OFFICE OF MENTAL HEALTH

MISSION

The mission of the Office of Mental Health (OMH) is to promote the mental health of all New Yorkers, with a particular focus on providing hope and recovery for adults with serious mental illness and children with serious emotional disturbances.

VISION

OMH envisions a future when everyone with a mental illness will recover, when all mental illnesses can be prevented or cured, when everyone with a mental illness at any stage of life has access to effective treatment and supports — essential for living, working, learning, and participating fully in the community.

OMH's vision and mission are embodied in a strategic planning and management framework known as the "ABCDs of mental health care"—Accountability for Results, Best Practices, Coordination of Care, and Disparities Elimination and Cultural Competence.

OPERATING HIGHLIGHTS

OMH's two primary functions as New York's mental health authority are to promote overall public mental health for all New Yorkers through education and advocacy, and to ensure access to quality services for adults with severe mental illness and children with serious emotional disturbances, with the goal of helping individuals to live productive, full lives in their communities. The agency has four lines of business underpinning these functions:

- Regulating, Certifying, Financing and Overseeing New York's Public Mental Health System. Regulates and licenses more than 2,500 mental health programs operated by local governments and private agencies serving 600,000 persons annually, and includes inpatient, outpatient, emergency, residential, and community support services. Will oversee All Funds appropriations of \$2.9 billion in State Fiscal Year 2006-07 and employ a workforce of 17,506.
- Providing State-operated Inpatient and Outpatient Mental Health Services. Manages State-operated inpatient services through a network of 25 psychiatric centers that include 16 psychiatric centers serving adults with serious mental illness, six serving children with serious emotional disturbances, and three serving forensic patients involved with the criminal justice system.
- Conducting Basic and Applied Research to Advance Prevention, Treatment, and Recovery. Conducts basic and applied research at the New York State Psychiatric Institute and Nathan S. Kline Institute for Psychiatric Research focused on identifying interventions that have been proven by scientific research to be effective and that can be incorporated into mainstream practice.
- **Promoting Public Mental Health.** Supports a variety of educational activities focusing on the nature and impact of mental illness, effective treatments and services, useful preventive and coping strategies, and how to get help.

In addition, OMH has developed key measures to track progress in meeting the agency's strategic goals. Through a web-based tool known as the OMH Balanced Scorecard, the agency tracks system-wide performance in such measures as reduced hospitalizations for recipients enrolled in the Assertive Community Treatment program; quality of care in OMH

licensed outpatient programs; obtainment of treatment goals for children enrolled in the Home and Community-Based Services (HCBS) waiver; and the reduction of high-risk behaviors for recipients receiving Assisted Outpatient Treatment services under Kendra's Law, among others.

ENVIRONMENTAL CHALLENGES AND OPPORTUNITIES

OMH faces several significant fiscal, programmatic and workforce challenges that are addressed in the 2006-07 Executive Budget. These challenges include the following:

- Funding and management strategies for the voluntary-operated, community-based service system need to balance expansion efforts with ongoing infrastructure needs to address staff recruitment and retention issues and other inflationary pressures. Accordingly, OMH will need to continue working with community-based providers to ensure that all available funding is used in the most efficient and effective manner to meet the needs of consumers and their families, and that stable funding sources are pursued to ensure adequate support for agency operating expenses.
- Epidemiological studies demonstrate that the onset of serious mental illness often occurs in adolescence and that a significant delay occurs between onset and diagnosis and treatment, resulting in more intensive and costly treatment interventions that require out-of-home placements during adolescence as well as more serious mental illness and disability later in life. In response, OMH will need to develop initiatives to identify high-risk children for mental illness and increase access at a much earlier age to appropriate and cost-effective mental health services that alleviate distress and keep children at home with their families.
- According to the Federal New Freedom Commission report, the lack of decent, safe, affordable, and integrated housing is one of the most significant barriers to full participation in community life for people with mental illness. This suggests that OMH will need to continue developing integrated and affordable housing opportunities and accompanying support services for individuals with mental illness.
- Public safety in New York State communities needs to be increased via civil commitment, where appropriate, for the care and treatment of sexually violent predators in secure facilities. OMH will need to establish discrete, secure treatment facility capacity to support the Governor's ongoing civil commitment initiative.
- A disproportionate share of OMH's funding of the State's public mental health system supports the 25 State-operated psychiatric centers (PCs) serving slightly more than 5,000 inpatients contrasted to over 93,000 inpatients served in 1955. The declining need for adult, inpatient psychiatric center beds allowed the State to eliminate unneeded capacity and invest savings in expanded evidence-based, community based services. The ability to further close or consolidate inpatient capacity is currently infeasible due to the leveling off of previously declining demand for inpatient services, utilization of current inpatient capacity, and the need to evaluate future inpatient capacity needs. These challenges present two important opportunities. First, OMH will need to assure that adequate, ongoing inpatient capacity is provided in the most efficient and cost-effective manner possible. Second, OMH will need to continuously evaluate the need for inpatient capacity and propose further consolidations or closures when they are feasible, including working with the Commission on Health Care Facilities in the 21st

Century with regard to non-State-operated psychiatric inpatient capacity. Both of these opportunities will support the delivery of quality inpatient services and maximize the availability of financial support for evidence-based, community-based services.

- As the population ages, there is a greater need for mental health services for older adults. Under the Geriatric Mental Health Act, a geriatric service demonstration program to provide grants to providers of mental health care to the elderly will be established. Such programs will be administered by the Office of Mental Health and the Office of the Aging. OMH will need to provide collaboration and support for these demonstration efforts.
- Suicide continues to be a major concern. Ten percent of adolescents experience suicidal ideation, and the risk of suicide for individuals over 55 years of age is nearly double that of other age groups. This means the agency will have to improve public understanding of the causes, effects and treatment of serious emotional disturbances and mental illnesses that increase individuals' susceptibility to suicidal ideation. OMH will need to increase the number of localities that have developed and implemented local suicide prevention plans tailored to their communities.
- A key Governor's priority in the mental hygiene area is the importance of accountability and performance management, as well as transforming government operations through structural and service enhancements and improving efficiency through technology. Accordingly, OMH will continue to make available the necessary data and information to the State and counties to monitor quality of care and cost-effectiveness as well as improve performance-based outcomes measurement and provider certification and licensing process.

KEY AGENCY STRATEGIES

OMH has thoroughly assessed the environmental challenges and opportunities addressed above and their impact on the agency mission, vision, management strategies and lines of business. This assessment has led to identification of the following key agency strategies:

- Enhancing community-based program models to recruit and retain a qualified workforce and respond to other inflationary pressures
- Enhancing access to effective community-based services for children and families
- Providing access to safe and affordable community housing
- Increasing public safety through the civil commitment of sexually violent predators, where appropriate, to secure treatment facilities for care and treatment
- Providing access to efficient and high-quality inpatient services
- Enhancing access to effective community-based services for older adults
- Promoting public mental health by reducing the risk of suicide
- Implementing an effective performance and accountability infrastructure

The section below details the specific management actions that OMH will take to implement these key strategies, and the specific performance indicators it will use to measure and report progress. As indicated in the earlier Vision statement, OMH is committed to Disparities Elimination and Cultural Competence as a priority focus in advancing its strategic priorities. Each performance measure will be assessed to address disparities in access to, and participation in, services based on race, ethnicity, age and gender.

ACTIONS TO IMPLEMENT THE STRATEGIES

Enhance community-based program models to recruit and retain a qualified workforce and respond to other inflationary pressures.

Actions to implement this strategy include providing a three-year, annual cost-of-living adjustment tied to the Consumer Price Index for targeted OMH non-trended programs to reflect actual inflation-related growth and/or providing targeted resources to shore up certain residential models.

Action	SFY 2006-07 Funding Levels	Performance indicators
Cost of Living Adjustment (COLA).	\$16.6 million (\$22.1 million annualized)	 Increase proportion of culturally competent, qualified clinical staff recruited and retained.
> Supported Housing Stipend Increase.	\$6.5 million	 Maintain existing base of supported housing capacity.

Enhance access to effective community-based services for children and families.

New York's public mental health system serves about 130,000 children with serious emotional disturbances (SED) annually. To reach more children, the Governor's Budget includes an interrelated series of new initiatives that support early identification of, and interventions for, high-risk children, expand access to new and existing in-home and community-based services, and emphasize best practices education and consultation for community-based providers in the diagnosis and treatment of serious emotional disturbances in children and adolescents.

Action	SFY 2006-07 Funding Levels	Performance indicators
Child and Family Clinic Plus.	\$16.1 million (\$21.5 million annualized)	 Increase number of at-risk children and adolescents screened, assessed and treated for serious emotional disturbance, with up to 400,000 children screened; up to 76,000 children assessed; up to 36,000 additional children admitted to clinic services; and up to 22,400 children receiving in-home treatment services.
New Home and Community Based (HCBS) Waiver Slots.	\$5.2 million (\$7 million annualized)	 Increase number of children receiving HCBS waiver services by expanding HCBS capacity by 300 slots, bringing total slots to some 1,440; provides HCBS services for up to 2,160 children.
Child and Adolescent Tele-psychiatry for Rural/Shortage Area.	\$0.4 million	 Increase number of children and adolescents receiving comprehensive evaluations in target rural areas by achieving 600 additional comprehensive evaluations in 2006-07.
Evidence-Based Practices (EBP) Dissemination Center.	\$0.5 million	 Increase the number of clinicians with demonstrated competency in EBPs for the treatment of depression and trauma in children and adolescents by providing education on EBPs for up to 400 clinicians. in 2006-07

Provide access to safe and affordable community housing.

Building on the success of prior supportive housing initiatives that will provide more than 31,000 beds in community settings when fully-developed for persons with mental illness, the 2006-07 Executive Budget includes strategies to develop additional housing capacity in a partnership with New York City.

Action	SFY 2006-07 Funding Levels	Performance indicators
New York/New York III Supportive Housing Agreement.	\$7.7 million	• Increase the proportion of individuals and families affected by homelessness and serious mental illness who gain stable housing in the community by increasing housing capacity in NYC by 5,550 beds over the next 10 years (as part of an overall 9,000 bed effort, which will also serve individuals with HIV/AIDS; youth leaving foster care; and individuals/families with substance abuse disorders).

Increase public safety through the treatment of sexually violent predators.

The SFY 2006-07 Executive Budget includes funding to support, where appropriate, the civil commitment of sexually violent predators (SVPs) upon their release from prison, providing care and treatment in secure facilities. Committing these individuals will protect the public and provide these persons with continued and needed treatment.

Action	SFY 2006-07 Funding Levels	Performance indicators
Develop protocols and deliver services tailored to treat sexually violent predators that are civilly committed for secure care and treatment.	\$26.8 million	 Provide care and treatment to SVPs who are civilly committed for such care upon their release from prison.
 Provide capital resources for new (or modification of existing) facilities and programs related to civil commitment. This includes constructing a new facility on the grounds of the Pharsalia Correctional Facility. 	\$165 million (capital)	 Increase short- and long-term capacity to provide care and treatment to SVPs in secure facilities.

Provide access to efficient and high-quality inpatient services.

Actions to implement this strategy include the more efficient deployment of inpatient staff, initiatives to generate more patient-driven revenue and capital investments to improve patient milieus where health and safety deficiencies have been identified.

Action	SFY 2006-07 Funding Levels	Performance indicators		
 Reduce mandatory overtime through deployment of an expanded workforc 	-\$1.6 million e.	 Achieve lower levels of overtime worked and personal service savings. 		
Access new pharmacy billing opportu with the implementation of the new Medicare Prescription Drug, Improve and Modernization Act to generate ne revenues of about \$10 million when annualized.	ment	 Increase collection of Medicare revenues to support pharmaceutical costs. 		
Further enhance services to mentally inmates.	ill \$0.3 million	 Increase number of inmates receiving mental health services in correctional settings. 		
Begin Phase I of a \$226 million capita to reconstruct inpatient units at the Br Adult and Children's psychiatric center	ronx (capital)	 Increase number of adult and children's inpatient beds fully compliant with standards. 		
Begin Phase I of the re-location of Kir Forensic PC to avoid \$25 million in re capital costs.		 Increase number of forensic inpatient beds fully compliant with standards. 		

Enhance access to effective community-based services for older adults.

Actions in the 2006-07 Executive Budget include initiatives to implement access strategies by focusing on the unique needs of this target population.

Action	SFY 2006-07 Funding Levels	Performance indicators		
 Provide funding for demonstration programs under Geriatric Mental Health Act. 	\$2.0 million	 Increase the proportion of older adults receiving mental health services tailored to their unique needs via the establishment of demonstration programs. 		

Promote public mental health by reducing the risk of suicide.

Actions to implement this strategy include supporting initiatives to increase awareness of the prevalence of suicide and improving public understanding of the causes, effects and treatment of emotional disturbances that underlie suicidal ideation and behavior. OMH will also support programs that promote screening, early intervention and prevention strategies, particularly with primary care physicians, and other healthcare providers.

Action	SFY 2006-07 Funding Levels	Performance indicators
Implementation of the New York State Suicide Prevention Plan.	\$1.5 million	 Increase number of localities that have developed and implemented local suicide prevention plans tailored to their communities.
		 Improve public awareness of suicide risk and preventive factors.

Implementing an effective performance and accountability infrastructure.

The SFY 2006-07 Executive Budget includes an array of initiatives to implement this strategy by focusing on the unique needs of targeted populations and ensuring that programs are not only funded effectively and efficiently, but that funding levels are equitable among providers. Actions to implement this strategy also include supporting initiatives that allow OMH to have the capacity to conduct intensive strategic financial analysis and develop the infrastructure it needs to monitor quality of care and improve performance-based outcomes measurement.

SFY 2006-07 Action Funding Levels Performance independent		Performance indicators
Develop strategic financial directions to not only shore up base revenues and funding streams, but to also identify opportunities for additional revenue maximization.	\$0.5 million	 Protect and enhance revenue streams and pursue approaches to improve the efficiency of community mental health programs
Provide more efficient and effective services to persons with co-occurring disorders through the implementation of a coordinated care demonstrations by OMH and OASAS.	N/A	 Increase proportion of individuals with co- occurring substance abuse and mental illness receiving evidence-based dual disorder treatment
Personalized Recovery Oriented Services (PROS) client registration.	\$0.2 million	 Enroll eligible recipients in PROS efficiently to ensure continuity of care in a more cost effective environment.
Eliminate special, unjustified Medicaid rates for certain Article 28 mental health programs which have not enhanced the treatment of clients.	-\$0.6 million	 Inequitable funding enhancements are eliminated, resulting in taxpayer savings.

ALL FUNDS APPROPRIATIONS (dollars)

	Available	Appropriations Recommended		Reappropriations Recommended
Category	2005-06	2006-07	Change	2006-07
State Operations	1,205,536,000	1,302,099,000	96,563,000	1,272,000
Aid To Localities	897,933,000	968,736,000	70,803,000	42,124,000
Capital Projects	263,814,000	610,285,000	346,471,000	615,127,000
Total	2,367,283,000	2,881,120,000	513,837,000	658,523,000

ALL FUND TYPES PROJECTED LEVELS OF EMPLOYMENT BY PROGRAM FILLED ANNUAL SALARIED POSITIONS

Full-Time Equivalent Positions (FTE)

Program	2005-06 Estimated FTEs 03/31/06	2006-07 Estimated FTEs 03/31/07	FTE Change
Administration and Finance			
General Fund	542	547	5
Special Revenue Funds - Federal	14	14	0
Enterprise Funds	20	20	0
Internal Service Funds	24	24	0
Adult Services			
General Fund	11,531	11,972	441
Capital Planning			
Capital Projects Funds - Other	41	41	0
Children and Youth Services			
General Fund	2,037	2,042	5
Forensic Services			
General Fund	1,943	1,951	8
Maintenance Undistributed			
Special Revenue Funds - Other	397	397	0
Research			
General Fund	471	471	0
Special Revenue Funds - Other	27	27	0
Total	17,047	17,506	459

STATE OPERATIONS ALL FUNDS FINANCIAL REQUIREMENTS BY FUND TYPE APPROPRIATIONS (dollars)

Fund Type	Available 2005-06	Recommended 2006-07	Change
General Fund	589,210,000	771,407,000	182,197,000
Special Revenue Funds - Federal	1,272,000	1,358,000	86,000
Special Revenue Funds - Other	604,196,000	518,476,000	(85,720,000)
Enterprise Funds	8,349,000	8,349,000	0
Internal Service Funds	2,509,000	2,509,000	0
Total	1,205,536,000	1,302,099,000	96,563,000

Adjustments: Transfer(s) From Mental Health, Office of

 General Fund (Aid To Localities)
 (2,600,000)

 Appropriated 2005-06
 1,202,936,000

STATE OPERATIONS ALL FUNDS FINANCIAL REQUIREMENTS BY PROGRAM APPROPRIATIONS (dollars)

Program	Available 2005-06	Recommended 2006-07	Change
Administration and Finance	2003-00	2000-01	Onlange
General Fund	E0 202 000	65.047.000	7 565 000
	58,382,000	65,947,000	7,565,000
Special Revenue Funds - Federal	1,272,000	1,358,000	86,000
Special Revenue Funds - Other	1,870,000	3,870,000	2,000,000
Enterprise Funds	8,349,000	8,349,000	0
Internal Service Funds	2,509,000	2,509,000	0
Adult Services			
General Fund	804,378,000	876,361,000	71,983,000
Children and Youth Services			
General Fund	129,765,000	136,755,000	6,990,000
Enhanced Community Services			
General Fund	19,600,000	19,600,000	0
Forensic Services			
General Fund	129,975,000	136,012,000	6,037,000
Maintenance Undistributed			
General Fund	(595,201,000)	(507,481,000)	87,720,000
Special Revenue Funds - Other	595,201,000	507,481,000	(87,720,000)
Research			
General Fund	42,311,000	44,213,000	1,902,000
Special Revenue Funds - Other	7,125,000	7,125,000	0
Total	1,205,536,000	1,302,099,000	96,563,000

STATE OPERATIONS - GENERAL AND OFFSET FUNDS SUMMARY OF PERSONAL SERVICE APPROPRIATIONS AND CHANGES 2006-07 RECOMMENDED (dollars)

	Total		Personal Service Regular (Annual Salaried)	
Program	Amount	Change	Àmount	Change
Administration and Finance	40,895,000	1,706,000	39,482,000	1,706,000
Adult Services	686,587,000	42,978,000	646,600,000	41,690,000
Children and Youth Services	120,284,000	5,174,000	112,915,000	5,174,000
Forensic Services	122,401,000	4,369,000	114,063,000	4,369,000
Research	39,148,000	1,180,000	38,551,000	1,180,000
Total	1.009.315.000	55.407.000	951.611.000	54.119.000

	Temporary Service (Nonannual Salaried)		Holiday/Overtime Pay (Annual Salaried)	
Program	Amount	Change	Amount	Change
Administration and Finance	1,080,000	0	333,000	0
Adult Services	5,023,000	0	34,964,000	1,288,000
Children and Youth Services	2,429,000	0	4,940,000	0
Forensic Services	2,280,000	0	6,058,000	0
Research	55,000	0	542,000	0
Total	10,867,000	0	46,837,000	1,288,000

STATE OPERATIONS - GENERAL AND OFFSET FUNDS SUMMARY OF NONPERSONAL SERVICE AND MAINTENANCE UNDISTRIBUTED APPROPRIATIONS AND CHANGES 2006-07 RECOMMENDED (dollars)

	Total		Supplies and Materials	
Program	Amount	Change	Amount	Change
Administration and Finance	25,052,000	5,859,000	1,265,000	276,000
Adult Services	189,774,000	29,005,000	88,898,000	14,850,000
Children and Youth Services	16,471,000	1,816,000	7,708,000	884,000
Enhanced Community Services	19,600,000	0	0	0
Forensic Services	13,611,000	1,668,000	8,093,000	1,339,000
Research	5,065,000	722,000	2,927,000	585,000
Total	269,573,000	39,070,000	108,891,000	17,934,000

	Travel		Contractual Services	
Program	Amount	Change	Amount	Change
Administration and Finance	1,649,000	360,000	19,835,000	4,720,000
Adult Services	3,077,000	321,000	92,006,000	13,616,000
Children and Youth Services	542,000	23,000	7,644,000	883,000
Enhanced Community Services	0	0	0	0
Forensic Services	665,000	43,000	4,641,000	273,000
Research	67,000	2,000	2,015,000	134,000
Total	6,000,000	749,000	126,141,000	19,626,000

	Equipmer	nt	Maintenance Undistributed	
Program	Amount	Change	Amount	Change
Administration and Finance	2,303,000	503,000	0	0
Adult Services	2,628,000	218,000	3,165,000	0
Children and Youth Services	577,000	26,000	0	0
Enhanced Community Services	0	0	19,600,000	0
Forensic Services	212,000	13,000	0	0
Research	56,000	1,000	0	0
Total	5,776,000	761,000	22,765,000	0

STATE OPERATIONS - OTHER THAN GENERAL FUND AND OFFSET FUNDS SUMMARY OF APPROPRIATIONS AND CHANGES 2006-07 RECOMMENDED (dollars)

	Total		Personal Se	rvice
Program	Amount	Change	Amount	Change
Administration and Finance	16,086,000	2,086,000	4,403,000	24,000
Research	7,125,000	0	1,915,000	0
Total	23,211,000	2,086,000	6,318,000	24,000
	Nonpersonal S	Service	Maintenance Und	listributed
Program	Amount	Change	Amount	Change
Administration and Finance	8,383,000	62,000	3,300,000	2,000,000
Research	5,210,000	0	0	0
Total	13,593,000	62,000	3,300,000	2,000,000

AID TO LOCALITIES ALL FUNDS FINANCIAL REQUIREMENTS BY FUND TYPE APPROPRIATIONS (dollars)

Fund Type	Available 2005-06	Recommended 2006-07	Change
General Fund	777,064,000	847,953,000	70,889,000
Special Revenue Funds - Federal	40,584,000	40,498,000	(86,000)
Special Revenue Funds - Other	80,285,000	80,285,000	, O
Total	897,933,000	968,736,000	70,803,000
Adjustments: Transfer(s) To Mental Health, Office of General Fund (State Operations) Appropriated 2005-06	2,600,000 900,533,000		

AID TO LOCALITIES ALL FUNDS FINANCIAL REQUIREMENTS BY PROGRAM APPROPRIATIONS (dollars)

	Available	Recommended	
Program	2005-06	2006-07	Change
Adult Services			
General Fund	615,490,450	656,235,000	40,744,550
Special Revenue Funds - Federal	32,749,000	32,663,000	(86,000)
Special Revenue Funds - Other	7,735,000	7,735,000	0
Children and Youth Services			
General Fund	154,573,550	184,718,000	30,144,450
Special Revenue Funds - Federal	7,835,000	7,835,000	0
Enhanced Community Services			
Special Revenue Funds - Other	72,550,000	72,550,000	0
Community Support and Workforce			
Reinvestment			
General Fund	7,000,000	7,000,000	0
Total	897,933,000	968,736,000	70,803,000

CAPITAL PROJECTS ALL FUNDS FINANCIAL REQUIREMENTS BY PROGRAM APPROPRIATIONS (dollars)

Comprehensive Construction Program	Available 2005-06	Recommended 2006-07	Change	Reappropriations 2006-07
Design and Construction Supervision				
Capital Projects Fund	2,000,000	2,000,000	0	2,000,000
MH Capital Improvements - Authority Bonds	8,000,000	8,000,000	0	10,935,000
Executive Direction				
Capital Projects Fund	0	0	0	3,245,000
MH Capital Improvements - Authority Bonds	3,591,000	3,591,000	0	5,308,000
Community Mental Health Facilities				
Capital Projects Fund	6,000,000	6,000,000	0	27,831,000
MH Capital Improvements - Authority Bonds	80,513,000	226,525,000	146,012,000	193,918,000
Maintenance and Improvements of Existing Facilities				
Capital Projects Fund	34,010,000	34,010,000	0	47,300,000
MH Capital Improvements - Authority Bonds	128,700,000	329,159,000	200,459,000	316,590,000
Non-Bondable				
Capital Projects Fund	1,000,000	1,000,000	0	8,000,000
Total	263,814,000	610,285,000	346,471,000	615,127,000