Broome County Mental Health Department

Annual **Report**

Commissioner

Elizabeth Warneck, LCSW-R

County Executive

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A MESSAGE FROM BROOME COUNTY MENTAL HEALTH COMMISSIONER

Elizabeth Warneck, LCSW-R

In April 2025, I joined the Broome County Mental Health Department as the Commissioner of Community Mental Health. Leaving my previous workplace of 14 years was a difficult decision and one that I did not take lightly. However, after years of experience in collaborating with Broome County Mental Health, I knew I wanted the opportunity to work alongside this highly competent and skilled team to strengthen the system of care in Broome County.

Since stepping into this role, I have learned that this team is not only highly competent and skilled, but also incredibly dedicated and mission-driven. Their commitment to ensuring that individuals with Mental Health, Substance Use Disorder, and Intellectual and Developmental Disabilities receive the care they deserve is evident in everything they do.

Our department experienced significant adjustments and changes in 2025, including my onboarding as Commissioner. Through close collaboration with the County and our contractual partner, CCSI, we reorganized and streamlined the department. We created new divisions (Forensics, Performance and Contracts, Prevention, and SPOA), added three supervisory roles, and transformed an existing County Program Coordinator position into a second Deputy Director of Community Mental Health Services. These changes reflect years of work to better operationalize the department and have now positioned the LGU to have a more comprehensive, substantial, and positive footprint within Broome County.

Beyond the reorganization, our department focused on rebuilding community partnerships, strengthening relationships, and transitioning our CSB and subcommittee meetings back to in-person meetings. Our goal this year has been to clarify, connect, and re-engage. This renewed focus on connection and system improvement led to the release of two RFPs in 2025, one for expanded Mobile Crisis Services and another for a Mental Health Navigator program. These initiatives represent meaningful steps forward in supporting some of the most vulnerable individuals in our community, the very population we serve every day through our system-focused work.

This annual report reflects the tremendous amount of work happening throughout the service system in Broome County. Our providers are dedicated, committed, and tireless in the work they do. We appreciate every one of them, and it is my privilege to work within such a compassionate and driven community.

Looking ahead, both our department and provider system have a great deal of work before us, but we are building on a solid foundation. We will continue leaning into connection with our providers, knowing that strong relationships are essential to creating an equitable, transparent, and cohesive system of care. I look forward to continuing to learn about Broome County and to working alongside an amazing department and a robust network of service providers.

Warmly,

Elizabeth Warneck, LCSW-R

Mission

Under Mental Hygiene Law, the Broome County Mental Health Department (BCMHD) is tasked to plan, organize, and oversee a comprehensive continuum of care for recipients of mental hygiene services in Broome County. The Department - in partnership with the New York State (NYS) Offices of Addiction Services and Supports (OASAS), Mental Health (OMH), and People with Developmental Disabilities (OPWDD) - strives to improve availability, access, and accountability within the system of care. Together with providers and stakeholders, the BCMHD seeks integration of services to address the full spectrum of needs within the community for the care of individuals and their families. Person-centered planning, in cooperation with data-driven processes, inform strategies and innovations for ongoing and future programs and projects to best serve the community.

Vision

It is the vision of the Broome County Mental Health Department (BCMHD) to enhance the wellness of our community through a comprehensive continuum of innovative, compassionate, and efficient behavioral health services, ensuring interventions and programs are safe, effective, timely, equitable and person-centered. The vision of the BCMHD includes the following aspects:

- **Planning:** The Department will engage in collaborative planning processes together with government officials, providers, community representatives, and recipients and/or their families to develop mental hygiene services in Broome County.

- **Accountability:** The Department will ensure that state and/or local oversight mechanisms are in place and that services are delivered in a responsible, efficient manner.

- **Coordination:** The Department will ensure that all mental hygiene service providers in Broome County coordinate and collaborate for the delivery of services that are responsive to the needs of recipients, including culturally diverse populations.

Local Government Unit (LGU) Functions

Broome County Mental Health Department, as a *Local Government Unit* (LGU), is statutorily required to carry out specific functions pursuant to Article 41 of New York State Mental Hygiene Law. The powers and duties of the LGU, pursuant to Article 41, aids in the monitoring and oversight of programs and services for individuals living with mental illness, substance use disorders, and/or intellectual/developmental disabilities.

Such duties include, but are not limited to:

- The review of services and local facilities serving individuals with mental illness, substance use disorders, and/or intellectual/developmental disabilities (I/DD).
- The development of a Local Services Plan to inform long term goals and develop intermediate range plans forecasting need, prioritization and fiscal implications.
- To enter into contractual agreements to administer with organizations for the provision of services to meet demonstrated needs.
- To serve as the center of promotion for community and public understanding of mental illness, substance use, and I/DD for Broome County.
- To foster collaboration with Departments addressing needs for the aging, with health and social services agencies, and both public and private sector stakeholders.
- To identify and plan for the provision of care coordination, emergency services and other needed services for persons who are identified as high-needs patients as defined by the New York State Commissioner of Mental Health.

The following sections cover programs and services overseen, coordinated, and implemented by the LGU in 2025.

Partnership with Coordinated Care Services, Inc. (CCSI)

The Broome County Mental Health Department has a contractual agreement with Coordinated Care Services, Inc. (CCSI), a nonprofit agency dedicated to innovation through provision of essential business services and organization partnerships to improve lives and strengthen communities.

The contract with CCSI provides personnel with expertise and specialized support in the areas of Project and Program Management, Performance, Contract, and Financial Management.

Adult Single Point of Access (ASPOA)

The *Adult Single Point of Access* (ASPOA) team provides adults with a Serious Mental Illness (SMI) accessibility to the most appropriate care management, treatment, and residential services available in Broome County. The program affords a streamlined, uniform process to match consumer needs with community resources, thereby reducing duplication of services.

In 2025, the ASPOA team assisted with access to services for individuals with SMI, and providing appointments and referrals for individuals identified with co-occurring needs to substance use disorder care.

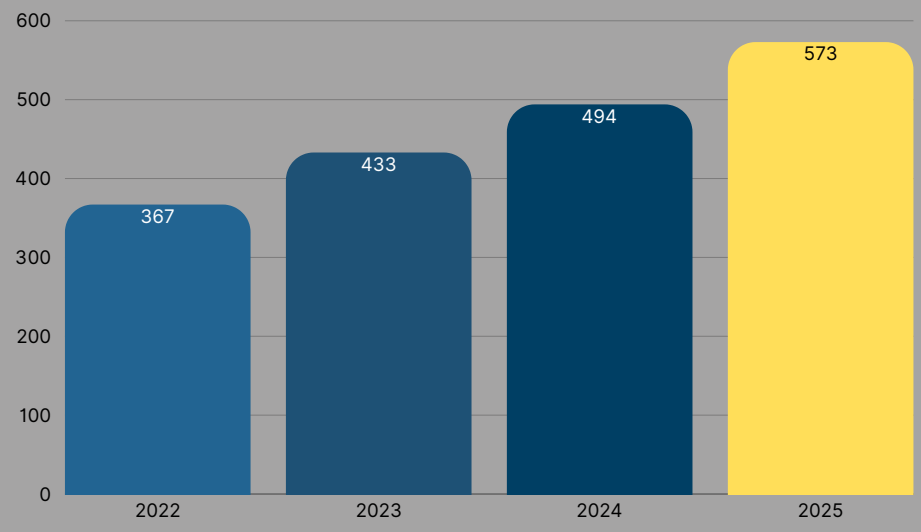
While the complexity and acuity of needs for individuals with SMI grow, the ASPOA team adjusts to support individuals, families, and system of care providers to address such needs.

By the Numbers

Applications received and processed

16%

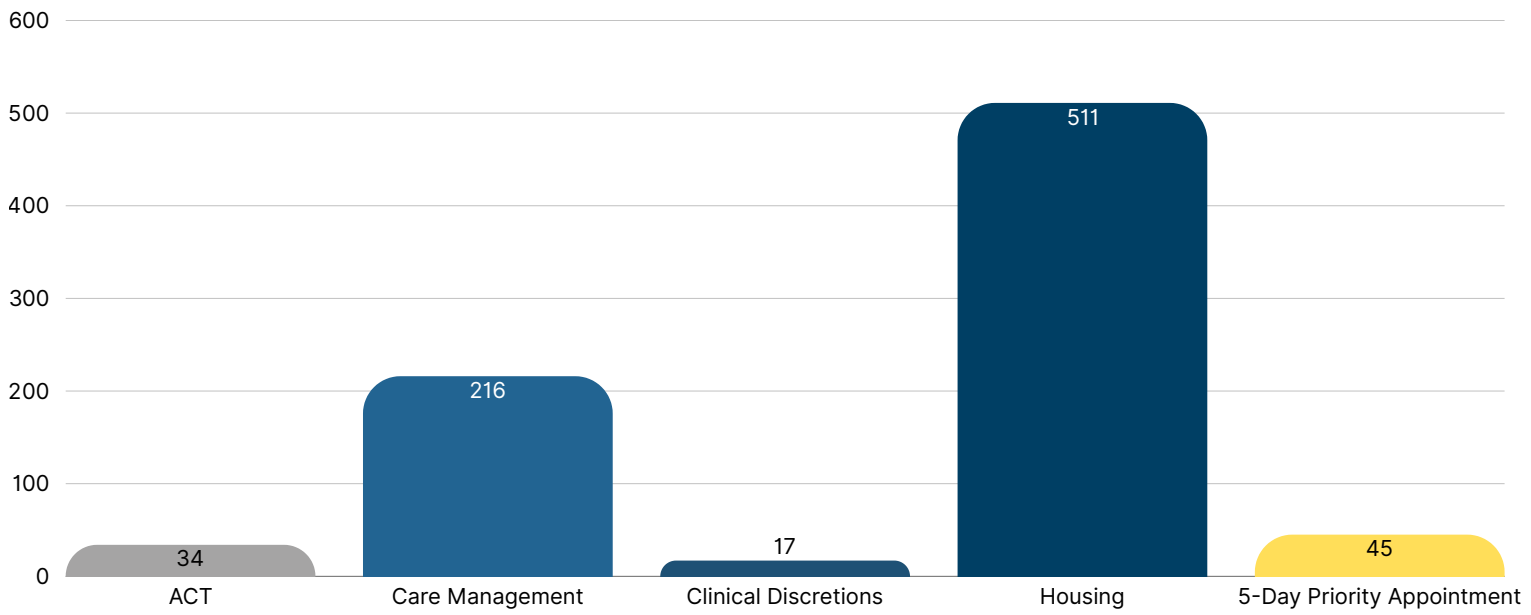
increase in referrals from the previous year



56.13%

Increase in referrals from 2022

A-SPOA Referral Requests for 2025



A-SPOA: 2025 Key Takeaways

2025 reflected a continued projected increase in applications for ASPOA. With the expansion of services outlined in the 2024 Annual Report, along with the addition of Empire State Supportive Housing Initiative (ESSHI) slots, SPOA continued to support the processing and monitoring of applicants with mental illness and substance use disorders to facilitate appropriate placement and service connection.

As demand for care continued to rise, monitoring and case conferencing needs also increased in order to support individuals on waitlists through immediate interventions, alternative placement options, and ongoing communication regarding program availability.

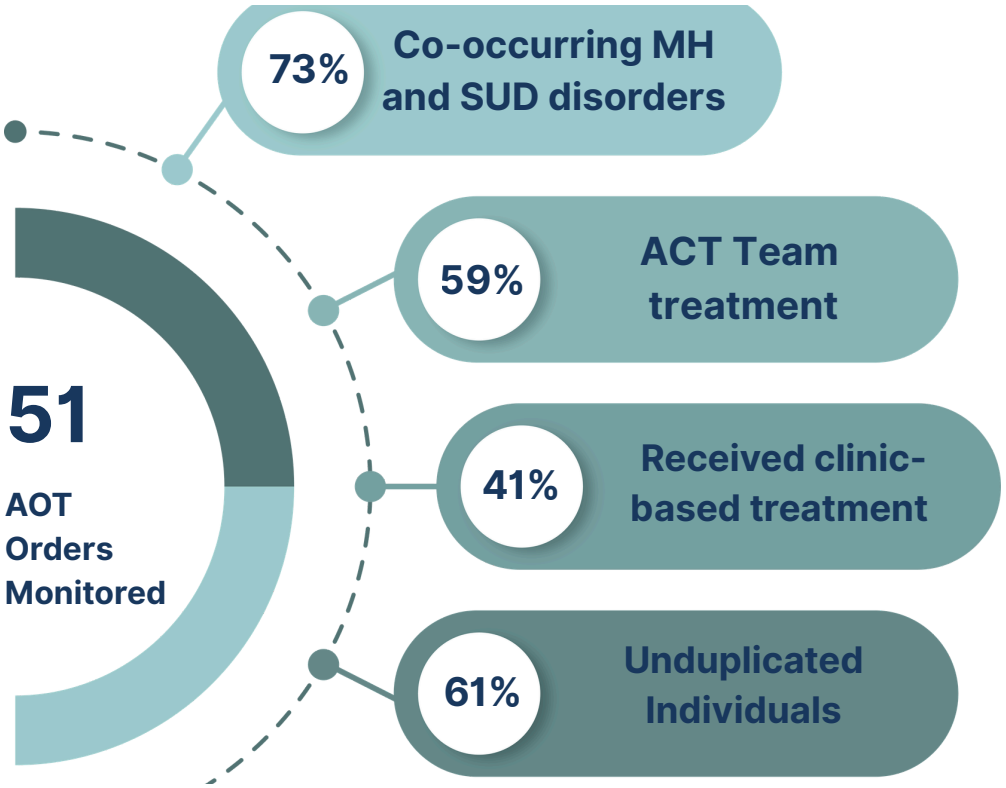
ASPOA continued to formalize system-of-care oversight through individual case review, specialty workgroups, and coordination efforts for high-risk individuals transitioning from hospitalization and seeking community-based supports.

In response to the growing demands of the system, ASPOA expanded staffing in 2025 from 2.0 FTE to 3.0 FTE to enhance operational capacity and support service delivery needs.

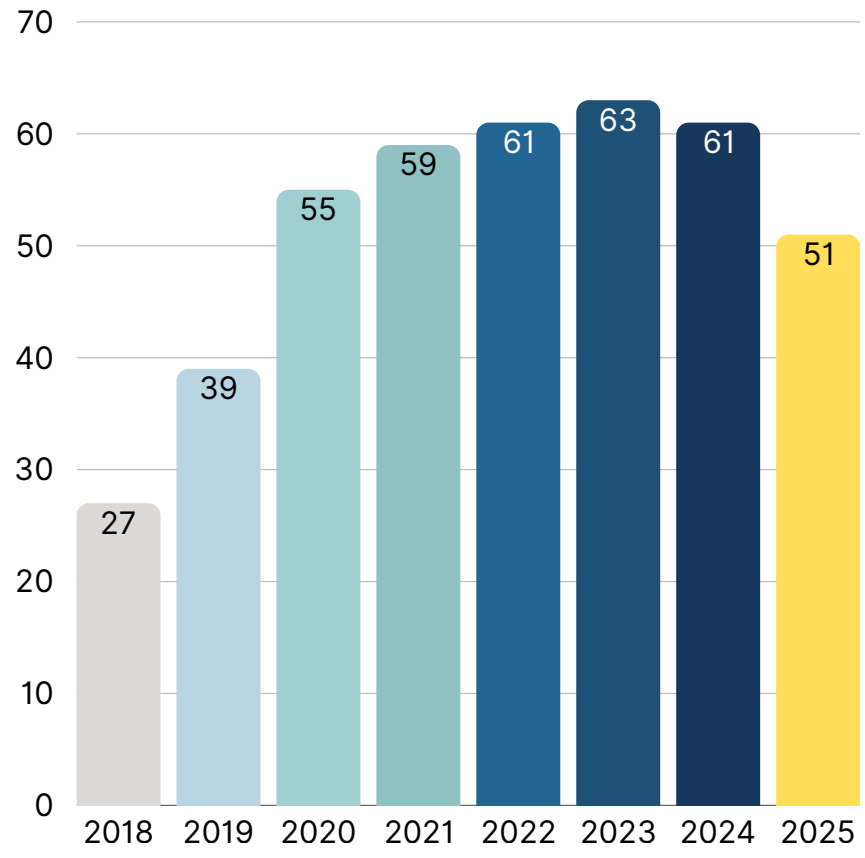
Assisted Outpatient Treatment (AOT)

Assisted Outpatient Treatment (AOT), known as Kendra's Law, is a statutory framework to monitor the participation of eligible individuals in community-based services appropriate to their needs. An individual may be placed on an AOT only if, after a hearing, the court finds they have met specific eligibility criteria and the proposed treatment plan is the least restrictive alternative which will allow the individual to live safely in the community.

AOT By The Numbers



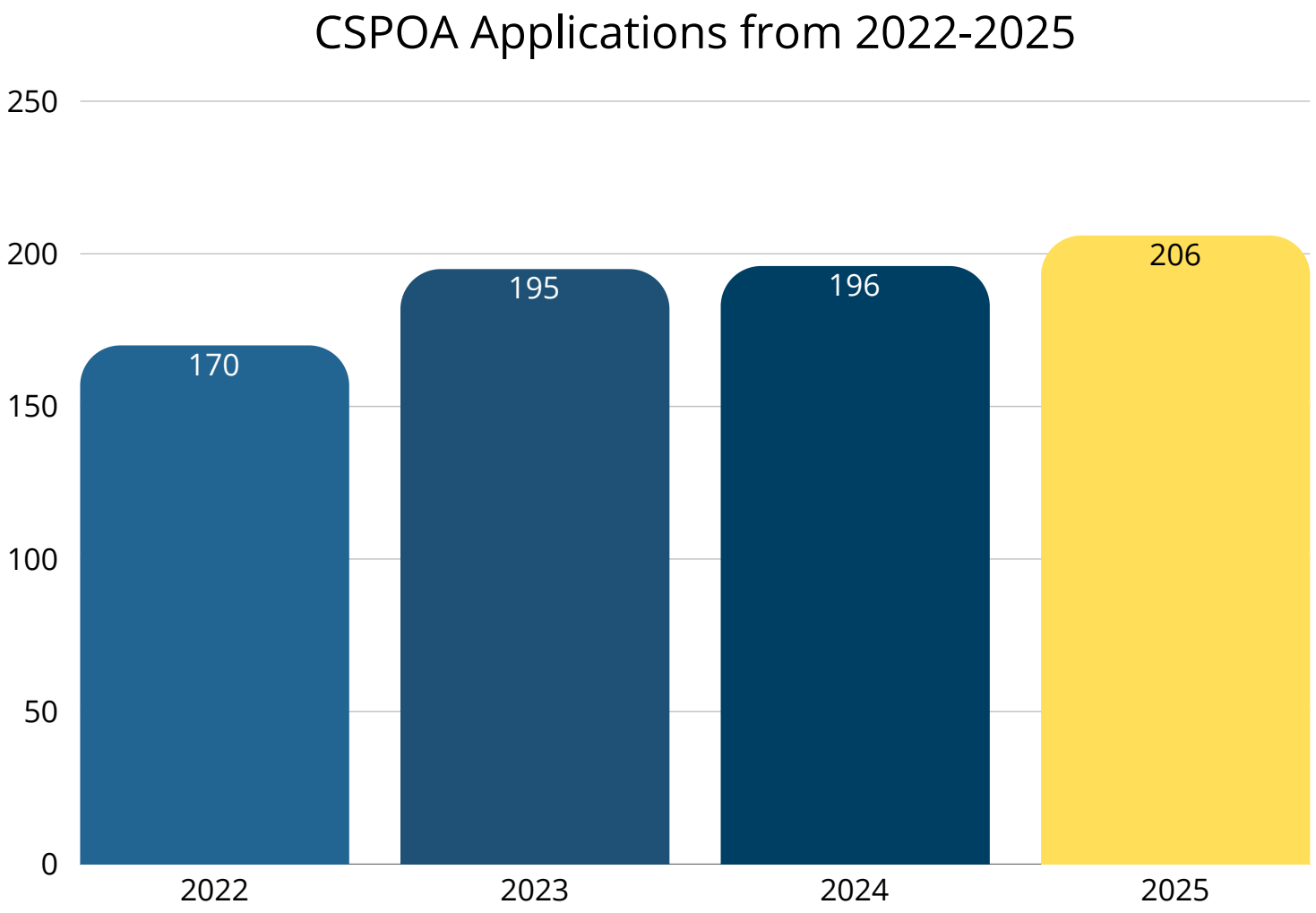
AOT Orders Monitored by Broome County



Children's Single Point of Access (CSPOA)

CSPOA is a centralized intake process to access specialized services for youth, ages 5-21, experiencing a Serious Emotional Disturbance (SED). CSPOA is designed to improve access to services while monitoring and coordinating utilization of these services through a single access point.

By the Numbers



21.18%

increase in applications from 2022-2025

Children's Single Point of Access (CSPOA)

Service Categories

Residential

Residential Treatment Facility (RTF) : intensive, 24/7 inpatient treatment programs for children and adolescents (ages 5–21) with severe emotional/behavioral disorders.
Children's Community Residences (CCR): program provides temporary, home-like, and therapeutic housing for children with serious emotional disturbances (SED).
Under the circumstances in which these levels of care are unavailable or the applicant deemed ineligible, the CSPOA team coordinates with other services like Homeless and Rapid Housing Providers and the Social Services systems to support families and youth.

FFT

Functional Family Therapy (FFT) is a short-term, evidence-based counseling program for at-risk youth (aged 11-18) and their families, designed to address behavioral, emotional, and substance use issues. It focuses on reducing negative family interactions and enhancing communication through a structured, 3-5 month process conducted in homes or clinics.

Care Management

Care Management Services, for both Medicaid and Non-Medicaid eligible recipients provides comprehensive care management for Medicaid members with chronic conditions, focusing on coordinating physical, behavioral health, and social services. A dedicated care manager is assigned to create an individualized care plan aimed at improving health outcomes, reducing emergency room visits, and managing needs such as housing and transportation

FPSS

Family peer support services are strength-based, tailored support provided by trained, credentialed advocates with personal, lived experience in raising a child with social, emotional, developmental, or behavioral challenges. These services empower caregivers by helping them navigate child-serving systems (mental health, education, juvenile justice), access resources, and build skills to support their child's recovery and well-being.

Youth ACT

Youth Assertive Community Treatment (Youth ACT) is an intensive, multi-disciplinary, community-based service for youth ages 10 to 21 with significant mental health needs who are at risk of hospitalization or residential treatment. Teams provide 24/7, tailored care in the home or community to prevent institutionalization and support successful, independent living

CSPOA: 2025 Key Takeaways

Personnel increased from 1.5 FTE to 2.0 FTE in 2025 to support expanding service demands.

Data tracking was enhanced to address the growing needs of youth and families with complex, cross-system needs requiring a continuum of coordinated services and supports.

In response to the increasing number and complexity of applicants seeking services, CSPOA expanded its referral network in late 2025 by inviting additional providers to participate in case conferences and committee meetings. This expansion strengthened continuity of care and supported a more coordinated, system-wide approach to meeting the needs of individuals and families seeking services.

Forensic Outreach Program

In 2025, the *Forensic Outreach Program* supported **49** adults with Serious Mental Illness (SMI) who were released from NYS Prison to Broome County, assisting with access to essential mental health and substance use treatment services.

This referral process aligns with New York Codes Rules and Regulations [14 NYCRR Part § 599.6 (c)(7)(i)] which requires 5-(business) day post-incarceration release priority access to outpatient mental health services to an OMH-Licensed Outpatient Clinic.

The A-SPOA team collaborates with local organizations dedicated to re-entry support, providing critical resources, service referrals, and necessary supplies to facilitate transition into the community.

Community Services Board

What is the Community Services Board?

The Community Services Board (CSB), a required element under NYS Mental Hygiene Law, is comprised of individuals invested in the System of Care for behavioral health services in Broome County.The Board:

- Develops the annual Local Services Plan (LSP)
- Advises on funding and system priorities
- Includes community voices and lived experience

How does it work?

The CSB and its three subcommittees (**Alcohol & Substance Abuse**, **Mental Health**, and **People with Developmental Disabilities)** meet six times a year to operationilize the current Local Services Plan (LSP). The LSP:

- Identifies planning priorities for the Local Government Unit (LGU) and its stakeholders.
- Is submitted to the NYS Partners to inform prioritization of State-wide initiatives.

Current Priorities

- Housing
- Workforce
- Cross-Systems Services
- Crisis Services

Link to BCMHD Local Services Plans

Community Services Board (CSB)

Community Services Board Members*

Jill Alford-Hammitt
Valerie Cunningham
Cara Fraser
Renee Gotthardt
Mary Kaminsky
Kara Kasmarcik
Joelle Martyanik
Nancy Ranger
Erica Robinson
Karen Roseman

Subcommittee Members*

Alcohol & Substance Abuse

Erica Robinson-*Chair*

Jill Alford-Hammitt
John Barry
Kara Kasmarcik
Amanda Parker
Amy Polhamus
Jessica Saeman
Kathy Staples
Susan Wheeler
Tina VanNoy

Mental Health

Cara Fraser-*Chair*

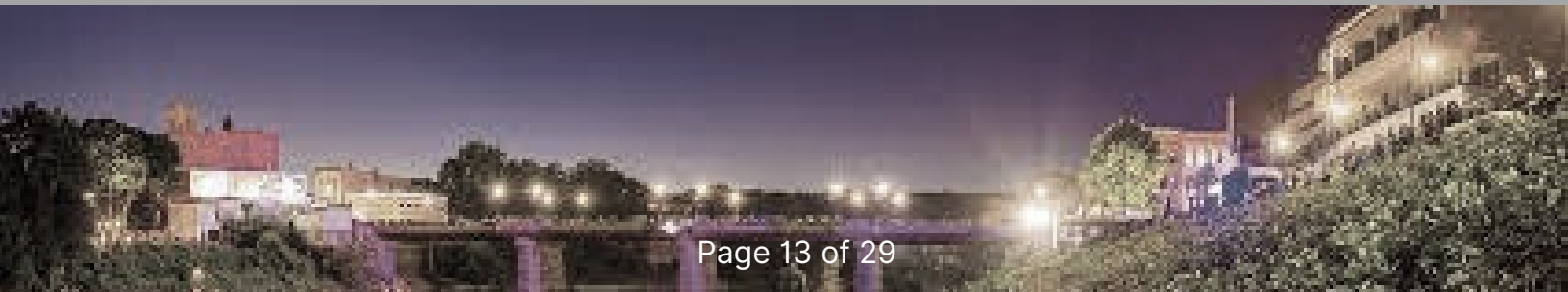
Kimberly DeSantis-Johns
Renee Gotthardt
Emily Lux
Joelle Martyanik
Mackenzie Myers
William Perry
Carmela Pirich
Kelly Wildey

People with Developmental Disabilities

Nancy Ranger- *Chair*

Jessica Aurelio
Valerie Cunningham
Nicki French
Ashley Gamba
Brittany Gaynor
Nancy Ranger
Mackenzie Myers
Karen Roseman
Kelsie Seyler

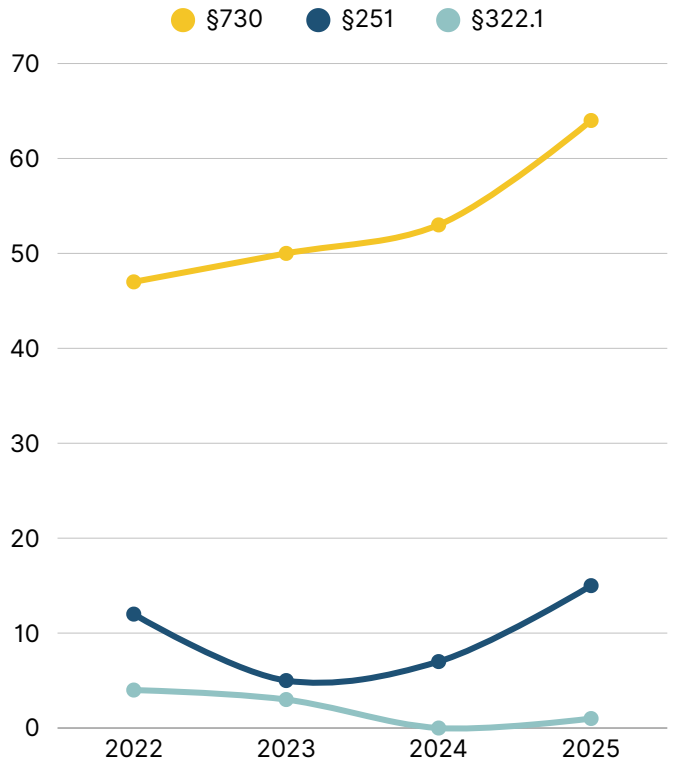
*Individuals served on the Board or Subcommittee for at least a portion of 2025. This does not include those voted in and approved by the legislature in 2025, but without any meeting attendance.



Court Ordered Evaluations

Pursuant to NYS Criminal Procedure Law; Family Court Act, Social Services Law, and Mental Hygiene Law, the Broome County Mental Health Department is statutorily required to facilitate evaluations for the Court. The type of evaluation – and the number of qualified forensic evaluators needed – depends on which statute is cited as the authority under which the evaluation is ordered. Evaluations are conducted for individuals who are incarcerated at the Broome County Correctional Facility, inpatient at Greater Binghamton Health Center or United Health Services - Binghamton General Hospital, or at the Department for individuals in the community.

Court Ordered Evaluations from 2022-2025



By the Numbers

Criminal Procedure Law (CPL) §730 – Mental Disease or Defect Excluding Fitness to Proceed (aka: Competency)

64

Family Court Act (FCT) §251 – Medical Examinations (aka: Mental Health Evaluation)

15

Family Court Act (FCT) §322.1 – Incapacitated Person Examination Report (Pertains only to minors wherein a Juvenile Delinquency proceeding is pending)

1

The data represents evaluations completed in 2025. This does not include orders that were vacated, non-compliant individuals, orders from 2023 in which the evaluation was completed in 2025.

Targeted Projects

Mental Hygiene Law §41.13 (a)(11) states the LGU shall, *"serve as a center for the promotion of community and public understanding of mental disabilities and of the services necessary for their treatment."* **To this end, the BCMHD pursues projects to increase awareness and improved responses and outcomes for those with mental health needs in our community.**

BROOME INCLUDES

BroomeINCLUDES is an initiative dedicated to fostering Inclusion for all working to ensure individuals with intellectual, developmental, and physical disabilities - and those living with mental health or substance use challenges - have access to the support and opportunities they deserve.

Through resource navigation, collaborative community projects, and advocacy efforts, BroomeINCLUDES works to create inclusive and supportive environments in workplaces, public parks and venues, and with programs providing services.

2025 Highlights

- An Inclusive Assessment, in collaboration with SUNY Cortland, was completed, focusing on the city of Binghamton's meeting space to ensure inclusivity for the community. Recommendations and community connections were made to assist the agency with planning for needed upgrades.
- A Communication Banner was designed with the Mothers and Babies Prenatal Network for their new playground on Grand Ave in Johnson City. This playground serves younger children whom Mothers and Babies serve through their PAL Center and other programs.
- Continued connection was fostered with community members interfacing with the mental health, substance use, developmental disability, and other community services.

Prevention Coalition of Broome County (PCBC)

The *Prevention Coalition of Broome County* (PCBC) is committed to reducing youth substance use by implementing effective, evidence-based prevention strategies that engage both young people and their families. With a diverse membership of over 50 representatives from 12 community sectors, PCBC utilizes the **Strategic Prevention Framework** to address substance misuse and related mental health challenges.

Key strategies include:

- **Collaborating with community partners** to strengthen prevention messaging.
- **Educating youth and families** on the risks of substance use and addiction.
- **Enhancing Protective Factors** to build a healthier, more resilient community.

PCBC's initiatives are informed by data from Broome County's biennial administration of the ***Prevention Needs Assessment*** (PNA) survey, which gathers insights from students in grades 7-12 on substance use, perceptions, and Risk and Protective factors. These findings drive the Coalition's action plan, ensuring a targeted, impactful response to identified community needs.

Broome County Suicide Awareness For Everyone (BC SAFE)

BC SAFE, a community coalition, is dedicated to the prevention of suicide and suicide attempts throughout Broome County by coordinating suicide awareness and prevention efforts. Members represent various sectors of the community and utilize **training**, **education**, **awareness** events, and **activities** to reduce stigma, increasing open dialog, and creating awareness that ultimately aids in the reduction and elimination of suicide in Broome County.

27	9	3	21
Resource Requests	**Activity**	**Training**	**Tabling**

CHALK THE WALK
have the talk

BC SAFE members actively participate in community events, engage with the public, and provide essential resources on **suicide prevention**, **mental wellness**, **coping strategies,** and other local support services. Through these efforts, BC SAFE helps raise awareness, foster connections, and promote a culture of mental health support within the community.

Awareness Campaign

BC SAFE, in partnership with the Prevention Coalition of Broome County, hosted the **6th Annual *CHALK THE WALK, HAVE THE TALK*** suicide awareness campaign. Held during a dedicated "Week of Action" in observance of **World Suicide Prevention Day**, the campaign encouraged schools and communities to decorate sidewalks and public spaces with uplifting messages and artwork promoting **hope** and **resilience**. Participation continues to expand across Broome County and NYS, the U.S,. and Canada. As part of the campaign, the CHALK THE WALK, HAVE THE TALK Art Contest and Gallery showcased and celebrated artwork that raises awareness and fosters resilience, further strengthening connections and support for mental wellness.

Impact Spotlight

This year, there was an intentional focus on the "Having the Talk" component, emphasizing the critical importance of open, proactive conversations around mental health and wellness. Efforts centered on equipping individuals, families, and community members with practical tools and resources to help initiate these often difficult but essential discussions. This included the development and dissemination of conversation starters, educational materials, and supportive guidance designed to increase confidence in addressing concerns early, reduce stigma, and foster meaningful dialogue. By prioritizing education and providing actionable strategies, this initiative helped strengthen community awareness and empowered individuals to engage in conversations that can lead to earlier intervention, stronger support networks, and improved outcomes.

Medication Safety Promotion

After success in 2022, 2023, and 2024, the Prevention Coalition of Broome County continued to work with community partners to distribute **Deterra Drug Deactivation Bags** and **medication lock boxes/bags**.

2025 Distribution

Deterra Bags	Lock Boxes
338	1010

Words From the Collition

WHAT motivates YOU

TO SPEAK UP ABOUT SUICIDE PREVENTION & MENTAL HEALTH?

There is a great need that people to know they are essential and necessary in this world. They are important.....they are heard and not alone is this world

Everyone needs to have someone to listen to them. Working with the public, I meet people with MH issues and sometimes the services aren't always available to them, so someone being kind and patient with them is sometimes all they need. ...I have witnessed this and know its important and what I hope to spread

Liz Pfister, owner of the River Maven Holistic Center and the Town of Windsor Town Clerk

I have seen firsthand how silence, stigma and shame can prevent people from reaching out when they are struggling..... I know how important it is to remind people they are not alone.

Erica Robinson, Admission Outreach Specialist at Helio Health Binghamton, NY

· One day we can be on top, next day we can be at the bottom of the barrel.... Typically, all we see is what folks present to us. We need to keep in mind that folks have struggles and difficulties and just be kind.

Tom Mitchell – Coordinator UECSD Family Support Center and Food Center

Broome County Suicide Awareness For Everyone (BC SAFE)

Chalk the Walk, Have the Talk Awareness Campaign

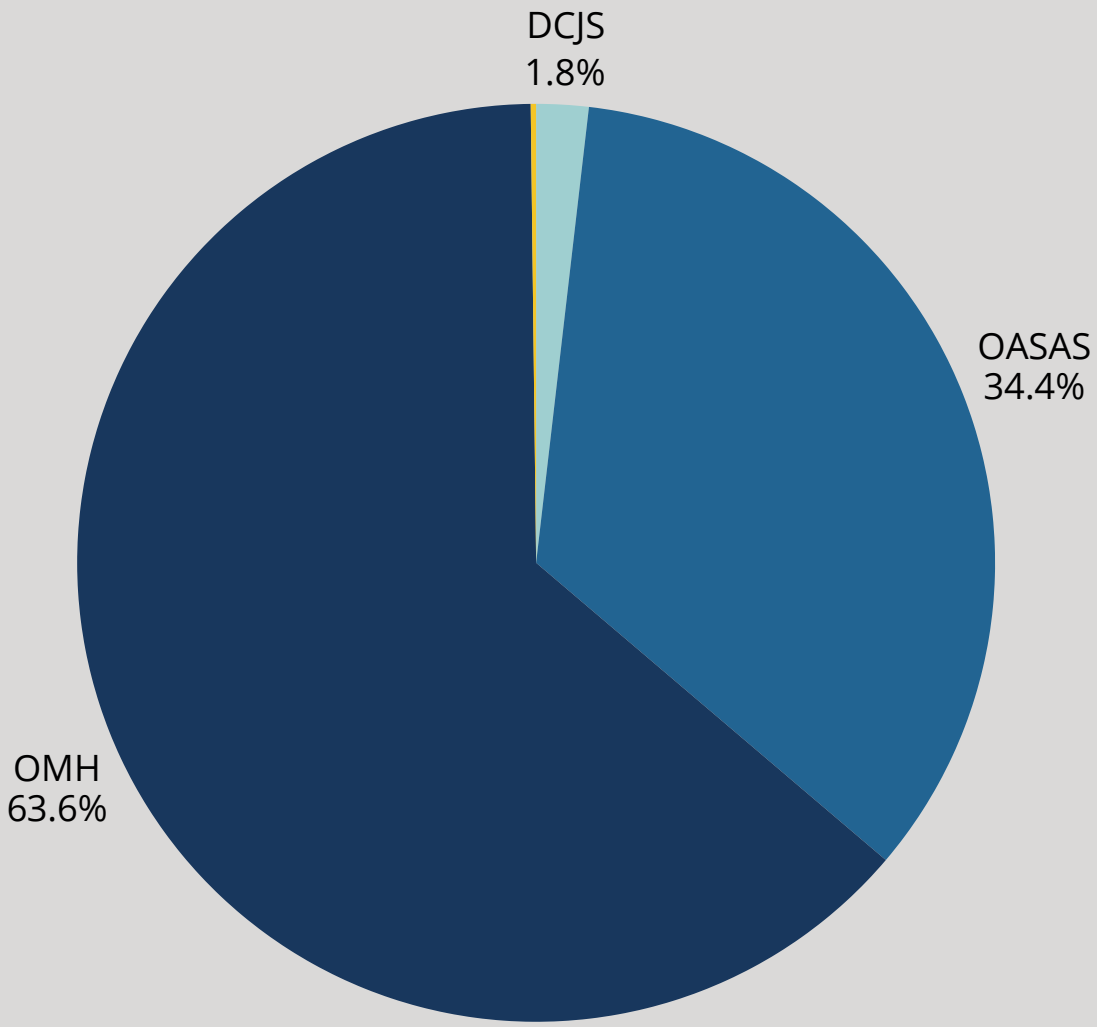
@ LUMA, a renowned projection art festival, attracted approximately 30,000 attendees, including representatives from BC SAFE and the CHALK THE WALK, HAVE THE TALK Campaign. This event served as a vital platform for **community engagement, offering opportunities to share resources, provide education, and foster meaningful connections.**

Participants shared art, stories of hope, and offered support to others with connection regarding mental heath and wellness.

Financial Administration

One of the most critical roles of the Broome County Mental Health Department (BCMHD) is the responsible distribution and accountability of financial resources. In 2024, the Department administered funding from four (4) NYS State agencies: **Division of Criminal Justice Services** (DCJS), **Office of Addiction Services and Supports** (OASAS), **Office of Mental Health** (OMH), and the **Office for People with Developmental Disabilities** (OPWDD). In accordance with state requirements and guidelines, funds are received and allocated to community agencies that provide services through the county's formal contracting process. BCMHD's *Performance and Contract Management* and *Financial* Divisions work together closely to facilitate this process. The Department provides Technical Assistance to Broome-based agencies - who receive funding from the State agencies - to assist with the interpretation of fiscal guidelines to ensure solvency and completion of quarterly and annual reconciliation and reporting.

In 2025, the following State Agencies supplied funding for Broome County totaling more than $15.2 Million:



DCJS

Department of Criminal Justice

OASAS

Office of Addiction Services and Support

OMH

Office of Mental Health

OPWDD

Office for People with Developmental Disabilities

Broome County
Distribution of Funding
by State Agency and Local Agency

Agency	State Aid			
	DCJS	OASAS	OMH	OPWDD
Addiction Center of Broome County	$0	$322,557	$0	$0
Broome-Tioga BOCES	$0	$0	$427,128	$0
Broome County Mental Health Department (including CCSI personnel)	$0	$161,637	$1,747,610	$28,604
Catholic Charities of Broome County	$0	$0	$4,109,334	$0
Children's Home of Wyoming Conference	$0	$0	$129,924	$0
Clear Path for Veterans	$0	$0	$201,722	$0
Community Options	$0	$0	$82,693	$0
Fairview Recovery Services	$0	$2,209,356	$0	$0
Family & Children's Counseling Services	$0	$0	$421,014	$0
Helio Health	$0	$1,823,156	$0	$0
Our Lady of Lourdes Memorial Hospital	$0	$445,323	$0	$0
Mental Health Association of the Southern Tier	$0	$0	$1,425,835	$0
Monroe Plan for Medical Care	$0	$0	$125,220	
Southern Tier AIDS Program	$279,465	$0	$0	$0
United Health Services	$0	$264,866	$1,000,294	$0
TOTALS	**$279,465**	**$5,226,895**	**$9,670,774**	**$28,604**

[^] includes State Aid facilitated through the LGU, but does not include funding via direct contract from State Agencies to providers.

Performance & Contract Management (PCM)

In accordance with Mental Hygiene Law §41.13(a)(8), the BCMHD provides **Performance and Contract Management** (PCM) for agencies under its purview, furthering the mission through mindful metric collection and critical data analysis. To ensure responsible utilization of resources, the Local Government Unit (LGU) employs a multifaceted approach that includes collection and analysis of data, review of performance goals and objectives, and monitoring of resources to successfully achieve the objectives of the statutorily mandated Local Services Plan (LSP). BCMHD PCM staff strive to support an environment which encourages:

- Improved care and services for recipients.
- Accountability through utilization review and outcome measures.
- Use of innovative interventions and programs that promote consumer choice and satisfaction while reducing stigma.
- Transformation of the healthcare delivery system to embrace principles of recovery, person-centered care, and cultural and linguistic humility.

By The Numbers:

PCM oversaw data collection and analysis for a total of:

20 **Contracts**

49 **Contracted Programs**

Information and data are collected, and reviewed, for pre-determined metrics on a monthly and/or quarterly basis via the Smartsheet digital platform.

Performance & Contract Management (PCM)

Data Collection & Metric Review

Following the successful migration to the *Smartsheet* project management platform, agencies submit data through cloud-based collection links. Each submission cascades to integrate with existing data, which feeds real-time agency and county-wide Data Dashboards. This digital data capacity is utilized to inform planning for the System of Care.

Data Synthesis and Dashboards

Data is collected and analyzed on a regular basis. PCM constructs Data Dashboards, uniquely created for each program, to inform agencies and the Department regarding program trends. Select programmatic data is synthesized on a larger, integrated-scale, depicting the county's System of Care.

Public-Facing Dashboard

The Broome County Mental Health Department System of Care Dashboard is designed as a resource for community members and service providers, offering transparent insight into system oversight while disseminating data in a meaningful, person-centered manner. The dashboard supports informed decision-making and assists individuals and families in navigating available services across the system of care.

Check it out here:

Broome County Mental Health Department (BCMHD) System of Care Dashboard

What you can find:

Resources including Veterans Support, Map of Medication/Sharps Disposal and free Naloxone, SUD connection, OMH treatment availability and wait times, Specialty Services availability, and Data and Letter of Support requests

System of Care data such as program information, program census demographics, financial overview, Community Services Board information and SPOA information

Program Spotlight

Using the data

An in-depth analysis of system data and service utilization was conducted to evaluate the allocation of non-clinical support services and identify gaps reported by both service providers and community members. This comprehensive review was informed by agency data reports, community surveys, and stakeholder interviews, providing critical insight into unmet needs across the local system of care.

Findings from this analysis prompted the redesign of the Stepping Stones Drop-In Center and Four Seasons Psychosocial Club, resulting in the creation of the Common Ground Wellness Center. Developed through a collaborative partnership between the Broome County Mental Health Department, Catholic Charities of Broome County, state partners, and individuals with lived experience, Common Ground was intentionally designed as a low-barrier, welcoming, and safe space for individuals living with mental health challenges, intellectual and developmental disabilities, and substance use disorders.

The center serves as a hub for connection, recovery, and support, offering access to essential resources including **free meals**, **support groups**, **showers**, **laundry services**, **hygiene products**, and **assistance with housing and employment**. By prioritizing accessibility, dignity, and community-driven design, Common Ground Wellness Center represents a significant advancement in strengthening the local continuum of care and addressing social determinants of health through person-centered, recovery-oriented supports.

Additional Performance & Contract Functions

Performance Review

This multi-disciplinary process ensures consistency between the contracted service provision and the negotiated deliverables outlined in the Request for Proposal (RFP) process. This ensures financial and services accountability to funding and programmatic guidelines, while encouraging creative responsivity to the dynamically changing needs of the community.

Request for Proposals (RFP)

In this function, the PCM team acts as subject matter experts involving project management including proposal construction, data review and synthesis, and establishing program deliverables and metrics.

Site Visits

Site Visits are conducted as a part of the *Performance Review Process* to gain a comprehensive view of a program within the context of the larger System of Care. PCM staff utilize formalized workflows and associated assessment measures to encourage transparency and promote collaboration with providers.

Collection and evaluation of data encourages creative responsivity to the dynamically changing needs of the community.

Letter of Support (LOS) and Data Request

The Department supports community agencies by providing **Letters of Support** (LOS) and **Data** in response to requests as needed for RFP and/or grant applications. All requests for data are reviewed for appropriateness and whether the Department has access to the data requested.

25

Data and Letter of Support Requests were made in 2025.

This is an 108% increase from 2024.

Data & LOS Request Form

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