

# MENTAL HEALTH SERVICES FUNDING

state facilities, including 15 beds for youths.

- A doubling of funding to \$2 million for suicide prevention by first responders, veterans, law enforcement and correction officers.

- \$1.25 million to hire more staff in the Department of Veterans Affairs to process more claims, including those stemming from post-traumatic stress disorder.

“By enhancing mental health supports, we’re not just helping people find stability and peace, we’re making our community safer,” Hochul said.

## Address workforce shortage

The budget also provides \$244 million in funding to confront a workforce shortage that has reduced the capacity for care at nonprofit service providers funded by the state, and delayed patient contact with psychologists and psychiatrists sometimes for months. The budget includes funding for a 2.84% adjustment in the cost of living for most mental health care workers. The nonprofit agencies had called for a 3.2% increase.

The budget also includes \$4 million to forgive student loans for licensed mental health clinicians serving children and families, and who qualify for the program.

Most of the state’s front-line care workers are making between \$25,000 and \$35,000 a year, with slightly higher pay on Long Island and in New York City, said Glenn Liebman, CEO of the Mental Health Association in New York State, whose members provide the services under state contracts. That wage has been mostly stagnant without a cost-of-living increase for more than 15 years, Liebman told Newsday. That has led to staff shortages, including at one Albany nonprofit which he said has 1,500 workers and 200 vacancies.

“They work with challenging people at times and their thanks is a salary you can get at McDonald’s,” Liebman said.

“It’s hard to stay in the job without rising up in the ranks or working three or four jobs,” said Jihoon Kim, CEO of the InUnity Alliance mental health care organization and former staffer for Hochul. “But it’s really just the start . . . but I’m a realist.”

## Push for more facilities, care on LI

### ONLY IN NEWSDAY

BY OLIVIA WINSLOW  
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When Jeffrey McQueen thinks about how to provide mental health services to those who need it, he latches onto community-based care, as opposed to inpatient psychiatric beds.

McQueen, executive director of the Mental Health Association of Nassau County, said while there has been a push to boost inpatient psychiatric beds at a time of increased need for mental health services, he sees reluctance among some to go to a hospital.

“If you ask someone, ‘Would you like to go to the hospital?’ Their first answer is no, even if we recognize they need a higher level of care,” McQueen said.

Some people balk because they fear being kept inside for an extended period, he said. Others fear the “stigma” of being hospitalized for mental illness, or their cultural background eschews seeking out such treatment.

As a result, McQueen said, “It’s important we normalize the conversation around mental illness and trauma because it’s important that people know nothing is wrong with them, but that something happened to them.”

To that end, he added, “we have a hospital diversion program, where people can go to respite [care] instead of the hospital.”

The “crisis respite care” program provides short-term assistance and intervention when someone’s symptoms cannot be managed at home.

But, McQueen noted, sometimes a client’s symptoms become too great to be managed in a community program.

“When an individual is supported first in the community-based organization and then guided into the hospital system, or guided to that higher level of care, that individual is



Jeffrey Friedman, CEO of CN Guidance, says his agency is adding a crisis stabilization center.

### WHAT TO KNOW

- Experts say the need for community mental health services has continued to rise on Long Island.
- New York State’s investment in mental health services has also continued to rise.
- More inpatient hospital beds for people in crisis, as well as increased community services, are key for Long Island, experts say.

more likely to accept it and the end results are better,” he said.

### Mental health investment

Experts have welcomed the state’s recent investment in mental health services — a \$1 billion, multiyear plan in the 2023-24 fiscal budget, with approximately \$118 million in new money included in the recently approved 2024-25 budget, according to the state Office of Mental Health.

But the experts also point to a serious need for expanded

community-based programs to cover gaps in service across sprawling geographic areas such as Suffolk County, and to help compensate for a shortage of psychiatrists, social workers and other therapists.

Among the groups receiving additional state funding are CN Guidance & Counseling Services in Hicksville and Outreach Development Corp., which has centers from Greenpoint in Brooklyn to Bellport in Suffolk. Both nonprofits are getting startup funds to establish crisis stabilization centers, where clients are assessed in under 24 hours and connected to treatment services.

Jeffrey Friedman, chief executive of CN Guidance, said his agency had received approximately \$1.5 million in funds for a crisis stabilization center at its Hicksville facility. Patients can stay there a maximum of 23 hours and 59 minutes since it’s not a residential facility.

“Currently, when people are in crisis, often they’re brought to the emergency room, and the ER can be full of stigma. It can traumatize an individual and more often than not, it is

not an appropriate place for care,” Friedman said. “What we’re building here is urgent care for mental health,” which he said they hope to launch in early 2025.

“We’re building a center that’ll be open 365 days a year, 24 hours a day, seven days a week,” Friedman said. “Open Christmas and New Year’s. . . . When they come here, they can get something to eat. They can take a shower, do their laundry, watch TV. All the time they’re in the center, they’re being assessed by professionals: a psychiatrist, social worker and a nurse.”

After the assessment, treatment is set in motion.

“We’re going to find them a provider who can continue that treatment immediately,” he said.

Krista Whitman, vice president and chief operating officer of Outreach Development Corp. said the organization is in line to receive \$1.25 million for its crisis stabilization center, and another \$825,000 for suicide prevention and crisis ser-

See SERVICES on A4

# Funds to help fill gaps in services

SERVICES from A3

vices. Representatives are currently scouting for a building in mid- to eastern Suffolk to lease for the center.

“Our goal is by the end of year we will have a location,” she said.

And like CN Guidance, individuals can only stay 23 hours and 59 minutes.

## More need, fewer beds

According to a report last month by state Comptroller Thomas DiNapoli, the mental health needs of New Yorkers have “greatly increased.” The report cited a 23% spike in the number of residents seen by the state’s public health system between 2013 and 2022. At the same time, DiNapoli’s report said the increase has coincided with a decline of 990 inpatient psychiatric beds in the state — almost 200 on Long Island — between April 2014 and December 2023.

State officials said they are increasing inpatient beds and adding an assortment of community-based care options, ranging from mental health clinics in communities and schools to mobile units and housing programs, in order to meet the surge in demand.

Michael Scarpelli, executive director of The Behavioral Health Service Line at Northwell Health, through its South Oaks Hospital — a 202-bed psychiatric hospital in Amityville — is on target to open an outpatient clinic and a partial hospitalization program in Riverhead, providing mental health services for children from age 5 to young adults by the end of 2024.

The partial hospitalization program would operate from 8 a.m. to 4 p.m.

Overall, he said, Northwell has 533 total inpatient psychiatric beds in a health system that includes facilities in Nassau, Suffolk, eastern Queens,

Manhattan, Staten Island and northern Westchester County.

“We ended up in Riverhead because there’s not a lot resources for children out there,” Scarpelli said.

Asked about gaps in service, Scarpelli said some patients in Suffolk have to travel long distances for mental health care.

“Folks sometimes struggle with transportation. The farther out east you go, there is more mileage to cover,” he said.

To address some of those issues, Stony Brook Medicine is seeking to expand its outpatient substance disorder clinic in Riverhead, via a state license, to improve access to individuals with mental health diagnoses, said Susan Wilner, assistant director of Behavioral Health Services Operations.

She added there are 40 inpatient psychiatric beds at Stony Brook University Hospital and 23 at Stony Brook Eastern Long Island Hospital in Greenport. Both hospitals also have outpa-



Nick Stahlman, an outreach peer specialist, speaks with program director Roseann Falcone inside a CN Guidance mobile unit.

DEBBIE EGAN-CHIN

tient behavioral health services.

Colleen Merlo, chief executive of the Ronkonkoma-based Association for Mental Health and Wellness, said her organization supports proposals to bring back inpatient psychiatric beds that were taken offline during the COVID-19 pandemic.

Still, she said her group “believes people can be best served in the community, when those services are adequate.”

Merlo lauded the “huge investment in New York State for mental health services. . . . But the truth of the matter is the mental health system has been

underfunded for decades. So it’s going to take multiple years of investments of this level to get us to a place where we’re able to meet the demands and needs of our communities.”

Dr. Leslie Marino, a psychiatrist and president of the Suffolk Medical Society, said while inpatient beds are “coming back online, it’s been a slow process,” citing as a major reason the difficulty in hiring psychiatrists.

“Long Island has a high cost of living, but psychiatrists in the public sector tend to have lower salaries. From what I’ve heard from a lot of inpatient facilities, [the holdup] is recruit-

# Better living with mental health treatment

BY OLIVIA WINSLOW

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The two women came to CN Guidance & Counseling Services in Hicksville through different avenues, but the end result was the same: Their connection with the center’s mental health treatment programs has led to better lives.

Christina Maley and Jennifer Pettway both have a bipolar diagnosis. And Pettway said when she came to the agency two years ago she was struggling with substance use as well, citing marijuana and the designer drug ecstasy.

Maley, 37 of Deer Park, said about seven years ago, “My mental health was poor . . . I had a manic episode. I was just making poor decisions about dating. I was hooked up with someone I was just not supposed to be with.”

She was brought out of crisis and stabilized at Huntington



Aurora Sisalli, left, a clinical therapist, speaks with Christina Maley, of Deer Park, a client who now also works as a peer counselor.

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Hospital, which recommended she go to the Hicksville counseling center for further care. Maley said she always took her medication and she had “good family support” throughout, but still faced extreme highs and lows at times because of

her illness.

Maley credits her longer term stabilization to the continued support she receives from CN Guidance. Now married, Maley said she works as a peer counselor at one of its residential programs and she also re-

mains a “client.”

“I’m working full time [at CN Guidance],” Maley said. “I have support at home in addition to the workplace. . . . Plus I do my counseling with my therapist every other week. I do medication management every six to eight weeks with one of the nurse practitioners here.”

She added: “I just think CNG is a great support and probably saved my life at one point. I’m just grateful to the people, the sense of community that everyone brings in every day.”

Pettway, 42, of Freeport, admits she had “an attitude” about CN Guidance when her lawyer suggested she enter the facility’s mental health court program, a jail diversion program.

She “got into a little trouble” Pettway acknowledged, although she stopped short of offering specifics.

“My lawyer suggested mental health court would be better

for me,” she said.

The program turned out to be a godsend, according to Pettway, who praised her counselor Perette Comond for helping her stay on track.

“I was hesitating about getting into the program,” Pettway said. “But since I’ve been in this program, literally they’ve been helping me find housing because I lost my housing. . . .”

She now lives in a three-bedroom home and has three of her sons, ages 9, 13 and 21, back home with her again. Her eldest son, 25, is in the Marine Corps living in California, Pettway said.

“They helped me get my kids back as well, due to the fact that I got a house.”

Pettway said she works as a home health aide, and is taking computer classes. The CN Guidance program “is important to me to make sure I stay clean and on the right path.”

They also make sure she

ing doctors," she said.

McQueen, of the Mental Health Association of Nassau County, agreed "the availability of psychiatric access has decreased. There aren't enough psychiatrists. There aren't enough clinics."

Scarpelli, of Northwell, also noted "individuals have retired, or left the health care field. That's something that we all need to be working on."

He said Northwell is developing two new psychiatry residency programs to boost staffing. "One is at Lenox Hill [hospital in Manhattan] and the other is going to be at South Oaks Hospital. We're hoping to have that starting in July 2025 at Lenox. We hope to start at South Oaks in 2026."

**Signs of progress**

New York State Office Mental Health Commissioner Dr. Ann Sullivan pointed to the state's \$1 billion investment in mental health services as a way to make major inroads toward increasing access, including adding 700 inpatient beds (500 in the community and 200 at state institutions, including 50 at the state's Pilgrim Psychiatric Center in Brentwood), and the "significant expansion of community-based services," such as certified health centers.

She said the health centers will be "tripled" in the next two

years, going from 13 to 39.

"There's one on Long Island now," she said, referring to CN Guidance.

There's also the expansion of ACT teams, which are mobile units that meet people in the community, including on Long Island. ACT stands for Assertive Community Treatment, which the state Office of Mental Health described as "multi-disciplinary, evidence-based teams [that] provide comprehensive and flexible treatment, support, and rehabilitation services to individuals in their community."

Friedman said CN Guidance has 56 programs "geared toward supporting people who have mental health and substance use" issues, which he said have reached 30,000 people on Long Island annually.

Programs include a mobile recovery unit — an RV and a smaller van dispatched throughout Long Island. The unit includes peer counselors, nurses and therapists who meet people in parks, at train stations and elsewhere. They provide information, training on how to recognize an opioid overdose and administer the overdose reversal drug naloxone, and conduct mental health assessments.

"The mission is to connect with people who are suffering from behavioral health issues

and to get them into treatment," Friedman said.

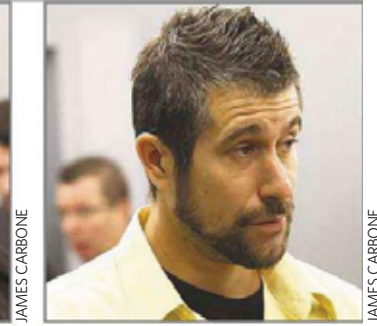
The rooms in the RV are outfitted with computer monitors where the on-site staff can connect someone with a psychiatrist remotely, who can then assess the individual.

Nick Stahlman, an outreach and recovery peer specialist with CN Guidance, explained how a typical encounter with the RV staff might work.

"We park the RV. We set up a table out front. We pull the awning out. We have a nice little area out front that's inviting. We have a sign inviting people to take Narcan training," he said. "But also the 'Hope Rides Here' logo on the side and back of the van, a lot of times it's a conversation starter."

Staff members explain the services that are available and how people who need them can be connected to treatment "and try to move forward with their lives. Us as recovery peers have been through that. We have real-world, lived experience in both mental health and substance use."

Stahlman added that often they might hear someone say: "You don't understand. You don't know what it's like." So us, as recovery peers, we do know what it's like. We have been there. We show them that recovery is not only possible, but it's expected."



Alexis Nieves is expected to face new charges Monday.

Jeffrey Mackey is expected to be arraigned on Monday.

**SOURCES: MURDER CHARGES FOR PAIR IN BODY PARTS CASE**

Couple's remains had been found in parks, woods

BY GRANT PARPAN AND JOSEPH OSTAPIUK  
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A Suffolk grand jury has indicted two suspects on murder charges in connection with the killings of a Yonkers couple whose remains were found scattered in areas around Babylon and Bethpage last month and in February, sources told Newsday.

Jeffrey Mackey, 38, of Amityville, and Alexis Nieves, 33, will be arraigned Monday in Suffolk County criminal court in Riverhead, authorities said Sunday.

Sources told Newsday both defendants will face second-degree murder charges.

Malcolm Brown, 53, and Donna R. Conneely, 59, have previously been identified by authorities as the victims whose remains were found Feb. 29 and March 5 in a park in Babylon, Bethpage State Park and a wooded area in West Babylon.

Steven Brown, 44, of Amityville, who family members said is a cousin of Malcolm Brown, was arrested March 4 along with Mackey, Amanda Wallace, 40, of Amityville, and Nieves, who police said is homeless but had been living with the trio. All four defendants pleaded not guilty in March to felony counts of first-degree hindering prosecution, conceal-

ment of a human corpse and tampering with physical evidence by concealing or destroying. They were released without bail, since they were not charged with any bail eligible offenses at the time. Wallace has remained incarcerated since being arrested for shoplifting days after they were released.

Prosecutors have alleged that between Feb. 27 at 10:53 a.m. and March 4 at 4:08 a.m., the defendants removed from their shared Railroad Avenue home "sharp instruments, multiple body parts and other related items and dispose[d] of them to conceal the crime of murder in the second degree."

The documents said the defendants "did conceal, alter and destroy human body parts" and the "dismembered body parts were removed" from the home and were "concealed at multiple known locations."

Suffolk prosecutor Frank Schroeder said at the defendants' initial arraignments that authorities had significant evidence against the four defendants, including human remains, meat cleavers, butcher knives, significant amounts of blood and video surveillance.

A group of high school students on their way to school in Babylon in February made the first gruesome discovery in the case, finding Malcolm Brown's heavily tattooed forearm in a tangle of branches on the edge of a popular park.

One student called her father, who then called Suffolk County police, setting in motion a massive search that culminated with police finding the body parts of both victims.



Jennifer Pettway, left, of Freeport, with Perette Comond, of Baldwin, a counselor with CN Guidance.

takes her medication, Pettway added, and she participates in therapy and frequently consults Comond for advice.

"Rather than going to drugs, I go to her and talk to her before anything," she said.

"They've been doing a lot for me."

Now, Pettway said of the program, "I kinda love it. At first I was hesitating. I had an attitude in the beginning, but I kind of grew on them," she said chuck-

ling, making it clear she did not misspeak.

"They grew on me, but I grew on them."

Both Pettway and Comond then turned to each other, smiling.