MEMO

To: Verné Boerner - Program & Planning Committee Chair
Date: April 21, 2021
Re: FY21 Substance Abuse Prevention & Treatment Focus Area Allocation

Fund Source: FY21 Crisis Continuum of Care
Amount: $400,000.00
Grantee: Providence Health & Services Alaska dba Providence Alaska Medical Center
Project Title: Crisis Now Services – Crisis Stabilization Phase 1 Planning & Development

REQUESTED MOTION:
Approve a $400,000 FY21 authority grant to Providence Health & Services Alaska for the Crisis Stabilization Planning & Development project. These funds will come from the FY21 Substance Abuse Prevention & Treatment – Crisis Continuum of Care budget line.

Assigned Program Staff: Katie Baldwin

STAFF ANALYSIS

Providence Health & Services (Providence) has been a prominently engaged partner with the Trust and others in the planning efforts to address the gaps in services in crisis care in Anchorage. These gaps lead to beneficiaries not receiving timely mental health intervention, hospitalization because other options do not exist, unnecessary suffering and despair, and at times engagement with law enforcement.

Striving to be part of a solution, Providence joined the Trust back in 2019 in evaluating the existing crisis services with support from RI International, a national leader in crisis care contracted by the Trust to identify the gaps and opportunities to both optimize and develop the primary components of effective crisis system design. More specifically, effective crisis system design contains the three main components of the Crisis Now framework: a crisis call center, mobile crisis teams and crisis stabilization centers that are operated as part of an intentionally coordinated system to serve as a community solution that offers no wrong door (no to low barrier access) for people in psychiatric crisis. Providence has stepped forward to enter into a two-phased (Phase 1, planning and Phase 2, implementation) approach with the Trust which will lead to operation of 23-hour crisis stabilization and short-term crisis stabilization services in Anchorage.
With the support of the Trust, Providence has a strategic opportunity to stand-up these crisis stabilization services in Anchorage. While the Trust and partners collectively work to reform our current system to reduce reliance upon law enforcement response to mental health issues, the 23-hour crisis stabilization center will be the (non-tribal) crisis stabilization center in Anchorage where individuals can go for immediate access to mental health intervention, and will serve as the designated center for law enforcement and emergency services when needing to transport someone to help. Data has shown that the 23-hour crisis stabilization centers have the capability to resolve crisis for a high percentage (90%) of individuals receiving care. Without access to stabilization services, most of these individuals would otherwise be served in higher levels of care, emergency room departments, jails or remain suffering in the community without supports.

The primary outcomes of Phase 1 of this project include a well-integrated plan for 23-hour stabilization and crisis residential (short-term stabilization) beds, including retaining project management and director services, facility design, as well as capital, launch and operating estimates to populate a Phase 2 implementation partnership with the Trust (expected by end of year 2021). Providence has communicated commitment to partner with the Trust through Phase 1 leading to standing up stabilization services in a Phase 2 of implementation.

Currently, there is no crisis stabilization service like this in Anchorage, and once implemented it will be able to meet the needs of Trust beneficiaries in crisis and begin diverting them from emergency rooms and the criminal justice system.

The Trust program staff recommend this proposal be fully funded.

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<td>5.2 Crisis system improvement</td>
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**PROJECT DESCRIPTION**

*The following is excerpted from the prospective grantee’s application.*

**PROJECT DESCRIPTION**

Providence Health & Services Alaska respectfully requests $400,000 in funding to aid in the development of three programs to support the Crisis Now model of emergency behavioral health care in Anchorage:

- A 23-hour crisis stabilization service to provide immediate care and an always-available entryway to behavioral health services, and
- A Crisis Residential/short term stabilization service to provide care when an individual needs additional intervention to resolve the crisis beyond the 23-hour stabilization service, and
Intensive Case Management (ICM) to discover and address clients’ barriers to care and contributing socioeconomic factors, and to connect clients with appropriate services to improve continuity of treatment. A best practice approach to wrap around care management and coordination, ICM will ensure individuals entering and exiting the crisis stabilization services are engaged, re-connected to community services and supports as well as create opportunity to intervene earlier with individuals in a manner that can prevent escalation into greater despair and crisis.

These programs will be designed to fit within the larger continuum of behavioral health services in Anchorage, including Providence's psychiatric emergency department and outpatient behavioral health clinics, as well as services provided by tribal health and other providers in the community.

Anchorage is in desperate need of a comprehensive crisis response system. Our community’s behavioral health infrastructure is fragile, overburdened with the incidence of crises associated with mental illness, violence, suicide, alcohol, methamphetamine, and opioid overdose and homelessness, all of which continue to escalate while service capacity diminishes. No clear regulatory or licensure path exists for comprehensive crisis response care, and the 1115 waiver does not allow for involuntary crisis care services.

For the past two years, Providence Health and Services Alaska has partnered with Alaska Mental Health Trust Authority (the Trust), Southcentral Foundation, emergency medical services (EMS), Anchorage law enforcement, and other key stakeholders to evaluate and advocate for an intentional design of low- to no-barrier crisis stabilization services, with the intent to become the designated (non-tribal health) Crisis Now stabilization provider in Anchorage.

Providence respectfully requests $400,000 to partner with the Trust, the Department of Health & Social Services, other key stakeholders, and the community-at-large for planning and development of an effective and sustainable crisis stabilization center. The stabilization center would serve adults in the Anchorage area who are experiencing a crisis related to mental health or substance misuse, and include 23-hour crisis stabilization care, as well as additional short-term residential stabilization care and intensive case management.

This project will address the care model’s legal, regulatory, financial, and capital requirements, as well as program development and human resources requirements. During the planning phase, Providence will explore best-practice models of care to determine how to build the model safely and effectively in Anchorage and within the existing system of care, while continuing to advocate for collaboration and improvements within the system to strengthen trauma informed “no-wrong-door” treatment programs.

Funding for this project would support Providence to:

1. Develop the clinical model of crisis care for all three programs, including policies, workflows, staffing patterns, training, therapeutic setting design, and zero suicide safer care
2. Develop and identify safety net funding for financial sustainability for providers
3. Obtain legal consultation for regulatory compliance and licensure for the building and care
4. Set timeline and goals for outcomes and key metrics
5. Develop a workforce plan and hire key talent to safely build the program
6. Engage and consult with RI and other providers (travel to sites practicing evidence-based crisis care (including Crisis Now))
7. Coordinate and manage the project with external stakeholders
8. Engage in the design and support of governing body for crisis care
9. Develop a high-level building schematic and outline capital costs
10. Seek designation from the State as the Crisis Stabilization center

Providence and its partners have identified a building (4105 Lake Otis Parkway in Anchorage) which will be assessed as a possible future location for the Center. Providence will develop a pro forma to include capital and programmatic expenses to ensure long-term sustainability and effectiveness.

The primary outcomes of this project include a well-integrated plan for 23-hour/crisis residential (short-term stabilization) beds, including retaining project management and director services, facility design, as well as capital, launch and operating estimates to populate a Phase 2 implementation partnership with the Trust (expected by end of year 2021).

Providence and its partners are dedicated to ensuring that those suffering from mental health and substance use disorders have access to state-of-the-art behavioral health crisis treatment for both voluntary and involuntary care. Providence is committed to ongoing partnerships and collaboration with key stakeholders/contractors throughout crisis stabilization implementation, including serving on the Anchorage implementation steering committee, developing formal memorandums of understanding, etc.

**EVALUATION CRITERIA**

We are thrilled that the Trust is engaged in supporting providers to seek solutions for behavioral health challenges. The State has sought an 1115 waiver to develop the continuum of behavioral health services and Providence is excited about developing the continuum of services within the 1115 waiver that include crisis care. However, the 1115 waiver does not cover involuntary care, nor does it address the system challenges or capital funding and places the risk for developing these services on the providers. The Trust has developed a vision for changing the system of care that includes a more coordinated effort for sustainability of care.

Providence’s planning for the stabilization center will include government and other key stakeholders to ensure that an effective crisis care delivery system is developed. Success for this project includes engaging stakeholders and solidifying a successful payment structure that supports involuntary and voluntary treatment and successful goals for developing a “no-wrong-door” approach. We will have a fully developed model of care, financial pro forma, and regulatory, and billing path. We will seek memorandums of agreement between police, emergency management systems, government entities, and other providers to ensure that the crisis stabilization is set up to grow and transform into a “no-wrong-door” system of intervention and care.
SUSTAINABILITY

This project will seek to join the efforts of the Trust in developing programing that can be implemented into a coordinated system of crisis care. The project will help to inform the legislative and regulatory changes that are necessary to provide increased access to effective care. Providence will seek to negotiate payment structures that will provide financial sustainability within the Alaskan healthcare system and collaborate closely with our Tribal partners and other providers as important and vested stakeholders. This project will outline the capital costs associated with starting and the necessary payment for a sustainability. The process of developing a new system of care when we have the funding necessary to speed up the work and ultimately allowed for increase access to care for beneficiaries. This project will also benefit other providers’ program models, as a blueprint for trauma-informed and recovery-oriented care. Providence will have established relationships that hold the system of care accountable for reformation and improved care. This project supports the first phase of system development and will allow Providence to determine how to effectively develop the programs in preparation to become the designated (non-tribal health) Crisis Now stabilization provider in Anchorage.

WHO WE SERVE

This project will benefit Anchorage adult Trust beneficiaries who are experiencing a crisis related to a mental health or substance use disorder by ensuring that a path for complex program development is available. The RI consultation report for Anchorage revealed that Anchorage Trust beneficiaries experience 6,997 crisis episodes annually. Trust beneficiaries that experience crisis are often held in emergency departments without access to therapeutic intervention and evidence-based care settings or incarcerated. Intervention for complex crises are often unavailable for beneficiaries and the population at large, and community members suffer and experience trauma within the system which should be helping them. The investment in this project will ensure that evidence-based, safer effective care is available for acute crisis, including substance misuse and substance use disorders, serious psychological distress, suicide, and mental and substance use disorders. The stabilization center’s “no-wrong-door” policy is a key component to changing the system of care and will require significant planning and partnerships in determining a safe timeline to increase access and build clinical efficacy to support the complexity of clinical issues. We will seek to become a no- to low-barrier stabilization service and are committed to strong partnerships with EMS, local law enforcement, and other key stakeholders/providers to develop a coordinated system of care to serve all adults who present at the stabilization center with a crisis.

ESTIMATED NUMBERS OF BENEFICIARIES SERVED EXPERIENCING:

| Mental Illness: | 3,000 |

BUDGET

| Personnel Services Costs | $190,000.00 |
| Personnel Services Costs (Other Sources) | $22,500.00 |
| Personnel Services Narrative: | $190,000 – PH&SA employees to oversee the project or provide information relevant to program design:  
| | • Medical Director – clinical development  
| | • Regional Director for Behavioral Health – program direction and executive support  
| | • Business Manager for Behavioral Health – data gathering, financial and operational analysis  
| | • Revenue Cycle – consultation regarding charge structure and processes  
| | • Other managers and teams as appropriate, e.g., Behavioral Health programs, Emergency Department, Real Estate, Security – knowledge holders and subject matter experts |
| Other Costs | $210,000.00 |
| Other Costs (Other Sources) | 0 |
| Other Costs Narrative: | $100,000 - Legal and consulting fees  
| | $100,000 – Project manager (contracted)  
| | $10,000 – Architecture: requirements analysis |
| Total Amount to be Funded by the Trust | $400,000.00 |
| Total Amount Funded by Other Sources | $22,500.00 |

**OTHER FUNDING SOURCES**

| Providence Health & Services Alaska | $22,500.00 |
| **Total Leveraged Funds** | **$22,500.00** |