



John R. Kasich, Governor
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Our mission is the promotion and establishment of mental health as a cornerstone of health and wellness for individuals, families and communities throughout Ohio.

The Ohio Department of Mental Health (ODMH) works to assure access to quality mental health services for Ohioans at all levels of need and life stages. It is estimated that nearly two million Ohioans will need mental health services during their lives for problems ranging from situational stress to severe and chronic mental illness.

During 2010, Ohio's public mental health system provided care to approximately 360,000 people, including more than 120,000 children and 11,000 people above age 65. Nearly 6,800 adults received treatment in our regional psychiatric hospital system. These large numbers represent only those receiving direct services and do not include the thousands of Ohioans who benefit from prevention, education and outreach.

Responsibilities

- Support and monitor local systems of care.*
- Provide quality inpatient services.*
- Improve services to children/adolescents.*
- Improve linkages to criminal justice system.*
- Conduct research to address system priorities.*
- Protect rights of people receiving services.*

Investments in treatment for mental illness and supports for recovery are cost effective. Treatment outcomes for severe mental illnesses, including schizophrenia, bipolar disorder or major depression, are equal to or better than those achieved in physical health. People can recover and live long, fulfilling lives despite the presence of an illness. This is not only possible, but should be our expectation.

Unfortunately, many people who need care still do not get it. Barriers include poor detection of mental illnesses by general health practitioners, inability to pay, or reluctance to seek care due to stigmatization or the belief that effective treatments do not exist. The economic impact of not treating mental illness is great, costing the state's businesses, communities and families through lost productivity, homelessness, suicide and increased medical care.

Mental health care is unique in that state and local governments finance and manage a distinct health care system for people with mental health disorders. This public system serves as a safety net, providing for the uninsured, people of poverty and consumers who require more specialized care.

A community-based system of care

For decades, the Department has supported the concept of community treatment rather than institutional care for those people who have the ability to live more independently. Since 1990, as local systems have increased the number and types of services they provide, the inpatient population of public state hospitals has decreased significantly and hospital staffing has been reduced.

Whereas there were 17 state-run institutions in 1990, the Department has downsized to six regional psychiatric hospitals that provide acute inpatient care as requested by local systems.

Ohio's mental health system emphasizes local direction and services rather than state control. Efforts to further enhance local systems of care are supported by the Department through state allocations and federal grants.

The Department funds, reviews and monitors community mental health programs, in part, through 50 county-level boards. These boards, which in most cases oversee both mental health and addiction services, do not directly provide services. They act as local authorities, contracting for services provided by private organizations and the public psychiatric hospitals operated by ODMH. These local systems of care contract with more than 400 local agencies.

Comprehensive treatment in public and private settings

The state's responsibility to provide public hospital care is defined in Ohio's constitution. Formerly focused on long-term institutionalization, state hospitals have become specialized facilities providing short-term and intensive treatment. The ODMH regional psychiatric hospitals provide comprehensive inpatient care at six sites around the state to approximately 1,000 people on a daily basis. Forensic patients (those sent for evaluation or committed by criminal courts) make up about 60 percent of the in-patient population at any time. The hospital system also provides outpatient services in a community-supported environment.

As of July 2011, ODMH's Office of Licensure and Certification is responsible for regulatory oversight of 390 community mental health agencies, 83 private psychiatric hospital inpatient units and 157 community residential programs, all of which provide mental health services to people with mental illnesses. In addition, ODMH provides licensure and oversight of 674 adult care facilities and 89 adult family homes.

Recovery-oriented and quality focused

There are several over-arching philosophies/beliefs that guide the work of ODMH.

People can and do recover from mental illness. People with mental illness rebuild meaningful lives while receiving services that enable them to recover and contribute to their communities.

Nurturing resiliency helps children, youth and families successfully meet life's challenges. All children, youth and families have the innate capacity to successfully meet life's challenges with a sense of self-determination, mastery and hope.

Services are most effective when delivered in a culturally competent way. Respect for the unique beliefs, values, customs, languages and traditions of the people served is essential to support recovery and to deliver consumer-driven mental health services.

Consumer and family involvement in the planning, evaluation and delivery of services is vital. People with mental illness and their family members should be partners when making decisions that affect their lives. We ensure that consumer and family voices are heard.

A focus on quality and continuous improvement is essential. We support a systematic approach to facilitating recovery through the use of clinical best practices, quality improvement tools, outcomes measurement and system finance reform.

Integrate behavioral and physical health care to achieve better health and cost savings. Treat the whole person, both physical and mental conditions, in a coordinated way, so that an individual's health care providers work together and regularly communicate.

Funding sources

Funding for community mental health services comes from federal, state and local sources. Federal funding comes in two forms: 1) Medicaid, which is administered through the Ohio Department of Job and Family Services, and 2) Federal Block Grants, which are passed on to the community through ODMH.

ODMH relies on state General Revenue Funds (GRF) for approximately half of its budget, and allocates approximately one-fourth of these funds to local Boards for the purchase of community services. Some, but not all, Boards also receive funding through local levies. For Fiscal Year 2012, the Ohio Department of Mental Health received \$485 million in GRF.