OhioTHRIVES

HPIO Forum: The State of Ohio’s Health
Director Lori Criss
May 1, 2023
Governor DeWine

“If we build on our successes and the work we have started together, we can truly bring about lasting change... **the system isn’t broken – it was just never fully built**, and it does not exist everywhere in Ohio... YET! And so, we must build it!”

*From the State of the State Address, March 23, 2022*
The Vision

“We can never fully remedy the mistakes of the past, we can resolve to change the course of history moving forward by making help visible, accessible, and effective in all communities in Ohio. We can do this by investing significantly more resources in the following:

• We must **grow our behavioral health workforce**;

• By **increasing research and innovation**; and

• By **building a community capacity** for care that offers better crisis response services and treatment, increased prevention efforts, and more residential and outpatient services.”
Supporting Healthy People in All of Ohio’s Communities

Supporting Healthy People in the Community
Expanding Ohio’s Continuum of Care

GROW
COMMUNITY CAPACITY

SUSTAIN

Independent Housing
Permanent Supportive Housing/Adult Care Facility/Recovery Housing
Short-term Residential for Hospital Diversion or Step-Down
Public and Private Psychiatric Hospitals for Civil and Forensic Patients

Prevention • Housing • Employment • Day Services • Outpatient Treatment
Short-term residential treatment and step down centers to reduce hospital stays
Acute inpatient clinical care

988/Crisis Line • Mobile Crisis Teams
Crisis Stabilization Centers • Post-crisis Wraparound

WORKFORCE RECRUITMENT AND RETENTION

Ohioans will benefit from expanded community-based outpatient treatment and supports; added housing options; more residential treatment options; and increased capacity for crisis response. Investments in these areas allow for care, treatment, and recovery to occur at home and in the community, instead of in institutions.
Strengthening Key Local Partnerships

Ohio currently has 50 Alcohol, Drug Addiction, and Mental Health (ADAMH) Boards.

Boards plan, fund, and evaluate community-based mental health and addiction services.
Quick Facts about the State of Behavioral Health in Ohio

Access to Care + Workforce Shortage: Nearly 2.4 million Ohioans live in communities that do not have enough behavioral health professionals, and in the last decade the demand for services increased 353% while the workforce only increased 174%.

Overdose and Suicide: Each day 19 Ohioans die prematurely from unintentional overdose and suicide, ranking these conditions alongside cancer, heart disease, and diabetes as leading causes of death in Ohio.

Youth Behavioral Health in Ohio
Nearly 550,000 children ages 3-17 in Ohio have one or more emotional, behavioral, or developmental conditions

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<th>2021- Ohio High School Girls</th>
<th>2021- US High School Girls*</th>
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<td>Feelings of sadness and/or hopelessness</td>
<td>56.2%</td>
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<td>Considered suicide</td>
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Estimated Prevalence of Mental Health Issues among Adults in Ohio

- 1.4 Million Ohioans with a Mild/Moderate Mental Health Diagnosis
- 7.2 Million Ohioans without a Mental Health Diagnosis
- 900K Ohioans have a Substance Use Disorder
- 600K Ohioans with a Serious Mental Illness

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SFY24-25 Priorities
Move away from symptom management to an aggressive pursuit of recovery, health, and wellness
## What does it take to THRIVE?

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<th>Health</th>
<th>Home</th>
<th>Purpose</th>
<th>Community</th>
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| • Prevention education and mental health promotion for Ohioans of all ages at home, school, work, and in the community.  
• Screenings and early intervention in childcare, pediatric, and primary care.  
• Suicide prevention.  
• Gambling disorder prevention.  
• Stigma reduction.  
• 988 and crisis services.  
• Overdose prevention.  
• Expanded access to integrated care.  
• Increased outpatient treatment.  
• Increased hospital access.  
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• Enhanced safety and quality of permanent supportive, recovery housing, subsidized independent living.  
• Increased residential support supplement (RSS) for at-risk Ohioans.  
• More step-down residential options and housing choices for Ohioans recovering from mental illness and substance use disorders.  
• 988 and crisis services.  
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• Expanded access to integrated care.  
• Expanded outpatient treatment.  
• Increased hospital access.  
• Support and navigation to promote treatment engagement.  
• After school programs.  
• School attendance and degree attainment.  
• Career education and training attainment.  
• Employment.  
• Supported employment.  
• Peer support.  
• Clubhouse expansion. |
| Workforce | Infrastructure | Innovation | Community |
| Student Wellness and Success Funds.  
Student Assistance Programs in schools.  
Community Coalitions.  
Mental Health First Aid.  
Crisis Intervention Training.  
Leveraging technology.  
Specialized dockets.  
Enhanced behavioral health services and recovery supports in jails and prisons.  
Better collaboration with hospitals for discharge planning and with jails and prisons for community reentry.  
Expanded forensic center capacity.  
Peer Run Organizations, Recovery Community Organizations, Consumer Operated Services.  
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OhioMHAS
Budget
Priorities: OhioTHRIVES

• Continued Focus on Prevention and Early Identification for Children, Youth, and Families
• Strengthening Focus on Adults with Serious Mental Illness
• Protecting Community Funding for a Full Continuum of Prevention, Treatment, and Recovery Supports
• Growing Ohio’s Crisis Continuum: Connect, Respond, Stabilize, and Thrive
• Meeting the Needs of Criminal Justice-Involved Ohioans
• Supporting the State’s Regional Psychiatric Hospitals Safety Net
• Growing a Strong and Supported Workforce
Investing in Innovation and Research: State of Ohio Action for Resiliency Network (SOAR)

• Get to the root causes of mental illness and addiction.
• Uncover biological and environmental aspects of resiliency in the face of adversity.
• Develop new ways of preventing and treating mental illness and addiction.
• Train Ohio’s behavioral health workforce in cutting edge practices.
• Improve outcomes for Ohio’s diverse people and communities.
Wellness Workforce
Priority Pillars

- Increasing Career Awareness
- Supporting Recruitment
- Incentivizing Retention
- Supporting Contemporary Practice

Ohio’s Behavioral Health Wellness Workforce
Continuing the Fight Against Addiction

• Maternal Opiate Medical Supports (MOMS)
• Recovery Housing supports
• Increasing access to Medication Assisted Treatment and Mobile MAT pilot
• Addiction Treatment Program
Project DAWN Activities, Ohio, 2014 - 2021

Graph showing:
- Number of Naloxone Kits Distributed*
- Number of Persons Trained
- Number of Known Overdose Reversals

Data Points:
- 2014: 19,760
- 2021: 145,645
- 2021: 80,896

*Note: Number of Naloxone Kits Distributed includes both marketed and non-marketed kits.
OhioMHAS Priorities for **Ohio’s Youth and Families**

- Growing Coordinated Systems of Care
- Enhancing Peer Support Services
- Increasing Early Childhood Intervention and Maternal Supports
- Building Resiliency and Protective Factors
- Developing Partnerships with Primary Pediatric Care

**Crisis Services and 988**
OhioMHAS Priorities for Ohio Adults with Serious Mental Illness

- Growing Access to Wellness and Coordinated Systems of Care
- Recovery Services Expansion
- Expanded Inpatient Access
- Expanded Criminal Justice and Forensic Services
- Increased Housing Options and Enhanced Quality

Crisis Services and 988

600K Ohio Adults with Serious Mental Illness

1.4 Million Ohio Adults with a Mental Health Diagnosis

7.2 Million Ohio Adults without a Mental Health Diagnosis

*All numbers based on prevalence estimates
Our Vision

• Visible and accessible crisis continuum of services.

• Supports that are person-centered and quality-driven.

• Ensuring people are stabilized and thriving in their community.
Ohio’s Crisis Landscape Analysis

Contents

* From the Director
* How to Use this Report
* Background
* Achieving the Ohio Vision for BH Crisis Services
* Methods and Framework
* Results
* Roadmap to the Ideal Crisis System Scorecard
* Thrive
* Regional Planning and Coordination
* SYNTHESIS OF THE CONSIDERATIONS
* CONCLUSION
* APPENDICES
Growing Crisis Services and 988

$86.5M across the biennium

**PRIORITY**

Provide Ohioans in crisis with an appropriate behavioral health care response, connect them to needed supports close to home, and reduce the burden on local law enforcement and emergency departments through:

- Supporting the ongoing operations of 988 in Ohio ($46.5M).

- Continued flexible funding to help grow Ohio’s local crisis services and infrastructure through locally identified needs and gaps that provide Ohioans with an appropriate response and safe place to have their crisis needs met ($40M).

**REAL RESULTS FOR OHIOANS**

- 988 Lifeline Centers receive over 10,000 calls, chats, and texts each month from Ohioans seeking help.
Questions | Discussion
Connect with Us

http://mha.ohio.gov/

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