impacted by childhood trauma.
**Priority Area:**
**OMH:** Yes
**OPWDD:** Yes
**OASAS:** Yes
**Needs Addressed: (1)** Adverse Childhood Experiences
Update 2026: The Mental Health Subcommittee has developed a plan to learn more about ACES in 2026. This work will be used to inform future steps taken to ensure services are provided in a trauma informed manner.

| Objective | Completed | Ongoing |
|---|---|---|
| **Objective #1**<br>**Due 12/31/26**<br>Promote greater awareness of the impact of ACES in the lives of adults and children recognizing the importance of early intervention and the need for quality treatment.<br><br>**Assigned: MH Subcommittee** | This objective was extended to 2026 from 2025. The Mental Health subcommittee will include guest speakers who are using ACES in their work both with children (CSPOA Coordinator, Family and Children's, Children and Youth BSU at Cayuga Health, children's services at the Mental Health Clinic, etc.). They will also invite guest speakers who work primarily with adults to talk about the role ACES still plays in the lives of their clients. Programs to consider include jail re-entry, the treatment of co-occurring disorders and others. This initial work will be used to better understand how agencies are implementing trauma-informed practices. | |

**2024 Goal # 7**
**Title: Transition Age Youth Services**
**Description:** Ensure adequate support is available for youth especially as they transition to adulthood across the mental hygiene system.
**Priority Area:**
**OMH:** Yes
**OPWDD:** Yes
**OASAS:** Yes
**Need Addressed: Transition** Age Youth
2026 Update: The Developmental Disabilities Subcommittee regularly meets with school districts/BOCES to ensure youth and their families are aware of services available and the timeline to enroll while in high school by attending regularly scheduled school meetings. This will continue to be an area of focus to ensure young adults who should receive OPWDD services do not graduate from high school "to the couch".

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| A second OASAS prevention provider was selected through an RFP to replace services lost with the closure of Alcohol and Drug Council. CLYDE survey data of middle and high school students is reviewed annually by the Substance Use Subcommittee as well as receiving updates on the establishment of a Collegiate Recovery program at Tompkins Cortland Community College and plans by Cornell University to start a recovery program in the future. The Mental Health Subcommittee met with the Children's SPOA Coordinator. New services including Children's ACT (Assertive Community Treatment) and Home-Based Crisis Intervention Services (HBCI) for both youth in the mental health system and those receiving OPWDD services have been launched in 2025. This goal will remain a priority for the Mental Health Subcommittee in 2026 due to the continued need for respite services in the county and the need for housing support for homeless/runaway youth. | | |
| **Objective** | **Completed** | **Ongoing** |
| **Objective #1**<br>**Completed 12.31.24**<br>Provide Seamless Transition to Adult Services for Youth receiving OPWDD Services. (Identify ways to reduce potential barriers to post-secondary transition support services.<br><br>**Assigned: DD Subcommittee** | The Developmental Disabilities Subcommittee has regularly scheduled meetings with school officials to provide information on ways to improve transition support services. They have encouraged school officials to participate in subcommittee meetings and have worked to improve communication between OPWDD providers and school staff in 2024. | Developmental Disabilities Subcommittee members are now attending two CSE Chair Meetings along with the OPWDD transition team. They also attend two school counselors and two social workers meetings for all school districts annually. |
| **Objective #2**<br>**Due 12.31.26**<br>Improve access to mental health services for youth including transition age youth.<br><br>**Assigned: MH Subcommittee** | The Mental Health Subcommittee held a forum with school officials to better understand gaps in services for youth including transition age youth. A board member applied for and received System of Care (SOC) grant funds to hold focus groups with young people and their caregivers to better understand their needs.<br><br>Children's ACT and Home and Community Based Services are now available in the county.<br><br>A program serving unhoused youth closed in 2025 resulting in very limited support for youth who are often couch surfing. There are no respite services in the county, making it difficult for families to access this service. County officials including DSS, Probation, Youth Services and Mental Health are working together to identify possible solutions. | Request CACT and HCBS services to provide an update annually to the subcommittee. |

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| | This objective will be extended to provide additional time to address the need for local respite and youth homelessness services. | |
| **Objective #3**<br>**Completed 12.31.25**<br>Ensure availability of effective substance use prevention services for youth and young adults.<br><br>**Assigned: SU Subcommittee** | The Substance Use subcommittee reviews CLYDE survey data regularly and discusses prevention services offered for children and youth.<br><br>An RFP was written by the county and approved by OASAS for prevention services after the closure of Alcohol and Drug Council. The Rural Health Institute was awarded the contract and will share an update on the services they are beginning to provide in the July Substance Use Subcommittee meeting.<br>Ashley Dickson, from Tompkins Cortland Community College, also presented to the Substance Use Subcommittee on the university's Collegiate Recovery Program and the credentialing process for OASAS approved peers. Cornell is in the process of exploring fundraising opportunities with the hope of launching a Collegiate Recovery Program in the coming years. | Continue to monitor CLYDE survey data and invite prevention providers to present at the Substance Use Subcommittee meetings.<br><br>Support efforts to expand Collegiate Recovery Programs. |


# 2024 Needs Assessment Form
# Tompkins County Mental Health Services

**Adverse Childhood Experiences** Yes
Applies to OASAS? Yes
Applies to OMH? Yes
Applies to OPWDD? Yes
Need Applies to: Both Youth and Adults
Do any of the Goals on the Goals and Objectives Form address this need? Yes
Need description (Optional):

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

**Cross System Services** Yes
Applies to OASAS? Yes
Applies to OMH? Yes
Applies to OPWDD? Yes
Need Applies to: Both Youth and Adults
Do any of the Goals on the Goals and Objectives Form address this need? Yes
Need description (Optional):

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

**Non-Clinical Supports** Yes
Applies to OASAS? Yes
Applies to OMH? Yes
Applies to OPWDD? Yes
Need Applies to: Both Youth and Adults
Do any of the Goals on the Goals and Objectives Form address this need? Yes
Need description (Optional):

**Transition Age Services** Yes
Applies to OASAS? Yes
Applies to OMH? Yes
Applies to OPWDD? Yes
Need Applies to: Youth Only

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

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

**LGU Representative**: Harmony Ayers-Friedlander

**Submitted for:** Tompkins County Mental Health Services


# 2025 Needs Assessment Form
# Tompkins County Mental Health Services

**Adverse Childhood Experiences** Yes
Applies to OASAS? Yes
Applies to OMH? Yes
Applies to OPWDD? Yes
Need Applies to: Both Youth and Adults
Do any of the Goals on the Goals and Objectives Form address this need? Yes
Need description (Optional):

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

**Cross System Services** Yes
Applies to OASAS? Yes
Applies to OMH? Yes
Applies to OPWDD? Yes
Need Applies to: Both Youth and Adults
Do any of the Goals on the Goals and Objectives Form address this need? Yes
Need description (Optional):

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

**Non-Clinical Supports** Yes
Applies to OASAS? Yes
Applies to OMH? Yes
Applies to OPWDD? Yes
Need Applies to: Both Youth and Adults
Do any of the Goals on the Goals and Objectives Form address this need? Yes
Need description (Optional):

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

**Transition Age Services** Yes
Applies to OASAS? Yes
Applies to OMH? Yes
Applies to OPWDD? Yes

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

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

**LGU Representative**: Harmony Ayers-Friedlander

**Submitted for:** Tompkins County Mental Health Services

NEW YORK STATE | Office of Addiction Services and Supports | Office of Mental Health | Office for People With Developmental Disabilities

**2026 Needs Assessment Form**
**Tompkins County Mental Health Services**

**Adverse Childhood Experiences** Yes
Applies to OASAS? Yes
Applies to OMH? Yes
Applies to OPWDD? Yes
Need Applies to: Both Youth and Adults
Do any of the Goals on the Goals and Objectives Form address this need? Yes
Need description (Optional):

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

**Cross System Services** Yes
Applies to OASAS? Yes
Applies to OMH? Yes
Applies to OPWDD? Yes
Need Applies to: Both Youth and Adults
Do any of the Goals on the Goals and Objectives Form address this need? Yes
Need description (Optional):

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

**Non-Clinical Supports** Yes
Applies to OASAS? Yes
Applies to OMH? Yes
Applies to OPWDD? Yes
Need Applies to: Both Youth and Adults
Do any of the Goals on the Goals and Objectives Form address this need? Yes

Need description (Optional):

**Respite** Yes
Applies to OASAS? No
Applies to OMH? Yes
Applies to OPWDD? No
Need Applies to: Youth Only
Do any of the Goals on the Goals and Objectives Form address this need? No
Need description (Optional): Tompkins County does not have respite services for children and youth in the county. This results in families having to travel at least an hour away to get the support they need. As a result, many families forgo using respite services that are desperately needed. This is addressed in the LSP under the Transition Age Youth Services Goal Objective # 2 Improve access to mental health services for youth including transition age youth.

**Transition Age Services** Yes
Applies to OASAS? Yes
Applies to OMH? Yes
Applies to OPWDD? Yes
Need Applies to: Both Youth and Adults
Do any of the Goals on the Goals and Objectives Form address this need? Yes
Need description (Optional):

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

**LGU Representative:** Harmony Ayers-Friedlander

**Submitted for:** Tompkins County Mental Health Services

| Agency Name | Program Name | Program Type Name |
|---|---|---|
| Addiction Center of Broome County, Inc. | Addiction Center of Broome County SMH CMA | Specialty Mental Health Care Management |
| Cayuga Addiction Recovery Services (CARS) | Cayuga Addiction Recovery Services (CARS) | Residential Rehabilitation and Medically Supervised Outpatient Treatment |
| Catholic Charities of Tompkins & Tioga County | Catholic Charities of Tompkins/Tioga | Adult BH HCBS Education Support Services (ESS) |
| Catholic Charities of Tompkins & Tioga County | Catholic Charities of Tompkins/Tioga | Adult BH HCBS Habilitation |
| Catholic Charities of Tompkins & Tioga County | Catholic Charities of Tompkins/Tioga | Adult BH HCBS Intensive Supported Employment (ISE) |
| Catholic Charities of Tompkins & Tioga County | Catholic Charities of Tompkins/Tioga | Adult BH HCBS Ongoing Supported Employment (OSE) |
| Catholic Charities of Tompkins & Tioga County | Catholic Charities of Tompkins/Tioga | Adult BH HCBS Pre-Vocational Services |
| Catholic Charities of Tompkins & Tioga County | Catholic Charities of Tompkins/Tioga | Emergency Housing & Intensive Supports |
| Catholic Charities of Tompkins & Tioga County | Parent Partnership | Advocacy/Support Services |
| Cayuga Medical Center at Ithaca, Inc. | Cayuga Medical Center at Ithaca Psychiatric Unit | Inpatient Psychiatric Unit of a General Hospital |
| Challenge Industries, Inc. | Assisted Competitive Employment | Assisted Competitive Employment |
| Challenge Industries, Inc. | Ongoing Integrated Supported Employment | Ongoing Integrated Supported Employment Services |
| Challenge Industries, Inc. | Transitional Employment | Transitional Employment Placement (TEP) |
| Cornell University | Youth Peer Advocate Services | Advocacy/Support Services |
| Family & Children's Services of Ithaca, Inc. | Children's Crisis Outreach Program | Crisis Intervention |
| Family & Children's Services of Ithaca, Inc. | Elder Mobile Mental Health Unit | Outreach |
| Family & Children's Services of Ithaca, Inc. | Family Mental Health Program | Mental Health Outpatient Treatment and Rehabilitative Services (MHOTRS) |
| Family & Children's Services of Ithaca, Inc. | Preschool Project | Advocacy/Support Services |
| Franziska Racker Centers, Inc. | Care Coordination | Health Home Care Management |
| Franziska Racker Centers, Inc. | Care Coordination Non Medicaid | Health Home Non-Medicaid Care Management |
| Franziska Racker Centers, Inc. | SPOA | Single Point of Access (SPOA) |
| Franziska Racker Centers, Inc. | Turning Point Program | Day Treatment |
| Ithaca Youth Bureau (IYB) | Recreational Support Services - Ithaca Youth Bureau | Adult Recreational Services |
| Lakeview Health Services, Inc. | HH CM-Tompkins | Health Home Care Management |
| Lakeview Health Services, Inc. | Horizon Apartments | Apartment/Treatment |

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|---|---|---|
| Lakeview Health Services, Inc. | Lakeview Health Services - HH Non-Med CM - Tompkins | Health Home Non-Medicaid Care Management |
| Lakeview Health Services, Inc. | Lakeview Health Services SMH CMA (AOT) | Specialty Mental Health Care Management |
| Lakeview Health Services, Inc. | Lakeview MH/MRT Supp Housing Tompkins Cty - Comm Svcs | Supportive Housing |
| Lakeview Health Services, Inc. | Lakeview Special Needs SRO | SRO Community Residence |
| Lakeview Health Services, Inc. | Lakeview Supp Housing/RCE SH Tompkins Cty - Comm Svcs | Supportive Housing |
| Lakeview Health Services, Inc. | Lakeview-Supported Housing - Tompkins County - Comm. Svcs | Supportive Housing |
| Lakeview Health Services, Inc. | Markham Residence | Congregate/Treatment |
| Lakeview Health Services, Inc. | West End Heights | Apartment/Treatment |
| Lakeview Health Services, Inc. | West End Heights ESSHI | Supportive Single Room Occupancy (SP-SRO) |
| Mental Health Association in Tompkins County | Advocacy/Support Services | Advocacy/Support Services |
| Mental Health Association in Tompkins County | Family Peer Support Services | Family Peer Support Services - Children & Family |
| Mental Health Association in Tompkins County | Psychosocial Peer Support | Psychosocial Club |
| Mental Health Association in Tompkins County | Respite Services | Respite Services |
| REACH Medical | Behavioral Health Outreach | Prevention, Recovery, and Support Services and Coordination/Integration with Other Services |
| St. John's Community Services - New York | SJCS Outreach | Outreach |
| Suicide Prevention & Crisis Services of Tompk | Crisis Intervention | Crisis Intervention |
| Suicide Prevention & Crisis Services of Tompk | Suicide Prev. Tompkins Co. - Info & Ref. | Advocacy/Support Services |
| Suicide Prevention & Crisis Services of Tompk | Suicide Prev. Tompkins PC&E | Outreach |
| Tompkins County Mental Health Services | Coordinated Children's Services | Coordinated Children's Service Initiative |
| Tompkins County Mental Health Services | Dual Recovery/Co-Occuring Disorder Program | MICA Network |
| Tompkins County Mental Health Services | Family Peer Support Services (SOC Expansion Grant) | Family Peer Support Services - Children & Family |
| Tompkins County Mental Health Services | Outreach | Outreach |
| Tompkins County Mental Health Services | TCHMC | Monitoring and Evaluation, CSS |

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