Implementing a Behavioral Health Crisis System of Care in Alaska

The Alaska Mental Health Trust Authority is contracted with Agnew::Beck Consulting to provide project management support in order to plan and implement a behavioral health crisis system of care, using the Crisis Now Framework as a guide.

Why Crisis Now?

Our current system of care:

- Is challenged to provide timely access to crisis services
- Is unable to meet individuals “where they are at”
- Relies on law enforcement, the criminal justice system and hospital emergency rooms to respond to behavioral health crisis
- Has reduced capacity at Alaska’s only state-run psychiatric hospital

What is the Crisis Now Framework?

**Someone to Talk to, Someone to Respond and a Place to Go**

- Crisis Call Center
- Mobile Crisis Team
- Crisis Response Center
- 23-Hour Stabilization
- Short-term Stabilization

SAMHSA’s National Guidelines for Behavioral Health Crisis Care - A Best Practice Toolkit outlines minimum expectations and best practices for the design, development and implementation of a behavioral health crisis care continuum.

Essential Principles & Practices

- Recovery oriented
- Significant role for peers
- Trauma-informed care
- Zero Suicide/Suicide Safer Care
- Safety and security for staff and people in crisis
- Crisis response partnerships

The Crisis Now framework offers multiple opportunities for resolution, increasing opportunity for intervention at less intensive levels of care and decreasing reliance on inpatient psychiatric beds.

To read more about this framework, and efforts to improve behavioral health crisis response in Alaska, visit: crisisnow.com and alaskamentalhealthtrust.org/crisisnow
Project Outcomes

**Physical Health Emergency**

[Diagram showing the flow from Person in Crisis to 9-1-1, Ambulance/Fire, Emergency Department, and Inpatient Unit]

Implementation of a behavioral health crisis system of care means people experiencing a behavioral health crisis get the right care, in the right setting, when they need it, just like what we expect for individuals experiencing a physical health crisis.

**Behavioral Health Emergency**

[Diagram showing the flow from Person in Crisis to Crisis Call Center, Mobile Crisis Team, 23-Hour Stabilization, Short-term Stabilization, and Post-crisis Wraparound]

**Outcomes**

Decreased use of and interaction with:
- Emergency Department
- Jail
- Police

**Project Team Structure**

**Project Management Team**

- Alaska Mental Health Trust Authority
- Alaska Department of Health and Social Services
- Alaska Department of Public Safety
- Department of Labor and Workforce Development
- Department of Corrections
- Mat-Su Health Foundation
- Advisory Boards

**Ad Hoc Workgroups**

Rates, licensing and regulations, Crisis Call Center, systems oversight and data management, training and workforce development, rural Alaska implementation

**Anchorage Workgroup**

- First responders
- Law enforcement
- Hospitals

**Mat-Su Workgroup**

- Health and social service providers

**Fairbanks Workgroup**

- Funders
- Local health departments

**Anchorage Operators**

**Mat-Su Operators**

**Fairbanks Operators**

**Role of Agnew::Beck Consulting**

Provide project management to ensure planning, coordination, and facilitation to implement the Crisis Now model in Alaska.

Identify and address implementation related system issues in coordination with the Project Management team and other partners.

Facilitate planning and implementation workgroups in three communities: Anchorage, Mat-Su, and Fairbanks.

Develop program and business models for service operators in each community.

Want to know more or get involved?

**Contact:** Katie Baldwin Johnson, Alaska Mental Health Trust Authority
katie.johnson@alaska.gov | 907-269-1049