HOPE. RECOVERY. RESILIENCE.

OMHNEWS



For most of us, personal technology has become an ever-present part of our daily lives. Projects at two OMH psychiatric centers are showing they can be a valuable tool for those in recovery, as well.

Teams at Manhattan Psychiatric Center (MPC) and Hutchings Psychiatric Center (HPC) in Syracuse were seeking to develop a strategy to minimize the potential devastating effects of the COVID-19 pandemic.

"At Hutchings, just like every place else, clients haven't been able to see their families due to COVID restrictions," said **Wendy Thompson**, Director of Rehabilitation Services. "Our plan was to use the tablets for conducting virtual visits for clients with their families."

"We were concerned that the pandemic could setback our work in improving cognitive and social functioning for our clients," said **Christine Bartholoma**, PhD, MPC Director of Psychology and Psychology Training. "We were also concerned that, since many safety solutions within the community now rely on technology, that our clients would be left behind. This would make it increasingly difficult for them to reintegrate successfully back into the community."

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We welcome your comments at omh.ny.gov.



Manhattan PC

Hutchings PC

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Manhattan PC project team. Back row, from left: Dr. Alfred Bagamasbad, Dr. Kaye Arxcis, Janelle Rondeau, Katherine Homa, Zhaoyi Chen, and Deborah Wance. Front row, from left: Amanda Rosinski, Aditi Sarda, Dr. Christine Bartholoma, Melanie Kressel, Rachel Keitelman, and Rachel Czosniak.

The OMH Central Office in Albany had obtained a supply of tablets to be distributed throughout client facilities. The tablets came pre-loaded with some apps, and OMH State-wide Director of Psychology Services, **Sarah Kuriakose**, PhD, BCBA-D, reached out to facilities to ask if any additional apps might be beneficial. The facilities asked for cognitive remediation apps that might engage the clients in mentally stimulating activities like games, music, leisure, and meditations and mindfulness activities; and apps such as Zoom, Webex, and Facetime that could continue to provide a liaison between clients and the community.

Gaining a level of comfort

Once MPC received its tablets, its information technology department provided basic training for psychology staff that included tips on using the technology and how to gain access to the many apps provided. Then they had to address the possibility of a "technology learning curve" for clients.

"Some clients have extended stays in our facility and other institutional settings or have come from impoverished communities that have resulted in limited access to modern computer-based interfaces," Bartholoma said. "So, our goal for these clients was to reduce the avoidance response that is typically associated with fear of the unfamiliar."

While aversion to new technology is not unexpected in older populations, many of the younger clients at MPC were also reluctant. To overcome this, facilitators carried tablets and alcohol wipes throughout the facility, demonstrating how to use the tool and encouraging clients to observe and engage at their comfort levels.

Facilitators also started introducing the tablets to small groups, allowing them to "drop in" to observe and participate at their level of comfort, without having to make a commitment. Those with more interest were offered increased opportunities in groups and individual sessions.

MPC is now running groups with facilitators present to provide support and assurance while offering clients the opportunity to engage in Brain HQ cognitive remediation activities. Individual psychotherapy sessions are being run with patient and provider together using the games and music apps on the tablet to increase engagement, rapport, and computer literacy.

"We've encouraged a safe learning space where 'errors' are considered learning opportunities on a path to mastery," Bartholoma said. MPC clients have responded with varying degrees of interest and openness to new experiences. "By being encouraging but not demanding, we've been able to engage a broader range of our patient population than might have been expected."

At Hutchings, clients progressed quickly from having little or no experience to using Facetime and Webex. They're also using social media sites to connect with family and friends. This was helpful during the holidays.

The tablets are being used by the rehab staff and Peer Specialists on client and residential sites. On client sites, the rehab staff are using them for cognitive fitness games, leisure exploration, coping skills, and music perception groups. Clients can use them for practical matters such as looking up bus schedules and maps to locate apartments for rent, and determining where they can receive follow-up medical and clinical appointments. Clients are also using them for developing independent living skills – such as getting groceries or money management, banking, and budgeting.

Social Workers are using the tablets for telehealth, telecourt, treatment planning meetings, and family visits. Peer Specialists have been using them at residential sites for opportunities to reach out to other Peer Specialists, telehealth with providers, mindfulness, and Zumba exercise. Peer Specialists and rehab staff have also used the tablets for viewing public OMH meetings and webinars.

Preparing for transition

MPC wanted to use the tablets to introduce clients to the concept of telehealth, which would become a crucial part of their building their networks of treatment and support in the community. While the clients welcomed the inclusion of the technology in many ways, some initially expressed concerns about the prospect of their providers not being physically present. So MPC ran initial individual and group telehealth sessions with a second facilitator present with patients in the room. Remote facilitators logged off early and then entered the room and explored emotional and cognitive reactions to the new format. MPC found this was comforting to the clients and allowed them to process the experience in near real-time.

Prior to discharge, clients have been using the tablets to conduct virtual interviews and tours are talking with potential residential placements. After discharge, staff are using the devices for follow-up contacts with clients and their outpatient providers when in-person visits are restricted or not recommended.



Hutchings PC project teams. Standing, from left: **Crystal Bielak**, **Rebecca Flanigan**, **Jeanette Tyler**, and **Lorenz Angeles**. Sitting: **Dr. Anwarul Karim**, **Dr. Teresa Piotrowicz**, and **Dr. Gina Alago-Colon**.



From left: Sherina Hinds, Nathan Baird, Paul Tucci, Dennis Green, and Wendy Thompson.



From left: Karla Murphy, Dr. Lisa Harrell-Delamater, Shaileen Swan, and Jordyn Felice.

"I was surprised that some of the clients were concerned about therapist abandonment," said Psychology Intern **Amanda Rosinski**. "In presenting group facilitators to our groups on the tablets, we were able to introduce the topic of abandonment into the room, both individually and on a group level, and connect that with clients' parallel experiences of past abandonment. This has further helped us to build a stronger rapport and therapeutic relationship with our clients."

Suicide Prevention: Virtual symposium addresses mental health on campus

According to research, college counseling center directors throughout the nation have expressed increasing concern the past several years about the number of students with significant psychological problems, a situation that has grown worse during the COVID-19 pandemic.

To help address this issue, OMH's Suicide Prevention Office presented "Mental Health in the Changing Higher Education Landscape," a 10-day virtual symposium focusing on the mental health of college students, in cooperation with the State University of New York and the New York State College Health Association, an organization dedicated to promoting the health, safety, and well-being of college students.

Sharing vital knowledge

The symposium, which focused on broadening knowledge and enhancing skills regarding suicide prevention and mental health on college campuses, was partially funded by the Substance Abuse and Mental Health Services Administration's Garrett Lee Smith Grant.

NYSCHA 2020 YOU ARE INVITED TO A VIRTUAL Suicide Prevention Symposium MENTAL HEALTH IN THE CHANGING HIGHER **EDUCATION LANDSCAPE DECEMBER 1-10, 2020** Go to www.nyscha.org/annual for ongoing details and registration information. Office of Sponsored by: NYSCHA **Mental Health**

The goal of the 10-day symposium was to increase knowledge and skills regarding suicide prevention and mental health for the college population.

More than 500 attendees heard from college health professionals. student affairs professionals, faculty, and students from throughout New York State. They addressed extensively researched practices that college and universities can take to improve the well-being of college students, as well as provided opportunities to explore ways to increase the care and services offered to meet the mental health needs of students.

Virtual presentations were scheduled each day for attendees to tune into a wide variety of topics, such as addressing anxiety to improve mental health, how to provide gender affirming care to LGBTQ+ students at college health centers for suicide prevention, advanced gatekeeper skills, and supporting someone with COVID-19.

Group discussions were held each day, which allowed presenters and students to break-off into smaller groups to cover important topics like "Suicide Prevention at the Intersection of COVID-19 and Black Lives Matter," "Remote Learning and Mental Health: The Student Perspective," "Mindfulness as a Tool to Support Student Well-Being," and "Suicide Assessment in College Counseling."

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Collabrative outreach

"It was such a pleasure working with NYSCHA and SUNY to help create such a well-rounded, productive and meaningful 10-day event for higher education students and stakeholders in New York State," said **Kara Brodzinski**, the Grant Manager at the Suicide Prevention Center of New York, who assisted with organizing the symposium. "We're confident that students came away from the presentations and discussion groups with a better understanding of suicide prevention and the importance of mental health, and we're very pleased with the feedback that we've received from attendees."

"I was reluctant at first to participate in a fully virtual conference, but this was very well done, and I learned a lot," wrote one attendee when asked for their feedback. "So glad I gave the new format a chance. It was also a great opportunity to earn needed CECs which have been definitely more of a concern with the reduced options of conferences and travel. Thank you so much for your hard work."

A survey that was completed by attendees after the symposium highlighted that 91 percent of attendees plan on altering their practice as a result of the educational sessions.

"Every member of New York's higher education community has a role to play in mental health and suicide prevention," said **Jay Carruthers**, MD, Director of the Suicide Prevention Office.

"Prevention requires collaboration," he added. "One of the goals of the symposium was to emphasize the importance of collaboration across disciplines within campus communities. Attendees now have a better understanding of how mental health and wellness and suicide prevention can be integrated into college campuses in the future."

Mental health problems on college campuses have been on the increase in recent years, more so since onset of the COVID-19 pandemic.

Recruitment: OMH is working to 'grow its own' RN workforce through several initiatives workforce through several initiatives

With the average age of nurses in New York State currently about 47, it's expected that nearly half of the nurses working today – including the field of mental health care – will retire within the next decade.

This will worsen the shortage of nurses that already exists, just as the Baby Boom generation reaches its 60s and 70s. In addition, nearly 2,000 qualified nursing students are being denied admission to RN programs in recent years, largely due to enrollment limits at nursing schools, caused by a shortage of nursing faculty.

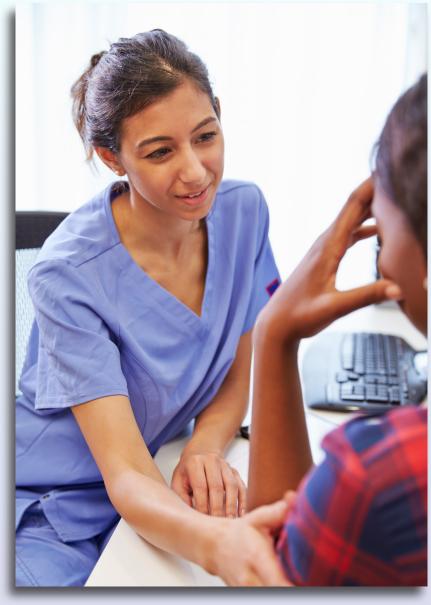
To help address these needs, OMH is working to build its nursing workforce through several initiatives. These and other initiatives in recent years have played a critical role in helping OMH reach its strategic nursing goal of having at least 50 percent of the OMH nursing workforce with a BSN or higher.

The OMH Office of Coordinated Nursing Services, working with OMH Human Resources, monitors and updates professionalism data every six months. Each psychiatric center updates its roster of nurses, indicating current degrees. This helps the office track nursing degrees and percentages of RNs with a BSN or higher.

Nurse Residency Program

This pilot program has a strong focus on professional development and is designed to complement what OMH already does to onboard new nurses.

It offers a one-year mentorship for all newly hired nurses, at OMH pilot hospitals - Bronx, Creedmoor, Hutchings, NYSPI, St. Lawrence, Sagamore and South Beach. The curriculum, designed by the OMH nurse educators, consists of eight hours per month and is focused on professional practice. Nurse residents will attend interactive seminars/consortiums and learning sessions with guest speakers.



To learn more about OMH's nursing recruitment programs, contact OMH Chief Executive Nursing Officer Maxine Smalling, MS, BS(N), RN, at Maxine.Smalling@ omh.ny.gov; or Community Nursing Services Consultant Juanita Goyette, RN-BC, at Juanita.Goyette@omh. ny.gov. Support and assistance are also available at each OMH facility through its Chief Nursing Officer and Facility Educational Mentor.

Community outreach

Staff from the Office of Coordinated Nursing Services and Human Resources Department have engaged in several recruitment activities during the past year, participating in job fairs at nursing schools – many of them virtual, out of necessity – at Mercy College, Columbia University, Mount St. Mary College, and Stony Brook University.

OMH has also conducted a statewide virtual nurse recruitment fair and has started to conduct local virtual fairs in regions of the state.

In the upcoming year, OMH will be working to implement a statewide standardized orientation for nurses at all facilities to help all incoming nurses adapt more easily to the new work environment.

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It includes approximately 38 training topics, relevant to the nursing role – with the majority of topics and trainings consisting of both classroom and hands-on learning. This standardized format will help ensure that incoming nurses receive consistent hands-on experience, while learning about the standards and quality of care expected in all of its hospitals.

Academic affiliations

The Office of Coordinated Nursing Services and Office of OMH Counsel have negotiated corporate affiliation agreements with colleges that offer benefits to OMH employees enrolled in their programs - such as tuition discounts, scholarships, and waiver of application or transcript fees. Corporate partners are invited to attend scheduled educational fairs at the psychiatric centers to discuss their programs with staff. The office has also clinical and academic affiliations with more than 40 colleges and nursing schools throughout the state.

Other nursing education and advancement resources

- The Professional Education Program Review Unit in the Office of the Professions, which has the responsibility for registering nursing education programs within New York State, lists several other programs at its website: http://www.op.nysed.gov/prof/nurse/nurseprogs.htm.
- The New York State Higher Education Services Corporation provides other financial aid as well. To review the grants, scholarships, and awards reference page, visit: https://www.hesc.ny.gov/.
- The Edna A. Lauterbach Scholarship Fund assists RNs and LPNs with training or education that will enhance the nurse's skills in either the clinical or business area. Visit: http://www.ednascholarship.org.
- The U.S. Perkins Loan Cancellation Program offers options for loan forgiveness for borrowers with Perkins Loans in specific professions, including nursing. For information, visit: https://studentaid.gov/manage-loans/forgiveness-cancellation/perkins.
- The National Health Service Corps Nurse Corps Scholar-ship Program offers scholarship opportunities for students accepted or enrolled in a diploma, associate, baccalaureate, or graduate degree nursing program. The program offers receive funding for tuition, fees, and other educational costs. In exchange, students must work at a facility with a critical shortage of nurses called a Critical Shortage Facility upon graduation. For information, visit: https://bhw.hrsa.gov/funding/apply-scholarship.



OMH's **Girls in Government** program introduces young women to the inner workings of our agency. This includes the organization's mission and vision for mental health policy, administration, and advocacy across OMH's system of care.









OMH's Chief Nursing Officer's Conference, usually scheduled for the fall, was postponed this past year because of the COVID-19 pandemic. A new program is being planned for the upcoming year that may include virtual sessions, if necessary. These are photos from the most-recent event in 2019.



OMH is working to improve coordination of patient care by helping health-care professionals share clinical information quickly and securely through a statewide data network.

The Statewide Health Information Network for New York, called "SHIN-NY" for short, allows the electronic exchange of clinical information and connects healthcare professionals statewide.

"Accessing patient data through the SHIN-NY can provide staff at state-operated psychiatric centers access to a 360-degree view of a patient's medical history," said **Eric Weiskopf**, OMH Senior Manager, Health Information Technology/Health Information Exchange. "It also can provide real-time alerts for important patient events – such as admission and discharge from hospitals, emergency departments, and skilled nursing facilities; COVID-19 status; and a patient's passing."

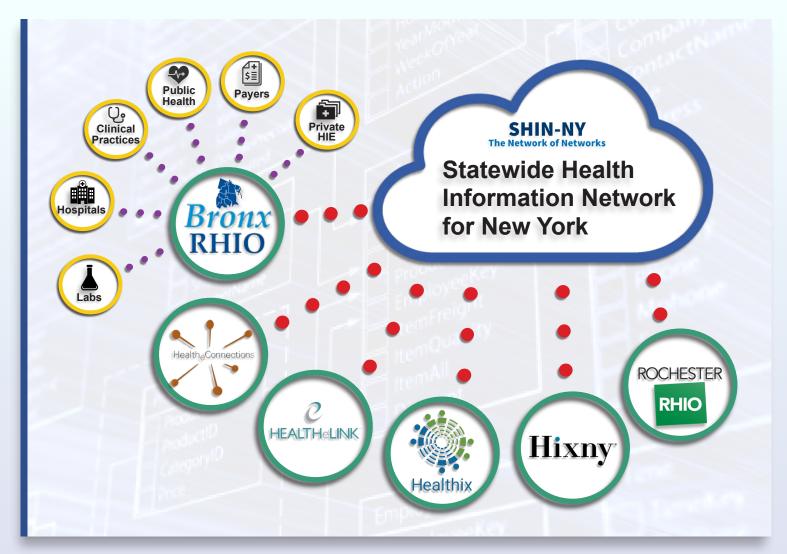
"By providing a way for healthcare professionals to easily and securely share electronic health information, patient outcomes can improve, and costs can be reduced," Weiskopf added.

A network of networks

SHIN-NY connects six regional networks, called Qualified Entities (QEs) or Regional Health Information Organizations (RHIOs). Each regional network enrolls participants within their community, including those from hospitals, clinics, Federally Qualified Health Centers, home care agencies, payers, and ambulatory practices, so they can access and exchange electronic health information within their region. The network currently connects all hospitals in New York State and more than 100,000 healthcare professionals.

In addition, patient demographic, diagnosis, allergy, and vital sign data types from OMH downstate facilities are being shared with two Qualified Entities:

The electronic exchange of health information can help improve patient outcomes and reduce costs.



Healthix and Bronx RHIO. Similar data from upstate facilities will soon be shared with another Qualified Entity, HealtheConnections.

To date, 12 state-operated psychiatric centers are using this service. Six more are currently engaged in the process of obtaining or expanding access. The goal is for all 23 state-operated psychiatric centers to access services before the end of 2021.

As part of the OMH response to COVID-19 pandemic, a project team helped some of the downstate state-operated psychiatric centers adopt services for their inpatient units to prepare them for patient transfers from New York City Health and Hospital facilities. This enabled the inpatient units to quickly access patient information.

Expanding scope

In addition to expanding geographically, OMH is planning to broaden the scope of clinical data to be shared through a collaboration with the New York State Office of Information of Technology Services (ITS) to include sharing medication, procedure, and laboratory data from state-operated psychiatric centers.

Patient information in the SHIN-NY is protected under the Health Insurance Portability and Accountability Act (HIPAA), other applicable federal and state laws, and national data exchange standards, ensuring data is safe and secure. Health records in the SHIN-NY are not publicly accessible. The patient decides which providers can see their records by granting consent to the provider. For more information visit: www.nyehealth.org.

SHIN-NY enables the electronic exchange of clinical healthcare information among data networks. For information, visit: www.nyehealth.org/shin-ny.

COVID-19:

Why you should get the vaccine and how to find out if you're eligible

The COVID-19 vaccine is an important, safe, and effective tool in the fight against the COVID-19 virus.

Remember – COVID-19 is very serious, and can cause severe medical complications that lead to death in some people.

The best way to protect yourself from COVID-19 is by getting the vaccine as soon as possible and taking other precautions, including practicing social distancing, continuing to wear a mask and washing your hands often and thoroughly.

How does the vaccine work?

The COVID-19 vaccine is delivered in two doses over the course of three-to-four weeks. The vaccine helps protect you by strengthening your immune system and helping it to recognize and fight the virus.

Can a COVID-19 vaccine give you COVID-19?

No. The COVID-19 vaccines being used in the U.S. don't use the live virus that causes COVID-19.





As COVID-19 vaccines start to arrive at health care facilities, front-line staff, patients, and residents at OMH psychiatric centers and clinics have been among the first to receive it. Photo at left: **Bridgette Davis**, LPN, and colleague **Ron Dayter**, RN, Nurse Administrator 2, have played important roles in vaccinating employees at Capital District Psychiatric Center. At right, a CDPC security officer prepares for vaccination.

What are the possible side effects of a COVID-19 vaccine?

Some people may have very mild side effects for a day or two after the vaccine. This does NOT mean you are sick - it's a sign that your immune system is being activated to fight the virus. Side effects can include:

- Pain, redness or swelling where the shot was given
- Fever
- Fatigue
- Headache

- Muscle pain
- Chills
- Joint pain

Can I get a COVID-19 vaccine if I have a history of severe allergic reactions?

If you have common allergies (e.g., cats/dogs, hay fever, dust or pollen), you should have no difficulties taking the vaccine. If you've had a severe allergic reaction to other vaccines or injectable medications, ask your doctor if you should get a COVID-19 vaccine.

Can I stop taking safety precautions after getting a COVID-19 vaccine?

While the vaccine is extremely effective in protecting the person who receives it, it may be possible for people who are exposed to COVID-19 to spread it to others, even if they themselves have been vaccinated and are immune.

To protect others and prevent the spread of COVID-19, you should continue to follow precautions for avoiding the virus even after getting your vaccine:



COVID vaccines will soon be available in more locations, with the federal government increasing the supply of COVID vaccine available to New York State's distribution network.

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- · Avoid close contact with others and maintain social distancing.
- · Continue to wear a mask.
- Practice good hand hygiene. Wash your hands often with soap and water for at least 20 seconds, or use an alcohol-based hand sanitizer that contains at least 60 percent alcohol.
- · Stay home if you're sick.

New online eligibility application

New York State has just launched an "Am I Eligible?" online application to help New Yorkers determine if they are currently eligible for a vaccine and, if they are, to connect them with providers who can administer a vaccine. A link will take you to a pre-screening form in which you enter information about yourself, your work setting, and your living environment. You'll then receive a system-generated determination based on your responses.

If you're eligible, you'll see a "Locate Providers" option to contact for scheduling. If you are not yet eligible, you will see "Currently Not Eligible."

As additional vaccine allocations are made by the federal government to New York State, additional groups will be eligible for vaccine and the "Am I Eligible? App" will be kept-up-to-date. You can recheck your eligibility at any time.

Note this is **NOT** a tool for scheduling vaccine appointments, the final say for whether or not someone will receive the vaccine, or a tool for businesses to assess whether they can schedule vaccinations for their employees.

Am I Eligible App https://am-i-eligible.covid19vaccine.health.ny.gov/

Check Your Eligibility

Visit the Am I Eligible Tool and complete a simple set of questions to determine if you are eligible for the COVID-19 vaccine.

Make an Appointment

If you are eligible, the tool will return a list of providers near you that you can contact to schedule an appointment.

Recheck at Any Time

As more New Yorkers become eligible to get the vaccine, this tool will be kept constantly up to date. New Yorkers can return to it at any time to recheck their eligibility.

For information on the COVID-19 crisis



Visit OMH's website to find guidance for providers, opportunities to join New York State's volunteer response, and additional resources for managing stress and anxiety at: www.omh.ny.gov.

The New York State 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.



Spotlight on: Human Trafficking

Did you Know?



Any person under age 18 who engages in a commercial sex act is a victim of human trafficking regardless of whether there is force, fraud, or coercion.



Men, women, and children of all ages, races, genders, and sexualities are at risk of human trafficking.



Human trafficking is happening throughout New York State. In 2020, **62% of confirmed trafficking cases occurred outside of New York City,** with the largest percentages in Westchester and Western NY.

Traffickers take advantage of people who are vulnerable. Some groups that are at higher risk include:

- people in unstable living situations;
- people who have experienced interpersonal violence and/or sexual abuse:
- · people with mental health and/or substance use conditions; and
- people who are undocumented immigrants or have limited access to safe social supports in their community.

Take Action

For the Community

Learn the signs of human trafficking through trustworthy websites. Here are a few we recommend:

The NYS Interagency Task Force on Human Trafficking: https://ocfs.ny.gov/programs/human-trafficking/initiatives.php

Polaris operates the National Human Trafficking Hotline: https://polarisproject.org

If you suspect trafficking, report it. The National Human Trafficking Resource Center (NHTRC) is a toll-free and confidential hotline, available to answer calls from anywhere in the country, 24/7 Call 1(888)373-7888 or text BeFree to 233733. If you believe a person's life is in immediate danger, call 911

Help increase awareness about trafficking. Share NYS' #TruthAboutTrafficking awareness campaign on social media: https://otda.ny.gov/programs/bria/truthabouttrafficking.asp



Traffickers use physical force and psychological tactics to get their victims to do what they want, making false promises, threatening, manipulating, and/ or defrauding their victims.



Traffickers are often people their victims trust: romantic partners (or people they thought were romantically interested in them,) friends, or family members (including parents).

Human trafficking survivors can become trapped and fear leaving because of shame, guilt, emotional attachment, and/or physical threats to themselves or their family. Some survivors are so manipulated they do not even realize they are under the control of another person.

Human trafficking is the use of force, fraud or coercion to make someone provide a service.

Sex trafficking involves involuntary commercial sex acts, like escorting, pornography, illicit massage businesses, brothels, and prostitution.

Labor trafficking involves involuntary labor or services, like farm work, childcare, domestic labor, food services, and construction. Labor trafficking isn't limited to just "physical" tasks and may also include "white collar" work.

For Providers

Take a critical look at how your workplace screens and identifies people who are at risk of human trafficking. Learn more about how to identify human trafficking here: https://otda.ny.gov/programs/bria/trafficking.asp and how to screen children and youth here: https://ocfs.ny.gov/programs/human-trafficking/resources-professionals.php

Learn what resources for human trafficking victims and survivors are available in your community. Check out: https://humantraffickinghotline.org/training-resources/referral-directory and for information on resources in NYC: http://nysatc.weebly.com/resources.html

Seek out training and continuing education on human trafficking. Trainings are available through the NYS Division of Criminal Justice Services (DCJS), Office for Temporary Disability Assistance (OTDA), and the Office of Children and Family Services (OCFS). Continuing education is also available through The National Human Trafficking Training and Technical Assistance Center (NHTTAC) and Polaris.

Need Help?

Human Trafficking Resource Center: 1(888)373-7888 or text BeFree to 233733

Crisis Text Line: Text GOT5 to 741741

National Suicide Prevention Lifeline: 1-800-273-TALK (8255)
NY Project Hope Emotional Support Helpline: 1-844-863-9314

OMH's Customer Relations: 1-800-597-8481

