

Trust

Alaska Mental Health
Trust Authority

FY21 Revised Budget Recommendations

Program and Planning Committee

July 31, 2019



Trust Budget Process

- 1) The board of trustees submits to the Governor its budget recommendations no later than September 15
 - This includes expenditures (budget increments) of state general funds and Trust funds
- 2) Two-year budget cycle
 - The first year of the budget cycle is the state's fiscal year ending in an even-numbered year
- 3) FY21 is the second year of the Trust FY20/FY21 cycle

FY21 Revised Budget Recommendations

ADVISORY BOARDS

BENEFICIARIES

COMMUNITY, TRIBAL,
LOCAL, STATE
PARTNERS

TRUST STAFF

Reaffirmation of Focus Areas / Other Concentrated Work

Review Focus Area Goals & Allocations

Theory of Change & COMP Plan

Evaluation of Impacts

Advocacy Priorities

Previous Stakeholder Recommendations

Revised FY21 Budget Recommendations

Focus Areas

- 1) Housing & Long-Term Services & Supports
- 2) Beneficiary Employment & Engagement
- 3) Substance Abuse Prevention & Treatment
- 4) Disability Justice

System Improvements

- 1) Workforce Development
- 2) Medicaid Reform Implementation

Other Non-Focus Area Allocations

Advisory Board Requests



Housing

Goal: Beneficiaries can access safe and affordable housing with appropriate community based social services to maintain tenancy.

Results: Beneficiaries maintain safe, stable housing





Housing Challenges

- More safe, functional and affordable housing is needed across the state
- Rural Alaska has additional obstacles to building and maintaining affordable housing
- The Trust, AHFC, DHSS, DOC and other agencies contribute or leverage funding to purchase housing and residential services, but the demand outstrips the supply
- The FY20 budget process has revealed the fragility of the emergency shelter and transitional housing network



Housing Solutions

Permanent Supportive Housing

- Serves homeless people who have multiple co-occurring disorders and housing barriers
- In addition to long term rental assistance, long term or lifelong services and supports are needed
- Can be congregate (like Karluk Manor or Forget-Me-Not) or scattered site housing (Pay For Success)
- Often paired with Assertive Community Treatment and/or Intensive Case Management

Rapid Rehousing

- Serves homeless people who have housing barriers that are able to be overcome through moderate support
- The intervention provides rental assistance that tapers off and services and supports for about 1-2 years
- Typically is scattered site housing
- Paired with case management services.

Beneficiary Impact

- Permanent Supportive housing works and changes the system of support. After 6 months of being stably housed, Juneau Forget-Me-Not residents reduced emergency room visits by 65% and police contact by 72%
- The Basic Homeless Assistance Program (BHAP) provides funding to 36 different programs statewide.
- The Special Needs Housing Grant (SNHG) programs provided funds to 14 agencies that served over 281 households.
- Over 13,000 individuals were served in FY18 through the BHAP and SNHG programs.



Long Term Services and Supports

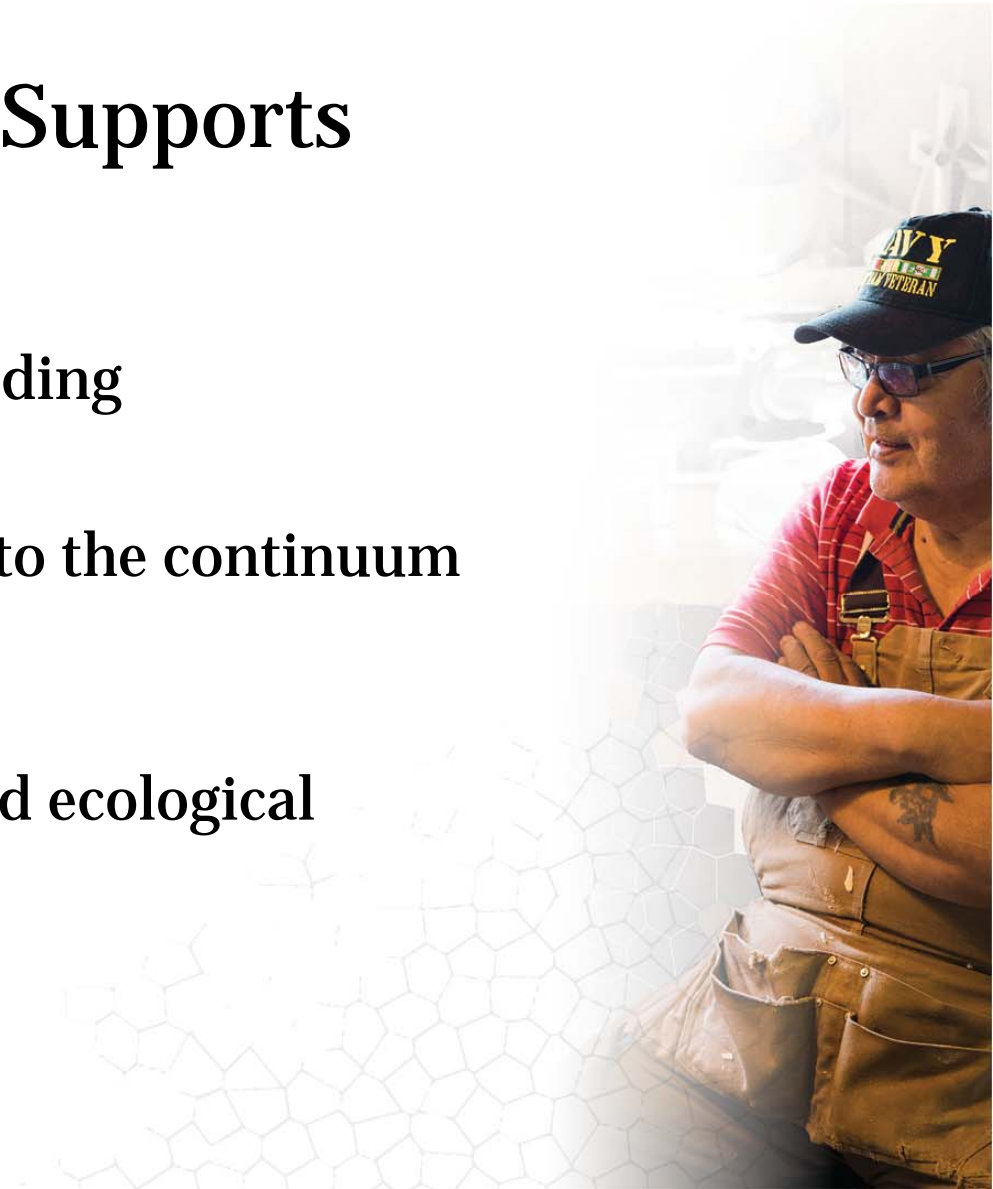
Goal: Beneficiaries access effective and flexible person-directed long term services and supports.

Results: Beneficiaries live the lives they choose with supports they direct.



Long Term Services and Supports Challenges

- There is a lack of capacity and funding
- A more comprehensive approach to the continuum of care is needed
- A move toward integrated care and ecological systems planning is needed





Beneficiary Impact

- IDD Systems Change/DD Vision advances a person centered culture: *I live the life I choose with the support I direct*
- The WINGS project has changed to the guardianship process in Alaska, repairing administrative procedures, improving education, and advocating for a new guardianship alternative – supported decision making
- Aging and Disability Resource Centers expanded to Fairbanks and served approximately 2,500 beneficiaries
- ABIN completed assessment clinics in Kotzebue and Nome connecting 27 people and their families to resources



Beneficiary Employment & Engagement

Goal: Increase opportunities and enable beneficiaries to gain integrated, competitive employment and meaningful engagement

Results: Beneficiaries achieve recovery and wellness through meaningful employment and engagement in their communities

Challenges

- Perceptions/miscommunication and stigma
- Lack of understanding of how peer support services complement rather than conflict with clinical/medical model
- Transportation

Solutions

- Expand access to high quality youth transition and supported employment services
- Continue policy development and workforce initiatives with DHSS to increase peer support capacity (i.e. standardized training/credentialing)



FY20 Highlights

- “Employment through Employment” Conference
 - October 24-25, 2019, Hotel Captain Cook, Anchorage AK
- Peer Support Worker Certification
- Supported Employment Provider workforce needs assessment



Key Employment Strategies

- Individual Placement & Supports (IPS)
- Youth Transition Services and Supports
 - i.e. Pre-Employment Transition Services (Pre-ETS)
- Social Enterprise
- Microenterprise Grants
- Beneficiary Project Grants
- Peer Support Certification

Substance Abuse Prevention and Treatment

Goal: To decrease youth alcohol and substance use and adult binge drinking and illicit drug use.

Results: Children and adults are free of the burdens created by alcohol and substance addiction



Challenges

- Stigma
- Access to screening & intervention
- Access to Medication Assisted Treatment & psychosocial supports
- Lack of whole person/integrated care
- Geography/capacity
- Housing/community supports
- Recidivism

Solutions

- Positive social norms, public education and recovery stories
- Universal Screening, Brief Intervention and Referral to Treatment
- Evidenced Based Practices
- Expansion of MAT statewide
- Integration BH and Primary Care (and vice versa)
- Expansion of treatment levels and capacity regionally
- Permanent Support Housing
- Institution/community based treatment access



Key SAPT Strategies

- Partner Initiatives: Recover Alaska
 - Positive Social Norms
 - Advocacy
 - Polling
- Access to Treatment
 - Behavioral health integration
 - Access to MAT
- Crisis System Development





Core Elements of Crisis Care

- Regional or statewide crisis call centers coordinating in real time
- Centrally deployed, 24/7 mobile crisis teams
- Short-term, “sub-acute” residential stabilization programs
- Essential crisis care principles and practices

Disability Justice

Goals:

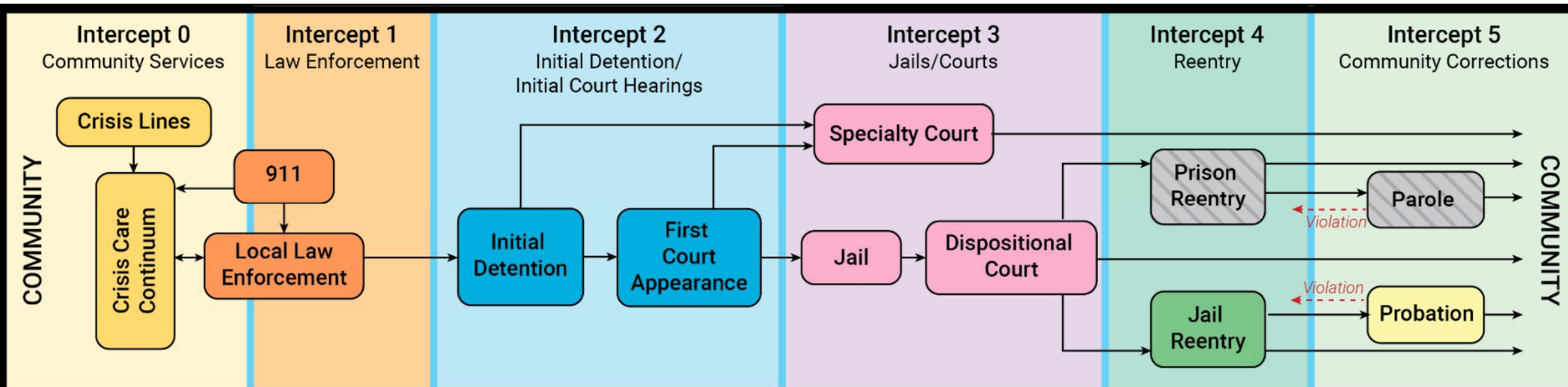
1. Prevent and reduce inappropriate or avoidable arrest, prosecution, incarceration, and criminal recidivism of juvenile and adult Trust beneficiaries;
2. Improve community reentry planning from juvenile detention and treatment, and adult correctional facilities back into Alaskan communities;
3. Increase criminal justice system's ability to accommodate, support, protect, and provide treatment for victims and offenders who are Trust beneficiaries; and,
4. Reduce the use of jails and prisons for providing protective custody of adult Trust beneficiaries under Alaska Statute 47.37.170 (alcohol/substance holds).

Result:

The criminal justice system effectively accommodates the needs of victims and offenders who are Trust Beneficiaries.



Sequential Intercept Model



Source: SAMSHA

Increased CIT Capacity

Crisis Intervention Teams (CIT)

- Anchorage Police Department
 - 143 APD staff trained
 - 468 other law enforcement & other first responders trained
- Dept. Public Safety, Wasilla, and Palmer second academy
 - Partnership with Mat-Su Health Foundation
 - Training attended by Troopers, Wasilla police officers, and Palmer police officers as well as fire and EMS personnel



Diversion

Holistic Defense - Bethel

- Partnership between the Public Defender Agency and the Alaska Legal Services Corporation
- Team consists of a public defender, social worker, and a civil attorney
- Target population - Trust beneficiaries not participating in the Bethel Therapeutic court or other diversion projects.





Reentry

APIC Discharge Planning Model

- The Assess, Plan, Identify and Coordinate (APIC) Discharge Planning Model is an evidence based model that focuses on six critical elements needed to promote successful reentry.

Alaska Community Reentry (ACR) coalitions

- Trust supports coalitions in the four communities (Anchorage, Mat-Su, Fairbanks and Juneau). Trust funds are used to support a coordinator (1 FTE) in each community
- DHSS support coalitions in Dillingham, Kenai, Ketchikan, and Nome



Trust Supported Workforce – How did we get here?

- Past Workforce focus area and transition
- Alaska Health Workforce Coalition: Vision and Purpose
- Six Priority Occupations:
Primary Care, Direct Care Worker (DSP), Behavioral Health Clinicians, Physical Therapy, Nurses, Pharmacists
- Two Action Agendas: 2012-2015 & 2017-2021

How a Skilled Workforce Supports Program Implementation for Trust Beneficiaries

- Targeted training equips DSPs to identify and respond to consumers in need/Staff in Fairbanks
- A skilled and competent workforce promotes retention, which saves agencies money for providing services
- Training partnerships give non-skilled community members opportunities to enter the DSP health care career field/PATH Academy in Anchorage

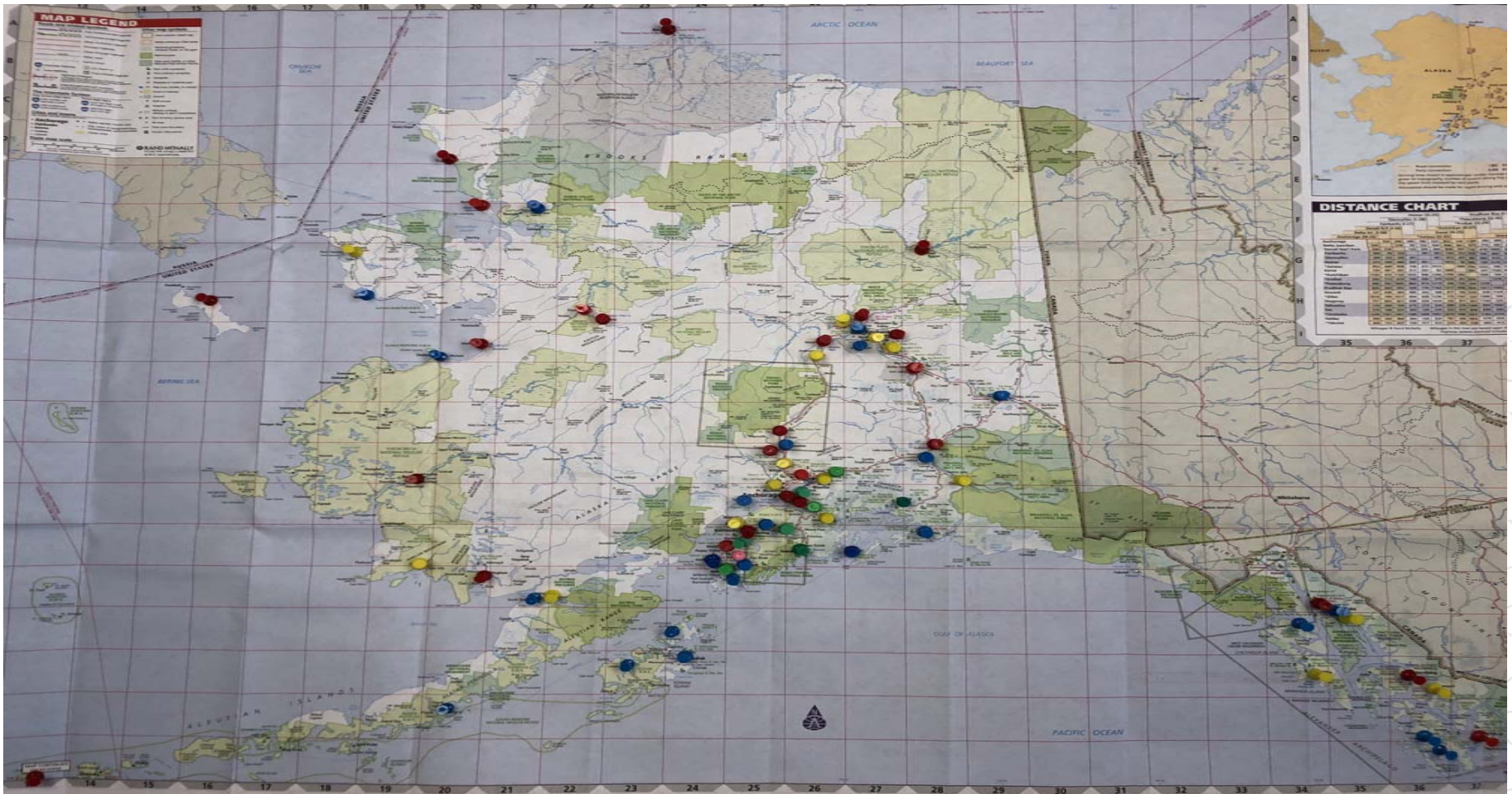


Beneficiary Impact

- SHARP: 2014-2019- 602,522 patients served, 698,357 total visits, 546,983 prescriptions- Beneficiaries served: 102,223
- AK Training Cooperative: Over 500 agencies served spread out over 85 communities/100% of these agencies serve beneficiaries
- AHEC: 80% of 321 students live in rural Alaska/Grow Your Own
- AK PIC Clinical Psychologists: 34,500 direct client contact hours



FY18 Training Sites



Prevention & Early Childhood Intervention

Programs serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services.



Challenges

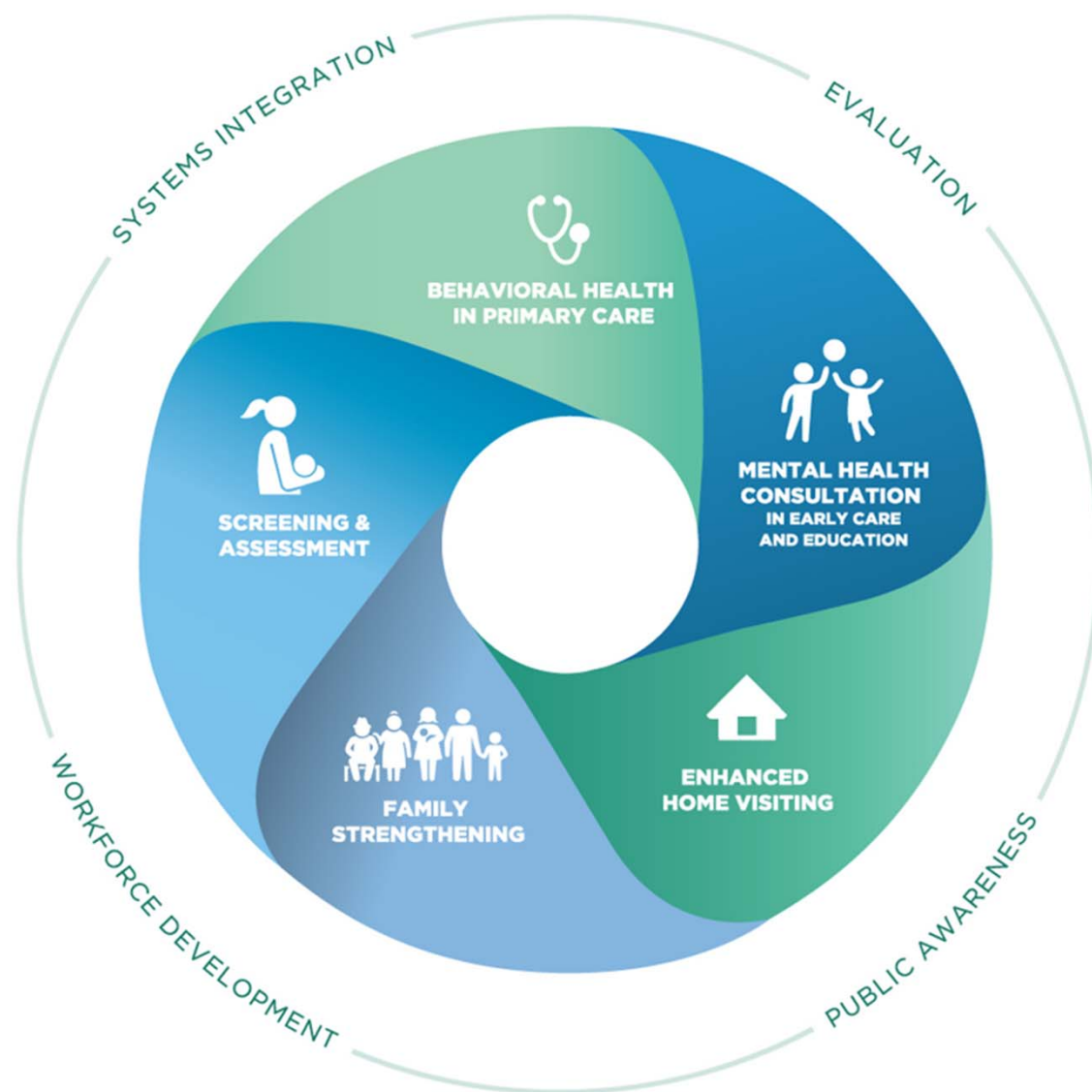
- State lacks effective advisory structure
- Funding cuts threaten core early childhood services
- Data analysis limitations

Solutions

- **Broad support for the Trust to continue increasing investment and advocacy for early childhood services**
- Infant and Early Childhood Mental Health consultation and reflective practice supervision
- Behavioral health/primary care integration
- 1115 waiver for increased early intervention access
- Centralized repository for purposeful data needs



Project LAUNCH Framework



(SAMHSA, 2019)

Practice-informed, universal screening and early intervention

- Universal developmental screening expansion
- Integration of pediatric primary care and behavioral health

Accurate identification and treatment of social-emotional needs for children and their caregivers

- Trauma informed practice promotion
- Infant and Early Childhood Mental Health capacity building



Reduce the instances and impact of Adverse Childhood Experiences (ACEs)

- **Peer/Family Support**

- Promote Strengthening Families protective factors and parent skills training
- Promote parent leadership

- **Data**

- Facilitate development of a centralized repository for purposeful early childhood data curation for data driven decision-making

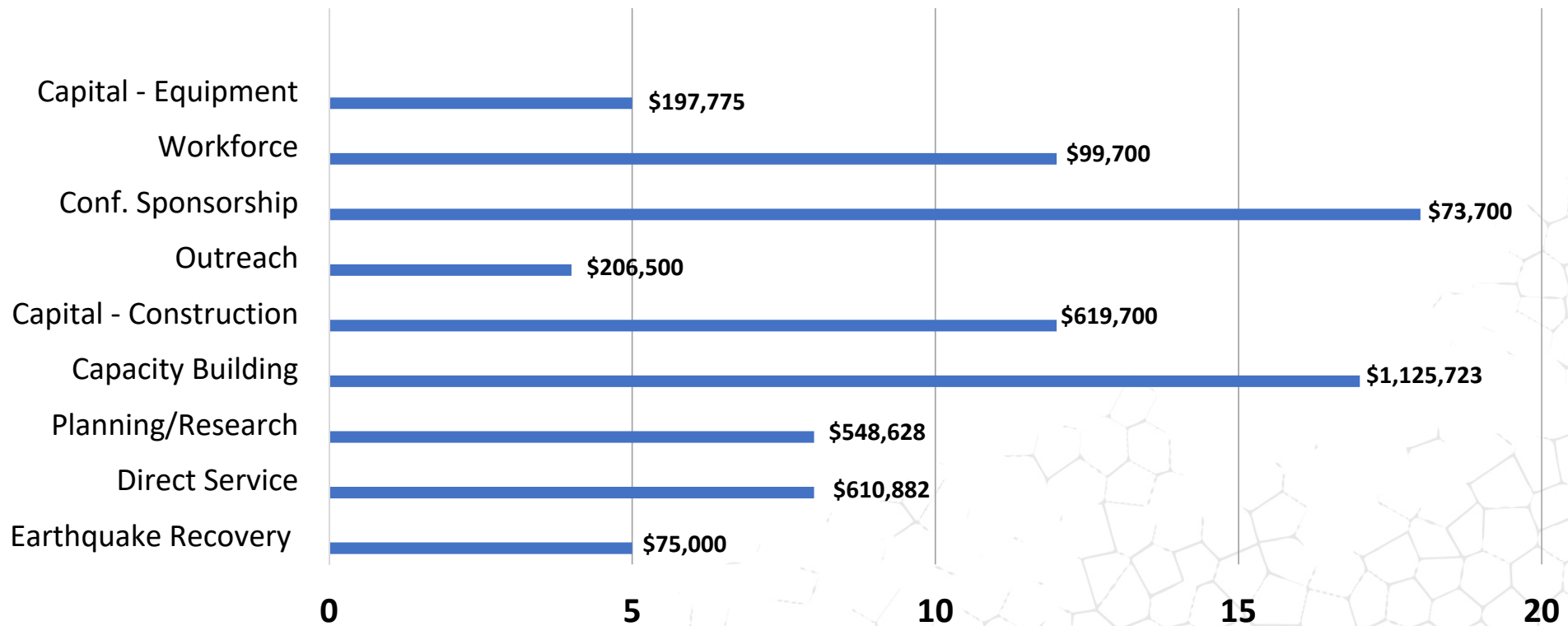
- **Policy**

- Support state and agencies in 1115 waiver implementation



FY19 Partnership Grants

Number of Partnership Grants By Category



In FY19, the Trust administered 89 partnership grants totaling \$3,557,608

FY18 Dental Grants

| | Trust Funds | # of Beneficiaries Served |
|--------------------------------------|-------------|---------------------------|
| Anchorage Neighborhood Health Center | \$140,000 | 44 |
| Interior Community Health Center | \$100,000 | 48 |
| Dental Lifeline | \$30,000 | 75 |

FY18 Beneficiary Mini Grants

| | # of requests submitted | # of requests awarded | \$ amount requested | \$ amount awarded |
|--|-------------------------|----------------------------|---------------------|-------------------|
| Behavioral Health | 704 | 531 | \$1,123,470 | \$798,030 |
| Developmental Disabilities | 370 | 242 | \$500,964 | \$298,303 |
| Alzheimer's Disease and Related Dementia | 328 | 324 (180 beneficiaries) | \$300,305 | \$245,329 |

Advisory Board Requests

| Advisory Board Requests | | FY21 Funding-Approved Sept. 5&6 2018 | | | | | FY21 Proposed Revised Amounts | | | | | |
|-------------------------|--|--------------------------------------|--------|--------------------|---------|-------|-------------------------------|--------------------------|--------|--------------------|---------|-------|
| | | Sum of MHTAAR & AG | MHTAAR | Authority Grant | GF/MH | Other | | Sum of MHTAAR & AG | MHTAAR | Authority Grant | GF/MH | Other |
| Capital Requests | | | | | | | | | | | | |
| | Deferred Maintenance | 250.0 | 250.0 | - | 250.0 | - | | 250.0 | 250.0 | - | 250.0 | - |
| | Medical Appliances and Assistive Technology | - | - | - | 500.0 | - | | - | - | - | 500.0 | - |
| | Coordinated Community Transportation | 300.0 | 300.0 | - | 1,000.0 | - | | 300.0 | 300.0 | - | 1,000.0 | - |
| | Essential Program Equipment | 300.0 | 300.0 | - | 300.0 | - | | 300.0 | 300.0 | - | 300.0 | - |
| | | | | | | | | | | | | |





Questions & Next Steps