

MEETING AGENDA

Meeting: Board of Trustee
Date: May 26, 2021
Time: 8:30 AM
Location: online via webinar & teleconference
Teleconference: (844) 740-1264 / Meeting No: 133 319 9457 # / Attendee No: #
<https://alaskamentalhealthtrust.org/>
Trustees: Chris Cooke (Chair), Verné Boerner, Rhonda Boyles, Brent Fisher,
Anita Halterman, John Sturgeon

Wednesday, May 26, 2021

Page No.

8:30	Call to Order – Chris Cooke, Chair	
	Roll Call / Announcements / Approval of Agenda	
	Review of Guiding Principles	5
	Ethics Disclosure	
	Approval of Minutes	
	• January 14, 2021	12
	• January 27-28, 2021	19
	• March 30, 2021	50
	Current Bylaws	54
	Opening Comments / Introductions	
8:55	Mission Moment	
	True North Recovery	
	• Karl Soderstrom, Executive Director	
9:25	Staff Report	
	CEO Update	
9:45	Statutory Advisor Update	61
	Alaska Mental Health Board / Advisory Board on Alcoholism and Drug Abuse	
	• Bev Schoonover, Executive Director	
	• Teri Tibbett, Advocacy Coordinator	
10:25	Break	
10:40	Statutory Advisor Update	75
	Alaska Commission on Aging	
	• Lisa Morley, Executive Director	

Wednesday, May 26, 2021 (continued)

Page No.

11:20	Statutory Advisor Update Governor's Council on Disabilities and Special Education • Kristin Vandagriff, Executive Director	86
12:00	Lunch Break	
12:30	Communications Update • Allison Biastock, CCO	101
1:15	Finance Committee Report / Update • FY22 Real Estate & Program-Related Real Estate Facility Budgets	136
1:30	Resource Management Committee Report / Update • Community Park Loop • Resource Management Strategy • Golden Summit Expansion • Ester Dome Project • West Naukati Young Growth Timber Sale	145
2:00	Approval(s) • FY21 Change of Intent – Mental Health Professional Off-Site Evaluations	178
2:15	Break	
2:30	Public Comment • For Public Comment Guidelines click here	
	Adjourn	

Additional Documents

• Program & Planning Committee Report	184
• Written Public Comment	213

Future Meeting Dates

Full Board of Trustee / Program & Planning / Resource Management / Audit & Risk / Finance

(Updated – May 2021)

- | | | |
|--|----------------------------|------------------------|
| • Program & Planning Committee | July 27-28, 2021 | (Tue, Wed) |
| • Audit & Risk Committee | July 29, 2021 | (Thu) |
| • Resource Mgt Committee | July 29, 2021 | (Thu) |
| • Finance Committee | July 29, 2021 | (Thu) |
| • Full Board of Trustee | August 25-26, 2021 | (Wed, Thu) – Anchorage |
| | | |
| • Audit & Risk Committee (tentative) | October 20, 2021 | (Wed) |
| • Finance Committee (tentative) | October 20, 2021 | (Wed) |
| • Resource Mgt Committee (tentative) | October 20, 2021 | (Wed) |
| • Program & Planning Committee (tentative) | October 21, 2021 | (Thu) |
| • Full Board of Trustee | November 17-18, 2021 | (Wed, Thu) – Anchorage |
| | | |
| • Audit & Risk Committee | January 5, 2022 | (Wed) |
| • Finance Committee | January 5, 2022 | (Wed) |
| • Resource Mgt Committee | January 5, 2022 | (Wed) |
| • Program & Planning Committee | January 6, 2022 | (Thu) |
| • Full Board of Trustee | January 26-27, 2022 | (Wed, Thu) – Juneau |
| | | |
| • Audit & Risk Committee | April 20, 2022 | (Wed) |
| • Finance Committee | April 20, 2022 | (Wed) |
| • Resource Mgt Committee | April 20, 2022 | (Wed) |
| • Program & Planning Committee | April 21, 2022 | (Thu) |
| • Full Board of Trustee | May 25, 2022 | (Wed) – TBD |

Future Meeting Dates

Statutory Advisory Boards

(Updated – May 2021)

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

AMHB: <http://dhss.alaska.gov/amhb/Pages/default.aspx>

ABADA: <http://dhss.alaska.gov/abada/Pages/default.aspx>

Executive Director: Bev Schoonover, (907) 465-5114, bev.schoonover@alaska.gov

- Executive Committee – monthly via teleconference (Fourth Wednesday of the Month)
- AMHB/ABADA Full Board Meeting: July 21, 2021 / 9:00 to noon (virtual)
- Statewide Suicide Prevention Council Meeting: August 24, 2021 / time TBD (virtual)

Governor's Council on Disabilities and Special Education

GCDSE: <http://dhss.alaska.gov/gcdse/Pages/default.aspx>

Executive Director: Kristin Vandagriff, (907) 269-8999, kristin.vandagriff@alaska.gov

- September 2021 - TBD

Alaska Commission on Aging

ACO: <http://dhss.alaska.gov/acoa/Pages/default.aspx>

Executive Director: Lisa Morley, (907) 465-4879, lisa.morley@alaska.gov

- Fall Meeting: September 1-2, 2021 / location TBD
- Winter Meeting: November 16-17, 2021 / location TBD

**The Trust's
Guiding Principles /
Mission Statement /
Trust Budget
Process Flowcharts**

Trust Guiding Principles

To improve the lives of Trust beneficiaries, The Trust is committed to:

Education of the public and policymakers on beneficiary needs;

Collaboration with consumers and partner advocates;

Maximizing beneficiary input into programs;

Continually improving results for beneficiaries;

Prioritizing services for beneficiaries at risk of institutionalization or needing long-term, intensive care;

Useful and timely data for evaluating program results;

Inclusion of early intervention and prevention components in programs;

Provision of reasonably necessary beneficiary services based on ability to pay.

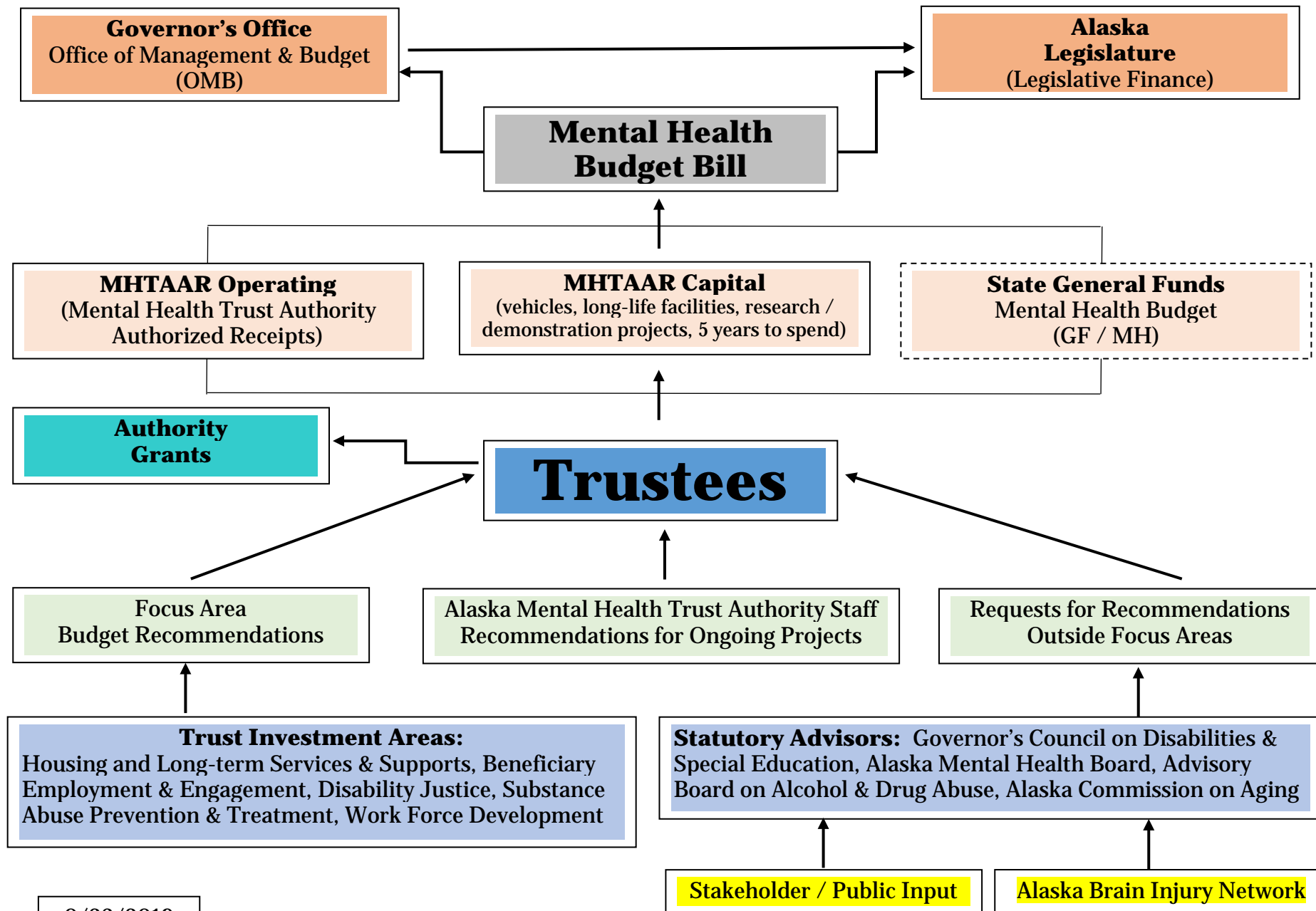
Approved 5-12-09, Board of Trustee meeting

Trust Mission Statement

The Alaska Mental Health Trust Authority (The Trust) administers the Mental Health Trust to improve the lives of beneficiaries. Trustees have a fiduciary responsibility to protect and enhance trust assets in perpetuity for the beneficiaries. The Trust provides leadership in advocacy, planning, implementing and funding of the Comprehensive Integrated Mental Health Program; and acts as a catalyst for change.

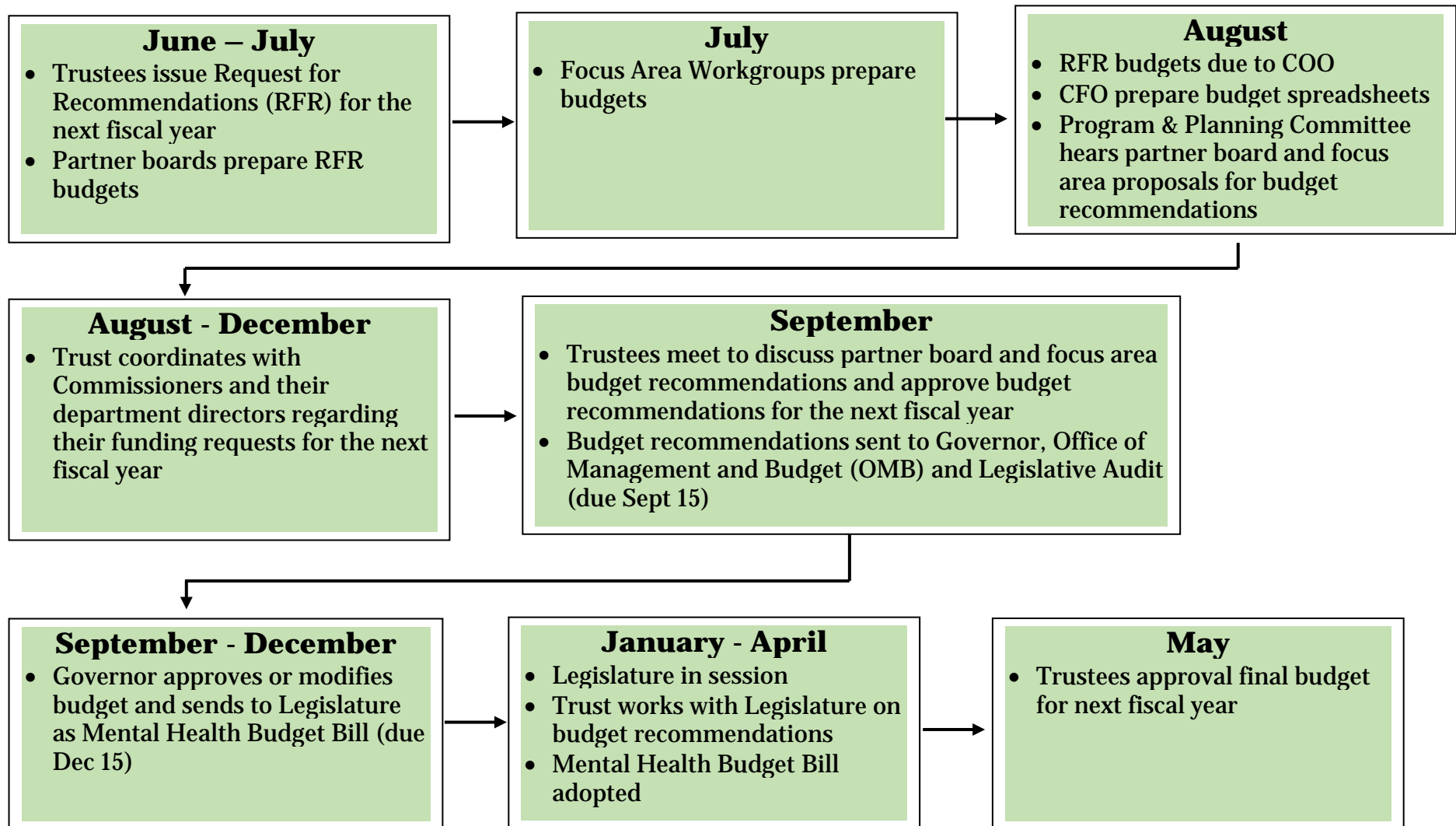
Approved 5-12-09, Board of Trustee meeting

Alaska Mental Health Trust Authority Budget Process



0/23/2019

Annual Mental Health Budget Bill Process

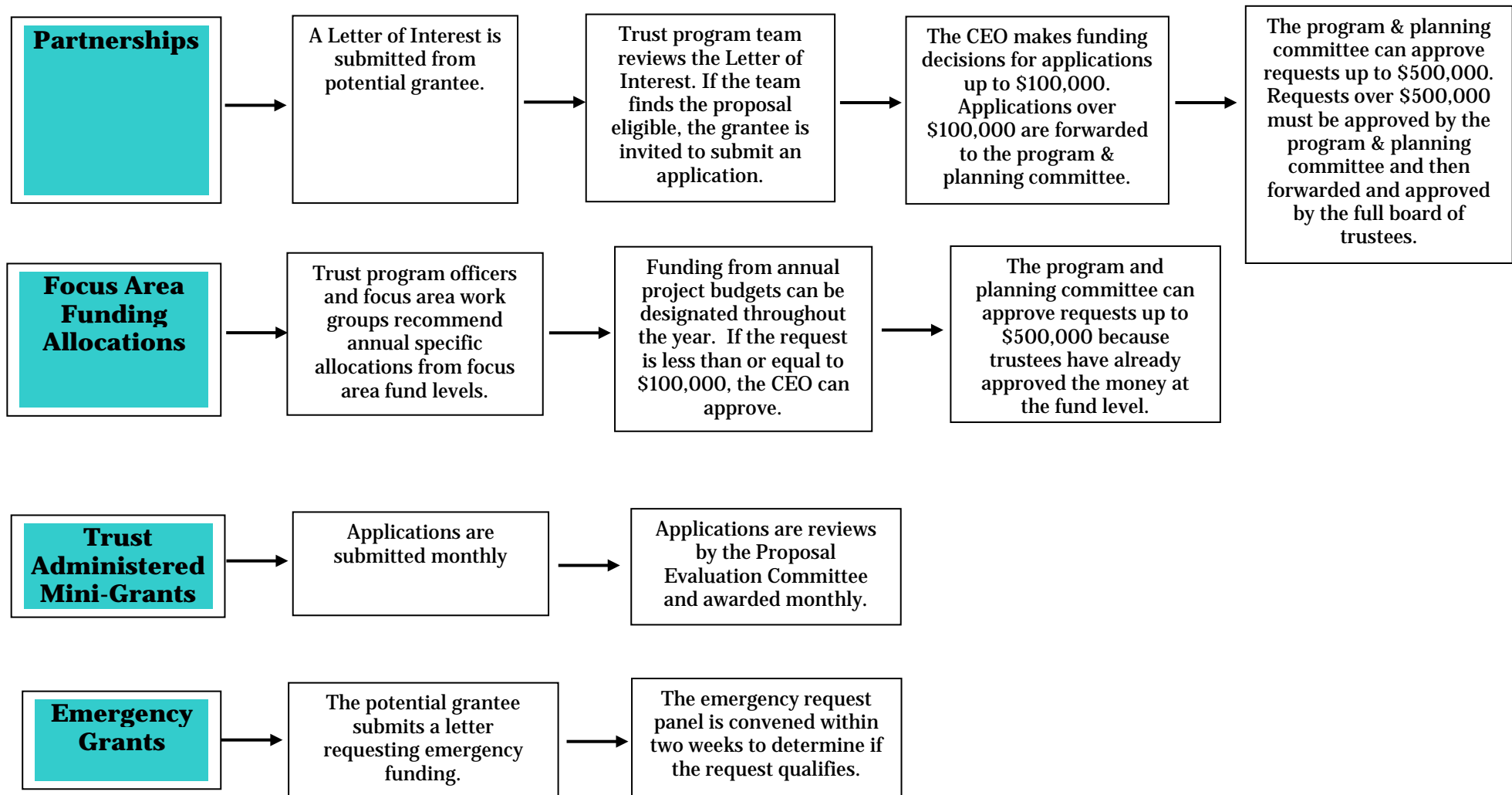


Note: timeline represents those items in the green boxes in the chart entitled “Alaska Mental Health Budget Process”

01/23/2019

Grant Approval Process for Authority Grant Funds

All annual budgets are approved by the full board of trustees at the September meeting



Note: this chart depicts those items included in the teal box labeled "Authority Grants" on the chart entitled "Alaska Mental Health Trust Authority Budget Process"

Revised: 01/23/2019

Alaska Mental Health Trust Annual Calendar

TRUSTEES	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
Scheduled full board meeting & prep												
Scheduled committee meetings & prep												
APOC filing due 3/15												
Officer elections												
Board evaluations												
CEO evaluation												

LEGISLATURE	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
Budget finalization with departments												
Trust advocacy trainings												
House/Senate Finance budget presentation												
Legislative session												

PROGRAM	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
Focus area budget updates, stakeholder mtg												
Request for recommendations (RFR) issued												
Statements of Intent / grant agreements												
Trust/DBH quarterly meetings												
Small projects												
Grant quarterly reports												
Rural Outreach (every 2yrs)												

LAND OFFICE	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
Resource field season												
Real estate BOV/appraisals												
Fall land sale												
Quarterly reports												
Ft. Knox audit (every 2yrs)												

ADMINISTRATION	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
Fiscal year end & re-appropriation												
External audit												
Operating budget due 9/15												
Trust annual report												
Contract renewals												
OMB measures												
Asset allocation annual review												

ADVISORY BOARDS	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
Statutory Advisory Board - ACoA												
Statutory Advisory Board - AMHB/ABADA												
Statutory Advisory Board - GCDSE												

**Minutes for the
January 14, 2021
Full Board of Trustee
Meeting**

ALASKA MENTAL HEALTH TRUST AUTHORITY

SPECIAL FULL BOARD OF TRUSTEES MEETING

January 14, 2021

2:00 P.m.

WebEx Videoconference/Teleconference

Originating at:

**3745 Community Park Loop, Suite 120
Anchorage, Alaska**

Trustees Present:

Chris Cooke, Chair

John Sturgeon

Ken McCarty

Rhonda Boyles

Verne' Boerner

Annette Gwalthney-Jones

Anita Halterman

Trust Staff Present:

Mike Abbott

Steve Williams

Carol Howarth

Miri Smith-Coolidge

Kelda Barstad

Michael Baldwin

Katie Baldwin-Johnson

Valette Keller

Allison Biastock

Trust Land Office:

Wyn Menefee

Sarah Morrison

Jusdi Doucet

Also participating:

Stuart Goering; Josephine Stern; Brenda Moore.

PROCEEDINGS

CALL TO ORDER

CHAIR COOKE called the special meeting to order and called the roll. He continued that Trustee Halterman was not yet on-line, but there are six members of the Board for a sufficient quorum. He asked for an updated information sheet for the Board of Trustees from staff. He moved to the approval of the agenda.

APPROVAL OF AGENDA

MOTION: A motion to approve the agenda was made by TRUSTEE STURGEON; seconded by TRUSTEE GWALTHNEY-JONES.

CHAIR COOKE called the roll-call vote.

After a roll-call vote, the MOTION WAS APPROVED. (Trustee Boyles, yes; Trustee Fisher, yes; Trustee Sturgeon, yes; Trustee Boerner, yes; Trustee Cooke, yes.)

CHAIR COOKE asked for any ethics disclosures. There being none, he moved on to the questions for the open session that were raised or carried over from the previous committee meeting a week or so ago. He stated that Mr. Abbott and Mr. Goering were present to resolve all the questions about the Open Meetings Act, especially in light of technology use and other issues that were represented at the previous meeting.

MR. ABBOTT stated that the questions discussed were forwarded to Stuart Goering, and he asked Mr. Goering to continue.

MR. GOERING stated that he received three questions. The first one was: "Is it an ethical violation for questions intended for open-meeting disclosure but withheld to filtered nonmeeting dissemination to occur?" As an initial matter in answering, it is not primarily an ethics issue and not necessarily an Open Meetings Act question. The Open Meetings Act is primarily addressed towards making the meetings accessible to the public and to make government's business transparent. He continued that there are other statutes which control the dissemination of information outside of the public-meeting context. He added that any materials that are considered public have to be made available to people who are at teleconference locations and if at some point in the future, would, by implication, need to be available at the live location. He recommended that in order to make the public record complete, responsive things should be made available to the public without request in the same way that materials considered in a public meeting would be available without request. That is not absolutely a legal requirement, but it is a best practice. Technically, it would be fine to wait for a public-records request.

CHAIR COOKE noted that Anita Halterman had joined the meeting at the beginning of the presentation. He asked Mr. Goering to continue.

MR. GOERING stated that the second question is: "Is it ethical for trustees to give limited time whereas the presenters dominate the supposed time allotted for the topics?" He replied that this was not really an ethics question as much as a matter of collegiality of the trustees and conduct of the meeting. The presiding officers at meetings have a fair amount of discretion in terms of how to conduct meetings, and the allocation of time is usually within the discretion of the Chair.

He continued that the purpose of having a board of trustees is for there to be an opportunity not just to receive information, but also to have a robust and complete discussion about the subject matter that is being considered by the board. He added, as a result, because the context of this question was at a committee meeting, committees relatively rarely have the ability to do anything more than recommend, and there is usually additional opportunity for discussion and questions at the board level before an actual decision is taken. It does not really raise an ethical or legal issue unless it gets fairly extreme.

CHAIR COOKE stated that that question leads into the question about deferring questions to a time or to do it in writing after the meeting rather than during the meeting.

MR. GOERING moved to the third question: "Again, does it violate Open Meetings disclosure for a question to be deferred until later for trustees when the public is not availed of the answer?" The way he understood this question was there was a commitment by presenters to follow up by e-mail and then that response would be distributed to trustees. He stated that tied into the answer of the first question that documents are considered and are available to the public as easily as if they were considered at the meeting itself. He continued that it is also within the discretion of the presiding officer and subject to the collegiality of the board or the committee as a whole to defer subject matter to either a later meeting or to offline discussion. He added that, in general, if trustees are hearing it, it should be something that is shared generally with trustees. Everyone does have different levels of experience and different interests, and it is not wrong for a trustee, under the Open Meeting Act, as long as there are not more than three members, or a quorum of that committee in on those sessions to follow-up sessions, then there is no Open Meetings Act issue with that. He stated that what was implicated here is that time ran out and that questions were not wanted to go unanswered. What was chosen was to follow up in writing as opposed to scheduling another agenda item for a future committee meeting to address the subject further.

CHAIR COOKE recognized Trustee McCarty, since he raised these issues.

TRUSTEE McCARTY stated that the key clause was that the purpose of the trustees of any board is a collective group of minds to discuss the issue of business, and if the collective group of minds is unable to be there, that it makes it difficult to bounce the thoughts around. He continued that the concern is the aspect of on the record and what the mechanism in that Trust that the public can go to and get the information quickly. He added the responsibility to reflect that in minutes.

CHAIR COOKE asked if Trustee McCarty had any other matters to direct to Mr. Abbott or Mr. Goering.

TRUSTEE McCARTY asked what is the mechanism requirement to notify the public; what is the mechanism to put in the minutes if it is being stated that it will be sent out later.

CHAIR COOKE asked Mr. Abbott how is the record of subsequent communications between a trustee and a presenter maintained.

MR. ABBOTT replied that, unless an item is brought up again at a subsequent meeting, a special effort to maintain a discrete record of or pose subsequent information on the Website is not made. He continued that it is possible to post information that is prepared after a meeting along

with the information that was posted for the preparatory materials, but that is not being done at this time. He added that if that is a preference of the trustees, or a recommendation of counsel, a place on the Website can be built along with the other meeting materials. He asked if Mr. Goering had anything further in response.

MR. GOERING replied that other agencies handle this question in a variety of different ways. Some will attach follow-up materials to the agenda for the next meeting under old business. Some will attach them to the minutes at the time they are brought to the board or the committee at the next meeting as part of the meeting minutes. Some have a link on their Website that is part of the meeting link. He added that the Legislature has encouraged agencies to always go on the side of greater transparency rather than lesser. He stated that the trustees should think carefully about logistically how to do things like this in a way that fits in with the overall management of the board and the Trust as a whole.

CHAIR COOKE stated that it seems that some of this concern is directed at meeting procedure, whether things are postponed or deferred or moved forward in the interest of time. He continues that if someone wanted to submit a request for additional information from a presenter after the meeting, that person could indicate that in an e-mail or communication whether or not they want the question and response to be part of the record of the meeting.

MR. GOERING stated that was an excellent way to identify the things that need special attention as opposed to them just being part of the ordinary course of business.

CHAIR COOKE asked Trustee McCarty if he had anything further.

TRUSTEE McCARTY replied no, and thanked Mr. Goering.

CHAIR COOKE recognized Trustee Halterman.

TRUSTEE HALTERMAN stated that she had an observation. She noted that she wrote regulations for the Department of Health and Social Services for about four years, and the Administrative Procedure Act was something that she was very familiar with. She continued that it would be prudent for the board to support having that dialogue and deliberation put on the record as opposed to submitted questions.

TRUSTEE GWALTHNEY-JONES had no questions.

TRUSTEE BOYLES stated that when she had a question that she would call Mr. Abbott or the staff. She thanked Trustee McCarty for raising the issue.

TRUSTEE STURGEON stated he was fine.

TRUSTEE BOERNER stated she had no questions and supported what was said.

CHAIR COOKE stated that he would certainly see a distinction between postponing full discussion on a matter that is an action item as opposed to one that is more information-sharing. He stated concern on not having a full discussion but still going ahead and voting on something with the idea that more questions would come up later. He added that seemed inappropriate.

MR. GOERING clarified that the Administrative Procedures Act does not have a lot of relevance to the Trust work except when adopting regulations. The primary source for this conversation was the Open Meetings Act, and the questions were framed in terms of ethical issues. The Executive Branch Ethics Act does not directly impact this. The Records Management Act and the Public Records Act do have relevance, as well, in this context. He stated that Chairman Cooke correctly stated that there is a distinction to be made between agenda items in committees where no final decision was being made versus board meetings where a final decision is being made. It would be extremely unwise from a legal perspective to cut off discussion or questions when an issue was going to be subject to a final vote.

CHAIR COOKE thanked Mr. Goering, and asked Trustee McCarty for anything further.

TRUSTEE McCARTY stated appreciation for the discussion and the advice from Mr. Goering. He encourages the trustees to explore designing something for the Website for the public to see.

CHAIR COOKE moved to the other matter on the agenda, a legal consultation which would be done in an executive session. He asked for a motion for an executive session.

MOTION: A motion to move the Board to go into executive session for a legal consultation regarding the Governor's proposed Fiscal Year '22 Budget in accordance with the Open Meetings Act, AS 44.62.310(c) was made by TRUSTEE HALTERMAN; seconded by TRUSTEE GWALTHNEY-JONES.

CHAIR COOKE called the question.

After the roll-call vote, the MOTION WAS APPROVED. (Trustee Boerner, yes; Trustee Boyles, yes; Trustee Gwaltney-Jones, yes; Trustee McCarty, yes; Trustee Sturgeon, yes; Trustee Cooke, yes.)

(Executive Session from 2:35 p.m. until 3:45 p.m.)

CHAIR COOKE called the meeting back to order and took the roll. He stated that Trustee Sturgeon had to leave, and noted that there was a quorum. He stated that no action was taken during the executive session. He continued that the agenda was complete and thanked Mr. Abbott and Mr. Goering for their participation. He asked for any other matters of business to consider. There being none, he asked for a motion to adjourn.

MOTION: A motion to adjourn the meeting was made by TRUSTEE HALTERMAN; seconded by TRUSTEE McCARTY.

CHAIR COOKE thanked Trustee McCarty for all his participation, and noted that this would be his last time in a meeting as a trustee.

TRUSTEE McCARTY stated that it was an honor and a pleasure.

CHAIR COOKE stated appreciation for his efforts and the energy, special knowledge, and wisdom brought to the trustees. He wished Trustee McCarty well in Juneau. He called the

question.

After the roll-call vote, the MOTION WAS APPROVED. (Trustee Boerner, yes; Trustee Boyles, yes; Trustee Gwalthney-Jones, yes; Trustee McCarty, yes; Trustee Cooke, yes.)

(Special Full Board meeting adjourned at 3:53 p.m.)

**Minutes for the
January 27-28, 2021
Full Board of Trustee
Meeting**

ALASKA MENTAL HEALTH TRUST AUTHORITY

FULL BOARD OF TRUSTEES MEETING

January 27, 2021

8:30 a.m.

WebEx Videoconference/Teleconference

Originating at:

**3745 Community Park Loop, Suite 120
Anchorage, Alaska**

Trustees Present:

Chris Cooke, Chair

John Sturgeon

Brent Fisher

Verne' Boerner

Annette Gwalthney-Jones

Anita Halterman

Rhonda Boyles

Trust Staff Present:

Mike Abbott

Steve Williams

Carol Howarth

Miri Smith-Coolidge

Kelda Barstad

Luke Lind

Michael Baldwin

Carrie Predeger

Katie Baldwin-Johnson

Jimael Johnson

Valette Keller

Eric Boyer

Autumn Vea

Allison Biastock

Kat Roch

Travis Welch

Trust Land Office:

Wyn Menefee

Sarah Morrison

Becky Carpenter

Also participating:

Martha Oss; Linda Setterberg; Bobby Dorton; Ann Ringstad; Lisa Morley; Nona Safra; Ric Nelson; Shannon Donahue; Sheila Harris; Stephanie Hopkins; L. Cordwell; Maria Bahr; Beverly Schoonover; Kristin Vandagriff; Lesley Thompson.

PROCEEDINGS

CALL TO ORDER

CHAIR COOKE began by calling the roll. Having a quorum, he called the meeting to order. He announced that Ken McCarty has left the board, and to fill that vacancy the Governor has appointed Brent Fisher, who is here this morning. Trustee Fisher begins his service on the Board as a full voting member immediately, and is subject to legislative confirmation later this spring. He welcomed Trustee Fisher.

TRUSTEE FISHER stated that everyone has been kind and helpful in understanding the ropes of the Board, the organization and everything else. He stated appreciation for everyone's help.

CHAIR COOKE asked for an updated information sheet for the Board of Trustees from staff, and moved to the approval of the agenda.

APPROVAL OF AGENDA

MOTION: A motion to approve the agenda was made by TRUSTEE STURGEON; seconded by TRUSTEE GWALTHNEY-JONES.

TRUSTEE COOKE moved to the roll-call vote.

After a roll-call vote, the MOTION WAS APPROVED. (Trustee Boyles, yes; Trustee Fisher, yes; Trustee Sturgeon, yes; Trustee Boerner, yes; Trustee Cooke, yes.)

ETHICS DISCLOSURES

CHAIR COOKE asked for any ethics disclosures. Hearing none, he moved to the approval of the minutes. He stated that there were two sets of minutes from the November 18th regular board meeting and a special meeting of December 8th, 2020.

APPROVAL OF MINUTES

MOTION: A motion to approve the November 18, 2020 minutes was made by TRUSTEE BOYLES; seconded by TRUSTEE GWALTHNEY-JONES.

CHAIR COOK called the roll-call vote for approval of the minutes.

After a roll-call vote, the MOTION WAS APPROVED. (Trustee Boerner, yes; Trustee Boyles, yes; Trustee Gwaltney-Jones, yes; Trustee Halterman, excused; Trustee Fisher, abstained; Trustee Sturgeon, yes; Trustee Cooke, yes.)

MOTION: A motion to approve the minutes of December 8, 2020 was made by TRUSTEE GWALTHNEY-JONES; seconded by TRUSTEE STURGEON.

After a roll-call vote, the MOTION WAS APPROVED. (Trustee Boerner, yes; Trustee Boyles, yes; Trustee Gwaltney-Jones, yes; Trustee Sturgeon, yes; Trustee Fisher, abstained; Trustee Cooke, yes.)

CHAIR COOKE stated that the current bylaws for trustees' reference are in the packet. He moved to the Mission Moment.

MISSION MOMENT

MR. ABBOTT stated that there were several good ideas for Mission Moments for this meeting and that there will be two Mission Moments; one this morning, and the other tomorrow. He asked Travis Welch to introduce the presentation.

MR. WELCH thanked the trustees for the opportunity to present the Fairbanks Coordinated Re-entry program. He stated that the State of Alaska historically had a high recidivism rate of 67 percent, which is now down to 59 percent. When talking about recidivism, it is about individuals who were released from a correctional facility, going back to jail within three years of that release. He continued that re-entry is a priority for the Trust due to the overrepresentation of Trust beneficiaries in the criminal justice system and the many obstacles faced as returning citizens. The re-entry coalitions that the Trust supports are in Anchorage, the Mat-Su, Fairbanks, and in Juneau. The Fairbanks Re-entry Coalition would be highlighted today. They provide supports that help re-entrants overcome the obstacles faced such as housing, employment and peer support. This presentation would highlight peer support because the Fairbanks Re-entry Coalition actually brought peer support to Alaska a few years ago with help from the Trust through a grant. He introduced the three people on-line: Linda Setterberg, the Re-entry Coalition coordinator; Marsha Oss, the re-entry case manager in Fairbanks; and Bobby Dorton, a recent re-entrant and participant in the Re-entry Coalition. He gave a bit of background on each and stated that Bobby Dorton was released from the Wildwood Correctional Center in July 2018 and now works as a counselor and case manager for the Fairbanks Native Association. Bobby has accomplished many things since his release and will share his experiences and accomplishments. He expressed his appreciation to all three for joining today, and the gratitude he has for being able to work and serve Trust beneficiaries alongside them. He recognized Marsha Oss.

MS. OSS thanked the trustees for having Fairbanks as one of the Mission Moments because that is what they live and breathe in Fairbanks. She stated that there is a lot that goes on behind the scenes with re-entry case management. It starts with in-reach by going into the facilities and meeting the people that are incarcerated; introducing the programs to them, and getting them started while they are still on the inside. She added that she met Bobby at Wildwood when she was doing a re-entry in-reach. She continued that Bobby showed up in her office in August 2018 with a lot of anxiety. He had been out for about 30 days and was really struggling with trying to identify supports. She stated that they helped Bobby with getting his own apartment and getting assessments done to meet his probation conditions. He also needed cold-weather gear for the winter, and we helped to write a mini-grant for him. She continued that he finished his GED while on re-entry case management and then applied for RADAC. He started RADAC 30 days after he graduated case management, which is about six months. She also took him to Linda Setterberg, the coalition coordinator, because Bobby had an important story. It is important that the community embrace the people when they come home, and Bobby took the Coalition members by storm and has been a Coalition member ever since. She stated that she was very proud of Bobby Dorton.

CHAIR COOKE recognized Bobby Dorton.

MR. DORTON stated that it was nice to meet all and that he had met a few people with the Trust going to the recidivism conference, which is great. He continued that it was a great opportunity to see that the sky is the limit. He talked about barriers which are a big thing when getting out of prison. Those barriers do not have to be your fate. He stated that he ran across a lot of barriers but did not let that determine where he was going. Half the battle is showing up to the fight. He continued that the Trust has been one of the biggest supporters, and a big reason why he did not go back to prison. The Trust always welcomed him and did not throw him away like a lot of the rest of the world did. He stated that he was an Alaskan Athabascan Native, originally from the Interior Village of Northway, which is by the Canadian border. He stated that he was incarcerated for nearly five years in the Alaska Correctional System, was released in July of 2018, and is currently on parole. He has actively been working to reintegrate into his community of Fairbanks. He has a job as a counselor and case manager at the Fairbanks Native Association, the Ralph Perdue Center, 3.5 Residential Treatment Center. He also volunteers on both the Fairbanks Diversity Council and the Alaska Peer Support Advisory Board. He is also the community co-chair for the Fairbanks Re-entry Coalition. Most recently, he was appointed by the Governor to serve on the Alaska Mental Health Board and Advisory Board on Alcoholism and Drug Abuse. He stated that it was an honor to serve on that board. He continued that he is a peer-support specialist and his strongest passion is to provide peer support for justice-involved Alaskans. He talked about how the Mental Health Trust helped him. The grant from the Trust helped him get his own apartment. This gave him stability, safety, and he started working on his foundation in recovery. Getting that apartment made him feel like he was becoming part of Fairbanks again. It was very important to be able to say that he had his own apartment. He continued that Linda Setterberg told him that volunteering would get his foot in the door, and it got him far into the community. He attended an advocacy training in Fairbanks that started him on the track of learning to tell his story for policymakers. He called in for public testimony in front of the Alaska State Legislature, which was a big learning experience. He shared that he was locked up with a guy that told him "If you want to stop coming here, start hanging out with people you want to be like. If you want to keep coming back here, keep hanging out with people like me." He stated that he started hanging out with different people and changed the way he did things. He continued that if the Trust asked him to do anything he would because the Trust did so much for him. He is currently serving on the planning team for the 2021 Virtual Reducing Recidivism and Re-entry Conference, sponsored by the Trust. He received his Peer Support Specialist Certificate from Peer Star, and the Trust is one of the main supporters of the peer support certification effort in Alaska. He added that he is almost eight years clean, and made some of the best choices since hanging out with the group of people on this call. He stated to never look at the beneficiaries as if they had a limit to what they can do because they can surprise you. He added that he was sure that he had surprised a few people here.

CHAIR COOKE thanked Mr. Dorton for his powerful story. He asked Linda Setterberg if she had something she wanted to contribute about the re-entry program.

MS. SETTERBERG stated that she was here as backup for Bobby Dorton and added that he never took "no" for an answer. She was really proud to work alongside him at the Coalition. She continued that when they did in-person Coalition meetings, he would stand up and share his story and experience. This made everything real. She thanked him for his honesty, openness and for never giving up. He is an inspiration to all of us.

CHAIR COOKE thanked all three for sharing this morning. He noted, for the record, that Anita Halterman has joined the meeting. He asked the trustees for any questions for the presenters.

TRUSTEE BOYLES stated that Mr. Dorton's presentation was emotional. She is from Fairbanks and will be up in mid-March. She would like to have some time to know more about this program.

CHAIR COOKE recognized Trustee Boerner.

TRUSTEE BOERNER thanked Marsha, Bobby, and Linda for their presentations; and especially thanked Bobby for sharing his story. Some of the trustees here had the opportunity to go through a re-entry simulation in one of the meetings in Juneau and got to experience the frustration and how many times people say no. She thanked him for not accepting "no," moving forward, breaking those barriers and going against the stigmas. It is an inspiration.

MS. OSS asked Bobby to talk about the variance process and what that entails, because he did that all on his own, and it is a very complicated procedure.

MR. DORTON stated that he was introduced to Craig Baxter at the background checking. He filled out the variance form and got denied. Most of the time when people get denied they walk away; but he did not. He looked at the very fine print on the bottom and it said that you had 30 days to appeal. He appealed it three days after he got the denial letter. He got the news in the middle of a peer-support meeting that he got the variance. The variance is a waiver from the Department of Health and Social Services that he can work with a vulnerable population. He added that his crime was a drug crime and was not violent, but there is actually a lot of violence involved with drugs. He clarified that he took total responsibility and got the maximum sentence. The entire time he was incarcerated, he did programs and was mentoring while in prison. He was a trustee while incarcerated, which meant that he was able to catch a cab and go to a worksite off the prison grounds and turn himself back in every night. Department of Corrections people treated him well, and he was blessed with all these things. When you do the right thing, you show integrity, and people start believing in you.

CHAIR COOKE thanked Mr. Dorton, and recognized Trustee Sturgeon.

TRUSTEE STURGEON thanked Mr. Dorton for sharing his experience. There are a lot of programs that the Trust is involved in, and these Mission Moments are extremely helpful for the trustees to really understand what is being done and where the money goes. He thanked him for sharing his story.

CHAIR COOKE asked for any other comments or questions. There being none, he recognized Travis Welch and asked if there was anything more he wanted to present about the re-entry program.

MR. WELCH thanked Linda, Marsha, and Bobby for being here and for sharing. He stated that the first time he heard Bobby's story was at a Coalition meeting in Fairbanks, and he was taken

aback by how strong and amazing he is and all the obstacles he overcame to be in the position that he is now. He continued that it is important to remember that 42 percent of the incarcerations in Alaska are Trust beneficiaries. When they are released, they face all of the same obstacles that a re-entrant who is not a Trust beneficiary faces, but with the added difficulty of additional disorders which makes the obstacles even greater to overcome. He added that the Trust provides quite a bit of funding for re-entry services because it is such a priority for the Trust and the beneficiaries. He thanked Bobby again, and closed this Mission Moment by sharing with Bobby the respect he has for him. Bobby is one of his superheroes.

CHAIR COOKE thanked them all again for the presentation and shared his thoughts on the impact of the Mission Moments in providing real-life examples of the things that the Trust does. He stated that the next item on the agenda is the staff report.

STAFF REPORT

MR. ABBOTT expressed his appreciation for the presentation and stated that it is impactful on the trustees and the staff, as well. He began with the strong investment returns that the Trust continues to receive as a result of the Permanent Fund and the Department of Revenue management of the investments. The complete second-quarter results have been received, and the earnings on the investment continue to improve. He moved to the progress being made on preparation for the refinancing of the commercial real estate assets. He stated that the services of a financial adviser to help build recommendations for refinancing options has been secured. He called attention to the coverage of a proposed mineral lease on land off of Chena Hot Springs Road in Fairbanks. The potential lessee withdrew their application, and that lease will not be moving forward. He stated that there were a number of concerns expressed by neighbors of the Trust parcel. That issue should be moot for the time being. He noted that the RFP issued to identify someone to harvest Trust timber and construct a road to access that timber near Shelter Cove closed with two bids. The evaluation process has begun with a hope to make an award within a couple of weeks. He explained that it is a complicated bid to evaluate because it is not just a simple timber harvest. It involves road construction work that is part of the same contract. He stated that the US Forest Service land exchange has been delayed. As a result of US Forest Service problems, the appraisals have not been available for review, which would ultimately determine the amount of acreage that is exchanged. He added that the trustees will be kept updated on that. He moved to the Annual Report, which is at the printer and hard copies should be seen shortly. They will be distributed primarily electronically with printed copies available to the trustees and the Alaska Legislature. Also being produced is a comprehensive list of the grants that were issued last year. He then commented on the beginnings of the work with the 32nd Alaska Legislature and then talked about working with different legislators. He called attention to the letter sent to Senate Finance that described the concerns with the proposed use of Trust assets in the Governor's budget. That letter reflected the guidance received from the Department of Law and other concerns discussed with the trustees in the past. He continued to be confident that the arguments presented will help the Legislature understand why the proposed use of Trust funds is not a great idea, and that there are better options available to the State, both in terms of how they work with the Trust going forward and how to fund programs that we are all interested in seeing succeed.

CHAIR COOKE stated that the next item is a requested motion regarding reallocation of funds from the FY21 budget.

MOTION: A motion that the Board approve reallocating \$300,000 in FY21 Authority Grant Funds to the FY21 Partnership budget line -- the Authority Grant Funds being re-allocated are outlined in the memorandum -- was made by TRUSTEE BOERNER; seconded by TRUSTEE GWALTHNEY-JONES.

MR. ABBOTT stated that this is about FY21, the current fiscal year that we are a little more than six months into. That budget was approved 18 months ago, and there were a couple of elements in the budget that were not expected to be needed for the purposes budgeted. He explained that there were two options: First would be to let those funds simply lapse, not spend them this year and let them roll back into the budget in a future year; or take the course recommended where an alternate can be identified and put the money to work more quickly. He asked Steve Williams to explain where the money is coming from and where it would go.

MR. WILLIAMS welcomed Trustee Fisher and explained that the budget is broken into a couple of different major sections. He talked about the nonfocus area allocation section and explained that outlined in the budget is the reallocation of funds related to a planned rural outreach trip approved by trustees, as well as some funds that staff has identified in the Early Childhood and Prevention section of the budget that will not be fully deployed for the reasons outlined in the memo. He stated that the reallocated funds could be deployed in the current fiscal year to meet beneficiary needs. He gave some background on the rural outreach trip, and then went through the budget.

CHAIR COOKE clarified that the plan is not to do the rural outreach trip this year because COVID restrictions basically make that impossible to do all that travel in Rural Alaska. Then, similarly, the \$100,000 from Beneficiary Engagement Employment will be left over unless deployed elsewhere.

A short discussion clarifying lapsing funds ensued.

TRUSTEE STURGEON called the question.

CHAIR COOKE called the vote.

After the roll-call vote, the MOTION WAS APPROVED. (Trustee Boerner, yes; Trustee Boyles, yes; Trustee Gwalthney-Jones, yes; Trustee Halterman, yes; Trustee Fisher, yes; Trustee Sturgeon, yes; Trustee Cooke, yes.)

MR. ABBOTT requested that we hear from the advisory boards at 11:00 o'clock.

CHAIR COOKE called a break.

(Break.)

CHAIR COOKE called the roll and resumed the session. He moved to the Statutory Advisor Update and recognized Kristin Vandagriff.

STATUTORY ADVISOR UPDATE

MS. VANDAGRIFF stated that she is with the Alaska Governor's Council on Disabilities and Special Education; Lisa Morley is the executive director for the Alaska Commission on Aging; and Bev Schoonover is the executive director for the Alaska Mental Health Board and Advisory Board on Alcoholism and Drug Abuse. She added that Director Duane Mayes from the Division of Vocational Rehabilitation was unable to attend. She began the presentation and introduced the Alaska Work Matters Employment Task Force efforts. She stated that after the Alaska Work Matters Employment Task Force PowerPoint slides, each beneficiary board will talk about legislative priorities moving into the session, and then each beneficiary board will talk about some general board updates. She delved into the Alaska Work Matters Task Force efforts, gave some of the employment policy context, the idea and background for this task force. She talked about the purpose of this task force, looking at review and analysis, thinking about existing policies, practices, procedures, the barriers, and the workforce utilization data, with the goal of pulling all of these together with a report within 12 months to denote the recommendations for these policies, practices and procedures. She continued through her presentation, explaining as she went along. A lot of information was provided in the conversations about telework and its importance for keeping people employed that have disabilities. She talked about cross-agency collaboration and stated that the Business Employment Services Team is the collaborative employer engagement. It has folks from Health and Social Services, as well as Labor, working together with the private sector to help know the sorts of resources available through the State of Alaska to help recruit, hire and maintain Alaskans with disabilities in the workforce. She shared the link to the Empowerment for Employment Guide that is the one-stop-shop guide for beneficiaries, especially, to answer the unique circumstances due to COVID.

TRUSTEE BOERNER stated that they have a Tribal Vocational Rehabilitation representative and five private citizens. She found with groups that it is important to have a tribal representative or even a technical person. There is a slight difference between the technical representative and the community representative. There is the Alaska Tribal Health System overall, and they have representatives that have the understanding of the system because of the way that it operates within Alaska, if that it is a true system of continuum of care. Having that perspective being shared would be beneficial so that you get the community representative experience and also experience from the technical side, as well as the Tribal Health System side.

MS. VANDAGRIFF thanked Trustee Boerner and appreciated the information. She noted that they are still in the process of exploring and bringing all the pieces together.

CHAIR COOKE asked if this task force was funded.

MS. VANDAGRIFF replied that the Council received funding to provide technical assistance through the Beneficiary Employment and Engagement Initiative.

CHAIR COOKE recognized Bev Schoonover.

MS. SCHOONOVER stated that the boards have put employment supports for Alaskans with Mental Health and Substance Use Disorders as one of the top priorities. The Empowerment Through Employment Conference was a catalyst for this to happen. She continued that this was

the first time that mental health providers, who do employment supports, were brought together with DVR and other employment providers. She thanked the trustees for the support on that.

MS. MORLEY stated that she is the new executive director for the Alaska Commission on Aging and wanted to let everyone know that there is a Senior Employment Initiative called the MASST program that is funded through the Older Americans Act. It is a fairly small program that is managed through the Department of Labor in the State of Alaska. This Senior Employment Initiative is trying to provide more support and information for seniors who want to go back to work. She continued that the Commission on Aging will be presenting, to provide some education ahead of time to both the new and some of the returning legislators in conjunction with AARP, AgeNet, the Commission on Aging, the Alzheimer's Resource of Alaska and the Alzheimer's Association, which is a national association. She talked about maintaining the funding for the senior grant programs which are the foundation for all of the senior meals and the transportation program. These are proven to really help delay illness and entry into a nursing home, and the need for additional and more expensive long-term care. In addition, the value of family caregiver services will also be promoted. She added that they want to provide some education about those benefits and also talked about the Joint Workforce Initiative.

MS. VANDAGRIFF talked about the four Governor's Council legislative priorities that were voted on and isolated, and are available online. First was the Special Education Services Agency reauthorization which would sunset this year in June if not reauthorized. She summarized that SESA provides special education support and services to staff of all 54 Alaskan school districts, really focusing on students with low-incidence disabilities. The other three focus on preserving services, which she explained.

MS. SCHOONOVER stated that they have a new executive committee, and they do elections every year. The new chairs are Sharon Clark with the Alaska Mental Health Board and Renee Schofield with the Advisory Board on Alcoholism and Drug Abuse. She thanked Phillip Licht and Charlene Tautfest for their services as board chairs last year. She continued that there are two new board members, Bobby Dorton and Tonie Protzman, who is the program administrator at Cornerstone Recovery in Anchorage. She added that there is one slot open for an attorney seat on the Mental Health Board; one practicing law with special interest or experience in mental health issues.

MS. MORLEY stated that they have been working very hard on vaccine distribution and advocated to add individuals 65 and over for the next round of vaccine distributions. They held a vaccine informational town hall and have been trying to do their best to work with the Department of Health and Social Services. She thanked Gordon and the rest of the commissioners for pitching in and helping on this effort. She also gave a shout-out to the Trust for funding the Call for Action, which is a huge benefit to Alaska.

MS. VANDAGRIFF stated that the Governor's Council on Disabilities and Special Education is fully staffed, and they are finishing up the State Plan efforts. The plan is at the stage where there is a draft plan with goals and objectives. It has been out for the 45-day public comment. She continued that it is especially important to do something in either goal or objective form regarding self-advocacy. Advocacy is for people with developmental disabilities, and this

elevates this to the highest level of a goal. It is critically important in moving forward with this vision and getting it to the implementation phase. She thanked the Trust for supporting funding for the research analyst who has been able to be very involved as far as the COVID response and bringing the Trust beneficiary perspective to a lot of the meetings. She thanked all for the opportunity to update everyone on the board's progress.

CHAIR COOKE thanked them all for their presentations and asked the trustees for any questions.

TRUSTEE BOERNER thanked the advisory boards for their updates which are always informative and professionally done. She welcomed Lisa Morley and looked forward to working with her. She commented on a few of the points that were brought forward.

TRUSTEE BOYLES enjoyed the presentation and thanked God for all of the volunteers that work on the advisory boards. She commented on some parts of the presentations and welcomed Lisa Morley. She thanked all for their time.

TRUSTEE GWALTHNEY-JONES stated that the presentation was amazing and very enlightening. She appreciated the outline of legislative priorities and talked about her concerns about COVID and the impact to all ages. She thanked all for the great presentation.

TRUSTEE HALTERMAN stated that it would be helpful to get some insight on how to connect with these boards, commissions, and the meetings they are having. She requested a summary of when they meet and where to go to find the information about the meetings. She stated appreciation for the advisory updates, which are critical to the work the Trust does. She thanked all the presenters.

CHAIR COOKE noted that there was some information about Statutory Advisor meetings in the packets that are upcoming. He recognized Trustee Fisher.

TRUSTEE FISHER stated that as a new trustee it was very enlightening to understand about each of the specific areas. Each one of them are so important for their particular beneficiaries and he looked forward to the opportunity to seeing how the Trust can work in a collaborative way to support each of the programs and initiatives.

TRUSTEE STURGEON also thanked the Advisory Boards for their presentations which are especially important to him. He spent his career in resource development, and being on the Trust Board is a steep learning curve. He stated that every time there are presentations he is reminded of how much work he has to do to really understand all these issues. He thanked them very much.

CHAIR COOKE added his thanks for the presentations and stated that there are many issues that concern the beneficiaries. He stated his delight in their presence at the meetings which help focus on the specific beneficiary populations or communities. The input is extremely valuable. He asked for a response to Trustee Halterman's concern about getting notice of the schedules for Statutory Advisory meetings, and her request about the links through the website for this information.

MR. ABBOTT replied that their recent practice was to put the next meeting of each of the boards in the packets. He stated that they will include that to the extent that future meetings are scheduled.

MR. GLASER, the chair of the Alaska Commission on Aging, stated that he would be delighted to provide links or minutes to anyone who requests them. He also asked the trustees to attend. He stated that the relationship with the Trust is valued, and we want it to be as open as possible.

MR. WILLIAMS stated that Trustee Gwalthney-Jones expressed an interest in the topic area. He continued that they are actively involved in partnering with the Suicide Prevention Council. He added that Eric Boyer is the program officer that works closely with the Suicide Prevention Council.

CHAIR COOKE asked for any other questions. There being none, he moved to the lunch break.

(Break.)

CHAIR COOKE resumed the meeting and called the roll. With all trustees were present, he reminded them that in the packet on Page 4 was a schedule of all of the future board meetings and committee meetings for the Trust. He asked for those dates to be put on their calendars. He stated that every year or so there is an ethics training with the help of the Department of Law. This is particularly important because of the turnover in trustee membership. All trustees need to be kept updated regarding duties and responsibilities as board members of a public entity, and particularly to rules that apply to open meetings. He introduced Maria Bahr from the Department of Law, who will go through the trustee ethics training.

TRUSTEE ETHICS TRAINING

MS. BAHR introduced herself as an Assistant Attorney General at the Department of Law and added that she was also ethics counsel not only for the Department of Law, but also for the entire executive branch of State Government. She stated that, in that capacity, she did a lot of trainings for various departments, boards, and commissions dealing with the Ethics Act. She began with a general overview and stated that the Ethics Act was enacted in 1986 and was the Legislature's way of telling those in the executive branch what they could and could not do. She summarized the parts of the Ethics Acts that are most important to the trustees and also for any staff members that may be listening. She added that a lot of this program is geared towards the trustees, people who are not State employees but are serving on boards and commissions. She pointed out that the Open Meetings Act concerns would not be covered in this presentation and that Stuart Goering was the expert on Open Meetings. She continued that the Act applies to all public officers -- anyone who works for the State in the executive branch and every member of a board or commission as Trustees. She added that even though they are not public employees that they are public officers. The Act talks about a financial interest which is held by you or an immediate family member, which includes an ownership in a business or any source of income from which financial benefit is expected to be received. Then, it talks about a "personal interest." That is an interest held by you or an immediate family member. She continued through her presentation, explaining and identifying pertinent provisions of the Act. She stated that the scope of the Ethics Act is to prohibit, basically, substantial and material conflicts of interest. It is not written in

legalese and is pretty much common sense. It states that a public officer and their immediate family members cannot improperly benefit either personally or financially from the position as a public officer. She moved on through her presentation, clarifying as she continued; with a focus on the no-can-dos and then the financial penalties for violating the Ethics Act.

A brief question-and-answer period ensued.

CHAIR COOKE thanked Ms. Bahr and asked if there was anything to add from the staff standpoint.

MR. ABBOTT thanked Ms. Bahr and stated that it is helpful to make sure everyone is aware of this. He added that another area for trustee training at some point in the future are fiduciary duties.

CHAIR COOKE asked if anyone signed up for public comment.

MS. SMITH-COOLIDGE replied that no one signed up at this time.

PUBLIC COMMENT

CHAIR COOKE stated that there are two public comment written communications in the packet and assumed everyone had seen them. He continued that time needs to be available for public comments if someone chooses to appear at 2:15. He added that would be the last order of business. He called a break until 2:15.

(Break.)

CHAIR COOKE reconvened the Board meeting and called roll. He stated that he was unsure if Trustee Fisher was present, but there was a quorum. He continued that the two written items of public comment that were submitted will become part of the record. He asked if anyone signed up for public comment. There being no one, he asked two more times. He stated that this was the time set aside for public comment before the Board of Trustees of the Mental Health Trust Authority. He also asked for anyone online wishing to make public comment, which is the only opportunity that will exist at this meeting. He again asked for anyone wishing to offer public comment to the Board. Hearing none, he closed the public comment portion of the agenda and recessed the meeting until tomorrow at 8:30 a.m.

(Mental Health Trust Authority Full Board meeting recessed at 2:18 p.m.)

ALASKA MENTAL HEALTH TRUST AUTHORITY

FULL BOARD OF TRUSTEES MEETING

January 28, 2021

8:30 a.m.

WebEx Videoconference/Teleconference

Originating at:

**3745 Community Park Loop, Suite 120
Anchorage, Alaska**

Trustees Present:

Chris Cooke, Chair

John Sturgeon

Brent Fisher

Verne' Boerner

Annette Gwalthney-Jones

Anita Halterman

Rhonda Boyles

Trust Staff Present:

Mike Abbott

Steve Williams

Carol Howarth

Miri Smith-Coolidge

Kelda Barstad

Luke Lind

Michael Baldwin

Carrie Predeger

Katie Baldwin-Johnson

Jimael Johnson

Valette Keller

Eric Boyer

Autumn Vea

Allison Biastock

Kat Roch

Travis Welch

Jusdie Doucet

Karsten Eden

Trust Land Office:

Wyn Menefee

Sarah Morrison

Becky Carpenter

Also participating:

Jierum Duarte; Ian Clark; Alex Schudel; Karen Schudel; Katie Vachris; Ann Ringstad; Hollie Chalup; Chandler Long; Andrew Grosz; Sheila Harris; Ric Nelson; Laura Russell; Al Applegate;

Ann Ringstad; Beverly Schoonover; Brenda Moor; Charlene Tautfest; Jerry Jenkins; Josephine Stern; Clinton Laskey; Heather Carpenter; Adam Crum; Stuart Goering; Al Wall; Mo Miller.

PROCEEDINGS

CALL TO ORDER

CHAIR COOKE called the meeting of the board of trustees of the Alaska Mental Health Trust Authority back into session from the recess taken yesterday. He called the roll, and all of the trustees were present. He then asked for any announcements or any other matters to take up before getting into the Mission Moment. He proceeded to the MicroEnterprise Grant presentation from Larissa Cummings.

MISSION MOMENT

MR. ABBOTT stated that it was a pleasure to introduce some of the folks that have been working within the MicroEnterprise Grant Program. There were some questions brought up, and we took this opportunity to allow some of the program participants to share their experiences in this program. He introduced Jimael Johnson, one of the program officers who works with this program and with the Beneficiary Engagement and Employment focus area.

MS. JOHNSON stated that she has been with the Trust for about three-and-a-half years, and working on the Beneficiary Employment and Engagement focus area has been one of the highlights of her work, with the MicroEnterprise project being one of the really bright spots among that. She was pleased to be able to introduce the partners in this work and some of the beneficiaries' partners who have been able to take advantage of this program in a way that helps to improve outcomes in their lives and communities. She began with a brief background on the program and stated that the MicroEnterprise work has been one of the core projects of the Beneficiary Employment and Engagement work that the Trust has done over the past 15 years. She continued that the program benefits beneficiaries statewide and has been developed in collaboration over that time with many partners. One of the primary partners is the Governor's Council, which has led and developed it to where it is today. She continued that Larissa Cummings has worked at the Center for Human Development at the University of Alaska Anchorage for 13 years, and has been involved in a variety of employment-related projects, in addition to MicroEnterprise. She has been working as the fund administrator and project director of the MicroEnterprise Grant for the last eight years. Her goal is to see every applicant turn into a successful application. She added that she will present the program and then introduce the beneficiary partners.

MS. CUMMINGS stated that the UAA Center for Human Development and the Trust Authority collaboration on this project has had a very positive impact on beneficiaries' lives. She shared the positive difference this program has made on the lives of beneficiaries throughout the state of Alaska. She began with a brief overview of the grant, from its purpose to some of the terminology, definitions, and highlights; and then talked about who makes the funding decisions and the supports and resources available for both applicants and recipients. She shared some examples and stories of successful beneficiary recipients. She added that the highlight is that some guests that are recipients of the grant funds will give firsthand explanations of the positive impact these funds had in not only starting their businesses, but also on their day-to-day lives. She stated that the purpose of this grant is to increase access to self-employment opportunities

for the Trust beneficiaries. The grant funds are provided by the Alaska Mental Health Trust Authority for the purpose of starting, expanding or acquiring an existing business. A MicroEnterprise is defined as a business requiring startup costs of less than \$35,000, and up to a maximum of five employees. She continued that her goal is to make sure that the applicants are successful, and also to try to make things easy for the review committee members. She added that the process is quite involved, but once the applicant makes it to the funding stage, support is provided as needed. She moved on to the three guests that are MicroEnterprise recipients: Jierum Duarte with ILI Custom Leatherworks; Ian Clark with Ian's Game Paradise; and Alex Schudel with Art by Alex. She introduced Jierum Duarte, who was funded about a year and a half ago. He applied a few different times for funds, which has made a huge difference in his business. The funds paid for a leather professional sewing machine and he went from hand-stitching some of his leather work to being able to do it by machine. She asked Mr. Duarte how he got the idea for his business and how he got started, and then how the MicroEnterprise funds helped.

MR. DUARTE replied that he originally started in prison. He was incarcerated for 10 years and released in 2017. He stated that it started as a hobby to pass his time and to make a bit of money for food and hygiene. When released, he started going back to Anchorage Behavioral and Mental Health to their RISE program. He never thought it would be a business idea and did not plan on doing leather in order to financially benefit himself. It was a prison thing to just survive, and he did not know there were opportunities for people like himself. He has a mental illness, so he has the stigma of having a mental illness, and the stigma of being a felon. It was a lot harder being a felon to even be given another chance because of that stigma. He continued that the one person that believed in this vision was Travis with the RISE program, who told him he could become a business owner. He was the only person to give him an option and took the time. Mr. Duarte was also helped by two very important people, Stephanie Rhoades, a retired mental health judge, and her husband, Russell Webb. They were his mentors and put him in a position to be self-sufficient. He learned to articulate a lot better and how to deal with a lot that he did not know how to deal with. He stated that Larissa is amazing, and he would not be anywhere without her and the program because none of them knew the route to take or the difference it would make. He continued that he has been out of prison for three years and seven months and has not had one violation, no relapses, which has contributed to his life being successful. He has his own housing, equipment, his own place to work on his own workstation. He added that these things would not have been possible without programs like this and Larissa.

MS. CUMMINGS introduced Ian Clark. She stated that one of the things that was recently added to the project was trying to provide some of the funding for people who need additional support. People who already requested the maximum amount of money and then something happens, and they need a little extra help. She asked Ian Clark for a brief overview of how he got started, and then to talk about the pandemic, what happened, and how the funds were able to help.

MR. CLARK stated that before the pandemic when he was first going for the grant, he had to deal with theft, a loss of about \$20,000 of his equipment, and the mall he was in flooded. He talked about how the pandemic affected him and his business because the bills continued even though he had to shut down for a month. There was no help or break. Then the Northway Mall kicked everyone out. He continued that the cost of the move, new equipment, the initial rent, back rent, security deposit, utilities deposit at the 5th Avenue Mall, which was a monumental task

and would not have been possible without the help he was able to get.

MS. CUMMINGS introduced Alex Schudel.

MS. SCHUDEL stated that Alex decided that she would talk. Six years ago, Alex had a pacemaker put in and had to stay at home for a little while. He started drawing this airplane he had recently gone for a ride in with his uncle. His drawing was amazing. She continued that she and her husband were amazed at how cool it was through Alex's eyes. She made a thank-you note out of it. She added that relatives and friends started looking at them and said that Alex had something good going. They realized that he was interested in drawing anything that moves, goes, has a motor, whether it is in the air or on the water. She stated that they got wind of this grant and decided to start putting some of his art on T-shirts; and people got very interested. There are other things going on now with prints, and he does custom drawings. A booth was put together at a few different places, and the success is that Alex is being much more social and enjoying when other people enjoy his art. She thought that his goal in life was to maybe sit in or ride in all of these things. He has been very fortunate to ride in a Zamboni, a Sno-Cat, an Elgin street sweeper. He has a connection, and the drawings go on. His website and Facebook pages have been amazing in sharing his art. Without the grant, this probably would not have been as successful, if at all.

MS. CUMMINS asked Alex how he decided what he would draw.

MR. SCHUDEL replied vehicles.

MS. CUMMINS stated to Alex that his art is enjoyed by many and she hears it from people on how much they enjoy his art. She told him to keep up the good work. She asked for questions.

CHAIR COOKE asked the woman with Alex to identify herself.

MS. SCHUDEL replied that she is Karen, Alex's mom.

CHAIR COOKE thanked her and stated that wheels seem to be a theme with Alex. He asked Trustee Boerner for any questions.

TRUSTEE BOERNER stated that she was extremely moved by the presentation and appreciated all for coming here and sharing their experiences to address and be ambassadors to help the general public get a better understanding, and to break the stigmas and stereotypes, and to champion issues during the pandemic, as well. She thanked them for their presentations. She asked Ms. Cummins about how many applicants are received and how many awards were given to support the MicroEnterprises.

MS. CUMMINS replied that they get about 16 to 24 applications yearly, and most of them are successful. She stated that maybe one application a year may actually be denied. She continued that the committee is really good about working with the applicants, and may suggest things that may make the businesses stronger or better. They also share their expertise with the applicants during the interviews.

TRUSTEE BOERNER thanked her and stated that it was very interesting.

CHAIR COOKE recognized Trustee Boyles.

TRUSTEE BOYLES stated that Mission Moments are very emotional and are why trustees volunteer and serve as their representatives on the Trust. She thanked all the presenters for taking the time and coming because when someone is self-employed dollars are billable. She told Alex that she loved his work and asked for information on how to find him.

MR. SCHUDEL replied www.aschudelart.com.

TRUSTEE BOYLES thanked Alex and asked Ms. Cummins if the meeting dates of the trustee meetings impact their schedule for grant startups by July 17.

MS. CUMMINS replied that it is difficult to start on July 1st when the funding is not quite in place. All of the paperwork and the hoops that both the Trust and the University have to jump through create quite a delay. She hoped that if the meeting dates were moved earlier for those agreements, that the paperwork could get to the University by June, and then everything could be up and running by July 1st. She stated that the MicroEnterprise Grants cannot open earlier because often there is trouble actually getting the money to actually disburse to the recipients that early.

CHAIR COOKE noted concern and suggested talking with Mr. Abbott and staff about the timing issues. He asked Trustee Gwalthney-Jones for any comments.

TRUSTEE GWALTHNEY-JONES commended the presenters on finding something they really enjoy doing and creating a future for themselves with it. She stated that it was really spectacular. She went to the website and noticed there were some limits for what can be done for total capital, and fewer than five employees. She asked if there was an average that is put out, or is it always at that max.

MS. CUMMINS replied that basically they do not fund people that are trying to start huge businesses. She noted that sometimes people are limited by the amount of match dollars that they have because there is a dollar-for-dollar requirement.

MS. JOHNSON clarified that the maximum amount for the MicroEnterprise Grants from the Trust is \$10,000 per person. The \$35,000 threshold is part of the definition of what a MicroEnterprise would actually be.

CHAIR COOKE recognized Trustee Fisher.

TRUSTEE FISHER stated that this was fascinating and that he has had a particular interest in MicroEnterprise, but it was always in the context of third-world countries. To see it applied to Trust beneficiaries is just fascinating. He continued that he is a big believer in creating opportunities for self-reliance, and this is fantastic. He asked if there was a particular type of beneficiary that is more likely to be successful in one MicroEnterprise than another.

MS. CUMMINS replied that sometimes the ones she thinks will not be successful go on to be wildly successful. She stated that probably 40 to 50 percent are still in business.

TRUSTEE FISHER stated that he could tell just from the presentations that it was not all about making money. There is a lot of value and strength that comes from being able to be self-reliant and using their talents and skills in a way that not only benefits the person, but also other people.

CHAIR COOKE recognized Trustee Halterman.

TRUSTEE HALTERMAN thanked the presenters and stated that it was nice to hear from the beneficiaries that receive funding programs. She told Alex that she checked out his website and it was great. She wished all great success with their good work.

CHAIR COOKE recognized Trustee Sturgeon.

TRUSTEE STURGEON also thanked the presenters and stated that these are very special moments for the trustees and they really learn a lot. He asked Jerum what his number-one selling product was.

MS. CUMMINS replied that he sells a lot of checkbooks and a lot of belts, and he is actually displaying his work at Denali Graphics.

MR. DUARTE stated that he had been selling a lot of dog collars. He talked about how his sewing machine cut down on the time of producing his dog collars in half. He also paid for his own Made in Alaska stamp that was custom made. He used the money that he made from selling his leather stuff to buy it. He added that the machines from the grant made it more efficient.

CHAIR COOKE thanked Ms. Cummins for bringing these artists and for their presentations. He wished them all continued success. He asked Mr. Abbott or Mr. Williams to address the concern about the timing of the funding.

MR. WILLIAMS stated that the big thing to remind all is that grant funds work in two ways. The University, the Center for Human Development, receives the Trust funds for the MicroEnterprise Grant Program. Because they are a State entity, they are Mental Health Trust Authority Authorized Receipts, MHTAAR funds, that are approved by the trustees and then submitted to the Governor and the Legislature, and they go through the legislative budget process. Then they are approved; the Governor signs it; and July 1 is effectively when the grant periods start. He added, that was the timing of how it all works.

CHAIR COOKE stated that the Trust had to act consistent with the State's budget cycle and the necessary legislative approval. He wanted to make sure that the board was not doing something that was causing any delay. He continued that hopefully the bureaucratic issues could be resolved. He restated appreciation for the presentation. He stated that he understood that Commissioner Crum was on-line and would talk about and update the areas that the Department is responsible for that concern the Trust and its beneficiaries.

DEPARTMENT UPDATE

COMMISSIONER CRUM stated that he will talk about some of the items done over the last year as a department. He continued that Deputy Commissioner Al Wall, Deputy Commissioner Clinton Laskey, and his Health Policy Advisor Heather Carpenter are also on-line. He thanked

the trustees for having them and stated that, as a Trust, they perform very important functions in taking care of a very special population in Alaska. This job has been made more difficult because of the COVID response and having to do things differently. He thanked them for trying to find ways to integrate serving the individuals and stated appreciation for the last presentation. He stated that, throughout 2020, the Department of Health and Social Services had to really change how they did business, and had to work to implement many different items. This included federal flexibilities, and doing a great deal of suspension of regulations and orders. He talked about how serving certain populations had to change in order to protect vulnerable populations. Throughout this, a great deal of investment of the CARES funds that were received went towards the behavioral health side. The Division of Behavioral Health worked very hard for crisis call lines to be set up to actually identify providers that had to deal with COVID patients in clinics and in hospitals. He added that in a state like Alaska, with its geography, using technology to connect was a benefit. From a divisional standpoint, more providers, more patients can be reached using technology, and it is something to look forward to in the long-term future of how Health and Social Services will operate in Alaska. He moved on to the large item announced shortly before Christmas by Governor Dunleavy, an Executive Order to restructure the Department of Health and Social Services into two departments. He stated that the plan is to take the Office of Children's Services, Juvenile Justice, the Alaska Psychiatric Institute, and Alaska Pioneer Homes and move them into a department called the Department of Family and Community Services. The remaining divisions, the Division of Behavioral Health, Division of Public Assistance, Senior and Disability Services, Healthcare Services, Division of Public Health will stay in the Department of Health. He added that he will remain as commissioner with the latter. The goal is to continue the great work that has been occurring over the last number of years. He stated that this has been read across the floor as a message to the Senate, and there is an Executive Order. This is specific power that the Alaska Constitution gives to the Governor and the executive branch to restructure the executive branch for maximum efficiency. He explained the process in more detail. He added that the goal of the effective date is July 1st. He stated that there will be a new commissioner with the current Deputy Commissioner Laskey moving over, to make sure the leadership continuity continues across the board. He asked Heather Carpenter to talk about some particular items of interest in the Executive Order as it relates to the Mental Health Trust.

MS. CARPENTER briefed the trustees on a couple of things of interest. In the 106 pages of the EO the Trust statutes are moving but nothing will be done with them. They are being aligned under the Department of Revenue. She stated that they cannot do any substantial changes in an EO. Another interest is how the 47.30 is being split, which is the main mental health chapter, and all the statutes point to that. The Commissioner described it as how the baton is passed when a constituent is getting services. The specific involuntary commitment statutes will point to that new department, and they will be responsible for that. She continued that the Department of Family and Community Services are being added as another advisor to the Trust, recognizing that the Trust will want to work with both departments pretty closely. She shared the link with staff the other day to the EO, and she can put that in the chat box as well if there is interest in reading the full EO.

COMMISSIONER CRUM moved to the FY22 budget overview, and one of the key items is for Medicaid, which is essentially flat-funded in FY22. He stated that, with the public health emergency at the federal level that allows Centers for Medicare and Medicaid Services that implemented an enhanced FMAP, or Federal Match for the Medicaid Program, of 6.2 percent.

This goes on top of whatever the typical breakdown was of the match across the different programs and different eligibility categories. This was a great deal of value to the State in that it brought in tens of millions of dollars each quarter into the Medicaid program, State and General Fund. He added that the money saved from the General Fund of \$35 million in FY21 will be carried forward. Notice had been received from the acting Health and Human Services secretary that the Biden Administration intends to keep the federal public health emergency in place until the end of the federal fiscal year, September 3rd. The public health emergency will continue to extend for 90-day increments until that timeframe. She asked Deputy Commissioner Al Wall for any other updates he would like to talk about for the Medicaid budget.

DEPUTY COMMISSIONER WALL stated appreciation for the face time with the trustees and echoed what the Commissioner said about the FMAP funding. There are many individual things moving in Medicaid that are a heavy lift this year. The first one is that Senior and Disability Services has four of its five major waivers up for renewal this year, which is a significant amount of administrative work. He continued that the biggest on that impacts the conversation of the 1115 and its implementation. He talked about the two parts, phase 1 and phase 2, and added that the 1115 has a number of new services that were not billable under the old fee for services structure, but now are. There is also a great deal of uptake among providers in the 1115 billing for mental health, as well as interest in the Crisis Now model. There are some providers that have applied to become Crisis Now stabilization centers. He added that there are a few areas are continuing on, and we are excited about what the 1115 has done and the response of the providers.

COMMISSIONER CRUM talked about API, and stated that an increase of \$6 million was asked for. He asked Deputy Commissioner Laskey to give an update on API.

DEPUTY COMMISSIONER LASKEY stated that API had made some amazing headway this past year with a maximum bed capacity of 60, which is 50 civil and 10 forensic. He continued that because of COVID-19, the process slowed down, which hindered expanding bed capacity. Also, there was a need to be able to social-distance individuals in the hospital that were double-capacity rooms, and to be able to quarantine those individuals. He added that they are now in the process of reimagining inside the hospital, and they have a goal of having the Chilkat Unit opened by April 1. The senior leadership positions are filled, as well as all of the nursing positions. He stated that the Chilkat Unit is starting training for that unit, so it will be ready for admissions as soon as the unit is opened. He then talked about the chief of psychiatry and the chief forensic psychologist leaving and that the interviewing process for both of those positions was ongoing.

COMMISSIONER CRUM moved to the implementation of the Morse plan and asked Ms. Carpenter to explain that.

MS CARPENTER stated that the Disability Law Center case was settled in September, and that settlement was signed on September 3, 2020. We appreciated and were grateful for the Trust's continued partnership in funding three big items in that settlement. The first one was the current DES/DET coordinator position; second was an Adult Protective Services worker that was specifically focusing on discharges from hospitals and correctional facilities; then there was the funding to help do the re-evaluations that Judge Morse ordered.

DEPUTY COMMISSIONER LASKEY gave an update on the DET/DES position, and stated that Ashley Christopherson was brought into that role. She is the point of contact for all Title 47 orders, and provides updates to the courts on a daily basis. She has also implemented a new documentation standard used with the different partners. He then moved to an update on the re-evaluation. He stated that the Department of Health and Social Services put out an RFP to provide re-evaluations for individuals that were unable to get into API immediately. True North was the provider that signed up, and they have been a great partner.

DEPUTY COMMISSIONER WALL stated that the third leg to that was an Adult Protective Services employee that the Trust assisted with, as well. That position has been hired, and we are at the tail end of the training that goes with that position.

CHAIR COOKE thanked the Commissioner and his team for the update and asked Trustee Boerner for any questions.

TRUSTEE BOERNER also thanked them all and especially to Ms. Carpenter for specifically addressing the issue with regard to API.

TRUSTEE BOYLES thanked all and asked that the Commissioner keep in mind the history of the Trust, the legal parameters of the establishment of the Trust, and where the Trust stands relative to budgeting.

COMMISSIONER CRUM made sure the concerns that the Trust had were brought to those that needed to hear those concerns. He stated that if the trustees had any questions, that the Trust staff can get a hold of him, and he and his staff would be glad to respond in writing to address any concerns.

TRUSTEE GWALTHNEY-JONES thanked all for the presentation and for the clarification of what is coming down the pike with the transition from the Divisions.

TRUSTEE HALTERMAN thanked the presenters for the statutory updates and asked what the Department was doing to engage some of the stakeholders. She stated that she had seen some public outcry with regard to the separation of the departments and some concerns about a lack of stakeholder involvement.

COMMISSIONER CRUM replied that two conversations came out simultaneously. One was the restructuring or the splitting of the department, and the other, for semantic purposes, referred to as the bifurcation of OCS. He added that this would be worked on over the next year to find some solution to that, or some other pathways forward.

TRUSTEE FISHER stated thank you and that he had no questions.

TRUSTEE STURGEON thanked Commissioner Crum and his staff for the presentation and for all their work doing this.

COMMISSIONER CRUM stated that Trustee Sturgeon was an unsung hero and pointed out how he helped leverage his contacts to get the personal protective equipment from the plane. He was

instrumental in getting the necessary, needed medical supplies that the State of Alaska needed in a time of crisis.

CHAIR COOKE stated that the Trust provided funds to help break the backlog of people waiting for judicial or court-ordered evaluations at API. He asked what was the change in numbers to get those evaluations done.

MS. CARPENTER stated that this was about the civil commitment rate and asked Mr. Laskey to continue.

DEPUTY COMMISSIONER LASKEY stated that the civil waitlist numbers were in the low 20s last year. As of late, those numbers have gone down drastically, and the average is about five or six individuals on the civil waitlist. He explained this more fully, and added that the beauty of having this position is the ability to get these evaluations done.

MR. ABBOTT stated that staff continue to appreciate the strong working relationship with the Department leadership. He noted that the information from the State is consistent with what was heard from the Commissioner in that the decisions about funding sources for API and other programs were made at OMB and not at the Department level.

CHAIR COOKE asked for anything further.

TRUSTEE BOERNER apologized to Deputy Commissioner Laskey for not expressing her gratitude and appreciation to him earlier.

CHAIR COOKE called a break.

(Break.)

CHAIR COOKE called the meeting back to order and called the roll. All trustees were present. He moved to the Finance Committee report update.

FINANCE COMMITTEE REPORT

MR. ABBOTT stated that what was proposed on the agenda at this point was to go through three items that were recommended for trustee support at the last Finance Committee meeting, and then a fourth item that was tabled at the Finance Committee meeting but may still be of interest for consideration at this time.

CHAIR COOKE stated that there were three requested motions, and we would take them individually. He asked for a motion.

MOTION: A motion that the Board of Trustees authorizes the expenditure of \$295,000 from the Central Facility Fund for the second-year renewal of the RFR20-2013M Real Estate Advisor contract was made by TRUSTEE HALTERMAN; seconded by TRUSTEE STURGEON.

MR. ABBOTT explained that this was a request to allow the Trust to spend the \$295,000 from the Central Facility Fund in order to support the real estate advisor. The Central Facility Fund is

the account that was set up a couple of years ago in order to pay for expenses associated with the commercial real estate assets. He stated that the CFF is budgeted once a year; typically, in the April and May timeframe. A budget was endorsed a little less than a year ago, but we did not fund the real estate advisor contract because there was an expectation that it would be renegotiated and the cost reduced. He continued that was accomplished. The TLO and Carol's work identified the opportunity to reduce the spend on the advisor from \$380,000 to \$295,000, a savings of about 25 percent.

TRUSTEE HALTERMAN called for the question.

After the roll-call vote, the MOTION WAS APPROVED. (Trustee Boerner, yes; Trustee Boyles, yes; Trustee Gwaltney-Jones, yes; Trustee Fisher, yes; Trustee Halterman, yes; Trustee Sturgeon, yes; Trustee Cooke, yes.)

CHAIR COOKE moved to the second requested motion.

MOTION: A motion that the Board of Trustees authorizes the incorporation into the principal loan balance(s) of commercial real estate refinancing(s) the costs required to complete the refinancing transaction(s): These include costs related to financial and legal review, closings and due diligence, commercial brokerage fees, prepayment fees, legal fees related to portfolio creation, and any other usual and customary mortgage costs was made by TRUSTEE HALTERMAN; seconded by TRUSTEE STURGEON.

MR. ABBOTT stated that that was discussed in the Finance Committee meeting three weeks ago. He explained that when the trustees authorized the refinance of the debt on the commercial real estate, there was an error on his part. It was not explicitly authorized that the transactional expenses associated with the refinance be included. This is simply addressing that omission from last November when the refinance of the debt amounts of the principal amounts was authorized.

TRUSTEE HALTERMAN stated that this was not discussed and asked about the fiscal impact of this particular motion. She also asked for an approximation of what those total costs may be.

MR. ABBOTT replied that in the memo the Finance Committee reviewed it was estimated that the max that these could be is approximately \$4.1 million and those are primarily the prepayment fees. He stated that maximum because it is possible that some or all of the prepayment fees may be avoided depending on the refinance structure that is ultimately agreed to. He noted that, even though this was not included in the authorization from November, these costs were included in the modeling that was done. He added that nothing material has changed in that regard since the trustees reviewed this last fall.

CHAIR COOKE asked for the range of refinancing debt.

MS. HOWARTH replied that the maximum amount of refinancing is anticipated to be just under \$45 million. She stated that an analysis with current market interest rates is being done, and we will have the ability to hone in on that amount in a clear strategy by the end of February.

CHAIR COOKE called the vote.

After the roll-call vote, the MOTION WAS APPROVED. (Trustee Boerner, yes; Trustee Boyles, yes; Trustee Gwalthney-Jones, yes; Trustee Fisher, yes; Trustee Halterman, yes; Trustee Sturgeon, yes; Trustee Cooke, yes.)

CHAIR COOKE moved to Motion No. 3.

MOTION: A motion that the Board of Trustees authorizes the transfer of \$24,157,100 from the Alaska Permanent Fund Corporation Budget Reserve account to the Mental Health Trust Settlement Income Account to finance the FY2021 base disbursement payout calculation. The CFO may fulfill this motion with one lump sum or multiple transfers was made by TRUSTEE HALTERMAN; seconded by TRUSTEE STURGEON.

MR. ABBOTT stated that this was the annual transfer from the reserves to the operating account to fund the annual operations. This is, essentially, the 4.25 percent of the invested assets. He continued that this amount is going up yearly, approximately \$1 million or so per year. That is increasing the annual operating budget and the grant making. He added that this is the annual move that is made every year to transfer that 4.25 percent from the invested assets to the operating account.

CHAIR COOKE asked if this has already been budgeted and approved by the Legislature for FY21, and has nothing to do with the other budget discussions that are going on.

MR. ABBOTT replied yes.

CHAIR COOKE asked for any questions.

TRUSTEE FISHER stated that, as a new trustee, it sounds like this is just the normal motion that would be made every year to operate the Trust.

MR. ABBOTT replied that was correct.

A brief discussion ensued.

CHAIR COOKE called for the roll-call vote.

After the roll-call vote, the MOTION WAS APPROVED. (Trustee Boerner, yes; Trustee Boyles, yes; Trustee Gwalthney-Jones, yes; Trustee Fisher, yes; Trustee Halterman, yes; Trustee Sturgeon, yes; Trustee Cooke, yes.)

MR. ABBOTT asked for some discussion on the memo regarding the No Surplus Declaration because the motion did not come forward with a recommendation from the Finance Committee. He stated that this was a process that started a year ago. The Finance Committee considered and then the Full Board ultimately adopted a motion similar to the one being considered today, to express the Trust's determination that it did not have excess funds that were not needed to serve beneficiaries. This was discussed last year, a motion like this was adopted a year ago, and it was indicated that it would be prudent to consider such a motion or action annually going forward.

Shortly before the Finance Committee considered this, the Governor's budget was released, and he proposed to utilize Trust assets for purposes that had not been authorized by the trustees. He explained that budgeting action was because the Governor's office or OMB had determined that the Trust had more resources than it needed to meet beneficiary requirements. When this was talked about at the Finance Committee, the Trust had not yet discussed the issue with the Department of Law. As a result, the Finance Committee tabled consideration of this topic at that time. He stated that staff continues to recommend that this is an appropriate action, that the evaluation of current and future needs of the beneficiaries as described in the COMP Plan far exceed the assets that are held at this time, but the Governor's budget proposal has at least changed the environment for this determination and may have changed the trustees' interest in making such a determination.

CHAIR COOKE stated that the history of this was accurately summarized and, in his view, the decision is not one for the Finance Committee. This declaration is something to be considered and acted upon by the Board itself. He asked the trustees whether they want to bring this motion forward.

TRUSTEE BOERNER stated that she felt that it was appropriate for this Board to pick up and take up motions that may or may not have been addressed in a committee. She would like to see the motion put forward.

CHAIR COOKE asked if she was introducing the motion.

MOTION: A motion that the Alaska Mental Health Trust Authority Board of Trustees has determined that no Trust funds exist above the current and projected need for the beneficiaries of the Alaska Mental Health Trust was made by TRUSTEE BOERNER; seconded by TRUSTEE GWALTHNEY-JONES.

CHAIR COOKE asked for further discussion.

TRUSTEE FISHER asked what the difference was between the methodology used by the Trust staff and the methodology used by OMB to determine that there exists or does not exist funds above the current and projected.

MR. ABBOTT replied that in some of the documentation provided in support of the Governor's recommendation, it was stated that any funds at the Trust available to be spent that were not being spent in the current year were, essentially, surplus and that would include the reserves as well as funds in the operating account. He thought that was a flawed interpretation, but it was their determination. He explained that the attorney pointed out that, first, the law does not allow the State to make the determination as to whether there is an excess or a surplus that is available. That is a determination to be made by the Trust. Second, the Trust has a responsibility to manage its assets prudently and the use of reserves and similar devices are clearly prudent, and in the best interest of the Trust and its beneficiaries. He stated that he had conversations with OMB since the Finance Committee meeting, and they have begun to walk backwards from their relatively extreme initial position on availability of Trust assets. They may still suggest that Trust funds should be available for the purpose they have proposed, but he did not believe they are continuing to challenge the notion that the Trust can or should hold some level of reserves.

CHAIR COOKE went through the roll of the trustees for any questions.

TRUSTEE BOERNER stated concern of outside entities outside of the trustees of this board making determinations on funds that may or may not be identified as mental health needs. If moved into General Funds, they lose that identity.

TRUSTEE BOYLES stated that she thought a lot about this since the last meeting and the math did not work for her. It is that simplistic approach that is politically guided that she has concern with. Relative to this motion, she supports it because we need to stand firm on what we were asked to do by the settlement of the Trust, the legislators that approved the trustees, and the Governor that appointed them. She spoke in favor of the motion.

TRUSTEE GWALTHNEY-JONES agreed with everything that had been said so far and was 100 percent behind it. She stated that it was the right thing to do to protect the Trust and the beneficiaries in the long haul.

TRUSTEE FISHER stated that he thought that some people do not understand that the Trust's only source of revenue is its assets. In order to continue the mission of the Trust, those assets have to be managed prudently to adjust for up and down years. He added that he was comfortable with what had been explained with regard to this motion and was in favor of it.

TRUSTEE HALTERMAN stated that she was still troubled to be in this spot with regards to the Administration and its position and trying to accent Mental Health Trust funds without the conversation between the Department and the Trust. The statement of facts are supported by State law, which she thought were in the Trust's favor. She continued that there is a need for more thoughtful dialogue between all parties involved. She added that it was quite clear that the statute was misinterpreted and thinks the memo that was written by Mr. Abbott on the 26th put the position pretty clearly in front of the Legislature. She saw no value in the memo, and for that reason will be a no.

TRUSTEE STURGEON stated that he had some reservations and concerns. He would like assurance before he votes that all administrative remedies and discussions, both with the OMB, Legislature and the Governor's office, be exhausted. There was some concern about this causing some political problems. He does not disagree with the motion, but disagrees with the timing and would be a no vote.

MOTION: A motion to table this motion was made by TRUSTEE HALTERMAN; seconded by TRUSTEE STURGEON.

After a roll-call vote, the MOTION WAS APPROVED. (Trustee Boerner, no; Trustee Boyles, yes; Trustee Gwalthney-Jones, no; Trustee Halterman, yes; Trustee Fisher, yes; Trustee Sturgeon, yes; Trustee Cooke, no.)

CHAIR COOKE stated that the matter was tabled. One of his thoughts on the motion was that it was superfluous because it is stating that the money is used for the current and future beneficiaries of the Trust. He continued that this would require a future meeting bringing it up off the table and getting to the substance of it. He asked for anything else from the Finance Committee, and then moved to Resource Management.

RESOURCE MANAGEMENT COMMITTEE UPDATE

TRUSTEE HALTERMAN stated that the first item on the agenda is FY21 Icy Cape Gold & Industrial Metals Project.

MOTION: A motion that the Alaska Mental Health Trust Authority Board of Trustees approve the proposed action Option 1, to fund the 2021 Icy Cape Gold & Industrial Heavy Metals Project from the Trust Land Office Development Account with \$10 million. These funds do not lapse. The approval includes the associated development and cost recovery plan for Option 1 included in material presented at the January 7, 2021, Resource Management Committee was made by TRUSTEE STURGEON; seconded by TRUSTEE GWALTHNEY-JONES.

MR. MENEFEE stated that Motion 1 had passed recommending selecting Option 1 at the RMC, which is a proposal to advance the industrial heavy mineral and gold project at Icy Cape to a prefeasibility study and indicated resources. He continued that it is a \$10 million approval which would include definition drilling, pilot plant sampling, mineral separation, product recovery, and assay. It also has a component about a cost recovery plan that is compliant with Regulation 20 AAC 40.610. He added that this proposal is the most cost effective and most efficient way to reach the prefeasibility stage with compliant indicated resources that are designed to maximize future returns to the Trust. It is in agreement with the confidential Hatch report that had been forwarded to all of the trustees. This project meets the objectives under the Asset Management Policy Statement and agrees with Trust principles.

CHAIR COOKE asked if the trustees had any questions.

TRUSTEE FISHER stated that, as a new trustee, he was not at that meeting and did not have the benefit of all of the information that was shared. He reviewed the memorandum and had a couple of clarification questions. This property was offered for leases and there was no interest in the property at that time, was his understanding.

A brief discussion ensued explaining and clarifying the motion.

MR. MENEFEE stated that it may be beneficial to enter into an Executive Session to share the results of what was shared at the previous Executive Session with the trustees.

CHAIR COOKE asked for a motion for Executive Session. He stated that nothing will be voted on, and that Executive Session is for discussion of confidential matters.

MOTION: A motion that the Board go into Executive Session to discuss confidential matters pertaining to the Icy Cape mineral exploration project in accordance with the Open Meetings Act AS 44.62.310(c) -- no decisions will be made in the Executive Session -- was made by TRUSTEE STURGEON; seconded by TRUSTEE GWALTHNEY-JONES.

CHAIR COOKE called the question on the motion.

After the roll-call vote, the MOTION WAS APPROVED. (Trustee Boerne, yes; Trustee Boyles, yes; Trustee Gwalthney-Jones, yes; Trustee Fisher, yes; Trustee Halterman, yes; Trustee Sturgeon, yes; Trustee Cooke, yes.)

MR. ABBOTT recommended that he, Wyn Menefee, Karsten Eden, Jusdi Doucet, Steve Williams, Carol Howarth and Allison Biastock participate in the Executive Session.

(Executive Session from 11:45 a.m. to 12:19 p.m.)

CHAIR COOKE resumed the board meeting after the Executive Session and called the roll. For the record, he, fellow trustees, and certain members of the Trust Authority and Trust Land Office are returning. There were no decisions made or any action taken during the Executive Session. He asked for any further input on Motion No. 1. There being none, he went to the roll-call vote.

After the roll-call vote, the MOTION WAS APPROVED. (Trustee Boerner, yes; Trustee Boyles, yes; Trustee Gwalthney-Jones, yes; Trustee Fisher, yes; Trustee Halterman, yes; Trustee Sturgeon, yes; Trustee Cooke, yes.)

CHAIR COOKE moved to the second motion recommended from the Resource Management Committee meeting.

MOTION: A motion that the Alaska Mental Health Trust Authority Board of Trustees authorizes the CFO to transfer funds from the budget reserves to the TLODA as required to fund this approved 2021 Icy Cape Gold and Industrial Heavy Minerals exploration budget and distribute to the TLO as required was made by TRUSTEE STURGEON; seconded by TRUSTEE BOYLES.

MR. ABBOTT clarified that this explicit topic was not directly discussed at the committee. However, the authorization naturally followed from the decision in Motion No. 1. Explicit authority is not needed to move money as necessary from budget reserves to support the \$10 million expenditure authorized a couple of minutes ago. It was not explicitly described in these terms with the committee. He added that if this motion passed, essentially \$10 million of Trust reserves for this function will go forward.

CHAIR COOKE asked the trustees for any questions. He called the question and did a roll-call vote.

After the roll-call vote, the MOTION WAS APPROVED. (Trustee Boerner, yes; Trustee Boyles, yes; Trustee Gwalthney-Jones, yes; Trustee Fisher, yes; Trustee Halterman, yes; Trustee Sturgeon, yes; Trustee Cooke, yes.)

CHAIR COOKE asked for anything else to be considered under the Resource Management Committee report update. There being none, he called a break.

(Break.)

CHAIR COOKE called the meeting back to order and called the roll. All of the trustees were present. He stated that scheduled was a period for legal consultation regarding the Governor's

proposed FY22 budget and personnel update. He asked for a motion in order to go into Executive Session.

MOTION: A motion that the board go into Executive Session for legal consultation regarding the Governor's proposed FY22 budget and regarding personnel matters in accordance with the Open Meeting Act, Alaska Statute 44.62.310 (c), was made by TRUSTEE BOERNER; seconded by TRUSTEE STURGEON.

MR. ABBOTT recommended that in addition to trustees, that Stuart Goering and himself join for the discussion of the Governor's budget. After that, Mr. Goering would excuse himself and then he would continue on the personnel update.

After the roll-call vote, the MOTION WAS APPROVED. (Trustee Boerner, yes; Trustee Boyles, yes; Trustee Gwalthney-Jones, yes; Trustee Fisher, yes; Trustee Halterman, yes; Trustee Sturgeon, yes; Trustee Cooke, yes.)

(Executive Session from 12:49 p.m. until 2:10 p.m.)

CHAIR COOKE resumed the session of the meeting of the Board of Trustees of the Alaska Mental Health Trust Authority. He called the roll, and all trustees were present. He noted for the record that no decisions, no action was taken at the Executive Session previously called. He moved to the original agenda, and the remaining item was trustee comments.

TRUSTEE BOERNER stated that this was one of the things she really appreciated, the opportunity to share on the record. She welcomed Trustee Fisher and was impressed with the questions he brought forward and how quickly he picked up on some of the challenging issues. She continued that she had a great appreciation for working with this Board of Trustees. The questions brought forward, the involvement and the level of commitment to the beneficiaries moved her. She added that her favorite event from the agenda had to be the Mission Moments and thanked the presenters for their presentations.

TRUSTEE BOYLES asked about the next meeting and suggested a short meeting to keep up on what is going on with the Governor's budget.

CHAIR COOKE stated that the next scheduled meeting was April 21st and noted the need for some unscheduled meetings.

TRUSTEE GWALTHNEY-JONES welcomed Trustee Fisher and stated that it was great to have his expertise with nonprofits. She also got a lot of positives from the Mission Moment. It was nice to see how the moneys were allocated and how they impacted the lives of people.

TRUSTEE FISHER stated that he was very impressed with the caliber of the individuals that have been in these meetings and the caliber of the in-depth discussion that went on. He looked forward to the opportunity to work with everybody in future meetings, and the decisions that need to be made with regard to the Trust and the beneficiaries. The Mission Moments were really great and keep in mind of what the fiduciary responsibility is with regard to the funds and the success that it can bring to individuals. He appreciated everything, the staff, and looked forward to working with both the trustees and Trust staff.

TRUSTEE HALTERMAN thanked staff and stated appreciated for the Mission Moment, finding it helpful to get the perspective of seeing the beneficiaries' services in action. She stated respect for the work that all the folks at the Trust have to do in order to prepare and thanked them for that effort.

TRUSTEE STURGEON also thanked the staff and the incredible job they do. He welcomed Trustee Fisher and was very impressed with his resume. He stated that the Trust is very fortunate to have someone of his caliber and experience to help us along this bumpy road of being a Trust member. He continued that Alaska is heading into some really challenging times, and whatever staff can do to help the beneficiaries connect to the programs. There is a need to make sure that the economy is ready to help pay for all these wonderful programs we have. He thanked Chair Cooke and Mr. Abbott for the great work they do.

CHAIR COOKE stated that the Mission Moments are always a highlight, and these were very memorable ones and will stay with us long after this meeting. It is great to see these success stories in person. He stated appreciation for all the hard work and organization putting the meeting together by staff and TLO. He felt that there was a lot of substance at this meeting. He thanked everyone for what he considered a very successful meeting with a lot of participation by everyone. He concluded his comments and asked for anything further.

MOTION: A motion to adjourn the meeting was made by TRUSTEE HALTERMAN; seconded by TRUSTEE STURGEON.

After the roll-call vote, the MOTION WAS APPROVED. (Trustee Boerner, yes; Trustee Boyles, yes; Trustee Gwalthney-Jones, yes; Trustee Fisher, yes; Trustee Halterman, yes; Trustee Sturgeon, yes; Trustee Cooke, yes.)

CHAIR COOKE thanked all.

(Alaska Mental Health Trust Authority Full Board meeting adjourned at 2:35 p.m.)

**Minutes for the
March 30, 2021
Full Board of Trustee
Meeting**

ALASKA MENTAL HEALTH TRUST AUTHORITY

SPECIAL FULL BOARD OF TRUSTEES MEETING

March 30, 2021

1:30 p.m.

WebEx Videoconference/Teleconference

Originating at:

**3745 Community Park Loop, Suite 120
Anchorage, Alaska**

Trustees Present:

Chris Cooke, Chair

John Sturgeon

Brent Fisher

Rhonda Boyles

Annette Gwalthney-Jones

Anita Halterman

Trust Staff Present:

Mike Abbott

Steve Williams

Carol Howarth

Miri Smith-Coolidge

Kelda Barstad

Michael Baldwin

Valette Keller

Josephine Stern

Levi Rinehart

Eric Boyer

Allison Biastock

Trust Land Office:

Wyn Menefee

Sarah Morrison

Also participating:

Sue Sherif; Marvin Deacon; Beverly Schoonover.

PROCEEDINGS

CALL TO ORDER

CHAIR COOKE called the meeting to order and began with a roll-call. He asked for any announcements. There being none, he moved to approval of the agenda.

APPROVAL OF AGENDA

MOTION: A motion to approve the agenda was made by TRUSTEE STURGEON; seconded by TRUSTEE HALTERMAN.

After a roll-call vote, the MOTION WAS APPROVED. (Trustee Boyles, yes; Trustee Gwalthney-Jones, yes; Trustee Sturgeon, yes; Trustee Halterman,, yes; Trustee Cooke, yes.)

ETHICS DISCLOSURES

CHAIR COOKE asked for any ethics disclosures. There being none, he moved to the agenda item of inflation-proofing which comes from the Finance Committee meeting that was held earlier this month. He asked that the motion be introduced.

INFLATION PROOFING

MOTION: A motion that the Board of Trustees approves the designation of up to \$120,280,300 of Alaska Mental Health Trust earnings as principal for the purpose of inflation-proofing. The Board of Trustees authorizes the Chief Financial Officer to designate \$50,000,000 as soon as practicable, and designate, before the close of FY21, the amount necessary to achieve the total designation that will maintain a year-end FY21 budget reserve balance of at least 400 percent of the FY21 payout, or \$96,628,400 was made by TRUSTEE HALTERMAN; seconded by TRUSTEE GWALTHNEY-JONES.

CHAIR COOKE asked Mr. Abbott to address the motion and the wording changes that were made.

MR. ABBOTT replied that the only change from the motion made by the Finance Committee was the establishment of phasing for the actual transfers of the inflation-proofing. He continued that also discussed during the Finance Committee meeting was that the Trust's investment balances in the reserve account currently exceed the amount necessary to transfer \$120 million to the corpus while still maintaining the \$96 million of the reserve target. He continued that there was a possibility that if investment earnings are poor over the remaining three mounts of the fiscal year, that may not be possible. He added that in the discussions it was clearly important to the board to not transfer more to the corpus than is possible while still maintaining the 400 percent target, or \$96 million. This motion would authorize the Trust to transfer \$50 million immediately, and then transfer the remaining \$70 million at the end of the fiscal year only if the Trust maintains sufficient reserves to allow for that transfer to take place while still maintaining sufficient reserves and the target reserve balance.

TRUSTEE HALTERMAN asked about the risk of the Legislature still wanting to access some of the reserve funds.

MR. ABBOTT replied that the reserve target that the Trust has established would not affect the outcome of the 400 percent target. He added that he did not believe there would be additional risk as a result of this activity.

CHAIR COOKE recognized that Trustee Fisher had called in. He asked if the market continuing its upward trend, even after this transfer, would cause a problem.

MR. ABBOTT replied that he would not perceive it as a problem. He stated that next year, when inflation-proofing is again considered, there may be sufficient reserves available for that purpose.

CHAIR COOKE asked if there were any other questions or comments.

TRUSTEE STURGEON called the question.

After the roll-call vote, the MOTION WAS APPROVED. (Trustee Sturgeon, yes; Trustee Halterman, yes; Trustee Gwalthney-Jones, yes; Trustee Fisher, yes; Trustee Boyles, yes; Trustee Cooke, yes.)

CHAIR COOKE asked for any other business to come before the board.

MR. ABBOTT thanked the trustees for being available for this special meeting and wanted to make sure that they knew of the plan for two days of committee meetings on April 21st and 22nd, and a one-day board meeting in late May. He stated that there was a plan for an in-person meeting in May, but probably not April.

CHAIR COOKE asked for an email update, and asked for a motion to adjourn.

MOTION: A motion to adjourn the meeting was made by TRUSTEE STURGEON; seconded by TRUSTEE HALTERMAN.

After the roll-call vote, the MOTION WAS APPROVED. (Trustee Sturgeon, yes; Trustee Halterman, yes; Trustee Gwalthney-Jones, yes; Trustee Fisher, yes; Trustee Boyles, yes; Trustee Cooke, yes.)

(The Special Full Board of Trustees Meeting adjourned at 1:46 p.m.)

Current Trust Bylaws

1
2
3 ALASKA MENTAL HEALTH TRUST AUTHORITY
4 BYLAWS
5

6
7 ARTICLE I
8 NAME
9

10 The name of this organization is the Alaska Mental Health Trust Authority.
11

12
13 ARTICLE II
14 PURPOSE OF THE AUTHORITY
15

16 The Alaska Mental Health Trust Authority acts in the best interest of the beneficiaries
17 of the trust. It is accountable to:

- 18 (a) Provide for sound governance, fiduciary oversight and direction in achieving the
19 mission of the Trust Authority;
20 (b) Ensure an integrated, comprehensive mental health program for the State of Alaska
21 in partnership with Department of Health and Social Services (DHSS); and
22 (c) Preserve, protect, and grow the trust corpus and administer trust assets.
23
24

25 ARTICLE III
26 BOARD OF TRUSTEE MEMBERSHIP AND TERMS OF OFFICE
27

28 Section 1. Trust Authority board of trustees composition:

- 29 (a) The Trust Authority shall be governed by its board of trustees.
30 (b) The Trust Authority board of trustees, hereafter referred to as the board, consists of
31 seven members appointed by the governor in accordance with AS 47.30.016 and
32 confirmed by the legislature.
33

34 Section 2. Term of office, vacancies, and removal:

- 35 (a) The members of the board serve staggered five-year terms. A member shall continue
36 to serve until the member's successor is appointed and confirmed by the legislature.
37 (b) A vacancy occurring in the membership of the board shall be filled within 60 days by
38 appointment of the governor for the unexpired portion of the vacated term.
39 (c) The governor may remove a member of the board only for cause per AS 47.30.021.
40 (d) Except for a trustee who has served two consecutive five-year terms, a member of
41 the board may be reappointed. A member of the board who has served two
42 consecutive five-year terms is not eligible for reappointment to the board until one
43 year has intervened as per AS 47.30.021(d).
44
45

ARTICLE IV
BOARD OF TRUSTEE DUTIES

Section 1: The role of the board is to:

- (a) Set the vision for the organization;
- (b) Set policies for the organization, including adoption of regulations as appropriate under AS 47.30.031;
- (c) Adopt charters that define the role, authority, operating procedures, duties, and responsibilities of the board and standing committees; and
- (d) Approve contractual agreements with advisors as defined in statute and the settlement agreement, specifically Alaska Permanent Fund Corporation (APFC), Department of Natural Resources (DNR), and Statutory Advisory Boards.
- (e) Fulfill the duties listed in AS 37.14.007(b)(1)-(12).

Section 2: The board will conduct business in accordance with AS 47.30.036.

ARTICLE V
OFFICERS AND DUTIES

Section 1. The board, by a majority vote of its membership, shall annually elect a Chair, Vice Chair, and Secretary from its membership.

Section 2. The officers will be elected by a majority vote at the annual budget approval meeting, and officers' terms of office commence upon adjournment of that meeting. Officers' terms of office end effective at adjournment of the meeting in which new officers are elected.

Section 3. Officers may be re-elected to the office in which they serve by vote of the membership of the board as above. The board's intention is to allow board members the opportunity to serve in officer roles in support of ongoing board development. To that end, no member may serve more than 2 consecutive terms in the same office except as provided for by affirmative vote of 5 board members.

Section 4. If the office of the Chair becomes vacant, the Vice Chair succeeds to the office of the Chair and serves until an election held at the next board meeting. The newly elected Chair will serve until the next annual election.

Section 5. Except for the office of Chair, if an office of the board becomes vacant, an election shall be held to fill the vacancy at the next regular meeting following the vacancy. The officer will serve until the next annual election.

Section 6. The duties of the officers shall be as follows:

(a) Chair

- 1. Call all meetings. Preside at all meetings.
- 2. Appoint chairs of committees and committee members.

3. Serve as ex-officio (voting) member of all committees, but may not concurrently serve as board Chair and chair of any standing committee, with the exception of the Executive Committee.
4. Act as primary spokesperson for the board.
5. Act as one of the official spokespersons for the Trust Authority, together with the Chief Executive Officer (CEO), when requested by the Chief Communications Officer.

(b) Vice Chair

1. Assist the Chair in the discharge of his/her duties.
2. Perform the duties of the Chair in the absence or incapacity of the Chair.
3. Perform other duties as assigned by the board.

(c) Secretary

1. Assume duties of the Chair when Chair and Vice Chair are unavailable.
2. Perform other duties as assigned by the board.
3. Assure that the records of board proceedings are maintained in accordance with these bylaws and in accordance with AS 37.14.007(b)(2) and the Records Management Act (AS 40.21).

ARTICLE VI
MEETINGS

Section 1. The board will hold four regular meetings each fiscal year. Committees will meet as necessary to accomplish their responsibilities.

Section 2. Special or emergency meetings of the board may be held at such time and place as the Chair may order; or upon the written request to the Chair of any four trustees.

Section 3. Reasonable public notice of board and committee meetings shall be provided in accordance with AS 44.62.310. Meetings of the board and its committees are subject to the Open Meetings Act, AS 44.62.310 and 44.62.312.

Section 4. A quorum at all board meetings shall consist of four board members. A quorum at committee meetings is a majority of the committee's members.

Section 5. No member of the board may designate a proxy.

Section 6. The board will schedule at least one period for public comment during each regularly scheduled board meeting.

Section 7. Formal actions by the board are accomplished through adoption of motions.

ARTICLE VII
COMMITTEES OF THE BOARD

There will be five standing committees of the board. Standing committee chairs and members will be appointed by the Chair after polling the board regarding individual trustee's interest and ability to serve. A member may serve as chair of only one standing committee at any time except as a stand-in until the next regularly scheduled board meeting. Standing committees will have a minimum of 3 committee members. The board chair may designate ad hoc committees to accomplish special purposes. Persons other than board members may serve on the board's ad hoc committees; however, such persons may not be voting members of such committees, only appointed board members may vote on committee actions. Committee recommendations will be reported to the board for action at the next regular board meeting.

Section 1. The Executive Committee of the board is composed of three board officers, the Chair, the Vice Chair, and the Secretary. The Executive Committee will:

- (a) Ensure development of policies for governing the Trust Authority for approval by the board.
- (b) Oversee implementation of governance policies at the direction of and on behalf of the board in accordance with law and the committee charter adopted by the board.
- (c) The Executive Committee will meet only as needed.

Section 2. The Resource Management Committee will, in consultation with the CEO and Executive Director (ED) of the TLO:

- (a) Ensure development of policies for protecting, enhancing, and managing the trust's non-cash resources in the best interests of the beneficiaries for approval by the board.
- (b) Oversee implementation of plans at the direction of and on behalf of the board in accordance with law and the committee charter adopted by the board.

Section 3. The Program and Planning Committee will, in consultation with the CEO and Executive Director (ED) of Mental Health Policy and Programs.:

- (a) Ensure development of policies to meet needs and improve the circumstances of beneficiaries; and recommends to the board for approval.
- (b) Oversee implementation of plans at the direction of and on behalf of the board in accordance with Trust Authority statutes and regulations and the committee charter adopted by the board.

Section 4. The Finance Committee will, in consultation with the CEO and Chief Financial Officer (CFO):

- (a) Ensure development of policies for investment and fiscal management for approval by the board.
- (b) Oversee implementation of approved investment and fiscal management policies on behalf of the board in accordance with Trust Authority statutes and regulations and the committee charter adopted by the board.

- 1 Section 5. The Audit and Risk Committee will, in consultation with the CEO and CFO:
2 (a) Ensure development of policies for managing the annual audit process and
3 identifying and addressing organizational risk for approval by the board.
4 (b) Oversee implementation of approved audit and risk management policies on behalf
5 of the board in accordance with Trust Authority statutes and regulations and the
6 committee charter adopted by the board.

7
8
9 ARTICLE VIII
10 CHIEF EXECUTIVE OFFICER
11

12 Section 1. The board shall select and employ a Chief Executive Officer as provided by law.
13

14 Section 2. The Chief Executive Officer is responsible for day-to-day operations of the Trust
15 Authority including planning, organizing, coordinating, and directing all activities
16 necessary to enable the Trust Authority to exercise its powers and duties, and
17 fulfill the purpose of the Trust Authority. The CEO will operate and conduct the
18 business and affairs of the Trust Authority according to the statutes, regulations,
19 bylaws, policies, and charters adopted by the board. The CEO duties and
20 responsibilities shall be set forth in a CEO Job description to be adopted by the
21 board.
22

23 Section 3. The Chief Executive Officer shall oversee administration of the contract with the
24 Trust Land Office on behalf of the Trust Authority to ensure compliance with
25 AS 37.14.009(a)(2).
26
27

28 Section 4. The board will evaluate the Chief Executive Officer's performance annually in
29 writing. The board will define the process for conducting annual reviews and
30 include it in the Board Operations Manual.
31

32 Section 5. Termination of employment of the Chief Executive Officer is by majority vote of
33 the board.
34
35

36 ARTICLE IX
37 PARLIAMENTARY AUTHORITY
38

39 Unless otherwise provided by law or these bylaws, the board's procedures shall be
40 governed by Robert's Rules of Order Newly Revised. The Chair may appoint an appropriate
41 person to serve as parliamentarian.
42
43

44 ARTICLE X
45 ETHICS
46

47 Board members are required to comply with the Alaska Executive Branch Ethics Act
48 (AS 39.52) and AS 47.30.016(c)(2).

1
2
3 ARTICLE XI
4 AMENDMENT OF BYLAWS
5

6 These bylaws may be amended at any meeting of the board. Amendment of these
7 bylaws requires 5 affirmative votes of board members provided that written notice and
8 copies of the proposed amendment have been submitted to the members 30 days prior to
9 the meeting, or by unanimous vote without notice.
10

11
12 ARTICLE XII
13 DEFINITIONS
14

15 In these bylaws,
16

17 **The Alaska Mental Health Trust** means the sum of all assets owned by the Alaska
18 Mental Health Trust as established by the Alaska Mental Health Trust Enabling Act, P.L. 84-
19 830, 70 Stat. 709 (1956) and the Mental Health Settlement Agreement (June 10, 1994),
20 including cash and non-cash assets.
21

22 **The Alaska Mental Health Trust Authority (the Trust Authority)** means the entity
23 charged with administering the trust, as trustee, is governed by a seven-member board. (AS
24 37.14.007, AS 47.30.011, AS 47.30.016)
25

26 **The Trust Land Office (TLO)** means the unit of the Alaska Department of Natural
27 Resources that is charged with managing the trust's natural resources, land, and other fixed
28 assets. (AS 44.37.050)
29

30 **Regular Meeting** means a board meeting that is scheduled at the annual budget
31 meeting to occur during the succeeding year, provided that a regular meeting that is
32 rescheduled on reasonable notice to the public is still a regular board meeting.
33

34 **Special Meeting** means any board meeting other than a regular meeting, including
35 an emergency meeting.
36

37 **Emergency Meeting** means any board meeting conducted for the purpose of
38 addressing time sensitive matters that may not be capable of resolution within the statutory
39 or delegated authority of the Executive Committee or the CEO. If an emergency meeting is
40 conducted on less than the customary public notice, public notice shall be published as
41 soon as practicable. If the agenda of an emergency meeting is not available in advance, the
42 agenda will be published as soon as practicable after the emergency meeting.

Mary Jane Michael, Chair

Laraine Derr, Secretary

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



Update to the Alaska Mental Health Trust Authority- May 2021

1

Trustee Updates

- AMHB/ABADA Bill and Budget Priorities
- Upcoming AMHB/ABADA Meetings



AMHB/ABADA Bill Priorities

- **HB 172/SB 124 – Mental Health Facilities and Meds** (Governor Dunleavy).
This bill expands existing Title 47 authorities to allow peace officers and mental health professionals to temporarily hold Alaskans who are in a mental health crisis at a subacute mental health facility, including 23-hour crisis stabilization centers.
- **SB 2 – Peace Officers De-Escalation, Misconduct** (Sen. Gray-Jackson).
Relates to training in de-escalation procedures for peace officers, regulates reporting acts of misconduct, and requires training and oversight activities related to the Alaska Police Standards Council on misconduct.

AMHB/ABADA Bill Priorities

- **HB 25 – Public Schools, Social Emotional Learning** (Rep. Hopkins). Requires the Department of Education and Early Development to work with stakeholders to develop statewide guidelines for instruction in social-emotional learning.
- **HB 105 – Detention of Minors** (Governor Dunleavy). Among other provisions, this bill allows for DOC to enter into agreements with DHSS to keep waived minors in DJJ facilities till their sentencing or until the age of 19.

AMHB/ABADA Bill Priorities

- **HB 118 - Access to ID, Driver's License, Digital Technology** (Rep. Kreiss-Tomkins). This bill expands the allowable uses of inmate access computers to include reentry planning, healthcare, visitation, and legal reference materials. It also requires the DMV to send an ID/Driver's License upon request for eligible inmates serving 120 days or more, before the inmate's release.

AMHB/ABADA Bill Priorities

- **SB 9 – Alcohol Beverage Control (ABC) Board, Alcohol Regulations** (Sen. Micciche). Related to regulation of manufacturers, wholesalers, retailers of alcohol beverages. Increases protections to reduce underage drinking. Addresses alcohol licensure, permits, transporting or delivering alcoholic beverages, and changes to the ABC Board.
- **SB 70 - Opioid Overdose Drugs** (Sen. Wilson). Allows for continuation of a previously-made standing order for access to Naloxone. – ***Signed into Law***

AMHB/ABADA Budget Priorities

- **Behavioral Health Treatment and Recovery (BHTR) Grants** (DHSS). The House of Representatives (House) version of the operating budget adds +\$1.25 million general funds and Marijuana Education and Treatment funds. These grants ensure behavioral health providers can continue to provide addiction treatment and recovery services to Alaska's uninsured and vulnerable citizens.
- **Medicaid Services** (DHSS) The House did not accept the Governor's request for a -\$35 million reduction of general funds. Stakeholders requested a detailed plan of proposed cost savings and efficiencies before general funds were reduced.

AMHB/ABADA Budget Priorities

- **Intellectual Developmental Disabilities (IDD) Waitlist (DHSS).** The House version adds +\$1.9 million in combined state and federal funds to draw a minimum of 70 individuals from the IDD Waiver waitlist in FY22. Waiver services are critical to ensure access to community services that support people with severe disabilities, including Fetal Alcohol Syndrome, so they can live safely and independently.
- **Frontline Social Workers (DHSS).** The House version adds +\$3.4 million Reducing Recidivism funds, in addition to the level of funding allocated in FY21 for services, to be distributed through tribal organizations participating in the Alaska Tribal Child Welfare Compact.

AMHB/ABADA Budget Priorities

- **Public Assistance Field Services (DHSS).** The House version increases \$1.2 million in federal and state general funds for positions within public assistance for processing applications for supports and services for Alaska's most vulnerable citizens. The Governor's original request removed funding for 101 positions, but the House maintained those positions and added 18 additional positions.
- **Sobering Centers (DHSS).** The House version does not accept the Governor's proposal to eliminate \$200,000 general fund dollars for Bethel's sobering center, and added an additional \$330,000 for the Fairbanks sobering center. Sobering centers provide a safe place for Alaskans who are incapacitated as a result of alcohol and reduces the need for police, courts, emergency rooms, and jails.

AMHB/ABADA Budget Priorities

- **Re-Open Palmer Correctional Center (DOC).** This action transfers \$14.8 million of general funds within DOC to reopen Palmer Correctional Center. The restored facility will incorporate multiple “treatment houses,” to include treatment for sub-acute mental health, substance misuse and recovery, sex offenses, as well as expanded education and training, faith-based and cultural activities, reentry and transitional services.
- **Alaska Psychiatric Institute (DHSS).** The House version adds \$6 million in general funds for client services, instead of the Governor’s proposal to use Mental Health Trust Reserve funds. Funds also support forensic restoration and acute inpatient care to people with mental illness, substance use disorders, and other disabilities across the lifespan.

AMHB/ABADA Budget Priorities

- **Zero Suicide Initiative (DHSS).** The House version adds \$53,400 in general funds/mental health, replacing Trust Reserve funds. This initiative promotes collaboration with community-based agencies in delivering the evidence-based “Zero Suicide” suicide prevention model.
- **Alaska Training Cooperative (UA).** The House version adds \$100,000 in general funds/mental health, replacing Trust Reserve funds. The ATC provides trainings, professional development, and continuing education programs to Alaska’s behavioral health and health workforce serving all Trust beneficiaries.

Upcoming Meetings and Events

- **AMHB/ABADA Full Board Meeting**

- Wednesday, July 21st
- 9:00 am to Noon

- **AMHB/ABADA Full Board Meeting**

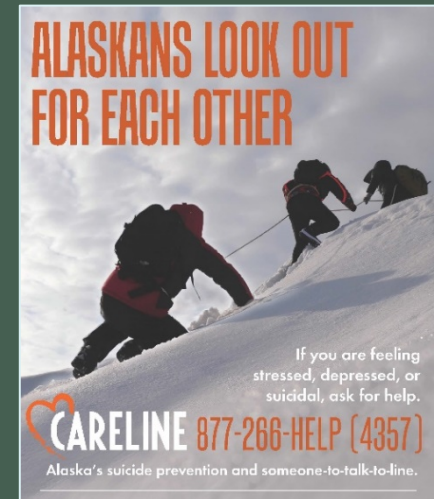
- October 2021
- Sitka, Alaska
- Dates and Times TBD

- **AMHB/ABADA Executive Committee**

- Meets every fourth Wednesday at 10:00 am

- **Statewide Suicide Prevention Council**

- Tuesday, August 24th
- Times TBD



QUESTIONS OR COMMENTS?

Beverly Schoonover, Executive Director
431 North Franklin Street
Juneau, AK 99801
bev.schoonover@alaska.gov
907-465-5114



Thank you!

13

Alaska Commission on Aging



Alaska Commission on Aging Celebrating Communities of Strength

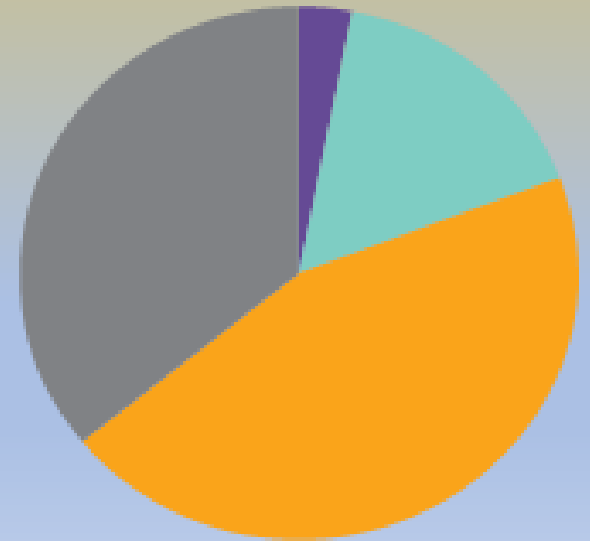
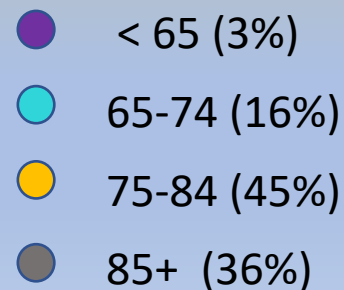
Presentation by Lisa Morley

Alaska Commission on Aging

- Represents Trust Beneficiaries 60 and over with Alzheimer's Disease and Related Dementias (ADRD)
- Alaska has the fastest growing senior population in the nation.
- Alaska's senior population has increased 56.4% between 2010 and 2020
- 142,099 Alaskan's are 60 and over. This represents 19.5 of the total population.

Alzheimer's Disease and Related Disorders

- 2020 an estimated 8,500 experienced ADRD
- 2025 will see an increase to 11,500
- Prevalence by age of people with ADRD, 1019



Programs that support beneficiaries with ADRD - FY2020

Grant Programs

- Adult Day Care - 113
- Family Caregiver Support -192
- Caregiver Connection (Pilot) -
- Senior In-Home -265
- General Relief -89
- Aging and Disabilities Resource Centers – 944
- Pioneer Homes - 265

Medicaid Programs

- Alaska Living Independently -772
- Alaskans with Physical and Developmental Disabilities - 6
- Individuals with Intellectual and Developmental Disabilities - 14
- Personal Care Services -235
- Community First Choice – 89
- Long term care -

ADRD and Covid-19

- Social Isolation due to Covid-19 increased progression of the disease
- Collateral deaths to individuals with ADRD increased 16% in 2020 over 2019, this was attributed to social isolation
- Individuals with dementia are often unable to use technology
- Robotic pets were shown to have positive outcomes

Alaska Commission on Aging Senior Listening Sessions

As more seniors became vaccinated, the Alaska Commission on Aging wanted to hear how people were doing and held their first in-person meeting and listening sessions May 4-6 on the Kenai Peninsula.



Alaska Commission on Aging Senior Listening Sessions



- Three groups made up of Commissioners, staff and guests.
- Nine meetings held at senior centers, tribal councils, churches, and community centers.
- 73 participants
- **100% valuable information!**

Top 5 Areas of Concern

- Senior housing
- Cost and availability of assisted living
- Help with shopping and chores
- Transportation
- Availability of health care with geriatric training

Older American's Month – Communities of Strength

Alaska Commission on Aging – Listening Sessions – May 5, 2021

Please share an example of how seniors on the Kenai Peninsula have demonstrated they are **Communities of Strength**!

1. Thinking about the past year:

- a. what are some positive things that happened?
- b. what are some challenges you, your friends and family have experienced?
- c. what resources and assistance did you receive? how was it helpful?
- d. what additional assistance would have been helpful?

2. Which areas should be our focus over the next 5 years?

- | | |
|-----------------------------|-----------------------------------|
| Food insecurity | Opportunity for physical activity |
| Housing | Cost of Assisted Living |
| Caregiver support | Availability of Senior Housing |
| Loved one with dementia | Home Maintenance |
| Transportation | Home Modifications |
| In-home support | Help with Medicare |
| Availability of health care | Elder Abuse |
| Information about resources | Help with shopping and chores |
| Personal Income | Loss of vision |
| Job Opportunities | Loss of hearing |
| Substance Abuse Treatment | Opportunity for physical activity |
| Mental Health Treatment | |
| Raising Grandchildren | |

What we learned...



- Communities came together to support their seniors.
- We learned how to use telehealth and technology!
- Broadband and internet access is not available or adequate in all communities.
- Workforce shortage (DSP) is the number one reason people are not receiving care.
- We need more senior housing.
- Kenai peninsula needs coordinated transportation options for seniors.

Next Steps

- More Senior Listening Sessions
- Compile results
- Develop recommendations
- Include needs of rural Alaska
- Engage our partners
- Incorporate into the State Plan
- Continue to evaluate the needs of individuals with ADRD.
- Continue to *Celebrate Communities of Strength!*



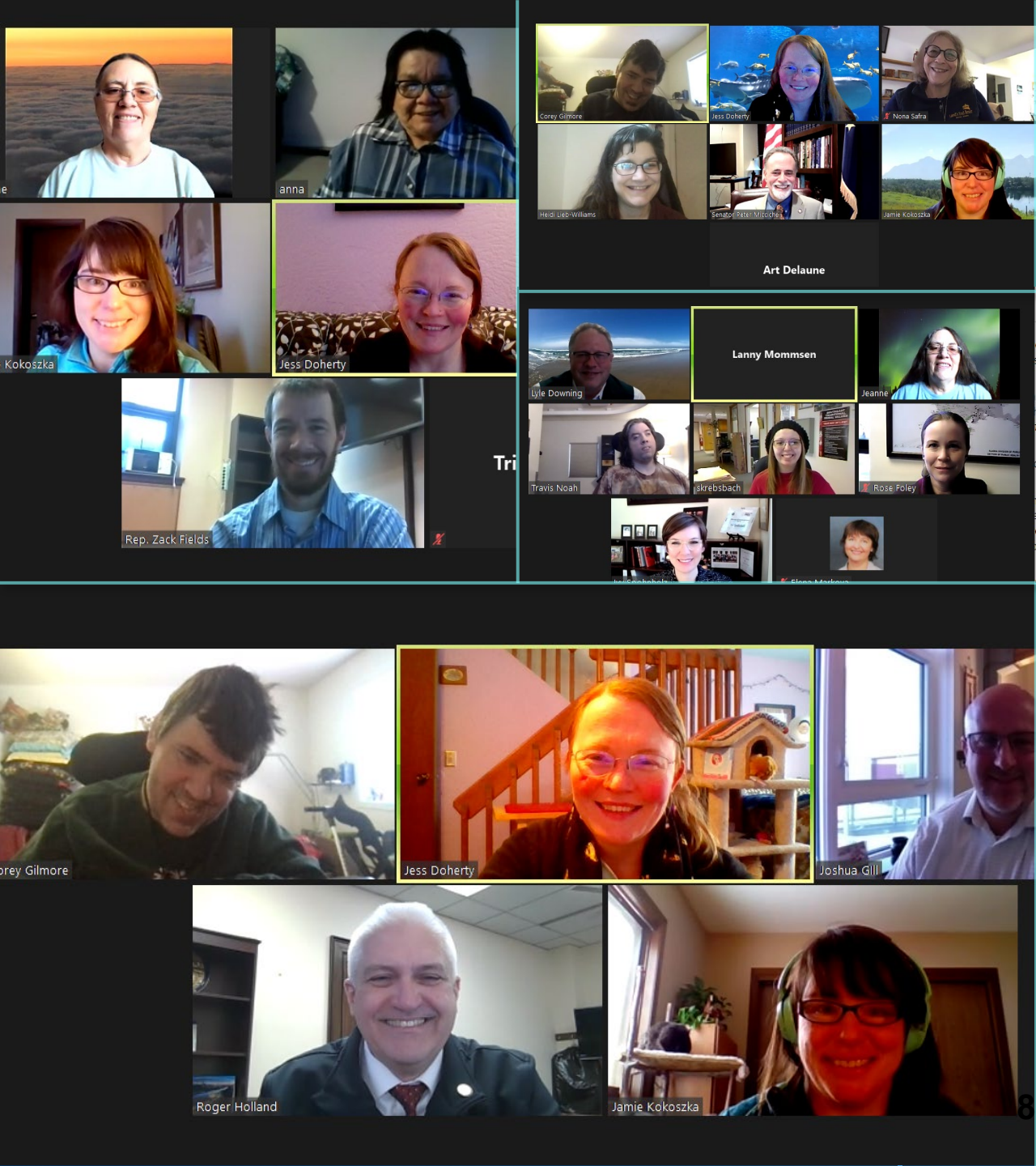
Governor's Council on Disabilities and Special Education



GOVERNOR'S COUNCIL ON
DISABILITIES AND SPECIAL EDUCATION

KRISTIN VANDAGRIFF,
EXECUTIVE DIRECTOR

ALASKA MENTAL HEALTH TRUST – MAY 26, 2021 TRUSTEE MEETING



LEGISLATIVE ACTIVITY RECAP:

Virtual Visits – Alaska State Legislature

- 2021 Council Position Papers:
 - Special Education Services Agency (SESA) Reauthorization
 - HCBS Importance
 - HCBS Cost Saving
 - Workforce Statement
 - <http://dhss.alaska.gov/gcdse/Pages/committees/legislative/default.aspx>

BILLS/BUDGET ITEMS FOLLOWED:

- SB19/HB43: Special Education Service Agency (SESA) Bills
 - Provides special education support and services to staff of all 54 Alaskan school districts educating students with low incidence disabilities (LID)
 - These services are required by Individuals with Disabilities Education Act (IDEA) federal law
 - SESA is scheduled to sunset June 30, 2021 unless reauthorized
 - Reauthorization would be to June 30, 2029
- HB 103/SB89: Assisted Living Home Bills
 - Bring state regulation into compliance with CMS integrated settings final rule
 - Goal: Individuals receiving assisted living home services live in environments which, as close as possible, approximate environments which would be present if they had a home of their own

BILLS/BUDGET ITEMS FOLLOWED:

HB 133: Achieving a Better Life Experience (ABLE)

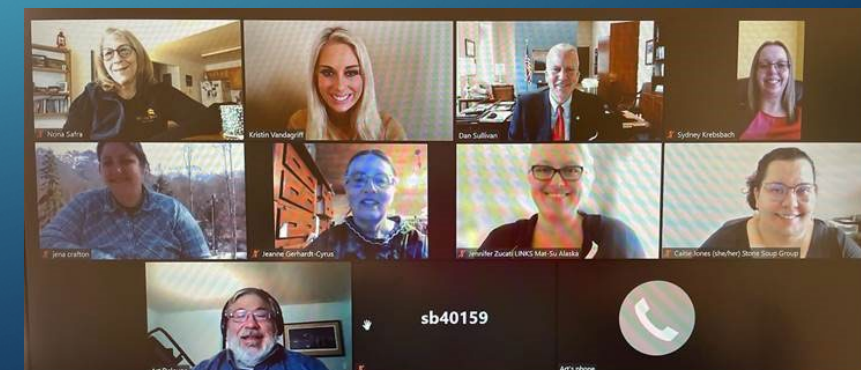
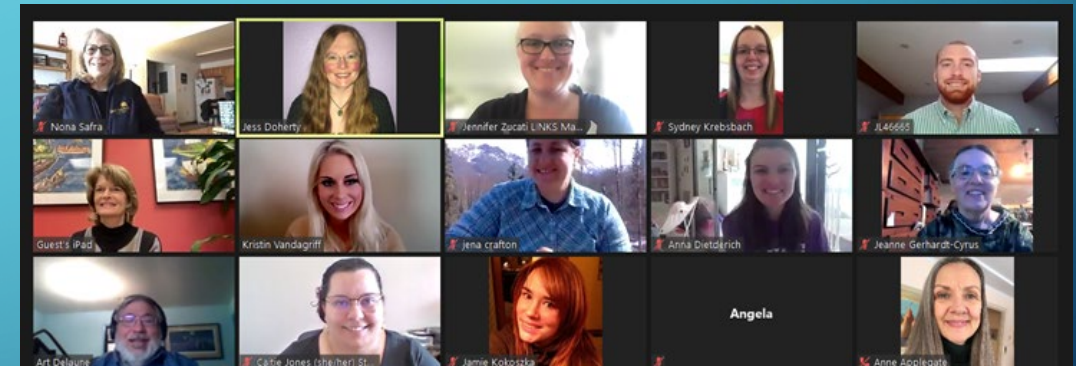
- Updates to Alaska ABLE Program to bring alignment with federal ABLE changes
- Council letter/concern relating to currently proposed Council consult role within the bill
- Passed House side; likely taken up again next session on the Senate side

HCBS funding; Medicaid funding

- Additional increment for pulling individuals off the I/DD waitlist
 - Note: Per SDS, the Registry/waitlist was at 799 individuals as of April 2021
- Trust Budget:
 - Alaska Training Cooperative
 - Alaska Autism Resource Center

DISABILITY POLICY SEMINAR (DPS):

- Virtual Hill Day Meetings with:
 - U.S. Congressman Young
 - U.S. Senator Sullivan
 - U.S. Senator Murkowski
- DPS Fact Sheets:
 - Community Living
 - Education
 - ABLE
 - Social Security
 - Criminal Justice
 - <https://disabilitypolicyseminar.org/fact-sheets/>



HCBS ACCESS ACT

Discussion Draft of the Home and Community Based Access Act (HAA):

- *“Creating a minimum set of services, that states can enhance, and requiring HCBS as part of Medicaid for those who are eligible, will help states create a network of providers and workers to deliver critical services and support. It will also eliminate the long waiting lists for services experienced by many eligible people in an estimated 41 states across the country.”*
 - https://debbiedingell.house.gov/uploadedfiles/home_and_community-based_services_access_act_-_memo_ad.pdf

VACCINATION & I/DD POPULATION:

- New federal funding to the Council to work on I/DD vaccination efforts!
- New National I/DD Vaccination Campaign
 - #GOTVaccine Campaign: <https://www.getoutthevaccine.org/>
 - Importance of messaging regarding vaccine hesitancy for I/DD population



SYDNEY
SELF ADVOCATE

"I am horribly afraid of needles. But, I talked to those I trust. I realized that I have to do this because not only am I saving my life, but I am saving other people's lives from getting COVID."

#GOTVACCINE

**GET OUT
THE VACCINE** 

AMERICAN RESCUE PLAN FUNDING AND HOME AND COMMUNITY-BASED SERVICES

- Per the Kaiser Family Foundation, “The recently enacted ARPA provides an additional 10 percentage point increase in federal matching funds for state spending on HCBS from April 2021 through March 2022, an estimated \$11.4 billion increase in federal spending nationally. Under the ARPA, states must maintain their current spending levels and use the increased funds “to enhance, expand, or strengthen” HCBS.”
 - <https://www.kff.org/medicaid/issue-brief/how-could-400-billion-new-federal-dollars-change-medicare-home-and-community-based-services/>

AMERICAN RESCUE PLAN FUNDING AND HOME AND COMMUNITY-BASED SERVICES

The Council recommended consideration of some important items brought up in its 2021 position papers which were developed by stakeholders:

- Initiate self-directed waiver service options for Alaskans on HCBS
- Initiate Adult Companion Services within HCBS

Additionally, the Council recommended using the ARPA HCBS funding to:

- Increase hours available within the day habilitation cap
- Increase the number of individuals drawn for the I/DD waiver from beyond the current 50 annual draw amount

Ultimately, these recommendations would well align the system with the social model as well as bring alignment with the Developmental Disability Shared Vision.

COUNCIL NEWS:



Staff transitions

Rehiring for:

- Planner III
- Program Coordinator II



Council member transitions

Terms expire at the end of
June

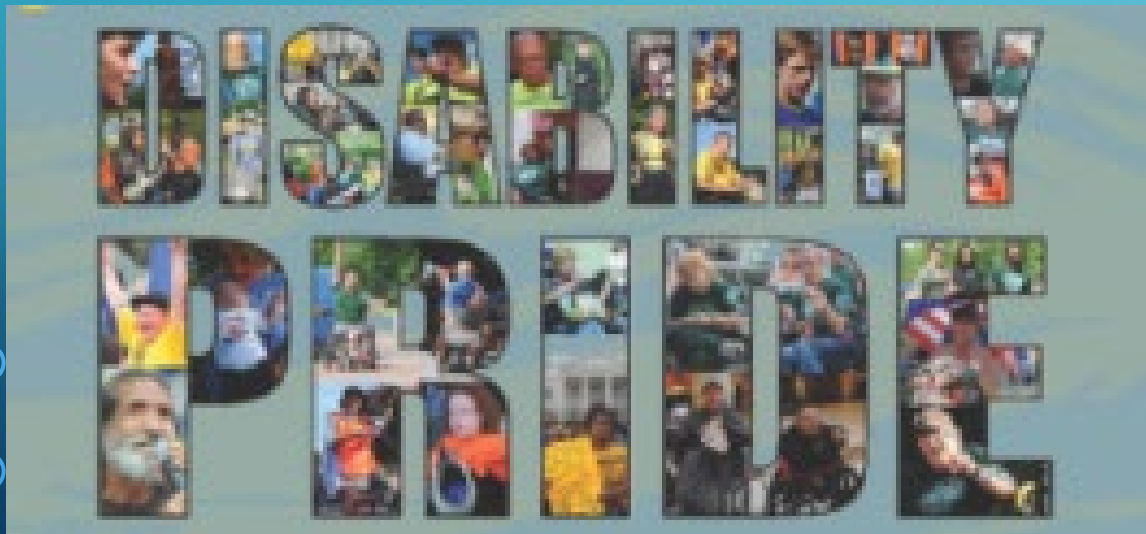


Fall 2021 Council meeting

Sept. 2021

DISABILITY PRIDE CELEBRATION:

July 26-30 2021
Noon-1pm each day



- Disability Pride means accepting and honoring each person's uniqueness and seeing disability as a natural and beautiful part of human diversity.
- Disability Pride awareness events promote visibility and mainstream awareness of the positive pride felt by people with disabilities.

DD ACT 5-YEAR PLAN:

Due: August 15, 2021

Starts: October 1, 2021



Goal 1

Community Inclusion, Supports, and Services

- **Objective 1:** Choice & Independence in Long-Term Supports and Services
- **Objective 2:** Housing
- **Objective 3:** Health and Healthcare
- **Objective 4:** Education & Early Development
- **Objective 5:** Emerging Needs

Goal 2

Self-Advocacy and Leadership

- **Objective 1:** DD Shared Vision Implementation
- **Objective 2:** Support Self-Advocacy Organization

Goal 3

Employment

- **Objective 1:** Employment First Implementation
- **Objective 2:** Traditional Transition

BENEFICIARY EMPLOYMENT AND ENGAGEMENT UPDATE

- **Alaska Work Matters Task Force Initiated!**

- Co-Facilitation by GCDSE and DVR
- Letter of Support issued by the Governor
- Joint Letter of Support issued by DOLWD and DHSS
- First task force meeting held in March 2021
- Roster link:
<http://dhss.alaska.gov/gcdse/Pages/committees/et/AKWorkMatters.aspx>
- Will culminate in a report to the Governor in February 2022

Tentative Core Topics:

- Private Sector: Building the capacity of the private sector to enhance employment opportunities for individuals with disabilities
- State as a Model Employer of individuals with disabilities
- Employment Services and Supports
- Prepare for Work and Transition
- COVID-19

QUESTIONS?



GOVERNOR'S COUNCIL ON DISABILITIES AND SPECIAL EDUCATION

Communications Update

Trust

Alaska Mental Health
Trust Authority

Communications Update

BOARD OF TRUSTEES

May 26, 2021

Communications Tools



Highlight: ADN Sponsored Content Series

- Six-part series - March 1-18, 2021
- Stakeholders highlighted
- More than 14,000 pageviews
- Strong performance on social media
 - 30K+ FB clicks
 - Almost 3K FB engagements
- Increased traffic to Trust webpage



Highlight: Annual Report & Comprehensive Grant Report



105



Highlight: Grantee Resources

New webpage for grantees linked in grant agreement

- Grant acknowledgment guidelines
- Communication supports
- Trust logos

Acknowledging Your Grant

Please use the following language to acknowledge your Trust grants:

This project was funded (or funded in part) by a grant from the Alaska Mental Health Trust Authority.
Please always refer to the "Alaska Mental Health Trust Authority." You may use "the Trust" on the second and subsequent references.

Description of the Trust

If you need a description of the Trust, please use the following:

Alaska Mental Health Trust Authority is a state corporation that administers the Alaska Mental Health Trust, a perpetual trust, to improve the lives of beneficiaries. The Trust operates much like a private foundation, using its resources to ensure that Alaska has a comprehensive integrated mental health program.

OR

The Alaska Mental Health Trust Authority is a perpetual trust that uses its resources to ensure that Alaska has a comprehensive integrated mental health program to serve Trust beneficiaries.

Please respect the following guidelines when including the Trust logo:

- Always use the logo in its entirety
- Do not alter the color of the logo
- Do not rotate, angle, or twist the logo
- Do not change the font or resize the text in the logo
- Whenever possible, placing it on a white background. Our reverse logo (100% black background if there is adequate contrast

Trust Logos

Website Highlights & Analytics

Webpage visits (April 2020-March 2021)

- 83K total users
- Top referrers are Facebook and DNR webpage
- Pages most visited:
 - Fall land sale 2020 (24K views)
 - Over-the-counter land sale page (22K views)
 - Homepage (18K views)
- Spikes in web traffic coincide with media campaigns



Earned Media Highlights

JUNEAU EMPIRE

Sign Out Subscribe



Michael Penn / Juneau Empire File Bruce Van Dusen, executive director of Polaris House, right, and staff member Levi LeCount give a tour of Polaris House in May 2017. Despite the challenges of the pandemic and a wreck that left them without a truck, work continues at Polaris House this holiday season.

Despite setbacks, work continues at Polaris House this Christmas.

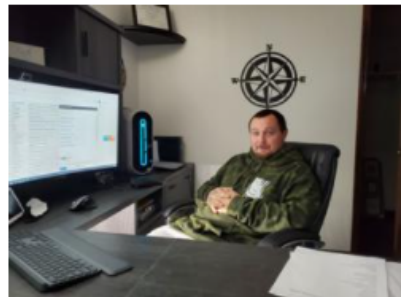
Listen Live 24/7



News Programming DJ Calendar Listener Submissions About KHNS

Haines Borough reaches trail agreement with Alaska Mental Health Trust

Posted by Mike Swasey | Mar 9, 2021 | News | 0



LOCAL NEWS STORIES

True North Recovery Receives \$71,000 Grant From Alaska Mental Health Trust

By Jacob Mann Frontiersman.com Jan 20, 2021

WASILLA — True North Recovery was one of several Valley organizations to receive a grant from the Alaska Mental Health Trust for this quarter.

FAIRBANKS

Daily News - Miner

a company of The Helen E. Smead Foundation, 501(c)(3)

Fairbanks will build a mobile team to help people in substance abuse crises

Alena Naiden, anaiden@newsminer.com Jan 31, 2021 Updated Jan 31, 2021



Social Media Highlights

- Facebook: 5,680 followers
- Instagram: 905 followers
- New in FY21 - boosted posts on Facebook
 - Increased engagement and reach
- High performers:
 - Grantee highlights
 - Design posts
 - News articles



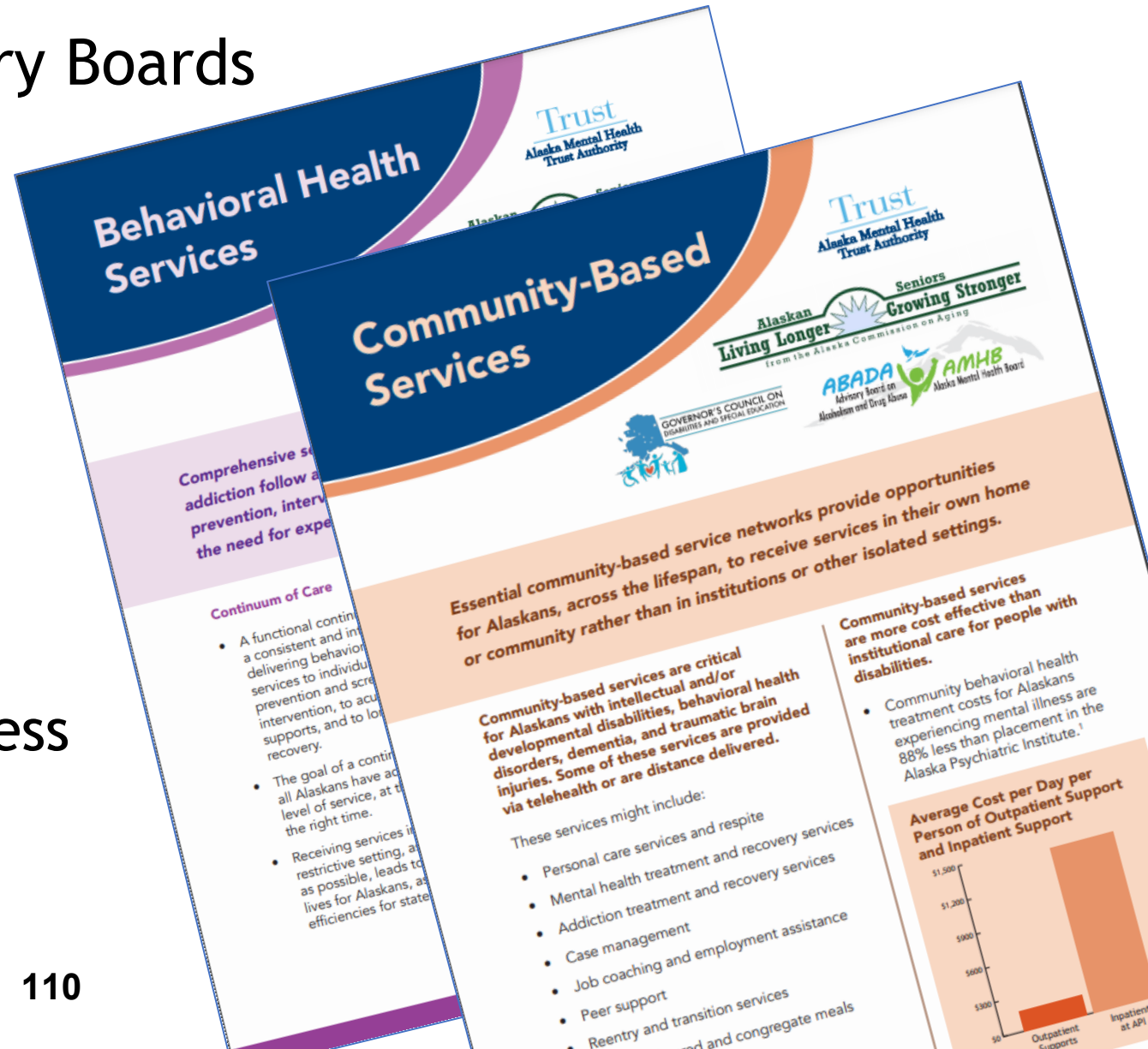
Joint Advocacy & Coordinated Communications

- Partnership with Advisory Boards

- 2021 Joint Priorities

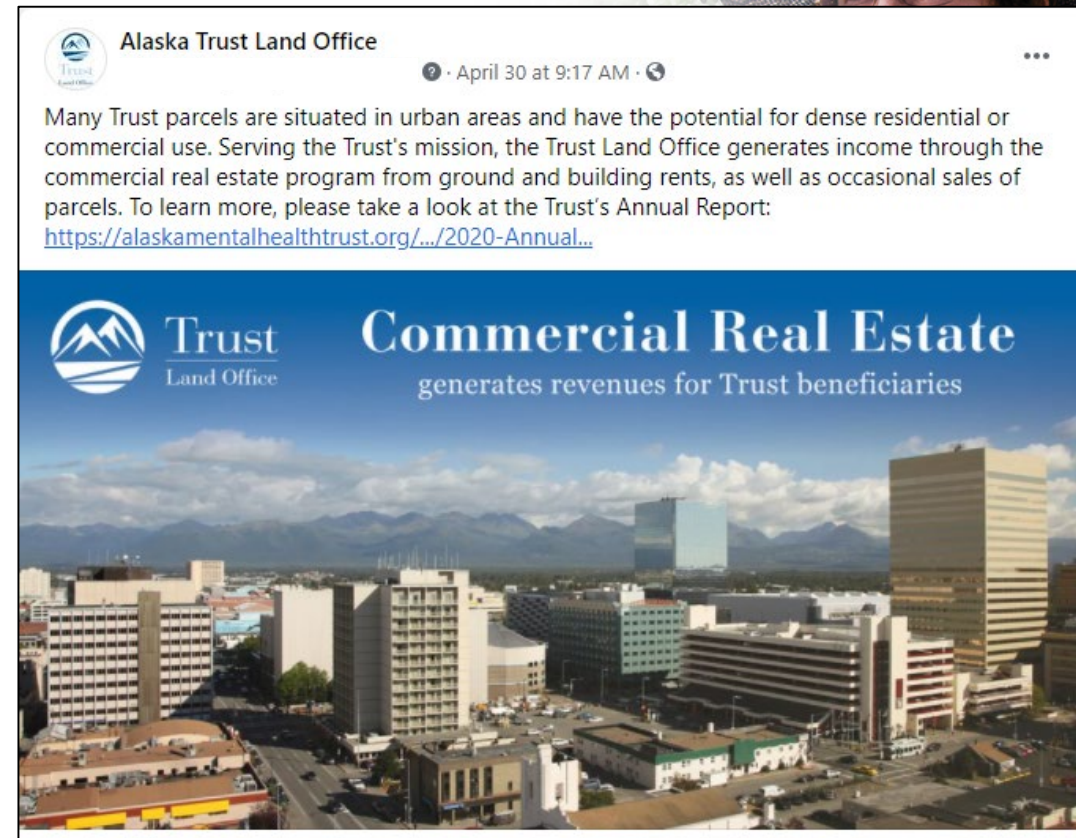
- Employment
- Behavioral Health Services
- Medicaid Health Coverage
- Community-Based services
- Supportive Housing

- Builds situational awareness



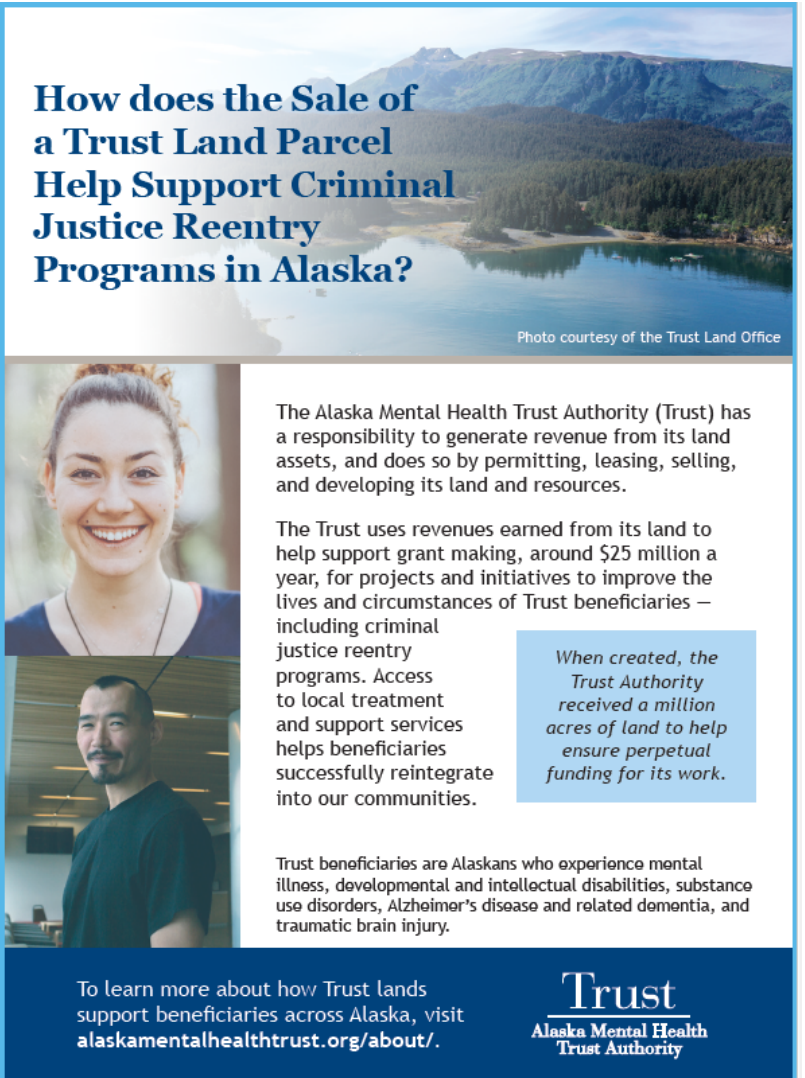
Trust Land Office Communications

- Fall Land Sale Campaign
- Over-the-Counter Land Sale Campaign
- TLO Facebook Page



Trust Lands Media Campaign

- Increase understanding of how TLO revenues support beneficiaries
- Nov. 2020 - March 2021
- Four ads developed
 - Land Sales/Reentry
 - Timber/ Beneficiary Employment
 - Minerals/SUD Treatment
 - Natural Gas/Community Services
- Multi-media
 - Print
 - Radio
 - Digital



How does the Sale of a Trust Land Parcel Help Support Criminal Justice Reentry Programs in Alaska?

Photo courtesy of the Trust Land Office

The Alaska Mental Health Trust Authority (Trust) has a responsibility to generate revenue from its land assets, and does so by permitting, leasing, selling, and developing its land and resources.

The Trust uses revenues earned from its land to help support grant making, around \$25 million a year, for projects and initiatives to improve the lives and circumstances of Trust beneficiaries – including criminal justice reentry programs. Access to local treatment and support services helps beneficiaries successfully reintegrate into our communities.

When created, the Trust Authority received a million acres of land to help ensure perpetual funding for its work.

Trust beneficiaries are Alaskans who experience mental illness, developmental and intellectual disabilities, substance use disorders, Alzheimer's disease and related dementia, and traumatic brain injury.

To learn more about how Trust lands support beneficiaries across Alaska, visit alaskamentalhealthtrust.org/about/.

Trust
Alaska Mental Health
Trust Authority



How does a Mineral Lease Help Fund Expanded Access to Addiction Treatment in Alaska?

The Alaska responsibility does so by

The Trust earned from and other its lands to grantmaking million a year and initiatives lives and circumstances of Trust beneficiaries projects to substance program c

Trust beneficiaries are Alaskans who experience mental illness, developmental and intellectual disabilities, substance use disorders, Alzheimer's disease and related dementia, and traumatic brain injury.

To learn more about how Trust lands support beneficiaries across Alaska, visit alaskamentalhealthtrust.org/about/.

Trust
Alaska Mental Health
Trust Authority

Lands Campaign Cont'd

- Radio spots
- Digital video

How does a natural gas lease help fund community-based services in Alaska?



The Trust funds programs that maximize independence and quality of life for beneficiaries.



These programs are funded in part through revenues generated on Trust land - including from natural gas leases.



Trust
Alaska Mental Health
Trust Authority

[Click here to learn more](#)


Beneficiary Stigma Media Campaign

- Positively changing perceptions and attitudes is key to addressing stigma
- Message includes stigma's impacts on housing, employment, access to services, and socialization (*you don't get to know me*)
- Originally launched in 2019



Stigma Campaign Cont'd

- Nov. 2021 - Mar. 2021
- Statewide
 - Cable TV
 - Digital
 - Programmatic display
 - Connected TV
 - YouTube
 - Social Media
- What's next?




Alaska Mental Health Trust Authority
February 24

You may not realize it, but most of us probably know someone who is a beneficiary of the Alaska Mental Health Trust. The Trust is helping to improve the lives of Alaskans who experience mental illness, developmental and intellectual disabilities, substance use disorders, Alzheimer's disease and related dementia, and traumatic brain injury.

The Trust works to promote understanding of our beneficiaries and the services they need to live full lives in their home communities. Beneficiaries are often affected by stigma and stereotypes, which can get in the way of a job, housing, or the services they need.

Learn more about stigma below [#StigmaHurts](#)

YOU KNOW ME



ALASKAMENTALHEALTHTRUST.ORG
What is Stigma?

[Learn More](#)

Research: Beneficiary Stigma

Survey was conducted to examine stigma towards Trust beneficiaries in Alaska

- Spring 2021
- Statewide
- Via phone
- Sample: 700 Alaska Adults 18+

Purpose:

- Identify stigma associated with our beneficiaries among Alaska's population
- Inform Trust efforts to address stigma
 - Messages
 - Tactics



How did we measure stigma?

- Examined 6 beneficiary types
 - Alcohol misuse
 - Drug misuse (opioids)
 - Traumatic brain injury
 - Intellectual/Developmental Disability (Autism Spectrum Disorder)
 - Mental Illness (Bipolar Disorder)
 - Alzheimer's disease
- A paragraph describing a person experiencing each beneficiary condition was developed
- After hearing the description, surveyors uses a series of agree/disagree statements to assess stigma

Some Findings

- Results indicate alcohol misuse is the most stigmatized
- Drug misuse is also stigmatized, but perceived as the likeliest to experience discrimination/be uncomfortable disclosing their condition
- Developmental disability is the least stigmatized of the conditions described in the survey
- Alzheimer's disease also scored "high" for some stigma statements



Perceptions: Subject Gender

Alcohol & Drug Misuse

- Males are seen as having more trouble maintaining employment
- Respondents more comfortable with a female having a relationship with their child or parent

Brain Injury

- Males are seen as more likely to be a danger to themselves or other

Mental Illness

- Females with this condition more likely to experience discrimination

Developmental Disability

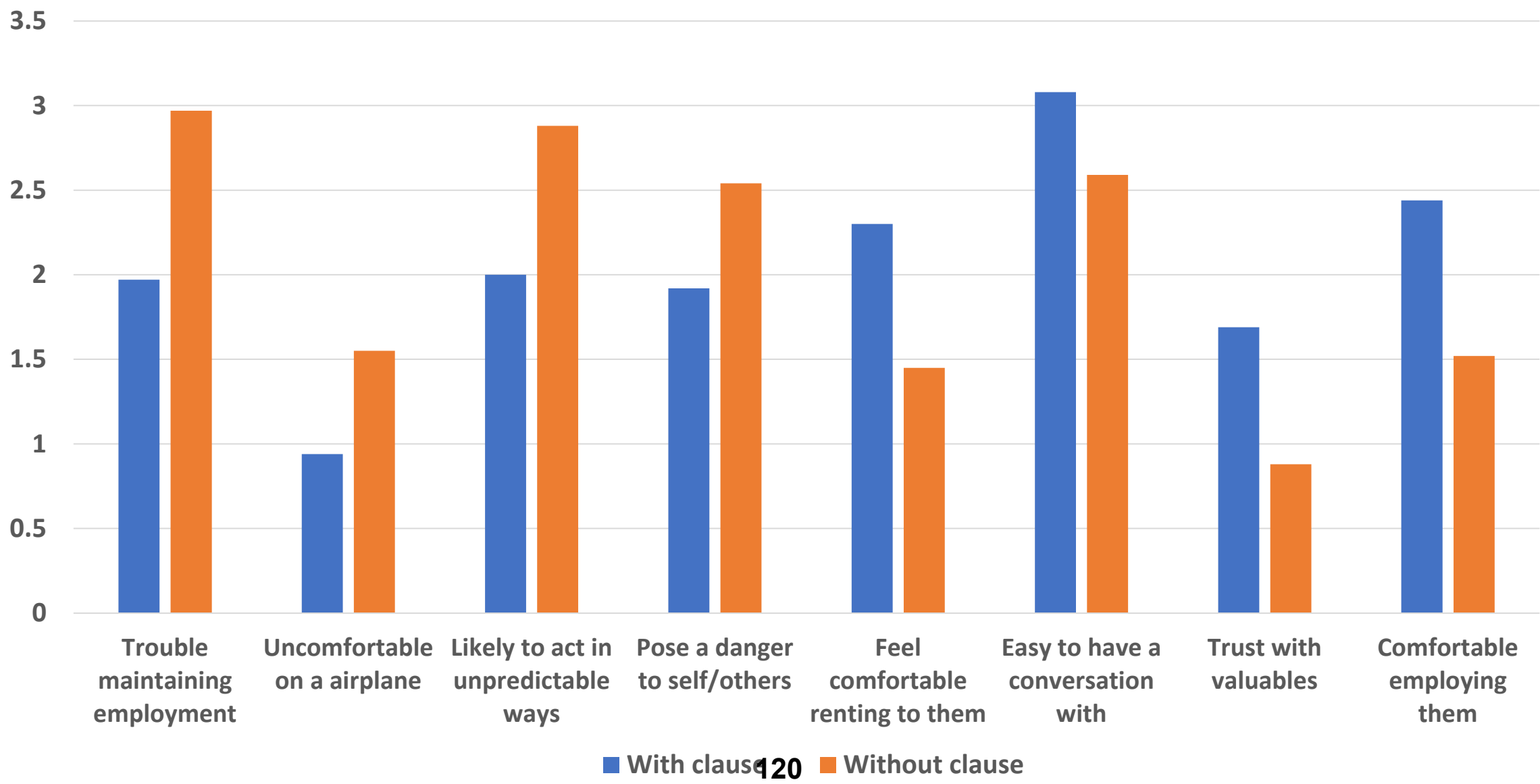
- Males perceived as more likely to act unpredictably

Alzheimer's disease

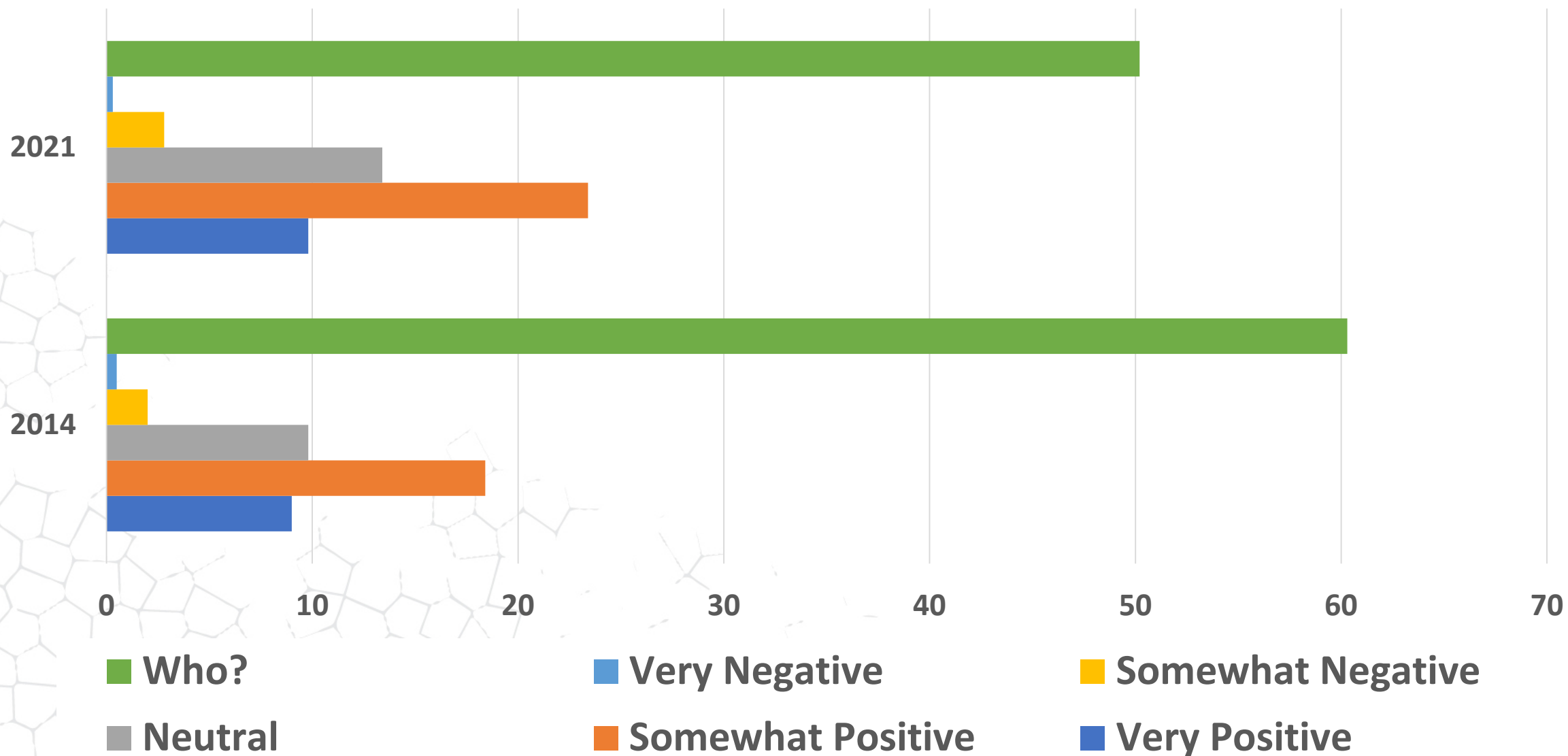
- Females scored significantly “worse” than men across the board



Condition Management Clause, Drug Misuse



Survey: Perception of the Trust



Thank you

Questions?





ALASKA STATEWIDE PUBLIC OPINION SURVEY

Alaska Mental Health Trust

April 2021

METHODOLOGY

FIELDING DATES: March 30 – April 12, 2021

SAMPLE SIZE: 700 Alaska adults aged 18+

FIELDING METHODOLOGY: 100% cellphone

MARGIN OF ERROR: +3.7% at 95% confidence

WEIGHTING: Data was weighted to yield an observed sample with a representative distribution by respondent age, race, education, gender, party affiliation and political ideology

DATA ANALYSIS: SPSS

CONTACT INFO: Ivan Moore 907-278-4600

ivan@alaskasurveyresearch.com

EXECUTIVE SUMMARY

Introduction

This is the first statewide survey conducted for the Alaska Mental Health Trust Authority since 2016, and the first done by Alaska Survey Research (formerly Ivan Moore Research) since 2014.

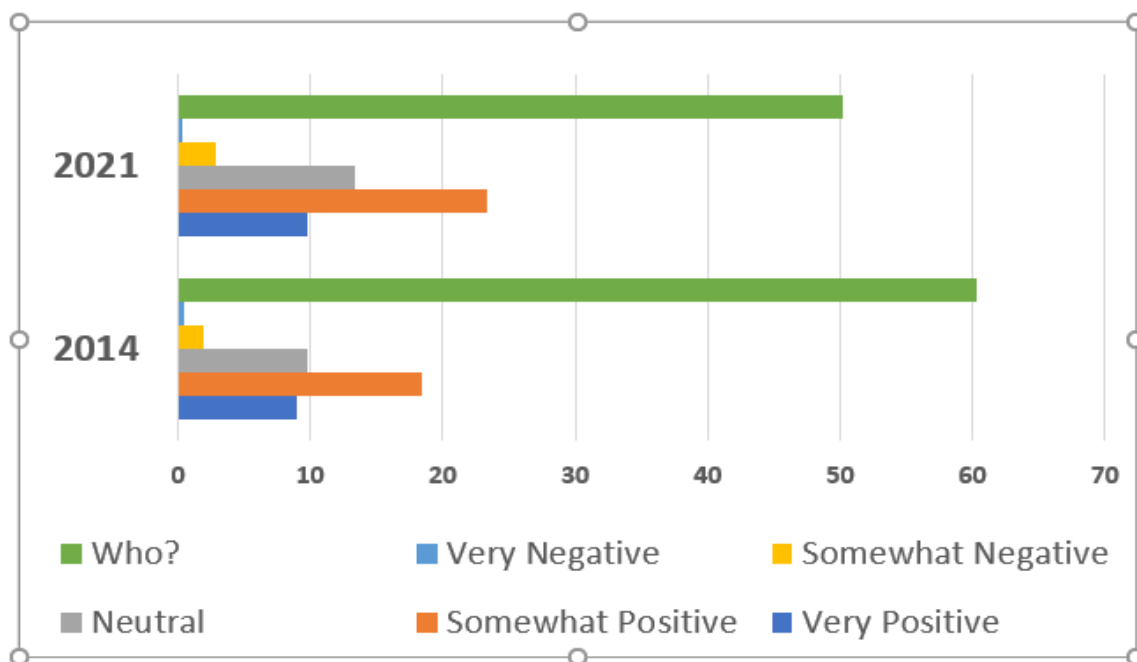
The principal purpose of this survey is to evaluate the degree of stigma that exists in the Alaska population towards people who are beneficiaries of the Trust. Stigma can manifest in a number of different ways and towards people with different conditions. We measure the extent each is held in the Alaska population and we seek also to identify demographic groups where the stigma is elevated.

AMHTA's Rating

Q: Have you ever heard of an organization called the Alaska Mental Health Trust Authority? Q: Are your feelings toward the Alaska Mental Health Trust Authority very positive, somewhat positive, somewhat negative, or very negative?

Results for these two questions were combined, as follows:

	Very Positive	Somewhat Positive	Neutral	Somewhat Negative	Very Negative	Who?
2014	9.0%	18.4%	9.8%	2.0%	0.5%	60.3%
2021	9.8%	23.4%	13.4%	2.8%	0.3%	50.2%



This is not a particularly dramatic shift for a seven-year timespan, but in these situations we should be grateful for positive movement!

- ✓ Total positive (very + somewhat) up from 27.4% to 33.2%
- ✓ Who? Rating down from 60.3% to 50.2%

The negative rating has ticked up slightly, from 2.5% to 3.1% but this is not significant, and not outside the realm of the other shifts we see here.

Good result.

Stigma

Beneficiaries of the Alaska Mental Health Trust experience a variety of stigmas in the everyday lives. The goal of this survey was to evaluate and measure how prevalent these stigmas are in the general population, for each of the six beneficiary types.

To this end, we crafted descriptions of six individuals that were read to survey respondents, as follows:

Alcohol Misuse

Individual 1 is Anne. Anne is dependent on alcohol. She's tried to stop drinking but hasn't been able to on her own. Her friends have noticed that she often appears tired and maybe hung-over when they see her and notice also that she's become more unreliable and withdrawn from her regular activities. (*Anne has seen her doctor about options and has recently started attending a support group.*)

Drug Misuse

Individual 2 is Patty. Patty started with prescription painkillers following a knee surgery, but it developed into a dependency for opioids. Her opioid usage severely impacted her relationships with family and friends, and it has taken a toll on her physical health. (*Patty is now on medication to help her with her dependency, and is undergoing counseling. She has not used for 7 months.*)

Traumatic Brain Injury

Individual 3 is Maggie. A few years ago, Maggie was in a bad car accident and suffered a traumatic brain injury. Today, she has trouble concentrating and sometimes can't remember things. When she wants to say something, sometimes it doesn't come out right. (*She is now undergoing rehabilitation treatment with a physical and speech therapist and is regaining some of the abilities she used to have.*)

Mental Illness

Individual 4 is Paula. Paula experiences bipolar disorder. Her condition causes episodes of extreme mood swings several times a year. During a depressive episode, Paula may have difficulty managing her day-to-day activities, and experiences fatigue and loss of energy. During a manic episode, she is very upbeat and talkative, but easily distracted. (*Paula manages her condition with medication and counseling.*)

Developmental disability

Individual 5 is Bridget. Bridget experiences Autism spectrum disorder. While her autism is quite moderate, she does have a tendency to engage in repetitive behaviors, can be rigid about sticking to routines and schedules, and has difficulty engaging in conversation and reading social cues. (*Bridget goes to a weekly group meeting with other people with autism, and works with a specialist who is helping her with her speech and communication.*)

Alzheimer's Disease

Individual 6 is Emma. Emma has been diagnosed with Alzheimer's disease. She often has a hard time coming up with the right word or name when speaking and has begun to frequently misplace objects in her home. She has also begun to get easily frustrated or angry in situations that would never have upset her before. (*Emma is currently on medication to slow the progression of her Alzheimer's and help manage her behavioral symptoms.*)

Each description has three phases:

- 1) The individual and the issue they have
- 2) The effect it has on their daily lives, and
- 3) A statement about what they are doing to address or manage their condition

Two split samples were conducted during the reading of these paragraphs.

First, equivalent male paragraphs were crafted for each beneficiary group subject. Respondents were read male/female descriptions with 50-50 probability, the goal being to eliminate any gender bias from our data, and to allow us to evaluate whether there are significant differences in the ways male and female beneficiaries are viewed.

Second, again on a 50-50 probability, the clause noting what each subject was doing to address or manage their condition (management clause, italicized in each paragraph above) was either read or not read. With this split, the goal is to see the effect that reading the management clause has on the stigma that each paragraph elicits.

We will summarize significant findings from these tables later in this executive summary.

The Stigma Statements

After the reading of each paragraph, eleven agree-disagree statements were read to respondents concerning the individual who had just been described.

The statements were (arbitrarily using Anne as the subject):

Anne would (wouldn't) be likely to worry about what people would think if she disclosed her condition

Anne would (wouldn't) be likely to have trouble maintaining employment

I would (wouldn't) feel uncomfortable if Anne sat next to me on an airplane

Anne would (wouldn't) be likely to act in unpredictable ways

Anne would be likely (unlikely) to pose a danger to herself or others

Anne would (wouldn't) be likely to experience discrimination in her community

If I was a landlord, I would (wouldn't) feel comfortable renting an apartment to Anne

I would find it easy (hard) to have a conversation with Anne

I would (wouldn't) be comfortable if my parent or child had a friendship with Anne

I would (wouldn't) trust Anne to be responsible for something valuable of mine

I would (wouldn't) be comfortable employing someone like Anne

A third split sample was used for these statements, where each statement was “reversed” 50% of the time by substituting the word in parentheses. For example, 50% of the time, the first statement was asked reading “would be likely to worry”, the other 50% of the time “wouldn't be likely to worry” was used. This was done to remove any bias associated with whether statements were worded in a way that asserts the existence of stigma, or in a way that asserts its non-existence.

IMPORTANT: Doing this wording reversal naturally flips the result for half the sample. A statement that has overwhelming agreement when read positively, would likely have overwhelming disagreement when read negatively. The aggregating of the two halves only makes sense if we reverse one of them. We chose to “flip” the result for the negative statement (using the italicized words) so it essentially becomes positive. Combining the results then makes sense and reflects the result for the positive wording, but one that removes bias associated with how the statement is worded.

For example (Frequencies Page 5), 70.5% agree, 21.1% disagree is the result for “Anne would be likely to worry about what people would think if she disclosed her condition”. It is the aggregate of the 50% worded positively, plus the flipped result for the negative statement.

Results

Results for each of the eleven statements for each of the six beneficiary conditions can be reviewed in the questionnaire and frequency section between Pages 5 and 25. The easiest way to review them all in a single table is to consider the mean results of the agree-disagree results.

The numeric values of the five points of the agree-disagree scale are as follows:

- Strongly agree – 4
- Mildly agree – 3
- Neutral/Not sure – 2
- Mildly disagree – 1
- Strongly disagree – 0

Thus, the mean is analogous to an agreement GPA that ranges from 0 (100% strongly disagree) up to 4.0 (100% strongly agree).

Here are our results, in mean form:

STATEMENT	Alcohol	Drugs	Brain Injury	Mental illness	Developmental disability	Alzheimer's
Likely to worry what other people would think if he/she disclosed his/her condition	2.82	2.88	2.62	2.82	2.44	2.49
Likely to have trouble maintaining employment	2.80	2.50	2.42	2.34	2.13	2.93
I would feel uncomfortable if he/she sat next to me on an airplane	1.43	1.27	0.83	1.08	1.02	1.00
Would be likely to act in unpredictable ways	2.61	2.47	2.16	2.73	2.18	2.85
Would be likely to pose a danger to him/herself or others	2.53	2.25	1.43	2.03	1.26	2.37
Would be likely to experience discrimination in his/her community	2.50	2.74	2.41	2.60	2.62	2.27
I would feel comfortable renting an apartment to him/her	1.71	1.85	3.01	2.74	3.06	2.16
I would find it easy to have a conversation with him/her	2.77	2.82	3.11	3.14	2.80	2.68
I would be comfortable if my parent or child had a relationship with him/her	1.97	2.06	3.26	2.88	3.28	3.07
I would trust him/her to be responsible for something valuable of mine	1.30	1.26	2.26	2.19	2.44	1.16
I would be comfortable employing someone like him/her	1.60	1.95	2.86	2.60	3.02	1.81

The bolded red results are the lowest stigma results, the bolded blue are the highest stigma. Note that sometimes these are high values, sometimes low. For example, for the last item “I would be comfortable employing him/her”, the highest mean value is the highest agreement which is the lowest stigma = 3.02 for developmental disability. Similarly, the lowest mean is the highest disagreement, which is the highest stigma = 1.60 for alcohol.

The yellow highlights represent the eight overt stigma-measuring statements. The other three, while they are important measures, don't necessarily reflect a respondent's stigma, but are more objective. The eight statements measure stigma related to employment, physical proximity, unpredictability, dangerousness, housing, relationships and trust.

Findings

- Developmental disability scores the lowest stigma results for six of the eight stigma statements. It's very close to best on a seventh (likely to act in unpredictable ways). Sitting next to him/her on an airplane is the only DD result with an appreciable stigma score.
- Alcohol is the most stigmatized, with high stigma results for five of the eight statements, including all four of the "discomfort" variables. Respondents aren't comfortable sitting next to them, employing them, renting an apartment to them, or with a parent or child having a relationship with them.
- Alzheimer's disease takes the other three high stigma results, for having trouble maintaining employment, acting in unpredictable ways and trusting them with something valuable. These are quite predictable results.
- It's notable that the results for drug abuse are not nearly as negative as those for alcohol, on several of these stigma statements. They do get the "high stigma" result on two variables, but neither of them are the yellow, "subjective stigma" variables. Respondents perceive drug abuse as the likeliest to experience discrimination, and the ones who worry most about revealing their condition.

A different way to quantify these results

Let's do this a different way. For each of the eight subjective stigma statements, let's give 1 "stigma point" for a "mildly agree" or "mildly disagree" response for the stigma position, and 2 points for a "strongly agree" or "strongly disagree" response.

For example, for the statement "I would feel uncomfortable if he/she sat next to me on an airplane", if a respondent mildly agrees, they get 1 point, if they strongly agree, they get 2 points. Add up the points for each of the eight statements and we get a Stigma Score for each respondent, for each condition. Perfect score – 0 points. Worst, most high stigma score – 16 points.

We will also recode the responses into Low stigma (0-2 points), Medium stigma (3-7 points) and High stigma (8+ points).

Here are the results:

MEASURE	Alcohol	Drugs	Brain Injury	Mental illness	Developmental disability	Alzheimer's
Mean stigma score (0-16)	6.51	5.95	3.08	4.06	2.84	5.94
High stigma (8+) %	38%	34%	6%	13%	5%	31%
Moderate stigma (3-7) %	46%	40%	43%	52%	43%	55%
Low stigma (0-2) %	16%	26%	51%	35%	52%	14%

- Alcohol misuse – has the highest mean stigma score, and the highest 8+ High Stigma %
- Drug misuse – shows similar results to alcohol, not far behind on both measures
- Alzheimer's – shows the lowest (0-2) low stigma %.
- Developmental disability – minimal 8+ High Stigma %, and the lowest mean stigma score
- Brain Injury – very similar results to developmental disability
- Mental illness – mean stigma score and 8+ High Stigma % sort of middling

Significant demographic differences

We can look at these mean Stigma Scores and look at demographics where the mean results show significant variance between demographic groups. A few interesting and significant results arise:

By Political ideology

Politically conservative respondents generally have more stigmatizing views, particularly on drug misuse and developmental disabilities.

By gender

Alzheimer's shows a significant variance by gender. Female respondents, particularly married women, demonstrate significantly more subjective stigma on Alzheimer's than men do.

Age of respondent

Fascinating results here, showing almost linear increase in stigma scores the older our respondents get, on alcohol misuse, mental illness and developmental disability.

Analysis of the Splits – Subject Gender

To recap, a 50-50 split was performed to determine the gender of the subject of each of the six paragraphs. The paragraphs read to each respondent were randomized, so that each received a total of four and they got a variety of genders for the individuals described.

The following listing identifies the results that show significant differences in agreement for certain statements.

Alcohol misuse

For alcohol misuse, respondents were more likely to agree...

- A male subject would have trouble maintaining employment (Male 2.93, Female 2.69)
- They'd be comfortable if a parent or child had a relationship with a female subject (Female 2.15 Male 1.77)

Drug misuse

For drug misuse, respondents were more likely to agree...

- A male subject would have trouble maintaining employment (Male 2.63, Female 2.38)
- They'd be comfortable if a parent or child had a relationship with a female subject (Female 2.21 Male 1.90)

These two results are very similar to the alcohol misuse results above.

Traumatic Brain Injury

For brain injury, respondents were more likely to agree...

- They'd be uncomfortable if a male subject sat next to them on an airplane (Male 0.95 Female 0.68)
- A male subject would pose a danger to themselves or others (Male 1.54 Female 1.29)

Mental illness

For mental illness, respondents were more likely to agree...

- A female subject would be likely to experience discrimination (Female 2.73 Male 2.47)

Developmental disability

For developmental disability, respondents were more likely to agree...

- A male subject would be likely to act in unpredictable ways (Male 2.29 Female 2.05)

Alzheimer's disease

For Alzheimer's disease, respondents were more likely to agree...

- A female subject would have trouble maintaining employment (Female 3.07 Male 2.79)
- A female subject would be likely to act in unpredictable ways (Female 3.01 Male 2.68)
- A female subject would pose a danger to themselves or others (Female 2.56 Male 2.18)
- A male subject could be trusted to be responsible with valuables (Male 1.35 Female 0.98)
- They'd be comfortable employing a male subject (Male 1.98 Female 1.64)

These are very notable results for Alzheimer's, that show significantly higher stigma towards females than males.

Analysis of the Splits – Condition management clause

Similarly, for each of the six conditions, a 50-50 split was conducted determining whether the recovery clause was included in the reading of the paragraph. The following analysis identifies the statements which get significantly different agree-disagree response depending on whether the recovery clause was included or not.

Alcohol misuse

The condition management clause reads *"Anne/Alan has seen her/his doctor about options and has recently started attending a support group"*.

With the clause included, respondents are...

- More likely to find it easy having a conversation with them (With clause – 2.91 Without clause – 2.60)
- More likely to be comfortable if a parent or child had relationship (With clause 2.12 Without clause 1.78)
- More likely to be comfortable employing them (With clause 1.71 Without clause 1.47)
- Less likely to agree that subjects pose a danger to self or others (With clause 2.41 Without clause 2.67)

Drug misuse

These following results are extremely strong. Forget about 95% significance, these are 99.99+% significant. In statistics parlance, the null hypothesis essentially has zero probability. Nine of the statements are significant. In fact, it's interesting to note which two are not... whether they are likely to worry about what people would think if they disclosed their condition, and how likely they would be to experience discrimination in the community.

The condition management clause reads *"Patty/Pete is now on medication to help her/him with her/his dependency, and is undergoing counseling. She/He has not used for 7 months"*

With the clause included, respondents are...

- More likely to feel comfortable renting to them (With clause 2.30 Without clause 1.45)
- More likely to find it easy having a conversation with them (With clause 3.08 Without clause 2.59)
- More likely to be comfortable if parent or child had relationship (With clause 2.39 Without clause 1.77)
- More likely to trust to be responsible with valuables (With clause 1.69 Without clause 0.88)
- More likely to be comfortable employing them (With clause 2.44 Without clause 1.52)

- Less likely to have trouble maintaining employment (With clause 1.97 Without clause 2.97)
- Less likely to be uncomfortable sat next to me on airplane (With clause 0.94 Without clause 1.55)
- Less likely to act in unpredictable ways (With clause 2.00 Without clause 2.88)
- Less likely to pose a danger to self or others (With clause 1.92 Without clause 2.54)

Brain Injury

The condition management clause here is *"She/He is now undergoing rehabilitation treatment with a physical and speech therapist and is regaining some of the abilities she/he used to have"*.

With the clause included, respondents are...

- More likely to trust to be responsible with valuables (With clause 2.50 Without clause 2.00)

Mental illness

The condition management clause here is *"Paula/Paul manages her/his condition with medication and counseling"*.

Despite the brevity of the statement, we see significances with four of the statements.

With the clause included, respondents are...

- More likely to trust to be responsible with valuables (With clause 2.39 Without clause 1.98)
- More likely to be comfortable employing them (With clause 2.74 Without clause 2.45)
- Less likely to have trouble maintaining employment (With clause 2.18 Without clause 2.51)
- Less likely to act in unpredictable ways (With clause 2.57 Without clause 2.88)

Developmental Disability

Just one significant difference here, and it isn't hugely strong.

The condition management clause here is *"Bridget/Brian goes to a weekly group meeting with other people with autism, and works with a specialist who is helping her/him with her/his speech and communication"*

With the clause included, respondents are...

- More likely to be uncomfortable sat next to me on airplane (With clause 1.14 Without clause 0.87)

Alzheimer's disease

Finally, Alzheimer's. Just one significance here too.

The condition management clause here is *"Emma/Eric is currently on medication to slow the progression of her/his Alzheimer's and help manage her/his behavioral symptoms"*

With the clause included, respondents are...

Less likely to experience discrimination (With clause – 2.09 Without clause – 2.41)

Thank you for the opportunity to conduct this research. Further questions and/or requests for additional analysis can be sent to ivan@alaskasurveyresearch.com

Finance Committee Report / Update

To: Chris Cooke, Chair
Through: Mike Abbott, Chief Executive Officer
From: Carol Howarth, Chief Financial Officer
Date: May 13, 2021
Re: Finance Committee Report

REQUESTED MOTION 1:

The board of trustees approve the incremental building expenditures, totaling \$12,256,035 budgeted for the fiscal year 2022 to be paid by the property manager from rents and other income collected from the properties.

REQUESTED MOTION 2:

The board of trustees approve funding and instruct the CFO to transfer up to \$269,442 to the third-party property manager, as requested by the TLO, for operating expenses and capital expenses to the Non-Investment/Program Related Real Estate and REMP Real Estate properties from the Central Facility Fund for the fiscal year 2022, which appropriation shall not lapse.

REQUESTED MOTION 3:

The board of trustees authorize spending \$173,083.33 from the Central Facility Fund for the November 2021 through June 2022 portion of Real Estate Advisor's contract.

Meeting Summary:

There has been one meeting of the Finance Committee since the last board report, occurring on April 22, 2021. The meeting was attended via the online WebEx platform by trustees Anita Halterman (chair), Vernè Boerner, Rhonda Boyles, Chris Cooke, Annette Gwalthney-Jones, Brent Fisher and John Sturgeon.

The meeting of the Finance Committee was called to order by Trustee Halterman at 9:00 am.

Staff Reports

Mike Abbott reviewed expected full year expenditures for the TLO and Trust Authority, and Mental Health Trust Authority Authorized Receipts (MHTAAR) and Authority Grants. He emphasized the Trust's determination to disburse budgeted funds to work for beneficiaries, but the Trust was not expected to succeed in FY21 due to the impact of COVID-19. Roughly \$400K of lapse would occur in

Administrative Activities, \$361K of lapse would occur with MHTAAR, and potentially \$1.2MM in Authority Grants.

Carol Howarth reviewed the financial summary year-to-date (YTD) through March 31, 2021.

Operationally,

- Expenditures related to travel, services and supplies—below plan YTD—were beginning to increase in Quarter 4;
- \$8.5MM in Authority Grants were expected for Quarter 4;
- Total operating expenditures for the full year were anticipated at \$2MM below the \$32.7MM budget; and
- \$1,230,000 expenditures for Icy Cape Minerals Development project were anticipated to be expended in Quarter 4.

For Receipts, the full year forecast for

- TLO income was expected to be slightly above plan, at \$28.7MM;
- APFC and Treasury investment earnings would be kept at the March level of \$128MM (20% YTD return, and \$90MM over the \$34MM planned);
- FY21 commercial real estate distributions of \$1.6MM would be near FY20 levels; but
- Interest income on operating-related cash balances would be a loss (through Quarter 3, a negative \$220,000).

In response to questions about the transfer of TLO-generated principal income to the APFC managed Trust Fund, staff explained transfers were based on a Trustee-approved target balance for the TADA account (the intermediate holding account for TLO principal income), approved annually, and income was regularly transferred.

The asset allocation of the General Fund and Other Non-Segregated Investments (GeFONSI) account was explained in response to a trustee question: over 70% cash equivalents and the remainder fixed income. It was noted that DOR has a strong history in cash management, and the Trust's roughly \$28MM was a small part of a much larger cash management account. (Note: <https://treasury.dor.alaska.gov/Investments/GeFONSI.aspx>, actual 77% cash equivalents, 23% core US fixed income, \$3.12B).

Highlights of the \$831MM in Trust Resources included:

- \$450.9MM Trust Fund balance, up \$1.1MM for the 3rd Quarter;
- \$50MM designation in April to the Trust Fund from APFC managed Budget Reserves for inflation proofing; and
- March's Total Budget Reserves of \$288MM and Available Budget Reserves of \$131MM, resulting in \$34.7MM over of the 400% reserves target.

In response to a comment about regular inflation proofing, staff recognized that recommendation, noting that the most recent \$120.3MM inflation proofing trued up the Trust Fund through December 2020 and it would be reasonable to review inflation proofing after finalization of FY21 financials.

Commercial Real Estate (CRE) Update

Carol Howarth updated Trustees on the activities to refinance the CRE. It was hoped that the Trust could successfully negotiate terms, via its commercial broker, in the following few days. The principal would be close to \$32MM, with interest-only financing of a portfolio of five assets. Information on prepayment penalties was requested.

Marisol Miller reviewed the Central Facility Fund (CFF), a fund supporting Program Related Investments (PRI) and CRE. The purpose was explained: to cover anticipated and unanticipated property cash shortfalls, and the Harvest contract. FY21 obligations were summarized: \$620K in prior Trustee approval for capital expenditures, \$53K for operating support, and \$345K for the Harvest contract. FY22 proposed uses of \$564K were reviewed, of which \$269K was for PRI and CRE support, and \$295K was for the Harvest contract.

David McDonald presented an overview of the US commercial real estate market, with data on the current oversupply, trends in response to COVID, and expectations for tightening supply over the next few years. He also presented an update on the CRE assets.

Motion 1: *Recommend for Trustee approval \$12,256,035 for FY22 budgeted expenditures for CRE and PRI assets to be paid by the property managers from rents and other income collected.*

The motion was presented by Trustee Cooke, seconded by Trustee Fisher, and passed unanimously. Marisol Miller reviewed the FY22 forecasts for the CRE, PRI and support from the CFF. Mike Abbott noted that both Promontory Point and Amber Oaks would not show positive contributions to the Trust because of one-time expenses needed to secure leases for the properties, that there were reserves to cover the expenses, the TLO had demonstrated frugality and management effectiveness, and the motion should be supported. There were no Trustee comments or questions.

Motion 2: *Recommend for Trustee approval \$269,442 for FY22 operating and capital expense. This will not lapse.*

The motion was presented by Trustee Boyles, seconded by Trustee Sturgeon, and passed unanimously. Marisol Miller reviewed the \$22.5K in operating support required by the Trust Authority Building and the \$246.9K financial support anticipated for Amber Oaks. There were no Trustee comments or questions.

Motion 3: *Recommend for Trustee approve \$173,083.33 from the CFF to fully budget the FY22 Harvest contract.*

The motion was presented by Trustee Cooke, seconded by Trustee Gwaltney-Jones, and passed unanimously.

Carol Howarth explained that the Year 2 contract approval crossed fiscal years, and this approval would align the approved amount with the full fiscal year.

The Finance Committee adjourned at 10:47 am. The next scheduled meeting of the Finance Committee is **July 29, 2021.**



To: Anita Halterman, Chair
Finance Committee
From: Marisol Miller
Date: 4/21/2021
Re: FY22 Real Estate & Program-Related Real Estate Facility
Budgets
Fiscal Year: 2022
Amount: \$12,256,035

Approval

Proposed RMC Motion:

Proposed Motion One: “The Finance Committee recommends that the Alaska Mental Health Trust Authority board of trustees approve the incremental building expenditures, totaling \$12,256,035 budgeted for the fiscal year 2022 to be paid by the property manager from rents and other income collected from the properties.”

Proposed Motion Two: “The Finance Committee recommends that the Trust Authority board of trustees approve funding and instruct the CFO to transfer up to \$269,442 to the third-party property manager, as requested by the TLO, for operating expenses and capital expenses to the Non-Investment/Program Related Real Estate and REMP Real Estate properties from the Central Facility Fund for the fiscal year 2022, which appropriation shall not lapse.”

Proposed Motion Three: “The Finance Committee recommends that the full board of trustees authorize spending \$173,083.33 from the Central Facility Fund for the November 2021 through June 2022 portion of Real Estate Advisor’s contract.”

Background:

Introduction:

Each year the TLO presents the budget for managing the commercial and program related real estate properties. These are based on the TLO’s projections for occupancy and the related capital and operating expenses for each property in FY22. If approved, this budget allows the TLO to manage these properties within the constraints of the approved budget but with flexibility to manage cash flows and obligations to maintain the facilities in good working order, attractive to tenants, and for appropriate revenue production. In each property throughout the year, cash reserves and distributions are determined based on projected needs. In addition to this budget approval, the

board has previously approved additional funding from the Central Facility Fund for specific operating or capital improvements that could not be covered by property cash flows. If changing conditions require spending not authorized in this proposed budget, the Trust will come back to the Trustees with a recommendation to amend the budget.

This year particularly some of the gross receipts and debt service could have a substantial variance depending on the outcome of the refinance and leasing efforts. Two Texas properties, Amber Oaks and North Park, have significant current vacancies. The proposed budget anticipates the use of building reserves, accumulated for each property in prior years for this type of situation, to augment the revenues for those two buildings. Additionally, Amber Oaks also requires funds from the Central Facility Fund to balance its revenues and expenses. Both are expected to have new tenants and be fully leased in FY22. Depending on the amount of space leased, timing, and terms, the revenues may be greater for North Park and Amber Oaks than the projections in the proposed budget. The proposed budget includes operating and capital expenses for those properties that include significant one-time expenses associated with recruiting new tenants as required by local market conditions. If revenues exceed expectations and/or expenses are less than expected, then the use of building reserves and CFF funds will be reduced.

Although we remain optimistic that we will complete a refinance of most of the debt associated with the portfolio, the benefits of that refinance are not included in the proposed budget. If successful, the refinancing will significantly reduce the debt service expense for several properties. If the refinance is accomplished, overall expenses will be significantly lower than are budgeted here and net revenue will be significantly higher.

If the portfolio refinance is unsuccessful, there is a \$6.3m balloon payment due for North Park in FY22. In that event, the staff will bring the Trustees a recommendation for addressing it at a later date.

FY22 Real Estate Budget from rent and other property income (Proposed Motion One)

Transaction/Resource: Budgets are presented to seek approval from the board of trustees for the expenditures necessary to service the properties. The proposed property expenditures are funded by tenant rents and other income collected from the properties.

Property Description/Acreage/MH Parcel(s): Real Estate Management Plan and Non-Investment Program Related Properties are as follows:

Real Estate Management Plan

1111 Israel Road; Tumwater, WA
1973 North Rulon; Ogden, UT
2600 Cordova Street; Anchorage, AK
2618 Commercial Drive; Anchorage AK
2420 & 2500 Ridgpoint Drive; Austin, TX
17319 San Pedro Avenue; San Antonio, TX
9601 Amberglen Blvd; Austin, TX

Non-Investment-Program Related Properties

3745 Community Park Loop Road; Anchorage, AK
650 Yonker Court; Fairbanks, AK
2330 Nichols Street; Anchorage, AK
1300 Moore Street; Fairbanks, AK
1423 Peger Road; Fairbanks, AK

General Background: We have established a system to adequately plan, manage, audit and report activity in the real estate portfolio. Asset Managers oversee and direct professional management services, the property information is accounted for by:

- 1) matching income to expenses;
- 2) comprehensive reporting and budgeting for each property; and
- 3) capital expense forecasting.

Anticipated gross revenues from property rents for FY22 is \$13.9 million. This projection accounts for known revenue sources with current occupancy levels, expected expiration of leases, and conservative filling of vacancies. The gross receipts can be affected by timing of obtaining new tenants and the negotiated lease rental amounts. Gross receipts are income before expense or debt service.

Anticipated CRE Distributions for FY22 is \$1.72 million. Actual distributions for FY22 could range higher with a successful refinance of some of the properties. \$600,000 of the anticipated funds will be contributed to the CFF in FY22.

Consistency with the Resource Management Strategy: The proposal is consistent with the “Resource Management Strategy for Trust Land” (RMS), which was adopted March 2016 in consultation with the Trust and provides for maximization of return on investment and provides for long term income generation at prudent levels of risk.

Trust Land Office Recommendation: The TLO recommends that it is in the Trust’s best interest to approve the incremental building expenditures for FY22 to be funded by tenant rents and other income collected from the properties.

Applicable Authority: AS 37.14.009(a), AS 38.05.801, 20 AAC 40.710-720 and 11 AAC 99.

Trust Authority Approval: The motions presented in this briefing document fulfill the approval requirements that are applicable to the transaction.

FY22 Real Estate Management Plan and Non-Investment/Program-Related Real Estate Facility Funding Budget (Trust Funded) (Proposed Motion Two)

General Background: There are times that the Central Facility Fund (CFF) will be used so as not to create an uncomfortable level of cash flow compression or that there are insufficient rents to pay for facility obligations. This is typically realized in facilities that are used for program related purposes or operations use where no rent is collected. The Trust Land Office (TLO) uses comprehensive reporting and budgeting for each property with industry recognized capital expense forecasting. Although this Motion 2 approves use of the CFF, the TLO will attempt to use the rent receipts first when possible.

Consistency with the Resource Management Strategy: The proposal is consistent with the “Resource Management Strategy for Trust Land” (RMS), which was adopted March 2016 in

consultation with the Trust and provides for assuring that the real estate needs of mental health programs sponsored by the Alaska Mental Health Trust Authority are met as appropriate. In addition, 11 AAC 99.020(c)(3) cites protection and enhancement of the long-term productivity of Trust land.

Trust Land Office Recommendation: The TLO recommends that it is in the Trust's best interest to approve the incremental building expenditures for FY22.

Applicable Authority: AS 37.14.009(a), AS 38.05.801, 20 AAC 40.710-720 and 11 AAC 99.

Trust Authority Approval: The motions presented in this briefing document fulfill the approval requirements that are applicable to the transaction.

Exhibit(s):

Exhibit 1 - Property Budget Summary

Motion Three Background:

The Trust's Asset Management Policy Statement (AMPS) requires us to secure the services of third party real estate advisor that "provides independent advice and recommendations regarding Trust's non-liquid direct real estate investments and provides trustees with additional expertise when considering investment decisions". The advisor is managed by the CFO and provides an annual report to the Trustees on the status of these real estate assets. This fixed price contract was awarded to Harvest Capital Partners LLC (Harvest) in October 2019 with three (3) 1-year renewals that cross fiscal years. The first-year contract was for \$380,000. The second-year contract, which will expire October 31, 2021, was approved by Trustees January, 2021, for \$295,000. Under the second-year contract, Harvest's responsibilities are to focus on performance review, hold/sell analysis, risk assessment, and strategic direction, advice and review on budgets and planning, asset review, and presentation to the Trustees of its recommendations for the commercial real estate business plan. The Year two scope/cost is expected to continue into the third contract year. The purpose of this motion is to authorize expenditures from the Central Facility Fund (CFF) for November 2021 through June 2022 and fully fund the contract through FY22.

The funding source for this contract is the CFF. The source of funds for the CFF is contributions from the properties accumulated over time, and balance of the CFF can be maintained to ensure there are sufficient funds to cover this contract.

Real Estate Management Plan - Rent Funded

Name	City, State	Gross Receipts & Cash Reserve	FY21 Approved Gross Receipts	Operating Expense	Capital Improvements ¹	Debt Service ²	FY22 Total	FY21 Approved	NET REVENUE
Parks- 1111 Israel Road	Tumwater, WA	\$ 1,816,837	\$ 1,597,620	\$ 523,421	\$ 31,800	\$ 908,819	\$ 1,464,040	\$ 1,539,880	\$ 352,797
IRS- 1973 North Rulon White Blvd.	Ogden, UT	\$ 2,033,627	\$ 2,005,748	\$ 876,231	\$ 86,750	\$ 619,771	\$ 1,582,752	\$ 1,519,309	\$ 450,875
Commercial- 2618 Commercial Drive	Anchorage, AK	\$ 386,628	\$ 238,928	\$ 13,412	\$ 150,000	\$ 98,975	\$ 262,387	\$ 262,087	\$ 124,241
Cordova- 2600 Cordova Street	Anchorage, AK	\$ 662,318	\$ 574,069	\$ 305,154	\$ 214,378	\$ -	\$ 519,532	\$ 447,808	\$ 142,786
Promontory Point- 2420 & 2500 Ridgepoint Drive	Austin, TX	\$ 1,979,228	\$ 1,967,556	\$ 1,006,904	\$ 5,000	\$ 635,942	\$ 1,647,846	\$ 1,366,280	\$ 331,382
North Park- 17319 San Pedro Avenue**	San Antonio, TX	\$ 1,854,701	\$ 1,570,305	\$ 927,393	\$ 314,250	\$ 613,058	\$ 1,854,701	\$ 1,931,824	\$ -
Amber Oaks- 9601 Amberglen Blvd.**	Austin, TX	\$ 4,511,279	\$ 3,178,191	\$ 1,971,904	\$ 1,599,205	\$ 940,171	\$ 4,511,279	\$ 2,902,826	0*
Totals		\$ 13,244,618	\$ 11,132,417	\$ 5,624,419	\$ 2,401,383	\$ 3,816,736	\$ 11,842,538	\$ 9,970,014	\$ 1,402,080

Non-Investment/Program Related Real Estate - Rent Funded

Name	City, State	Gross Receipts	FY21 Approved Gross Receipts	Operating Expense	Capital Improvements ¹	Debt Service ²	Total	FY21 Approved	NET REVENUE
TAB- 3745 Community Park Loop Road**	Anchorage, AK	\$ 342,533	\$ 319,258	\$ 342,533	\$ -	\$ -	\$ 342,533	\$ 372,290	0*
Detox- 650 Yonker Court	Fairbanks, AK	\$ 102,851	\$ 102,851	\$ 8,412	\$ -	\$ -	\$ 8,412	\$ 8,412	\$ 94,439
Assets- 2330 Nichols Street	Anchorage, AK	\$ 62,699	\$ 62,699	\$ 9,500	\$ -	\$ -	\$ 9,500	\$ 9,500	\$ 53,199
Fahrenkamp Center- 1423 Peger Road	Fairbanks, AK	\$ 144,350	\$ 139,188	\$ 18,522	\$ -	\$ -	\$ 18,522	\$ 15,945	\$ 125,828
Denardo- 1300 Moore Street	Fairbanks, AK	\$ 88,065	\$ 43,310	\$ 34,530	\$ -	\$ -	\$ 34,530	\$ 29,676	\$ 53,535
Totals		\$ 740,498	\$ 667,306	\$ 413,497	\$ -	\$ -	\$ 413,497	\$ 435,823	\$ 327,001
Motion 1 Subtotal							\$ 12,256,035	\$ 10,405,837	

Non-Investment/REMP Real Estate - from Central Facility Fund

Name	City, State	Gross Receipts	FY21 Approved Gross Receipts	Operating Expense ³	Capital Improvements ¹	Debt Service ²	Total	Shortfall	
TAB- 3745 Community Park Loop Road	Anchorage, AK	\$ 320,033	\$ 319,258	\$ 342,533	\$ -	\$ -	\$ 342,533	\$ 22,500	\$ 1,729,081
Amber Oaks- 9601 Amberglen Blvd.**	Austin, TX	\$ 4,264,337	\$ 3,178,191	\$ 1,971,904	\$ 1,599,205	\$ 940,171	\$ 4,511,279	\$ 246,942	
Totals				\$ 2,314,437	\$ 1,599,205	\$ 940,171	\$ 4,853,813	\$ 269,442	
Motions 2 Subtotal							\$ 269,442		

1 - Capital Improvements

Parks	Parking lot Maintenance/Powerwashing/stripping/Parking lot lighting/Exterior &Interior painting/HVAC Repairs
IRS	HVAC RTU replacement/HVAC Preventative Maintenance/South Parking lot seal coat/Loading dock seal/ Paint exterior building/ UPS replacement
Cordova	RTU replacement/VAV box project part 2/ bathroom remodel
North Park	Landscaping/ Commissions and Tenant Improvments for new tenants
Amber Oaks	HVAC Replacement/Landscaping and Tenant improvements and Commissions
Commercial	Lease renewal improvements
TAB	

2 - Debt Service includes Principal and Interest

This is not inclusive of potential refinance figures

3- Operating

Due to cash compression there will be shortfalls in cashflows we will need to use up to \$22,500 for building operations.

For Amber Oaks \$1.5MM of cash reserves is added to Gross Receipts

For North Park \$431.5K of cash reserves is added to Gross Receipts

0*-Amber Oaks Deficit is proposd to be funded by CFF \$246,942

0*- TAB Deficit is proposd to be funded by CFF \$22,500

Resource Management Committee Report / Update

Memorandum

To: Chris Cooke, Chair of the Board of Trustees
Through: Mike Abbott, Chief Executive Officer
From: Wyn Menefee, Executive Director
Date: May 14, 2021
Subject: April 22nd, 2021 – Resource Management Committee Meeting Summary



The Resource Management Committee met on April 22nd, 2021, received a brief update of key TLO activities from the Executive Director Report. The committee was scheduled to receive one (1) Approval and four (4) Consultations presented by TLO staff.

Board Action Required: *The following proposed actions requiring full board of trustees' approval were recommended to the full board of trustees at the April 22nd RMC Meeting:*

Meeting Summary:

1. Approval Item 1 – Community Park Loop Leasing Revenues

MOTION: *"The Alaska Mental Health Trust Authority board of trustees direct the TLO to consider use of some Trust lands at Community Park Loop for beneficiary-oriented uses with below market rents and/or other revenues. Specific lease arrangements will still require trustee approval at a later date as described in 20 AAC 40.710 and 11 AAC 99."*

Anticipated Revenues/Benefits: This motion does anticipate revenue for the Trust via these beneficiary serving organization leases, though likely considerably below fair market rent. The potential benefit to these organizations could be as high as \$770K (annually as measured in 2028) if all lease payments are forgone.

2. Consultation Item A – Resource Management Strategy, 4th Edition

MOTION: *"The Alaska Mental Health Trust Authority board of trustees concur with the changes proposed for the Resource Management Strategy, 4th Edition."*

Anticipated Revenues/Benefits: Appropriate management of Trust owned assets ensures that Trust principles described in 11 AAC 99.020 are fulfilled. Managing Trust assets according to the strategies and goals described in the RMS will guide the TLO in making decisions that are in the best interest of the Trust and its beneficiaries. This should guide the TLO toward a path of increasing revenues, protecting the corpus, and being responsive to the Board's Asset Management Policy Statement.

3. Consultation Item B – Golden Summit Expansion – MHT 9400745

MOTION: *“The Alaska Mental Health Trust Authority board of trustees concur with the decision to issue a negotiated mineral lease for exploration and development at the Golden Summit Project near Fairbanks, Alaska on parcel F70015.”*

Anticipated Revenues/Benefits: Revenues from this proposal will be received as annual rent (income) and are commensurate with neighboring mineral agreements on Trust lands. Should the property be developed in the future, a net royalty would be received (principal) based on the price of gold, likely ranging from 1% to 4.5%.

The primary benefit to this proposal is access to gain exploration data on Trust lands and the potential royalty received should the project be developed. The 2016 Preliminary Economic Assessment anticipates a 24-year mine life producing an average of just under 96,000 ounces of gold per year, however, recent drilling in 2020 will significantly upgrade these early estimates and drilling adjacent to the Property recommenced in February 2021. Positive drilling results on adjacent private/state lands increases the potential for similar results from Trust lands. Facilitating additional drilling and modeling is required to estimate the royalty potential of Trust lands.

4. Consultation Item C –Ester Dome Project – MHT 9400748

MOTION: *“The Alaska Mental Health Trust Authority board of trustees concur with the decision to issue a negotiated mineral lease for exploration and development at the Ester Dome Project and Trust lands described and attached hereto in Exhibit D surrounding Fox, Pedro Dome and Cleary Summit.”*

Anticipated Revenues/Benefits: Revenues from this proposal will be received as annual rent (income) for up to three three-year terms with a production-based option to extend. Should the property be developed in the future, a net royalty would be received (principal) based on the price of gold, likely ranging from 1% to 4.5%.

The primary benefit to this proposal is the acquisition of an exploration database from Range Minerals’ work at Ester Dome on Trust and surrounding lands and the potential royalty the Trust would receive should the project be developed. A penalty payment of \$75,000 will be assessed on the agreement should the database requirement not be timely fulfilled.

5. Consultation Item D – West Naukati Young Growth Timber Sale – MHT 9101044

MOTION: *“The Alaska Mental Health Trust Authority board of trustees concur with the disposal of the young growth timber in the West Naukati area, through competitive timber sale on Trust Land on Prince of Wales Island.”*

Anticipated Revenues/Benefits: The timber sale is expected to generate approximately \$2,300,000 in revenue in Fiscal Year(s) 2022 and 2032. Harvest of timber will maximize revenue while providing for timber regeneration and future timber harvests.

cc: *Board of Trustees*
Mike Abbott, CEO Alaska Mental Health Trust Authority
Wyn Menefee, Executive Director, Trust Land Office



To: John Sturgeon, Chair
Resource Management Committee
From: Jusdi Doucet
Date: 4/22/2021
Re: Item 1 – Community Park Loop Leasing Revenues
Fiscal Year: 2021

Approval

Proposed RMC Motion:

“The Resource Management Committee recommends that the Trust Authority board of trustees direct the TLO to consider use of some Trust lands at Community Park Loop for beneficiary-oriented uses with below market rents and/or other revenues. Specific lease arrangements will still require trustee approval at a later date as described in 20 AAC 40.710 and 11 AAC 99.”

Background:

Transaction/Resource: Within five years, three leases of Trust property within the Community Park Subdivision will expire. The board of Trustees must decide what should be done with the three expiring leases if that use includes below market rents. The three lease expiration dates and tenants are as follows:

- 10/01/2023 Salvation Army (SA)
- 04/30/2026 Catholic Social Services (CSS)
- 06/30/2026 Assets Inc.

The three leases (Salvation Army, Catholic Social Services, Assets Inc) are recommended through this motion for beneficiary-oriented uses with below market rents and/or other revenues.

The motion recommended for below market rents is consistent with the current lease arrangements. For decades the subdivision has evolved to provide support to these tenants, all beneficiary serving organizations, though free or nearly free use of the lands and facilities. Revenue generation on the subdivision over those years has not been a focus of the Trust. Instead, the use provided via the land thru the leases to the beneficiary organization is where the Trust has realized value.

On January 29, 2020 the Board of Trustees directed the TLO to develop plans for revenue generation in the Community Park subdivision balanced with support for the beneficiary serving organizations. The motion recommended is the first step in following that direction. The leases and existing

properties, within the context of the subdivision, were studied for revenue generating potential and found to be best suited in their current use as beneficiary-oriented use. It was found that relocating or disturbing the current tenants for revenue generating purposes came with a significant cost to the beneficiary serving organizations. In all cases that cost to the organizations was higher than any potential revenue to the Trust. Revenue generation efforts will be focused on the approximately 750,000 square feet (17.25 acres) of vacant Trust owned land adjacent these leased properties.

Property Description/Acreage/Location/Address/MH Parcel(s):

Salvation Army

- Property: A developed parcel containing 3 separate wood framed single-story buildings. The Trust owns the land, the Salvation Army constructed and owns the buildings.
- Area: 197,955 square feet, 4.55 acres
- Address: 3550, 3600 and 3630 East 20th Avenue, Anchorage, Alaska
- Location: Grid SW1535, Community Park Subdivision, Tract 1A
- MH Parcel: SM-1520
- ADL# 032810-7

Catholic Social Services

- Property: A developed parcel containing one two story steel and masonry building. The land is owned by the Trust, the building is owned by Catholic Social Services.
- Area: 150,875 square feet, 3.46 acres
- Address: 3710 East 20th Avenue, Anchorage, Alaska
- Location: Grid SW1535, Community Park Subdivision, Block 1, Lot 1
- MH Parcel: SM-1523
- MHT# 9200017

Assets Inc.

- Property: A developed parcel containing one single story steel and masonry building. The building and land are owned by the Trust.
- Area: 130,700 square feet, 3.0 acres
- Address: 2330 Nichols Street, Anchorage, Alaska
- Location: Grid SW1535, Community Park Subdivision, Tract 5A
- MH Parcel: SM-1522
- MHT# 9200608

General Background: The Community Park Subdivision has, since its first occupant in the late 1960s, evolved to house organizations that in large part support Trust Beneficiaries. After these beneficiary serving organizations established locations within the subdivision the Trust inherited their leases by virtue of the land conveyance to the Trust. The east half of that block was original Mental Health entitlement land (MH-152), and the west half was state replacement land (GS-209). The Trust accepted the land subject to the leases and have honored those leases to date. The general condition of the land was in good order protected by a ground leases that required the tenants to perform maintenance to keep the building in working order. The inherited lease payments were significantly below fair market value or completely forgone to benefit the organizations. The current zoning for these properties is

Public Lands and Institutions (PLI) which is intended to include major public and quasi-public civic, administrative, and institutional uses and activities. This includes parks, parkways and green belts, public recreation facilities, educational, cemeteries, police and fire stations, religious and governmental offices, child and adult care facilities, public green houses, elderly housing, public safety facilities and social services facilities.

Since inheriting the lands and leases the Trust has renewed the lease for one organization, Assets Inc., at approximately 20% of fair market value and established a lease with the Anchorage School district slightly above fair market value. Other beneficiary serving organizations lease agreements in the subdivision include the ARC of Anchorage, Salvation Army, Catholic Social Services, and the Alaska Mental Health Trust Authority. The other landowners include Hope Community Resources and the Anchorage School District (Whaley School), both also beneficiary serving organizations.

The ARC of Anchorage operates under a lease that was issued in perpetuity prior to Trust ownership of the land. In 1960 the State of Alaska leased land to the ARC. Construction on the land by the ARC started in 1967. Today the lease covers 1,428,681 square feet (32.8 acres) of land; the ARC has constructed and maintains ownership of nearly 50,000 square feet of facilities on that land. The ARC of Anchorage provides a disability services to people who experience intellectual and developmental disabilities, behavioral and mental health challenges.

The Anchorage School District operates under a lease that was issued in 2005 and houses the ACE/ACT Program which currently occupies approximately 11,125 square feet in the Trust Authority Building. Over the term of the lease the footprint has increased by 7382 square feet and in March 2020 they exercised their final 5-year extension at fair market rent. The ASD ACT Program helps young people with disabilities prepare for, get, and keep good jobs.

The Salvation Army lease dates back to 1968. The trust was conveyed the land subject to the ground lease in 1996 as replacement land. The lease continues to require the tenant to maintain the building and the property. The main office was constructed in 1968, followed by the support office constructed in 1989, and finally the Senior Center in 1997. The condition of each of these buildings is characterized as average – good. Today they operate the Clithroe Center and Serendipity facilities through that lease. The Clithroe Center is a facility housing a substance abuse and dual diagnosis treatment program working in collaboration with their Clithroe Inpatient program located elsewhere in Anchorage. Serendipity is a dedicated senior center providing supports to adults with cognitive and functional impairments. It is the youngest structure in the subdivision.

Catholic Social Services has held a lease since 1990 and subsequently in 1991 a 4800 square foot addition to the facility was constructed. The Trust accepted conveyance of the land subject to the ground lease in 1997 as replacement land. The lease continues to require the tenant to maintain the building and the property. The building's condition is characterized as average. The building was originally constructed in 1969 as a physical rehabilitation center. The building and operations were purchased by the Sisters of Providence (Providence Hospital) in the mid 1980's then transferred to Catholic Social Services. Today Catholic Social Services uses the building as their headquarters and their Saint Francis House Food pantry, Anchorage's largest food pantry. The pantry in part serves a sector

of our community that includes many beneficiaries. There is also a head start daycare (Kids' Corps, Inc.) onsite that consumes approximately 35% of the total square footage of the property.

Assets Inc. has leased since 1980 for housing Assets, Inc. or previous iterations of the organization. The building onsite now was constructed in 1974 with subsequent interior remodels in the 1990's. The Trust accepted ownership of the land and the building/improvements in 1997. In 2013 a new roof was installed on the building. In 2016 the TLO issued a new lease authorizing Assets to continue providing services benefiting Trust beneficiaries from the location at below fair market rent. The condition of the building is characterized as good. They offer supported living services and supported employment to Alaskans with disabilities. In collaboration with these services and under the same lease they also operate a bindery and print shop.

Anticipated Revenues/Benefits: This motion does anticipate revenue for the Trust via these beneficiary serving organization leases, though likely considerably below fair market rent. The potential benefit to these organizations could be as high as \$770K (annually as measured in 2028) if all lease payments are forgone.

Anticipated Risks/Concerns: Anticipated utility improvements, potential roadway connection to the University and Medical District, possible municipal investments and incentives, and development of adjacent vacant lands could dramatically increase the value of the leased properties. These increases could expand the prospects for revenue generation through sale or fair market value leases to non-beneficiary serving organizations. Subsequent lease renewals will consider any of these changes and increases in property value.

Project Costs: The potential revenue loss of housing beneficiary serving organizations on these properties in lieu of tenants paying fair market value could be as high as \$688K (net operating income as measured in 2028) if all leases were to be established at fair market value and reliably occupied. However, market demand is low and currently unstable, they would likely not be reliably occupied. Note even this ambitiously high estimate is less than the potential benefit to the beneficiary serving organizations currently at home in the subdivision.

Due Diligence: This proposed recommendation is a component of a larger Community Park subdivision masterplan, currently underway. The leases considered in this recommendation have therefore been considered not just onto themselves but how they contribute to the surrounding areas. To date, the master plan has found significant value to Trust's beneficiaries through the current leases. The leased buildings are known, accessible via public transportation, and in a central location to beneficiaries. The facilities are unique structures not easily duplicated or readily available in similar form within Anchorage. Independent of the Trust the tenants have looked for alternate locations with little success.

Also, as part of this masterplan an appraisal and inferred market analysis was conducted for every parcel owned by the Trust within the subdivision including the leases address in this recommendation. The appraisal and analysis determined (for the leased parcels) that *"while many of the improvements are dated and exhibit significant amounts of depreciation, after careful consideration, the maximally productive use of the subject as improved is continued use "as is."* Several real estate markets (medical office, lodging, subsidized housing) were identified as potentially financially feasible however the

development within these markets will be focused on the approximately 750,000 square feet of vacant Trust owned land adjacent the leased parcels.

Alternatives:

1. Sell the Asset - Sell the properties "as-is." Market depending, options are available for a large discounted bulk sale to an investment buyer, or individual parcel sales at full value.
 - Selling the asset would return a maximum \$930K annually for the Trust by year 2028, the year after all leases expire and the vacant land estimated sell out period is complete. Expenses to partners for 2028 is estimated at \$2.03M . This cost is substantial. Assisting with relocating beneficiary serving tenants is a consideration, but not an obligation.
 - The annual expense does not include costs for renovating a facility elsewhere which would likely be required as the Community Park facilities are unique structures not easily duplicated or readily available in similar form within Anchorage. Independent of the Trust the tenants have looked for alternate locations with little success. Renovation costs estimates exceed \$20M. Again, assisting with relocating beneficiary serving tenants is a consideration, but not an obligation.
2. Offer Below Fair Market Lease Rates. Allow the leases to expire and subsequently offer below fair lease market rates.
 - Fair market lease rates would generate \$770K annually for the Trust by year 2028, the year after all leases expire - this revenue could be forgone to support beneficiary-oriented uses. In either condition, the expense to partners would be \$560K annually (in 2028 and beyond) to cover all building expenses, operations, and maintenance costs - a substantial financial commitment. Note that vacancy and credit loss factors are not deducted as it is unlikely a beneficiary-oriented use will create a vacancy by relocating when they are receiving below fair market lease rates.
3. Require Fair Market Lease Rates. Allow the ground leases to expire and subsequently with current or new tenants require fair market lease rates.
 - Fair market lease rates would generate \$688K annually for the Trust by year 2028, the year after all leases expire. Note that lease revenue is less than the anticipated forgone revenue in offering below market lease rates. This reduction is due to credit and vacancy loss; participating in the market assumes lost revenue from tenant turnover, whereas below market rates would likely keep the existing tenants therefore these deductions would not exist. There is an overhead cost in generating revenue. Expense to partners of \$1.33M assumes the current tenants remain and pay lease rates determined through the 2020 appraisal.

This analysis finds that forgoing Trust lease revenue returns a higher value. Value being described as where the fiduciary responsibilities of the Trust Authority converge with the responsibility of the TLO to mutually support the Alaska Mental Health Trust beneficiaries. Option 1 and 3 generate more revenue for the Trust, but in this situation the expense to beneficiary serving organizations outweighs the projected annual revenue and that is why we are recommending option 2. The recommendation for the expiring leases is to offer new leases at below fair market lease rates for their continued beneficiary-oriented use.

Consistency with the Resource Management Strategy: The proposal is consistent with the long term “Resource Management Strategy for Trust Land” (RMS) which was adopted March 2016 in consultation with the Trust and assures the real estate needs of mental health programs sponsored by the Alaska Mental Health Trust Authority are met as appropriate; Trust land is managed for the long term preservation of the Trust’s land base while supporting and enhancing the Trust’s mission to promote a comprehensive integrated mental health program; and developing Trust land inventory and long-term management plans related to beneficiary programs. Where beneficiary-related uses of Trust lands are proposed at rents that are below fair market values, the increment between proposed rents and fair market rent will be considered an allocation of Trust revenue and must be approved by the board.

Trust Land Office Recommendation: The Trust Authority concurs with the proposal and recommends the approval of the motion described herein.

Applicable Authority: AS 37.14.009(a), AS 38.05.801, 20 AAC 40.710-720 and 11 AAC 99.

Trust Authority Approval: The motion presented in this briefing document fulfills the approval requirements that are applicable to the transaction. If the motion is approved by the board, once the specifics of the future lease terms are known, the TLO will get specific below market beneficiary use approval as required under 20 AAC 40.710 and 11 AAC 99.

Exhibit(s):

Exhibit A – Map – Community Park Loop

Exhibit B – Slide Presentation



To: John Sturgeon, Chair
Resource Management Committee
From: Wyn Menefee
Date: 1/7/2021
Re: Resource Management Strategy, 4th Edition
Fiscal Year: 2021

Consultation

Proposed RMC Motion:

"The Resource Management Committee recommends that the Alaska Mental Health Trust Authority Board of Trustees concur with the changes proposed for the Resource Management Strategy, 4th Edition."

Background:

Revenue Projections: There are no revenue projections specific to this consultation. However, the appropriate management of Trust lands, as discussed in the Resource Management Strategy (RMS), will produce yearly revenue streams of principal and income.

Transaction/Resource: The updated RMS provides strategy and guidance to the TLO for management of the Trust's non-liquid asset base. This modification, which replaces all previous versions, is made considering the financial requirements of the Trust for both operational and programmatic purposes, and economic and market conditions in the areas where the Trust has assets or made investments, and the Trust's Asset Management Policy Statement. Since the land management decisions are made under the authority granted to the Executive Director of the TLO, this consultation provides the trustees opportunity to review and comment on the strategic direction being provided by the Executive Director for management of Trust assets. After this consultation, the TLO will write a Best Interest Decision and solicit public comment before finalizing the RMS revisions.

Property Description/Acreage/MH Parcel(s): Includes Trust owned assets statewide and wherever the Trust owns non-liquid assets.

General Background: The RMS is modified by the Trust Land Office (TLO) from time to time. Pursuant to 11 AAC 99.090(c), the TLO is required to adopt and maintain a long-term asset management strategy that establishes goals for managing Trust land assets to execute the overall Trust management principles of 11 AAC 99.020. To that end, on July 15, 2003, the TLO adopted the "Long Term Asset Management Strategy (LTAMS)."

The document, "Resource Management Strategy" was originally published and adopted in 2013, officially replacing the "LTAMS July 15, 2003." The latest version of the RMS was approved in March

2016. The adoption of this “Resource Management Strategy, 4th Edition” fulfills the obligation of 11 AAC 99.090(c), replaces all previously adopted strategies, and provides guidance to the TLO for management of the Trust’s non-liquid asset base.

The board of trustees adopted a revised Asset Management Policy Statement (AMPS) on August 29, 2019. There are sections of the AMPS that address assets managed by the TLO. It is the intent of the Executive Director to align with the AMPS as long as it is consistent with overall Trust management principles of 11 AAC 99.020.

There was a Legislative Audit completed after the 3rd edition of the RMS was finalized. Some aspects of the RMS needed revision in response to the findings of the audit.

Anticipated Revenues/Benefits: Appropriate management of Trust owned assets ensures that Trust principles described in 11 AAC 99.020 are fulfilled. Managing Trust assets according to the strategies and goals described in the RMS will guide the TLO in making decisions that are in the best interest of the Trust and its beneficiaries. This should guide the TLO toward a path of increasing revenues, protecting the corpus, and being responsive to the Board’s Asset Management Policy Statement.

Anticipated Risks/Concerns: There are no anticipated risks or concerns.

Project Costs: There are no project costs specific to this revision of the RMS. There may be some publishing costs that are absorbed into the TLO operational budget.

Other Considerations: While preparing to print the RMS, there may be some minor ministerial corrections or adjustments during the editing procedure. An example is the Table of Contents will surely be adjusted. The TLO would bring the RMS back for consultation if there were any substantial changes to what is presented in this consultation.

Due Diligence: The TLO reviewed applicable laws, AMPS, legal advice, and Trust needs while revising the RMS.

Alternatives: There are no alternatives proposed.

Trust Land Office Recommendation: That the Trustees concur with the revisions to the RMS as expressed in the RMS 4th edition draft.

Applicable Authority: 11 AAC 99.090(c).

Trust Authority Consultation: This briefing document fulfills the consultation requirements that are applicable to the transaction. In the event that significant changes to the transaction are made necessary by the public notice process, the Trust Authority will be consulted regarding the changes.

Exhibit(s): **Exhibit A :** Summary of RMS Changes
 Exhibit B : RMS Intro – DRAFT
 Exhibit C : Land Section – DRAFT

Exhibit D : Minerals & Materials Section – DRAFT
Exhibit E : Program-Related Real Estate Section – DRAFT
Exhibit F : Forest Section - DRAFT
Exhibit G : Real Estate Section - DRAFT
Exhibit H : Energy Section - DRAFT
Exhibit I : Mitigation Marketing Section – DRAFT

Committee Took Action 04/22/21

Summary of Changes for RMS 4th Edition

Throughout the RMS document, minor technical or style edits were made to make the document read better and certain statistical figures were updated.

1. RMS Intro (Page 7)

- a. To match the AMPS changes, references to “non-cash” are changed to “non-liquid”.
- b. Although “investments” can be understood as spending funds on Trust assets to improve return, “deploying capital” or “capital improvements” are another way to separate it from the “investments” made by the Permanent Fund Corporation.
- c. Added clarity in the discussion of Trust Funds.
- d. Under Trust Funds, added discussion of TLODA and new revenue allocation regulations.
- e. Added “changes in legal understandings” as another reason for changing the RMS.
- f. Inserted a paragraph and references to the impacts of Covid-19 pandemic.
- g. Addressed the changes in the commercial real estate program post legislative audit.

2. Land Section (Page 12)

- a. Added an example of Master Utility Agreement as an innovation example.
- b. Added General Permits under Revocable License for Land Use under Income Generating Authorizations.
- c. Although mitigation marketing is separate chapter in the RMS, mitigation projects are included in non-perpetual easements.
- d. Added clarification of additional revenue from land payments.
- e. Updated the Competitive Land Sale section to include discussion of the newer successful Over-The-Counter program.
- f. Expanded discussion of bonding under Risk Management.
- g. Added discussion of the new General Permit program under Public Access section.
- h. Discussed the Section Line Easement MOU.
- i. Added discussion of decisions for land sales and OTC.
- j. Modified discussion of drones to be more current.
- k. Added importance of IT work in relation to Financial Reporting and Information Management.
- l. Added objectives for Commercial Leasing inventory and marketing program and Big Game Guide Permitting Program.

3. Minerals and Materials Section (Page 21)

- a. Clarified the importance of proximity to development for material sales.
- b. Under Strategy, revised discussion of corporate approvals, market trends, and strategies regarding mine exploration and material sales.
- c. Under Political and Regulatory Environment Effects, some discussion was inserted regarding Covid-19, commodity prices and demand. Clarified the focus of exploration and development projects when evaluating mineral exploration.
- d. Under Capital Risk, discussion added regarding the use of Trust capital in regard to exploration.
- e. Under Diversification added discussion of end-of-life cycle for mines.
- f. Added objective to track large development projects in the state for potential material sales.

4. Program-Related Real Estate (Page 30)

- a. Added discussion regarding efforts to find PRRE buildings for acquisition.
- b. Clarified that the TLO will evaluate and advise the board on potential of reduced revenue or potential revenue regarding PRRE use of Trust lands.
- c. Added example of when TLO may ask for reimbursement for time and expenses on PRRE.
- d. Deleted discussion on use of utilizing principal resources.
- e. Removed Appendix A as it is unnecessary.

5. Forest Resource Management (Page 34)

- a. In a few places, updated section with information from recent trends and effects of USFS land exchange.
- b. Updated that forest stewardship plans are complete for Icy Cape and Tyonek lands.
- c. Under Strategy discussed watching market conditions and other activities for opportunities.
- d. Under Market Risk discussed the use of harvest market agreements.
- e. Under Business Models removed discussion of Timber Land Investment Management Organizations (TIMOs).
- f. Under Land Exchange updated information about the exchange and probable completion timelines.
- g. Clarified that the model of sustainable returns by controlling harvest and rotation cycles does somewhat depend on factors outside of TLO control.
- h. Added that timber harvest will be evaluated against other alternative uses of the resources.
- i. Modified objectives that speak to timing of sales.
- j. Deleted Appendix A explaining the Exchange parcels.

6. Real Estate (Page 43)

- a. Restructured the section to remove much of the criteria and advice on how the real estate portfolio should be grown, which is a responsibility of the board and thus the discussions should be addressed outside of the RMS.
- b. Made changes to the section that are a result of the findings of the Legislative Audit of 2019.
- c. Under Introduction discussed the difference of the two management structures between real estate on trust land and investment properties purchased by the Trust.
- d. Under Strategy, clarified focus on income generation.
- e. Under Strategy, shifted the focus to managing the assets currently owned over acquiring new properties.
- f. Under Strategy, added option for “reverse build to suit”.
- g. Under Strategy, revised discussion of risk.
- h. Under Strategy, removed discussions about construction authorities and TLO staff progressing to a full construction management program.
- i. Under Strategy, discussed that the TLO may still acquire income properties at the direction of the board, that the investment guidelines will be directed by the board, and that the TLO will focus on maintaining legacy real estate and commercial real estate investment properties for positive net operating income.
- j. Under Strategy, reaffirmed TLO’s goal of having tenants pay the operating and capital expenses before distributions to the Trust.

- k. Under Risk, focused on managing risk in existing properties rather than acquisitions.
- l. Under Risk, added a sub-category about Tenancy that is very important to de-risking ongoing management.
- m. Under Project Profile, added focus on location of assets.
- n. Under Investment Return, corrected or improved discussions of the various ways to consider investments.
- o. Under Investment Return, expanded discussion of leveraging.
- p. Under Investment Return, removed discussion of how revenue will be allocated from property sales.
- q. Under Goals and Objectives, removed focus and priority of acquisitions and rather focused on managing current assets for predictable stream of income.
- r. Under Goals and Objectives, discuss the professional standard of care and considering use of industry best practices.
- s. Removed Appendix A: Prudent Investor Rule which is more appropriate for board investment decisions.

7. Energy Section (Page 49)

- a. Under Introduction, recognize the decrease in production volumes.
- b. Under Authorities and Responsibilities, clarify authorities for oil and gas leasing.
- c. Under Inventory, Coal and Lignite, added discussion about unitization of coal leases.
- d. Updated Inventory, Underground Coal Gasification section for current status.
- e. Under Risk Management, added clarification about losing some project control when leasing.
- f. Under Capital Risk, added statement of potential recommendation for exploration funded by Trust.
- g. Under Disposal of Trust Energy Resources, Oil and Gas, clarified that lease sales are timed off of market price and interest and that negotiated leases are possible.
- h. Under Disposal of Trust Energy Resources, Oil and Gas, added bonding subsection that addresses the need to plug and abandon wells and the new AOGCC regulations.
- i. Under Disposal of Trust Energy Resources, Coal, added discussion of unitization of leases.
- j. Under Disposal of Trust Energy Resources, Underground Coal Gasification, updated discussion of UCG compared to standard coal mining.
- k. Clarified Goal 2 to have lease sales when markets are conducive to profitable extraction.
- l. Removed Pac Rim from Goal 3 and added unitization objective.

8. Mitigation Marketing (Page 64)

- a. Added Carbon Credits discussion.
- b. Under Mitigation Marketing Strategies, added information about the challenges of creating mitigation banks.
- c. Under Mitigation Marketing Strategies, Partnerships, added discussion of working on projects outside of banks like the Donlin Project.
- d. Under Risks, removed mention of board adopted investment guidelines.
- e. Under Site Selection, added alternative to establishing a bank.
- f. Added new objective regarding evaluation of carbon credit market.



To: John Sturgeon, Chair
Resource Management Committee
From: Hollie Chalup
Date: 4/22/2021
Re: Item B - Golden Summit Expansion – MHT 9400745
Fiscal Year: 2021-2029

Consultation

Proposed RMC Motion:

“The Resource Management Committee recommends that the Alaska Mental Health Trust Authority board of trustees concur with the decision to issue a negotiated mineral lease for exploration and development at the Golden Summit Project near Fairbanks, Alaska on parcel F70015.”

Background:

Revenue Projections:	Income Principal	(up to) \$245,457 Dependent on Production
-----------------------------	-----------------------------	--

Transaction/Resource: The proposed action is to negotiate a mineral lease of certain Trust lands to facilitate ongoing exploration of Freegold Venture’s Golden Summit Project. The lease would grant Freegold the exclusive ability to explore, develop, and extract mineral resources within the subject lease area. The proposed lease would have a term of up to nine years with a production-based option to extend.

Property Description/Acreage/MH Parcel(s): The proposed lease area is located within the Fairbanks Mining District and associated with the Tintina Gold Belt. The area to be offered for lease is situated approximately one mile north and west of Cleary Summit and adjoins approximately 305 acres of land currently under lease and exploration by Freegold. The lease acreage would be 1,818 acres more or less and is situated within parcel F70015.

General Background: Freegold Ventures Ltd., USA is a well-established Toronto Exchange listed company conducting mineral exploration in interior Alaska since 1991. Freegold currently holds the lode gold Golden Summit Project and copper-gold porphyry Shorty Creek Project. In 2016, a preliminary economic assessment was released for the Golden Summit prospect with favorable results¹. Since, Freegold continued drilling to the north and has expanded understanding of the resource while making plans to conduct infill drilling to advance the project towards pre-feasibility. This proposal incorporates

¹ January 2016 PEA - Indicated mineral resource of 61,460,000 tons at 0.69 g/t (1,363,000 contained ounces au) and inferred mineral resource of 71,500,000 tons at 0.69 g/t au (1,584,000 contained ounces).

Trust lands immediately to the north and west of the Golden Summit project boundary and Freegold's existing Mental Health Trust lease, where it is anticipated the resource extends.

Anticipated Revenues/Benefits: Revenues from this proposal will be received as annual rent (income) and are commiserate with neighboring mineral agreements on Trust lands. Should the property be developed in the future, a net royalty would be received (principal) based on the price of gold, likely ranging from 1% to 4.5%.

The primary benefit to this proposal is access to gain exploration data on Trust lands and the potential royalty received should the project be developed. The 2016 Preliminary Economic Assessment anticipates a 24-year mine life producing an average of just under 96,000 ounces of gold per year, however, recent drilling in 2020 will significantly upgrade these early estimates and drilling adjacent to the Property recommenced in February 2021. Positive drilling results on adjacent private/state lands increases the potential for similar results from Trust lands. Facilitating additional drilling and modeling is required to estimate the royalty potential of Trust lands.

Anticipated Risks/Concerns: Mineral exploration will be contingent on the applicant successfully acquiring all necessary state, federal and local authorizations. The area of interest is currently undeveloped, vacant land adjacent to both current and historic mineral exploration. Based on a review of publicly available information, there does not appear to be environmental concerns that would interfere with the company's ability to conduct exploration and development; however, rigorous baseline environmental data collection will be required to advance the project.

Project Costs: No significant costs are anticipated other than periodic site visits and reclamation approval inspections.

Other Considerations: This area is subject to significant mineral exploration and placer mining. It is not uncommon for mineral claimants to "stake" state mining claims on this parcel. Any claims located within the boundaries of Trust land are null and void from the beginning, however, does not preclude a locator from conducting exploration without the Trust's knowledge or authorization. Facilitating the lease to Freegold will discourage the staking of nuisance claims and will increase the "boots on the ground" observation of potential trespass activity.

Due Diligence: TLO staff have conducted a review of pertinent land records, publicly available technical reports, and compliance history of the company. A site inspection will be conducted in Spring 2021 after snowmelt to document the condition of the property prior to exploration.

Alternatives: The primary alternative is to not issue a mineral lease. This alternative would not generate revenue from a currently non-performing asset and may affect the Trust's future position to receive royalty should the Golden Summit Project be developed.

Other alternatives, such as competitive leasing, are not anticipated to be successful due to the donut-hole-like land position of the property and the low amount of exploration data currently available on

the property. A third party is not likely to interject into Freegold's significant land holding and an offer with a competitive lease rate is not anticipated.

Consistency with the Resource Management Strategy: The proposal is consistent with the Resource Management Strategy for Trust Land" (RMS), which was adopted March 2016 in consultation with the Trust and provides the TLO to maximize return at prudent levels of risk, prevent liabilities, and convert nonperforming assets into performing assets. Given the current market value of base metals, with gold prices at record highs, lands affected by this proposal are in a "best market" situation and should be offered now rather than later. This proposal has potential to lay the foundation for significant future revenues from Trust mineral resources, consistent with a key Trust land management principal of encouraging a diversity of revenue generating uses of Trust land.

Trust Land Office Recommendation: Offer the subject lands in a negotiated mineral lease to facilitate exploration and expansion of the Golden Summit Project.

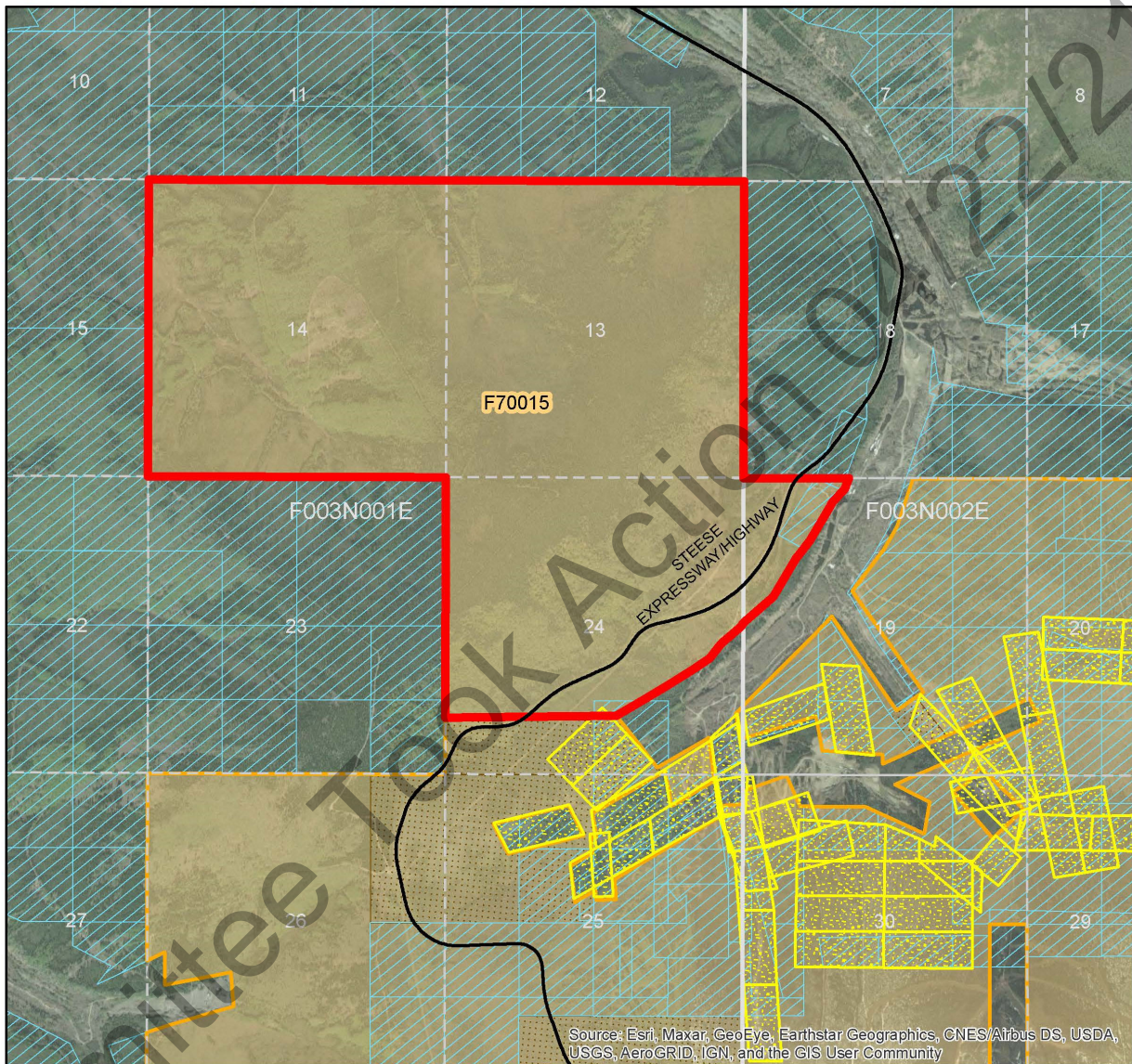
Applicable Authority: Alaska Statute 37.14.009(a), 38.05.801 and 11 AAC 99 (key statutes and regulations applicable to Trust land management and disposal).

Trust Authority Consultation: This briefing document fulfills the consultation requirements that are applicable to the transaction. In the event that significant changes to the transaction are made necessary by the public notice process, the Trust Authority will be consulted regarding the changes.

Exhibit(s):

Exhibit 1 – Map of Proposed Lease Area

EXHIBIT 1 – MAP OF PROPOSED LEASE AREA



**MHT 9400745 Negotiated Mineral Lease for
Freegold Ventures Ltd., USA
Approx. 1818.2 acres.**

- MHT 9400745 (A Portion of Parcel F70015)
- BLM Mining Claims
- State Mining Claims
- Mineral Leases
- Mental Health Parcel





To: John Sturgeon, Chair
Resource Management Committee
From: Hollie Chalup
Date: 4/22/2021
Re: Item C - Ester Dome Project – MHT 9400748
Fiscal Year: 2021-2029

Consultation

Proposed RMC Motion:

“The Resource Management Committee recommends that the Alaska Mental Health Trust Authority board of trustees concur with the decision to issue a negotiated mineral lease for exploration and development at the Ester Dome Project and Trust lands described and attached hereto in Exhibit D surrounding Fox, Pedro Dome and Cleary Summit.”

Background:

Revenue Projections: Income (up to) \$360,000

Transaction/Resource: The proposed action is to negotiate a mineral lease of certain Trust lands to facilitate grassroots exploration of Felix Gold Alaska, Inc.’s Ester Dome Project as well as lands surrounding the Fort Knox Mine. The lease would grant Felix Gold, and their operator, Millrock Resources, the exclusive ability to explore, develop, and extract mineral resources within the two subject lease areas. The proposed lease would have a term of up to nine years with a production-based option to extend.

Property Description/Acreage/MH Parcel(s): The proposed lease areas are located within the Fairbanks Mining District and associated with the Tintina Gold Belt. The areas to be offered for lease are situated approximately 7 miles west of Fairbanks at the Ester Dome Mineral Project (depicted in Exhibit 1) and approximately 25 miles northeast of Fairbanks adjoining lands currently under lease by Freegold Ventures and Fairbanks Gold Mining, Inc. (depicted in Exhibit 2 and Exhibit 3). A list of parcels included in MHT 9400748 can be found in Exhibit 4. The total lease acreage would be 10,206.37 acres more or less. The Trust owns the lands fee simple, which means it owns the surface and mineral estate.

General Background: The Ester Dome Mineral Project is currently composed of approximately 154 State of Alaska mining claims. Range Minerals, Miranda Gold, Agnico-Eagle and Placer Gold (a Barrick Gold subsidiary) conducted preliminary reconnaissance and exploration drilling on the project area between the late 1990’s and 2011 before optioning mineral rights to Millrock Resources. As of January 2021, Millrock has assigned its option rights to Felix Gold, an Australian exploration company. Millrock will operate exploration work on behalf of Felix Gold. The Ester Dome Project is comprised of fault and

intrusion related quartz-sulphide vein hosted gold in metamorphosed rock of the Yukon-Tanana Terrane. This deposit type is synonymous with True North Mine mineralogy previously operated by Kinross, and the previously producing Grant Mine and the Ryan Lode systems located adjacent to the project area at Ester Dome.

Felix Gold and Millrock Resources propose to re-log historic drill core catalogues, conduct secondary analysis, and digitize existing exploration data for the Ester Dome project area. Based off the findings of the historic data, Millrock will create a work plan to conduct surficial sampling, geophysical surveys and a drilling program if warranted. A similar approach will be employed for lands adjacent to Fort Knox.

Anticipated Revenues/Benefits: Revenues from this proposal will be received as annual rent (income) for up to three three-year terms with a production-based option to extend. Should the property be developed in the future, a net royalty would be received (principal) based on the price of gold, likely ranging from 1% to 4.5%.

The primary benefit to this proposal is the acquisition of an exploration database from Range Minerals' work at Ester Dome on Trust and surrounding lands and the potential royalty the Trust would receive should the project be developed. A penalty payment of \$75,000 will be assessed on the agreement should the database requirement not be timely fulfilled.

Anticipated Risks/Concerns: Mineral exploration will be contingent on the applicant successfully identifying drill targets on either property and acquiring all necessary state, federal and local authorizations to conduct exploration. The area of interest is currently undeveloped, vacant land but has undergone periodic exploration in the past. Based on a review of publicly available information, there does not appear to be known environmental concerns that would interfere with the company's ability to conduct exploration and development.

The Ester Dome area has seen significant lode gold and placer gold activity in the last 30 years; however, the Trust should anticipate concerns of mineral activity from nearby residents and business owners, especially concerning issues of water quality and drawdown of the local aquifers. Drilling technology, best management practices, and state and federal permit requirements will mitigate potential issues of environmental concern or water production from drilling activities. Millrock has also conducted local outreach efforts, including working with public recreationists to create bike trails through the State land portions of the Ester Dome Project area and continue their outreach efforts in the neighboring community of Ester.

Project Costs: No significant costs are anticipated other than periodic site visits and reclamation approval inspections.

Other Considerations: None.

Due Diligence: TLO staff have conducted a review of pertinent land records, publicly available technical reports, and compliance history of the company. A site inspection will be conducted in Spring 2021 after snowmelt to document the condition of the property prior to exploration.

Alternatives: The primary alternative is to not issue a mineral lease. This alternative would not generate revenue from a currently non-performing asset and may affect the Trust's future position to receive royalty should the exploration lead to development.

Other alternatives, such as competitive leasing, are not anticipated to be successful due to the donut-hole-like land position of the property and the low amount of exploration data currently available on the property. A third party is not likely to interject into Millrock/Felix Gold's significant land holding and an offer with a competitive lease rate is not anticipated.

Consistency with the Resource Management Strategy: The proposal is consistent with the "Resource Management Strategy for Trust Land" (RMS), which was adopted March 2016 in consultation with the Trust and provides the TLO to maximize return at prudent levels of risk, prevent liabilities, and convert nonperforming assets into performing assets. Given the current market value of base metals, with gold prices at record highs, lands affected by this proposal are in a "best market" situation and should be offered now rather than later. This proposal has potential to lay the foundation for significant future revenues from Trust mineral resources, consistent with a key Trust land management principal of encouraging a diversity of revenue generating uses of Trust land.

Trust Land Office Recommendation: Offer the subject lands in a negotiated mineral lease to facilitate exploration and expansion of the Ester Dome Project and lands surrounding Fort Knox Mine.

Applicable Authority: Alaska Statute 37.14.009(a), 38.05.801 and 11 AAC 99 (key statutes and regulations applicable to Trust land management and disposal).

Trust Authority Consultation: This briefing document fulfills the consultation requirements that are applicable to the transaction. In the event that significant changes to the transaction are made necessary by the public notice process, the Trust Authority will be consulted regarding the changes.

Exhibit(s):

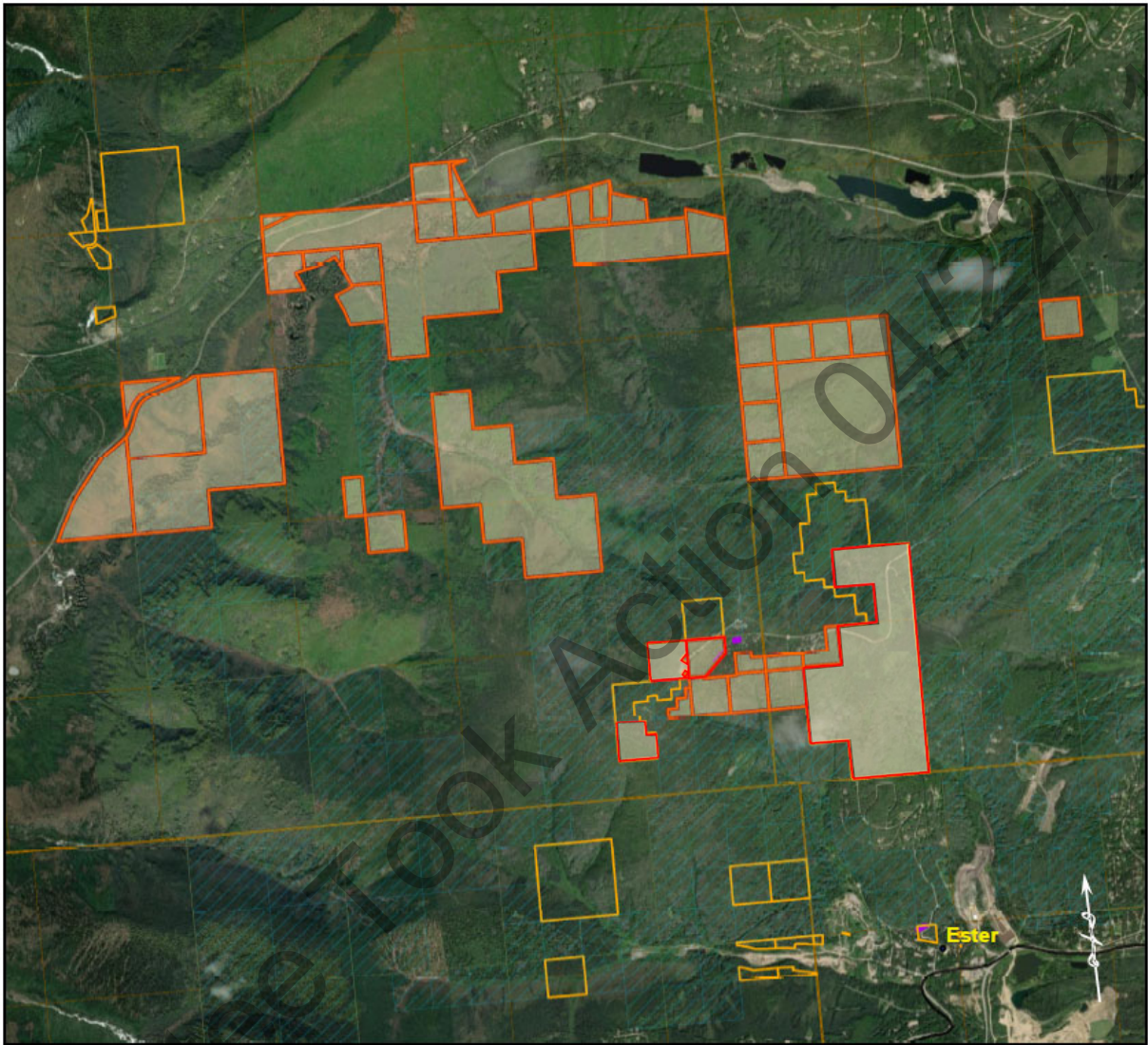
Exhibit 1 – Map of Proposed Lease Area – Ester Dome

Exhibit 2 – Map of Proposed Lease Area – North Fox

Exhibit 3 – Map of Proposed Lease Area - Pedro Dome/Cleary Summit

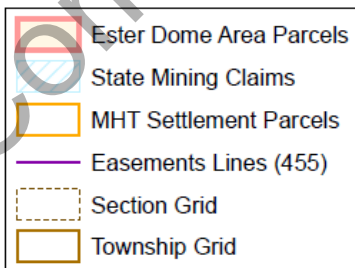
Exhibit 4 – List of Parcels in Project Area

EXHIBIT 1
Map of Proposed Lease Area – Ester Dome Area



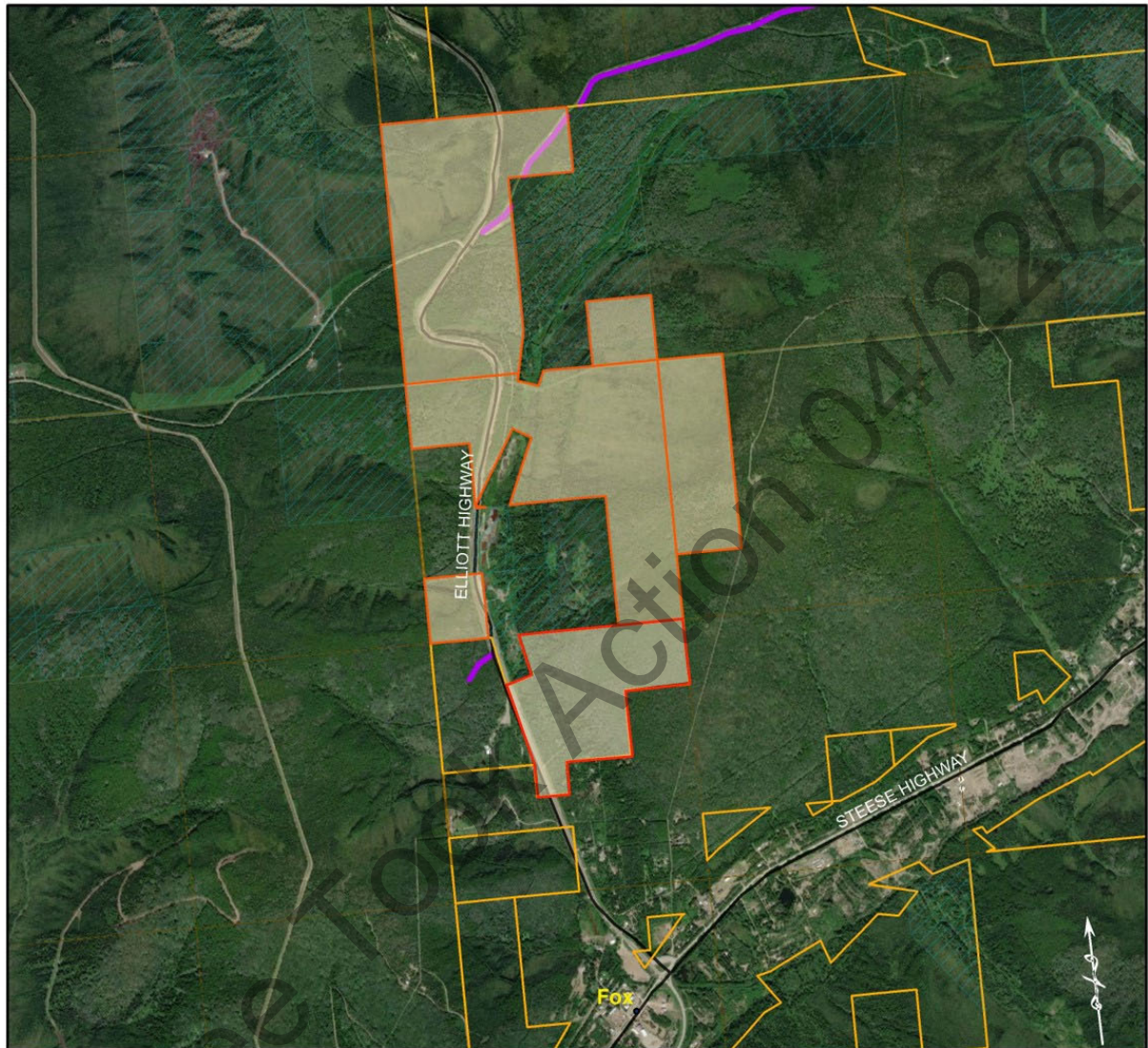
MHT 9400748 - Negotiated Mineral Lease
Ester Dome Area (Approx. 4157 acres)

0 0.25 0.5 1 1.5
Miles



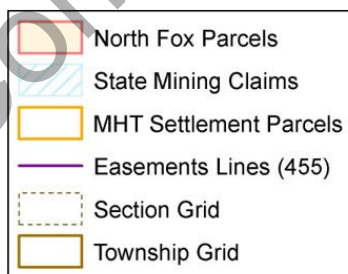
Service Layer Credits: Source: Esri, DigitalGlobe, GeoEye, Earthstar Geographics, CNES/Airbus DS, USDA, USGS, AeroGRID, IGN, and the GIS User Community
 Copyright:© 2013 National Geographic Society, i-cubed

EXHIBIT 2
Map of Proposed Lease Area – North Fox



MHT 9400748 - Negotiated Mineral Lease
North Fox Area (Approx. 991 acres)

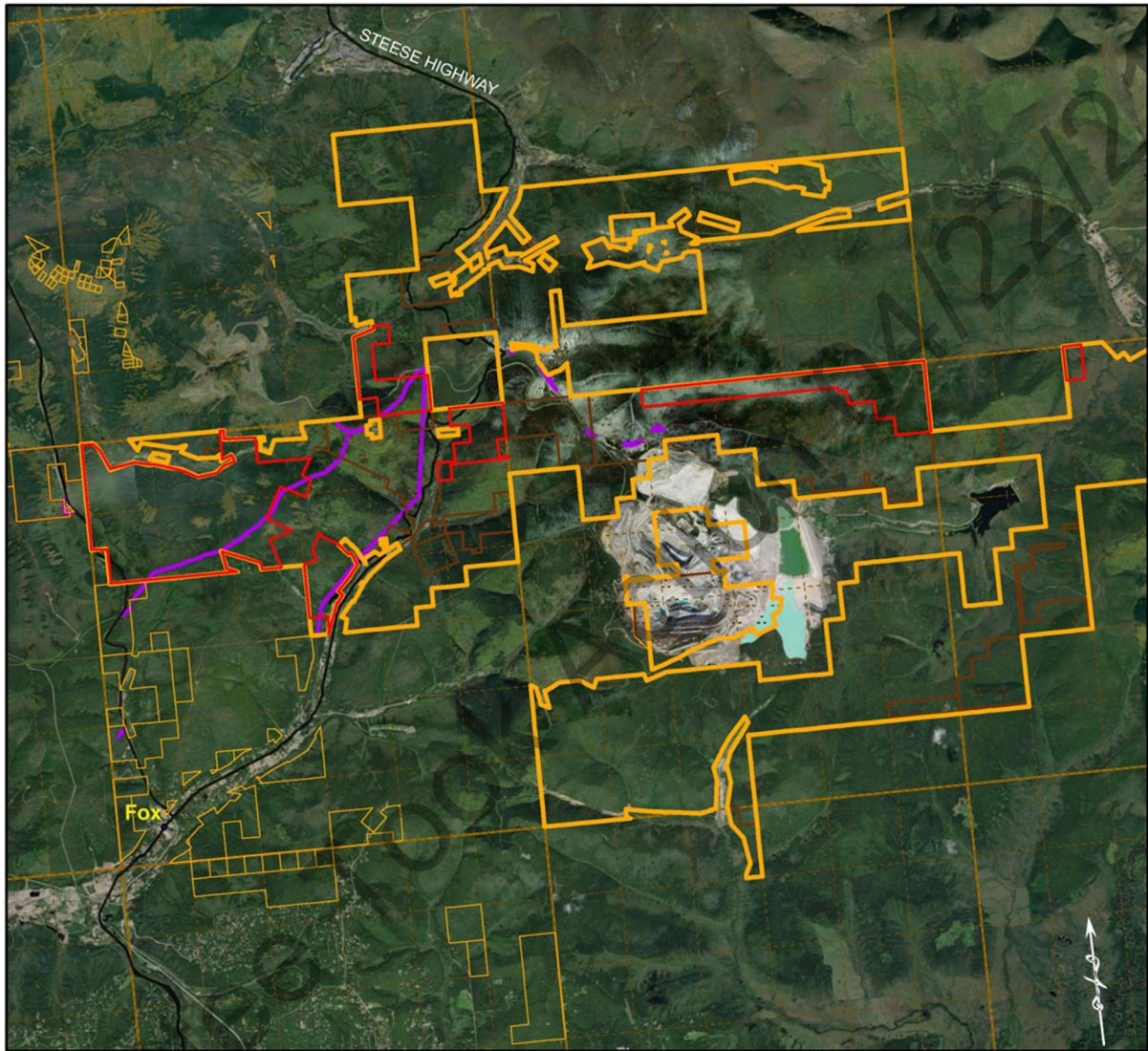
0 0.25 0.5 1 Miles



Service Layer Credits: Source: Esri, DigitalGlobe, GeoEye, Earthstar Geographics, CNES/Airbus DS, USDA, USGS, AeroGRID, IGN, and the GIS User Community
 Sources: Esri, HERE, Garmin, Intermap, increment P Corp., GEBCO, USGS, FAO, NPS, NRCAN, GeoBase, IGN, Kadaster NL, Ordnance Survey, Esri Japan, METI, Esri China (Hong Kong), (c) OpenStreetMap contributors, and the GIS User Community

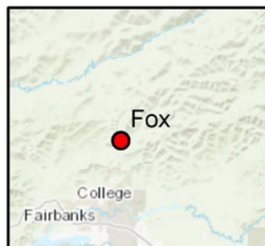
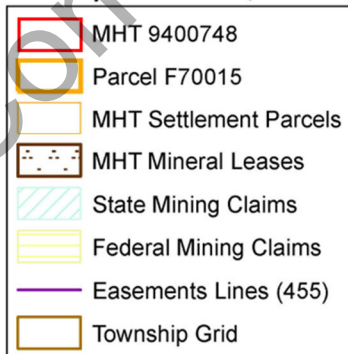
EXHIBIT 3

Map of Proposed Lease Area – Cleary Summit and Pedro Dome Area



MHT 9400748 - Negotiated Mineral Lease

Cleary Summit / Pedro Dome Area (Approx. 5,058 acres)



Service Layer Credits: Source: Esri, DigitalGlobe, GeoEye, Earthstar Geographics, CNES/Airbus DS, USDA, USGS, AeroGRID, IGN, and the GIS User Community
Sources: Esri, HREF, Garmin, Intermap, increment P Corp., GEBCO, USGS, FAO, NPS, NRCAN, GeoBase, IGN, Kadaster NL, Ordnance Survey, Esri, Japan

EXHIBIT 4
List of Parcels in Project Area

<u>Parcel No.</u>	<u>Acres</u>	<u>Parcel No.</u>	<u>Acres</u>
<u>Ester Dome Mineral Project</u>			
FM-7019	129	FM-0396	16.19
FM-7025	400	FM-0397	41.56
FM-7021	123	FM-0434	14.46
FM-7020	23	FM-0437	39.6
FM-0423-A	470	FM-0436	38.98
FM-0423-B	10	FM-0435	33.51
FM-0424	38.25	FM-0432	440
FM-0425	14.7	FM-0438	11.25
FM-0426	37.46	FM-0439-01	112.55
FM-0427	43.15	FM-0376	39.97
FM-0414	40	FM-0395	24.76
FM-0413	9.04	FM-0394	670
FM-0422	40.11	FM-0377	40.25
FM-0421	30.74	FM-0378	40.52
FM-0420	27.53	FM-0374	40.1
FM-0419	34.98	FM-0373	40.18
FM-0417	25.56	FM-0372	40.24
FM-7022	19	FM-0379	360
FM-0416	27.53	FM-0440	40
FM-0418	120	FM-7024	40.51
FM-0415	43.94	FM-0375	39.73
FM-0431	20		
<u>North Fox/Pedro Dome/Cleary Summit Area</u>			
F70015	5043	F20287	40.0
F20289	290.23	F20290	120.0
F20286	340.01	F20298	165.2
F20288	35.83		
		TOTAL ACREAGE	10,206.37



To: John Sturgeon, Chair
Resource Management Committee
From: Paul Slenkamp
Date: 4/22/2021
Re: Item D – West Naukati Young Growth Timber Sale – MHT
9101044
Fiscal Year: 2021

Consultation

Proposed RMC Motion:

“The Resource Management Committee recommends that the Alaska Mental Health Trust Authority board of trustees concur with the disposal of the young growth timber in the West Naukati area, through competitive timber sale on Trust Land on Prince of Wales Island.”

Background:

Revenue Projections:	Principal	85%	\$1,955,000 (up to)
	Income	15%	\$ 345,000 (up to)

Transaction/Resource: The Trust Land office (TLO) will offer up to twenty million board feet (20 MMBF) of young growth timber through competitive sale on portions of the approximately 4,182 acres of Trust land in West Naukati acquired through the Alaska Mental Health Trust Land (AMHT) Exchange Act of 2017. These lands have been extensively harvested by the USFS in the past and are in various stages of regeneration. The areas also contain old growth timber interspersed throughout the tract which is under contract and currently being harvested. The West Naukati area has been harvested from the 1930's to the present. The areas to be harvested under this disposal were harvested up to and prior to the mid-1970's. There are about 500 acres of known young growth stands that are presently ready or should be mature to harvest within the next 10 years. The primary harvest acres are highlighted on the attached timber sale map. Additional logging units may be added within this area if field work determines that there are other areas ready to harvest.

There are over 4,000 acres of young growth in the entirety of the Naukati parcels which total 10,772 acres. Most of the harvesting occurred after 1975. Studies show that the prime harvest age is 65 years. Due to variable factors such as age, quality of growing site, whether a stand was pre-commercially thinned, and reliable mapping it is difficult without periodic physical stand examinations to determine the condition of these stands and when the correct time of harvest should occur. The determination of the proper time to harvest existing timber will be made by examining stands periodically and projecting growth rates and market conditions. All harvesting will occur with concurrence of the TLO and the operator. There has been considerable market interest in the

upcoming timber volume. This is due to a lack of available timber from other landowners. The timber industry in SE Alaska is attempting to acquire adequate timber supply for current timber operators to remain viable. Past observations in Alaska and other areas show that if a timber industry collapses it is very difficult to reestablish. The AMHT has considerable timber assets. There has been a request from the Alaska Forest Association to maximize the volume that the AMHT can offer at this time. Due to the termination of harvest activities by Sealaska Corporation the few remaining operators are considering whether to remain. Timber sales will contribute to contracted volume and may provide confidence to the industry, as well as provide revenue to the Trust.

The sale will encompass the young growth timber (generally over 65 years of age) that is deemed economic by the purchaser with TLO concurrence to harvest. There are several factors which will require extensive analysis prior to harvesting these lands. These include numerous archeological sites, 10-year conservation easements (agreed to in the land exchange), and cost of accessibility. The Trust has received about 4,000 acres of Naukati Exchange lands under Phase 1 and Phase 2A and expects to receive the remaining 6,721 acres to complete the 10,721 acres which comprise the Naukati area exchange lands in May 2021.

The timber sale will be for ten (10) years, which may be extended upon consent of both parties. The contract will be a harvest/market format. The 10-year contractual time is derived from the site analysis that some stands will be the most desirable condition to harvest in the next 10 years and this will also allow time to consider market conditions. This will provide time to develop stands without rushing within the contractual time. There is considerable variation of growth rates within specific stands. To maximize harvest volumes, it is important to provide as much flexibility as possible. The remaining young growth timber after this contract is completed will be offered when it is determined that the stands are ready for harvest and when market conditions are suitable for disposal.

Property Description/Acreage/MH Parcel(s): The property is about three (3) miles north of Naukati on Prince of Wales Island which include parcel(s) CRM-7062 & 7063: T69S, R79E, portions of sections; 1, 2, 11, 12, & 13 T68S, R79E portions of sections; 30, 31 & 32; T 68S, R78E portions of sections 25 & 36 containing approximately 500 acres (approximate sale area) which is a portion of a larger parcel of approximately 4,182 acres (west Naukati section of AMHT Land Exchange). Some additional units may be added if deemed ready to harvest by the TLO.

General Background: The TLO has engaged in the sale of timber as a major contributor to its traditional revenue portfolio. The proposed timber sale will dispose of commercially viable young growth timber on Trust lands located on Prince of Wales Island, near Naukati. The proposed timber sale is the result of both State of Alaska (SB 88) and Federal (S.131) legislation passed in 2017. The proposed sale is composed of timber on lands acquired or to be acquired through the Alaska Mental Health Trust Land Exchange Act of 2017.

The Trust Resource Management Committee has heard and approved various consultations on the land exchange beginning in 2005. At the January 4, 2018 meeting, the board concurred that the exchange was in the best interests of the Trust. In this same consultation the RMC increased the

allocated budget for the exchange from \$3.1 million to \$6.2 million. This timber sale will assist in recouping that investment.

The TLO has positioned the land exchange to play a key role in the preservation of the existing timber industry in SE Alaska. A healthy timber industry is a key component to maximizing timber receipts to the Trust and was also a key component in the passage of the AMHT Land Exchange Act of 2017. It is hoped that the proposed timber sale will assist in providing sufficient timber to the southeast Alaska timber industry to remain operable until other landowners can market additional timber.

A key component of this action was to begin the transition to “young growth” timber. This timber sale is the first timber sale the Trust has offered composed entirely of young (second) growth timber. This benefits the Trust by maintaining viable customers to buy Trust timber.

The proposed West Naukati Young Growth Timber sale will assist timber companies in SE Alaska to obtain sufficient timber to remain in operation. This sale will be a competitive sale utilizing a Harvest Market Agreement contract similar to the Shelter Cove Timber Sale recently sold and should maximize revenue to the Trust.

Anticipated Revenues/Benefits:

1. The timber sale is expected to generate approximately \$2,300,000 in revenue in Fiscal Year(s) 2022 to 2032.
2. Harvest of timber will maximize revenue while providing for timber regeneration and future timber harvests.

Anticipated Risks/Concerns: There may be some anticipated public concern associated with the timber harvest. The land exchange has been a public issue for years and received the support from several environmental groups to provide timber to the SE Alaska Timber Industry. This timber sale should be an anticipated result of the exchange and is composed of timber grown on lands previously harvested in the 1940's, 1950's, 1960' and early 1970's. The Naukati area has a long history of timber harvest.

Although there have been concerns about the price reduction of timber in the overseas markets, this fluctuates over time dependent on geopolitical issues, market demand and other factors. However, this 10-year sale should provide sufficient time to allow companies to appropriately time their harvests to realize expected profits and pay acceptable stumpage fees.

Project Costs: TLO staff time and travel costs.

Other Considerations: Sale of this timber may assist the Southeast Alaska forest products industry to remain in operation while alternate timber supplies from the US Forest Service and the State of Alaska become available. Long term viability of the timber industry will provide customers to purchase Trust timber in the future.

Due Diligence: TLO staff members have visited the project area and conducted sale layout. It is the intention of the TLO to conduct on-going field inspections of the Naukati properties to determine how and when to harvest over 4,000 acres of young growth timber the Trust owns or will own in the Naukati area, however this consultation only deals with West Naukati area. The TLO monitors all log scale and payments throughout a contract.

Alternatives:

1. **Do Nothing:** This alternative assumes that timber values will not be maximized by harvesting at this time. Timber is a commodity, and the current markets are in fluctuation it is anticipated that this can be mitigated with an extended contractual time period.
2. **Alternate Development:** Due to the character and location, the parcel does not lend itself to other development opportunities that would produce a return to the Trust comparable to a commercial timber harvest. Commercial harvest of the timber will, in some cases, facilitate other commercial opportunities on the lands.
3. **Proposed Alternative:** This alternative will provide the Trust with revenue and will help to maintain customers for future timber sales. The harvest should not adversely impact other future development. Harvest now will allow a new forest to start.

Consistency with the Resource Management Strategy: The proposal is consistent with the “Resource Management Strategy for Trust Land” (RMS), which was adopted March 2016 in consultation with the Trust and provides for the TLO to focus first on land or resources at the high end of the market values (“best markets”). Given the current market values of timber, the prospective lands affected by this decision will be sold with an extended contractual period. This will allow a competitive environment to maximize value of proposals by potential purchasers.

Trust Land Office Recommendation: Proceed with the competitive timber sale on the young growth portion of the West Naukati portion of the land exchange (CRM-7062 & CRM 7063).

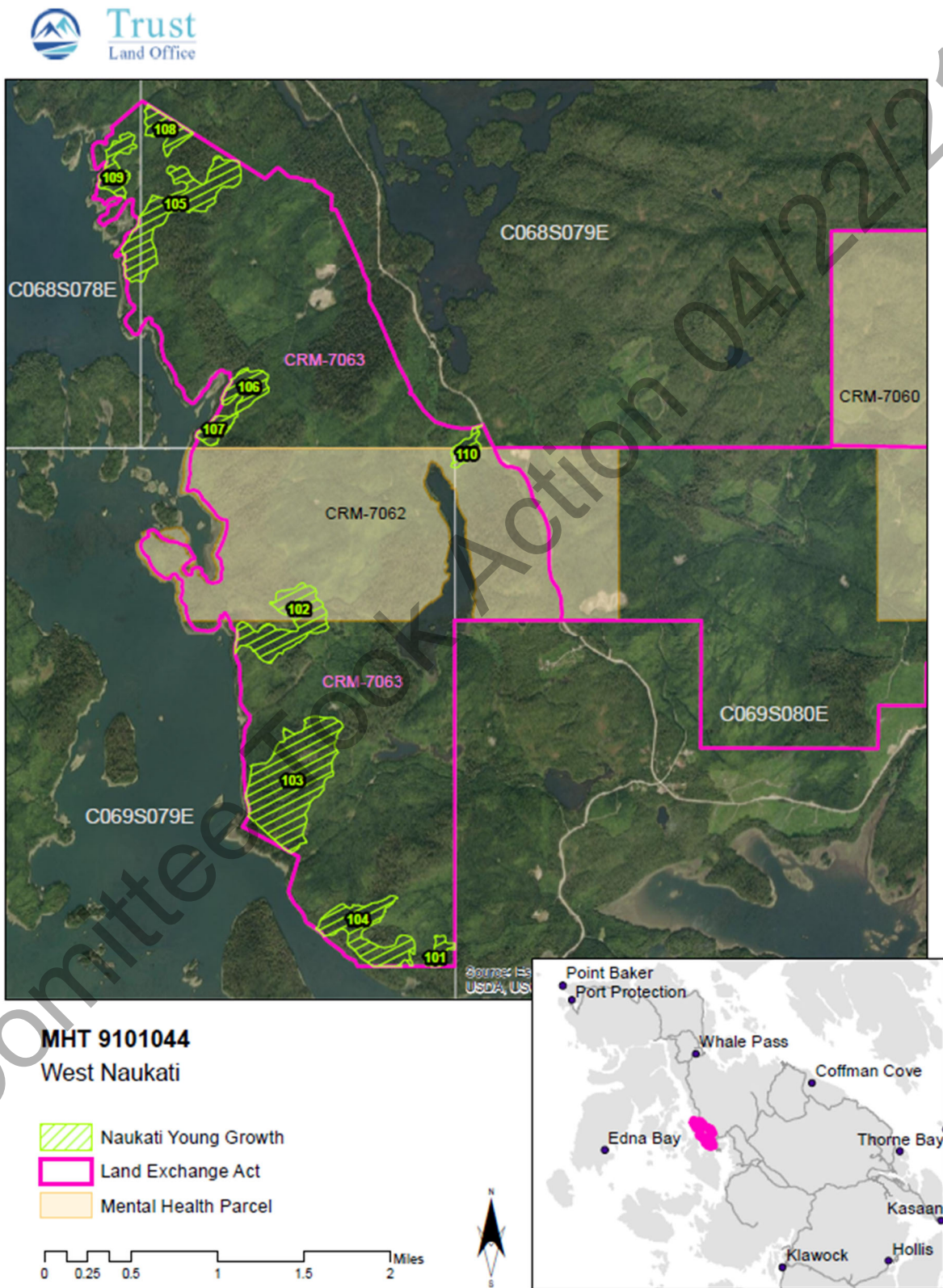
Applicable Authority: AS 37.14.009(a), AS 38.05.801, and 11 AAC 99.

Trust Authority Consultation: This briefing document fulfills the consultation requirements that are applicable to the transaction. In the event that significant changes to the transaction are made necessary by the public notice process, the Trust Authority will be consulted regarding the changes.

Exhibit(s):

Exhibit 1 – West Naukati Young Growth Timber Sale Area Map

EXHIBIT 1
West Naukati Young Growth Timber Sale Area Map



Approval

MEMO

To: Chris Cooke, Chair
Date: May 26, 2021
Re: FY21 Change of Intent
Grantee: Dept. of Health and Social Services
Project Title: Mental Health Professionals Off-Site Evaluations

REQUESTED MOTION:

Approve a change of intent to allow up to \$298,482 of FY21 MHTAAR funds originally approved for the Mental Health Professionals Off-Site Evaluations project to be used for API Capital Improvements.

Assigned Program Staff: Katie Baldwin

STAFF ANALYSIS

In FY21, trustees approved \$300,000 in MHTAAR funds to the Department of Health and Social Services (DHSS) to perform clinical reviews of ex-parte evaluations for individuals awaiting transfer to a Designated Evaluation and Treatment (DET) or Designated Evaluation and Stabilization (DES) facility and API. These facilities are the only centers designated by the state to perform such evaluations.

As part of the settlement agreement with the Disability Law Center and the Public Defender Agency, DHSS is required to re-evaluate Title 47 individuals who have not been admitted to a DET facility or DES facility within 24 hours of the court order. Trust funding was originally intended to ensure there was adequate capacity in the system to evaluate and re-evaluate individuals, and that those evaluations occurred in a timely manner so that alternative solutions could be pursued if and when someone no longer meets criteria for the order.

DHSS has projected that \$298,800 of those MHTAAR funds will be unexpended and has requested that \$298,482 of the unexpended funds be put towards three capital projects to assist API return the hospital to an available bed count of 80 beds (70 civil and 10 forensic) and increase its census to serve more beneficiaries. The three proposed projects include improving the facility design to better care for patients that have an infectious disease, the installation of Lexan barriers around nursing stations on each unit to assist with infection control and improve employee safety and, the replacement of anti-ligature doors to mitigate the risk of future unsafe patient behaviors.

Trust staff recommends this request for approval. All three projects are beneficial ways the Trust may effectively support the DHSS and API's leadership to address some of the capital needs that will ultimately help the facility return to full bed capacity and support the health, safety and wellbeing of staff and beneficiaries.

COMP PLAN IDENTIFICATION

Goal	Objective	Comments
Goal 8 Services in Institutional Settings	8.1 Services in a psychiatric setting	

BACKGROUND

In 2018, the Disability Law Center (DLC) and the Public Defender Agency sued the Department of Health and Social Services (DHSS) and the Department of Corrections (DOC) (case # 3AN-19-09814CI) about the weeks-long waitlist for civilly committed (Title 47) to be admitted to the Alaska Psychiatric Institute (API).

As part of the settlement agreement, DHSS is required to re-evaluate Title 47 individuals who have not been admitted to a Designated Evaluation and Treatment (DET) facility or Designated Evaluation and Stabilization (DES) facility within 24 hours of the court order. The Trust provided \$300,000 in funding to assist with these re-evaluations. The re-evaluations were a very specific requirement ordered by Judge Morse to be in our 90-day plan that carried over into the final settlement with DLC. When DHSS was creating our 90-day plan, we estimated that 1,500 – 2,000 clinical reviews a year at \$300,000 each would be needed. That would create a total need of \$600,000 for FY 2021 that was proposed to be split with the Trust.

There are a variety of reasons why DHSS did not need the \$300,000 MHTAAR funds for title 47 reevaluations during FY21.

First, the settlement agreement with DLC was not finalized until September 3, 2020. DHSS began the process for establishing a provider agreement prior to finalizing the settlement. Once a provider was established, it also took some time to develop a Memorandum of Agreement with DOC for the contract evaluator to gain access to DOC facilities. The first reevaluation at DOC occurred on December 9th, 2020.

Second, the state has increased the number of beds that are available to take Title 47 patients. At the time when DHSS first approached the Trust for funding assistance, there were only two Designated Evaluation and Treatment (DET) facilities other than API in the state. Since that time, Mat-Su Regional Medical Center has opened a 16 bed DET unit. These 16 beds have greatly assisted in reducing the number of individuals on the Title 47 waitlist. In addition to these 16 beds, API has also increased its capacity and can now provide care for 63 beds. The increased capacity within the state has assisted in decreasing the number of individuals on the Title 47 waitlist and the length of time it takes to admit someone.

Additionally, API has instituted a new admission policy, in which those who are held at a correction facility are given priority admission to API. The implementation of this policy reduced the amount of time individuals have been held at a correctional facility and also reduced the need to have these individuals re-evaluated.

Lastly, the COVID-19 Public Health Emergency (PHE) has altered so many different aspects of our lives and how business is conducted. DHSS decided to prioritize working with DOC for re-evaluations. Prior to the pandemic, DHSS anticipated that it would be difficult to work with hospitals in order for contract evaluators to gain access to their facilities and patients. As a result of the PHE, hospitals were not safely able to give access to their facilities to the contract evaluators. DHSS is also unsure what the full need to re-evaluations would have been if it would have been a year without the COVID-19 PHE. We know a lot of individuals received care via telehealth, and early in the PHE our DETs partners had less individuals on their units. As the PHE continued, the units returned to normal capacity.

Out of the FY21 project approved by Trustee's for re-evaluations, a total of \$1,200 was expended on mental health re-evaluation for four individuals.

PROJECT DESCRIPTION

Project #1: Isolation Unit – \$69,237 (Trust Funds)

When API was built, it was never envisioned that the hospital would need to have the ability to care for patients that have infectious disease in addition to their mental health diagnosis. The units are not designed in a way in which patients can be isolated from others on the unit. During the pandemic, API has needed to find a way to care for patients that also had COVID-19 that were either asymptomatic for the disease or had an infection that did not require hospitalization or medical care. Currently, the only way that API can take COVID -19 positive patients is keep a ten-bed unit closed and only use that unit when they have a COVID-19 patient.

This project will help create a safe environment for patients that have an infectious disease. It will create 4 rooms within one unit that will have air scrubbers to pull air out of the rooms. Doors will also be added adjacent to these rooms to provide a safe location for a quarantine period, helping to decrease exposure to other patients. This project will allow API to use all ten beds on this unit for normal admissions. When a patient with an infectious disease needs to be admitted, current patients in those four beds can be shifted to other locations in the hospital or discharged when appropriate to secure the four-bed isolation space. Completion of this project is required to return the hospital to an available bed count of 80 beds (70 civil and 10 forensic) and will allow API to increase its census in order to serve more beneficiaries. Total cost for this project is \$261,258 of which \$69,237 is Trust funding.

Project #2: Nursing station Lexan project - \$88,545 (Trust Funds)

API has a need to add Lexan barriers around nursing stations on each unit to assist with infection control and to improve employee safety. API has several patients that try to spit on employees. The Lexan barriers will provide infection control for staff that are in the nursing station. API has also had multiple incidents of irritated patients jumping over the counter of the nursing station and assaulting employees. This has resulted in significant employee injuries. The barriers will prevent these assaults from occurring. The Lexan barriers are also designed in a way that will allow for proper communication between patients and employees. Total cost for this project is \$227,726 of which \$88,545 is Trust funding.

Project #3: Bathroom door replacement project - \$140,700 (Trust Funds)

A patient attempted suicide by tying a sheet to his bathroom door. After the incident, a risk assessment was completed. It was determined that the bathroom doors should be replaced with anti-ligature doors to mitigate the risk of future unsafe patient behaviors. Once an identified ligature risk is identified and a risk assessment is completed, the Joint Commission expects the facility to take immediate action to correct the risk. More importantly, API understands the importance of mitigating risks for patients to provide safe and effective treatment. The Total cost for this project is \$140,700 of which \$140,700 is Trust funding.

DHSS will procure and encumber contracts for each of the projects above.

EVALUATION CRITERIA

API estimates that all three projects will be completed by September or October 2021. Once the projects are completed, API will work towards increasing its capacity. API's goal is to have all 80-beds available by January 2022. API will procure and encumber contracts for each of the projects outlined above and initiate in FY21. Construction is anticipated to cross fiscal years contingent upon Trustee approval end of May 2021.

WHO API SERVES

API is the state owned and operated acute psychiatric hospital for the state. The hospital provides emergency and court-ordered inpatient psychiatric services. The hospital has an 80-bed capacity; however, its current operating capacity is 63 as some beds are unavailable due to COVID-19 and staffing shortages. As of 5/12/21, API has admitted 649 people during FY2021. All individuals served by API are Trust beneficiaries.

ESTIMATED NUMBERS OF BENEFICIARIES SERVED EXPERIENCING**** NUMBERS ARE FOR FY2020**

Mental Illness:	541
Developmental Disabilities:	5
Alzheimer's Disease & Related Dementias:	4
Substance Abuse	12

BUDGET

Space or Facilities Costs	\$298,482
Space or Facilities Costs (Other Sources)	\$331,202
Space or Facilities Narrative:	The total cost for all three projects is \$629,684

Total Amount to be Funded by the Trust	\$298,482
Total Amount Funded by Other Sources	\$331,202

OTHER FUNDING SOURCES

Cares Act funding	\$325,000
DHSS funding	\$6,202
Total Leveraged Funds	\$331,202

Additional Documents

Program & Planning Committee Report / Update

To: Chris Cooke, Chair
Through: Mike Abbott, Chief Executive Officer
From: Steve Williams, Chief Operating Officer
Date: May 19, 2021
Re: Program and Planning Committee Report

The meeting occurred on April 21, 2021 and was attended by trustees Verné Boerner (chair), Chris Cooke, Anita Halterman, Brent Fisher, Rhonda Boyles, John Sturgeon, and Annette Gwalthney-Jones. Due to the COVID-19 pandemic the meeting was not held in person, rather it was held using video and teleconference technologies.

Meeting Summary:

The following items were presented and discussed by the committee.

1) *CEO Update*

Mike Abbott updated the Committee on the following topics:

- the status of SB124/HB172 legislation, legislation that is critical to forwarding the Department of Health and Social Services' and Trust's efforts to implement the *Crisis Now* framework in Alaska;
- the Trust Authority and Trust Land Office quarterly reports provided to trustees outlining small grant awards and consultations that occurred in the third quarter;
- a synopsis of the Trust Land and Trust Authority office sponsored community meeting held in Yakutat;
- the Trust's communication efforts and recent coverage of Trust Authority and Trust Land Office activities covered by media outlets;
- the recent Alaska Supreme Court's decision regarding the dispute over the legality of the gubernatorial appointments; and,
- an overview of the current FY22 state budget process and the use of Trust budget reserves in the FY22 budget.

2) *Comprehensive Integrated Mental Health Program Plan and Alaska Scorecard Update*
DHSS Deputy Commissioner Wall, Jillian Gellings (DHSS, Project Analyst), and Autumn Veal (Trust Evaluation and Planning Officer) provided an overview on:

- the Comprehensive Integrated Mental Health Program Plan – *Strengthening the System* and,
- the reveal, overview and explanation of the *2020 Alaska Scorecard*.

3) *FY23 Stakeholder Budget Process Overview*

Steve Williams (Trust Chief Operating Officer), presented an overview of the Trust's recommended FY23 budget development process, including:

- gathering garnering and gathering stakeholder involvement (i.e. State, local, tribal, and community partners as well as Advisory Board and beneficiaries);
- review and analysis of grant and Trust funded project performance; and,
- presentation of FY23 budget recommendations to the Program and Planning committee and board of Trustees.

4) *Crisis Now Update*

Katie Baldwin (Senior Program Officer), Eric Boyer (Trust Program Officer) and Travis Welch (Trust Program Officer) gave a presentation on the Trust's and Department of Health and Social Services' efforts to reform Alaska's psychiatric crisis response system, elements covered included:

- overview and status of current efforts;
- brief system teams update;
- community implementation updates (Anchorage, Mat-Su Valley, and Fairbanks);
- planned phased system implementation; and,
- next steps, moving forward.

Approvals:

Below are the funding requests that were presented to the Committee and the corresponding actions taken by the Committee.

- City of Fairbanks / Crisis Now (\$130,400) – Approved
- Alaska Behavioral Health / Crisis Now (\$457,067) – Approved
- Interior Alaska Center / Crisis Now (\$350,000) – Approved
- Providence Alaska / Crisis Now (\$400,000) – Tabled
- Bean's Café (\$250,000) – Approved

The Program and Planning Committee adjourned at approximately 3:00pm. The next meeting of the committee is currently scheduled for July 27 - 28, 2021.

MEMO

To: Verné Boerner - Program & Planning Committee Chair
Date: April 14, 2021
Re: FY22 Mental Health & Addiction Intervention Focus Area Allocation
Fund Source: FY22 Crisis Continuum of Care
Amount: \$130,400.00
Grantee: City of Fairbanks
Project Title: Crisis Now Community Coordinator

REQUESTED MOTION:

Approve a \$130,400 FY22 authority grant to the City of Fairbanks for their Crisis Now Coordinator position. These funds will come from the FY 22 Mental Health & Addiction Intervention– Crisis Continuum of Care budget line.

Assigned Program Staff: Eric Boyer

STAFF ANALYSIS

In a significant step in advancing Crisis Now implementation efforts in Fairbanks, the City of Fairbanks is proposing to host a Crisis Now Community Planning Coordinator, supported by Trust funding, within the Mayor's office. Locating this impactful, full-time position within City leadership will demonstrate a high level of commitment to the Crisis Now model for the community. This level of partnership is also important in the planning and implementation of a comprehensive program like Crisis Now that will require collaboration between the City, emergency services, law enforcement, and community healthcare stakeholders.

The Fairbanks Crisis Now Community Coordinator is part of the Trust's overall Crisis Now implementation strategy, and represents a true partnership with the City of Fairbanks. The Coordinator will serve as the liaison between the local Community Implementation Team, the Trust, and consultants throughout the development of the Crisis Now project in Fairbanks. Trust funding will be necessary for a period of 2-3 years to keep the work on track and achieve successful implementation of services.

Staff recommends trustee support for this project.

COMP PLAN IDENTIFICATION

Goal	Objective	Comments
Goal 2 Healthcare	2.1 Access & receive quality healthcare	

PROJECT DESCRIPTION

The Fairbanks Crisis Now Community Coordinator is part of the Trust's overall Crisis Now implementation strategy. The coordinator will serve as the liaison between the local Community Implementation Team, the Trust, and consultants throughout the development of the Crisis Now project and will be well-versed in the model and efforts in Alaska to adopt the model. The Coordinator will also identify and manage key stakeholder engagement; host monthly Community Implementation Team meetings; synchronize community efforts with statewide/system level efforts; collect and report data; and promote Crisis Now in the community.

This position will support project management, communications, and research for the leaders advancing each component of the Crisis Now model:

- a **regional or statewide crisis call center** that coordinates in real time with the other components
- a **centrally deployed 24/7 mobile crisis team**, (ideally, a clinician and a peer) to respond in-person to individuals in crisis, and
- **23-hour and short-term stabilization**, which may be operated separately or jointly, offering a safe, supportive and appropriate behavioral health crisis placement for those who cannot be stabilized by call center clinicians or mobile crisis team response.

The Coordinator will also identify, report, and help mitigate obstacles to Crisis Now development to ensure the local project meets the statewide Crisis Now project's schedule, giving the Trust accurate project status updates at any given time.

The City of Fairbanks is also supporting this effort through indirect funding for this position, as well as supporting the overall project with office space for the mobile crisis team. The city is also providing the vehicle for the mobile crisis team to use for their Trust beneficiary outreach.

EVALUATION CRITERIA

The overall Crisis Now performance measures are being developed by the Trust and Alaska DHSS. The Community Coordinator project will be assessed based upon the development of the Crisis Now components in Fairbanks. The Trust will consistently compare our progress to the progress being made in other communities, encouraging coordination and the leveraging of resource and knowledge in every way we can.

SUSTAINABILITY

This project is designed to end upon the successful implementation of the Crisis Now model in Fairbanks and will not have duties or responsibilities past that time.

WHO WE SERVE

This project will focus on the implementation of the Crisis Now project in Fairbanks. Crisis Now will provide the community with a behavioral health crisis call center, mobile crisis team, and a 23 hour stabilization facility. We anticipate all Crisis Now clients will be Trust beneficiaries.

ESTIMATED NUMBER OF BENEFICIARIES SERVED EXPERIENCING

Mental Illness:	516
Alzheimer's Disease & Related Dementias:	50
Substance Abuse	516
Secondary Beneficiaries(family members or caregivers providing support to primary beneficiaries):	3,170

BUDGET

Personnel Services Costs	\$120,400.00
Personnel Services Costs (Other Sources)	\$3,100.00
Personnel Services Narrative:	Trust: Gross Salary - \$85,100 Trust: Gross Benefits - \$35,300 Benefits include retirement (\$12,500), life insurance (\$100), Health Insurance (\$21,500), and Medicare (\$1,200) City of Fairbanks: Annual Supervisory and Human Resources Expenditures - \$3,100
Travel Costs	\$7,000.00
Travel Costs (Other Sources)	\$0.00
Travel Narrative:	Trust: Travel Costs to Crisis Now Meetings throughout state and tour Crisis Now models across the country - \$7,000
Space or Facilities Costs	\$0.00
Space or Facilities Costs (Other Sources)	\$4,200.00
Space or Facilities Narrative:	City of Fairbanks: Annual Facility and General Expenditures - \$4,200

Supplies Costs	\$3,000.00
Supplies Costs (Other Sources)	\$0.00
Supplies Narrative:	Trust: Marketing project and facilitating project planning - \$3,000

Equipment Costs	\$0.00
Equipment Costs (Other Sources)	\$3,200.00
Equipment Costs Narrative:	City of Fairbanks: Furniture - \$1,500 City of Fairbanks: Computer System - \$600 City of Fairbanks: Telephones - \$1,100

Other Costs	\$0.00
Other Costs (Other Sources)	\$13,400.00
Other Costs Narrative:	City of Fairbanks: Annual Finance Expenditures - \$4,900 City of Fairbanks: Annual IT Expenditures - \$6,400 City of Fairbanks: Annual Risk Expenditures - \$1,600 City of Fairbanks: Annual Misc. Training Expense - \$500

Total Amount to be Funded by the Trust	\$130,400.00
Total Amount Funded by Other Sources	\$23,900.00

Other Funding Sources	
City of Fairbanks - Secured	\$23,900.00 In addition, In-kind: 1. Office space at the Fairbank's fire station 2. Four wheel drive vehicle for the mobile crisis team.
Total Leveraged Funds	\$23,900.00

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: \$457,067.00
Grantee: Anchorage Community Mental Health Services, Inc dba Alaska Behavioral Health
Project Title: Fairbanks Mobile Crisis Team - Clinical

REQUESTED MOTION:

Approve a \$457,067.00 FY21 authority grant to Alaska Behavioral Health (AKBH) for funding of behavioral health clinicians, who will work on mobile crisis teams (MCT) in Fairbanks. These funds will come from the FY 21 Substance Abuse Prevention and Treatment – Crisis Continuum of Care budget line.

Assigned Program Staff: Eric Boyer

STAFF ANALYSIS

This request will allow for the implementation of one of the key components of the Crisis Now model in Fairbanks: a Mobile Crisis Team (MCT). With the support of the Trust, Alaska Behavioral Health (AKBH) will provide the clinical portion of the MCT response. These funds will pay for 3 fulltime clinicians, plus clinical supervision and administrative support. Per the Crisis Now model, a MCT is ideally composed of a peer support specialist and a behavioral health clinician. There will be one MCT in Fairbanks operating each shift of a 24 hour day, 7 days a week. Fairbanks is one of the three communities prioritized for implementation of the Crisis Now service array, and this project will help lead the design and implementation of MCTs in other cities around the state.

When MCTs function and operate with fidelity to the Crisis Now model, data has shown they can meet the needs of 70% of the people experiencing a behavioral health crisis at the community level. This means these individuals do not need transport to an emergency room or jail, and instead can be helped at the site of their crisis and remain in the community with treatment support.

It is predicted in the Fairbanks region that the MCTs will respond to over 1,000 people in crisis over the course of a year. This means that 700 Trust beneficiaries will get their needs met by the MCT, which will be able to provide follow-up care to that individual through peer support specialists and the

Careline Crisis Call Center. Part of the adaptation of this model for a city the size of Fairbanks involves time for follow-up with individuals who are stabilized through the MCT process. It is expected that the two-person teams will have time between call-outs, which will be used for this on-going level of support. Follow up care alone has been shown to reduce the risk of suicide by 60-70% in multiple studies.

The City of Fairbanks took the initiative to support the Crisis Now framework and bring together Alaska Behavioral Health and The Bridge (via their parent agency Interior Alaska Center for Non-Violent Living) into a partnership to staff and implement best practices for operating MCTs. With the help of the Fairbanks emergency response services (dispatch, fire, police, AK State Troopers), Careline, community health providers, and the local hospital, mobile crisis teams will be able to meet the needs of Trust beneficiaries in need, and begin diverting them from emergency rooms and the criminal justice system.

This project represents the first Crisis Now MCT in Alaska that will be operating with fidelity to the nationally recognized Crisis Now best practice framework. The proposed MCT team will not only showcase how the Crisis Now model can be adapted for use in an Alaskan community, but will directly impact more than 1,000 Trust beneficiaries from this region. Currently, when a beneficiary goes into crisis, the response is often a uniformed Fairbanks police officer or an Alaska State Trooper.

MCTs are a critical component of the Crisis Now framework, and with these requested funds, AKBH will be able to provide the behavioral health clinicians needed to implement this important level of care. It is likely that some level of Trust funding may be required for a period of 2-3 years while perfecting operations and fully maximizinng Medicaid revenue. This proposal is recommended by the Trust program staff for full funding.

COMP PLAN IDENTIFICATION

Goal	Objective	Comments
Goal 2 Healthcare	2.1 Access & receive quality healthcare	The mobile crisis teams will also impact Goal 4, 5, and 6.

PROJECT DESCRIPTION

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

PROJECT DESCRIPTION

This project is focused on implementing a behavioral health crisis system of Care in the Fairbanks North Star Borough. The essential functions of the mobile crisis team (MCT) will include triage and screening (explicit screening for suicidality); assessment; de-escalation/resolution; peer support; coordination with medical and behavioral health services; collaboration with families and natural supports, information and referrals; transportation; and crisis planning and follow-

up. The MCT will address recovery needs and will provide trauma-informed care with a specific focus on suicide prevention. MCT staff will participate with the Crisis Now steering committee as it works through the build out of the plan, and will be supportive of the MOA development process with partner organizations.

This project is focused on implementing a behavioral health crisis system of Care in the Fairbanks North Star Borough. By providing a behavioral health crisis system of care, people in crisis get the right care, in the right setting, when they need it. In order to build this system of care, there must be a crisis call center, a mobile crisis team, and a crisis response center (i.e. 23-hour stabilization or short-term stabilization) in order to provide multiple opportunities for intervention at less intensive levels of care. This grant proposal specifically focuses on discussing and requesting funding for one portion of the behavioral health crisis system of care, the clinician position on the MCT, who will provide crisis services to any person in the North Star Borough in his or her home, workplace, or any other community-based location in a timely manner (the Bridge is submitting a proposal for the second half of the mobile crisis team, the peer support specialist). The essential functions of the team will include triage and screening (explicit screening for suicidality); assessment; de-escalation/resolution; peer support; coordination with medical and behavioral health services; collaboration with families and natural supports, information and referrals; transportation; and crisis planning and follow-up. The mobile crisis team will address recovery needs and will provide trauma-informed care with a specific focus on suicide prevention.

EVALUATION CRITERIA

- 1) How much did we do?
 - #of beneficiaries who receive crisis peer support services from MCT
 - # of beneficiaries who received follow-up after 48 hours by a Peer Support Professional
- 2) How well did you do?
 - % of people who engage in recovery supports, housing, employment or other treatment services
 - # of family members who find resources for their child, spouse or parent
- 3) Is anyone better off as a result of this project?
 - #of beneficiaries who report that they are better off by having received services.
 - # of beneficiaries who are diverted from higher levels of care including hospitalization.

In order to measure project success, AKBH will specifically track the following performance metrics: the number of individuals served per shift; the average response time; the percentage of calls responded to within 1 and 2 hours; and the percentage of mobile crisis responses resolved in the community. Additionally, AKBH will administer the National Outcome Measures (NOMS) once an individual is linked to services (at intake) and every six months thereafter which tracks whether the individual is demonstrating an improved quality of life.

SUSTAINABILITY

Yes, this project could continue after the Trust's funding ends, as AKBH is able to bill both the 1115 Waiver Mobile Outreach and Crisis Response Services (\$175.6) or the Medicaid Short-Term Crisis Intervention Service (\$125.76 per hour) when providing mobile crisis team services. For the Short-Term Crisis Intervention Service, AKBH can also bill for 22 additional hours of crisis services.

WHO WE SERVE

This project will provide necessary crisis services to The Trust's beneficiaries which include those who are mentally ill (i.e. those diagnosed with schizophrenia, delusional disorder, mood disorders, anxiety disorders, somatoform disorders, personality disorders, dissociate disorders, and other psychotic or severe and persistent mental disorders); chronic alcoholics suffering from psychosis; and other persons needing mental health services. As highlighted in the Alaska Statutes, the integrated comprehensive mental health program, for which expenditures are made by The Trust, shall give priority in service delivery to persons who, as a result of a mental disorder, may require or are at risk of hospitalization or are experiencing such a major impairment of self-care, self-direction, or social and economic functioning that they require continuing or intensive services. By providing mobile crisis team services, Trust beneficiaries who are in crisis will receive the right care, in the right setting, when they need it. Beneficiaries will be better off, as the mobile crisis team will lead to a decrease in use and interaction between Trust beneficiaries and emergency departments, jails, and police, and will lead to linkage to appropriate care and treatment through triage/screening, assessment, de-escalation, coordination with community services, and crisis planning and follow-up.

ESTIMATED NUMBERS OF BENEFICIARIES SERVED EXPERIENCING:

Mental Illness:	516
Substance Abuse	516
Secondary Beneficiaries(family members or caregivers providing support to primary beneficiaries):	3,170
Number of people to be trained	12

BUDGET

Personnel Services Costs	\$310,640.00											
Personnel Services Costs (Other Sources)	\$134,360.00											
Personnel Services Narrative:	<table><tr><td>1. Clinical Managment</td><td>0.2</td><td>FTE (Covered by Trust)</td></tr><tr><td>2. Admin Support</td><td>0.2</td><td>FTE (Covered by Trust)</td></tr><tr><td>3. Clinican (24/7)</td><td>2.53</td><td>FTE (Covered by Trust)</td></tr></table>			1. Clinical Managment	0.2	FTE (Covered by Trust)	2. Admin Support	0.2	FTE (Covered by Trust)	3. Clinican (24/7)	2.53	FTE (Covered by Trust)
1. Clinical Managment	0.2	FTE (Covered by Trust)										
2. Admin Support	0.2	FTE (Covered by Trust)										
3. Clinican (24/7)	2.53	FTE (Covered by Trust)										

	4. Clinician (24/7) AKBH/Medicaid	1.67	FTE (Covered by
--	--------------------------------------	------	-----------------

Space or Facilities Costs	\$46,000.00
Space or Facilities Costs (Other Sources)	\$0
Space or Facilities Narrative:	

Equipment Costs	\$7,100.00
Equipment Costs (Other Sources)	\$0
Equipment Costs Narrative:	

Other Costs	\$93,327.00
Other Costs (Other Sources)	\$0
Other Costs Narrative:	Training \$5,000 Contract \$18,400 Indirect \$69,927

Total Amount to be Funded by the Trust	\$457,067.00
Total Amount Funded by Other Sources	\$181,233

OTHER FUNDING SOURCES

Billing Medicaid 1115 waiver- mobile crisis team provides \$175.64 per episode	RI Report/Agnew Beck analysis- 1032 crisis episodes predicted, resulting in revenue, \$181,233.
Or billing short-term crisis intervention services (every 15 minutes is \$31.44)	The first year of implementation will provide a baseline for the impact of this revenue stream.
Total Leveraged Funds	\$181,233

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: \$350,000.00
Grantee: Interior Alaska Center For Non- Violent Living
Project Title: Fairbanks Mobile Crisis Team – Peer Support

REQUESTED MOTION:

Approve a \$350,000.00 FY21 authority grant to the Interior Center for Non-Violent Living (IAC) for funding of Peer Support Specialists, who will work on mobile crisis teams in Fairbanks. These funds will come from the FY 21 Substance Abuse Prevention and Treatment – Crisis Continuum of Care budget line.

Assigned Program Staff: Eric Boyer

STAFF ANALYSIS

This request will allow for the implementation of one of the key components of the Crisis Now model in Fairbanks: a Mobile Crisis Team (MCT). The Interior Alaska Center For Non- Violent Living (IAC) is requesting Trust funds to pay for five peers, who will be paired with a behavioral health clinician from provider Alaska Behavioral Health. There will be one MCT in Fairbanks operating each shift of a 24 hour day, 7 days a week. Fairbanks is one of the three communities prioritized for implementation of the Crisis Now service array, and this project will help lead the design and implementation of MCTs in other cities around the state.

When MCTs function and operate with fidelity to the Crisis Now model, data has shown they can meet the needs of 70% of the people experiencing a behavioral health crisis at the community level. This means these individuals do not need transport to an emergency room or jail, and instead can be helped at the site of their crisis and remain in the community with treatment support.

It is predicted in the Fairbanks region that the MCTs will respond to over 1,000 people in crisis over the course of a year. This means that 700 Trust beneficiaries will get their needs met by the MCT, which will be able to provide follow-up care to that individual through peer support specialists and the Careline Crisis Call Center. Part of the adaptation of this model for a city the size of Fairbanks involves

time for follow-up with individuals who are stabilized through the MCT process. It is expected that the two-person teams will have time between call-outs, which will be used for this on-going level of support. Follow up care alone has been shown to reduce the risk of suicide by 60-70% in multiple studies.

The City of Fairbanks took the initiative to support the Crisis Now framework and bring together Alaska Behavioral Health and The Bridge (via their parent agency Interior Alaska Center for Non-Violent Living) into a partnership to staff and implement best practices for operating MCTs. With the help of the Fairbanks emergency response services (dispatch, fire, police, AK State Troopers), Careline, community health providers, and the local hospital, mobile crisis teams will be able to meet the needs of Trust beneficiaries in need, and begin diverting them from emergency rooms and the criminal justice system.

This project represents the first Crisis Now MCT in Alaska that will be operating with fidelity to the nationally recognized Crisis Now best practice framework. The proposed MCT team will not only showcase how the Crisis Now model can be adapted for use in an Alaskan community, but will directly impact more than 1,000 Trust beneficiaries from this region. Currently, when a beneficiary goes into crisis, the response is often a uniformed Fairbanks police officer or an Alaska State Trooper.

MCTs are a critical component of the Crisis Now framework, and with these requested funds, IAC will be able to provide the behavioral health peer support specialists needed to implement this important level of care. It is likely that some level of Trust funding may be required for a period of 2-3 years while perfecting operations and fully maximizing Medicaid revenue. This proposal is recommended by the Trust program staff for full funding.

COMP PLAN IDENTIFICATION

Goal	Objective	Comments
Goal 2 Healthcare	2.1 Access & receive quality healthcare	The mobile crisis teams will also impact Goal 4, 5, and 6.

PROJECT DESCRIPTION

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

PROJECT DESCRIPTION

This project is focused on implementing a behavioral health crisis system of Care in the Fairbanks North Star Borough. The essential functions of the mobile crisis team (MCT) will include triage and screening (explicit screening for suicidality); assessment; de-escalation/resolution; peer support; coordination with medical and behavioral health services; collaboration with families and natural supports, information and referrals; transportation; and crisis planning and follow-up. The MCT will address recovery needs and will provide trauma-informed care with a specific focus on suicide prevention. MCT staff will participate with the Crisis Now steering committee as

it works through the build out of the plan, and will be supportive of the MOA development process with partner organizations.

This project is focused on implementing a behavioral health crisis system of care in the Fairbanks North Star Borough. By providing a behavioral health crisis system of care, people in crisis get the right care, in the right setting, when they need it. In order to build this system of care, there must be a crisis call center, a mobile crisis team, and a crisis response center (i.e. 23-hour stabilization or short-term stabilization) in order to provide multiple opportunities for intervention at less intensive levels of care. This grant proposal specifically focuses on discussing and requesting funding for one portion of the behavioral health crisis system of care, the clinician position on the MCT, who will provide crisis services to any person in the North Star Borough in his or her home, workplace, or any other community-based location in a timely manner (the Bridge is submitting a proposal for the second half of the mobile crisis team, the peer support specialist). The essential functions of the team will include triage and screening (explicit screening for suicidality); assessment; de-escalation/resolution; peer support; coordination with medical and behavioral health services; collaboration with families and natural supports, information and referrals; transportation; and crisis planning and follow-up. The mobile crisis team will address recovery needs and will provide trauma-informed care with a specific focus on suicide prevention.

This Trust funding proposal will be supplemented by a smaller grant award from the DHSS Division of Public Health, awarded in February 2021, called "Restore Hope in Linkage to Care Collaboration." The City of Fairbanks Fire Department, AKBH, and The Bridge Support Services will build an infrastructure in Fairbanks to implement 24/7 coverage of the MCT. This project is being done in collaboration with Careline, the City of Fairbanks Crisis Now Coordinator, and the Fairbanks Fire Chief.

EVALUATION CRITERIA

- 1) How much did we do?
 - #of beneficiaries who receive crisis peer support services from MCT
 - # of beneficiaries who received follow-up after 48 hours by a Peer Support Professional
- 2) How well did you do?
 - % of people who engage in recovery supports, housing, employment or other treatment services
 - # of family members who find resources for their child, spouse or parent
- 3) Is anyone better off as a result of this project?
 - #of beneficiaries who report that they are better off by having received services.
 - # of beneficiaries who are diverted from higher levels of care including hospitalization.

SUSTAINABILITY

We believe that Medicaid, contracts and grants will provide a strong base of support for The Bridge's Peer Support Services including the Mobile Crisis Team. By allowing the Peer Support Specialists to bill up to 22 hours for crisis services to connect individuals with recovery supports, treatment, housing and employment, we can maximize the services for individuals that call 911 or 988 (Careline) that need more than telephone crisis supports.

WHO WE SERVE

This project will provide necessary crisis services to The Trust's beneficiaries which include those who are mentally ill (i.e. those diagnosed with schizophrenia, delusional disorder, mood disorders, anxiety disorders, somatoform disorders, personality disorders, dissociate disorders, and other psychotic or severe and persistent mental disorders); chronic alcoholics suffering from psychosis; and other persons needing mental health services. As highlighted in the Alaska Statutes, the integrated comprehensive mental health program, for which expenditures are made by The Trust, shall give priority in service delivery to persons who, as a result of a mental disorder, may require or are at risk of hospitalization or are experiencing such a major impairment of self-care, self-direction, or social and economic functioning that they require continuing or intensive services. By providing mobile crisis team services, Trust beneficiaries who are in crisis will receive the right care, in the right setting, when they need it. Beneficiaries will be better off, as the mobile crisis team will lead to a decrease in use and interaction between Trust beneficiaries and emergency departments, jails, and police, and will lead to linkage to appropriate care and treatment through triage/screening, assessment, de-escalation, coordination with community services, and crisis planning and follow-up.

ESTIMATED NUMBERS OF BENEFICIARIES SERVED EXPERIENCING:

Mental Illness:	516
Substance Abuse	516
Secondary Beneficiaries(family members or caregivers providing support to primary beneficiaries):	3170

BUDGET

Personnel Services Costs	\$306,945.00
Personnel Services Costs (Other Sources)	0
Personnel Services Narrative:	<p>Five (5) FTE Peer Support Specialist will be hired to provide 24/7 coverage on the MCT. Each Peer Support Specialist will be hired based upon their level of certification with the average hourly wage anticipated to be \$17.60 per hour. They will work 8 hours shift and be provided benefits that include health and dental insurance, a 2% retirement match, 10 paid holidays and 7 hours of leave per pay period.</p> <p>Annual Benefit Cost for Peer Support Specialist are health and dental insurance (\$9,840), retirement (\$732), holidays (\$1,320) leave time (\$3,203) worker's comp (\$1,318) and federal/state taxes (\$3,368). Annual cost of benefits = \$19,781 (cost of holiday and leave are included</p>

	<p>due to other staff having to be paid during their time off to provide 24/7 coverage)</p> <p>Annual wage cost of the Peer Support Specialist is based upon an average rate of pay of \$17.60 x 2080 hours = \$36,608.</p> <p>Total annual cost of Peer Support Specialist - \$56,389 Total Cost of Peer Support Specialist \$56,389 x 5 FTE = \$281,945 – all of which is requested from the Trust</p> <p>The Bridge Program Services Director – will provide direct supervision, oversee training, and be available for on-call when necessary. This position will be a salaried position at \$54,000 This position will be provided benefits that include health and dental insurance, a 2% retirement match, 10 paid holidays and 7 hours of leave per pay period. Annual Benefit Cost for the Bridge Program Services Director are health and dental insurance (\$9,840), retirement (\$1,080), worker's comp (\$1,620) and federal/state taxes (\$4,968). Annual cost of benefits = \$17,508 (cost of holiday and leave are NOT included due to no extra pay required other than the normal salary. Annual cost of the Bridge Program Services Director \$71,508</p> <p>This position will oversee the Bridge Services with 50% of the position's time designated to the MCT efforts totaling \$35,754 - Amount requested from the Trust is \$25,000 with \$10,754 being contributed to the project through other funds.</p>
--	--

Travel Costs	0
Travel Costs (Other Sources)	0
Travel Narrative:	No funds requested - These costs will be provided by other funds received from the City of Fairbanks.

Space or Facilities Costs	\$7,000.00
Space or Facilities Costs (Other Sources)	0
Space or Facilities Narrative:	Rents - The cost of rents will be spread between programs located in the space based upon the square footage they occupy. An amount of \$500 per month totaling \$6,000 is

	<p>requested from the Trust to pay the cost of peer support specialist space. This will be matched by funds received from the City of Fairbanks</p> <p>Telephone – Each peer support specialist will be provided a cell phone to use. Total cost of 5 phones x 29 per line plus data cost = \$175 per month. Total amount requested from the trust is \$1,000 with the remainder being paid for by funds received by the City.</p>
--	--

Supplies Costs	\$1,055.00
Supplies Costs (Other Sources)	0
Supplies Narrative:	Office Supplies - will include pen, printer ink, paper, and other necessary supplies to carry on the day to day of the office – Total amount requested from the Trust \$1,055 - These costs will be matched by other funds received from the City of Fairbanks

Other Costs	\$35,000.00
Other Costs (Other Sources)	0
Other Costs Narrative:	The organization IAC has an administrative cost of 10%. This amount is requested from the trust to provide services related to human resources, accounts payable, grant reporting, insurances, audit services, and anything else required for administering the grant and providing support for the services provided.

Total Amount to be Funded by the Trust	\$350,000.00
Total Amount Funded by Other Sources	\$125,000.00

OTHER FUNDING SOURCES

Restore Hope Grant with the City of Fairbanks	\$125,000.00
Total Leveraged Funds	\$125,000.00

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.

COMP PLAN IDENTIFICATION

Goal	Objective	Comments
Goal 5 Suicide Prevention	5.2 Crisis system improvement	

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 programming 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:	<p>\$190,000 – PH&SA employees to oversee the project or provide information relevant to program design:</p> <ul style="list-style-type: none"> • 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:	<p>\$100,000 - Legal and consulting fees</p> <p>\$100,000 – Project manager (contracted)</p> <p>\$10,000 – Architecture: requirements analysis</p>

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

MEMO

To: Verné Boerner - Program & Planning Committee Chair
Date: April 21, 2021
Re: FY21 Partnership Grant Request
Amount: \$250,000.00
Grantee: Beans Cafe Inc
Project Title: Permanency Navigation + Support and Interim Capital for new building

REQUESTED MOTION:

Approve a \$250,000 FY21 Partnership Grant to Beans Café for Permanency Navigation + Support and Interim Capital for New Building project.

Assigned Program Staff: Kelda Barstad

STAFF ANALYSIS

Bean's Café began in 1979 as a day shelter to serve the homeless in Anchorage. In 1985, Bean's relocated to the building on the Third Avenue and Karluk Street, serving warm nourishing meals and offering a place for the homeless to rest, warm up, enjoy conversation and connect with services. During COVID, Bean's Café opened the mass emergency shelter located in the Sullivan Arena and offered those same services to many more people and added overnight shelter to the list of services offered by the agency. Bean's Cafe provides nearly 800,000 meals annually, prior to the implementation of the mobile food delivery program and has now outgrown their facility at Third Avenue. In order to serve the needs of the community, Bean's Café completed an extensive real estate search for suitable properties and ultimately decided the best option is to remodel warehouse space they already own. The warehouse space will need remodeling and an addition to meet the current and future needs of the agency. The warehouse is currently leased and expected to be vacated this summer. The current Bean's café building sold and these combined circumstances necessitate an interim location during construction with reconfigured office spaces to accommodate all staff.

The mission of Bean's Cafe is that Bean's Café exists to fight hunger for all ages, one meal at a time, while providing a pathway to self-sufficiency with dignity and respect. The Permanency Navigation Program created by Bean's Café fulfills the latter part of their mission. This work has seen different iterations over the years, with the Permanency Navigation Program formally established in 2020 with combined funding from the Trust, Rasmuson Foundation, Cook Inlet Tribal Council and the Municipality of Anchorage. The Permanency Navigation Program has moved hundreds of individuals

out of shelter to supportive housing facilities or to another positive housing outcome. This program has been able to offer Bean's Café clients the opportunity to regain security, overall safety, and engage in supportive helping relationships that allow them to move forward with rebuilding their lives, as well as develop pathways to permanent housing, income, healthcare, and stability. The services provided by Bean's Cafe serve all categories of Trust beneficiaries who are experiencing homelessness in Anchorage.

COMP PLAN IDENTIFICATION

Goal	Objective	Comments
Goal 3 Economic and Social Well-being	3.4 Basic needs services	

PROJECT DESCRIPTION

The following is excerpted from the prospective grantee's application.

PROJECT DESCRIPTION

This request is two-fold. A continuation of support from the Trust for a permanency navigator position and support for transitional and intermediate needs for Bean's Café to relocate from its current location into an interim location, while the new permanent facility is being remodeled.

Permanency Navigation Program

Bean's Cafe has operated the emergency mass shelter at the Sullivan Arena during COVID. During the months of October 2020 – January 2021, the average number of clients at the shelter was 400 per night. Early on, Bean's Café recognized the need for a team to assist clients to get out of emergency shelter and/or camps. The Permanency Navigators assist clients to self-resolve housing issues, navigate behavioral health, addiction treatment and health care services, and connect them to available benefits and other resources to eliminate housing barriers. The goal is for clients to be "housing ready" which may include assistance in obtaining ID, benefits, and connection to anti-recidivism and employment services.

The Permanency Navigation Program team is currently comprised of a manager, three permanency navigators, one medical services navigator and one navigator funded by Cook Inlet Housing Authority that focuses on clients who are Alaska Native or American Indian. The current unmet need is for the navigation team to be flexible enough to consistently meet with and provide services to the clients in their off-site locations, primarily the transitional housing located at four Anchorage hotels. Bean's Cafe will continue to connect clients in these locations to existing services and help them find a pathway to self-sufficiency. Since the program started last year 500 people were moved from shelter to transitional and supportive housing. There is simply not enough permanent supportive housing or rapid rehousing options. This program would strive to help our clients find other ways to resolve their housing issues. Self-resolve options could include reunification with family/friends; accessing any available benefits (SSI, SSDI, VA, etc.), exploring

roommate or other alternative, less expensive living options, connection to anti-recidivism and employment programs. This program helps fill a critical need to connect people to housing as the Municipality of Anchorage works to close the emergency shelter and transition people away from temporary hotel accommodations. Many people staying at the shelter need the assistance from a navigator to obtain the items they need to be ready for housing and obtain housing.

Building Move - Transitional and Intermediate Needs

As part of this request, Bean's Cafe is also requesting support for transitional and intermediate needs associated with the move out of 1101 E. 3rd Avenue and support for transitional operations to include lease of warehouse space and the consolidation of two commercial kitchen spaces into one at 1020 E. 4th Avenue or use of a temporary kitchen facility. Any remaining funds from the transition will be used toward the relocation of meal production and food storage operations to the building at 1524 Ship Avenue which will be the permanent home for Bean's Café. This building is currently occupied by tenants who will vacate June 30, 2021 after which Bean's Cafe can begin remodeling the building to include the construction of an addition for much needed food warehouse space. Once the remodel and construction is complete, a 16,000 sq. ft. space for production of up to 1 million meals a year will be ready for Bean's Café to occupy.

EVALUATION CRITERIA

Bean's Cafe will continue to track the following data points for Permanency Navigation: number of clients served, number of clients housed, and referred to partners for other services related to basic needs, employment, benefits assistance, and health care services.

The results of the facility relocation will be described in a narrative, highlighting the items funded through this grant.

SUSTAINABILITY

Bean's Cafe is confident the support provided by the Trust can almost fully accommodate the interim and transitional needs for the relocation of facilities from 1101 E. 3rd to 1020 E. 4th until Bean's Cafe are able to relocate permanently to the property at Ship and Orca. Once the relocation is complete, Bean's Café does not intend to move locations again in the foreseeable future. Permanency Navigation services have the potential to be funded through case management services or homelessness services grants in the future and will be explored. Cook Inlet Housing Authority and Rasmuson Foundation both invest in the Permanency Navigation program. The Municipality of Anchorage Emergency Operations Center currently funds the other positions, with a grant to be awarded later this year to continue the service. Bean's Cafe has been actively supported by the community, donors and other funders and it is believed that this support will continue into the future.

WHO BEAN'S CAFE SERVES

Virtually every person who utilizes Bean's Cafe Mass Emergency Shelter is a Trust Beneficiary. The need for navigation services has grown and continues to do so. Bean's Cafe has entered more than 3200 unique individuals into the coordinated entry system since Bean's Cafe began emergency shelter operations in winter 2019- which includes the large increase since opening the mass temporary emergency shelter in March 2020. Numbers of Trust beneficiaries reported in the homeless service system are quite low compared to staff observations. This is because many people do not want to self-report as a beneficiary. It can be difficult to disclose this information due to personal preference, undiagnosed disorders, lack of private space upon shelter check in, and perception that self-identifying will disqualify them from the shelter or services. Better information is gained when people interact with a Permanency Navigator and have a more in-depth service relationship.

ESTIMATED NUMBERS OF BENEFICIARIES SERVED EXPERIENCING

Mental Illness:	200
Developmental Disabilities:	30
Alzheimer's Disease & Related Dementias:	30
Substance Abuse	300
Traumatic Brain Injuries:	30
Secondary Beneficiaries(family members or caregivers providing support to primary beneficiaries):	30
Number of people to be trained	20

BUDGET

Personnel Services Costs	\$65,000.00
Personnel Services Costs (Other Sources)	\$346,934.00
Personnel Services Narrative:	Rasmuson Foundation for continued Permanency Navigation support, EOC funding for three navigation positions and CIHA for one navigation position.

Space or Facilities Costs	\$175,000.00
Space or Facilities Costs (Other Sources)	\$0.00
Space or Facilities Narrative:	Bean's Cafe is currently providing nearly 800,000 meals annually, before implementation of the mobile food delivery program and has outgrown the facility at 1101 E. 3rd Avenue. Bean's Cafe requires warehouse space, a larger kitchen, and the capacity to take on the increased need for meal production and storage. Currently owned warehouse space can be remodeled and retrofitted to accommodate our needs indefinitely.

Equipment Costs	\$10,000.00
-----------------	-------------

Equipment Costs (Other Sources)	\$0.00
Equipment Costs Narrative:	Current office furniture and technology able to be moved will be used at the new location. Additional structures to follow CDC guidelines for barriers and spacing between workspaces are needed as Bean's Cafe consolidates staff from the Cafe into our current administrative building during the transition.

Total Amount to be Funded by the Trust	\$250,000.00
Total Amount Funded by Other Sources	\$346,934.00

OTHER FUNDING SOURCES

Rasmuson Foundation	\$100,000.00
Emergency Operations Center (EOC)	\$146,934.00
Cook Inlet Housing Authority (CIHA)	\$100,000.00
Total Leveraged Funds	\$346,934.00

Written Public Comment

Testimony to:

5/5/21

**the API Governing Board,
The Alaska Mental Health Board,
The Alaska Mental Health Trust Authority Board,**

Acute care psychiatric patients that enter a locked psychiatric facility or unit in Alaska face unnecessary mistreatment. Most states have written laws or regulations to protect patients with oversight; Alaska has not. And most states have a high level of protection for patients that Alaska does not have.

Psychiatric patients have a right to file a grievance by law, AS47.30.847, and bring their grievance to an impartial body and have access to a trained patient advocate. Patients are not told they have those rights. There is no requirements of what training the patient advocate must have in hospital policy. The Legislative Legal Services, April 20th, stated that patient do have a right to file a grievance, but there is no state enforcement mechanism.

What does it mean for AS47.30.847 not to have a state enforcement mechanism? It means that managers of psychiatric facilities or units can choose when a psychiatric patient can file a grievance and bring it to an impartial body.

It should be in law or regulations that psychiatric patients have a right to file a grievance and bring it to an impartial body at the time of their choosing. As of now, patients can be put through an endless informal complaint process.

The Gender Choice of staff for intimate care law 18.20.095 was passed in 2008. The law states that routine safety checks into a patient's bedroom, bathroom and shower must be conducted by the same gender staff as the patient. The law is meant to protect psychiatric patients, but as of now, API management has written policies that sidestep the law that they do not like.

State law AS47.30.840 gives eleven rights to psychiatric patients. But again, there is no enforcement mechanism and no oversight from an independent body. And the rights for patients are often cut back or not given at all.

There are approximately 10,000 acute care psychiatric patients annually that enter a psychiatric facility or unit in Alaska. And patients are often mistreated because of poor laws or no state enforcement mechanism. Managers of psychiatric facilities or units run their hospitals for convenience and economics. That was an opinion by the Alaska Supreme Court 15 years ago in “Myers v API.”

Without changes in laws or regulations, managers of psychiatric facilities or units will continue to do so. I am encouraging your respective Boards to get involved in bringing about changes in laws and regulations that will better protect disabled psychiatric patients.

Mental Health Advocates, Faith J. Myers, 3240 Penland Pkwy, Sp. 35, Anchorage, Ak. 99508 907-929-0532

Faith J. Myers is the author of “Going Crazy in Alaska: A History of Alaska’s Treatment of Psychiatric Patients.”