

Engagement Now: Speaking As One Voice to #Act4MentalHealth

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**You Can't Know
Where You're Going,
Until You Know
Where You've Been**

**Mental
Health
Legislation
in 2016**

Great Deal of Progress, However,

Future is very uncertain and

YOUR VOICE IS NEEDED

MORE THAN EVER...ENGAGE

2016 An Incredible Year of Progress

A Lot to Pride Ourselves On

- ✓ **Paid Family Leave**
- ✓ **Mental Health Ed in Schools**
- ✓ **Prescriber Prevails Reform**
- ✓ **21st CENTURY CURES ACT**

YOUR VOICE MADE IT HAPPEN

Our Advocacy Voice was KEY in Bringing About Hard Fought Change



Step Therapy & Fail First Regulations

Our Advocacy Voice was KEY in Bringing About Hard Fought Change



Rep. Tim Murphy @RepTimMu... · 1h ✓
Thank you @NAMINEWYORK for helping families in #mentalhealth crisis every day & TY for never giving up the fight for #HR2646 #CuresNow!

**REAL FEDERAL MENTAL HEALTH REFORMS CONTAINED
IN 21st CENTURY CURES ACT**

**Our Advocacy Voice was KEY in
Bringing About Hard Fought Change**

**NAMI-NYS members are
projecting their voices
louder, clearer and more
creatively than ever before.**

**Self Advocacy and
Advocating for each other**

Our Advocacy Voice Using Our

Bravery

Resilience

Actions

Intelligence

Not Taking No for an Answer

Strength

UNITED WE STAND: ADVOCATING For YOUR NEEDS & THE NEEDS OF OTHERS

**WE MUST FIGHT FOR A SYSTEM THAT
ADDRESSES THE NEEDS OF ALL PEOPLE
IMPACTED BY MENTAL ILLNESS
ESPECIALLY THE ONES WHO CAN'T
ADVOCATE FOR THEMSELVES**

**UNITED WE STAND
ADVOCATING FOR EACH OTHER**

Inspiring Quote 1:

**If I am not for myself, who will
be for me?**

**But if I am only for myself, who
am I?**

If not now, when?-Rabbi Hillel

**UNITED WE STAND
ADVOCATING FOR EACH OTHER**

Inspiring Quote 2:

**If we cannot unconditionally
Love
Ourselves**

**We will never unconditionally
Love
Another**

**Angels spread my message
A Wildfire of compassion**

-Joseph S. Fusaro (NAMI Westchester)

THE TIME IS NOW!

Too Many in our Community Are:

- ❖ **Falling Through The Cracks**
- ❖ **Suffering**
- ❖ **Underserved and Not Getting the Care They Need**
- ❖ **Homeless**
- ❖ **Incarcerated**
- ❖ **Taking Their Own Lives**

**YOUR VOICE & BRAINS ARE NEEDED
TIME TO ENGAGE**

What's Next???



**Key Issues in NYS and How They Are Addressed in
2017-18 Executive Budget Proposal**

Kendra's Law

- **Kendra's Law is one of the most misunderstood but effective laws and treatment options for people with serious and persistent mental illness.**
- **NAMI-NYS has long supported the use of Assisted Outpatient Treatment (AOT) *in the most extreme cases* for people whose illness is so severe that they don't recognize they are sick and need treatment which can make them a danger to themselves or others.**
- **Kendra's Law ensures people with the most serious forms of mental illness are first in line to get the limited services available.**

Kendra's Law

Setting the Record Straight

Kendra's Law is more than therapy and medication. People on an AOT order can receive:

- **Housing**
- **Wellness Skills**
- **Job training**
- **Other skills and trainings to live independently in the community**

Kendra's Law Setting the Record Straight

MENTAL HEALTH NOW

PRESENTED BY  **nami** | **NYS**
National Alliance on Mental Illness



<https://vimeo.com/168080535>

Kendra's Law

The Bottom Line

Studies Demonstrate the Success of Kendra's Law:

Since its enactment, Kendra's Law has been the subject of multiple studies. These studies have consistently found that in NYS for those receiving an AOT order is has:

- **reduced homelessness (74%);**
- **reduced suicide attempts (55%);**
- **reduced substance abuse (48%);**
- **reduced physical harm to others (47%);**
- **reduced hospitalization (77%);**
- **reduced arrests (83%);**
- **reduced incarceration (87%).**

A study released in 2009 found that Kendra's Law causes no increase in perceived stigma or coercion among recipients, and that the court orders themselves (not just the availability of high-quality services) are instrumental in the program's success.

Kendra's Law In Exec Budget Proposal

**As detailed on page 897 of the Aid to
Localities Bill:**

**For services and expenses related to adult
mental health services, including assisted
outpatient treatment pursuant to article 9 and
other provisions of the mental hygiene 5 law
(36939) \$7,580,000**

**This is the same funding level as last year's
budget.**

Housing With Wrap-Around Services

What's in Budget Proposal

- **Provide \$10 Million to Enhance Support for Existing Residential Programs.** The Budget increases funds for supported housing and single residence occupancy programs. This investment will help preserve access and maintain existing housing capacity as the State brings new housing units online through the Empire State Supported Housing Initiative.

NAMI-NYS Response

- **\$10M is a small investment that fails to address the multiple housing needs for people with serious mental illness.** Our housing advocacy coalition consisting of ACLNYS, MHANYS and NYAPRS is **calling for \$38M annually for the next three years (\$115 total for the three years).**

Housing With Wrap-Around Services

What's in Budget Proposal

- **Fund 280 Additional Supported Housing Community Beds:** The Executive proposal would eliminate 140 State-operated residential beds, reflecting \$5.25 million in savings, and reinvest \$2.3 million to establish 280 scattered-site supportive housing beds.
- In addition, the Executive would provide \$10 million to support an increase in rental subsidies for OMH supported housing programs.

NAMI-NYS Response

- While this appears to be positive, NAMI-NYS would want to see more of the savings reinvested in housing and more research on this reconfiguration needs to be conducted.
- **Key questions:**
 - 1-How is the state reconfiguring the beds?
 - 2-How did they come to the \$2.3m investment from \$5.25m in savings?

Community Services

What's in Budget Proposal

- **Invest \$11 Million in Additional Community Services.** This additional annual investment will be used to expand community services **based on regional needs reflecting stakeholder input**, and is expected to reduce the need for more costly inpatient beds in FY 2018. Once fully implemented, this additional commitment will bring the total new investments since FY 2015 to \$92 million annually.

NAMI-NYS Response

- It would appear using the agreed upon \$110k reinvestment per bed reduction formula, that **the Governor aims to reduce another 100 beds.** This is very concerning to NAMI-NYS, especially when coupled with the fact that the budget's housing investments are almost a quarter of what we think is needed. **Reducing beds without the proper housing and community supports in place can have disastrous results.**

Criminal Justice Reforms Crisis Intervention Teams (CIT)

What's in Budget Proposal

- Page 913 of the Aid to Localities bill calls for **\$500k for Crisis Intervention Teams.**

NAMI-NYS Response

- This is a small investment, but is aligned with what the executive budget has called for in the last few years. The legislature has increased the funding in the last few budget cycles; NAMI-NYS will call on them to do so once again. More funding is needed for this vital program which helps create the most positive outcomes when police and first responders interact with people with mental illness and their families.

Criminal Justice Reforms Raise the Age

What's in Budget Proposal

- The Executive Budget would raise the age of juvenile jurisdiction to 17 in 2019 and to 18 in 2020, and would provide services for 16 and 17 year olds who are involved in the juvenile justice system.
- Under the Executive proposal, newly sentenced youth would be placed in Office of Children and Family Services (OCFS) facilities.
- **The Executive provides \$110 million for additional OCFS facility capacity.**

NAMI-NYS Response

- We applaud this much needed move.

Criminal Justice Reforms

Establish Jail-Based Restoration Programs

What's in Budget Proposal

- Currently, defendants who are deemed incompetent to stand trial are treated at an OMH inpatient psychiatric hospital until they are restored to competency and returned to jail to await trial. This cycle often repeats itself with more than one visit to the inpatient psychiatric hospital, extending the time individuals are detained prior to trial. OMH will work with counties on a voluntary basis to develop specialized residential treatment units within their jails. **The Executive Budget invests \$850,000 to assist county jails in making any necessary infrastructure improvements to provide these separate treatment units**

NAMI-NYS Response

- This is desperately needed and actually a very progressive way of addressing a major problem. However, \$850k may not be enough to make the changes necessary, especially when factoring in the need to include staff trained to handle those with SMI.

Why It's Time for the Incorporating Families in Mental Health Care Act:

Family Education and Involvement Promotes Best Patient Centered Mental Health Care and Recovery Outcomes

- ◆ 20% of New York's adults (1.6 million) & children (359,360) experience a mental health disorder each year, with over half a million living with serious mental illness.^{1,2}
- ◆ For most in treatment, adults and children alike, recovery extends outside clinical settings and into their homes. Providers must recognize the importance of working with families to support recovery
- ◆ However, more than one-half of families reported a healthcare provider saying they were unable to speak with them about the patient's condition (54%) and they were "included less than they felt they should have been" in conversations with providers about care (55%).
- ◆ Moreover, a 2013 study of patients with serious mental illness who had family contact, but not family involvement in care, found that more than three-quarters (78%) wanted their families included in treatment.

WITH MENTAL HEALTH RECOVERY TEAMS EVERYONE WINS

Given the appropriate education and support, most families can play an important role in supporting the recovery of their loved one with mental illness.

Family education helps relatives gain an understanding of illness and treatment issues, improves the quality of family interaction with medical professionals and loved ones, and thus bolsters family involvement in care and recovery, which has been shown generate best outcomes.

Clinical and peer family education have been established as evidence-based practices.

- ◆ A randomized design study of Recovery-Oriented Decisions for Relatives (REORDER) concluded that a patient-family shared decision-making process and family involvement benefits patients with serious mental illnesses. By significantly reducing paranoid ideation and enhancing service engagement.
- ◆ Another study found that involving families from the start of clinical treatment improves outcomes for young peo-

New York State's New Medicaid Model Must Include Family Education & Recovery Teams

NYS is implementing a new Medicaid program-Home & Community Based Services (HCBS)-funding a range of services including family support. Unfortunately, this promising initiative has reached very few eligible Medicaid beneficiaries to date because of the program design, which makes it difficult to access services. For family support, the program requirements limit what providers can offer and who they can serve. In order for NYS to achieve its goal of transitioning to a recovery-centered mental health service delivery system, it must redesign HCBS to offer more flexible services that meet the needs of individuals *and* their families.

The Incorporating Families in Mental Health Care Bill Would:

- ◆ Require the New York State to produce materials to educate individuals, families and providers on the benefits of family education, engagement and working as a recovery team.
- ◆ Provide further education materials on HIPAA laws including a document that families can give to providers stating that providers must listen to their insights and concerns.
- ◆ Require hospital staff to receive materials that explain the importance of including families in mental health care.
- ◆ Require providers to ask **all** HCBS eligible clients how they would like their families included in care.
- ◆ Provide health home care managers working with HCBS eligible clients with information about the benefits of including families in care.
- ◆ Fund the developments of summits around the state to educate New Yorkers about the importance of including families as part of routine mental health care.
- ◆ Have the Office of Mental Health hold webinars on the importance of family engagement and recovery teams.

For More Information Contact Matthew Shapiro at 518-462-2000 or Matthew@Naminys.org

QUICK NATIONAL LOOK



NAMI Priorities

- **Invest in Mental Health and Innovation**
- **Fight for Medicaid**
- **Promote Early Intervention**
- **Improve Integration of Care**
- **Support Caregivers, Military Service Members and Veterans**
- **End The Criminalization of Mental Illness**

**We Must Also Fight to Ensure that
Investments Contained in 21st Century
Cures Act are Funded**

**#ACT4
MENTAL
HEALTH**





2017 Legislative Advocacy Day

Take Action! Make Your Voice Heard!

Create a More Mentally Healthy New York State!!!



Tuesday, February 14th 9am-3pm

Meeting Room 4, Empire State Plaza Concourse

THANK
YOU

jucoolimages.com

QUESTIONS?

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Make sure you are on the NAMI-NYS Email list