



**Office of
Mental Health**

OMH Update

Behavioral Health Services Advisory Council December 2023

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Division of Adult Community Care Group**

December 7, 2023

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

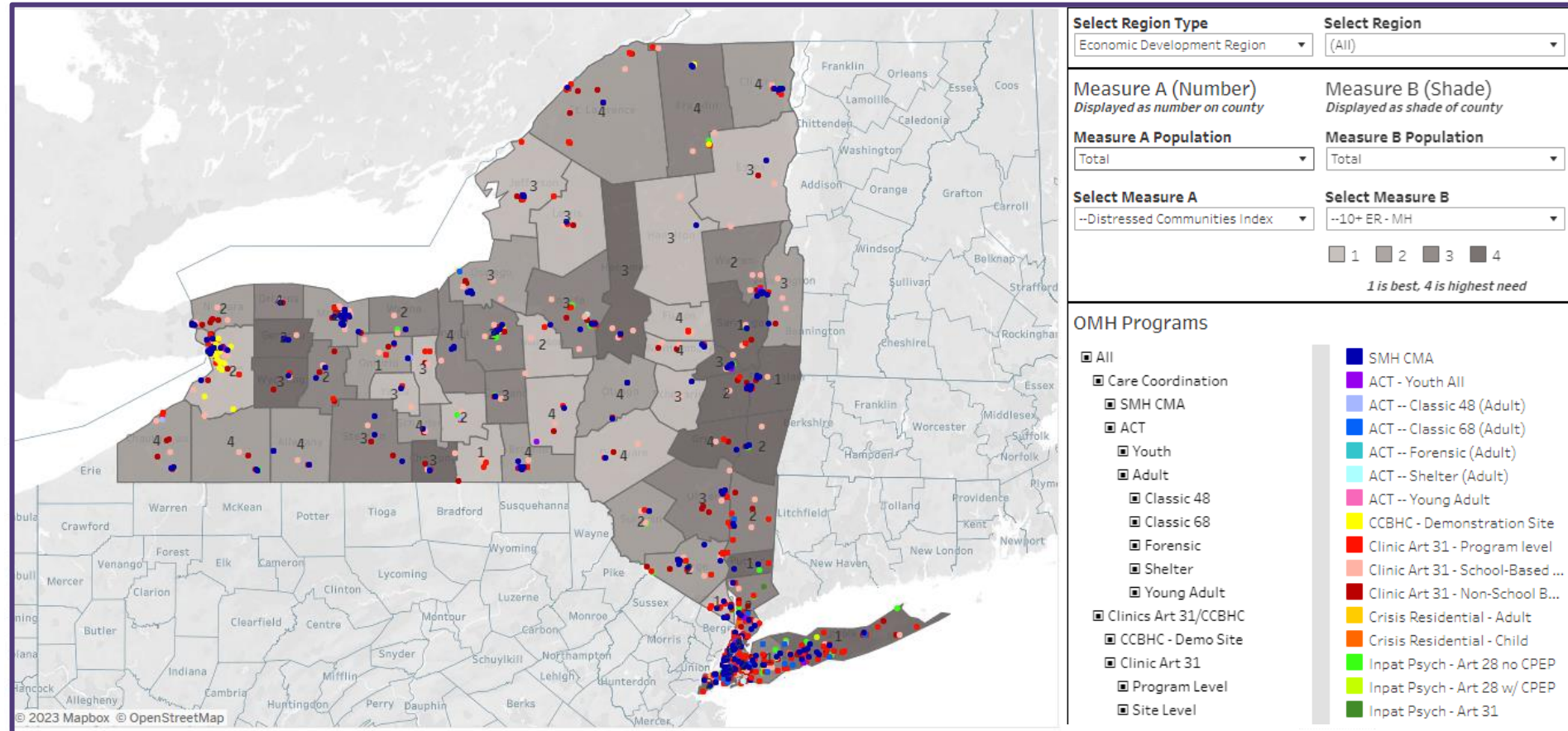
Highest Need Individuals:

- 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
 - 1500 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

Needs Assessment to Reach Communities Most in Need



Procurement Schedule

OMH Community Mental Health and Loan Repayment Program (OMH CMHLRP) - Round Two (Issued: 05/25/23)
 OMH Comprehensive Care Centers for Eating Disorders RFA (Issued: 06/06/23)
 Intensive and Sustained Engagement Teams (INSET) (Issued: 06/16/23)
 Apartment Treatment Housing for Adults with Serious Mental Illness (Issued: 06/23/2023)
 Healthy Steps Expansion (Issued 06/29/23)
 Certified Community Behavioral Health Clinic (CCBHC) - Phase I (Issued: 07/06/2023)
 Assertive Community Treatment (ACT) Expansion - Forensic Teams (Issued: 07/25/2023)
 Assertive Community Treatment (ACT) Expansion - Young Adult Teams (Issued: 07/27/2023)
 Safe Options Support Critical Time Intervention (SOS CTI) Teams (Issued 07/27/2023)
 Assertive Community Treatment (ACT) Expansion - Youth Teams (Issued: 07/31/2023)
 School-Based Mental Health Clinic Expansion (Issued: 08/03/2023)
 Supportive Housing Units: Phase I - Scattered Site Units
 Housing First Scattered Site Supportive Housing for Homeless Adults (08/09/2023)
 Scattered Site Supportive Housing for Individuals Re-entering the Community from Prison (08/16/2023)
 Supportive Housing Units: Phase II - Scattered Site Units (Issued: 10/03/2023)
 Mental Health Outpatient Treatment and Rehabilitative Services (MHOTRS)/Clinic Enhancement Grants (Issued 10/18/2023)
 Community Mental Health Loan Repayment Program (CMHLRP) - Phase III (Issued: 10/31/2023)
 Assertive Community Treatment (ACT) Expansion Phase II - Rural Teams (Issued: 11/02/2023)
 Connecting Youth to Mental Health Supports (CYMHS) - Suicide Prevention (Issued: 11/03/2023)
 Connecting Youth to Mental Health Supports-Trans Leadership, Staff, and Youth (CYMHS-T)(Issued: 11/03/2023)
 Community Residence - Single Room Occupancy (CR-SRO) Beds (Issued 11/08/2023)
 Supportive Housing Units: Phase III - Supportive - Single Room Occupancy (SP-SRO) Units (Issued: 11/15/23)
 Capital for Expanding Inpatient Psychiatric Capacity for Adults, Children and Adolescents in Article 28s (Issued: 11/30/23)



Tentative Procurement Schedule 2023

Home-Based Crisis Intervention (HBCI)
Health Home Plus (HH+) Access & Engagement
Comprehensive Psychiatric Emergency Program (CPEP) Capital
Critical Time Intervention (CTI) Teams - Phase I
Critical Time Intervention (CTI) Teams - Phase II
Licensed Apartment Treatment - Phase II
Residential Treatment Facility Capital
Transitional Step-Down Units - Phase I
Transitional Step-Down Units - Phase II
Assertive Community Treatment (ACT) Expansion Phase II - Flexible ACT Teams
Certified Community Behavioral Health Clinic (CCBHC) - Phase II
New Clinic Capacity
Transitional Step-Down Units - Phase III - Children/Youth beds

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

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



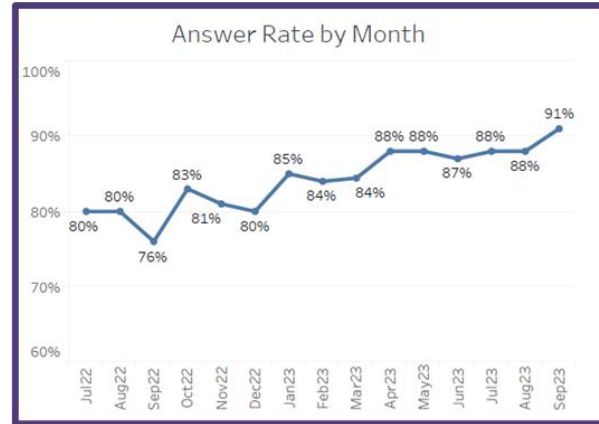
Metrics
85% In-State Answer Rate



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.

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

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



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KATHY HOCHUL
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Commissioner

JAMES V. McDONALD, M.D., M.P.H.
Commissioner

Guidance on Evaluation and Discharge Practices for Comprehensive Psychiatric Emergency Programs (CPEP) and §9.39 Emergency Departments (ED)

October 2023

The goal of this document is to offer guidance to CPEP/ED settings regarding evaluation and discharge planning for individuals who present with behavioral health conditions. These are the evaluations that should be completed at each patient encounter and interventions that will improve patient outcomes; reduce the risk of overdose, self-harm, and violence; and reduce the risk of readmission and disconnection from care. These standards are not intended to replace clinical judgment but rather to help ensure that clinical staff in CPEPs/EDs routinely gather all possible information when making disposition or inpatient admission decisions. There are complicated systemic, legal, and regulatory issues that make it difficult for hospital staff to coordinate and collaborate with colleagues in residential and outpatient programs. Nonetheless, for many patients, there are possible interventions that can lengthen community tenure and help patients achieve meaningfully improved outcomes without repeatedly returning to acute settings. Hospitals should welcome care managers into hospital spaces to facilitate care integration.

Screening and Assessment

1. **Suicide Risk:** All individuals who are brought to or present to CPEPs/EDs should be screened for suicide risk using a validated instrument (e.g., the [Columbia-Suicide Severity Rating Scale](#)). Positive screens should be followed by a suicide risk assessment by a licensed professional trained in assessing suicide risk.
2. **Substance Use:** All individuals over the age of 12 that present for any reason should be screened for substance use through a validated instrument ([examples here](#)). Instruments should be age-appropriate and specifically screen for individual substances (e.g., alcohol,



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

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 Health 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

Thank you!