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OMH NEWS



Office of
Mental Health

ANN SULLIVAN, MD / Commissioner

Fall 2021



Investing in the future of mental health care in New York State

“Mental health and well-being are fundamental to our collective and individual ability as humans to think, emote, interact with each other, earn a living and enjoy life,” according to the World Health Organization in its 2013 report, *Investing in Mental Health: Evidence for Action*.

“As the ultimate guardians of population health,” the report adds, “governments have the lead responsibility to ensure that needs are met and that the mental health of the whole population is promoted.”

Meeting this responsibility is a vital part of the mission of the Office of Mental Health. As New Yorkers continue to deal with the effects of the COVID-19 pandemic, the resources of mental health professionals are being called on as never before.

In this issue, we'll discuss how OMH is responding by strengthening the state's mental health system by investing in research, its workforce, innovative programs, and its physical infrastructure.

We welcome your comments at: omhnews@omh.ny.gov.

INVESTING IN
MENTAL HEALTH:
EVIDENCE FOR ACTION



For more information, visit:
https://apps.who.int/iris/bitstream/handle/10665/87232/9789241564_618_eng.pdf.

Research: Groundbreaking NKI project to advance study of the human brain



In October, OMH announced that its Nathan Kline Institute (NKI) received a \$3.7-million research grant from the National Science Foundation (NSF) to support the development and implementation of an ultra-high field magnetic resonance imaging (MRI) system that will be one of the most powerful neuro-imaging systems in the world.

Nathan Kline Institute in Orangeburg.

The pioneering 9.4 Tesla MRI system – known as “9.4T” – will allow scientists to safely and non-invasively study the human brain structure, function, and metabolism at the highest resolutions currently achievable. The project will bring together neuroscientists and engineers from academic institutions and industry throughout the tri-state area to collaboratively reach a new level in brain science and will provide the tools and training needed to pursue it.

The 9.4T head-only system will be able to collect images of the human brain with unprecedented quality and image resolution, 1,000 times better than the 3T systems that are the current standard in clinical practice. This difference in resolving power is equivalent to the difference between a magnifying glass and a microscope. When development of the 9.4T system is completed, the team of scientists hope that advances in the understanding of the brain will lead to new treatments for psychiatric illness by bridging the gap between micro- and macro-scale neuroscience.

“This project, and the research being conducted by NKI will help us to better understand mental health, illness and the human brain,” said OMH Commissioner, **Ann Sullivan**, MD. “It is truly transformative and demonstrates why OMH’s research facilities are world-renowned for their groundbreaking work.”

“We are very proud of the scientific vision and collaborative teamwork that led to the successful funding of this project,” added Executive Director of the Nathan Kline Institute, **Donald Goff**, MD. “When the development stage is completed, this MRI system will serve as a regional center to advance research into psychiatric illness and its treatment.”

Partners in the collaboration include engineering and neuroscience programs at Columbia University, New York University, and Cornell University and New York State industries, including General Electric Global Research and Communications Power Corp. The system will be housed in a new ultra-high-field imaging laboratory being built by the OMH NKI campus.



For more information about the NSF award, visit:
https://www.nsf.gov/award-search/showAward?AWD_ID=2117823&HistoricalAwards=false.

GERI: NKI's Geriatric Psychiatry Division: 35 years of service to the community and exciting Alzheimer's research



Staff of NKI's Geriatric Psychiatry Division, along with three psychiatry residents from the University of Pisa in Italy.

From left: Chelsea Reichert Plaska, Antero Sarreal, Manuel Glauco Carbone, Claudia Tagliarini, Raymundo Hernando, Anne Schatz, Giovanni Pagni, Vita Pomara, and Nunzio Pomara.

Tagliarini, Pagni, and Carbone spent six months with the GERI Division as visiting research scientists from 2019-20.

The Geriatric Psychiatry Division (GERI) at the Nathan Kline Institute has made significant contributions in the field of geriatric psychopharmacology, as well as late-life depression and Alzheimer's disease.

Founded in 1986 by **Nunzio Pomara**, MD, the team includes **Raymundo Hernando**, MD, and **Antero Sarreal**, MD; who have been with the GERI for 30 and 14 years, respectively. They're the friendly faces who see patients and coordinate ongoing research studies. Administrative Assistant **Vita Pomara**, who ensures that everything runs smoothly, is celebrating 25 years of service. Post-Doctoral Fellow **Chelsea Reichert Plaska**, PhD, has been with the division for nine years, and recently returned full-time after completing her PhD. **Anne Schatz**, BA, is the newest member of the team and has been working as the neuropsychological rater for two-and-a-half years. Many former assistants of the GERI have been inspired by the work done at the division and have continued their education in clinical psychology and medicine.

Memory Education and Research Initiative

One of the division's most exciting programs is the Memory Education and Research Initiative (MERI). Started by Pomara in 2003 with the help of **John Sidtis**, PhD, of the Brain and Behavior Lab, and **Lisa Willoughby**, PhD – a former post-doctoral researcher for the Geriatrics Division – the goal of the program is to identify and provide early diagnosis for Alzheimer's Disease. The MERI Program is open to individuals 50 or older with subjective memory complaints, a family history of Alzheimer's, or concerns about future changes in cognition.

"The risk of Alzheimer's is greatest in individuals who are 65 and older," Pomara said. "But subtle brain-related changes associated with Alzheimer's may begin as early as the 30s. Our program encourages residents to join early in the aging process, to establish a baseline for cognition and memory, and to monitor cognitive functions annually."

Collection of longitudinal data will facilitate understanding of early changes in cognition and biological markers associated with Alzheimer's as a function of age and potentially help in early diagnosis and in the development of more effective strategies for the prevention and treatment of Alzheimer's and related disorders.

MERI has blossomed during the past 18 years and now follows more than 1,300 individuals from Rockland County and the surrounding areas. Community members who take part in MERI receive an extensive three to four-hour evaluation, which includes a comprehensive neuropsychological battery, a clinical evaluation, and a psychiatric assessment by Pomara.

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Small renewed financial support from the Rockland County Department of Mental Health in 2021 enabled this service to better accomplish its clinical and educational goals. MERI now offers virtual education events and Brain Health Days, which provide updates on Alzheimer's, brief virtual memory screenings, and local resources to older individuals who are not able to commit to the full MERI evaluation.

"During the COVID-19 pandemic, the GERI team formed an essential community of individuals who are interested in helping advance science and are willing to get 'cognitive check-ups,'" Pomara said. "We reached out to members of the MERI community to obtain information about their pandemic experience."

As part of the evaluation, the team administered surveys to assess the impact of the pandemic on mood, stress, sleeping habits, lifestyle, and more recently, on indices of social connectedness and isolation. "We're continuing to examine the potential adverse impact of this unique time on cognition and mood and hope to experimentally look at the impact of social connectedness in the future," Pomara added.

Ground breaking Alzheimer's research

Dr. Pomara was recently awarded a federal research project grant that will tie together his 35-plus years of research on depression. Data suggest that depression is associated with increased risk for Alzheimer's, both for early and late-life major depressive disorder. Yet the mechanisms for this association are still poorly understood. Pomara and his team have made progress toward clarifying some of these mechanisms.

"We found that cognitively normal depressed older adults showed reductions in levels of CSF Abeta42, a protein and biological variable associated with risk for Alzheimer's, comparable to those observed in Alzheimer's," Pomara said. "Meanwhile, more severe depressive symptoms were associated with much lower CSF Abeta42 levels."

In Alzheimer's, lower CSF Abeta42 levels have been shown to be related to increased brain amyloid beta deposits and plaques. Increased brain amyloid plaques – a hallmark of Alzheimer's pathology – have been reported to be an early event or risk factor for the subsequent development of Alzheimer's preceding the appearance of cognitive decline and other clinical symptoms by more than 20 years.

An increased in brain amyloid burden is also believed to contribute to the formation and spread of tau pathology or neurofibrillary tangles – also hallmarks of Alzheimer's pathology. The latter has been shown to be causally related to the loss of nerve cells and their connections and to the emergence of progressive memory loss and confusion associated with Alzheimer's.

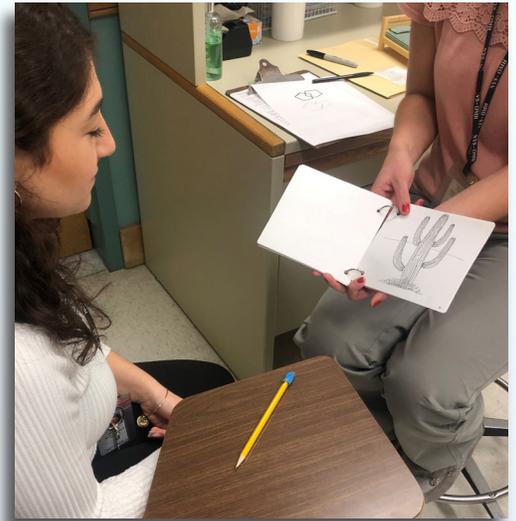
"This reduction in CSF Abeta42 that we found in older adults with depression, especially in those who were more severely depressed, may reflect increased brain amyloid plaques and that this factor might contribute to the increased risk for Alzheimers associated with this disorder," Pomara said. "We also found that, in contrast to what happens in Alzheimer's, where the CSF Abeta42 levels remain low or decline even further during longitudinal follow up, in older individuals with depression once the depression improved, CSF Abeta42 returned to normal levels."

Treating depression and reducing Alzheimer's risk

These observations suggest that a more effective treatment of depression, leading to a full resolution of symptoms, may result in a normalization of Abeta levels and reduce the risk for Alzheimer's associated with depression.

"Although our preliminary results were relatively strong, they were based on an observational study," Pomara said "Therefore, we'll conduct research to see if we can reproduce these results in conjunction with a very rigorous double-blind, placebo-controlled antidepressant study."

The target population will be older individuals with significant depressive symptoms who may be on ongoing antidepressant treatment or currently not on any antidepressant. This project should be of special interest to those at increased risk for Alzheimer's because of a family history."



For more about the GERI program's research, visit <https://www.nki.rfmh.org/research/geriatric-psychiatry>.

Workforce: Federal funds to help with recruitment and retention



In October, **Governor Kathy Hochul** announced that OMH had secured \$21 million in federal funds to improve recruitment and retention of mental health professionals.

The funding was available through two federal programs – the Coronavirus Response and Relief Supplemental Appropriations Act of 2021 and the American Rescue Plan Act of 2021.

"The COVID-19 pandemic has placed an enormous strain on all New Yorkers," said Governor Hochul. "This funding will support our behavioral health workforce and increase access to care, helping to ensure that everyone in our state who needs assistance and treatment can get it."

To determine how to best make use of these funds, OMH hosted multiple meetings with more than 700 stakeholders to solicit input and identified workforce investment as a key priority.

"Securing these federal funds enables OMH to enhance, expand and sustain community-based mental health services by providing a combination of targeted rate increases and flexible workforce recruitment and retention funds," added Commissioner Sullivan. "These funds will dramatically increase capacity and help ensure that every community has the resources it needs to assist their most vulnerable residents."

Eligible outpatient and community support providers can use the funding at their discretion through these key spending categories:

Career development and training:

- Creation, promotion, enhancement of internship, fellowship and other career development programs.
- Collaborations with academic and policy institutions to develop strategies for training of staff.
- Employee engagement and workforce development strategies such as developing or acquiring training curricula, funding registration fees, and covering expenses for employees to attend or provide training.

Recruitment and retention incentives:

- Retention and hiring bonuses.
- Longevity pay.
- Retirement contributions and other fringe benefits.
- Differential pay.
- Hazard pay.
- Relocation incentives.

Educational expenses:

- Tuition fees for new/existing staff, including college-level professional development courses and continuing education.
- Exam and application fees for new and existing staff.
- Courses related to cultural competence and diversity training.
- Registration fees for conferences.



For information on these federal programs, visit: <https://www.acf.hhs.gov/occ/data/2021-crrsa-60-day-reports-states-and-territories>; and: <https://www.congress.gov/bill/117th-congress/house-bill/1319/text>.

Modernization: New chapters for South Beach and Central New York psychiatric centers



South Beach Psychiatric Center

Nine years ago, Superstorm Sandy devastated buildings in many communities along the Atlantic Coast – including South Beach Psychiatric Center on Staten Island.

South Beach staff safely evacuated its 350 clients in time, but a storm surge of nearly 15 feet caused extensive damage to many of its buildings. Rushing water and debris disabled the electrical, heating, and cooling systems; caused underground pipes to rupture; and tore apart floors and even roofing.

OMH and the Staten Island community were determined to build back and build better. In October, they celebrated the opening of a new 230,000-square-foot, five-story inpatient building.

“This is a wonderful investment in the health of the residents of New York,” said Commissioner Sullivan, during the ribbon-cutting. Described as “bright,” “airy,” and “a symbol of hope,” the new building will provide patients and staff with a state-of-the-art facility with features that have been shown to support patient recovery and staff satisfaction – such as large windows to provide natural light and excellent views, and landscaping consisting of native grasses and trees.

The new building centralizes locations for therapeutic programs, social interaction, recreation, fitness, and education. It was constructed with a green roof for natural cooling, stormwater mitigation, and LEED-sustainable compliance.

Unit desks are centrally located, open, and have clear sight lines for allowing better engagement between staff and patients. Consultation and interview rooms are located on the unit for individual staff and client interactions, allowing for privacy and therapeutic engagement. Improvements to other areas, such as the main lobby, make it more welcoming while providing all the safety and security features of a secure inpatient building.

The new building also features additional rooms and space for programming, activities, and visits from friends and family; and a “Promenade” that includes space for a salon, café, socialization areas, and a thrift shop.



Commissioner Ann Sullivan, MD, speaking at the South Beach ribbon-cutting ceremony.

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Outside, modifications were made to the campus that are designed to resist flooding, such as relocating critical infrastructure and utilities 30 feet above sea level. A new parking lot incorporates flood mitigation measures and new drainage systems have been installed throughout the campus.

The new inpatient building follows the opening in 2014 of a new Central Services Building, which replaced critical infrastructure that was also destroyed by Superstorm Sandy.



Work to start soon at Central NY Psychiatric Center

Central New York Psychiatric Center

Meanwhile, in the Oneida County town of Marcy, the Central New York Psychiatric Center and Secure Treatment and Rehabilitation Center campus will undergo a \$40-million modernization, a project in partnership with the Dormitory Authority of the State of New York.

Central New York Psychiatric Center provides inpatient services for inmates in custody of the state Department of Corrections and Community Services and pre-trial detainees from 25 upstate county jails, as well as restoration services for individuals found unfit to stand trial. Its Secure Treatment and Rehabilitation Center provides residential treatment to individuals ordered confined under New York's Sex Offender Management and Treatment Act.

More than 100,000 square feet of the facility will be renovated, including its infrastructure. Building 77 and the Building 39 Medical Suite will be renovated, including the campus pharmacy and kitchen. The project will include upgrades to the electrical, lighting, data, and security systems, HVAC replacement, selective demolition, and asbestos and PCB abatement.

The work includes the installation of new boilers, chillers, pumps, and a new chilled water and heating water distribution system. Both buildings will be occupied through the duration of construction.

"We have an obligation to ensure that all state-run facilities are meeting the needs of the New Yorkers they serve," Governor Hochul said in announcing the project in October. "By investing in this critical infrastructure update, we will ensure these facilities can continue to safely and more adequately serve both the workforce employed at this campus and the individuals housed there well into the future."

"These much-needed renovations will ensure that individuals in the justice system who need mental health services can get the treatment they need in a safe and secure therapeutic environment," added Commissioner Sullivan. "When individuals are treated in a supportive and healing environment, we know that they are more likely to do well, not return to prison, and become productive members of their community upon release."

Suicide prevention: Saving the lives of our state's returning military veterans



With the approach of Veterans Day in New York State comes a sorrowful reminder that deaths by suicide among military service members have increased at an alarming rate in the past several years – and had been growing even before the start of the COVID-19 pandemic.

Research by the New York State Health Foundation found that New York State veterans have been dying by suicide at a much higher rate than the overall state population. The foundation said that of particular concern is the increasing rate of suicide among young veterans.

OMH's **Suicide Prevention Center of New York (SPCNY)** – the lead entity in suicide prevention in the state – is taking action to provide veterans with the help they deserve. SPCNY provides technical assistance that advances the New York State Suicide Prevention Plan. Its mission is to promote, coordinate, and strategically advance suicide prevention throughout the state with the aim of reducing suicide attempts and deaths among New Yorkers.

“Too many of our brave men and women are finding themselves at a point of crisis,” said **Jay Carruthers, MD**, Director of the OMH Office of Psychiatric Services and SPCNY. “After risking their lives overseas, we owe them as a society to help them address their mental needs once they return.”

While there is no single solution to preventing suicide, SPCNY combines a clinical and public health approach in its work. SPCNY has several current initiatives underway to reach out to veterans in our communities.

New York State Governor's Challenge

This program, which started in March 2021 focuses on three areas:

- Identifying service members, veterans, and families, and screening them for suicide risk. Personnel from the New York State Division of Veterans' Services (DVS) have received such training and are required to develop their own individualized, localized, and up-to-date mental health referral plan.
- Promoting connectedness and improved care transitions by expanding the Expiration of Term of Service (ETS) program, which allows military personnel to set their own date for being released from active service. This builds a much-needed bridge between the US Department of Veterans Affairs, the US Armed Forces, and the states and communities where veterans begin new lives. It also engages the destination community and

NEW YORK STATE GOVERNOR'S CHALLENGE



For more information on the New York State Governor's Challenge, visit: <https://ny.governors-challenge.com>.

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the chain-of-government from the federal to the local level to bring all potential stakeholders into a cohesive and coordinated network focused on the success of each program participant. ETS sponsorship leaders are currently coordinating with veterans' services leaders in New York City and Suffolk County, joining forces with the Suffolk's Joseph P. Dwyer Veterans Peer Support Project to enhance the focus on returning veterans.

- Developing content and resources for family members with a loved one who is a veteran and where firearms are present. Studies have shown that availability of firearms can be a factor in deaths by suicide. The initiative is using a grant from the Health Foundation to gather this information and include it in a microsite, housed on the Governor's Challenge website. Launch of the website is scheduled for early 2022. The Health Foundation is encouraging a workgroup led by SPCNY and consisting of content-area experts from the VA, local DVS, and subject-matter experts to pursue additional funding to develop a workshop for families.

New York State CARES UP Initiative

Recent studies have indicated that first responders are more likely to die by suicide than in the line of duty. In 2017, 103 firefighters and 140 police officers across the United States died by suicide. The Firefighter Behavioral Health Alliance reported that, in 2019, 119 firefighters and 20 emergency medical technicians died by suicide.

SPCNY launched the **CARES UP Initiative** (Changing the Conversation, Awareness, Resilience, Empower Peers, Suicide Prevention/Skills Building for Uniformed Personnel), which focuses on suicide prevention efforts for uniformed personnel, including law enforcement, firefighters, emergency medical service members, corrections officers, and military veterans. CARES UP will receive \$1 million annually from New York State to offer suicide prevention and resiliency training, create targeted media awareness campaigns, and present grant opportunities to provide uniformed personnel departments throughout the state with funding to increase prevention efforts and wellness programming.

SPCNY is promoting a CARES UP webinar series titled "First Responders Behavioral & Mental Health Wellness: Lessons From The Field," featuring **Drew Anderson**, PhD, FF/EMT, an Associate Professor of Psychology at the State University of New York at Albany.

Attendees will learn about the high prevalence of behavioral and mental health issues in first responders, as well as understand protective factors that boost behavioral and mental wellness and possible ways to help peer first responders struggling with behavioral mental health issues. Upcoming sessions will be on November 10 and 15 and December 20 and 27.™



SPCNY website resources

Updates to the SPCNY website include resources created by the Helping Those Who Help Others Steering Committee, which focuses on increasing efforts to combat suicide of uniformed personnel, including military personnel. There's also an archive of Helping Those Who Help Others webinars and trainings that are focused on veterans and military personnel.

For information, visit: <https://www.preventsuicideny.org/wp-content/uploads/2021/09/HTWHO-Resources.pdf>.

New York State
CARES UP
2021 FALL WEBINAR SERIES

Changing the Conversation | Awareness | Resilience | Empower Peers | Skill Building/Suicide Prevention
for
Uniformed Personnel

Webinar Title:
First Responder Behavioral & Mental Health Wellness: Lessons from the Field

Webinar Goals:

- Provide reasons why we see more behavioral/ mental health issues in first responders
- Describe protective factors that boost behavioral/ mental health wellness
- Describe possible ways to help first responders struggling with behavioral / mental health issues

Presented by:
Drew Anderson, Ph.D., FF/EMT is an Associate Professor of Psychology at the University at Albany-SUNY

For information on the CARES UP webinar, visit: <https://www.preventsuicideny.org/wp-content/uploads/2021/10/CARES-UP-Flyer.pdf>.

Resources: Help for Afghan refugees arriving in New York State



As New York State welcomes refugees from Afghanistan, it's critical that mental health providers be aware of the circumstances that the refugees were likely affected by, and best-practice approaches to addressing them.

As the refugees started to arrive, OMH recognized that mental health providers were going to play integral roles in providing the refugees with help. It wanted to create useful, informational and supportive resources that were tailored specifically to the providers who would be working with these individuals, as well as their unique needs.

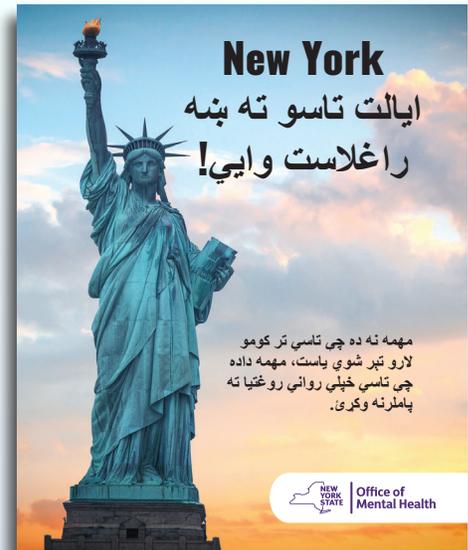
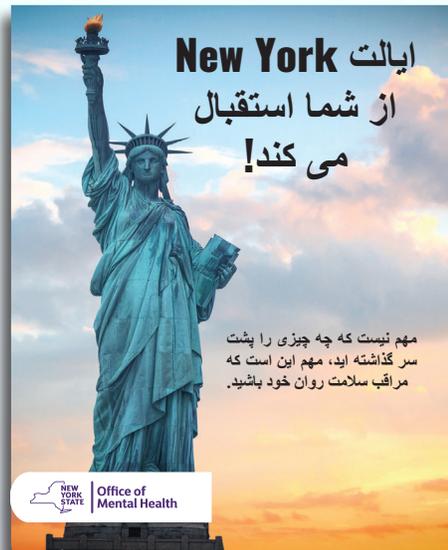
As a result, OMH has prepared a packet of resources for mental health providers and refugees themselves, providing needed information about accessing high-quality mental health resources and supports.

Culture plays a powerful role in how Afghan people seek, receive, and use mental health services. Staff should be trained to acknowledge and understand relevant cultural traits, such as religion, gender roles, and beliefs about medical care:

- More than half the Afghan population struggles with depression, anxiety, and post-traumatic stress, but less than 10 percent get the help and support they need.
- Afghan refugees may not trust systems of care because of their immigration status, cultural stigma, and lack of education on mental health.
- Afghanistan is a multilingual country with two widely used languages: *Pashto* and *Dari*. Providers must make sure their signage and public health messages are available in these languages.
- Gender roles, religion and family dynamics are cultural traits of the Afghan population that providers must be knowledgeable of.
- Service providers should also ensure access to face-to-face interpretation, phone or video interpretation, and written translation.

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Materials were printed in the two commonly spoken languages in Afghanistan, Dari (center) and Pashto (right), as well in Arabic and Urdu. For more information, visit: https://omh.ny.gov/omhweb/cultural_competence/exec_order_26/index.html.

OMH is focused on fostering relationships with organizations and entities that are experts in providing vital services and supports to marginalized communities. OMH has heard from other organizations and agencies currently serving Afghan refugees that these resources are extremely beneficial and allow for an increase in sharing information.

Continuing collaboration and outreach efforts

These resources are part of OMH's continued efforts to enhance educational opportunities for providers, recipients of mental health services, and community members at-large. OMH is committed to creating and disseminating resources that provide important information about special populations as well as available resources that support these communities.

Creation and dissemination of these resources is part of the ongoing collaboration between OMH and the New York State Office for New Americans (ONA), which was created in 2012 to help new Americans in accessing and navigating a variety of free services and supports their inclusion as an integral part of New York State's diverse cultural fabric. The office provides answers to immigration and naturalization questions, and offers referrals to free legal help.

OMH understands the importance of creating materials and resources that address the unique needs of special population groups and turns to stakeholders and subject-matter experts to assist with the creation of such resources. It recognizes the importance of ensuring special population groups and the providers serving them understand the unique challenges and barriers they face and are knowledgeable of available resources and supports.

These efforts are in direct alignment with OMH's mission to ensure all New Yorkers have an equal opportunity for mental wellness, and that services and policies are put into place to eliminate disparities in access, quality, and treatment outcomes for historically marginalized, underserved, and underserved populations.™



For information on the NYS Office for New Americans, visit: <https://dos.ny.gov/office-new-americans>.

Future: Discussing what's on the horizon at the Commissioner's Virtual Town Hall



On October 28, Commissioner Sullivan conducted a Statewide Virtual Town Hall, providing the public with an opportunity to learn more about OMH's vision for the future, including progress on top policy and planning priorities.

Taking part were more than 1,000 representatives advocacy organizations, county and local mental health departments, and providers of mental health services. Questions concerned the COVID-19 pandemic, vaccination, telehealth, housing, recruitment, integrating services, capacity, the state budget, access to services, and responding to mental health crisis calls.

Top left: Commissioner Sullivan providing updates on OMH initiatives, accompanied above by an American Sign Language interpreter. Joining the Commissioner are clockwise: **Thomas Smith**, MD, OMH Chief Medical Officer; **Christopher W. Smith**, PhD, Acting Associate Commissioner, Adult Community Care Group, Division of Adult Services; **Denise Balzer**, LCSW, Director of Crisis Services, Division of Adult Community Care; and **Emil J. Slane**, Deputy Commissioner, Chief Fiscal Officer.

A recording and transcription of the proceedings will be available in the near future at: <https://omh.ny.gov/omhweb/planning/507/>.



NY Project Hope Coping with COVID



The NY Project Hope COVID-19 Emotional Support Helpline is available for people who are experiencing anxiety, stress and depression during the Coronavirus emergency. Call **1-844-863-9314** for free and confidential support.