

# New York State: 988 and A Comprehensive Statewide Crisis System

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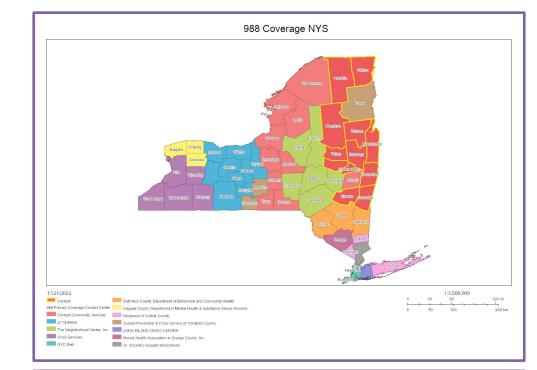
## 988 in New York State

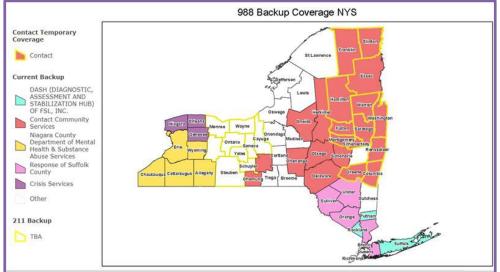
### **Current Landscape**

- 13 active 988 Crisis Contact Centers
- 2 in development, 1 expected to go live in February 2023

### Funding

- \$10 Million One-Time Start up Mental Health Block Grant
- \$9.2 Million Two-Year SAMHSA Grant
- \$35 Million in Year 1 (SFY 22-23),
  \$60 Million Full Annual Enacted State Budget Resources





# 988 Since Launch on July 16, 2022

- All 62 counties in NYS have primary coverage by a NYS 988 Contact Center
- 93,189 calls made to 988 were received by 988 Contact Centers between July-Dec 2022
  - 20,385 more calls received from same time in 2021
  - 3,400 more calls a month (average) from the same time period in 2021



## **Comprehensive Crisis Response System**

New York State is developing a comprehensive crisis response system, available to all New Yorkers regardless of ability to pay.

OMH is committed to developing a statewide crisis system of expanded, enhanced, and connected services composed of:

- Telephonic triage and counseling through the implementation of 988
- Mobile Crisis teams
- Crisis Residential programs
- Crisis Stabilization Centers
- Comprehensive Psychiatric Emergency Programs (CPEPs)
- Other community services and supports



## **Mobile Crisis Development**

#### 52 out of 62 Counties in NYS have OMH approved Mobile Crisis Response Teams

#### In early 2023, Request for Proposals will be released (RFP):

- Ensure mobile crisis team(s) are available in every county in NYS
- Increase capacity of mobile crisis response teams while expanding access in high-need communities; increase collaboration to improve crisis stabilization in the community for adults, children and youth; and address inequities in service delivery

#### **Response Time:**

• By 2024, is it the intention to have Mobile Crisis Response Teams available in all 62 counties and the response time to be 2 hours or less



## **Mobile Crisis Development Initiatives**

#### **CCSI** Initiative

- Three-year collaborative relationship established between Coordinated Care Services, Inc. (CCSI) and NYS OMH
- Joint Technical Assistance underway for approved mobile crisis providers across NYS
- Module-based trainings presented and recorded for mobile providers statewide addressing engagement, documentation, billing and fiscal modeling
- 1:1 agency-specific technical assistance sessions being scheduled with all interested providers to address current state, expansion potential and financial sustainability of mobile providers for Children, Youth and Adults served via community providers and CPEPs alike



## **Crisis Stabilization Centers Development**

Two types of Crisis Stabilization Centers are being developed

### Supportive Crisis Stabilization Centers (SCSC)

 12 total, 3 in NYC Economic Development Region, 1 in each of the other 9 Economic Development Regions in NYS

### Intensive Crisis Stabilization Centers (ICSC)

 12 total, 3 in NYC Economic Development Region, 1 in each of the other 9 Economic Development Regions in NYS

Part 600 Regulations: issue jointly between NYS OMH and NYS OASAS



## **Crisis Stabilization Centers**

#### **All Crisis Stabilization Centers:**

- offer voluntary, person-centered crisis services with an emphasis on peer and recovery-oriented support
- operate 24 hours a day, 7 days a week, 365 days a year
- offer services to recipients for up to 24 hours (23 hours and 59 minutes)
- provide services in a safe therapeutic environment
- assist with diversion from higher levels of care



## **Crisis Stabilization Centers**

#### All CSCs Provide:

- Triage and Screening
- Assessment
- Therapeutic interventions including crisis counseling, psychoeducation, crisis deescalation/intervention
- Peer Support Services
- Ongoing observation
- Care collaboration with recipient's friends, family or care providers (with consent)
- Discharge and aftercare planning

#### **ICSCs Must Additionally Provide:**

- Psychiatric Diagnostic Evaluation and Plan
- Psychosocial Assessment
- Medication Management
- Medication for Addiction Treatment
- Medication Administration and Monitoring
- Mild to Moderate Detoxification Services



## **Crisis Residential Program Development**

Crisis Residential Programs provide short-term crisis stabilization services and support to individuals experiencing or at risk of experiencing a mental health crisis in a homelike environment

- Voluntary
- 24/7 onsite staffing
- 1 to 28 day/s stay based on need
- Recovery focused, person centered, and trauma informed
- Diversion from inpatient psychiatric hospitalization
- Stepdown from inpatient psychiatric hospitalization



## **Crisis Residential Programs Types**

### **Residential Crisis Support (RCS)**

• 18 years old +

### Intensive Crisis Residence (ICR)

• 18 years old +

### **Children's Crisis Residence (CCR)**

• 5-20 years old



# **Crisis Residential Programs- Services**

## **Both RCS and ICR Services**

- Assessment and Individual Service Plan
- Assistance in personal care and activities
  of daily living
- Peer support services
- Engagement with identified supports
- Safety planning
- Integration of direct care and support services
- Linkages to community-based supports
- Case management services
- Medication Assistance
- Crisis respite

## Unique to ICR

- Medication therapy
- Individual and group counseling
- Supports for co-occurring conditions
- Diagnostic and treatment services

### Unique to CCR

- 24/7 monitoring and supervision
- Crisis treatment and support for the child, family, and caregivers
- Behavior support
- Individual and family counseling



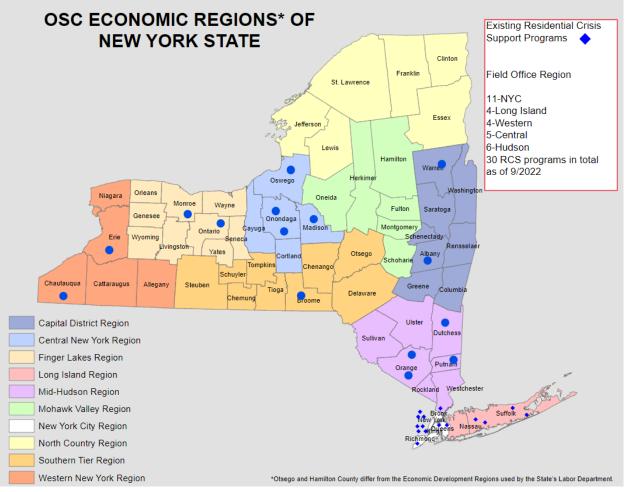
# **Crisis Residential Programs-NYS Landscape**

### **Current Landscape:**

- 30 Existing RCS programs/ 9 Licensed
- 9 Existing CCR programs/8 Licensed
- 0 ICR

# In Development and/or in OMH Licensing Process:

- ~ 30 RCS
- ~14 CCR
- ~10 ICR





### **Approaches to Collaboration with Diverse Communities**

- Multi-disciplinary stakeholder coalition assembled to inform OMH 988 implementation and crisis services development with special attention to the unique challenges and opportunities that exist in rural, urban, intercity, and identified underserved black, brown and Asian communities.
- Planned focus groups with communities during and after the initial 988-planning phase to hear directly from representatives from underserved areas on their concerns with 988 and crisis services utilization on an ongoing basis.
  - Feedback centered on:
    - Fear of unwarranted law enforcement response
    - Counselors who do not look like or sound like those reaching out for support
    - Counselors who do not know their communities or what is available to them for additional referral support



#### Challenges for Crisis Services: Reaching Underserved Communities

New York's efforts are currently working to overcome long-standing challenges communities of color have with interacting with law enforcement. The challenges include:

- Well-founded resistance because of current and historic experiences these communities have had with government and service systems.
- **Example:** New American communities have deep seeded fears related to immigration status that hinders help-seeking behavior.
- Black and brown communities have fears of discrimination and injustice when using emergency services

The primary strategy has been communication and listening to the concerns of the communities and addressing identified concerns in a collaborative fashion.

• **Example:** Creation of the New York Asian American Workgroup, a collaborative effort involving the Office of Mental Health, the Asian American Federation, City government, service users and local providers in the New York City region



# **Current Initiatives to Address Collaboration with Diverse Communities: East Flatbush Village**

TTI granted awarded to OMH through NASMHPD for a collaboration with the East Flatbush Village to create an implementation plan for the expansion of 988 and the development of mobile outreach services as part of the continuum of community crisis services.

#### East Flatbush, located in Brooklyn NY, landscape:

- Low-income, underfunded neighborhood
- Predominantly immigrant residents who comparatively fall below the poverty line at 17.6%
  - $\circ~$  about 25 % higher than the New York state rate

#### East Flatbush Village Inc. services:

- Community and Youth Development Organization focused on uplifting neighbors with neighbors
- Combat violence within the community by providing children and families with social emotional support, recreational activities, and educational tools
- Utilization of a proactive approach to community involvement and engagement that focuses on building a strong community structure



# **Current Initiatives to Address Collaboration with Diverse Communities: Asian American Mental Health Workgroup**

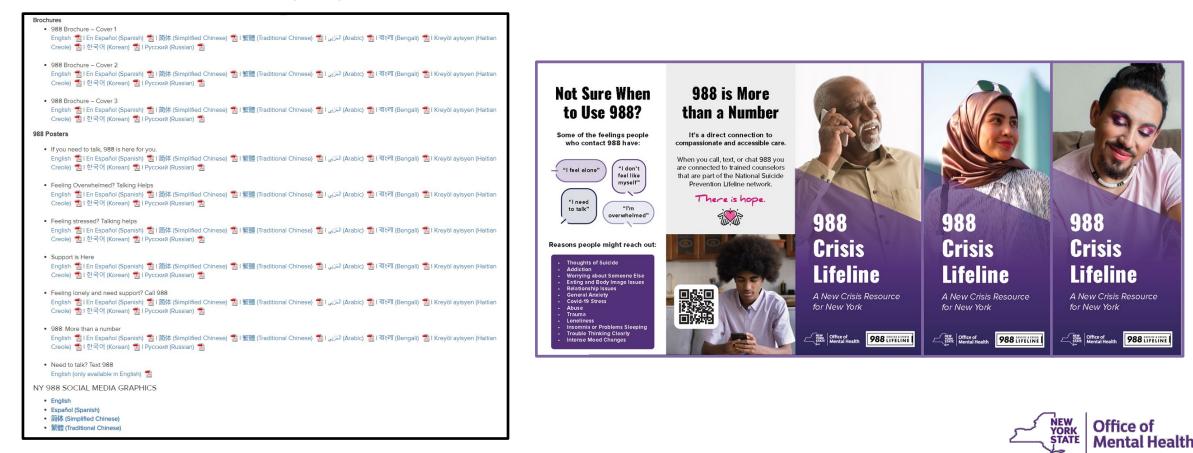
Asian American Mental Health Workgroup, established in Spring 2022, co-chaired by the Chief Diversity Officer at OMH and the Executive Director of the Asian American Federation.

- **Mission and Purpose:** Formal review of ways the mental health system can improve its response to increased levels of stress, anxiety, and other psychological issues resulting from the recent increase in anti-Asian American hate crimes in the New York City area.
- Addressing long-standing barriers that make it difficult for Asian American New Yorkers to access quality mental health services. Examples include:
  - language access barriers
  - lack of culturally appropriate clinical care



# **Current Initiatives to Address Collaboration with Diverse Communities: 988 Translated Materials**

NYS OMH has made a commitment to ensure 988 materials created at the state level are available in multiple languages and depict individuals from the diverse communities in the state



# Future Initiatives for Ongoing Collaboration and Responsiveness to Diverse Communities

## Community Engagement Specialist for the Bureau of Crisis, Emergency, and Stabilization Initiatives

- Direct community connection to crisis response planning by providing education, seeking feedback and collaboration, and applying community feedback to ongoing crisis response implementation, development, and improvement
- Collaboration with underserved communities to identify policy and program needs
- Development and delivery of public messaging related to 988 and other related crisis services
- Participate in community mental health planning efforts with the County Directors of Community Services

#### 988 Community Education and Marketing Plan

• Contract with a strategy group to host focus groups in the diverse and underserved communities to collect data and information to inform a largescale 988 marketing campaign

Establishment of Youth Advisory and Family Advisory Boards from diverse communities to gain critical feedback from stakeholders on access and service delivery



# **Additional Challenges:**

- Awareness: Ensuring all New Yorkers are aware of what 988 is and how to use it. Reaching out to all communities.
- How will 988 interface with 911?
- Connections and warm handoffs from the crisis system to the rest of the service system
- Collecting real time data statewide
- Ensuring ongoing feedback from clients and providers
- Geo location



# THANK YOU !

