Tompkins County COMMUNITY MENTAL HEALTH SERVICES BOARD

Tompkins County Whole Health 201 East Green Street Ithaca, New York 14850-5635

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Tompkins County Community Mental Health Services Board 201 East Green Street, Ithaca NY 14850 Monday, May 1, 2023, 5:30 p.m. Meeting Minutes

Approved 7/10/2023

https://www.youtube.com/channel/UCkpJNVbpLLbEbhoDbTIEgSQ

Present: Ellice Switzer; Jan Lynch; Mary Hutchens; Sheila McEnery; Jessica Conner, Psyd; and Larry Roberts (Zoom)

Excused Dr. Auguste Duplan; Stu Bergman; Travis Winter; and Sally McConnell-Ginet

Unexcused: Sullymar Pena Vazquez, Dorothy Lovelace

Legislature: Randy Brown

Guests: Tom Lipa

<u>Staff:</u> Frank Kruppa, Commissioner; Harmony Ayers-Friedlander, DCS; and Karan Palazzo, LGU Administrative Assistant

The meeting was called to order at 5:30 pm by Ms. Switzer. Introductions were made. A quorum was not met, and the April 2023 minutes could not be approved. Ms. Switzer stated that she will be away for June's meeting and Ms. Lynch will chair it.

<u>Privilege of the Floor & Announcements:</u> Mr. Kruppa announced an event celebrating Mental Health Awareness Month on Saturday, May 13th from 10 – 3 pm in Stewart Park.

<u>Chair's Report:</u> Ms. Switzer reported having conversations with Harmony to begin developing the new 3-year Local Services Plan (LSP) which is due June 30th. The subcommittee chairs will conduct Ad Hoc meetings in conjunction with the CSB.

<u>Commissioner's Report:</u> Mr. Kruppa reported that Tammy Baker, a former community outreach worker on the Commons has been hired for the Housing Coordinator position.

Opioid Settlement Funds: Mr. Kruppa reported that the Opioid Taskforce meets tomorrow. The Needs Assessment Survey will be released to the public this week. The draft RPF is ready to be reviewed by the Opioid Taskforce and once finalized it will move to the County for processing but can take as long as three weeks to post. Interested parties will be given 30 days to respond to the RFP and will take at least two months to review all proposals.

<u>Genoa Pharmacy (MH Clinic):</u> Mr. Kruppa reported that the pharmacy construction is proceeding, and Genoa is interviewing staff for the opening, which is uncertain at this time.

Mr. Kruppa responded to Mr. Roberts's concern about a housing/homelessness presentation. He said that the Director of Housing Initiatives, Liddy Barger, will make a presentation at the next CSB meeting to give updates.

2022 Annual Agency Contract Review cont'd: Ms. Ayers-Friedlander referred to the document included in the packet and gave a brief overview of the yearly contracted agencies processed through the Local Governing Unit (LGU).

Total Funding

State: OMH \$3,714,728

- OASAS \$2,038,271 (Includes Jail Funding for Substance Use Treatment Services)
- County Funding: \$ 143,539
- Over Target Requests (ARPA Funding)
 - o REACH Medical Case Manager for Ithaca Wellness and Recovery Court
 - REACH Medical Recoupment for Costs Associated with COVID
 - Mental Health Department Resource Coordinator
 - Alcohol and Drug Council Start-up and Operational Costs of Open Access, Detox/Stabilization Center
 - o Mental Health Department Training

Contract Reporting Requirements

- Submit a quarterly report that includes:
 - o Local Services Planning Goal Area
 - Impact Statement
 - Results Based Accountability Outcome Measures along with financial information (program revenue, costs, and cost/unit of service)
 - Achievements and Barriers Experienced
 - o Fourth quarter report is the annual report
- Attend the annual meeting to review outcomes and any changes to the contract for the following year

Three agencies had an increased Intensity of Needs

SPOA Children Services – Increased abuse

St. John's Community Services – Increased overdoses from unhoused populations with comorbidities of mental illness and substance use

CARS – Increased severity of needs in residential settings who have co-occurring mental health and substance use

All agencies experienced workforce/staffing challenges.

She reminded everyone that this is the first year of this new reporting process and reviewed the remaining 2022 contracted agencies which include Alcohol and Drug Council (ADC), Cayuga Addiction and Recovery Services (CARS), Lakeview Health Services (LHS), Mental Health Association (MHA), Suicide Prevention and Crisis Services (SPCS), and RACKER.

Alcohol and Drug Council (ADC)

Primary Prevention and Educational Programs

<u>Achievements:</u> Continued to provide Narcan training in the community and presentations to two Victim Impact Panels and environmental strategies and campaigns.

Barriers: Not much interest in receiving Narcan training as previously seen during COVID.

Early intervention/Prevention Education/Outreach

<u>Achievements:</u> Continued work at the Cayuga Medical BSU, Increase in Teen Intervene services, continued discussion with Ithaca High School about providing Teen Intervene there.

<u>Barriers:</u> Youth engagement in Teen Intervene, youth may start the program change their mind, and stop and then want to start again making it challenging to provide services.

Open Access, Detox, and Stabilization

<u>Achievements:</u> Continuing to remodel the Triphammer Road facility. It is progressing on budget with some last-minute delays, working on furnishings, licensure, and programming. A ribbon cutting for the new building is tentatively scheduled for May 10th.

<u>Barriers:</u> Significant delays in Q4 especially with an emergency generator transfer switch that was on back order and staffing concerns due to the number of nursing positions that must be filled to become operational.

Cayuga Addiction and Recovery Services (CARS)

Day Treatment Services – Great OASAS audit; received CARF accreditation; restructured their residential leadership and improved clinical services. People are presenting with more complex co-occurring needs

<u>Achievements:</u> Restructured residential leadership and proactively partnered with patients focused on self-driven goals in clinical services. Received complimentary remarks in the OASAS audit and received CARF Accreditation. We are looking to expand LGBTQ services in the future.

<u>Barriers:</u> Faced three primary barriers: COVID, Funding, and Workforce. We are slowly recovering from a workforce shortage in the fall. Funding is not sufficient to sustain operations and offers competitive wages. Patients are presenting with more complex and severe co-occurring mental health and substance use treatment needs.

Medically Supervised Outpatient Program – Saw more people but provided fewer services and projections were not met due to workforce/staffing challenges and the government payment structure

<u>Achievements:</u> OUD program continued to grow in 2022; expanded services to Elmira and Five Points Correctional Facilities; successfully implemented telehealth services; continued to embrace innovative treatment models including harm reduction by offering Narcan and fentanyl strips; secured funding for a mobile medication unit.

<u>Barriers:</u> The two greatest barriers are workforce and funding; no long-term sustainable plan; workforce shortage; not enough credentialed providers, nurses, and direct service professionals.

Lakeview Health Services (LHS)

Non-Medicaid Care Management – Goal to expand access to Care Management and high-intensity care management services for people without Medicaid.

Achievements: Hired additional staff to meet the needs of Health Home Plus Care Management Services.

Barriers: Receive few Non-Medicaid Care Management referrals

Healthcare Management Service Dollars – Create a social determinant scale to help with housing, education, and other needs that people have that impact the quality of their life and their stabilization.

<u>Achievements:</u> Utilized service dollars to address social determinants of health to ensure individuals are able to stay stably housed and have their immediate needs met.

<u>Barriers:</u> No assessment tool to place a numerical value on social determinants of health. Evaluate ways to best demonstrate how the use of service dollars improves one's social determinants of health.

Community Residence (SRO) – Had to reduce the number of people served due to workforce challenges and identified a unique need for people aging in place.

Achievements: OMH is rolling out "tenancy services" which will allow NYS to bill Medicaid for the services offered at the CR-SRO and Supportive Housing which will generate an additional \$600/bed which has been underfunded.

<u>Barriers:</u> Staffing remained significant throughout 2022 resulting in a hold on new admissions; the aging-in-place nature of our population leaves staff managing medical concerns along with the chronic mental health needs of residents.

Supportive Housing - Served more people than expected

<u>Achievements</u>: Fully staffed ESSHI program at West End Heights and new OMH tenancy rates that will improve program funding.

Barriers: Delayed opening due to open Supportive Housing Specialist position.

Mental Health (MHA)

Psychosocial Services (Outreach Center) - Served more people than expected

<u>Achievements:</u> Attendance grew from 37 individuals in Q3 to 128 in Q4; numerous service providers have visited including Challenge, Women's Opportunity Center, St. John's Shelter, OAR, TCMHS Mobile Crisis Team, Street Outreach Program, and many others.

<u>Barriers:</u> Funding and hiring professional peer support staff. The work is challenging and often involves responding to crisis situations.

Peer Support and Adult Advocacy Services – Served 646 people directly and indirectly.

<u>Achievements:</u> Certified 51 community members in Mental Health First Aide; presented to Ithaca High School Classes and trained additional staff in Mental Health First Aide; the Warm Line grew in use and added two evidence-based programs to our services; CarePath Coaching and Mental Health Community Partnership designed to support youth and families.

Barriers: Staffing

County-Based Peer Support (Justice Support Services)

<u>Achievements:</u> Changed name to Justice Support Services; added three collaborative components to the program; work with Ithaca Wellness and Recovery Court; provide weekly programming at Probation Day Reporting and provide weekly onsite peer support at OAR, resulting in this underserved population coming in for support.

Barriers: No funding for additional staff as the program grows

Family/Peer Support Services -

Achievements: The Family Support Services Coordinator completed her Family Peer Advocate Credentialing Training and has become a Care Path Coach that offers support to the person in recovery and their family members or other chosen supporters for up to 90 days. FSS is developing new programming for 2023 that will include a weekly parent support group and youth drop-in programming. The Family Support Coordinator has also joined Single Point of Access and the Collaborative Solutions Network.

Barriers: Engaging parents in skill building who often want providers to "fix" or care for their children rather than be active in the process.

Respite Services

Achievements: Provided skill-building and peer counseling services

Barriers: Challenges engaging parents as part of the family support program. Parents want/need respite services without requirements so that they may attend to other important activities, however, their involvement is required.

Suicide Prevention and Crisis Services (SPCS)

Crisis Line - 988 and 24/7 Warmline

Achievements: New call center software purchased; provided intensive training to staff; developed a 130-page Crisis Line Guidebook to support staff in decision-making; improved data metrics, and recruitment of new staff and volunteers.

Barriers: Ongoing need for staff

St. John's Community Services (SJCS)

Measures for Unhoused - 1,239 unduplicated people were served at the Friendship Center and served over 6,000 meals Achievements: Increased the number of people served through the Friendship Center; signed an MOU with the Mental Health Association for weekly peer support.

Barriers: The number of unhoused continues to grow with increasing overdoses while having a lower capacity due to ongoing COVID regulations.

RACKER

Care Management Measures - Provided care management services to 144 children with and without Medicaid.

Achievements: Connected many families to local charities and agencies that provided help for the holidays, and many food baskets, gift cards, and presents were delivered to families.

Barriers: Challenges in linking to services providers for families moving out of New York State.

Day Treatment Measures – Served 59 of the projected 75 children due to workforce and teaching staff challenges Achievements: Admitted eight new students to Day Treatment with five discharged to a lower level of care in Q4. Barriers: Significant staff turnover for BOCES teachers, paraprofessionals, and therapists; successfully hired new therapists, but the change in staffing is not ideal for students; administration is stretched due to a management vacancy.

C-SPOA Measures – Served 174 children and 216 connections were made

Achievements: Application for an OMH RFP for the Home-Based Crisis Intervention Program with the support of a grant writer paid for by a System of Care grant received last year; serving on a state-wide task force focused on improving the process of connecting families with higher levels of community support through SPOA; Coordinating with the Suicide Prevention Coalition; trainer for the Applied Suicide Intervention and Supports'; co-facilitate training for Suicide Prevention and Crisis Services volunteers and counselors.

Barriers: Continued a significant increase in the need for higher levels of treatment due to a lack of local services and long waitlists for more intensive community-based services; youth who straddle the OPWDD and OMH systems experience additional barriers to services; stressed and confused families about the admission process and services available to them.

Ms. Ayers-Friedlander said that trends will be seen after a few years of consistent outcome measures of the agencies.

The meeting was moved to an executive session at 7:50 pm to discuss CSB membership and openings.

The meeting adjourned @ 7:00 pm