

December
2014

OMH News



*Happy
Holidays*

*Wishing you and
yours a happy and
healthy
holiday season!*

-Commissioner Ann Marie J. Sullivan

In this edition of the OMH News:

Snow, Snow and More Snow!

Read updates from Western NY Field Office and Western NY Children's Psychiatric Center on the great Buffalo Snow Storm of 2014!

News from the Center of Excellence in Culturally Competent Mental Health at the Nathan Kline Institute for Psychiatric Research

2014 Holiday Charity Update

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OMH News

is published monthly
for people served by,
working, involved or
interested in
New York State's
mental health programs.



New York State
omh
Office of Mental Health

SNOW-VEMBER IN WESTERN NEW YORK

By Carol Sabatino, Western New York Field Office

Western New York service providers are rarely surprised by extreme weather, but the week of November 17th offered up a new level of challenge for many in the areas hit hardest by an unusual Lake Effect Storm. Programs located relatively short distances apart had anywhere between no snow-fall and 5 feet of snow! Some of us woke up the morning of November 19th wondering what the issue was with school and road closures when our neighborhood was untouched. We quickly realized that traveling 5 miles in any direction would be impossible.

The response from all of our service providers was outstanding. For those programs that were in the direct path of the storm, stories of just how incredibly caring and committed mental health service providers are must be shared:

-At a Living Opportunities of DePaul (LOD) Community Residence, only one staff member was able to gain access to the program office, parking blocks away and climbing over four foot mounds of snow to gather up residents from their apartments to provide medication assistance and supports to ensure their safety. Staff from other LOD programs who were able to make it to their assigned locations logged in many hours to ensure recipient safety and provide needed supports.

-At a Transitional Services, Inc., Community Residence, an overnight staff person was unable to be relieved for several days and nights due to five feet of snow surrounding the residence. With the perseverance of the property manager, IT manager and the snow plow contractor, another staff person was finally brought to the residence four days later.

-At a STEL Community Residence, one counselor went above and beyond driving other staff to and from work multiple times, putting in many additional hours to ensure that the residence was safe and supported.

-At Visions Place, staff worked sixteen hour day shifts and thirteen hour night shifts ensuring coverage when other staff were stranded and unable to get in to work.

-The Buffalo Psychiatric Center staff worked long hours not only keeping the hospital and outpatient operations smooth, but also helping the Western NY Children's Psychiatric Center (WNYCPC) in West Seneca where roads were impassable for days. WNYCPC staff also worked tirelessly to maintain operations.

Other stories demonstrated just how creative staff can be, such as hitching a ride with the National Guard to get to the program, office staff taking over food preparation for residents when the dietary staff couldn't get in, and security staff who stayed on duty for over 40 hours.



Even with exhaustion and concern about their own families, these dedicated mental health workers found ways to help recipients stay safe and calm – even setting up a karaoke event at one residence to bring laughter to an otherwise stressful time. The Western NY Field Office is very proud of all of the service providers in our region and grateful for the caring and commitment demonstrated, especially in these very challenging times.

In closure, always thinking ahead and knowing there will be a next time, the following suggestions were offered:

- Milk supplies go first – have powdered milk on reserve;
- Develop a good relationship with your snow plow vender;
- Ask staff to think about alternative ways to get to their job location; hope that at least one staff person lives relatively close;
- Investigate options for medication refills if new scripts may not be obtained;
- Be aware of how to manage side effects of medications if they cannot be provided;
- Advocate with the local county health department regarding staff status during driving bans.



The Buffalo Storm (A.K.A. Snowpocalypse)

By Dominic Dispenza, Risk Manager at Western New York Children's Psychiatric Center

By 7 o'clock on the morning of November 18th, a foot of snow had already fallen around the Western New York Children's Psychiatric Center (WNYCPC) and it was still snowing at a rate of 3 to 5 inches per hour. High winds had caused severe whiteouts and the roads had quickly become impassable, making it impossible for staff to reach the facility. With the children and adolescents beginning to wake and the prediction that the storm would continue for days, our primary concern was patient safety.

Unsuccessful attempts were made to pick up staff who lived as close as two miles of the facility because even town plows had faced difficulty and were ineffective. Finally a break in the storm on Wednesday allowed us to pick up five staff but the drive was treacherous and the staff had to climb over six foot drifts of snow. Six staff were even brought in to the facility by the National Guard. Thankfully the staff that had worked 24 straight hours were able to get a brief respite. Despite these successes, we were still short staffed so many of us spent our second night at the facility. The staff dedication demonstrated was admirable!

Food was also getting to be in short supply without the delivery trucks being able to fulfill our orders. Luckily there was a store open nearby so we were able to purchase the food we needed because on Thursday, the storm circled around and hit again. Many staff were held over for a third night, but thanks to the attendance of the food service workers, we were able to have cooked food for the patients and staff.

We were also fortunate to have members of the Revite team and contractors secured by Central Office assisting us in clearing out the roads and parking lot around the facility, shoveling out fire exits and shoveling off the roof of the building to avoid flooding and collapse from the impending warmer temperatures. By the evening they were able to bring in food, cots and bedding from the Buffalo Psychiatric Center and by Friday afternoon we were able to get the facility running back at a normal schedule. Central Office arranged for Sysco and Cook Chill to deliver food on Saturday-- just in the nick of time.

During the course of this storm, a total of 78 inches of snow fell in West Seneca and the surrounding area. Amazingly, there were no patient injuries, incidents, restraints or seclusions during this time. It was truly a total team effort. Staff maintained a high degree of involvement and focus on patient safety and partnership, despite having to work hours on end with minimal breaks. The two person Plant Operations Department also worked tirelessly throughout the course of the storm to assure safe passage on our roads and a safe building environment.

We are grateful for the assistance provided to us in this emergency situation. Thank you to the Buffalo Psychiatric Center and to the Revite team for their assistance in helping us maintain safety and the basic needs of staff and patients. A thank you also goes to the National Guard for bringing staff to our building and assisting in getting our roads cleared and to OMH Central Office and the Governor's Office for all their concern, support and advocacy in getting our needs met. All this support meant a great deal to the staff, especially those who were here from the first day of the storm. More importantly, patient safety and well-being were maintained as a result.

Cultural Diversity County Profiles Added as New Resource Online

by Adriana Joseph, M.P.H., Center of Excellence in Culturally Competent Mental Health
at the Nathan Kline Institute for Psychiatric Research

The Center of Excellence in Culturally Competent Mental Health at the Nathan Kline Institute for Psychiatric Research is adding a new informational resource to its website. These Cultural Diversity County Profiles will serve as a resource to aid counties to better understand the population demography of their cultural groups and relevant social determinant indicators. County social determinant indicators are ranked and compared to the state as a whole. The profiles enable interested parties to obtain a deeper understanding of the cultural and social diversity within and among New York State counties. County planners, providers, researchers and anyone interested in understanding the demographic and socioeconomic landscape of counties will find these profiles of particular salience. Specifically, profiles might be useful to providers joining health homes, Managed Care Organizations (MCO) and Performing Provider Systems (PPS) involved in Delivery System Reform Incentive Payment (DSRIP) Programs who need to understand the needs of their communities. By early next year, the [NKI CECC website](#) will have posted for each county, a profile that contains this cultural and social diversity information.

The profiles will display a table of the county's population distribution of cultural groups that are larger than 75,000 residents statewide (see chart on following page) and also display the information in graph format. Relevant social determinant indicators include items such as unemployment, graduates with a high school diploma or higher, poverty, etc., are displayed as percentages and ranked according to its placement in state quartiles (Figure 1). Lastly, each profile contains two at-a-glance narratives summarizing points of county population distributions and social determinant indicators. The data was obtained from the latest American Community Survey administered in 2012 by the U.S. Census Bureau.

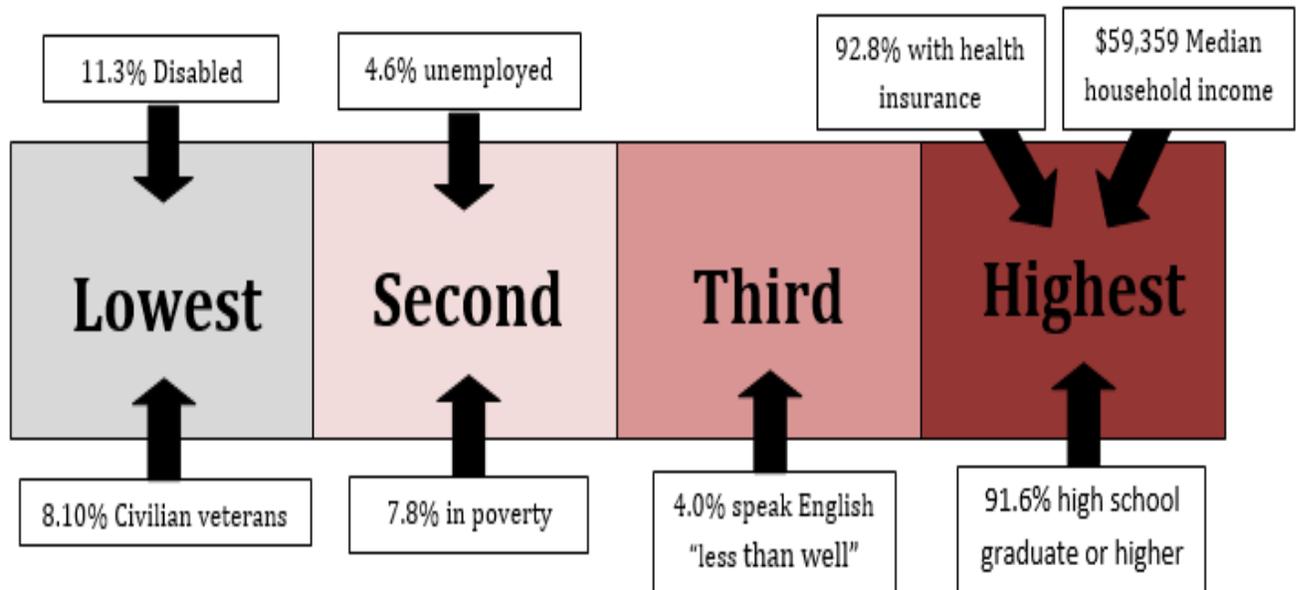


Figure 1. Social Factors and Placement in State Quartiles

Table 1. Cultural Groups in Albany County

Population	County	State
Total	304,511	19,651,127
Foreign born	9.00%	22.0%
Hispanic or Latino:	4.96%	17.6%
<i>Puerto Rican</i>	2.59%	5.76%
<i>Dominican (Dominican Republic)</i>	0.45%	3.70%
<i>Mexican</i>	0.43%	2.31%
Central American:	0.35%	1.93%
<i>Salvadoran</i>	0.16%	0.83%
<i>Ecuadorian</i>	0.08%	1.30%
<i>Colombian</i>	0.16%	0.78%
<i>Cuban</i>	0.26%	0.37%
Not Hispanic:	95.0%	82.3%
<i>Russian*</i>	2.12%	2.41%
<i>Arab*</i>	0.73%	0.81%
Black or African American alone or in combination :	13.96%	16.88%
<i>West Indian (except Hispanic groups):</i>	1.55%	4.20%
<i>Haitian</i>	0.21%	0.97%
<i>Jamaican</i>	0.97%	1.61%
<i>Sub-Saharan African</i>	1.14%	1.26%
Asian alone or in combination:	5.49%	8.12%
<i>Chinese , except Taiwanese</i>	1.28%	3.01%
<i>Asian Indian</i>	1.55%	1.68%
<i>Korean</i>	0.54%	0.72%
<i>Filipino</i>	0.34%	0.58%
American Indian and Alaska Native alone or in combination	0.80%	0.87%
Native Hawaiian and Other Pacific Islander alone or in combination	0.09%	0.10%

* indicates largest groups of recent immigrants who are counted as white

Specific cultural groups of size more than 75,000 in NYS

The OMH Bureau of Education and Workforce Development (BEWD) is pleased to announce that seven offerings of the Partnering for Safety (PFS) Train-the-Trainer for State and Non-State Providers have been scheduled for 2015.

Location	Class Dates	Registration Deadline
Buffalo Psychiatric Center, Buffalo	February 9-11, 2015	January 23, 2015
Creedmoor Psychiatric Center, Queens	March 24-26, 2015	March 6, 2015
Greater Binghamton Health Center, Binghamton	May 19-21, 2015	May 1, 2015
Hutchings Psychiatric Center, Syracuse	June 16-18, 2015	May 29, 2015
Manhattan Psychiatric Center, Wards Island, New York City	July 29-31, 2015	July 13, 2015
Rockland Psychiatric Center, Orangeburg	August 24-26, 2015	August 7, 2015

Please share this notice with all potentially interested organizations and individuals, and encourage them to participate.

For more information, contact the [OMH Bureau of Education and Workforce Development \(BEWD\)](#) at 518-549-5350 with any questions.

DID YOU KNOW...

December is National Impaired Driving Prevention Month?

According to the National Highway Traffic Safety Administration (NHTSA), during the 2012 holiday period (December 12-31), there were 1,698 people killed in crashes on our Nation's roads, and almost a third (31%) of those fatalities were in drunk-driving crashes. On Christmas Day, 26 people were killed by drunk drivers.

Learn about NHTSA's campaigns [Buzzed Driving is Drunk Driving](#) and [Drive Sober or Get Pulled Over](#), or visit the [NHTSA website](#) for additional information.

RAISE Connection Program Number 1 on NIMH Top Ten List of 2014!

By Dr. Susan Essock, Director of the Division of Mental Health Services and Policy Research,
New York State Psychiatric Institute (NYSPI)

The end of the year is a natural time to take stock of notable events. At the National Institute of Mental Health, the RAISE research project headed the top ten list of notable achievements in 2014, according to NIMH Director Dr. Tom Insel. RAISE, or Recovery After an Initial Schizophrenia Episode, epitomized a new therapeutic model to address the needs of people in the early stages of schizophrenia.

Funded by the American Recovery and Reinvestment Act of 2009 and the National Institute of Mental Health, its goal was to prevent the deterioration in function that often accompanies a schizophrenia diagnosis.

NIMH funded two RAISE research projects, and as Dr. Insel noted, it was data from the implementation study lead by researchers at Columbia Psychiatry in partnership with the New York State Office of Mental Health (OMH) that “convinced Congress to provide funding to states to move ahead with program dissemination in 2014.” At Columbia, Principal investigator Lisa Dixon, M.D., Director of the Center for Practice Innovations at the New York State Psychiatric Institute and Professor of Psychiatry at Columbia University Medical Center, noted, “From the beginning, our goal has been to work with our state partners to learn how to implement and sustain youth-friendly treatment programs for individuals experiencing early psychosis so that we can see what services people actually use and find helpful and produce a roadmap that we can work with OMH to implement state-wide. We are thrilled that this congressional stimulus is letting us facilitate implementation of this model in New York State and beyond.” “

Study findings suggested that youth and young adults with early psychosis participating in the RAISE Connection program had very high rates of engagement in treatment and significantly improved rates of school and work participation while increasing rates of remission. Its findings have informed the OnTrackNY clinical program. OnTrackNY extends the impact and reach of RAISE, providing recovery-oriented individualized care to young people experiencing the early phases of schizophrenia. The program works with families and other supports to help patients achieve their personal and professional goals, to stay “ON TRACK.”

For Dr. Insel’s Best of 2014, visit his [blog](#).

Benzodiazepine Use Increases with Age, Despite Significant Risks in Elderly Patients **NIH-Funded Study First to Identify National Prescribing Patterns** **By Dacia Morris, New York State Psychiatric Institute (NYSPI)**

Despite the risks of confusion and falls associated with benzodiazepine use by the elderly, a new study finds that prescription of benzodiazepines increases as people age. The research, published in *JAMA Psychiatry*, provides the first estimates of usage patterns in the United States.

Senior author Mark Olfson, MD, MPH, and his co-authors reviewed data from a national prescription database on benzodiazepine prescription patterns from 2008. They found that among all adults age 18 to 80, about 11.5 million, or 5 percent, received a benzodiazepine prescription that year. The percentage increased with age, from 2.6 percent for those 18 to 35 to 8.7 percent for those 65 to 80, the oldest group studied.

According to Dr. Olfson, professor of psychiatry at Columbia University Medical Center and a research psychiatrist at the New York State Psychiatric Institute, nearly one-third of adults age 65 and older who use benzodiazepines continue on them for at least four months. Such long-term use is associated with decreased effectiveness of the medication and increased risk of physical dependence on it.

Benzodiazepines, which include Xanax, Valium, and Ativan, are used to treat anxiety and sleep problems and are one of the most commonly prescribed classes of medications in developed countries.

“These prescribing patterns likely put a large number of older adults at unnecessary risk of falls, motor vehicle accidents, and confusion,” said Dr. Olfson. There are also risks of benzodiazepine abuse. “As life expectancy increases and the population ages,” he said, “an increasing number of older adult Americans will face these risks from long-term benzodiazepine use unless steps are taken to promote safer alternative treatments.”

Also of potential concern, the study showed that only around 10 percent of adults age 65 to 80 who were treated with benzodiazepines long term received any of their benzodiazepine prescriptions from psychiatrists, physicians who specialize in the assessment and treatment of mental disorders.

“We hope that these findings will serve as an impetus for health care professionals to teach older adults with anxiety or insomnia about non-pharmacological approaches to relieving stress and promoting healthy sleep,” said Dr. Olfson. “Examples include increasing light-to-moderate exercise, promoting supportive relationships, ensuring adequate exposure to natural light, avoiding stimulants such as caffeine late in the day, avoiding naps, establishing a regular relaxing bedtime routine, and accepting that quality of sleep naturally tends to decline as we age.”

The paper is titled, “Benzodiazepine Use in the United States.”

The other contributors are Marissa King, PhD, Yale University, and Michael Schoenbaum, PhD, National Institute of Mental Health.



**The NYS Office of Mental Health Children's Division
&
Christmas Pajama Promise**

would like to announce our results of our pajama and book drive!

The Office of Mental Health Children's Division is excited to announce the results of our pajama and book drive. Donations were collected from November 5 until December 12 at drop off locations throughout NYS as well as in different OMH facilities.

**The final tally was 1280 pairs of
pajamas and 870 books!**

Donations collected went to children at Rockland Psychiatric Center, Western NY Children's Psychiatric Center and Page Clinic, an outpatient program through Capital District Psychiatric Center. Thank you to all who helped make this a big success!





Staff from Capital District Psychiatric Center in front of their donation box.



One of the volunteers helping sort the donations.



OMH Staff volunteers Donna Bradbury, Lisa Clark, Kristin Salvi and Susan Klemme.



OMH Staff Mary McHugh and OMH retiree Marcia Rice helping sort the donations.

Thank you
for
your donations!



December 2014

Calendar of Events

Monday, January 12, 2015 - Tuesday, January 13, 2015

2015 Statewide Infant & Toddler Conference in Poughkeepsie, NY. “Early Relationships Are Key: Examination of Prevention Measures & Factors that Disrupt Development”. For more information, contact [Susan Perkins](#).

Tuesday, January 20, 2015

A Community Forum with Dr. Gary Belkin, New York, New York. The NYC Department of Health and Mental Hygiene Division of Mental Hygiene - Office of Consumer Affairs presents a community forum with Executive Deputy Commissioner of NYC Department of Health and Mental Hygiene. For more information, contact the [NYC Health Department](#).

**Do you have an upcoming event that you would
like us to share in the OMH News?**

Contact the [OMH Public Information Office](#)
with the details of your event!