

**2009 County Addiction Funding Priorities Form**  
**Broome Co Community Mental Health Svcs (70000)**  
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Consult the LSP Guidelines for additional guidance on completing this exercise.

## County Funding Priorities

### Funding Priority 1

Funding Priority Description:

State funding to increase payment for Adolescent Chemical Dependency Treatment as well as incentives to programs that provide Family Treatment as a component of the services.

Determination of Need:

Determination of Need: In Broome County, there are approximately 17,000 youth aged 12 to 17. Of that number, it is estimated that about 10% of these youth have a problem with chemical dependence (alcohol and non-opiate drugs), or 1700 youth. There is a regional Residential CDY program which provides residential treatment services, but this program is not located in the County. The outpatient need shows that there is a 78% unmet need, **and that has recently increased with the closure of the only Adolescent Treatment service in the County at New Horizons.** In the County, there is a long history of agencies attempting to provide services for this population: ACBC in the 1980's, CDSU in the 1990's and then New Horizons in the late '90s through the beginning of this year. All of the programs have eventually closed and have cited one of the major reasons as being lack of funding and lack of a mechanism to ensure the program can remain viable. These services are time and staff intensive and the current method of funding does not meet the need. We believe there needs to be a base level of State funding or an enhanced Medicaid rate provided to programs that will be willing to offer this service. Also, it is imperative that this service include some type of family involvement, which is also staff and time intensive. Incentives to programs willing to offer Family Treatment would include such things as: financial, intensive training, relief from regulatory mandates, etc.

Applicable Service Categories: Outpatient Treatment; Specialized Services;

Priority Focus: Improved Access to/Availability of Services; Implementation of Evidenced-Based Practices; Expansion of Existing Service Capacity; Establishment of Services Targeted to Special Populations; Cross Systems Collaboration/Service Integration; New Innovative Idea/Demonstration Project, etc.;

Will pursuit of this funding priority include a request for capital funding? Unknown

### Funding Priority 2

Funding Priority Description:

Funding for creative housing initiatives

Determination of Need:

The County is in need of Transitional and/or Low Demand Housing that would provide a safe environment and supports for individuals who are "under the influence" and cannot access a bed at the Addiction Crisis Center (ACC) when it is full (daily), or other shelter-type services. In the first quarter of this year (2008), 54 % of the clients at the ACC were homeless. Also, the maximum length of stay at the ACC is 14 days. Given long waiting lists, admission into a treatment facility usually exceeds 14 days, so most clients must leave the ACC before they can transition to treatment. They usually do not have a safe place to stay while they are waiting. In addition, DSS funds that pay for treatment are not activated until the client is actually admitted into the treatment facility, so there are no means to pay for housing in the interim. Often the emergency shelter beds are full at the area shelters, leaving few to no options for safe housing.

Applicable Service Categories: Residential Treatment; Recovery Support Services; Specialized Services;

Priority Focus: Improved Access to/Availability of Services; Implementation of Evidenced-Based Practices; Expansion of Existing Service Capacity; Cross Systems Collaboration/Service Integration; Housing; New Innovative Idea/Demonstration Project, etc.;

Will pursuit of this funding priority include a request for capital funding? Unknown

### Funding Priority 3

Funding Priority Description:

Construction of a new Women's' Community Residence to expand beds and offer units for Women with Children

Determination of Need:

We propose a new CR with approximately 7000sf that will accommodate 2 women per unit (14 women), 2 mother/child units (2 women and up to 4 children), 1 large dining/multipurpose room, 1 large commercial kitchen, support offices. The existing women's CR was built over 100 years ago. While it is kept in good repair, there are issues that are inherent in an old structure such as slanting floors, low windows, small spaces, and a wet basement. Programmatically, given there is a continual waiting list for our women's CR with an average of 2 to 3 women at any given time, we propose increasing the bed capacity from the existing 12 beds to 14 beds for single women. We also propose expanding our service to accommodate women with children at the CR level of care by adding mother/child units. Currently the women in our CR take meals and other recreational events in the all-purpose dining area of our adjacently located men's CR. This arrangement has built-in complications related to the interaction of the men and women. A more separate women's program in a new CR would limit the interaction between the sexes and allow for more focus on women's issues.

Applicable Service Categories: Residential Treatment; Specialized Services;

Priority Focus: Improved Access to/Availability of Services; Implementation of Evidenced-Based Practices; Expansion of Existing Service Capacity; Establishment of Services Targeted to Special Populations; Housing;

Will pursuit of this funding priority include a request for capital funding? Yes