



**Office of
Mental Health**

OMH Statewide Town Hall

Ann Marie T. Sullivan, MD
Commissioner
New York State Office of Mental Health

November 30, 2023

OMH Statewide Town Hall



How to share comments and questions:

- Virtual attendees may submit comments and questions directly into the WebEx chat box; please send to “All Panelists”
- In person attendees may give spoken comments during the public comment period
- To maximize stakeholder participation, we ask that all participants limit their spoken comments to three minutes
- OMH will also accept submission of additional comments through December 31, 2023, to planning@omh.ny.gov

Accessibility, Event Recording, and Slides

CLOSED CAPTIONING

For virtual attendees, the Multimedia Viewer is available to view closed captioning in your preferred language. From the Multimedia Viewer, located on the lower right side of your WebEx screen, select “Continue” and follow the prompts. Each participant can customize the font size, color and background color for the captions. These adjustments will not be seen by any other participant.

AMERICAN SIGN LANGUAGE (ASL) INTERPRETERS

OMH welcomes ASL interpreters Desiree Carolyn, Elita Hill and Ginger Smith to this event.

EVENT RECORDING, TRANSCRIPTION, AND PRESENTATION SLIDES

The Town Hall recording, transcript, and presentation slides will be provided on the OMH website shortly after the event.



Accesibilidad, grabacion de eventos, y diapositivas de Powerpoint

SUBTÍTULOS

Para los asistentes virtuales, el Visor multimedia está disponible para ver los subtítulos en su idioma preferido. Desde el Visor multimedia, ubicado en la parte inferior derecha de la pantalla de WebEx, seleccione "Continuar" y siga las instrucciones. Cada participante puede personalizar el tamaño de fuente, el color y el color de fondo de los subtítulos. Estos ajustes no serán vistos por ningún otro participante.

INTÉRPRETES DE LENGUA DE SIGNOS AMERICANA (ASL)

OMH da la bienvenida a las intérpretes de ASL Elita Hill, Desiree Carolyn, y Ginger Smith a este evento.

GRABACIÓN DE EVENTOS, TRANSCRIPCIÓN, Y DIAPOSITIVAS DE POWERPOINT

La grabación, la transcripción y las diapositivas de la presentación del Ayuntamiento se proporcionarán en el sitio web de la OMH poco después del evento.



Today's Agenda

The New York State Office of Mental Health (OMH) welcomes attendees to the 2023 OMH Statewide Town Hall, where we will discuss recent agency initiatives and hear directly from New Yorkers about their priorities for the public mental health system.

2:00 p.m. to 4:00 p.m. - OMH Commissioner Dr. Ann Sullivan will provide updates on notable initiatives across specific agency priorities, followed by a public comment period.

Today's Panelists

- **Ann Marie T. Sullivan, MD**
- Moira Tashjian, MPA
- Emil Slane, MS
- Thomas Smith, MD
- Jeremy Darman, MSW
- Sarah Kuriakose, PhD, BCBA-D
- Christopher Smith, PhD
- Amanda Saake, LMSW, CPRP, NYCPS-P
- Li-Wen Lee, MD
- Martha Carlin, PsyD
- Audrey Erazo-Trivino, PsyD
- Joe Katagiri, DrPH, MPA, CPH

Today's Presentation Topics

Governor Kathy Hochul's Commitment to Mental Health

Diversity, Equity, & Inclusion

Highlights from the 2023 OMH Community Engagement Sessions

System Transformation Initiatives

Services and Initiatives for Children, Youth & Families

High Intensity Services

What's New in Peer Services

Integrated Care

Mental Health Workforce Development & Training Initiatives





TRANSFORMING MENTAL HEALTH CARE
SUPPORTING NEW YORKERS

Governor Hochul's Commitment to Mental Health



Office of
Mental Health

Governor Hochul's Commitment to Mental Health

"Our success as government leaders is measured by our ability to lift up and support all of our constituents. So today marks a reversal in the state's approach to mental health care and this is a monumental shift to make sure that no one else falls through the cracks. This will be the most significant change since the deinstitutionalization era of the 1970s. We are prepared to invest making critical policy changes to fully meet the mental health needs of our people."

*Governor Kathy Hochul
State of the State, January 10, 2023*



Critical Implementation Goals

- Diversity, Equity, and Inclusion
- Data-driven development
- Identifying communities most in need
- Services across the lifespan, including at least 25% for youth
- Community based recovery and full integration into community life; peer services throughout the continuum
- Integrated Care: physical health, mental health, substance use, and developmental disabilities



Diversity, Equity, & Inclusion

Diversity, Equity, & Inclusion

- OMH is committed to ensuring that the new services and initiatives, as well as our existing services, are designed and implemented in a manner that meets the needs of diverse communities in New York
- For example, we are including equity language in all RFP's, based on the National CLAS Standards, and actively working to uniformly include the National CLAS Standards into additional regulatory, policy and funding mechanisms
- Diversity, Equity, & Inclusion is a key component to the OMH workforce development strategic framework
- New data visualization tools are now available to help providers and county leadership examine trends in health disparities and pinpoint areas for improvement

OMH Vital Signs Dashboard

- The OMH Vital Signs Dashboard (VSD) is now publicly available, requires no login credentials, and [can be accessed here](#) or through the OMH website under “Statistics and Reports”
- The VSD is a dashboard for visualizing the public mental health system performance within domains of access, quality and treatment outcomes that identifies disparities by Race/Ethnicity, Gender, Region

VSD Home - Adult | VSD Home - Child | Trends Over Time - Adult & Child | Data Download | Definitions

OMH Vital Signs Dashboard (VSD) - Adult

The OMH Vital Signs Dashboard (VSD) visualizes the public mental health system's performance in select mental health programs and focuses on disparities in access, quality, and treatment outcomes among Medicaid individuals with mental health needs.

Select Region, County, Network, or Agency

STATEWIDE

Select Population

Full MH Population



STATEWIDE Full MH Population Vital Signs Measure Distribution from Medicaid (Adult, October 2021 - September 2022)

Hover over % for measure definitions (full list in 'Definitions' tab). All measures leverage Medicaid data.

Access

Statewide Medicaid: 46%*

Treatment Outcome



OMH Vital Signs Dashboard

Select Disparity Population

Race/Ethnicity

Select to View Chart/Table

Table

STATEWIDE Full MH Population Disparities by Race/Ethnicity (Adult, October 2021 - September 2022)

§Statewide Average Performance is Referring To Statewide Full MH Population Average Rate.

Higher than Statewide Average Performance**



Equal to Statewide Average Performance**

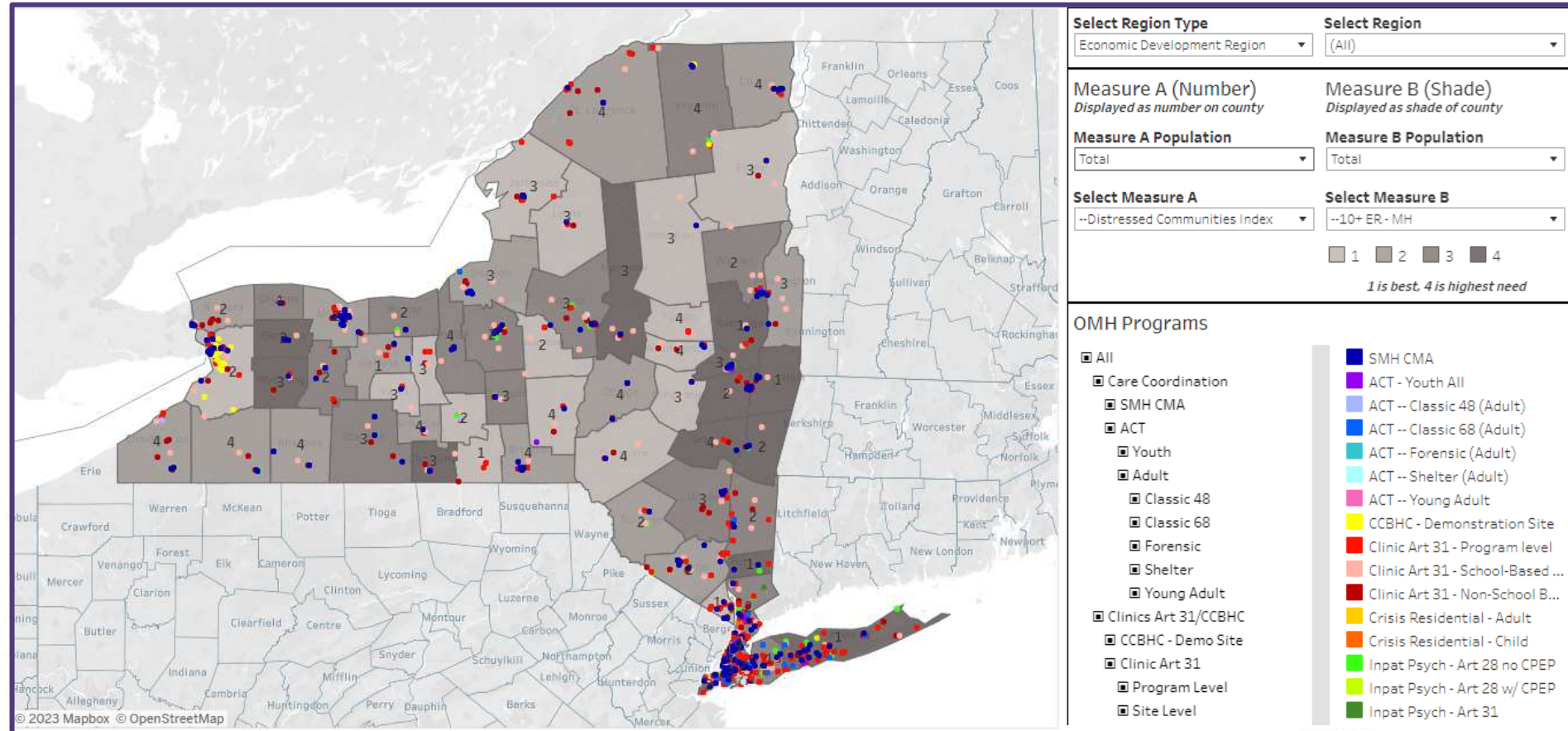


Lower than Statewide Average Performance**



Measure	Population	Statewide Average Performance§	Disparity Category	Numerator	Denominator	Performance	Lower than Statewide**	Equal to Statewide**	Higher than Statewide**
Adherence to AP (Schizophrenia)	Full MH Population	63%	Total	18,633	29,677	63%		●	
			Asian/PI	1,046	1,487	70%			●
			Black	6,089	10,349	59%	●		
			Hispanic	4,091	6,453	63%		●	
			Multiracial	2,197	3,791	58%	●		
			Native American	61	111	55%	●		
			White	4,782	6,859	70%			●
			Unknown	367	627	59%	●		
Antidepressant – Acute Phase	Full MH Population	52%	Total	23,428	45,078	52%		●	
			Asian/PI	834	1,728	48%	●		
			Black	3,188	7,131	45%	●		
			Hispanic	4,470	8,689	51%		●	
			Multiracial	5,449	10,622	51%	●		
			Native American	88	178	49%	●		
			White	8,588	15,140	57%			●
			Unknown	811	1,590	51%	●		
Antidepressant – Continuation Phase	Full MH Population	36%	Total	16,258	45,078	36%		●	
			Asian/PI	557	1,728	32%	●		
			Black	2,087	7,131	29%	●		
			Hispanic	3,079	8,689	35%	●		
			Multiracial	3,683	10,622	35%	●		

Needs Assessment to Reach Communities Most in Need





2023 OMH Community Engagement Sessions

OMH 2023 Community Engagement Sessions

- 890 participants attended 4 virtual sessions February-March 2023
- 905 participants attended 36 in-person sessions March-April & July 2023
- In-person sessions offered both an evening session and morning session
 - Western & Finger Lakes: Olean, Buffalo, Rochester, Batavia
 - Southern Tier: Corning, Binghamton
 - North Country: Plattsburgh, Watertown
 - Central & Mohawk Valley: Utica, Gloversville, Syracuse
 - Capital District & Mid-Hudson: Albany, Monticello, Valhalla (Westchester)
 - New York City: Manhattan, Brooklyn, Staten Island
 - Long Island: Melville (Nassau), Hauppauge (Suffolk)
- Participants included individuals with lived experience, family members, providers, community leadership, and advocates

Approach to Community Engagement Sessions

- Provide an **opening presentation** on the mental health investments and system reforms in the budget and planned in the coming years.
- **Breakout into groups** to gather feedback on how we can ensure health equity in both access and outcomes of new and existing public health services.
- **Identify creative ideas and examples from local communities** on how to best implement and target the funding, so it reaches the New Yorkers who need it most.
- Gather information about what **success** will look like for each region and community in the State. Identify **challenges** to achieving results along with ideas for overcoming these challenges.
- Notes from the breakout sessions were **analyzed into themes** to be used in the implementation planning for these new initiatives.

Results of the Community Engagement Sessions

- As soon as the Community Engagement sessions were completed, OMH began using the data collected to inform planning, program design, and implementation strategies for the mental health budget initiatives.
- Results of the feedback sessions are available on our OMH website here: <https://omh.ny.gov/omhweb/transforming-mental-health>
- Themes are organized in the following categories:
 - **Workforce:** Retention, Recruitment, Peer Services
 - **Outpatient:** Service Awareness, Access to Services, Social Determinants, Peer Services, 988
 - **School-Aged Children:** Cross-agency collaboration, training, prevention, school-based services
 - **Inpatient/Discharge:** Ensure individuals who need intensive services have easy access to comprehensive services in the community and are in the hospital only when necessary
 - **Housing:** Needs & Requests, Environment, Access
 - **Insurance:** Coverage, Billing Challenges
 - **Diversity and Integrated Services**



System Transformation

Array of Comprehensive Services

- Prevention
- Ambulatory and community services
- Emergency and crisis
- Inpatient
- Residential
- Care Coordination and wrap around services
- Intensive community-based continuum of care supports and services

System Transformation Initiatives

Critical Implementation Goals:

- Integrated Care: physical health, mental health, substance use, and developmental disabilities
- Equity and Diversity
- Services across the lifespan
- Community based recovery and full integration into community life; peer services throughout the continuum

Prevention Services:

- Increase School-based clinics
 - Start up grants
 - Increasing Medicaid rate & Commercial Insurance coverage
- Expansion of Healthy Steps
- New Resources to expand Suicide Prevention programs for high-risk youth
- Expansion of Individual Placements and Supports (IPS) supported employment

Community Access:

- 26 New Certified Community Behavioral Health Clinics (CCBHC); triples programs from 13 to 39 to expand access)
- Expansion of Article 31 Mental Health Clinics
- Expansion of Home-based Crisis Intervention for youth
- 12 New Comprehensive Psychiatric Emergency Programs (CPEPs)
- 42 New Assertive Community Treatment (ACT) teams
- Expansion of Intensive and Sustained Engagement Team (INSET) program
- Farmnet – permanent funding
- Funding for Eating Disorder treatment

System Transformation Initiatives

Highest Need Individuals:

- Additional 150 State inpatient beds and reopening 850 offline Art. 28 acute beds
- New Inpatient and ER Discharge Protocols and Responsibilities
- Capital and Operational resources to develop 3,500 new Housing Units *capital*, 900 transitional step down; 500 Community Residence SRO's
 - 600 licensed apartment treatment
 - 1,500 supportive housing units
- 8 Additional Safe Options Supports (SOS) teams
- 50 new Critical Time Intervention (CTI) teams including Medicaid and insurance coverage
- Capital for Inpatient MH expansion as well as Residential Treatment Facilities (RTF) expansion
- Expansion of High-Fidelity Wrap Around Services
- Increase Health Home Plus capacity
- Commercial and Medicaid payment for all crisis services and intensive wrap around services

Chronically Unsheltered Homeless:

- Safe Options Support Teams
- Specialized Inpatient Services
- Housing First and Specialized Transitional Housing with supports
- Long term social, skills and employment supports



NYS OMH MENTAL HEALTH INITIATIVES

Progress by Quarter

- \$39.7 million via 9 RFPs for CCBHC, SOS, ACT, School-Based MH Clinic, and Supportive Housing
- INSET awards for 3 agencies
- Eating Disorder award for 3 agencies
- 420 units of Apartment Treatment housing awarded
- 61 out of 150 state operated beds opened
- Article 28 hospitals restored 224 inpatient MH beds
- Draft guidance shared with hospitals

- Six RFPs to be issued, including CCBHC Phase 2, HBCI, Clinic Expansion, RTF Capital, and Transitional Step-Down Units
- Remaining of 150 state operated beds anticipated to be opened
- Awards and contracts for RFP awardees
- Refine guidance and regulations for community-based programs in support of new hospital guidance and regulations

2023 Q2

2023 Q3

2023 Q4

2024 Q1

- \$47.8 million via five RFPs for Student Loan Repayment, Eating Disorders Treatment, INSET, Apartment Treatment and Healthy Steps
- 40 Community Engagement feedback sessions completed reaching nearly 2,000 participants
- Youth Listening Tours
- Governor's Youth MH Summit

Total RFPs Issued to Date

- 22 RFPs issued as of 11/17/2023

Actions to Date in 2023 Q4

- 8 RFPs issued: MHOTRS/Clinic Enhancement II, Community Mental Health Loan Repayment Program, INSET Rerelease, Connecting Youth to Mental Health Supports - Suicide Prevention, Connecting TGNCNB Youth to Mental Health Supports - Suicide Prevention, Community Residence – Single Room Occupancy, Supportive Housing Units: Phase III Single Room Occupancy (SP-SRO), ACT Phase II Adult Rest of State
- 99 out of 150 state operated beds opened
- Hospital guidance distributed, regulation development in progress

Planned by End of 2023 Q4

- 15 RFPs to be issued
- Approximately 500 Article 28 MH inpatient beds targeted through end of year

OMH Procurement Opportunities

- OMH is working on a significant number of procurement opportunities for new mental health supports and services. Current Request for Proposals (RFPs) are posted with due dates on the OMH website here:
<https://omh.ny.gov/omhweb/rfp/>
- Our tentative procurement schedule is also available to inform providers and other system stakeholders of anticipated procurement availability. The tentative procurement schedule is posted on the OMH website here:
<https://omh.ny.gov/omhweb/rfp/upcoming-procurement-opportunities.html>



*INVESTING IN MENTAL HEALTH
SUPPORTING YOUNG NEW YORKERS*



Services & Initiatives for Children, Youth & Families



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2023 Youth Mental Health Listening Tour

- Following a kick-off in NYC with Governor Hochul, OMH and Office for Children and Family Services (OCFS) conducted 5 listening sessions throughout New York State in April and May, reaching nearly 200 youth
- The goal was to collect feedback from youth on the pandemic, social media, wellness in schools, mental health programs they want, and advice for fellow peers
- [View the listening tour report](#)



Governor's Youth Mental Health Summit in NYC

- On June 15, 2023, Governor Hochul brought together an array of national subject matter experts and stakeholders from mental health, education, technology, and advocacy fields to discuss the challenges and experiences impacting the well-being of our youth, including the role of social media and the pandemic
- The goal of the summit was to further discuss and advise on future policy initiatives that can help tackle the youth mental health crisis
- Over 1,000 New Yorkers attended
- [View the topics discussed here](#)



Prevention and Early Intervention

Healthy Steps

- 13 OMH supported sites with RFA for 57 additional sites; over 300,000 children served with expansion

Trauma-Informed Network

- Training, technical assistance, collaboration, and resources

Parent Education

- NYS Parenting Education Partnership training, resources, and events

Suicide Prevention

- \$10 million in annual funding for serving at-risk youth/young adults from underserved populations
 - \$1 million for TGNCNB youth, including those who are questioning their gender identity
- Sources of Strength in 40 NY public high schools
- School Crisis Team curriculum for manualized postvention
- Pilot initiatives (school, summer camp) for Black youth informed by Taskforce
- Over 7,000 school and community staff trained each year in suicide prevention

Mental Health First AID

- \$1 million in Youth Mental First Aid statewide infrastructure
- \$1 million in teen Mental Health First Aid statewide infrastructure
- MHFA for Higher Education – pilot in prep with OASAS for college campuses

Primary Care Collaborations

Collaborative Care

- Primary care based behavioral health supports for children and youth ages 6 and up, with over 100 sites at pediatric or family medicine practices
- \$10 million SAMHSA grant to expand pediatric collaborative care

Project TEACH

- Rapid access to consultation from c/y psychiatrists, specialty consultation including 0-5, problematic sexual behaviors, non medication SU intervention, LGBTQ+, ASD/IDD
- Over 25 thousand consultations to over 5 thousand providers
- Access to training, education, referral, and linkage

Project TEACH Maternal Mental Health

- Rapid access to consultation from reproductive psychiatrists, referral, and linkage
- Web resources for assessment and treatment

Maternal Mental Health Workgroup

- Workgroup launched 11/28/23
- Focused on outreach, screening, and services

Evidence-Based Care

EBP Needs Assessment

- Landscape analysis and engagement of children/youth/families/providers to understand gaps in EBP provision in NYS – in progress

Center for Workforce Excellence

- \$4.3 million investment in new center for the implementation of EBPs for Children and Youth
- Pilot projects for new diagnostic and screening technologies
- Innovations Lab to test and scale new practices

Provider Funding: Funding to support credentialed practitioners implementing EBPs

Children and Family Treatment Supports and Services

- In collaboration with DOH and State Partners, new rates to support evidence-based practices including Functional Family Therapy, Parent-Child Interaction Therapy, and Multi-dimensional Family Therapy
- Training, credentialing, and ongoing consultation is 100% funded
- Start-up funding supports providers

School Based Prevention/Mental Health

Mental Health Education in Schools: Mental Health Resource and Technical Assistance Center (NYSED)

SHAPE: Web-based platform targeting assessment and resources to schools, current cohort enrolls BOCES for strategic assessment and planning

Trauma Supports: \$6 million to support trauma curricula for schools

School Based Supports for Suicide Prevention: RFP in development

Increase School-Based Mental Health Clinics

- 25% increase in Medicaid rate & requirement for commercial insurance coverage
- Start-up funding for new school-based mental health clinics (\$25k for all, \$45k for high-needs) (100+ new clinics in 2022 and 100+ new clinics in 2023)

Tribal Nations Programs: Collaboration with SED on nation-led pilots to improve school-based mental health supports

High-Needs School District grants: 26 school districts with awards totaling \$10 million per year for 5 years (NYSED) focusing on universal prevention approaches and mental health services

Other Outpatient Expansions Impacting Children/Youth: CCBHC Expansion, Clinic Expansion, New Clinics

Intensive Community Based Care

Children's Day Treatment

- 25% increase in Medicaid rate for wraparound supports in schools
- NYSED and provider collaboration to review and modernize model

Youth ACT

- New model with 6-8 multidisciplinary team members serving 36-48 youth
- Youth ACT Technical Assistance Center and evaluation
- In 15 months, NYS has stood up 18 teams statewide with over 300 youth enrolled and over 40 successfully discharged
- Additional rounds of procurement for 30 teams statewide

High Fidelity Wraparound Care Management

- Evidence-based care management for children and youth with SED involved in multiple systems
- Statewide expansion within Health Homes Serving Children
- High Fidelity Wraparound includes peer support

Intensive Community Based Care

Children's Crisis Residence

- Provides short-term intensive supports to youth and families for stays up to 28 days
- Currently 91 beds with 71 additional beds in development

Home-Based Crisis Intervention

- Teams provide 24/7 intensive support to families in crisis for 4-6 weeks. Interventionists support only 1-2 families at one time.
- New model for dually diagnosed youth in collaboration with Developmental Disabilities Planning Counsel and OPWDD

OnTrack (First Episode Psychosis) Teams serving 16+

- 28 OnTrack teams throughout NYS, 4 new teams will open this year
- Provide comprehensive services to young individuals ages 16-30 with early psychosis; emphasis on education, employment and social supports; over 70% remain on track for education and work

Intensive Community Based Care

Children and Youth Critical Time Intervention (CTI)

- Critical Time Intervention teams to support children in inappropriate levels of care, such as Emergency Department or boarding on pediatric units
- Expected procurement in early 2024 to fund specialized teams to support families in transition as well as transitional beds for children and youth enrolled in Critical Time Intervention



Residential/Inpatient Treatment

Children's Community Residence (CCR)

- 34 CCRs around the State

Residential Treatment Facilities (Inpatient Care)

- Rate enhancements and fiscal supports to RTFs, including clinical/direct care rate increase, addition of staff including permanency specialist, additional therapist, additional transition coordination, intake specialist
- Capital for RTFs in areas of the State without coverage (expected early 2024)

Inpatient

- Neurobehavioral unit (SUNY Upstate)
- Returning offline bed capacity
- Capital for new inpatient beds in community hospitals



High Intensity Services

Services for High Need Individuals

Opportunities from the 2023/24 budget:

- Adding 150 new state-operated inpatient psychiatry beds
- Reopening 850 offline Article 28 inpatient psychiatry beds closed during pandemic
- 12 new Comprehensive Psychiatric Emergency Programs (CPEPs)
- 50 new Critical Time Intervention (CTI) teams
- 42 new Assertive Community Treatment (ACT) teams
- New guidance for Inpatient, ED, and CPEP evaluation and discharge practices
- Capital and operational resources to develop 3,500 new Housing Units (*capital*), new 900 transitional step-down units and 500 Community Residence SROs, 600 licensed apartment treatment, and 1,500 supportive housing units

OMH Meetings with Hospitals - Summer 2023

- In July 2023, OMH conducted regional meetings with hospital staff across New York to provide updates on system-level planning and gather feedback
- Participants discussed how to improve data monitoring as well as how to facilitate more seamless communication between ED/CPEP/Inpatient staff and community-based provider agencies
- Department of Health (DOH) has added new questions on ED/CPEP and psychiatric inpatient beds to their HERDS hospital data reporting system
- Together we hope to reduce pressure on hospitals, increase timely access to ambulatory services following mental health hospital services, and facilitate coordination of services between hospitals and outpatient providers

OMH Meetings with All Providers - Fall 2023

- In September & October 2023, OMH conducted regional meetings with staff from all OMH providers, including hospitals, outpatient providers, residential, and care management programs
- Presenters reviewed OMH's vision for building a comprehensive continuum of care and gave updates about the new guidance issued from OMH and DOH for ED/CPEP/inpatient psychiatry programs on evaluation and discharge practices
- Presenters introduced details of the new Critical Time Intervention program and collected feedback on how to make this service work to improve transitions between hospital settings and community-based programs
- Participating providers emphasized the importance of collaboration between hospitals and outpatient and community-based programs to improve transition in care, particularly for individuals most at risk

New Hospital – Community Provider Guidance

- In October 2023, OMH and the Department of Health (DOH) issued guidance for psychiatric inpatient programs, emergency departments and CPEPs
- The guidance establishes expected standards for:
 - Screening and assessment
 - Communication and collaboration with non-hospital clinicians
 - Coordinated discharge planning
 - Pre-discharge interventions to improve discharge outcomes
- OMH is currently developing regulations which align with this guidance
- As part of this effort, our goal is to deepen the connections between hospital clinicians and surrounding ambulatory and residential programs
- Ambulatory/Residential program guidance is currently under development
- Feedback may be sent to planning@omh.ny.gov

New Hospital Guidance



[OMH - DOH Evaluation and Discharge Guidance \(ny.gov\)](https://www.ny.gov/omh-doh-evaluation-and-discharge-guidance)

Forensic Supports & Services

Forensic Assertive Community Treatment (ACT) Teams

- RFP for 4 new Forensic ACT teams issued in July 2023
- Forensic ACT teams serve individuals who are justice-involved, have serious mental illness, and have not been successfully engaged by traditional mental health treatment and rehabilitation

Diversion Centers

- Support to diversion pilots in 16 counties, ranging from: 911 call diversion, post-arraignment diversion, crisis centers/crisis respite, specialty courts, jail clinical staff, peer supports, and Forensic care manager/navigators

New Initiatives

- Transitional Beds
- Critical Time Intervention (CTI)
- Supportive Housing

Homelessness – Key Issues to Address the Problem

- Engagement! Meet an individual's **aspirations** and provide meaningful connections, including activities and employment
- Services that fit the individual's health and mental health needs; a continuum from engagement to inpatient care if needed, or if not, to transitional housing or permanent housing with community supports and successful community integration
- Services that connect over time and a focus on transitions

Safe Options Support Teams (SOS)

- Multidisciplinary teams using a Critical Time Intervention approach to provide intensive outreach, engagement, and care coordination services to unsheltered individuals until in stable housing (approximately 9-12 months)
- Teams include licensed clinicians, case managers, registered nurses, peers, and access to physician consultation
- Building to 30 teams statewide, including upstate and downstate localities

SOS Teams: Data from NYC Teams

Current outreach focus is on subway transit stations, but SOS referrals can be made by community stakeholders, agencies, family, and other supports. Upon receiving a referral, SOS Teams respond within 24-48 hours to initiate outreach.

Data collected 4/25/22 – 11/24/23:

- Over 11,690 SOS outreach encounters in NYC
- Over 2,100 referrals from hospitals, SPOA, NYC Department of Homeless Services (DHS), Street Outreach Teams, and community stakeholders
- 1,221 individuals enrolled in SOS program have had 28,961 encounters
- 345 individuals accepted temporary residence in Safe Haven or shelter beds through NYC DHS
- 228 individuals have obtained long-term/permanent housing



NY State Transition to Home Inpatient Units (THU)

- The State Hospital Transition to Home Units (THU) currently includes 50 inpatient beds at Manhattan Psychiatric Center
- THUs work with both voluntary and involuntary patients and accept patients directly from the emergency room or after a very brief stay to medically stabilize the patient's physical health needs
- The first of the two units opened in November 2022 and the second unit opened in March 2023
- Preliminary data as of 10/18/2023 shows:

Circumstances of presentation*:

- ❖ 52% Brought to ER by EMS/NYPD
- ❖ 18% Brought on a Removal Order
- ❖ 16% Self presented to psych
- ❖ 9% Self presented to medical ER
- ❖ 4% Accompanied by care team

Previous Outpatient Services:

- ❖ 58% connected to/known by a homeless outreach service
- ❖ 43% connected to/known by intensive outreach team
- ❖ 22% no service connections

Discharges (25)

- ❖ 56% still in housing
- ❖ 72% still engaged in care

Housing Units in NYS

48,786 operational units of housing currently:

- Apartment Treatment: 4,650
- Community Residence (CR): 5,799
- CR-SRO: 3,432
- SP-SRO: 10,688
- Scattered-Site Supportive Housing: 21,435
- Other: 2,782

OMH projects over 2,300 more beds opening this FY, with over 8,200 in the pipeline over the next 5 years.



ESSHI

- 8,211 total units funded across all populations
- 2,314 (28.2%) of those units are designated for individuals with SMI
- Housing Agencies may continue to develop SMI housing through ESSHI, in addition to the new OMH-funded opportunities

Investing in OMH Housing



Opportunities from the 2023/24 budget:

- RFPs have already been issued for over 1,000 units of new housing
- RFPs for remaining 3,500 units are scheduled to be issued by end of the year
 - Some beds will be set aside for children's programs
- RFPs for 500 CR-SRO units and 750 SP-SRO issued in November
- Remaining Supportive Housing Units (~300) and Treatment Apartment units (~130) will be issued in December
- RFPs for Adult Short-Term Transitional Housing programs will be issued in December

Comprehensive Crisis System Expansion Updates

Mobile Crisis Response

- Coverage for 11 uncovered counties
- Initiatives to achieve 24/7 availability
- Lifespan emphasis (children, adults, families)

Crisis Residences

- Updated guidance
- Continue licensing new and existing programs; currently 19 licensed

Crisis Stabilization Centers

- 22 in development – begin licensing and opening

Comprehensive Psychiatric Emergency Programs (CPEPs)

- RFP for 12 new CPEPs
- Peer Bridger initiative
- New guidance on evaluation and discharge practices

988 Suicide & Crisis Lifeline: Stats Through 9/2023



Total Volume

243,080 Calls Received and answered
206,563 Answered In-State



Metrics

85% In-State Answer Rate



Average Answer Speed
17 seconds



Average Time on Calls
14min 19sec



Outcomes

- 41% Resolved with Counseling
- 38% Resolved with counseling & community information
- 6% Resolved with referral to outpatient treatment or community resources
- 0.3% Referred to the hospital
- 0.2% Emergency transferred to 911

Daniel's Law Task Force

- Convened first meeting on August 30, 2023
- Created via Chapter 57 of the laws of 2023, the Daniel's Law Task Force was established in order to:
 - identify potential operational and financial needs to support trauma-informed, community and public health-based crisis response and diversion for anyone in the state experiencing a mental health, alcohol use, or substance use crisis.
 - review and recommend programs and systems operating within the state or nationally that could be deployed as a model crisis and emergency services system.
 - identify potential funding sources for expanding mental health, alcohol use and substance use crisis response and diversion services.
- First stakeholder engagement session was convened virtually on November 20th
- Coordinating in person stakeholder engagement opportunities beginning in January 2024 to be convened around the State.

988 Resources



- [New York 988 Webpage](#)
- [New York 988 Listserv](#)
- [SAMHSA 988 Partner Toolkit](#)
- [988 Lifeline](#)
- [988 Community Education and Awareness Toolkit](#)



What's New in Peer Services

Peer Workforce Development

The **OMH Office of Advocacy and Peer Support Services (OAPSS)** aims to have the following: a trained, credentialed peer workforce robust enough to meet the demand for peer support in a variety of community-based and OMH licensed programs, a defined discipline of Peer Support Services, and a career ladder for individuals with articulations of lived-healing that affords full-time employment at a competitive salary. To that end, OMH has created:

- A **certification and credentialing process** for peer specialists, youth peer advocates, and family peer advocates with an online database for employers and certified peers to verify certification or credential status
- **Specialization tracks** for peer workers to further their knowledge and skills to work in various settings
- The **NY State Workforce Peer Advancement and Mentoring Network** that aims to provide leadership, support, advocacy and best practices for all peer specialists in NYS
- The **Peer Support Services Technical Assistance Center (PeerTAC)** to deliver training, technical assistance and consultation to mental health organizations serving people across the lifespan

Academy of Peer Services Specialization Tracks

- The Specialization tracks, funded through time-limited federal dollars, provide instruction and activity-based learning to certified peer specialists who want to obtain an additional endorsement in any of the specialty tracks.
 - Non-certified participants are welcome but cannot apply for the NYPSCB specialization endorsement.
- Available online and in-person
- Designed to support learning using interactive and experiential activities
- Specialization Track Endorsement is placed on an NYCPS's certification and can be a helpful tool for job seeking and prospective employers
- Available: <https://www.academyofpeerservices.org/>



PeerTAC



The Peer Support Services Technical Assistance Center (PeerTAC) provides training, technical assistance, and ongoing support to mental health organizations in the successful inclusion of Peer Support Services across the lifespan.

PeerTAC promotes the inclusion of:

- New York (Adult) Certified Peer Specialists (NY-CPS)
- Credentialed Family Peer Advocates (FPA-C)
- Credentialed Youth Peer Advocates (YPA-C)

Helps mental health organizations to:

- Understand what is unique about the peer support workforce
- Cultivate an organizational culture that supports peer staff
- Recruit, hire, onboard, and retain qualified peer support staff
- Supervise peer support staff in alignment with peer values and practices

PeerTAC



Tools & Resources

- PeerTAC Website
- Ask PeerTAC
- FAQ, Glossary, Directory of Peer-Run and Family Peer-Run Organizations
- Curated Articles
- Searchable Database of Resources
- Organizational Self-Assessment (OSA)
- Supervision Self-Reflection Tool

Website:

<https://peertac.org>

Reach us by Email:

info@peertac.org

Join our Listserv:

<https://confirmsubscription.com/h/y/CFD10914D119AAF1>





New York Peer Advancement Network (NY-PAN)

Build a sense of community and shared experience

Connect peer supporters and aspiring peer supporters with mentors

Statewide networking meetings and opportunities

Cultivate and highlight career pathways for peers

Virtual hub of resources

Increase access to peer support job opportunities

Online job board

Workforce training and development

Focus on reaching underserved communities

Ensure fidelity to peer support values

Practice guidelines

Advisory board

New Job Board

Find qualified peer specialists today!

Reach New York State Certified Peer Specialists, Youth Peer Advocates, Family Peer Advocates, and more. Post your peer support job and find your next great hire!

PEERSUPPORTWORKS.ORG/JOBS

Funded by
New York State Office of Mental Health

Sign up for updates: peersupportworks.org/NY

Family Peer and Youth Peer Statewide Infrastructure Grants

- NYS OMH awarded 5-year contracts to Families Together in NYS and Youth Power (at Families Together in NYS) to support the family peer and youth peer statewide infrastructure.
- **Activities include:**
 - family education and empowerment
 - training and technical assistance to providers and state/local government to ensure family involvement and input
 - opportunities for networking of peer support service providers
- A major priority is the development of both a Youth Advisory Board and Family Advisory Board to provide feedback and input to OMH.





Integrated Care

Integrated Care for Complex Needs

- Specialized services across clinics, intensive services, and wrap around teams that serve individuals with dual diagnosis of mental health and substance use, developmental disability, or physical health needs
- Integration with all crisis services
- Training and practice that ensures successful integration
- Peer services integrated throughout
- Health equity – continue to examine our practices, policies, processes and attitudes to uncover disparities in care

Individuals with Mental Health & I/DD Needs

- **SUNY Upstate Specialized Multi-Disciplinary Inpatient program:** Supports children dually diagnosed with developmental disabilities and a mental health disorder
- **Intensive Treatment for Children with Autism and Neurodevelopmental Disorders (ICAN) at Sagamore PC:** Treats individuals ages 10-18 with neurodevelopmental disorders using structure, consistency, and predictability
- **Care Pathways:** Utilizes evidence-based strategies (i.e., Applied Behavior Analysis, Structured TEACCHing, Naturalistic Developmental Behavioral Interventions) and specialized supplies
- **Home Based Crisis Intervention (HBCI) teams** – two teams will be specifically focused on youth in crisis with both mental health challenges and developmental disabilities. HBCI is a short-term intensive service serving youth and their families when the youth is at risk of psychiatric hospitalization
- **Transitional Housing and CTI Teams:** OMH is meeting with OPWDD on proposal to develop transitional housing linked with a CTI team for individuals with co-occurring I/DD and MH to improve flow through the system
- **Project ECHO:** OMH partnered with OASAS, MCTAC, the Center for Practice Innovations (CPI), and NYC DOHMH to create an interactive training series, Making the Connection: Conversations Around Integrated Care

Individuals with Mental Health & SUD Needs

- Increasing intensive integration of addiction services into existing and new programs (ACT, OnTrack NY, Crisis, etc.)
- OMH and OASAS are exploring options for **incorporating addiction services in school-based mental health clinics**
 - Currently, there are over 1,000 school-based mental health clinics in New York State
- NYS is advancing an **enhanced Medicaid rate for the provision of Multidimensional Family Therapy**, an evidence-based practice that treats co-occurring disorders
 - MDFT transforms lives through family-centered treatment for youth with mental health and other challenges
 - Gives parents hope and tangible help and enables youth to create a positive lifestyle
 - MDFT serves youth with a wide array of challenges between the ages of 10-26 and their families
- **Center for Practice Innovations (CPI) – Focus on Integrated Treatment (FIT):** Provides training, support, and consultation to behavioral health providers across New York State seeking to implement integrated treatment for co-occurring mental health and substance use disorders
- **CASAC Credential for mental health practitioners:** In partnership with Stony Brook University
- OMH has been working since 2018 in partnership with OASAS on several key initiatives to enhance capacity of the public mental health system to identify and treat opioid use disorders and has launched several large-scale initiatives through the **Psychiatric Services and Clinical Knowledge Enhancement System (PSYCKES) team**

Certified Community Behavioral Health Clinics

- Certified Community Behavioral Health Clinics (CCBHC) blend mental health, addiction, and physical health treatment services and aim to make it easy to access these services
- Individuals with co-occurring mental health and intellectual/developmental disabilities is also an important population for service for CCBHCs; OMH plans to develop training and technical assistance to support the new and existing CCBHCs in providing care to this population
- CCBHCs focus on core services such as crisis mental health services; screening, assessment and diagnosis; patient-centered treatment planning, health screening, targeted care management, psychiatric rehabilitation services, peer support and family support services

Demonstrated Outcomes!

- 24% of individuals new to a CCBHC had not received a BH service from any provider in the previous year
- 62% of individuals served in CCBHCs were SMI and 66% had a co-occurring diagnosis
- CCBHCs have increased the percentage of OUD clients receiving MAT each year of the demonstration: **2018: 64%, 2019: 70%, 2020: 71%**
- Reduction in ER Visits for Behavioral Health (MH and SUD) – Year one decrease of 26%, Year two a further 7% reduction
- Reduction in BH Hospitalizations – Year one decrease of 27%, Year two a further 19% reduction

Opportunity in 2023/24 Budget:

- RFP for 13 new CCBHC programs (phase 1) issued in July 2023
- RFP for remaining new CCBHC programs (phase 2) planned to be issued in Q1 2024
- This expansion of 26 new CCBHCs will triple the number of CCBHCs in the State from 13 to 39, and will serve approximately 200,000 New Yorkers

Inter-Office Coordinating Council

- The Inter-Office Coordinating Council (IOCC), is a collaborative entity created to improve continuity and coordination of services for people with multiple needs by the three mental hygiene state government agencies, OMH, OASAS, and OPWDD
- The IOCC's original aim when it was first created under New York State Mental Hygiene Law was to foster integration and alignment of agency structures and functions in order to improve patient outcomes
- Over the past year, Commissioners Sullivan, Cunningham, and Neifeld have renewed their commitment to the IOCC processes and have shown an unwavering partnership to develop services and regulations that better serve individuals in the state with co-occurring conditions and needs that cross our systems





Mental Health Workforce Development

Workforce Development Budget Initiatives

4% COLA for community mental health workforce; 5.4% COLA last year

\$14 million for mental health loan repayment for mental health professionals

Rate increases in ambulatory and inpatient services

Continuing 2-year \$104 million investment in residential services

DOH Community Liaison Worker

Workforce Development Initiatives Underway

Scholarships and recruitment pipelines with SUNY and CUNY

Development of a mental health paraprofessional

Training and support for Evidence Based Practices

Build partnerships with schools and raise awareness of mental health careers

New OMH Office of Workforce Development



Training Initiatives

Training Initiatives

- **Center for Practice Innovation (CPI):** Supports OMH's mission to promote the availability of evidence-based practices to improve mental health services, ensure accountability, and promote recovery-oriented outcomes for consumers and families
- **Technical Assistance Centers - CTAC, MCTAC, PTAC:** Provides training and educational resources to support all mental health, addiction, and child welfare agencies in New York State, as well as infant and early childhood mental health providers throughout New York City
- **Investments in new center** for the implementation of Evidence Based Practices for Children and Youth
- **OMH plans to create a user-friendly web page** on our OMH website for provider agencies to easily identify the breath of training opportunities available and access the trainings right for them



Discussion, Comments & Questions

Comments or Questions?

In-Person Attendees

Virtual Attendees

Thank You!

**Comments and questions will be
accepted through December 31, 2023**

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