

Daniel P. McCoy County Executive

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Stephen J. Giordano, Ph.D. Director of Mental Health

Cindy G. Hoffman, LCSW-R Deputy Director

TO: Hon. Wanda F. Willingham, Chair

Audit and Finance Committee

FROM: Dr. Stephen J. Giordano, Ph.D.

DATE: October 2, 2024

RE: Proposed 2025 Budget

In anticipation of the 2025 Tentative Annual Budget to be submitted by the County Executive, the following information is required by the Audit & Finance Committee:

1. Identify department representative appearing before the Audit & Finance Committee for your agency budget presentation.

Dr. Stephen Giordano, Director Cindy Hoffman, Deputy Director Michael Fitzgerald, Associate Director of Fiscal Operations

2. Identify by line item all vacant positions in your department.

4310.12107.001.430012 Supervising Psychologist

4310.12107.003.430173 Supervising Psychologist

4310.12135.001.430023 Psychiatric Nurse

4310.12135.004.430118 Psychiatric Nurse

4310.12201.001.430135 Supervising Social Worker

4310.12201.009.430176 Supervising Social Worker

4310.12203.006.430231 Staff Social Worker II

4310.12203.010.430236 Staff Social Worker II

4310.12205.033.430106 Staff Social Worker

4310.12205.025.430107 Staff Social Worker

4310.12205.048.430174 Staff Social Worker

4310.12248.001.430243 Employment Specialist

4310.15027.001.430241 Peer Advocate

4310.15183.003.430194 Health Home Care Manager

4310.16043.005.430184 Keyboard Specialist I

4310.16104.003.430084 Account Clerk II

4310.16106.001.430246 Account Clerk III

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4310.16106.002.430247 Account Clerk III
4310.16106.003.430248 Account Clerk III
4310.12755.001.430263 Mental Health Clinician
4310.12755.003.430265 Mental Health Clinician
4310.12755.006.430268 Mental Health Clinician
4310.12755.007.430270 Mental Health Clinician
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3. Identify by line item any new position(s), how the position(s) will be funded and the reimbursement rate(s), if applicable.

A4310 – 12267– 001 – 430249 Special Project Coordinator

 The adding of a Special Projects Coordinator into the Department of Mental Health Budget will allow the department to stay aware of important initiatives and funding opportunities

4310.15130M.001.430271 Mental Health Assistant - Mobile Crisis

 By hiring bachelors level staff in crisis services will allow for easier recruitment. In addition, follow-up/triage and case management can be performed by these individuals enabling masters level clinicians to focus on clinical issues.

4310.15130M.002.430272 Mental Health Assistant - Mobile Crisis

 By hiring bachelors level staff in crisis services will allow for easier recruitment. In addition, follow-up/triage and case management can be performed by these individuals enabling masters level clinicians to focus on clinical issues.

4310.15181.001.430273 Health Home Care Manager Veteran

 This will allow the Department of Mental Health to broaden the scope of its clinical services with veteran care managers to better support those with military backgrounds by providing support and wrap around services.

4320.12239.001.200027 Prevention Educator

• This is funded by Opioid Settlement Funds and housed in the Crime Victim and Sexual Violence Center (CVSVC).

4320.15504.002.200028 Administrative Assistant

 This is funded by Opioid Settlement Funds and housed in the Albany County Coroner's Office.

4320.16021.001.200026 Data Engineer

This is funded by Opioid Settlement Funds and housed in the Department of Health.

- 4. Identify by line item any proposed salary increase(s) beyond union contract commitments. Include justification for those raise(s).
 - 3% Cost of Living Adjustment applied to nonunion positions.
- 5. Identify by line item any position proposed to be eliminated or salary decreased.

Eliminated Positions

- 4310.12148.001.430224 Grants Administrator
- 4310.16102.001.430110 Account Clerk I
- 4310.16104.001.430082 Account Clerk II
- 4310.16104.002.430083 Account Clerk II
- 4310.16197.001.430171 Insurance Billing Manager
- 4310.15027V.001.430244 Peer Advocate MH for Veteran
- 4310.15027V.002.430245 Peer Advocate MH for Veteran
 - Both peer advocates were entered through RLA in 2024 and were taken out through RLA in 2024 due to the addition of the Health Home Care Manager Veteran position. This new position enhances our ability to find candidates and improve mental health for veterans.
- 6. Identify by line item all positions that are funded by grant money, the percentage of funding provided by the grant and indicate whether there is a commitment that the grant has been renewed for 2025.

Jail Diversion

- 4310.12205J.047.430040 Staff Social Worker
 - o 2024: 100% Funded.
 - o 2025: 100% Funded
- 4310.15027J.003.430208 Peer Advocate
 - o 2024- Zeroed out in 2024 Budget

Albany County Reentry Task Force (ACRTF)

- 4310.12260.001.430029 Reentry Coordinator
- o 2024: 100% Funded.
- 2025: 100% Funded until September 30, 2025, with a strong likelihood of renewal in 2025, as occurred in 2024.
- 7. Identify by line item all job titles proposed to be changed or moved to another line item (e.g., reclassifications).
 - 4310.12201.002.430136 Supervising Social Worker changed to 4310.12753.001.430251 Supervising Mental Health Clinician
 - 4310.12201 A.010.430216 Supervising Staff Social Worker changed to 4310.12653 A.002.430252 Supervising Mental Health Clinician A
 - 4310.12203.001.430219 Staff Social Worker II changed to 4310.12754.001.430253 Mental Health Clinician II

- 4310.12203.004.430229 Staff Social Worker II changed to 4310.12754.002.430254 Mental Health Clinician II
- 4310.12203.002.430227 Staff Social Worker II changed to 4310.12754.003.430255 Mental Health Clinician II
- 4310.12203.003.430228 Staff Social Worker II changed to 4310.12754.004.430256 Mental Health Clinician II
- 4310.12203.005.430230 Staff Social Worker II changed to 4310.12754.005.430257 Mental Health Clinician II
- 4310.12203W.001.430209 Staff Social Worker II changed to 4310.12754W.006.430258 Mental Health Clinician II W
- 4310.12203 W.003.430211 Staff Social Worker II changed to 4310.12754 W.007.430259 Mental Health Clinician II W
- 4310.12203W.006.430214 Staff Social Worker II changed to 4310.12754W.008.430260 Mental Health Clinician II W
- 4310.12203 W.005.430213 Staff Social Worker II changed to 4310.12754 W.009.430261 Mental Health Clinician II W
- 4310.12203 W.004.430212 Staff Social Worker II changed to 4310.12754 W.010.430262 Mental Health Clinician II W
- 4310.12205.021.430054 Staff Social Worker changed to 4310.12755.002.430264 Mental Health Clinician
- 4310.12205.026.430057 Staff Social Worker changed to 4310.12755.004.430266 Mental Health Clinician
- 4310.12205.024.430056~Staff~Social~Worker~changed~to~4310.12755.005.430267~Mental~Health~Clinician
- 4310.12205.040.430140 Staff Social Worker changed to 4310.12755.007.430269 Mental Health Clinician
- 4310.12189.003.430165 Intensive Case Manager changed to 4310.15183.005.430250 Health Home Care Manager

8. Provide an itemized breakdown of specific expenditures regarding fees for services lines and miscellaneous contractual expense lines and indicate 2024 budgeted expenditures compared to 2025 proposed expenditures (included a column for each expenditure year).

Fees For Service	2024 Budgeted	2025 Budgeted
A94310.44046.DCJSR Fees For Services	\$0	\$65,509
A4310 44046.JDG22 Fees For Services	\$0	\$174,080
730 evals.@ Jail	\$66,000	\$80,000
Interpreter Services	\$9,900	\$10,000
Shredding	\$1,632	\$2,000
Accounting Fees	\$3,000	\$3,000
Survey Monkey	\$400	\$0
Annual Dues	\$11,475	\$11,820
Personal Service Delivery for Kendra's Law	\$720	\$500
Arbitration/Grievance Fees	\$835	\$1,000
Client Needs	\$600	\$720
K Checks	\$1,000	\$0
Insurance Clearing House	\$9,000	\$9,000
Background Checks	\$850	\$0
Medi Play Patient Health Info	\$1,166	\$1,166
Robo-Calls	\$3,120	\$4,800
HOPE -Suicide Prevention App.	\$1,000	\$0
Millin - Pro	\$1,500	\$1,500
CCSI-CFR Preparation	\$9,750	\$9,750
SoloProtect	\$14,400	\$14,400
ACRTF DCJS Reentry Expenses	\$4,000	\$4,000
Total	\$140,348	\$393,245
Miscellaneous Contractual Expense	2024 Budgeted	2025 Budgeted
A4230.44999 Miscellaneous Contractual Expense (OASAS)	\$226,622	\$0
A4322.44999 Miscellaneous Contractual Expense (OMH)	\$125,000	\$203,961

9. Identify any new initiatives and/or eliminated programs, and reimbursements associated with those programs.

ACDMH has secured grant funding for the Albany County Justice and Mental Health Collaboration Program (JMHCP) from Department of Justice. This initiative focuses on reducing recidivism and addressing criminogenic needs for individuals released from incarceration, particularly those referred by Probation.

The core objective is to develop a comprehensive jail re-entry case management model for individuals with serious mental illness, focusing on enhancing post-release support, connecting them to resources, providing peer support, and addressing social determinants of health.

10. Identify all County vehicles used by your department. Include the title of any employee(s) assigned each vehicle and the reason for the assignment of a County vehicle to that employee.

The Department of Mental Health has twelve (12) County vehicles. They are assigned to different programs, not individuals. The vehicles are used to transport clients and engage in community activities as needed. Our Social Workers and Case Managers use these vehicles to engage and assist clients in the community.

11. Provide a specific breakdown of the use for the proposed funding for all Conferences/Training/Tuition line items in your department budget.

Of the proposed budget of \$50,702 for conference/training/tuition, the amount of \$38,952 is budgeted for employees to keep current with clinical standards, required trainings and licensing, as per the union contract. In addition, \$5,500 is budgeted for the cost of CIT (Crisis Intervention Team) training provided to area police departments. This training is an internationally recognized, evidence-based curriculum providing officers with in-depth training in how to better understand and more safely interact with individuals experiencing mental health crises. The training is offered twice a year to Albany County law enforcement professionals. Further, \$6,250 is dedicated for fiscal technical assistance to meet state regulatory requirements.

12. Provide a specific breakdown of overtime line items in your department budget including the actual overtime expenditures for the previous two years.

Overtime is paid to employees required to provide coverage on evenings, weekends and holidays at the Albany County Correctional Facility (ACCF) and Mobile Crisis/ACCORD Teams. Actual overtime expenditures for 2023 were \$163,841.62 and \$148,859.11 in 2022. Due to ongoing workforce challenges, the overtime budget in 2025 has been increased to offset this anticipated cost.

13. Identify by line item any positions that were established/changed during the $\underline{2024}$ fiscal year.

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4310.12248.001.430243 Employment Specialist
4310.16106.001.430246 Account Clerk III
4310.16106.002.430247 Account Clerk III
4310.16106.003.430248 Account Clerk III
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14. Please describe the biggest risk your department faces and the actions you have taken (or will take in **2025**) to better understand that risk and mitigate it

Once again, the needs of those living with behavioral health challenges (mental illness and addiction) rises to the forefront of national, state and local attention. This is as it should be ... and, it is as it should have always been. Unfortunately, this is not as it has historically always been in our nation and, collectively, we must continue to play "catch-up" as we've come to recognize that the health of our communities very much depends upon the mental health of our communities. We are, however, making great strides and we are catching up. The behavioral health needs of our community are squarely in the forefront of our attention at DMH, we are making positive strides, we are improving the quality of life of many of our fellow community members ... and this is as it should be.

In Albany County, with the acute effects of the global pandemic behind us we are beginning to understand its long-term consequences on the emotional health of our communities. With the acute impacts of the prescription opiate and heroin epidemic behind us we are beginning to realize that the consequences of the fentanyl scourge are no less horrific. And the prevalence of our fellow citizens experiencing mental health crises shows no signs of diminishing even as we ramp up our services and focus our resources towards those most in need. All of this leaves precious little time for the rest of us who simply struggle each day with stress, and worry and everyday mental health challenges. Yet all of us require respect and care and it is our job at DMH to meet people where they are ... whether acutely suffering, chronically struggling, or simply dissatisfied with their life circumstances ... and, assist them in any and every way that we can.

In this regard, our most vexing challenges in Albany County are not especially unique and generally mirror those that vex communities across the state and nation, i.e., unacceptable numbers of unhoused individuals who live in poverty, many of whom are also experiencing mental health crisis and addiction; under-resourced community services, shrinking hospital systems and overburdened emergency departments struggling to keep up with the behavioral health needs of our community members; and, as a consequence, the all-too-often criminalization of behavioral health conditions leading to our jails and prisons turning into de facto psychiatric hospitals and drug/alcohol rehabs. All of this in the context of a nation-wide workforce shortage in the behavioral health field.

As I wrote to you last year, our behavioral health care system is under great strain at every level. Our systems of health and behavioral healthcare are weighed down by systemic disparities and inequities that lead to real suffering and challenges on an individual level. The day-to-day life challenges faced by many of our residents are as a great as they have ever been. And this reality is what motivates us at the Albany County Department of Mental Health (ACDMH).

ACDMH is uniquely positioned to identify unmet behavioral health needs in our community as we directly provide an array of critical services as well as oversee a network of state-funded services via contract. This allows us to shape the future direction of behavioral health care in Albany County while simultaneously addressing the individual needs of our fellow community members. Our goal continues to be creating a more responsive system of care that identifies emerging needs early, intervenes quickly and effectively, and reduces the need for crisis intervention whenever possible. The biggest risk faced by ACDMH in the upcoming year continues to be failing to recognize the opportunity (and responsibility) to transform this system that exists within every action and within every decision we take.

In 2025, we hope to mitigate this risk by expanding programs and services that have proven to be effective (e.g., MOTOR), strengthening our relations with community partners working toward shared goals (e.g., distribution of opiate settlement funds), and, continuing to explore innovative projects (e.g., street-psychiatry) in the process. Our attention has been directed to address quality of life issues raised by neighborhood residents and business owners who frequently suffer the consequences of the strains on community behavioral health resources referenced above. In the coming year, we once again intend to focus on delivering services that offer effective response to these issues (i.e., outreach, engagement, linkage and intervention) while simultaneously advocating for increased awareness of the importance of mental health and elimination of stigma associated with behavioral health conditions that still exists with far-reaching impact.

15. Please list performance indicators and metrics used by your department and current statistics for those metrics.

In 2024, DMH embarked on the development of a data dashboard that will combine multiple data streams in order to reflect organizational, programmatic and fiscal health and outcomes at a glance. We anticipate that this data dashboard will be operational in 2025. The programmatic data below, as in past years, reflects the last year in which complete data exists.

In 2023, 735 individuals were served by the Adult Outpatient Clinic.

In 2023, 1306 inmate/patients were served by the Mental Health Unit at ACCF with over 9000 total inmate/patient contacts.

In 2023, 2432 crisis contacts (822 in community; 1076 telephonic) were provided by the Mobile Crisis Team. 60% of contacts were diverted from further intervention.

In 2023, 291 crisis contacts (133 in community; 158 telephonic) were provided by the ACCORD team. 56% of contacts were diverted from further intervention.

In 2023, 332 individuals received outreach, support and/or intervention from the MOTOR team.

16. Note specifically all potential new unfunded mandates, regulations, risks to grant revenues, risks to reimbursement revenues, from any source.

Unfunded mandates continue to challenge ACDMH's operation of ACDMH and its ability to effectively respond to the behavioral health needs of the community. Unfunded mandates continue to include i) providing staff resources to complete investigations and examinations as well as provide care management and medical court testimony for an ever-growing number of Assisted Outpatient Treatment (AOT) cases (aka "Kendra's Law") – 154 cases in 2023); ii) providing staff resources to review and report mental health related SAFE Act cases (144 cases in 2022); iii) providing staff resources to complete court ordered psychological competency examinations (79 cases in 2023); and, as of 2021, iv) responsibility for 100% of costs associated with hospital-based restoration services for individuals facing felony charges and deemed incompetent to proceed to trial (close to 1.1 million expended in 2023 & projecting 3 million expended in 2024). ACDMH receives no funding or revenue to provide these mandated services and therefore must find alternative budgetary means to support these activities. These unfunded mandates have hampered ACDMH operations for a number of years and reduces our overall ability to address other mission critical matters.