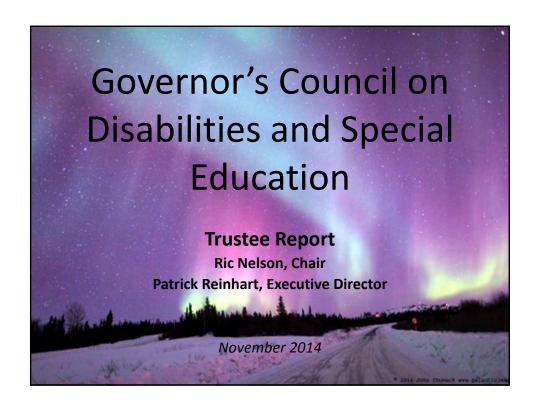
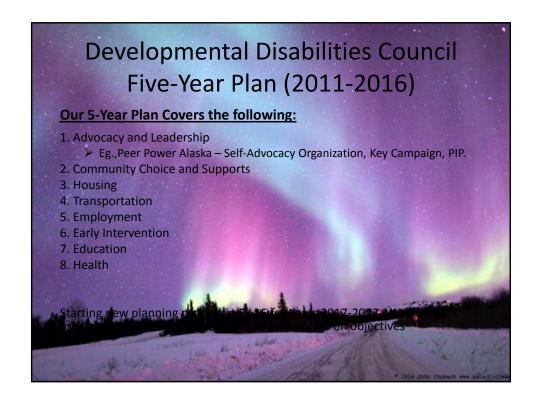
Governor's Council on Disabilities and Special Education



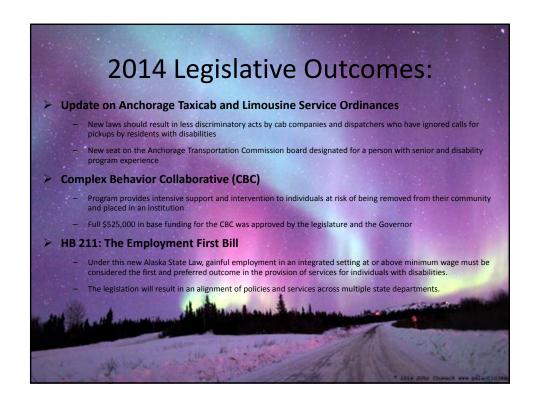


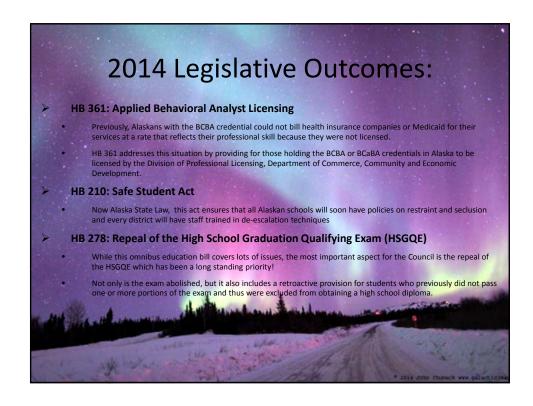




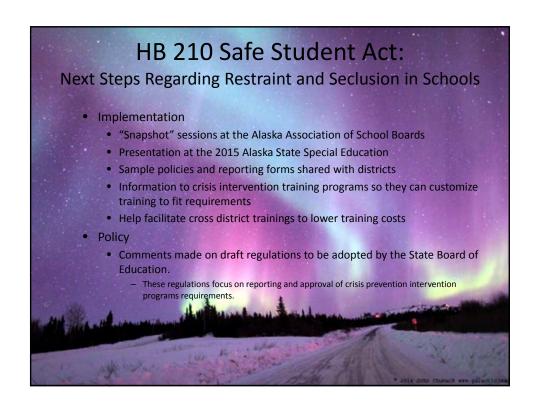
Trust Beneficiary Employment & Engagement (BEE) Council staff worked with the Trust Project Officer to: Establish a core employment workgroup Assist the Institute for Community Inclusion in meeting with stakeholders statewide to develop their recommendations Hold a large Stakeholder meeting in May to review the ICI data and develop primary objectives and goals Hold a follow up stakeholder meeting to review the ICI report and develop action steps

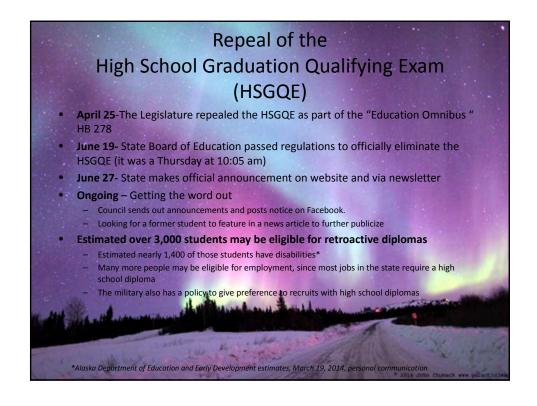
Alaska Safety Planning Empowerment Network (ASPEN) FY15 community has been selected, 4 agencies have signed ASPEN contract Needs Assessment Tasks Completed: Focus Groups Key Informant Interviews Policy and Procedure review (2 of 4 agencies completed) Needs Assessment Report scheduled for January

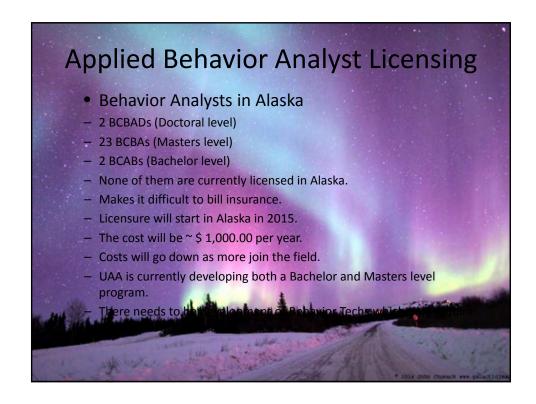


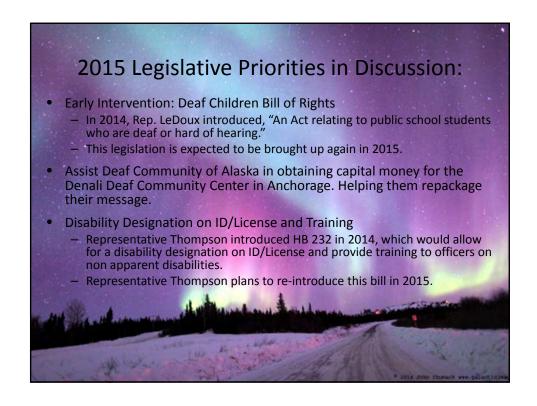


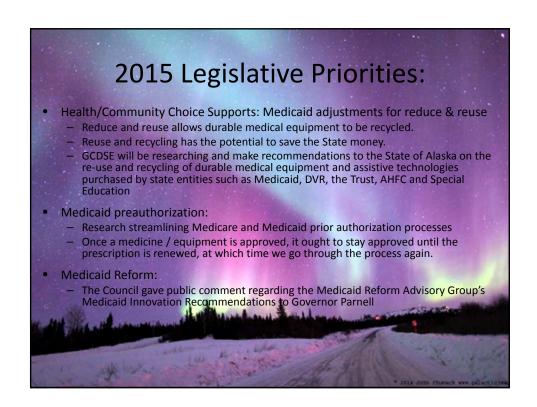


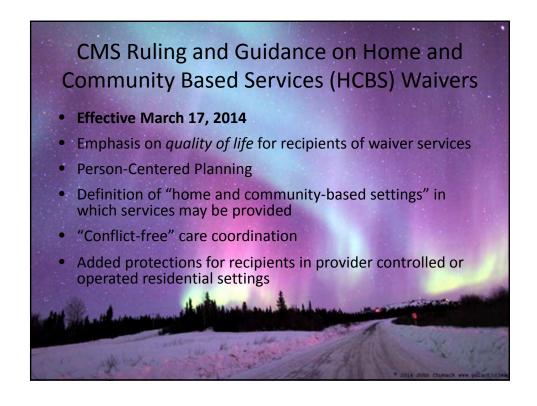








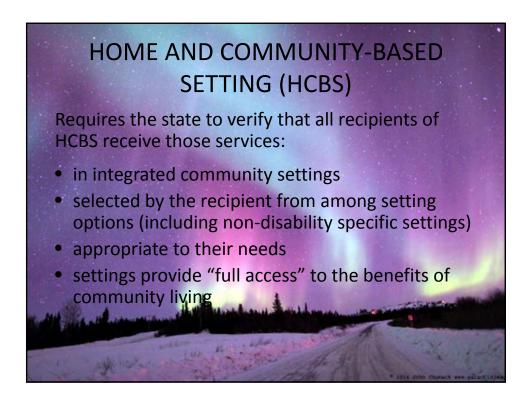






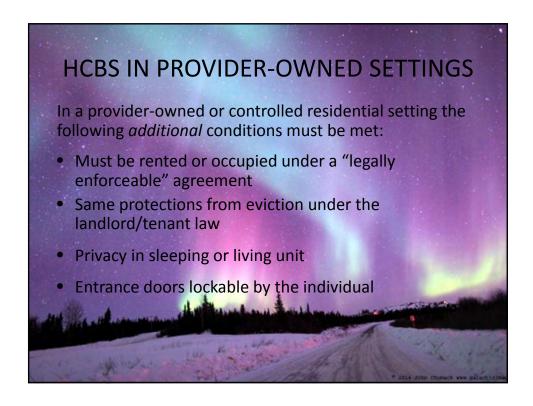
PERSON-CENTERED PLANNING PROCESS Led by the recipient and/or with their representative (as defined by recipient) Reflect cultural considerations individuals with disabilities limited English proficiency Documents the options offered and considered by the individual Plan signed by and distributed to all

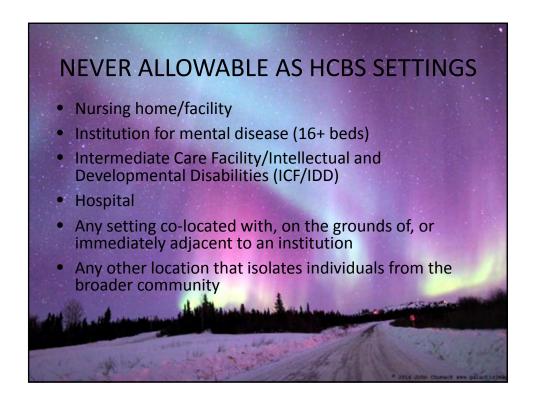












ALASKA'S NEXT STEPS TO COMPLIANCE 1. Assess providers on the basis of HCBS settings regulatory criteria 2. Determine setting's level of conformity to HCBS setting characteristics 3. Develop "Transition Plan" 4. Provide opportunity for Public Comment





Alaska Commission on Aging



Alaska's Roadmap to Address Alzheimer's Disease and Related Dementias



Alaska Commission on Aging

Presentation to the Alaska Mental Health Trust Authority November 20, 2014









1



Presentation Outline

- Overview of Roadmap Process
- Background Data
- Goals & Recommendations
- Next Steps
- Questions, Discussion

2



Roadmap Core Team & Agency Affiliations

- Alaska Mental Health Trust Authority: Amanda Lofgren & Nancy Burke
- AARP: Ken Helander
- Department of Health & Social Services, Senior and Disabilities Services: Lisa Morley & Duane Mayes
- Alzheimer's Resource of Alaska: Karl Garber
- Department of Health & Social Services, Division of Pioneer Homes: Ken Truitt & Vickie
 Wilson
- Office of the Long Term Care Ombudsman: Diana Weber & Teresa Holt
- Department of Health & Social Services, Division of Public Health: Jean Findley
- Department of Health & Social Services, Division of Behavioral Health: Albert Wall & Reta Sullivan
- · Alaska Commission on Aging, Denise Daniello

3



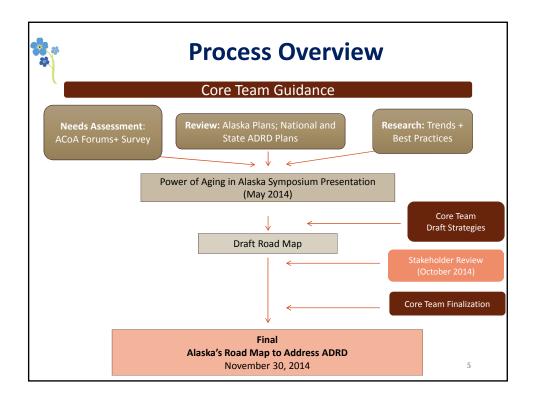
Why a Roadmap?

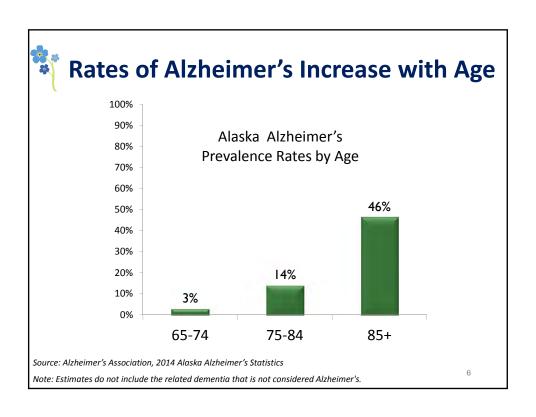
Substantial increase in the number of Alaskans, particularly seniors, with Alzheimer's disease and Related Dementia (ADRD) is projected over coming decades.

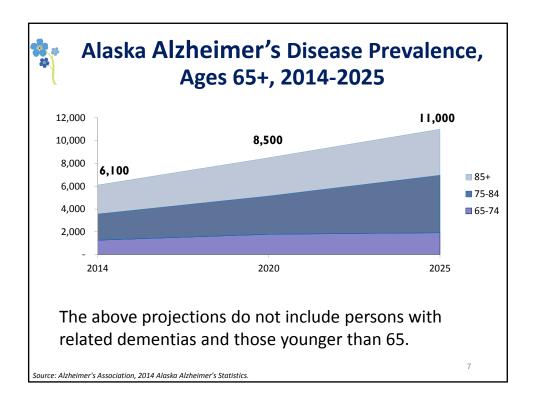
Roadmap will prioritize & implement strategies to:

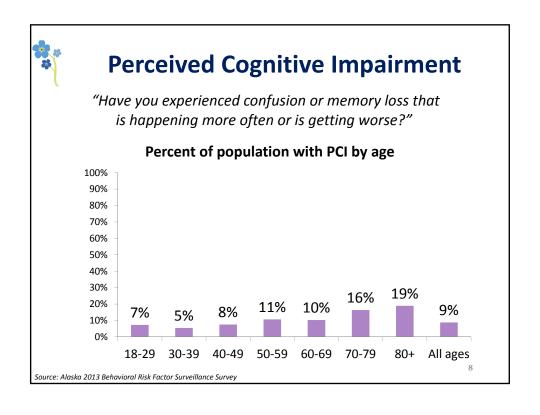
- Improve the quality of life for Alaskans with ADRD and their caregivers.
- Provide a comprehensive and coordinated approach to address the multiple and complex challenges that ADRD presents.

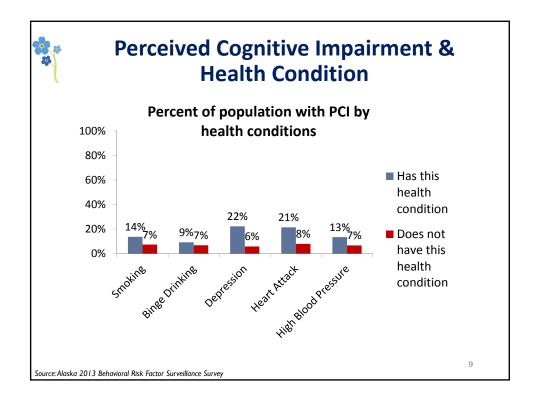
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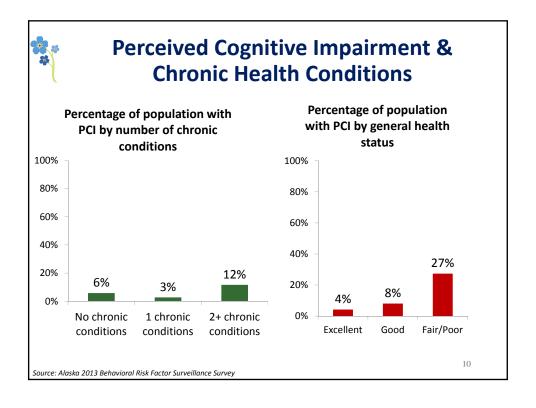


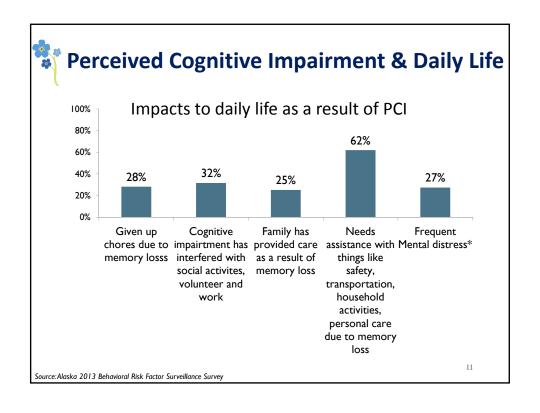


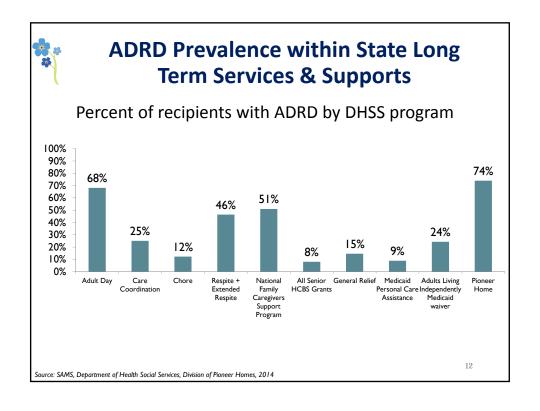


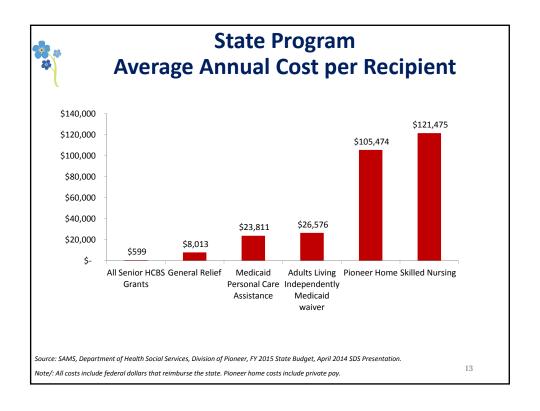














Assisted Living Costs More in Alaska

| | Monthly Min | Monthly Maximum | Monthly Median | Median Yearly |
|------------|----------------|--------------------|-------------------|------------------|
| Alaska | \$3,390 | \$7,500 | \$5,500 | \$66,000 |
| Arizona | \$1,100 | \$6,700 | \$3,150 | \$37,800 |
| California | \$987 | \$9,000 | \$3,750 | \$45,000 |
| Colorado | \$1,752 | \$8,700 | \$3,313 | \$39,750 |
| Idaho | \$998 | \$5,250 | \$3,275 | \$39,300 |
| Oregon | \$2,196 | \$5,463 | \$4,000 | \$48,000 |
| Washington | \$1,000 | \$9,000 | \$4,250 | \$51,000 |

Source: Genworth cost of care survey, 2014 for one bed, single occupancy

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Goal 1: Promote public awareness, prevention, and early diagnosis of ADRD.

Recommendations:

- 1.1. Increase opportunities for public education about ADRD.
- 1.2: Increase awareness of and access to ADRD resources.
- 1.3: Increase frequency of early screening & diagnosis.

1.



Goal 2: Improve access to appropriate housing, services, and supports for individuals with ADRD at all stages of the disease.

Recommendations:

- 2.1: Develop service eligibility requirements based on functional, cognitive, and behavioral needs and reimbursement rates based on acuity levels.
- 2.2: Maintain individuals with ADRD in the least restrictive and most appropriate care setting possible.
- 2.3: Develop housing options for people with ADRD.

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Goal 2: Improve access to appropriate housing, services, and supports for individuals with ADRD at all stages of the disease.

Recommendations:

- 2.4: Identify the DHSS funding needs required to ensure access and to meet the needs of the rapidly growing population of those with ADRD in Alaska.
- 2.5: Optimize the role of the Pioneer Homes within the statewide array of long-term services and supports.
- 2.6: Increase access to end of life care.

1



Goal 3: Optimize quality, safety, and efficiency of services to people with ADRD.

Recommendations:

- 3.1: Ensure safety in private homes and communities for persons with ADRD.
- 3.2: Ensure safety and quality of care in residential settings.
- 3.3: Strengthen the role of the primary care setting as a point of entry to the dementia care system.

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Goal 4: Develop a long-term care workforce trained in dementia care.

Recommendations:

- 4.1: Increase the level of knowledge of dementia care and caregiver competence within the long-term services and supports workforce.
- 4.2: Ensure health, human service and public safety professionals are knowledgeable about dementia.
- 4.3: Increase cultural competence among dementia care workers.

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Goal 5: Improve quality of life for family and other informal caregivers.

Recommendations:

- 5.1: Maintain and improve the physical and mental health of family & informal caregivers.
- 5.2: Develop a coalition of families and agency representatives to advocate for policy changes to support family/informal caregivers and to decrease the financial burden of caregiving.

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Goal 6: Increase monitoring and research into ADRD prevalence, cost of care, prevention and treatment.

Recommendation:

6.1: Maintain and expand research to understand ADRD prevalence, utilization and cost of care in Alaska.

6.2: Maintain and expand research of ADRD best practices related to risk reduction, treatment, and care.

2



Next Steps

The Roadmap is a Living Document. The Core Team will:

- Develop an implementation section with timeline.
- Identify & recruit lead organizations to develop action plans for implementation.
- Prioritize strategies.
- Identify overarching performance measures.
- Present the Roadmap at the Alaska Public Health Summit in January 2015.

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Thank You. Questions, Comments?



The Alaska Commission on Aging

2

Advisory Board on Alcoholism & Drug Abuse / Alaska Mental Health Board

FEAMWORK FERORIS 2014

Presentation by the Alaska Mental Health Board and Advisory Board on Alcoholism and Drug Abuse to the Alaska Mental Health Trust Authority November 20, 2014

OVERVIEW

AMHB and ABADA collaborations with the Alaska Mental Health Trust. Authority on advocacy issues that effect trust beneficiaries.

- ✓ Statewide Advocacy Constituent Forums
- ✓ Legislative Advocacy
- ✓ Get Out The Vote
- ✓ Criminal Justice Reform
- ✓ Alaska FASD Partnership



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STATEWIDE ADVOCACY CONSTITUENT FORUMS



The Alaska Mental Health Trust Authority $\begin{tabular}{l} and \end{tabular}$

Alaska Commission on Aging
Advisory Board on Alcoholism and Drug
Abuse
Alaska Mental Health Board
Governor's Council on Disabilities and
Special Education

FAIRBANKS ♥ ANCHORAGE ♥ MAT-SU ♥ JUNEAU

FORMAT

Day 1: Advocacy Training:

"How To Tell Your Story to a Policymaker"

"Navigating the Public Process"

Day 2: Panel of beneficiaries told their stories before legislators, legislative staff, and other stakeholders.

After the Forum: Beneficiary self-advocates met with personal legislators in their own district.

During the Legislative Session: Beneficiary self-advocates sent letters and emails, made phone calls, or/or spoke at committee hearings on topics affecting Alaska Mental Health Trust beneficiaries.

105 newly trained advocates in 2013-2014









2013-2014 LEGISLATIVE ADVOCACY



ACTIVITIES

- Weekly **LEGISLATIVE TELECONFERENCES** to brief stakeholders on bills and budget items
- FASD FAMILY VOICE legislative fly-in
- YOUTH POLICY SUMMIT legislative fly-in
- Rallying constituents for **PUBLIC TESTIMONY** on operating budget, bills

LEGISLATIVE TELECONFERENCES

Every Friday at noon

Audience is AMHTA beneficiaries, partner boards, advocacy groups, providers, and other stakeholders

Objectives:

- ✓ Help participants stay informed about bills and their impact on beneficiaries
- ✓ Identify when and how self-advocates and partners can best advocate
- ✓ Track budget items through process
- ✓ Coordinate advocacy efforts



FASD-FAMILY VOICE FLY IN



During the 28th Legislative Session (2013 and 2014), <u>29</u> beneficiaries experiencing FASD, families affected by FASD flew to Juneau, participated in advocacy training, and met with legislators

2014 YOUTH POLICY SUMMIT



During the 28th Legislative Session (2013 and 2014), 43 youth from rural and Alaska came to Juneau, participated in advocacy training, and met with legislators



PUBLIC TESTIMONY

Beneficiaries, providers, and other advocates appeared for public testimony, wrote emails, and met with legislators. 338 beneficiaries and self-advocates testified on the FY16 budgets.







GET OUT THE



ACTIVITIES

- "Get Out The Registrar" Campaign Goal of voting registrars in disability facilities statewide
- I Vote, I Count Collaborated with Center for Human Development and disability organizations to provide information about voting assistance for people with disabilities statewide
- Juneau Votes Collaborated with Capital City voter registration, voter education efforts
- **▼ Candidate Forums** − Communicated with beneficiaries and stakeholders about opportunities to ask health-related questions of candidates statewide
- Email Alerts Information about registering, voting, and voting assistance via AMHTA, AMHB, and ABADA distribution lists

CRIMINAL JUSTICE REFORM



ACTIVITIES

- Worked closely with Senator Coghill's office to rally public support at strategic times (when they requested it)
- Recruited stakeholders to write letters of support
- Trained Juneau advocates (who have experience with incarceration); organized them to appear in person for public testimony during several committee hearings
- Attended all committee hearings during the interim and session and communicated information to Boards, AMHTA, partners
- Answered questions for Senator Coghill's office

IMPACT

- Credit for time served in residential treatment. A person will receive credit against a sentence for time spent in a residential treatment facility with some conditions.
- Assessments of prisoners. DOC must conduct a risk-needs assessment on all offenders
 incarcerated for 30 days or longer, to better understand the offender population and link
 inmates to treatment within the facilities.
- PTSD/TBI mitigating factor. Judges may consider whether an offense was related to combat-related PTSD or traumatic brain injury. This mitigator is not available for crimes of serious injury such as assault or sexual assaults.
- Electronic Monitoring. DOC may place first-time DUI offenders on electronic monitoring for the 72-hour mandatory minimum statewide.
- 24/7 Sobriety Program. Court ordered twice-a-day testing for substance use for certain
 offenders, before or after sentencing, with certain and quickly imposed consequences.
- Probation and Parole Accountability with Certain Enforcement (P.A.C.E.). Statewide
 intensive probation/parole for felons who are at high risk of violating the conditions of
 their probation/parole.

IMPACT

- Recidivism Reduction Fund. Supports transitional re-entry programs for those recently released from prison including support for structured and sober environments, treatment, and employment opportunities
- Screening for Fetal Alcohol Spectrum Disorders (FASD) and other brain-based disabilities. DOC must conduct screening and assessment for offenders who "may be vulnerable to harm, exploitation, or recidivism as a result of fetal alcohol syndrome, fetal alcohol spectrum disorder, or another brain-based disorder."
- Mental health seat on the Alaska Criminal Justice Commission. The bill requires the
 chief executive officer (CEO) of the Alaska Mental Health Trust Authority, or the CEO's
 designee, to sit on the newly formed Alaska Criminal Justice Commission.

ALASKA FASD PARTNERSHIP



ACTIVITIES

- ✓ Provided information and advice to AMHTA representatives and staff to EMPOWERING HOPE initiative
- ✓ Participated in statewide FASD ADVISORY PANEL for awareness efforts and pregnancy tests in bars
- ✓ Co-sponsored IDITAROD MUSHER AARON BURMEISTER to carry FASD awareness message during 2014 dog sled race





ACTIVITIES

- ✓ Public education FASD EXHIBITS at events in Kotzebue, Kiana, Juneau, Anchorage
- ✓ Legislative FAMILY VOICE fly-in and advocacy training
- ✓ Annual FASD AWARENESS DAY restaurant promotion with CHARR (50 restaurants, 850 tables statewide in 2014)
- ✓ Sponsored FASD TRAINING with lawyer David Boulding for Anchorage Police Department, Probation Officers, and Guardians ad Litem (105 trained, 2013)





