Introduction

The Trust’s mission is to improve the lives of beneficiaries through advocacy, planning, implementing and funding a Comprehensive Integrated Mental Health Program. Trust beneficiaries include groups of Alaskans experiencing mental illness, developmental disabilities, chronic alcohol or drug addiction, Alzheimer’s disease and related dementia, and traumatic brain injuries. The Trust also works in prevention and early intervention services for individuals at risk of becoming beneficiaries.

The Trust develops biannual budgets, and, following trustee approval, submits a budget for the upcoming fiscal year to the Governor and the Legislative Budget and Audit Committee each September. An essential part of developing the Trust’s budget is listening to partner organizations who support and serve Trust beneficiaries across Alaska. One tool used to gather such feedback is direct engagement with partners through stakeholder meetings. This document is a summary of the many conversations that took place during the stakeholder meetings informing the development of the FY22/23 budget.

The Trust offers sincere thanks to all partner organizations who participated in these stakeholder meetings. Your experience, expertise, knowledge and recommendations are invaluable in informing Trust budget development and decision making.

For more information about the FY 22/23 budget development process, visit: https://alaskamentalhealthtrust.org/alaska-mental-health-trust-authority/resources/fy-22-fy-23-planning/

Purpose of Stakeholder Meetings

Trust staff engaged with more than 90 organizations, and held more than 105 stakeholder meetings with valued partner organizations, using the information gathered to craft budget and policy recommendations for trustees to consider for the FY22/23 budget periods. The organizations engaged during this process all support Trust beneficiaries, and the variety of means by which they do so, and the different perspectives represented strengthened the process.

In these meetings, Trust staff asked partners to provide input and prioritization of key issues impacting Trust beneficiaries. While specific initiatives were discussed in many of these meetings, the prime purpose of the Trust’s stakeholder meetings was to solicit feedback on where to focus Trust funding and efforts in the next two years to help beneficiaries thrive in their communities. Stakeholders were asked to provide input from
their respective areas of expertise by looking at the system holistically, not just what impacts a specific beneficiary group.

Though each stakeholder meeting was unique, the list below includes the types of questions asked. This list does not represent all the questions asked.

- What services/projects/initiatives do you identify as priorities for the Trust to serve beneficiaries?
- What investments should the Trust make that will have the greatest positive impact on beneficiaries’ lives?
- What investments should the Trust make that will lead to the deinstitutionalization (or prevent the institutionalization) of beneficiaries?
- What is missing from the current continuum of care that will help Trust beneficiaries live independently in their community?
- What needs to change to enhance or improve services offered to Trust beneficiaries?
- Are there promising practices or evidence based practices that the Trust should invest in piloting in Alaska?
- Do we have projects that need formal evaluation in order to be replicated or brought to a statewide scale?

Stakeholders Engaged

From late 2019 through June 2020, Trust program officers met with a multitude of stakeholders as a part of the Trust’s budget development. Program staff organized stakeholder meetings around the Trust’s established focus and priority areas, these include: Housing and Long-Term Services & Supports, Substance Abuse Prevention & Treatment, Disability Justice, Beneficiary Employment and Engagement, Workforce Development, and Early Childhood Prevention and Intervention.

This list represents partner organizations that were engaged as a part of the Trust’s FY22/23 budget development process. Some of the organizations listed were engaged multiple times, and/or pertaining to more than one Trust focus/priority area.

- Advisory Board on Alcoholism and Drug Abuse
- AgeNET
- Akeela, Inc.
- Alaska Assoc. of Developmental Disabilities
- Alaska Assoc. for Infant & Early Childhood Mental Health
- Alaska Behavioral Health Association
- Alaska Commission on Aging
- Alaska Court System
- Alaska Department of Education & Early Development
- Alaska Department of Corrections
- Alaska Department of Health & Social Services
- Alaska Department of Labor and Workforce Development
- Alaska Department of Public Safety
- Alaska Early Childhood Coordinating Council
- Alaska Early Childhood Governance Work Group
- Alaska Early Childhood Strategic Planning Sessions
- Alaska Health Care Workforce Coalition
- Alaska Health Education Consortium
- Alaska Housing Finance Corporation
- Alaska Justice Information Center
- Alaska Mental Health Board
- Alaska Native Justice Center
- Alaska Native Justice Center (Reentry Service Provider)
• Alaska Native Medical Center
• Alaska Native Tribal Health Consortium
• Alaska Police Standards Council
• Alaska Primary Care Association
• Alaska Regional Hospital
• Alaska State Hospital and Nursing Home Association
• Alaska State Troopers
• Alaska Training Cooperative
• All Alaska Pediatric Partnership
• AMHB/ABADA Executive Committee
• Anchorage Assembly members
• Anchorage based behavioral health providers
• Anchorage Coalition to End Homelessness
• Anchorage Fire Department
• Anchorage Neighborhood Health Center
• Anchorage Police Department
• ASHNA Acute Behavioral Health Improvement Project workgroups
• AWAIC
• Champney Consulting
• Cook Inlet Tribal Council
• Covenant House
• COVID-19 Employment Taskforce
• Division of Public Health (DHSS)
• Direct Service Professional (DSP) Workforce Development Project Team
• Disability Law Center
• Division of Behavioral Health - Children’s Mental Health Programs (DHSS)
• Division of Behavioral Health – Recovery and Peer Support Services Program (DHSS)
• Division of Public Health, Section of Women’s Children’s & Family Health (Title V) (DHSS)
• Early Childhood Coordinating Systems Partners
• Fairbanks Community Mental Health Services
• Fairbanks Memorial Hospital
• Fairbanks Native Association (Reentry Service Provider)
• Fairbanks Police Department
• Frontier Community Services
• Governor’s Council on Disabilities and Special Education (GCDSE)
• GCDSE Developmental Disabilities Committee
• Hope Community Resources
• Individual Placement & Supports (IPS) Alaska Team Leadership
• Infant & Early Childhood Mental Health/Consultation Workforce Stakeholders
• Interior Alaska Center for Non-Violent Living (Fairbanks Reentry Coalition)
• JAHMI
• JAMHI (Juneau Reentry Coalition)
• Juneau Police Department
• Knik Tribal Council
• Mat-Su Behavioral Health Intervention Team
• Mat-Su Crisis Intervention Team Coalition
• Mat-Su Fire Department
• Mat-Su Health Foundation
• Microenterprise Program Lead
• Municipality of Anchorage
• NeighborWorks (Anchorage Reentry Coalition)
• Providence Health Systems
• Public Defender Agency
• Rasmuson Foundation
• Recover Alaska
• Reduce Early Childhood Exclusionary Practices Steering Committee
• Reentry Services Providers
• Rural Elder Services Network
• Senior and Disabilities Services (DHSS)
• Southcentral Foundation
• Southcentral Foundation (Reentry Service Provider)
• Southcentral Foundation Indigenous Project LAUNCH
• Statewide Independent Living Council
• Statewide Therapeutic Courts
• Tanana Chiefs Conference
• The ARC
• thread
• Traumatic & Acquired Brain Injury Advisory Council
• Tribal Behavioral Health Directors
• Trust beneficiaries
• UA College of Human Development
• UA Department of Psychology
• UAA
• UAA Center for Human Development
• Valley Charities (Mat-Su Reentry Coalition)
• Volunteers of America
Stakeholder Discussion Summary

The summaries below represent the many discussion comments recorded by Trust staff during the FY22/23 budget development stakeholder meetings. Prior to being summarized, comments were organized by common themes as they relate to goals in Strengthening the System: Alaska’s Comprehensive Integrated Mental Health Program Plan, 2020-2024, aka the Comp Plan. The Comp Plan is made up of nine goals, all intended to ensure that Alaskans receive comprehensive prevention, treatment, and support services at the appropriate level of care across the lifespan, leading to meaningful lives in their home communities.

<table>
<thead>
<tr>
<th>Goal 1: Early Childhood</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programs serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services.</td>
</tr>
</tbody>
</table>

Summary of comments related to Goal 1

Many health and social problems are attributed to and can be predicted by childhood experiences. Stakeholders advocated that a “game changer” for Trust investment would be to focus more strategically and substantially on “upstream” interventions to prevent longer term negative health outcomes that impact Trust beneficiaries. Stakeholders placed an emphasis on promoting evidenced-based practices and expanding universal screening efforts statewide. At present, parents and families lack consistent access to quality navigation and coordination support to readily and meaningfully access the complex system of care for young children diagnosed with disabilities. Improving case management, access, and care coordination will support the social-emotional needs of children and their caregivers.

Themes and concepts related to Goal 1 were discussed in stakeholder meetings associated with the Early Childhood Prevention and Intervention priority area, Housing and Long-Term Services & Supports focus area, and the Substance Abuse Prevention & Treatment focus area.

<table>
<thead>
<tr>
<th>Goal 2: Healthcare</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alaskans have access to integrated healthcare options that promote optimal health, wellness, and independence.</td>
</tr>
</tbody>
</table>

Summary of comments related to Goal 2

Stakeholders promoted the idea that Trust beneficiaries should have real access to integrated healthcare options that promote optimal health, wellness, and independence. The importance of continued promotion and flexibility for the expanded use of reimbursable telehealth approaches - similar to what has been available during the COVID-19 pandemic - was emphasized. Feedback also focused on promoting whole person integrated care that supports primary care providers to have co-located behavioral health staff to meet the robust needs of Trust beneficiaries. There is a strong need in Alaska to build infrastructure and service capacity to screen and
render quality services for beneficiaries who have traumatic or acquired brain injuries (TABI). Investment in a TABI advisory council and training the workforce about TABI is viewed as a necessary area for Trust support and ongoing investment.

This theme was discussed in stakeholder meetings associated with the Early Childhood Prevention and Intervention priority area, the Housing and Long-Term Services and Supports focus area, the Substance Abuse Prevention & Treatment focus area, and the Disability Justice focus area.

**Goal 3: Economic and Social Well-Being**

*Trust beneficiaries have strong economic and social well-being.*

<table>
<thead>
<tr>
<th>Summary of comments related to Goal 3 Part 1: Employment</th>
<th>The Trust’s efforts to expand resources and promote successful long-term employment for Trust beneficiaries is still necessary and should be expanded to promote additional evidence-based supported employment interventions. Over the last few years the Trust has focused on stigma reduction campaigns using various media platforms but there’s still work to be done to educate employers about beneficiaries experiencing disabling conditions who are entering the workforce. Stakeholders promoted the need for increased statewide access to individual placement and supports and tailored approaches for beneficiaries seeking employment in rural communities. There is an ongoing emphasis and effort to increase the number of beneficiaries who have access to self-employment and other self-directed opportunities.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>This theme was discussed in stakeholder meetings associated with the Beneficiary Employment and Engagement focus area, the Housing and Long-Term Services and Supports focus area, the Disability Justice focus area, the Substance Abuse Prevention &amp; Treatment focus area, and the Workforce priority area.</td>
</tr>
<tr>
<td>Summary of comments related to Goal 3 Part 2: Housing</td>
<td>Increased timely access to supportive housing to help people with disabilities, as well as additional housing for specific populations such as seniors, single adults, individuals with complex behavioral conditions, and returning citizens from correctional environments will aid in ensuring beneficiaries have housing stability and will reduce the use of costlier systems. Stakeholders shared that housing in many rural communities is at a “crisis level” and needs additional support. With many beneficiary serving programs there is also continued need for coordinated housing and case management services which promotes access to and engagement in housing programs. There is always a need for flexibility amongst housing programs and the reduction of administrative burdens for operating them - especially as it relates to data tracking. Lastly, expanding the use of the proven practices such as Permanent Supportive Housing and Rapid Rehousing will both provide housing to homeless beneficiaries and services to aid in housing stability and recovery.</td>
</tr>
</tbody>
</table>
| Summary of comments related to Goal 3 Part 3: Services for Alaskans Experiencing Developmental Disabilities | Ongoing efforts are needed to engage beneficiaries with development disabilities in their communities by promoting volunteer, recreational, and peer-directed opportunities. There continues to be momentum towards the developmental disability (DD) shared vision of self-directed service delivery and the need for support in this area. In stakeholder discussions an emphasis was placed upon coordination of service delivery, but also coordination between State of Alaska Departments such as the Division of Behavioral Health, Senior and Disability services, etc.

This theme was discussed in stakeholder meetings associated with the Housing and Long-Term Services and Supports focus area.

| Goal 4: Substance Use Disorder Prevention | Alcohol and substance misuse impact every community in Alaska. Stakeholders emphasized the need to build-out the treatment and recovery infrastructure, and to focus on the ancillary community services and supports such as assertive community treatment (ACT) teams, intensive case management services, and mobile crisis responses services to better respond to individuals in their community. There is also a great need and support for behavioral health resources to be offered outside the traditional brick and mortar behavioral health center, and to shift to service delivery into schools, universities, mobile behavioral health units, and both adult and pediatric primary care settings. Throughout stakeholder meetings in all areas there was an ongoing emphasis on the great need for enhanced and readily available care coordination and case management services. Care coordination and case management services must cross service systems to better support a beneficiary who may have one or more co-occurring disabling condition(s). To aid in accessing the right services at the right time, additional resources and planning efforts are needed to focus on universal screening and follow up care to be performed by qualified and credentialed addiction professionals.

This theme was discussed in stakeholder meetings associated with the Housing and Long-Term Services and Supports focus area, the Substance Abuse Prevention & Treatment focus area, the Early Childhood Prevention and Intervention priority area, and the Workforce priority area.

| Summary of comments related to Goal 4 Part 2: Recovery | Many stakeholder groups across the focus and priority areas encouraged the ongoing development of peer and recovery-oriented services, including statewide certification and training for peer workers. Community behavioral... |
health partners have expressed interest in further integrating peer services into their service arrays to complement clinical and other types of supports. Additionally, the peer support model of service is integral to the crisis continuum of care expansion work the Trust is currently engaged in. Peer support could also be supportive model for aiding the criminal justice population in reentry efforts - the Department of Corrections is interested in additional Trust investment in this area. Investing in a credentialed peer support workforce is both a tribal and non-tribal recommend strategy for expanding the workforce.

This theme was discussed in stakeholder meetings associated with the Substance Abuse Prevention Treatment focus area, the Beneficiary Employment and Engagement focus area, the Disability Justice focus area, and the Workforce priority area.

**Goal 5: Suicide Prevention**
*Individuals, families, communities, and governments tale ownership to prevent suicides and self-harm in Alaska.*

| Summary of comments related to Goal 5 | The expansion of a complete crisis continuum of care to include both mobile crisis services and a crisis call center is evident and necessary. The crisis continuum will promote access to immediate service delivery and will have an emphasis on *no wrong door* for families and law enforcement seeking immediate assistance for a loved one in crisis. The Trust is on the forefront of facilitating and convening stakeholders to ensure the crisis response system is robust enough to meet the growing needs. The use of the peer model is complimentary to the Trust’s goal of helping beneficiaries to gain long term employment and will be integral to the success of a crisis system. As referenced in other stakeholder meetings, the need for a more robust and coordinated case management and care coordination services will require ongoing strategy and investment. Lastly, Stakeholders would like to see funding and support for a gap analysis related to the zero-suicide prevention framework. |

These themes were discussed in stakeholder meetings associated with the Disability Justice focus area and the Substance Abuse Prevention & Treatment focus area.

**Goal 6: Protecting Vulnerable Alaskans**
*Alaskans are free from abuse, neglect, self-neglect, and exploitation.*

| Summary of comments related to Goal 6 | State and local public awareness campaigns, training programs, and multi-disciplinary teams are essential strategies for protecting vulnerable beneficiaries. Stakeholders stressed the importance of getting information and resources to beneficiaries/their families before they have contact with the protective service system. They also voiced that investing in provider resources will aid in strengthening families who may have interactions with |

Stakeholder Meeting Summary: Trust FY22/23 Budget Development Process
the protective service system using innovative programs that support the whole family not just the individual family member who entered the system. Provider resources should be expanded to bolster foster parent training and other soft touch points that families and children may be connected to for support. Overall there is ongoing need to focus on additional strategies and investment in the protective service system, especially the child welfare system.

This theme was discussed in stakeholder meetings associated with the Disability Justice focus area, the Housing and Long-Term Services and Supports focus area, the Substance Abuse Prevention and Treatment focus area, and the Workforce priority area.

Goal 7: Services in the Least Restrictive Environment

Trust beneficiaries’ behavioral health needs are accurately assessed and met in the least restrictive environment.

| Summary of comments related to Goal 7 | Least restrictive practices in home communities are paramount for Trust beneficiaries to be able to live meaningfully as contributing members of those communities. Receiving services in the least restrictive way preserves existing natural supports and allows for the development of additional supports, making it the desired first choice. Stakeholders discussed and emphasized multiple times that there needs to be expanded eligibility to allow for reimbursable service delivery for those with TABI, Alzheimer’s disease-related dementias (ADRD), and any beneficiary who does not meet the waiver level of care but needs services and supports. There is an ongoing need for case management and care coordination to ensure services are accessed and maintained appropriately. Stakeholders are supportive of increased access to assistive technology and home modification programs to promote beneficiaries residing in their home communities. Both formal and informal (family/friends) direct service providers need respite and support so they can provide the necessary care in the beneficiary’s home community without the need for costlier institutional care.

There is also a need for more criminal justice diversion programs to help reduce the number of beneficiaries entering or becoming involved in the criminal or juvenile justice system. One supported strategy would be using a mobile crisis response team to decrease the use of law enforcement responses to a behavioral health crisis.

This theme was discussed in stakeholder meetings associated with the Housing and Long-Term Services and Supports focus area, and the Substance Abuse Prevention & Treatment focus area.

Goal 8: Services in Institutional Settings

Trust beneficiaries who are in an institutional setting receive the necessary services and recovery supports to return to the community of their choice.
<table>
<thead>
<tr>
<th>Summary of comments related to Goal 8</th>
<th>Trust beneficiaries who are in an institutional setting receive the necessary services and recovery supports to return to the community of their choice. The emphasis from stakeholders was to focus efforts on a beneficiary’s return to his/her community and to ensure beneficiaries across service settings have access to stepdown, transitional, and reentry services. Strengthening the facilitation of a beneficiaries’ return using case management, care coordination, and peer supports is paramount for successful reentry; however, this is lacking in today’s system. The criminal and juvenile justice system is supportive of developing and expanding access to screening and services for beneficiaries with neurobehavioral disorders such as TABI, ADRD, and fetal alcohol spectrum disorder (FASD). For additional screening and services to come to fruition across service settings training for staff and program development will be a necessary and ongoing area of investment. Stakeholders requested that the Trust explore the development of FACT (Forensic Assertive Community Treatment) Teams as a strategy to prevent and keep beneficiaries engaged in the justice system out of jail. Stakeholders are also seeking short-term actionable solutions to address the crisis of Title 47 beneficiaries being held in jail, such as alternative options for competency evaluation and restoration, and alternative placement sites while working on longer term system changes such as increasing access and capacity at the Alaska Psychiatric Institute. Criminal justice stakeholders are also seeking additional opportunities to provide trainings related to crisis intervention. This theme was discussed in stakeholder meetings associated with the Disability Justice focus area, the Housing and Long-Term Services and Supports focus area, the Substance Abuse Prevention and Treatment focus area, and the Workforce priority area.</th>
</tr>
</thead>
</table>

### Goal 9: Workforce, Data, and Funding

**The state of Alaska has the workforce capacity, data, and technology systems in place to support the resources and funding of Alaska’s Comprehensive Mental Health Program.**

| Summary of comments related to Goal 9 Part 1: Workforce Shortages | Alaska has a known workforce shortage across many disciplines - especially early childhood, and health/behavioral health-related areas. Without a capable and competent workforce, the continuum of services and care is at risk of not meeting the needs of the most vulnerable Alaskans. Expanding the peer support workforce is a critical piece of building robust community treatment programs and the crisis continuum of care. There is a great need for more highly qualified providers to offer supported employment services across beneficiary categories. Attracting a qualified workforce to Alaska has been boosted by the SHARP program, which has also worked well as a workforce retention effort. Stakeholders report the ongoing need to create a career pathway for direct support staff. |

Stakeholder Meeting Summary: Trust FY22/23 Budget Development Process
<table>
<thead>
<tr>
<th>Summary of comments related to Goal 9 Part 2: Training the Workforce</th>
<th>Advancing the competencies of the healthcare, behavioral health, public health, and criminal justice workforce was an integral theme across all stakeholder meetings. Most stakeholder groups noted that key workforce development strategies include “growing our own” professionals through primary and secondary education, training, loan repayment, recruitment, and retention. Stakeholders were especially supportive of the continuation of programs such as SHARP and the ECHO model, as well as the Alaska Training Cooperative who facilitates numerous training opportunities. Credentialing both the direct service provider (DSP) career path and the peer support career pathway was a common theme amongst partners. There was an emphasis on expanded training regarding state expectations around the 1115 waiver and qualified addiction professionals, and the general preparation of behavioral health organizations to thrive in the new system.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Summary of comments related to Goal 9 Part 3: Data</td>
<td>Stakeholders are encouraging a culture of data-driven decision-making that includes data sharing, data analysis, and data management to link support services across Alaska. There is support for optimizing infrastructure and policy related to the use of health information technology (HIT)/ health information exchange (HIE) and a belief that data sharing will have a return on investment with the efficiencies it supports. There was also an emphasis on data development and the creation of a statutorily required registry specifically as it relates to TABI. Stakeholders are interested in two possible studies: a study on the number of incarcerated beneficiaries and a gap analysis for the Zero suicide framework.</td>
</tr>
<tr>
<td>Summary of comments related to Goal 9 Part 4: Funding</td>
<td>It is important that there are adequate resources and funding committed to meet the goals outlined in Alaska’s Comprehensive Integrated Mental Health Program (COMP Plan), and to help improve the quality of life of all beneficiaries - especially young children at risk of developing a beneficiary condition. A common idea reiterated in several stakeholder groups was the</td>
</tr>
</tbody>
</table>
need for “flexible funding” to support programs and services. There was also a discussion of the need for increased, yet sustainable funding to meet the growing population and their individualized needs. Stakeholders reported that behavioral health Medicaid rates need to be evaluated and adjusted to address the true cost of services, and to address parity issues between the healthcare system and behavioral health.

Throughout the stakeholder summary there has been ongoing references to the need to invest in intensive case management and care coordination models that link beneficiaries across all care and social determinants of health. Lastly, there was an emphasis on funding/building out the infrastructure around neurobehavioral health conditions specifically beneficiaries with TABI, FASD, and ADRD.

This theme was discussed in stakeholder meetings associated with the following focus/priority areas: Beneficiary Employment and Engagement, Housing and Long-Term Services and Supports, Substance Abuse Prevention & Treatment, and Early Childhood Prevention and Intervention.

<table>
<thead>
<tr>
<th>Other Themes Discussed</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>(not directly related to the Comp Plan)</strong></td>
</tr>
</tbody>
</table>

### Summary of other comments received

Although not specifically referenced in the Comp Plan, stakeholders advocated that the Trust provide more planning and logistical resources to maintain a continuum of care that provides quality services at maximum efficiency and effectiveness.

Some stakeholder groups also wanted the Trust to engage in larger policy and governance work through the legislature to elevate and advocate for issues and solutions that impact beneficiaries.

Continued support of the advisory boards and the creation of a TABI advisory board was expressed.

Stakeholders advocated for the Trust to continue providing relief/assistance to beneficiary serving organizations around COVID 19 pandemic, including advocacy and funding supports for distance delivered services.

Another supported effort is the Trust’s technical assistance funding through contracted services - including assistance with grant writing.

These ideas were discussed in stakeholder meetings associated with the following focus/priority areas: Beneficiary Employment and Engagement, Housing and Long-Term Services and Supports, Disability Justice, Substance Abuse Prevention and Treatment, and the Early Childhood Prevention and Intervention.