

Broome County
Mental Health Department

ANNUAL REPORT – 2005

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Commissioner
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**NEW YORK STATE → OMH
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→ Legislature**

MENTAL HEALTH COMMISSIONER

MENTAL HEALTH DEPUTY COMMISSIONER

BROOME CTY Community Services Board
 ┌ Mental Health Subcommittee
 └ A/SA Subcommittee
 └ MRDD Subcommittee

MENTAL HEALTH DEPARTMENT - COUNTY OPERATIONS GRANTS

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- Child & Adolescent Clinic
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- MICA ICM
- Forensic Outreach
- ERA/VIP
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	<ul style="list-style-type: none"> • CATHOLIC CHARITIES OF BROOME COUNTY <ul style="list-style-type: none"> – Adult Mental Health Services – Central Referral – Residential – Aging Out Youth ICM – Supportive Case Management MICA Homeless – CCSI <ul style="list-style-type: none"> – Peer Education Team-Parent Partners – Choices Cont. Day Treatment – Children & Youth ICM – Crisis Sitters C & Y Crisis Support – Single Entry – Core Services – CSS/Consumer Case Mgmt, Four Seasons Club, Consumer Advocacy, Drop-In Center, Transportation, Portfolio’s Café, monitoring MHA Project Uplift & Compeer – Adult Case Mgmt / Consumer Case Mgmt- Flex Team, ICM, SCM, AOT ICM, CSS Case Mgmt • CHILDREN’S HOME OF WYOMING CONFERENCE <ul style="list-style-type: none"> – Family Support Services 	

Broome County Mental Health Department

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Mental Health Department 2005 Accomplishments

The following is a list of major projects and accomplishments of the Mental Health Department for 2005:

- The Department's Adult Outpatient Mental Health Clinic is the largest clinic of its kind in Broome County. In 2005 the Adult Clinic treated an average of eleven hundred mentally ill individuals per month. Of these, 453 patients were seriously and persistently mentally ill individuals with a history of psychiatric hospitalizations or who were at risk of such hospitalizations.
- The Department's Children and Adolescent Outpatient Mental Health Clinic treated an average of 257 children and their families monthly. Of these, 175 were seriously emotionally disturbed children with a history of psychiatric hospitalizations or were at risk of such hospitalizations.
- Both Clinics ended 2005 under budget in county support.
- The Department's Families First Program continues to provide successful services to families in Broome County. Families First serves children who are referred by the Department of Social Services who are at risk of out-of-home placements such as foster care, detention, group homes and residential care. In 2005 Families First prevented these types of placements for 119 children, saving the County \$2.7 million. In addition, 100% of the children served by the program remained at home 12 months post discharge!
- The Department's KYDS Coalition (a substance abuse and other high risk behavior prevention project) secured Federal funding for each of the next three years. Nine Broome County School Districts are involved in providing state of the art, science based prevention strategies to Broome County youth. Thirty five hundred students have successfully participated in these prevention programs in 2005! Sixty families also participated in an evidence based family intervention program.
- The Department's Road to Recovery Program in conjunction with Binghamton City Drug Court had nine clients successfully complete intensive residential treatment in 2005.
- The Department, in collaboration with the Probation Department, was awarded a grant from the NYS Office of Mental Health to provide training to the Criminal Justice System and to improve coordination between mental health providers and the Criminal Justice System.
- In 2005 the Department, in conjunction with all local mental health and developmental disability providers, completed a significant planning project targeted at improving services to children with developmental disabilities and mental health disorders. The Center for Governmental Research was engaged to facilitate the project. In 2006 system-wide improvements are expected to occur for these children.
- The Department successfully transitioned its Forensic psychiatric treatment services for inmates at the Public Safety Building to Corrections Medical Care, Inc., the new comprehensive medical provider at the facility.

BROOME COUNTY MENTAL HEALTH DEPARTMENT

The Broome County Mental Health Department is responsible for planning, developing, and evaluating mental hygiene services in Broome County. These mental hygiene services include alcoholism and substance abuse services, mental health programs, and services for mentally retarded and developmentally disabled citizens. Beyond its regulatory role as the local governmental unit, the Department of Mental Health is also licensed to operate mental health and chemical dependency programs.

COUNTY OPERATIONS

The Broome County Department of Mental Health directly operates both mental health and chemical dependency programs. These programs include outpatient programs for adults, adolescents, and children. The New York State Office of Mental Health (OMH) licenses the mental health programs. The New York State Office of Alcoholism and Substance Abuse Services (OASAS) licenses the chemical dependency programs.

➤ **Mental Health Services**

In 2005 the Broome County Department of Mental Health operated seven mental health programs. These programs include the Adult Clinic, the Child and Adolescent Clinic, Families First Program, Forensic Services, MICA Intensive Case Management, a Mental Health Vocational Program, and a Dual Recovery Project to coordinate services for individuals with co-occurring mental health and substance abuse disorders.

- **Adult Clinic** – The Adult Clinic remains the largest adult outpatient clinic in the county that is licensed by New York State Office of Mental Health. It is staffed by an interdisciplinary team that provides treatment for a wide range of emotional and mental difficulties to residents of Broome County who are 18 years of age or older. The Clinic provides comprehensive outpatient services including individual therapy, various types of group therapy and medication management. The Clinic has a multidisciplinary staff that is experienced, diverse, and well-trained. The average length of stay in 2005 was 2 years. The average number of clients in a month in 2005 was 1,100. There were 539 individuals admitted to the adult clinic in 2005. There was an increase in referrals from the local jail and state prisons which was accommodated. Group clinical supervision was instituted this year which combines clinical staff from both clinics.
- **Child and Adolescent Clinic** – The Child and Adolescent Clinic remains the only children’s clinic in the county licensed by New York State Office of Mental Health. It provides psychotherapy, evaluation, and consultation to children and their families. Other services include the following: pre-admission screening, assessment and treatment planning, verbal therapy, symptom management, health screening and referral, medication therapy and education, clinical support services, linkage with case management, crisis management, crisis intervention, psychological testing and discharge planning. The Clinic has a multi-disciplinary staff that is experienced, diverse, and well-trained. The average length of stay in 2005 was 1 year. The average number of clients in a month in 2005 was 257. There were 214 individuals admitted to the children’s clinic in 2005. The OMH and FDA Advisory “Warning About Using Antidepressants in Children and Adolescents” was shared with parents. Group clinical supervision was instituted this year which combines clinical staff from both clinics.
- **Families First Program** – Families First is a collaborative effort between the Department of Social Services and the Department of Mental Health. The program provides intensive in-home family

preservation services for families wherein one or more members are experiencing mental health issues, and there is an imminent risk that the child(ren) will be removed from the home. The mission of the program is to provide families with the supports and skills they need to work through the immediate crisis and prevent the children from being placed into higher levels of care including foster care, group home or residential placement. Families First also provides reunification services to assist children who have been in placement, and their families, during the child's transition back into the home upon return from placement. Services include, but are not limited to: Case Management, Family Counseling, Needs Assessments, Strength-Based Goal Planning, Parenting Skills, Anger Management, Crisis Resolution, Family Advocacy and 24-Hour On-Call Support. Families First Program staff also conduct Strength Based Parenting classes and Anger Management classes for parents. The percentage of children successfully maintained in their homes at 12 months post intervention was 100% for families receiving Intensive Intervention services, 95% for families receiving Reunification services and 96% for families receiving Enhanced Support services. In 2005 the Families First program served 98 families, which included 432 individuals. The average length of time families received services through the Families First Program depended on the type of service they received.

- **Forensic Services** – The population served by the Forensic Unit consists of individuals involved with the Criminal Justice or Corrections Systems. These individuals include mentally ill and/or chemically addicted inmates, persons designated by family and civil courts as needing diagnostic evaluations before case disposition, and individuals who could benefit from treatment instead of incarceration. Services provided include: Crisis Intervention, Psychiatric Evaluation, Medication Management, Counseling, Competency Evaluations, Dangerousness Examinations, Substance Abuse Assessments and Treatment, and Discharge Planning. In 2005 the Forensic Unit provided the following programs and services:
 - **Psychiatric Service** at the Broome County Correctional Facility provided a total of 6169 routine mental health visits including screenings, assessments, psychosocial evaluations and individual psychotherapy to inmates. With this, all individuals diagnosed seriously mentally ill received an initial psychiatric evaluation followed by routine medication monitoring. Psychiatric and medication management services totaled an additional 1142 units of service for a sum total of 7311 mental health visits at the jail for the year.
 - The **Medication Grant Program (MGP)** assists 232 mentally ill clients who were discharged from the jail and state prisons and needing medication while they waited for a Medicaid eligibility determination. The average number of clients in the MGP program at a given time is approximately 20 per month and the average length in the program is from 45 days to approximately 3 months.
 - **Group Psycho-educational Counseling** was provided for a total of 9980 units of service to inmates housed on the Therapeutic Pod. There was a rolling enrollment for 8 groups with each group meeting either 2 or 5 times weekly.
 - **Discharge Planning** was provided for all inmates on psychotropic medication. The service provided housing assistance, employment, education, transitional prescribed medications, and mental health treatment referrals. At any given time, this rolling caseload included approximately 62 inmates on psychotropic medication with 1 to 3 of these individuals released from jail weekly.
 - **The Forensic Outreach Program** provided 186 court-ordered mental health evaluations for individuals in the community. Referrals came from Public Defenders, Family Court, County Probation and NYS Office of Parole.

NB: Drug/ Alcohol services are not included in the above totals.

- **MICA Intensive Case Management** – The MICA Intensive Case Management program provides services for clients with both a mental illness and chemical abuse diagnosis. Program staff works with an average caseload of 23 clients. Services provided include: Needs Assessment, Counseling, Problem Solving, Advocacy, Recovery, Addictions, Representative Payee Accounts and Support Services. Program goals include the following:

- Decrease psychiatric symptoms
 - Increase medication compliance
 - Decrease criminal activity
 - Decrease hospitalization
 - Decrease alcohol and substance abuse
 - Increase housing stability
- **Vocational Services VIP & ERA** – The Vocational Initiatives Program (VIP) and the Employment, Retention and Advancement Program (ERA) are vocational case management programs. The VIP program is designed to assist individuals with serious mental illness and the ERA program is designed to serve Temporary Aid to Needy Families recipients with mental health issues. Both programs focus on helping participants develop the skills and supports needed to successfully obtain employment and long term self-sufficiency. Both programs provide vocational information, training in job seeking and job keeping skills, job search assistance, and on-going support to individuals throughout the job development and placement process. In 2005 the VIP program served 125 individuals and the ERA program served 89 people.
 - **Dual Recovery Project** – The objective of the Dual Recovery Project is to coordinate, improve, and enhance treatment and ancillary services for individuals with co-occurring mental health and substance abuse disorders, especially those with the most serious and persistent mental illness and substance abuse problems. New York State OMH and OASAS jointly sponsor this initiative and are committed to working at a State level to address system barriers. The Dual Recovery Coordinator acts as liaison and advocate for the community at the State level and has organized community mental health and substance abuse agencies as well as DSS, housing and consumer groups into six active workgroups and an oversight advisory group that work together to accomplish the project objectives. There were fifty (50) meetings of these groups in 2005 and following are some of the accomplishments: the Dual Recovery Project developed and sponsored eight trainings offering 20 credit hours of professional training on various topics concerning co-occurring disorders; Broome County applied for and was selected for the OMH Connect Initiative to help to bridge gaps in the criminal justice/mental health/substance abuse system through a series of staff training and systems coordination and the Dual Recovery Project oversees Connect; agencies are continually working together to identify gaps and barriers and develop more efficient, effective ways to serve individuals with co-occurring disorders; both on a program and systems level.

➤ **Chemical Dependency Services Unit**

The Broome County Mental Health Department operates three chemical dependency programs. These programs include Broome County Youth Prevention Partnership is Keeping Youth Drug-free and Safe (KYDS Coalition), the Chemical Dependency Services Unit (CDSU), and the Road to Recovery (RtR) program.

- **Chemical Dependency Services Unit (CDSU)** – Chemical Dependency Services Unit operates a prevention program at the Broome County Public Safety Building and administered at 36-42 Main Street Binghamton, NY 13905.

CDSU provides Chemical Dependency Assessments for individuals referred by the Broome County Department of Social Services (BCDSS). When substance abuse is indicated CDSU will refer the individual to the appropriate level of chemical dependency treatment and monitor the client's progress during treatment. The individual's progress is reported to BCDSS at least once a month until the individual completes chemical dependency treatment or the individual is out of compliance with the treatment recommendation. CDSU provides approximately 60-80 assessments a month and monitors an average of 350 individual cases each month.

CDSU has two drug counselors assigned to the Mental Health Department's Forensics Unit to provide prevention services at the Broome County Public Safety Building. The prevention services are

chemical dependency evaluations, referrals, and individual sessions for the inmates at the Broome County Public Safety Building. The prevention program has an average of 45 inmates participating in the prevention program. The average length of time that an inmate participates in the prevention program is six months.

- **Broome County Youth Prevention Partnership is Keeping Youth Drug-free and Safe (KYDS Coalition)** – The KYDS Coalition is a collaboration of community organizations, agencies, and school districts that has been in existence since August 2000. The KYDS Coalition’s vision is to create opportunities for supportive, healthy, drug-free youth, families and neighborhoods in Broome County. The KYDS Coalition utilizes the Communities That Care Model to guide prevention strategies in the community and to create systemic change by increasing community involvement to reduce substance use among youth in Broome County. The KYDS Coalition is funded by a federal grant, Drug Free Communities Support Program, through the Substance Abuse and Mental Health Services Administration. The KYDS Coalition includes the following Broome-Tioga BOCES School Districts: Union-Endicott, Maine-Endwell, Johnson City, Chenango Forks, Susquehanna Valley, Vestal, Whitney Point, Newark Valley, two alternative schools at Broome-Tioga BOCES, and Children’s Home of Wyoming Conference. A number of these schools are implementing science-based prevention programs Life Skills Training, Reconnecting Youth, All Stars, Families And Schools Together on behalf of the KYDS Coalition.
- **Road to Recovery (RTR)** – The Road to Recovery program is an alternative to incarceration for first-time or repeat non-violent felony offenders who are in need of intensive residential chemical dependency treatment. The program involves 6 to 12 months of intensive residential treatment followed by community residence concurrent with outpatient treatment and permanent safe housing. District Attorneys and the RTR Case Manager are involved in all phases of the criminal justice/treatment continuum. The District Attorney offers a plea agreement, which involves an opportunity for the offender to have their felony charge either dismissed or reduced to a misdemeanor, if they successfully complete the program. The Case Manager assists clients throughout the course of their treatment, coordinating linkages and resolving issues among criminal justice, treatment, DSS, housing, employment, and other service systems. Up to 25 clients per year are served with a length of program ranging from a minimum of 12 to 15 months depending on felony status and individual progress. The ultimate goal for the client is to be clean and sober, employed and living independently as a viable member of the community with no further criminal activity.

BROOME COUNTY MENTAL HEALTH DEPARTMENT 2005 CONTRACT AGENCIES

All contract agencies are private, not-for-profit agencies. There are eleven agencies that contract with Broome County through the Mental Health Department for services. These include: The Addiction Center of Broome County (ACBC), the Broome-Tioga Association For Retarded Citizens (ARC), Catholic Charities of Broome County (CC), Fairview Recovery Services (FRS), Family & Children’s Society (FCS), Children’s Home of Wyoming Conference (CHOWC), Lourdes Hospital (Lourdes), Mental Health Association of the Southern Tier (MHA), United Health Services (UHS), Vocational Rehabilitation Services (VRS) and Community Options (CO).

The Addiction Center of Broome County, Inc.

The Addiction Center of Broome County has served the residents of Broome County for more than 40 years. The organization is a not-for-profit agency licensed by OASAS to provide outpatient alcoholism

services. Originally, the organization operated part-time with volunteer staff. Consistent growth has culminated in the agency operating a state-of-the-art clinic that employs many highly trained professionals. The agency operates an Outpatient Alcoholism Clinic that provides assessment; individual, group, and family counseling; intensive outpatient treatment; and MICA treatment.

- **Outpatient Clinic** – The Addiction Center of Broome County Clinic is dedicated to providing state-of-the-art outpatient treatment to individuals, their families, and significant others who are suffering from chemical dependency. We will provide treatment that is competent, ethical, and effective at the least possible cost. We will do this in cooperation with other treatment providers and with local, state and federal government officials. Other services may be developed as a result of the cooperative planning process. Our services will be offered to all who need them without regard to age, sex, HIV status, religion, creed, sexual orientation, or race. Our clients come to the agency suffering from an illness and its devastating effects. They will be treated with utmost care, dignity and respect.
- **Outpatient Rehabilitation Services** – ACBC’s Outpatient Rehabilitation Services are appropriate for individuals who meet outpatient criteria as well as the admission criteria for the program. With an emphasis on building social supports as well as daily living skills, the diversity of treatment groups and the varied length of stay available for individuals in the program, ACBC’s Outpatient Rehabilitation Services fills a needed gap in treatment services for individuals with substance abuse problems and those dually recovering from substance abuse and psychiatric illness. Treatment follows the stages of change approach, with an emphasis in engaging clients in the treatment process to then provide needed supports and skills to enable clients to be successful in their recovery.

The Broome-Tioga Association for Retarded Citizens

The Broome-Tioga ARC is a private, non-profit organization founded by parents and friends of individuals with mental retardation and other developmental disabilities in Broome and Tioga Counties. Chartered by the NYS Association for Retarded Citizens in 1952, the original purpose of the ARC was to enhance the quality of life of the mentally retarded, regardless of race, color, creed, or nationality. The Broome-Tioga ARC’s primary mission is to provide leadership, advocacy, and opportunities, which enable persons with mental retardation and developmental disabilities and their families to enhance the quality of their lives. The agency also strives to educate the general public in order to develop a better understanding and acceptance of persons with mental disabilities, and increase opportunities for full community assimilation characterized by respect, dignity, and safety. Two ARC programs are under contract with Broome County through the Mental Health Department: Sheltered Workshop and Summer Camp.

- **Country Valley Industries** – Country Valley Industries (CVI), an in-house employment center serves as the basis for vocational training and long-term sheltered employment for those individuals who are not yet ready for competitive employment. CVI provides a variety of training and jobs through subcontracts with business and industry. The Rehabilitation Department provides necessary support services to individuals in order to allow them to develop vocations and other skills necessary for growth and increased independence.
- **Summer Camp** – The ARC Children’s Summer Camp Program is held each summer at one of the area’s schools. The camp serves children and young adults with special needs between the ages of 5 and 21. The Camp operates for six weeks during the summer aiming to broaden the life experiences of children with disabilities by exposing them to a variety of activities. Summer Camp activities include physical education, swimming, arts and crafts, games, and field trips.

Catholic Charities of Broome County

Established in 1937 as an area office of Catholic Charities of the Roman Catholic Diocese of Syracuse, New York Inc., Catholic Charities provides a wide range of human services to persons of all ages residing in Broome County. Its mission is to provide direct services, advocacy, and to convene others in response to social justice issues. Services include social services and mental health programs. Mental health programs include outpatient and residential services for children and adults.

Catholic Charities is a not-for-profit agency that directly operates numerous mental health programs through contracts with the Broome County Mental Health Department. Catholic Charities also operates Mental Health residential programs through direct contract with OMH. These residential programs include Community Residences and MICA; Certified Apartments; Supported Housing. OMH Core Services are included in this report because they are under contract with Broome County as of January 1, 2000.

- **Coordinated Children's Services Initiative** – The purpose of the Coordinated Children's Services Initiative (CCSI) is to ensure that families are supported in staying together. State and local interagency partnerships are fostered to improve the quality of decision making concerning services for children with emotional and behavioral disturbances. These interagency partnerships help to surmount problems associated with the traditionally fragmented, categorical and inflexible children's service system. The program emphasizes three core principles: cooperative interagency planning and integrated service delivery, individualized care approach, and strength-based approach. Through implementation of these core principles, residential placements were reduced significantly, and a parent partner program was established.
 - **Children's Single Point of Accountability** – The Broome County Single Point of Accountability (SPOA) was developed as a county-wide process utilizing a team model for the purpose of managing referrals to specified services in an efficient manner for High Risk/High Need Children and Adolescents with diagnosed emotional disorders. It is designed to improve access to service while monitoring and coordinating utilization of these services through a single point. SPOA does not provide clinical or other mental health services beyond evaluation for appropriate level of service determination. SPOA gives equal consideration for all children and providers of children services within Broome County.
 - **Parent Partners** – Parent Partners are parents whose children have been involved with various social service agencies that serve children. Parent Partners work as part of the Coordinated Children's Services Initiative (CCSI). Drawing from their own personal experiences they are able to provide support and advocacy to parents that are just beginning the CCSI process.
- **Flex Team for Adults & Children** – The Flex Team for Adults provides clinical and case management services to seriously and persistently mentally ill adults using the Assertive Community Treatment model. The program employs a multi-disciplinary team approach. Team members include a psychiatrist, social workers, registered nurses, case managers and a nurse practitioner. Services include psychiatric assessment and medication treatment, medication monitoring and support, assistance with securing entitlements, coordination of health care needs, crisis intervention, supportive counseling, linkage to self help and other support services, linkage to vocational and educational opportunities, and outreach services.

The Children's Flex Team provides services to children with serious emotional disturbances and their families. The program emphasizes an individualized, strength-based approach to treatment. A primary goal of the program is to enable children to live at home and in their communities. The target population is children at risk of being placed in a hospital or institution because of an emotional disability. Services include individualized care coordination, intensive in-home care, respite care, skill building, family support, and crisis response.

- **Children & Youth Home Based Crisis Intervention Project** – This project will enhance services to runaway/homeless children and youth with mental health/chemical dependency needs through a full-time Home Based Crisis Intervention Worker who will provide or arrange for intensive in-home services for family reunification, out of home respite care, housing assistance and services to support sobriety. Relapse prevention services will be a part of the recovery process for youth with co-occurring psychiatric and addictive disorders. Youth and families involved with the program will be educated regarding this issue and encouraged to develop peer support systems and participate in self-help groups. The overall goal of the program is to provide short-term intensive in-home crisis intervention services to a family in crisis due to the imminent risk of psychiatric hospitalization or youth homelessness. CCSI will be used as the service planning method. This may include use of flexible funds, linkage to a Parent Partner, use of respite care and Interim Family Homes, as well as development of natural support networks.
- **MICA Homeless Supportive Case Management** – This project is designed to enhance the continuum of Case Management Services by providing three (3) Supportive Case Managers (SCMs) to serve a total of sixty (60) individuals. The target population is homeless/mentally ill chemical abusers. SCMs are placed at three agencies: Broome County MICA ICM, Project Uplift of the MHA and Catholic Charities. Referrals are assigned through the Single Entry Committee for Case Management. A minimum of two face-to-face visits are provided monthly. Services will also include coordination of services and treatment planning, representative payee services, recreation services and peer support. Anticipated outcomes include a decrease in inpatient hospitalizations, housing stability, maintenance of sobriety, medication compliance, and placement in vocational training or employment.
- **Four Seasons Club** – The Four Seasons Club is a mental health program of psychiatric rehabilitation for adults with severe and persistent mental illness. The purpose of the program is to prevent re-hospitalizations by reintegrating adults with mental illness back into their community. The clubhouse operates work units in which members volunteer their time to help operate the club. Work units include snack bar, kitchen, clerical, thrift store, horticulture, education, and employment. Outreach services are a component of the Four Seasons Psychosocial Club whereby members participate in evening and weekend social events. Outreach also includes contact telephone calls and visits by members to other members who may be sick or who have lost their connection to the club.
- **Children & Youth/Adult Crisis Sitters** – The Crisis Sitters Program provides staff support in a respite apartment to individuals in a situational crisis. These clients are typically at risk for hospitalization without intervention. Crisis sitters also provide supervision in other settings based on individual need. Interventions may range from several hours to five days.
- **Single Entry for Case Management Services** – The Single Entry for Case Management Services Program is designed to connect individuals with a serious and persistent mental illness to the most appropriate case management services available in Broome County. The program affords a uniform way to match consumer needs with community resources. Also, the program streamlines the process of assigning case management, and reduces duplication of services. Interim case managers are responsible for interviewing clients, assisting new referrals, and meeting the immediate needs of clients. After the initial interview, the interim case managers report to a committee that completes the disposition process. Temporary supportive services are provided for clients denied traditional case management services.
- **Re-Entry Services** – This service coordinates aftercare services to inpatient hospitalized SED children and youth. In addition, bridging, linkage and advocacy services are provided to assure continuity of care after the child/youth's discharge. The program improves treatment outcomes for high need children re-entering Broome County from out-of-county hospitals by intervening in the hospital service planning and discharge process.
- **Intensive Case Management for Adults, Children and Youth** – The Intensive Case Management for Adults Program provides support, advocacy, referral, linkage and crisis services to seriously mentally ill adults. This service is targeted to individuals most at risk for re-hospitalization, or with a

history of serious problems with community living. A consumer assistant is employed to provide activities of daily living skill building, and assistance with social outings. Representative payee services are also provided to individuals who have a history of problems managing SSI or SSD funds.

The Intensive Case Management for Children and Youth Program works with seriously, emotionally disturbed children and their families to ensure maximum success in the community. A primary goal of the program is to avert residential placements. Services include identifying unmet needs, providing support and education to families, advocating for services and entitlements, linking services and supports, improving parenting skills, and assisting with problem solving.

These Case Management Programs as well as the Supported Housing Program were significantly expanded in the fall of 2000, through OMH New Initiatives funding.

- **Intensive Case Management for Aging Out Youth** – The Intensive Case Management for Aging Out Youth Program serves older adolescents who have a serious emotional disorder. These clients typically need assistance with accessing mental health care, educational programs, and recreational services best suited to meet their needs. These clients also have unique needs as they transition from adolescence to adulthood, including training for vocational readiness and independent living skills. The program assists with these transitions, and reduces the negative effects experienced when youths become “lost” between systems geared to serving adults or children. Client diagnoses include Adjustment Disorder, Post-Traumatic Stress Disorder, Oppositional Defiant Disorder, and Depression.
- **Core Services** – On January 1, 2000 the Broome County Mental Health Department assumed responsibility for administering the Core Services operated by Catholic Charities of Broome County. All of the Core Services continue to be contracted for with Catholic Charities. Core Services consist of a series of community support services that include the following: Advocacy, Case Management, Drop In Center, Four Seasons Club, Portfolios Restaurant, and Transportation.
- **Continuing Day Treatment** – Continuing Day Treatment (CDT) is a supportive, group oriented treatment program designed to assist adults diagnosed with serious and persistent mental illness. The program emphasizes psychiatric rehabilitation. With the closure of the Mental Health Department’s CDT in 1999, the Mental Health Department has committed to supporting this key program.
- **Peer Counseling** – The Peer Counselor program provides peer support and self-help services. The recipients are sought through individuals utilizing the MICA/ICM Peer meeting, from the Beacon Drop-In Center or through referrals.

Fairview Recovery Services

Fairview Recovery Services is an OASAS licensed provider of residential programs for chemically dependent persons. The agency operates programs to support individuals as they recover from alcoholism and other chemical dependencies. Residential programs offer support services for clients enrolled in outpatient substance abuse treatment. Fairview’s chemical dependency programs include the Addiction Crisis Center, Fairview Halfway House, Merrick Halfway House, and the Supportive Living Program. Fairview also operates a HUD Sponsored Supportive Housing and Shelter Plus Care Project through direct contracts with HUD.

- **Addiction Crisis Center** – The Addiction Crisis Center is an 18-bed facility designed to serve the needs of intoxicated individuals. Both males and females are admitted to the program. Clients may refer themselves to the program, or may be referred by other concerned persons. Anyone who is intoxicated, experiencing alcohol related crisis (i.e., withdrawal), or meets other admission criteria specified in the Triage Plan can be admitted. Two discrete units are housed within the Addiction Crisis Center. The first unit is a ten-bed Primary Care Unit that provides non-medical detoxification

services. The second unit is an 8-bed Extended Care Unit for clients who need a safe, sober environment until a referral to the appropriate treatment program can be arranged.

- **MICA Network** – Five beds out of 36 at Fairview’s Halfway Houses and 5-10 beds out of 38 from the Supportive Living program are designated for dually diagnosed clients. One full-time MICA Social Worker is assigned to work with these clients. This service provides case management and coordination of all services to clients of the project, including: crisis intervention, supportive counseling, symptom monitoring and management, medication compliance and referral. Initially, following the project proposal, admissions were limited to BPC patients. To provide greater service to the community for this high-need population, however, the project was expanded to also accept referrals from other agencies. Mid year the Office of Mental Health (OMH) informed Fairview that certain shared staff contracts would be cancelled resulting in the MICA Residential social worker being recalled to BPC in October 2003. The program was discontinued for a period of time. In December 2003, Fairview was informed that the agency would receive funding through the County from OMH to re-instate the position and the program resumed in 2004.
- **Fairview Halfway House** – The Fairview Halfway House is a 24-bed halfway house for men. Residents remain in the program for three to six months. An emphasis is placed on coordination with community based behavioral health providers to support a strong clinical approach to recovery. The program serves indigent men with a primary diagnosis of alcoholism and/or drug dependence. Most clients are homeless at the time of admission. Special populations include mentally ill chemical abusers, criminal justice system clients, and homeless persons.
- **Merrick Halfway House** – The Merrick Halfway House is a 12-bed halfway house for women. Residents remain in the program for three to six months. The program serves indigent women with a primary diagnosis of alcoholism and/or drug dependence. Special populations include women, mentally ill chemical abusers, and homeless clients.
- **Career Choices Unlimited** – The Career Choices Unlimited Program provides vocational and educational counseling and case management for individuals with barriers to employment as a result of their history of chemical dependency. Funded by OASAS, the program expects to receive referrals from various local treatment agencies and to provide services to roughly 75 persons a year. The program expects to transition two thirds of work ready participants from public assistance to competitive employment within 12 months of entering the program.
- **The Addiction Case Management Project (ACM)** – The Addiction Case Management Project is a special Demonstration Project funded by OASAS. The project offers a case management program modeled after the Office of Mental Health’s Intensive Case Management Program. The project targets two subgroups of clients who experience little sustained benefit from traditional treatment programs. By providing a targeted, intensive, problem solving approach the ACM Project should result in more sustained engagement and benefit from outpatient services, and the stability and guidance needed for the clients to become self-sufficient.
- **Shelter Plus Care Project** – The Shelter Plus Care Project is a HUD-subsidized, 25-unit long term residence program for employed or employable men and women, formerly homeless, with a history of substance abuse. Participants meeting income criteria live independently with their families in apartments located throughout the Broome County area. Services include long term rent subsidy, case management and continued association with the recovery community.

Family & Children’s Society

The Family & Children’s Society is a private, non-profit, United Way agency that provides an array of counseling and support services. The mission of the agency is to provide the highest quality services to support and strengthen families and individuals. Counseling services are available for families, children and adults. Specialized mental health programs are provided for victims of sexual abuse and elderly persons. The Family & Children’s Society directly operates several specialized mental health programs.

Broome County Mental Health contracts with the Family & Children's Society for a School Based Mental Health Program and In-Home Mental Health Management Program.

- **School Based Initiative** – In 1998 the agency received Mental Health Reinvestment funding to establish two Family Support Centers in rural school districts, where families might not otherwise receive support services necessary to strengthen families and reduce the crisis faced by children and youths. These Centers have been established at the Whitney Point School District and the Harpursville School District. Services include assessments, counseling, consultation, case management, and linkages to other community agencies.
- **In-Home Mental Health Management Program** – In 2001 the agency received Mental Health Reinvestment funding to establish an in-home mental health program to assist seriously mentally ill individuals in their Personal Care Program. Services include assistance with medication, case management, and family and caregiver assistance on mental health issues. Clients will initially be referred by CASA and will be served by a combination of a Registered Nurse and Mental Health Aides.

Children's Home of Wyoming Conference

The Children's Home of Wyoming Conference (CHOWC) received an HCRA grant in 2001 to provide support and respite services to children and families of children who are seriously emotionally disturbed (SED).

- **Family Support Services Children & Families** – CHOWC's "Parent's Night Out"/"Family-Centered Sibling Playgroup" provides support and respite services to SED children attending CHOWC Day Treatment Program and/or are receiving services from the Coordinated Children's Service Initiative and their families. The children enrolled in these programs require intensive services to allow them to remain in the Community. The overall goal of the Family Support Services Children & Families is to provide advocacy support for families. This advocacy support at Committee on Special Education (CSE) meetings provides parents/parent advocates of SED children with information of the best possible services available for their children as well as information on child and family rights.

Lourdes Hospital

The Lourdes Hospital Behavioral Health Program is an organizational component of Lourdes Hospital. The program provides outpatient mental health services to children and adults. Psychiatrists, social workers, and other mental health professionals offer assessment and treatment services consistent with a private practice model. The Broome County Mental Health Department contracts with Lourdes for the Mental Health Juvenile Justice Program. On January 1, 2000 the Chemical Dependency Services Unit's Student Assistance Program was transferred to Lourdes Hospital. Lourdes also operates the OASAS funded YES! Safe Choices for Kids Program which is a chemical dependency prevention program.

- **Mental Health Juvenile Justice Program** – The Mental Health Juvenile Justice Program was developed to serve youth under 16 years old who have been identified as juvenile delinquent and in need of mental health and/or chemical dependency services. The program provides mental health and substance abuse assessments, short-term interventions, case management, and referral services to the juvenile delinquent population. One of the primary goals of the program is to reduce out of home placements by serving youths and families at the greatest risk of placement. One master's level staff person was added to this project in 2000 through Reinvestment funding.

- **Juvenile Accountability Incentive Block Grant (JAIBG) Program** – Broome County was awarded funding to implement this program in 2002 and contracted with Lourdes Hospital to operate the program. Program goal focuses on holding juveniles and their families accountable for abusing behaviors by building upon family and community strengths to decrease substance abuse and delinquent behaviors. Two program objectives are: (1) to reduce new offenses and court involvement of program participants, and (2) to reduce placements in non-secure and secure detention facilities.
- **Student Assistance Program** – The Student Assistance Program operates in five school districts in Broome County. The program is a Drug-Free Prevention Counseling Program licensed by the New York State Office of Alcoholism and Substance Abuse Services. Counseling and prevention services are provided to students at risk for drug and alcohol abuse. The program has counseling sites in the following schools: Binghamton High School, Union-Endicott High School, Windsor High School, Johnson City High School, and Seton Catholic High School.

Mental Health Association of the Southern Tier

The Mental Health Association (MHA) is a private not-for-profit organization that provides mental health services. Founded in 1927, it is the oldest continuously operating Mental Health Association in New York State. The organization is a United Way agency and an affiliate of the National and New York State Mental Health Associations. The agency's mission is to enhance the lives of Broome County residents by improving the quality of mental health and wellness primarily through referrals, information, advocacy, education, prevention, and other services. The Mental Health Association operates mental health programs under contracts with Broome County.

- **Rural Client Coordinator** – The Rural Client Coordinator provides services to rural, low-income children and their families who lack resources and transportation to access the mental health system. Services are accessed through Children's SPOA. The program is designed to provide a range of services to rural families in order to improve their circumstances. It is available to SED Children and Adolescents who are at risk of or already in out-of-home placement and reside in the following school districts: Windsor, Deposit, Harpursville, Chenango Forks, Chenango Valley, Susquehanna Valley, Whitney Point, and Maine-Endwell.
- **CCSI FOCUS** – CCSI FOCUS is part of a statewide initiative designed to work in a strengths based manner with families whose children are experiencing significant difficulties in the home, school, or community settings. The purpose of CCSI FOCUS is to prevent out of home placements for severely emotionally disturbed children and to assist parents and communities in collaboratively planning to meet the needs of these families. Staffing includes three part-time Parent Partners and a part-time Coordinator.
- **Multicultural Program** – The Multicultural Program addresses the mental health needs of culturally diverse individuals of the community and provides support and information to assist mental health agencies achieve and promote cultural competence. In 2005, the fifth Annual Mental Health Cultural Competence and Linguistic Training Seminar was held at BCC for providers of mental health and foreign language speakers. The program provides professionally trained interpreter services to local mental health agencies in an effort to address and remove language barriers. Currently, there are over 15 different languages spoken by interpreters.
- **Information and Referral** – The Information and Referral service of the MHA helped individuals identify their mental health needs and referred them to appropriate services. The I & R program published The Guide to Mental Health and Related Services which lists private licensed mental health professionals and agencies with additional details including fees, areas of expertise, and accepted insurance coverage. The Guide currently lists approximately 105 agencies and private mental health practitioners.

- **Self-Help Independence Project** – SHIP, awarded the 2003 MHANYS Ken Steele Memorial Award for Program Excellence, offers a continuum of programming and self-help services designed to provide educational and experiential opportunities for consumers who wish to become active participants in their own self-directed recovery. In 2005 Wellness Takes Work, Speakers Bureau, and the Creative Writers Group celebrated their fifth anniversaries and the Creative Writers published *Explorations, Volume V*. The Fundamental Follies Theatre Company presented four free performances of its original musical “Shrink-Rap” and, in collaboration with Compeer, staged a fall fashion show highlighting the importance of looking good and feeling good. A new peer-led workshop, “Dragon Masters”, was created to address stigma through an imaginative and interactive curriculum.
- **Project Uplift** – This is one of the OMH Core Services now under contract through the Mental Health Department. The program provides case management, crisis and drop-in-services to individuals affected by severe mental illness and/or substance abuse. Most of the individuals and families served by Project Uplift are homeless or at risk of homelessness. The program addresses critical needs of recipients including basic needs (food, clothing, and shelter), education and employment, medical, as well as mental and emotional health needs.
- **Compeer Program** – The Compeer Program provides community volunteers as friendship matches for people with a psychiatric diagnosis. It recruits, trains and supports these volunteers so that those recovering from mental illness may find strong support in the community. As an advocacy service, Compeer complements traditional mental health treatment programs. All activities offered by Compeer foster rehabilitation, recovery, and self-help independence.
- **Peer Education Team** – Peer Educators provide informational presentations to peers, family members and service providers on topics ranging from traditional mental health services to peer support and self-help.
- **Peer Advocacy** – Services provided by recipients include information and referral, advocacy, establishing recipient networks and self-help groups, and providing education on consumer rights in the mental health system.
- **The Beacon MICA Drop-In Center** – The Beacon is a weekend drop-in center for individuals with mental illness and substance abuse problems. Individuals can come to The Beacon on weekends when most other providers are closed for peer support, fellowship and self-help meetings. The Beacon is open Friday 5:00-11:00pm, Saturday 11:00am-10:00pm, and Sunday 1:00-10:00pm every weekend.

United Health Services Hospitals

United Health Services, Inc. is a community-based not-for-profit health care system operated for the public benefit. Members and affiliates of the United Health Services Health Care System include United Health Services Hospitals, Ideal Senior Living Center and the Ideal Senior Living Center Housing Corp., Professional Home Care, United Med Management, United Medical Associates, and Pathway Health Management. United Health Services is licensed to provide inpatient and outpatient mental health and chemical dependency services.

- **Mental Health Services** – United Health Services Hospitals operates five mental health programs. These programs include the Inpatient Programs, Outpatient Program, Comprehensive Psychiatric Emergency Program, Mobile Youth Crisis, and Geriatric Outreach Team Program.
 - **Geriatric Outreach Team Program (HOME)** – The Geriatric Outreach Team (HOME) provides outreach services that include education and consultation. These services are offered to encourage appropriate agencies to consider screening and possibly accepting geropsychiatric patients. Program services are provided to skilled nursing facilities and adult care homes. Major educational components of the program include depression in the elderly, behavior management

techniques, and psychotropic medications. Also, significant emphasis is placed on the issue of life termination. These educational topics are integrated into the discharge planning process for geropsychiatric patients admitted to an acute psychiatric unit.

- **Chemical Dependency Services (New Horizons)** – United Health Services operates four chemical dependency programs. These programs include Detoxification Program, Alcohol Rehabilitation Unit, Outpatient Treatment Program, and the Methadone Maintenance Treatment Program.

Vocational Rehabilitation Services

Vocational Rehabilitation Services (VRS), is the training and placement division of Sheltered Workshop for the Disabled (SWS). Incorporated in 1942, SWS is a non-profit agency whose mission is to enable individuals with disabilities to improve their quality of life through productive employment. VRS provides a wide range of services including vocational evaluation, personal and work adjustment training, skilled vocational training, supported employment, and long term sheltered employment. Broome County Mental Health contracts with VRS for Supportive Employment Services.

Community Options, Inc.

Community Options, Inc. provides residential and employment services to people with disabilities in this community. Funding is provided through NYS OMRDD, VESID and DOH. Community Options, Inc. provides a variety of Medicaid Waiver Services along with Supported Employment Services. The organization assists the community by providing education and advocacy services as needed.

2005 County Operations

NYS OFFICE OF MENTAL HEALTH

	<u>Expenses</u>	<u>Revenues</u>	<u>Net Deficit</u>	<u>State</u>	<u>County</u>	<u>Persons Served</u>
<i>Adult Unit (2100-01)</i>	2,090,630	1,859,652	230,978	-	230,978	1,569
<i>Case Worker (0810-01) (104952)</i>	47,831	17,720	30,111	29,273	838	449
<i>Children's Unit (2100-02)</i>	791,962	614,719	177,243	-	177,243	465
<i>ERA (0990-00) (104957)</i>	61,688	61,688	-	-	-	89
<i>Forensic Outreach (0690-00) (104955)</i>	63,947	45,783	18,164	17,987	177	114
<i>Forensic Unit (2100-03)</i>	321,712	182,017	139,695	-	139,695	1,541
<i>LGU - Administration (890-00)</i>	313,001	202,673	110,328	25,764	84,564	N/A
<i>LGU OMH RI (0860-00)</i>	386,830	71,519	315,311	315,311	-	N/A
<i>MICA (5990-01) (104950)</i>	211,364	2,269	209,095	207,761	1,334	99
<i>Transitional Case Management (0810-04)(104954)</i>	47,984	-	47,984	46,631	1,353	232
<i>Voc Ed (0810-02) (104948)</i>	99,144	-	99,144	99,144	-	703
<i>Families First (104956)</i>	427,267	427,267	-	-	-	N/A
<i>Total</i>	<u>4,863,360</u>	<u>3,485,307</u>	<u>1,378,053</u>	<u>741,871</u>	<u>636,182</u>	<u>5,261</u>

NYS OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES

	<u>Expenses</u>	<u>Revenues</u>	<u>Net Deficit</u>	<u>State</u>	<u>County</u>	<u>Persons Served</u>
<i>CDSU - Med Sup Outpat (0505-00) (104959)</i>	271,471	208,326	63,145	63,145	-	374
<i>MICA Coordinator (5990-02) (104951)</i>	83,833	-	83,833	83,833	-	-
<i>LGU- R to R Supplement (0893) (105001)</i>	22,200	-	22,200	22,200	-	N/A
<i>LGU - Administration (0890-00)</i>	117,100	13,034	104,066	26,158	77,908	N/A
<i>Road to Recovery (0810-00) (104949)</i>	65,348	-	65,348	65,348	-	309
<i>Total</i>	<u>559,952</u>	<u>221,360</u>	<u>338,592</u>	<u>260,684</u>	<u>77,908</u>	<u>683</u>

NYS OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES

	<u>Expenses</u>	<u>Revenues</u>	<u>Net Deficit</u>	<u>State</u>	<u>County</u>	<u>Persons Served</u>
<i>LGU - Administration (0890-00)</i>	174,456	119,874	54,582	27,291	27,291	N/A

FEDERAL FUNDING

	<u>Expenses</u>	<u>Revenues</u>	<u>Net Deficit</u>	<u>Federal</u>	<u>County</u>	<u>Persons Served</u>
<i>DFCSP (104958)</i>	116,128	-	116,128	116,128	-	N/A

2005 Contract Agencies

NYS OFFICE OF MENTAL HEALTH

	<u>Expenses</u>	<u>Revenues</u>	<u>Net Deficit</u>	<u>State</u>	<u>County</u>	<u>Agency</u>	<u>Persons Served</u>
<u>Mental Health Assn.</u>							
<i>Bear (1520)</i>	36,321	9,322	26,999	26,999	-	-	263
<i>Rural Bear/CCSI (1760-01)(2990)</i>	104,548	3,380	101,168	101,168	-	-	100
<i>I&R (1760-00)</i>	117,987	24,719	93,268	46,634	-	46,634	1,370
<i>Multicultural (3990)</i>	68,630	15,440	53,190	53,190	-	-	132
<i>SHIP (1760-04)</i>	35,459	299	35,160	35,160	-	-	1,600
<i>Project Uplift (810-01)</i>	153,848	43,277	110,571	91,879	-	18,692	532
<i>Peer Advocacy (2760-00)(2760-01)</i>	32,054	-	32,054	32,054	-	-	1,749
<i>MICA- Homeless (5990-00)</i>	43,499	-	43,499	43,499	-	-	137
<i>Compeer (1760-03)</i>	109,150	976	108,174	105,154	-	3,020	1,290
	701,496	97,413	604,083	535,737	-	68,346	7,173
<u>Family & Children's Society</u>							
<i>School Based Initiative (1520)</i>	330,982	195,404	135,578	118,909	-	16,669	117
<i>In-Home MH Svs (0690)</i>	80,257	-	80,257	67,997	-	12,260	23
	411,239	195,404	215,835	186,906	-	28,929	140
<u>Fairview Recovery Services</u>							
<i>MICA- Homeless (5990-00)</i>	64,465	61	64,404	64,404	-	-	20
	64,465	61	64,404	64,404	-	-	20
<u>Recipient Affairs Office</u>							
<i>Parent Partners (2990)</i>	24,131	1,246	22,885	22,885	-	-	134
<i>Peer Bridgers (1990)</i>	15,808	216	15,592	8,503	-	7,089	70
<i>Peer Advocacy (2760-00)</i>	20,956	1,856	19,100	19,100	-	-	64
<i>Peer Education Team (2760-01)</i>	9,183	842	8,341	8,341	-	-	58
<i>Peer Counselor (5900-00)</i>	11,877	656	11,221	11,221	-	-	58
<i>Peer Run Weekend Center (5990-01)</i>	41,765	3,154	38,611	38,611	-	-	181
	123,720	7,970	115,750	108,661	-	7,089	565
<u>Lourdes Hospital</u>							
<i>Child/SED Case Management (0810-00)</i>	41,764	41,764	-	-	-	-	89
	41,764	41,764	-	-	-	-	89

2005 Contract Agencies

United Health Services

<i>Home Project (4990)</i>	228,812	120,884	107,928	-	-	107,928	206
<i>Clinic Treatment (2100)</i>	696,187	662,432	33,755	-	-	33,755	8,474
	924,999	783,316	141,683	-	-	141,683	8,680

UHS Clinic Treatment Program Expenses/Revenues are based on 2004; final report has not been received from agency

Wyoming Conference Center

<i>Wyoming Conference (1650)</i>	51,500	-	51,500	51,500	-	-	127
	51,500	-	51,500	51,500	-	-	127

Vocational Rehab Services

<i>Supportive Employment</i>	44,896	-	44,896	44,896	-	-	21
	44,896	-	44,896	44,896	-	-	21

VRS Expenses/Revenues are based on 2004; final report has not been received from agency

Community Options

<i>Community Options (4340-00)</i>	23,369	-	23,369	23,369	-	-	16
	23,369	-	23,369	23,369	-	-	16

Catholic Charities

<i>Aging Out (1810-00)</i>	359,930	326,653	33,277	33,277	-	-	133
<i>Case Management 00 (0810-00)</i>	45,718	-	45,718	45,715	-	3	29
<i>Advocacy (1760-01)</i>	48,625	34,333	14,292	14,292	-	-	13
<i>Advocacy (1760-00)</i>	51,387	25,643	25,744	22,378	-	3,366	150
<i>CCSI (2990)</i>	40,218	-	40,218	40,218	-	-	120
<i>Parent Partners (2990-A0)</i>	16,504	-	16,504	16,504	-	-	-
<i>Case Management 01 (0810-01)(810-02)</i>	315,925	261,113	54,812	54,812	-	-	64
<i>Continuing Day Treatment (1310)</i>	388,193	372,253	15,940	(124,484)	-	140,424	79
<i>Crisis Sitters Program (0660)</i>	30,908	28,776	2,132	2,132	-	-	92
<i>Drop In Center (1770-AO)</i>	37,540	-	37,540	37,540	-	-	197
<i>ACT TEAM (800)</i>	42,822	-	42,822	42,821	-	1	83
<i>Outreach (0690)</i>	27,219	18,918	8,301	3,048	-	5,253	178
<i>Psychosocial Club (0770)</i>	498,467	390,570	107,897	66,020	-	41,877	178
<i>Asst Comp Employment(Portfolios)(1380)</i>	196,760	124,558	72,202	40,440	-	31,762	15
<i>Supported Housing (6060-A0)</i>	20,100	-	20,100	20,100	-	-	-
<i>ICM (0610/2810/4810/5810)</i>	153,584	5,312	148,272	148,271	-	1	111
<i>MICA/Homeless (3040)</i>	43,628	14,139	29,489	29,489	-	-	30
<i>MICA Peer Counselors (5990)</i>	8,328	-	8,328	8,328	-	-	37
<i>MICA/Supportive CM (6810-00/7810-00)</i>	796,994	465,249	331,745	331,745	-	-	113
<i>Monitor-Eval. CSS (0870)</i>	47,571	125	47,446	47,446	-	-	-

2005 Contract Agencies

<i>Single Entry (1990-00)(1990-01)</i>	183,101	-	183,101	183,101	-	-	224
<i>ACT TEAM Service Dollars (8810)</i>	6,826	-	6,826	6,826	-	-	21
<i>Transportation I (0670-00)</i>	91,181	-	91,181	91,181	-	-	486
<i>Transportation II (0670-01)</i>	27,663	19,294	8,369	8,369	-	-	1,278
	3,479,192	2,086,936	1,392,256	1,169,569	-	222,687	3,631
<u>Broome Tioga Assn. for Retarded Citizens</u>	4,043	-	4,043	4,043	-	-	91
	4,043	-	4,043	4,043	-	-	91
NYS OMH Totals	5,870,683	3,212,864	2,657,819	2,189,085	-	468,734	20,553

NYS OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES

	<u>Expenses</u>	<u>Revenues</u>	<u>Net Deficit</u>	<u>State</u>	<u>County</u>	<u>Agency</u>	<u>Persons Served</u>
<u>Fairview Recovery Services</u>							
<i>Alcohol Crisis Center (2020-00)</i>	777,612	46,270	731,342	712,474	-	18,868	1,143
<i>Fairview Halfway House (3570-00)</i>	401,657	263,159	138,498	131,550	-	6,948	78
<i>Merrick Halfway House (3570-01)</i>	230,433	131,095	99,338	93,952	-	5,386	38
<i>Vocation Education (4072-00)</i>	96,598	82	96,516	93,889	-	2,627	226
<i>Shelter Care Plus CM (0810-01)</i>	196,553	153,664	42,889	25,000	-	17,889	28
<i>Addictions Case Mgmt (0810-00)</i>	138,977	125	138,852	136,002	-	2,850	59
	1,841,830	594,395	1,247,435	1,192,867	-	54,568	1,572
<u>Addiction Center</u>							
<i>Outpatient Clinic (3520-00)</i>	573,236	504,517	68,719	-	68,719	-	136
<i>Rehabilitation Services (3520-01)</i>	351,915	351,915	-	-	-	-	-
	925,151	856,432	68,719	-	68,719	-	136
<u>Lourdes Hospital</u>							
<i>Student Assistance Program</i>	321,816	125,808	196,008	196,008	-	-	11,496
	321,816	125,808	196,008	196,008	-	-	11,496
NYS OASAS Totals	3,088,797	1,576,635	1,512,162	1,388,875	68,719	54,568	13,204

2005 Contract Agencies

NYS OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES

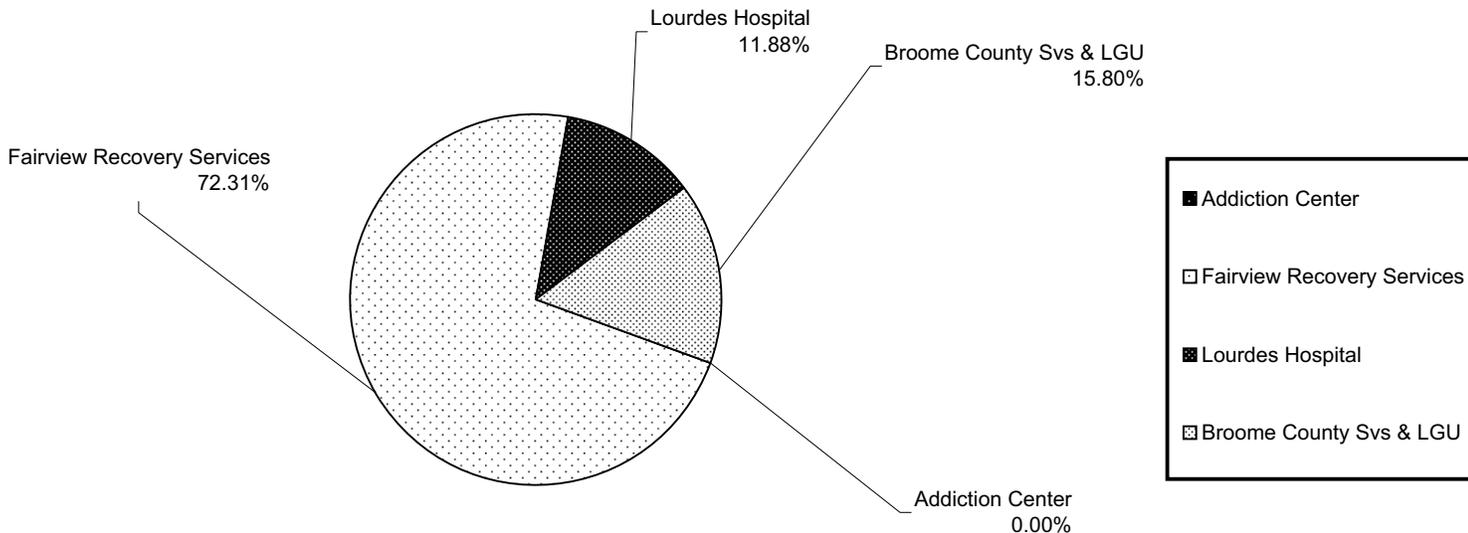
	Expenses	Revenues	Net Deficit	State	County	Agency	Persons Served
<u>Broome Tioga Assn for Retarded Citizens</u>							
<i>Sheltered Workshop (0340-01)</i>	2,795,951	1,178,032	1,617,919	526,738	213,137	878,044	242
<i>Summer Camp (0070-00)</i>	47,251	36,440	10,811	5,405	5,406	-	148
NYS OMRDD Totals	2,843,202	1,214,472	1,628,730	532,143	218,543	878,044	390

NYS OFFICE OF FAMILY & CHILDREN'S SERVICES

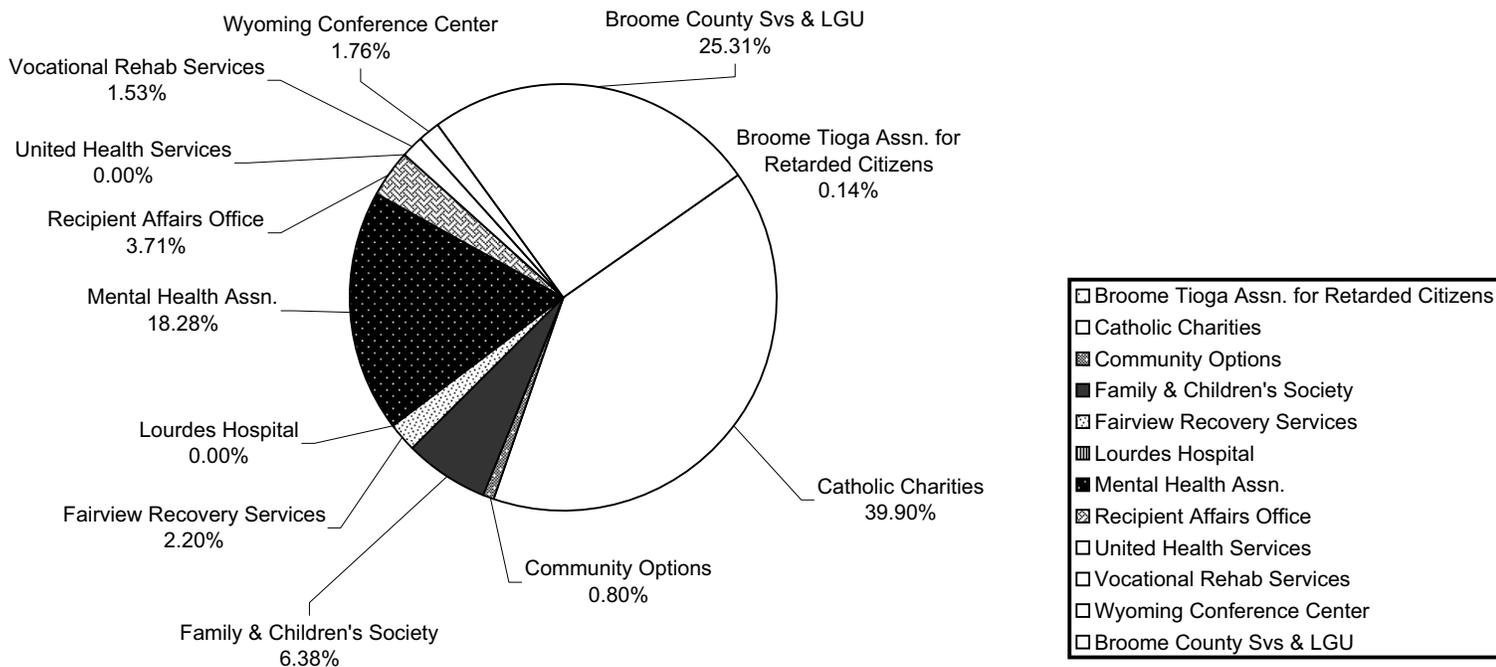
	Expenses	Revenues	Net Deficit	State	County	Agency	Persons Served
<u>Lourdes Hospital</u>							
<i>Juvenile Justice Program (105002)</i>	106,250	-	106,250	106,250	-	-	162
<i>JAIB (104982)</i>	17,328	-	17,328	17,328	-	-	32
NYS OOFCS Totals	123,578	-	123,578	123,578	-	-	194
Grand Totals	11,926,260	6,003,971	5,922,289	4,233,681	287,262	1,401,346	34,341

2005 State Aid Programs

NYS Office of Alcoholism & Substance Abuse Services State Aid Funding, by Service Provider

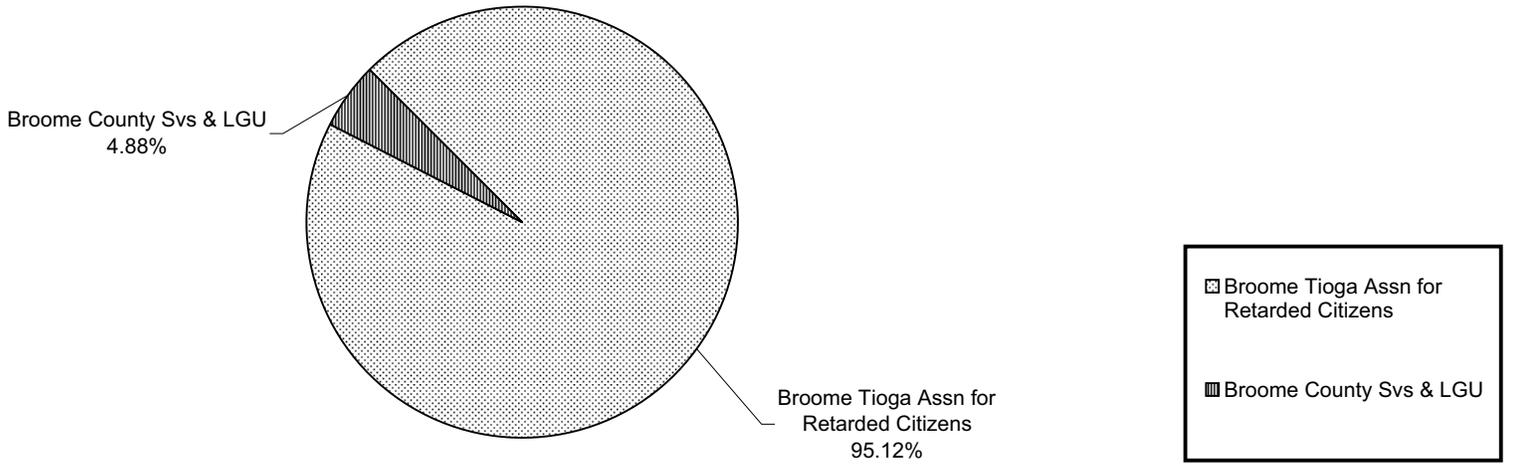


NYS Office of Mental Health State Aid Funding, by Service Provider



2005 State Aid Programs

NYS Office of Mental Retardation & Developmental Disabilities State Aid Funding, by Service Provider



TEN YEAR COMPARISON OF FINANCIAL DATA

	Actual 1996	Actual 1997	Actual 1998	Actual 1999	Actual 2000	Actual 2001	Actual 2002	Actual 2003	Actual 2004	Actual 2005
Expenses	10,715,362	10,398,823	11,493,402	11,697,454	13,900,421	14,655,618	15,551,179	16,251,460	16,929,845	#REF!
Revenues	6,283,990	6,306,746	6,923,467	6,401,563	7,354,616	7,752,273	8,347,820	9,255,327	8,665,141	#REF!
Federal Share	-	-	-	-	-	-	-	-	96,392	#REF!
State Share	3,686,597	3,465,354	3,793,726	4,239,154	4,917,167	6,040,000	5,901,888	5,790,369	5,730,075	#REF!
County Costs	744,775	626,723	776,209	1,056,737	1,628,638	863,345	1,301,471	1,114,854	978,489	#REF!

