

FY 2022 Grant Analysis Report July 2022

This report contains information on Trust projects funded in fiscal year 2022.

The staff analyses in this report were informed by FY22 MHTAAR and Authority Grant reports from grantees, FY22 interim reports from grantees when applicable, and through regular communication with grantees, advisory boards, and key partners throughout the year. Projects are organized by Trust focus area. The Table of Contents below is <u>clickable</u>, containing live links to each project.

The Trust thanks the grantee organizations and their staff who work diligently to deploy the Trust funds for projects, services, and programs to improve Alaska's continuum of care for Trust beneficiaries. The time, expertise, devotion, and partnership of Trust grantees cannot be overstated.

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Mental Health & Addiction Intervention

Project Title: Recover Alaska

Grantee: Sultana New Ventures LLC dba The Foraker Group

Fund: Authority Grant

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Years Funded: 7	Project Category: Capacity Building	
FY20: \$100,000	FY21: \$100,000	FY22: \$100,000

Project Description: Recover Alaska (RA) is a partnership of private and nonprofit funders who have come together to pool resources to fund strategies guided by a governing body comprised of the Trust, Mat-Su Health Foundation, Rasmuson Foundation, ANTHC, Southcentral Foundation, Providence Alaska, Department of Health and Social Services. The overarching goal of this partnership is to reduce the negative impacts of alcohol abuse in Alaska. Key strategies for implementation primarily focused on changing statewide cultural norms around alcohol use and readying the state to shift policy to reduce consumption. The five are:

- 1. Positive Social Norms Campaigns: Development of a positive community norms campaigns for youth that highlights healthy behaviors;
- 2. Create/mobilize Advocacy Coalitions: Building advocacy coalitions to advance local and state policy changes;
- 3. Polling: to determine how Alaskans think and feel about alcohol;
- 4. Partnering with Media: Raise overall awareness of the consequences of excessive alcohol consumption; and Pilot a One-Stop-Shop: Create a resource center for all Alaskans to obtain accurate, reliable information about prevention and treatment.
- 5. Create a resource center (One-Stop-Shop) for all Alaskans to obtain accurate, reliable information about prevention and treatment options.

RA seeks to align six major funders to create a strategic, effective long-term campaign that produces change in social acceptability and prevalence of excessive alcohol consumption.

Analysis: Trust engagement and support of Recover Alaska has resulted in the successful passage of an alcohol tax in Anchorage (Alcohol Tax Proposition 13), which now establishes revenue to fund treatment capacity, prevention programs and law enforcement in Anchorage. Taking lead on the efforts to pass legislation (SB9) that updates the antiquated Alaska Title 4 Alcohol statutes has led to a strong coalition including alcohol industry partners, public health and public safety proponents advocating for updates to the statutes. This effort led to successful passage of SB9 during the 23rd legislative session in FY22. The Recover Alaska initiative enables the Trust to join these efforts to leverage the political, leadership and funding capital of leading organizations in Alaska that are concerned about Alaska's high rates of alcohol misuse, the economic impact and the negative consequences for families and communities across the state. Staff recommend the Trust continue to support RA with grant funding in FY24. This partnership with Recover Alaska aligns with Goal 4 of the Com plan which is focused on prevention and treatment for drug and alcohol misuse through collaboration, effective and informed strategies including Objective 4.1, increased awareness and improved knowledge to reduce impacts of drug and alcohol use. Recover Alaska's key strategies compliment the initiatives supported through the Mental Health and Addiction Intervention Focus Area.

Project Title: Treatment Access & Recovery Supports

Grantee: Multiple

Fund: Authority Grant

Years Funded: 7	Project Category: Capacity Building	
FY20: \$750,000	FY21 : \$750,000	FY22: \$750,000

Project Description: The Trust has approved funding for unallocated authority grant funds toward a broad strategy within the Substance Abuse Prevention and Treatment focus area targeting projects and initiatives that increase, improve or enhance beneficiary access to appropriate treatment interventions. This funding, while not designated for specific agencies but available for a targeted variety of projects which may include: capital projects that create service capacity expansion; implementation of evidenced based treatment models; implementation of harm reduction strategies and programs; implementation of integrated and collaborative care models within health care settings and behavioral health programs; and start-up of innovative practices that target multiple health and social needs such as recovery programs paired with employment partnerships that assist beneficiaries in recovery and employment stabilization.

FY22 Grantees were: LINKS Mat-Su (HUMS), AK Behavioral Health, Four A's (Juneau Syringe Access), Interior AK Center (988), Seward Prevention Center

Analysis: The Treatment Access and Recovery Supports line item is a critical budgeting item that allows the Trust staff and Board to meet the changing needs of beneficiaries and providers as they arise. There are numerous variables that can impact when a program can be expanded or even started, so having these funds available to turnaround during a few months is vital to expanding access and recovery for people in need. The LINKS Mat-su project provided \$100,000 for the High Utilizer Mat-Su Support team (HUMS). The HUMS team works with beneficiaries who utilize the most expensive healthcare services to treat on-going chronic problems, and most likely to use the emergency room (ER). HUMS engages with these beneficiaries early and often to meet their needs in community at a lower level of care and expense. HUMS has helped to reduce the ER burden in Wasilla and provided the support to keep many of these individuals in community.

Alaska Behavioral Health (AKBH) was awarded \$300,000 of operational capital to start-up a 10-bed Adult Residential Center in Fairbanks. This is a co-ed facility and will be funded long-term by the Medicaid Behavioral Health 1115 waiver. This unit is the first of its kind in Fairbanks to treat adults with severe mental illness who require residential services. Funding adult residential beds in Fairbanks expands access to care and allow these individuals to stay closer to home. An evaluation of need for this level of care in Fairbanks was conducted and found that 35 beds total are needed, so this ten-bed unit will start the process of meeting this need. This was a one-time expense and AKBH does not require more funding to operate this unit. The Four As syringe access program in Juneau was funded at the \$50,000 level. This program follows best practices for harm reduction and is a needed service in the Juneau region. This program supports individuals with substance misuse disorders in a way that keeps them safe and allows for case managers to build relationships that help them reduce their drug use and eventually a higher level of wellness. The goal is to help people with drug misuse issues become drug free. This was a one-time expense and the Four As does not require more funding to operate this program. The last program involved a \$50,000 grant to the Seward Prevention Coalition for supporting housing care for youth. These types of projects have been very successful in improving the lives of beneficiaries. It is recommended to fund this initiative into FYs 24-25. Project Title: Crisis Continuum of Care

Grantee: Multiple

Fund: Authority Grant

Years Funded: 3	Project Category: Capacity Building	
FY20: \$900,000	FY21 : \$2,600,000	FY22: \$4,500,000

Project Description: The Trust along with other partners have been evaluating the existing crisis system of care and working to identify models which can demonstrate improved outcomes for those in mental health crisis. The lack of the proper levels of care in the community contributes to psychiatric boarding of patients in hospitals and other institutions and diverts critical public safety resources away from crime prevention and other law enforcement activities. Public safety engagement in mental health emergencies also further stigmatizes mental illness and addiction. Trust funding for this strategy is intended to support efforts towards improvement in crisis response to psychiatric emergencies and reduce the role of law enforcement and Hospital emergency rooms.

FY22 Grantees were: City of Fairbanks (Crisis Coordinator), Crisis Now Site Visits, ASHNHA, Set Free Alaska, Alaska Behavioral Health (Peer Support), Ketchikan Wellness Coalition, Bartlett Regional Hospital. **Analysis:** The Crisis Continuum of Care line item provided grant support to entities in Fairbanks, Mat-su, Anchorage, Juneau, and Ketchikan. These grants are intended to provide the infrastructure needed to support the buildout of the Crisis Now continuum of care, and the amount of this allocation has increased since FY21 as the initiative and the number of communities we are actively working in has grown. This support took the form of funding for full-time positions, site visits out of state, evaluations, capital support for access to beds, peer support training, operational cost associated with mobile crisis teams, and contractual support for business modeling. The work going on in each of the communities is on-going and collaborative in nature. Each one is at a different stage in setting up Crisis Now services. Technical support contractors are working with providers to assist with this process. The Careline Crisis Call Center and the mobile crisis team in Fairbanks are operating currently and meeting the performance goals set forth in their grant agreements. Agencies in the Mat-Su, Anchorage, Juneau, and Ketchikan regions are working to align their crisis stabilization services to the Crisis Now model and have implementation target dates in 2022-2024. With this timeline for reference, it is recommended to continue funding into FY24-25.

Grantee: DHSS, Division of E	Behavioral Health	
Fund: MHTAAR		
Years Funded: 1	Project Category: Capacity E	Building
FY20: \$0	FY21 : \$0	FY22: \$71,500
• •	-	de in the nation. The Trust is supporting this nate the state's Zero Suicide Initiative - a best
comprehensive assessment,	-	g together to reduce suicide through ne Zero Suicide Program Coordinator (ZSPC) r and will be responsible for implementing the

suicidal thoughts and urges. They represent a holistic approach to suicide prevention within health and behavioral health care systems. The core elements of this model include: leading a system-wide culture change committed to reducing suicides, training a competent, confident, and caring workforce,

identifying individuals with suicide risk via comprehensive screening and assessment, engaging all individuals at-risk of suicide using a suicide care management plan, treating suicidal thoughts and behaviors directly using evidence-based treatments, transitioning individuals through care with warm hand-offs and supportive contacts, and improving policies and procedures through continuous quality improvement. The Zero Suicide Program Coordinator will utilize this framework to implement a safe and more effective system of suicide care in Alaska.

This position supports work toward priorities outlined in the Healthy Alaskans 2030 State Health Improvement Plan, the 2012 National Strategy for Suicide Prevention, and Recasting the Net, the State Suicide Prevention Plan. Through programming and grant support/management work, this position will be responsible for community development, readiness, support and technical assistance to existing programs and/or grantees, as well as working with communities looking to improve their suicide continuum of care.

This position will work collaboratively with the DBH Prevention Team, the Statewide Suicide Prevention Council, the Alaska Mental Health Trust Authority, as well as other division/departments, and with the DHSS grants and contracts section. The Zero Suicide Program coordinator will work closely with the DHSS grants and contract section to develop and post Requests for Proposals, Contracts, Provider Agreements, review and make program award recommendations, develop and approve budgets and monitor program activities.

Analysis: The Division of Behavioral Health (DBH) houses the Zero Suicide (ZS) Coordinator position and administers the program. Zero Suicide is a best practice framework for coordinating and systematizing an approach to preventing suicide in community-based healthcare settings. DBH and ZS Coordinator are working with partners statewide in building the capacity for providers to follow-through on the seven core elements of the framework. This is happening now and is building up to the implementation of these elements within the actual Trust beneficiary serving agencies. It is recommended to continue to fund this grant project in FY24-25.

Project Title: Statewide Designation	on, Evaluation, Stabilization & Treatment ([DES/DET) Coordinator
Grantee: DHSS, Department Suppo	rt Services	
Fund: MHTAAR		
Years Funded: 2	Project Category: Capacity Building	
FY20: \$0	FY21: \$75,000	FY22: \$78,800
and review process of all ex-parte c each judicial district across the stat	Commissioner's office, this position will strea orders; currently, performed by the Departme e. By moving the body of this work to the Com I review of all ex-parte orders filed. This positi t and partners.	nt of Law paralegals in nimissioner's office, DHSS
reduce administrative burdens on e	pordinator, the department intends to improve emergency departments, DOC, and DET faciliti I be a significant change in practice and throug	es including API as well

patient-centered approach Trust beneficiaries will be better served.

Analysis: In FY22, the DHSS DET Coordinator solidified the position and connections with each DET/DES hospital across the state, and worked to track the information sharing process creating a collaborative

environment to ensure all Title 47 ex-parte individuals receive services in a timely manner. The Coordinator also tracked each Trust beneficiary through the ex-parte process and followed them for up to one year after discharge. This work provided valuable data on high utilizers, as well as any gaps in the system, which allows the Trust to support care pathways at the community level. It is recommended to continue to fund this project in FY24 and 25.

Grantee: DHSS, Division of	Senior and Disabilities Services (SD	DS)
Fund: MHTAAR		
Years Funded: 2	Project Category: Capac	ity Building
FY20: \$0	FY21: \$75,000	FY22: \$75,000
Project Description: This v	vill be a dedicated position respons	sible for assisting with institutional discharge
planning from hospitals an	d Department of Corrections and p	petitions for guardianship and/or
conservatorship, which wil	I significantly improve discharge pla	anning.
Adult Protective Services (A	APS) will benefit immensely from a	position solely focused on institutional
discharges from API, hospi	tals, and DOC. Currently, the unit h	as assigned an APS worker to each hospital
to assist with communicati	ons on referrals but is not able to p	prioritize these locations over other
vulnerable adults in crisis.	This position will be critical to assis	t Trust beneficiaries with earlier
intervention when in crisis	, and to assist with discharge after a	an ex-parte or detention.
The position funded by the	trust will allow APS to maintain inv	vestigation capacity and dedicate a position
to assist with institutional	discharge planning, which will signi	ficantly improve discharge planning.
Analysis: The APS III positi	on is funded with Medicaid admini	strative claiming and Alaska Mental Health Trus
funds. This position pilots a	an APS position dedicated to working	ng with people discharging from hospitals and
institutions who are identi-	fied as needing the decision-making	g support of a conservator or guardian. This
position is expected to bot	h serve beneficiaries directly and ir	npact the system of care. Despite hospitals, API,
and the Department of Co	rections serving people who lack the serving people who lack the serving people who lack the service of the ser	he capacity to keep themselves safe, these
institutions underreport at	ouse, neglect, self-neglect, and expl	loitation to APS. This mandated reporter
education is expected to co	ontinue as an important method of	outreach to the organizations and to improve
services to vulnerable Alas	kans. The position is recommended	d for continued funding and supports the work

The Adult Protective Services III position aligns with the Comprehensive Integrated Mental Health Plan through Goal 6, Objective 6.4, Increase timely access to protective services statewide.

institutions with the supports needed to remain independent in the community.

of the Housing & Home and Community Based Services focus area striving to transition beneficiaries from

Project Title: Mental Health Profe	ssionals Off-site Evaluations/Legal Compete	ncy Restoration Pilot
Grantee: DHSS, Department Suppo	ort Services	
Fund: MHTAAR		
Years Funded: 2	Project Category: Capacity Building	
FY20: \$0	FY21 : \$300,000 FY22 : \$300,000	
	used for re-evaluation services and other ident ation and care as approved by the Trust.	ified projects related to

Analysis: The Department of Health and Social Services Commissioner's office Title 47 Coordinator in charge of this program has been working with the clinical contractor, Alaska Psychiatric Institute (API), the Dept. of Corrections (DOC), and Designation, Evaluation, & Treatment (DET) hospitals to meet the primary and secondary evaluation needs of Trust beneficiaries who are awaiting restoration and trial. The coordinator also is overseeing the Title 47 ex-partes in support of API and the DOC. DHSS's contractor, True North, has been conducting all the evaluations, and helping to coordinate additional assistance on a as needed basis for each individual beneficiary. This grant project has been working well and meeting the desired outcomes and is recommended for continued funding in FY24/25.

Disability Justice

Project Title: Alaska Justice Infor	mation Center (AJIC)	
Grantee: University of Alaska And	horage	
Fund: MHTAAR		
Years Funded: 7	Project Category: Data/Planning	
FY20: \$225,000	FY21 : \$225,000	FY22: \$225,000

Project Description: Alaska Justice Information Center (AJiC) is becoming Alaska's resource for compiling, analyzing, and reporting criminal justice data to policymakers and practitioners to improve public safety and health, increase criminal justice system accountability, and reduce recidivism.

AJiC will continue to work on an integrated data platform from key criminal justice agencies such as the Alaska Department of Public Safety, the Alaska Department of Law, and the Alaska Department of Corrections as well as related state agencies such as the Alaska Department of Health and Social Services. The data platform will continue to support many kinds of research in Alaska. With an integrated data platform AJiC will be able to conduct criminal justice related research and will be able to provide:

- Population measures to globally assess how well the Alaska criminal justice system is holding offenders accountable and protecting public safety
- Answers to data questions from state agencies and legislators
- Report on the status of Trust beneficiaries with the criminal justice system and
- Annually produce a State of Alaska Criminal Justice System report.

Over time, additional data will be compiled, analyzed, and reported to support additional state initiatives and interests. Building this capacity and having up-to-date information will help inform the Trust's disability justice focus area and assist the state in assessing the impact of current and future recidivism reduction strategies on Trust beneficiaries, allowing for data driven adjustments to strategies over time.

Analysis:

AJiC has completed and published an initial descriptive analysis of Alaska Victimization Survey data, including an examination of the intersection of adverse childhood experiences, indicators of mental health, and intimate partner violence or sexual violence. Additional analyses are planned for the remainder of FY22.

AJiC is also working on a new original data collection, the Alaska Police Public Contact Survey (PPCS). Modeled after a national instrument with Alaska-specific items added — including indicators related to mental health — the PPCS will be distributed via US Postal Mail to survey respondents throughout the state. This survey will enable AJiC to describe the frequency, nature, and extent of police contacts with the public throughout the state.

AJIC is working with the Anchorage Fire Department's Mobile Crisis Team to provide consulting services on data collection and communication of quantitative results to a variety of stakeholders. Our aim is to build relationships for future work and assist the AFD team.

This is a core data collection and analysis element for the state that has not existed to date. As long as this project demonstrates positive outcomes it is recommended that Trust's funding partnership with UAA to support AJiC continue through FY24/25. This project aligns with the Comp Plan Objective 9.5, encourages a cutler of data-driven decision making that includes data sharing, data analysis, and management to link support services across the Alaska Department of Health and Social Services (DHSS) divisions and other departments.

Grantee: Department of A	dministration, Office of Public Advocacy	
Fund: MHTAAR		
Years Funded: 4	Project Category: Direct Serv	ice
FY20: \$89,300	FY21: \$91,500	FY22: \$95,600
Description: Trust funds v	vill be used to support a new Public Guar	rdian position (1 FTE) in the
Department of Administra	tion, Office of Public Advocacy (OPA). T	he position will be in Anchorage and
will serve the Western Ala	ska region including Bethel, Dillingham,	Naknek and surrounding communities.
Public guardians serve adu	Ilts Trust beneficiaries found to be incap	acitated by the Superior court. Public
guardians are required to	maintain benefits, manage finances, mal	ke medical decisions, and ensure
suitable housing for each	Γrust beneficiary (ward). This position sι	upports the OPA's strategic plan to
bring down current public	guardian caseloads from approximately	100 cases per public guardian to the
recommended national m	aximum of 40 case per public guardian, r	resulting in improved services, supports
and overall management of	of Trust beneficiaries.	

Analysis:

The assigned guardian was able to visit with clients in their villages this fall and is again planning visits later this spring. The guardian continues to work closely with community care providers to provide guardianship and conservatorship services for clients located in or with close ties to remote areas of the state.

OPA will continue to provide guardianship and conservatorship services to clients in the Dillingham and Bethel Judicial Districts as it is appointed to do so by the court. The Public Guardian will meet the statutory visitation requirement for visiting clients. It is important, especially in these smaller hubs, to also create and foster relationships with the resource agencies in the area to promote improved outcomes for these clients. Such relationships will be able to be fostered through the increased communication as well.

As long as this project demonstrates positive outcomes it is recommended that the Trust support OPA securing GF/MH funding for the position or if required continue with Trust funding support in FY24/25. This project aligns with the Comp Plan Objective 6.5, and ensures vulnerable Alaskans understand their rights and responsibilities.

Project Title: Implement CIT Training Courses: Anchorage and Others		
Grantee: Anchorage Police Departme	ent, Alaska State Troopers, Alaska Police Stand	lards Council (APSC)
Fund: Authority Grant (\$40,000) & M	IHTAAR (\$160,000)	
Years Funded: 14	Years Funded: 14 Project Category: Workforce Development/Training	
FY20: \$185,000	FY21: \$200,000	FY22: \$200,000
Project Description: This grant supports a key strategy of the focus area: training law enforcement personnel on disorders experienced by Trust beneficiaries. The Trust has collaborated with law enforcement, NAMI, community foundations and other local funders, as well as community treatment providers to coordinate and provide Crisis Intervention Team (CIT) training to law enforcement and other first responders. This week-long intensive training increases law enforcement personnel's knowledge of and skills to effectively interact with Trust beneficiaries. Thus, increasing the likelihood of positive interactions between CIT-trained law enforcement personnel and Trust beneficiaries, and decreasing the likelihood of beneficiaries being charged with a crime and booked into a correctional facility.		

Analysis:

The COVID pandemic continues to impact training, both for planning traditional in-person CIT courses and on occasion forcing the cancelation of scheduled CIT Academies on short notice. Despite the ongoing pandemic, APSC increased the training facilitated through this project over that in FY21. To date APSC has sponsored four officers to travel outside of Alaska to attend a CIT International Conference alongside a broader Alaska delegation. Additionally, funding was used to support two 40-hour CIT courses directly benefiting twenty personnel. APSC also received approval to utilize project funds in FY22 for the APSC Training Coordinator to attend a virtual CIT Coordinator Certification course.

CIT is nationally recognized and a core strategy for diverting beneficiaries out of the criminal justice system. As long as these projects demonstrate positive outcomes it is recommended that Trust's funding partnerships with local law enforcement and other entities to support CIT continue into FY24/25. This project aligns with the Comp Plan Objective 9.1: strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization.

Project Title: Training for Therapeutic Court Clinical Staff

Grantee: Alaska Court System

Fund: MHTAAR		
Years Funded: 9	Project Category: Workforce Development/T	raining
FY20: \$15,000	FY21 : \$15,000	FY22: \$15,000

Project Description: Trust funding is used to train teams from therapeutic courts statewide on the core principles and elements of therapeutic courts and/or on the disorders experienced by Trust beneficiaries and the associated treatments. These trainings will ensure that judicial officers, attorneys and other team members of the therapeutic courts are kept informed of current issues, concerns, and best practices regarding their target population. The goals of this project are three-fold:

- 1. Increase judicial officers' and other team members' knowledge base for understanding the problems and issues associated with mental health and other related disorders;
- 2. Assist judicial officers and attorneys in the structuring of bail/sentencing conditions that appropriately match the Trust beneficiary's cognitive capacity and circumstances, and
- 3. Increase the ability of the legal system to accommodate, support, protect, and provide just treatment for offenders and victims who are Trust beneficiaries.

Analysis:

Two team members from the Palmer FIT Court were sent to the annual National Association of Drug Court Professionals (NADCP) conference in August 2021. No other in-person training is anticipated for the rest of the fiscal year. During FY22, uncertainty about health and safety led to a limited number of people going to the 2021 annual conference outside Alaska, and most training so far in FY22 has been in the form of interactive webinars.

State departments historically have been challenged to have funds available for staff training. As long as these training are an identified need and demonstrate positive outcomes it is recommended that the Trust's funding partnership with the Alaska Court System continue in FY24 and FY25. This project aligns with the Comp Plan Objective 9.1, strengthens workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization.

Project Title: Training for Department of Corrections Mental Health Staff

Grantee: Department of Corrections

Fund: MHTAAR

Years Funded: 10	Project Category: Workforce Development/Training	
FY20: \$25,000	FY21: \$25,000	FY22: \$25,000

Project Description: This grant provides funding for Department of Corrections (DOC) Mental Health staff training and conference participation on a select basis. Department training will target topics pertinent to DOC mental health clinicians, psychiatric nurses, counselors, Advanced Nurse Practitioners (ANPs), and psychiatrists statewide. These staff are located in facilities from Bethel to Seward to Juneau and serve some of Alaska's most severely ill Trust beneficiaries. The in-service training component will involve a two-day conference that will be attended by multidisciplinary personnel.

Analysis:

State departments have historically been challenged with having funds available for staff training. As long as this project demonstrates positive outcomes it is recommended that Trust's support continue It is recommended that Trust's funding partnership with the Alaska Court System continue in FY24 and FY25. This project aligns with the Comp Plan Objective 8.3, enhances and expand access to clinical and case management resources for Alaskans who are incarcerated.

Project Title: Specialized Skills & Services Training on Serving Criminally Justice Involved Beneficiaries		
Grantee: UAA-Center for Human Development (CHD)		
Fund: MHTAAR		
Years Funded: 17 Project Category: Workforce Development/Training		
FY20: \$72,500 FY21: \$72,500 FY22: \$72,500		
Project Description: This project will provide community providers training opportunities specific to		

issues that impact Trust beneficiaries at risk of committing crimes. Training will be provided through a statewide conference in Anchorage with recognized professionals with expertise in best practices that reduce recidivism amongst Trust beneficiaries. The focus of the conference will be on training in specific interventions and support strategies targeting the needs of Trust beneficiaries involved in the criminal and/or juvenile justice systems.

Analysis:

This statewide conference focuses on:

(1) educating the community service providers about the reentry efforts underway within the Department of Corrections and at a state policy level, and

(2) providing skills training to direct service workers on best practices for assessing risk and need and direct service provision when working with criminal justice involved beneficiaries. FY22 conference was the 17th annual conference and focused on successful reentry planning for returning adult and juvenile citizens from adult correctional and youth facilities. The conference is a unique and key instate training opportunity that educates providers statewide on best-practices and information about Alaska's criminal justice reform efforts. It targets attendees who are working directly with criminally justice involved Trust beneficiaries.

FY22, there were 328 individuals who registered for the conference with 271 attending. While this is slightly lower than FY21, registrations and attendance of the conference is up significantly from prior years. Of those who registered and attended the conference, 30% were from rural communities, 69% from urban

communities, and 1% from out of state. A total of 18 different communities were represented.

This project has a demonstrated history of providing positive outcomes to beneficiaries. Staff will continue to monitor this project and work with CHD staff to identify alternative sustainable funding, and support funding this project in FY24/25. This project aligns with the Comp Plan Objective 9.2 by advancing the competencies of the healthcare, behavioral health, and public health workforce.

Project Title: Interpersonal Violence Prevention for Beneficiaries

Grantee: UAA-Center for Human Development

Fund: MHTAAR

Years Funded: 17	Project Category: Direct Servic	Project Category: Direct Service	
FY20: \$80,000	FY21: \$80,000	FY22: \$80,000	

Project Description: This project builds community behavioral health provider skills and capacity regarding healthy relationships, interpersonal violence prevention, and sexual health promotion for Trust beneficiaries. This project includes:

- 1. a train-the-trainer model to deliver a 10-week Friendships & Dating Program social skills curriculum and
- 2. an interactive training for direct service professionals (DSP) on healthy relationships and sexual health.

The Friendships & Dating Program (FDP) focuses on building capacity within the provider community to prevent interpersonal violence in the lives of youth and adults with intellectual and developmental disabilities, and youth with serious emotional disturbance (SED). On-going clinical technical assistance and support is provided to the trained facilitators on a monthly basis to address issues on delivering information to beneficiaries, and on community capacity building to support beneficiaries to apply what they learn in their everyday lives. The DSP training builds capacity for community providers by discussing healthy relationships, violence prevention, and sexual health for adults with IDD. This 3-hour training offers strategies and tools to DSPs to better support Beneficiaries they work with.

Analysis:

This project continues to demonstrate positive outcomes for beneficiaries, agency staff serving beneficiaries and raises awareness about interpersonal violence experienced by beneficiaries. The curriculum developed by the UAA Center for Human Development (CHD) for this project is considered an evidence-based program with "documented statically significant behavioral outcomes for program participants."

The Friendships & Dating Program demonstrates positive outcomes, even with the COVID-19 pandemic. However, facilitators continue to be challenged by restrictions associated with COVID-19. Many have expressed that they are using the curriculum for one-on-one support with individuals in order to reduce potential health impacts of COVID-19 transmission in group settings. FDP staff will continue to work with facilitators through whatever challenges the pandemic may continue to bring and support them with both inperson and virtual implementation of the program.

This project has a demonstrated history of providing positive outcomes to beneficiaries. As long as this project demonstrates positive outcomes it is recommended that Trust's partnership with the Center for Human Development continue It is recommended that Trust's funding partnership with the Alaska Court System continue in FY24/25. This project aligns with the Comp Plan Objective 9.2, and advances the competencies of the healthcare, behavioral health, and public health workforce.

Project Title: Juneau Mental Health Court

Grantee: Alaska Court System

Fund: MHTAAR

Years Funded: 14	Project Category: Direct Service	
FY20: \$204,400	FY21 : \$126,100	FY22: \$126,100

Project Description: This grant funds the Juneau Mental Health Court, a therapeutic court alternative for Trust beneficiaries involved with the criminal justice system. The Juneau Mental Health Court serves a critical component of the Disability Justice Focus Area and will expand the presence of mental health courts to the Southeast region. Through partnerships with community treatment providers, the underlying reasons for an individual's contact with the criminal justice system will be identified, addressed, and monitored through an individualized court ordered treatment plan.

Analysis:

The Juneau Mental Health Court has faced numerous challenges this year such as the state database (AKAIMS) being offline and a change of personnel in the project coordinator position. Despite these challenges, efforts to increase census numbers started to show results with an uptick in program utilization through October of 2021; numbers have since dropped because of graduations. The new project coordinator and staff are working to continue the court's progress with growing utilization rates by flagging potential applicants on arraignment reports and reaching out to agencies and institutions in the community to educate them on the benefits of the program for their clients.

Access to residential treatment and transitional and permanent housing continue to be an issue for Juneau therapeutic court participants. The project coordinator and staff are working on solutions.

This project has a demonstrated history of providing positive outcomes to beneficiaries. Staff will continue to monitor this project and work with Alaska Court System staff to shore up its operations. It is recommended that Trust's funding partnership with the Alaska Court System continue in FY24 before transitioning to GF in FY25. This project aligns with the Comp Plan Objective 7.3, reducing the number of Trust beneficiaries entering or becoming involved with Alaska's criminal justice or juvenile justice system.

Grantee: Partners for Progre	SS	
Fund: Authority Grant		
Years Funded: 14 Project Category: Direct Service		
FY20: \$214,500	FY21: \$229,500	FY22: \$229,500

Project Description: This project is to provide financial resources to assist therapeutic court participants in meeting basic or emergent needs in order to maintain or progress in recovery and self- sufficiency, and to comply with court-ordered conditions.

Partners for Progress will disburse funds as authorized under policies and procedures developed jointly with the Alaska Court System to assist therapeutic court participants. Priority in the use of funds will be accorded to participants of the mental health courts. Disbursement of funds will be authorized by the mental health court Project Coordinator in accordance with established policy and procedures.

Analysis:

These funds are critical and positively impact individual Trust beneficiaries participating in a therapeutic court who often have few financial resources available to meet emergent needs such as housing, transportation, medication etc. A lack of resources can impede the ability of beneficiaries to meet court-imposed conditions and can also precipitate crises and periods of instability which hinder their recovery, rehabilitation and can potentially lead to re-incarceration.

Therapeutic courts which receive flex funds ran at an average of 60% capacity. The heaviest demand for the therapeutic courts has been housing, utilizing 35% of the flex funds, with transportation and emergent needs also being met. The importance of meeting therapeutic court participants' needs was made even more apparent by the ongoing pandemic which placed more stress on participants as the court system paused cases and halted their operations. This placed pressure on the overall system by creating backlogs and preventing some beneficiaries from even being able to participate in programs and services. Similar to the Alaska Court System as a whole, Native Alaskans and other minority groups were disproportionately represented in the mental health courts and PFIT.

As our communities, programs, and services, and the court system, open back up Trust beneficiaries will continue to require the support provided by flex funds for successful therapeutic court participation. As long as these therapeutic courts demonstrate positive outcomes and the needs of their respective participants exist, it is recommended that Trust's funding partnerships continue in FY24/25. This project aligns with the Comp Plan Objective 7.3, reducing the number of Trust beneficiaries entering or becoming involved with Alaska's criminal justice or juvenile justice system.

Project Title:	Disability Justice Support Funding	

Grantee: FY22: Partners for Progress and the Alaska Children's Trust	

Fund: Authority Grant

Years Funded: 1	Project Category: Capacity Building	
FY20: \$0	FY21: \$0	FY22: \$300,000
Project Description: This grant prov	vides funding to support organizations serving	Trust Beneficiaries

within the Disability Justice Focus Area under Community Intervention/Diversion and In-facility Practices.

Analysis: FY22 is the first year for this funding which is needed to support new projects, programs, or emergent needs of organizations who provide services for Trust beneficiaries who are involved in the criminal justice system which aren't already included in the DJ focus area budget.

The Alaska Therapeutic Court Alumni (AKTCA) is a nonprofit organization which provides support to graduates of the Anchorage therapeutic court and has been established as a successful peer support program in Anchorage. This program has proven to be paramount to the success of therapeutic court graduates, and was recognized this year by the Alaska State Legislature when the Legislative Task Force recommended, and the Legislature approved, funding for the permanent position of statewide Therapeutic Court Peer Support Coordinator (staffed by a Therapeutic Court Program graduate).

The AKTCA utilized Trust funding to support the newly created fulltime coordinator position as well as to expand their program of Peer Recovery Services for participants and graduates in the Therapeutic Courts in Fairbanks, Juneau, Palmer, Kenai, Bethel and Sitka. This support was used to purchase equipment, supplies, training expenses, and programming for program participants in Anchorage and throughout the state.

The Bethel Youth Facility (BYF) Treatment Facility serves youth who experience neurobehavioral deficits. Many of these youth also experience sensory processing disorder, causing them to not be able to organize sensory signals into appropriate responses. The current acoustic echo in the gymnasium can cause a sensory overload for these youth causing an overstimulation of any of the senses. This sensory overload and subsequent overstimulation can lead to feelings of discomfort, increased anxiety and fear, feeling overwhelmed and agitated, irritability, loss of focus, restlessness, stress. This response causes an inability of the brain to process information and often results in behavioral issues. Physical activity has positive effects on cognitive and executive functioning.

The Division of Juvenile Justice (DJJ) is requesting Trust funding to refocus the secure treatment unit at BYF to improve care and services for the youth housed in this facility. As part of this effort DJJ will install sound panels on the gymnasium walls and ceiling to lower the level of noise and echo, creating a more functional and therapeutic space. The gymnasium is used for recreation and therapeutic activities such as family visitation, therapeutic groups, and cultural activities that will also benefit from reducing sound and sensory overload. Providing recreation and therapeutic activities in an environment that better meets the individual needs of the youth is imperative to their success in the program. Reducing sensory input such as eliminating distressing sounds can aid in creating that therapeutic environment.

As long as these programs demonstrate positive outcomes and the needs of their respective participants exist, it is recommended that Trust's funding partnerships continue in FY24/25. This project aligns with the Comp Plan Objective 7.3, reducing the number of Trust beneficiaries entering or becoming involved with Alaska's criminal justice or juvenile justice system and Goal 8.3 Services in Institutional Settings, Services while incarcerated.

Project Title: Centralized Competency Calendar Paralegal

Grantee: Alaska Court System

Fund: MHTAAR		
Years Funded: 4 Project Category: Capacity Building		
FY20: \$78,300	FY21: \$78,300	FY22: \$78,300

Project Description: The number of Trust beneficiaries charged with a crime, and for whom an evaluation for legal competency has been ordered has risen from 2-4 cases/week to 6-12 cases/week. For Trust beneficiaries, this can result in spending increased amounts of time incarcerated and in some cases, more time incarcerated waiting for this legal question to be answered, than if they had just pled guilty and been sentenced from the outset. In FY18 it took on average 34 days for a competency evaluation to be completed and an additional 34 days for a beneficiary defendant to be admitted to the Alaska Psychiatric Institute (API) for legal competency restoration.

This project will fund a paralegal position to assist with the management and data collection and tracking of the 3rd Judicial District's Centralized Competency Calendar. This specialized court calendar in Anchorage tracks all 3rd Judicial District criminal cases where the court has ordered a legal competency evaluation, and when appropriate, competency restoration. The management of the Centralized Competency Calendar and the collection, tracking and reporting of these cases and trends are critical to understanding the reasons for the delays in evaluation and restoration orders as well as making recommendations for solutions.

Analysis:

The Alaska Court System has reported that the turn-around time from the Alaska Psychiatric Institute (API) for a competency evaluation to be returned to the judge who issues an order for examination has greatly improved. Unfortunately, as has been the case in years past, there is a still a significant backlog after a defendant has been determined to be incompetent where the defendant remains on a "waitlist" for restoration services provided by API.

It continues to be a challenge to collect data due to the different ways that these cases are handled and tracked in courts around the state. At this time, data is still being entered and tracked manually. Support of the position managing the ACS Centralized Competency Calendar in Anchorage is needed to ensure that Trust beneficiaries who are in need of the competency evaluation as well as restoration are not forgotten or lost in the system. In light of the state's fiscal challenges, the transition of this project to SOA GF/MH is not likely in the foreseeable future (2-4 years). As long as this project demonstrates positive outcomes it is recommended that Trust's funding partnership with ACS continue in FY24/25. This project aligns with the Comp Plan Objective 7.3, reducing the number of Trust beneficiaries entering or becoming involved with Alaska's criminal justice or juvenile justice system.

Project Title: Holistic Defense Model

Grantee: Public Defender Agency (Dept. of Administration) & Alaska Legal Services

Fund: MHTAAR & Authority Grant

Years Funded: 7	Project Category: Direct Service	
FY20: \$373,800	FY21: \$373,800	FY22: \$270,100

Project Description: Funding will be used to support the following components of the Bethel Holistic Defense Model: a social worker position in the Bethel Public Defender Agency (PDA) office; and data and research staff. Any expenditures of Trust funds outside of these areas must receive prior approval from the assigned Trust staff overseeing the project grant.

The Public Defender Agency and the Alaska Legal Services Corporation (ALSC) will pilot the Holistic Defense model in Bethel. The target population will be Trust beneficiaries not participating in the Bethel Therapeutic court or other diversion projects and will be randomly selected from clients assigned to the public defender in the Bethel region.

Project participants' criminal legal needs will be addressed by a criminal attorney, a social worker will be continue to assist with participants' unmet social support needs, and a civil legal aid attorney will work with the team to address project participants' civil legal needs. All program services are designed to address participant obstacles to successful reintegration and thus participant recidivism will be reduced.

Analysis:

The Holistic Defense Project continues to provide social services and civil legal services to mental health trust beneficiaries. While this program has been successful in the Bethel office for several years this was the second year the program was operating in the Nome office. Both sites have a social services specialist from the Public Defender Agency of Alaska and a civil attorney from Alaska Legal Services. They work together with the client's assigned public defender to provide seamless and comprehensive services that assist the client with identifying and completing their goals.

The Covid pandemic has certainly had an impact on how the agency delivered services to clients. Only within

the last few months have criminal trials begun. In-person visitation has been suspended and lifted as the correctional institutions have had to deal with outbreaks. However, the team learned in FY21 how to deliver services to clients in a remote and safe way. Clients have continued to get help with divorce and custody issues, assistance with getting into treatment and access to social services. In addition, many clients have needed help with securing financial pandemic assistance, with obtaining Tribal IDs, and with getting other documents from agencies that have been shut down during the pandemic.

This project has a demonstrated history of providing positive outcomes to beneficiaries. As long as this project demonstrates positive outcomes it is recommended that Trust's partnership with the PDA to support this pilot continue in FY24/25. This project aligns with the Comp Plan Objective 6.5, ensuring vulnerable Alaskans understand their rights and responsibilities.

Project Title: Mental Health Clinician Oversight in Youth Facilities

Grantee: DHSS, Division of Juvenile Justice (DJJ)

Years Funded: 11	Project Category: Capacity Building	
FY20: \$162,400	FY21 : \$81,200	FY22: \$43,800

Project Description: This grant funds a Mental Health Clinical (MHC) director clinical director position to provide clinical oversight and support to Division of Juvenile Justice (DJJ) mental health clinicians in areas such as clinical service delivery, case consultation, development of training plans, and expertise related to confidentiality and ethical issues. The position will also work with DJJ senior management to further the integration and development of statewide behavioral health services within the 24/7 secure juvenile facilities, as well as the probation services of DJJ. This position will work closely with the Office of Children's Services (OCS) and the Alaska Psychiatric Institution (API) to improve service coordination and individual beneficiary outcomes.

Analysis:

The Mental Health Clinical director (MHC) position is critical to ensuring quality clinical services as well as policies and procedures for the Division of Juvenile Justice (DJJ). The position supervises DJJ's mental health clinical staff, offers oversight of mental health services statewide, and provides clinical services directly to beneficiary youth. Absent this position, a decreased focus and emphasis on mental health services within DJJ could result, negatively impacting beneficiary youth and increasing the likelihood of continued juvenile justice involvement and potential future criminal activity in adulthood. The position has been critical in ensuring no other treatment option is available before transferring a beneficiary youth to API or out-of-state placement. The position has also been critical to representing DJJ and assisting in the treatment planning for beneficiary youth who are involved with DJJ and the Office of Children's Services (OCS).

The MHC assigned to Dual Status cases served 40 youth from July 1, 2021, to February 21, 2022. Ten youth, who were not in detention, received individual, family, and group therapy. Thirty of the youth were in detention and were provided with crisis management; supportive counseling; advocacy; mental health assessments; behavior intervention plans; case management; and suicide/self-harm risk assessments. Several of these youth were in crisis daily and needed to be seen daily. The MHC does a lot of case consultation with front end probation youth, with many of these youth never ending up in detention. The MHC, on occasion, also provides emotional support to the caregivers of the youth and provides psychoeducation to families and youth on more effective coping skills, communication skills and parenting techniques.

DJJ requested and participated in several Crisis Placement Response Team (CPRT) with designated leaders from several divisions for individuals ages 8 to 17. The individuals staffed were all in need of immediate placement due to there either being no crisis/acute beds available or no one accepting the youth, both in and out of state for residential psychiatric treatment center level of care. All of the youth in need of a crisis placement were in that position as a result of severe physical aggression and/or either neurobehavioral disorders or cognitive impairments.

This project demonstrated positive outcomes and was successfully transitioned to the DJJ budget through a General Fund Mental Health recommendation. This project aligns with the Comp Plan Objective 8.3, enhancing and expanding access to clinical and case management resources for Alaskans who are incarcerated.

Project Title: Alaska Prisoner Reentry Initiative: Reentry Coalition Capacity Development - Mat-Su

Grantee: Valley Charities, Inc.

Years Funded: 7	Project Category: Capacity Building	
FY20: \$100,000	FY21 : \$100,000	FY22: \$100,000

Project Description: One of the most important aspects of implementing the Alaska Community Reentry Program, is the local capacity of any given community to effectively support the needs of all returning citizens, including Trust beneficiaries, as they transition back into our communities. Local reentry coalitions consist of a cross section of people representing the services or supports available to reentrants in the community. Reentry coalitions:

- 1. Educate the community about the criminal justice system and the reentry program;
- 2. Identify local challenges facing reentrants;
- 3. Identify local gaps in services and identify collaborative solutions to build capacity in the community, and;
- 4. Serve as the local point of contact for the DOC and its partners in reducing recidivism.

The Mat-Su Valley Reentry Coalition Coordinator works closely and collaboratively with the Reentry Coalition membership, the Trust, the Department of Corrections and Health and Social Services and other key state and community stakeholders as a partner in the Alaska Community Reentry Program. Establishing and maintaining strong, and effective partnerships is critical to the success of the Alaska Community Reentry Program and the individual reentrants.

Analysis:

The Mat-Su Valley Reentry Coalition is a network of diverse organizations and individuals working together to build clear and supportive pathways for individuals to successfully reenter the Mat-Su Valley community after incarceration. This issue is too large and complex or large for any one person or organization to solve alone. The Mat-Su Valley Reentry Coalition Coordinator worked with the MatSu Valley coalition to:

- 1. Progress towards the Coalition's goals outlined in the Comprehensive Community Reentry Plan.
- 2. Conduct community outreach and education activities.
- 3. Identify system and/or local community-based service/support challenges for returning citizens.

The Mat-Su Reentry Coalition Coordinator and three steering team members organized the Prisoner Reentry Summit which was held virtually. Funding for the summit was secured from the Alaska Mental Health Trust Authority, Valley Charities, and the Mat-Su Health Foundation. This year's Reentry Summit was a 2-day virtual training geared toward professionals who serve reentrants, such as mental health and substance abuse treatment providers, reentry case managers, probation and Parole Officers, correctional education coordinators, employment technicians, etc. There were both national and state-wide speakers showcasing successful programs in their field of expertise. There were four main subject areas covered at the Summit, including: Employment/Job Training, Housing, Mental Health/Drug Addiction Treatment, and Criminal Justice issues. The emphasis of this year's Reentry Summit was on building strong community partnerships to enhance the successful reentry of returning citizens and achieve recidivism reduction.

The coalition continues to support and participate in the Mat-Su Crisis Intervention Team Coalition and works to address issues such as housing, transportation, and employment for reentrants. Trust staff will continue to work to identify and develop other funding sources to replace or augment Trust funding. Trust staff recommends continued funding in FY24/25. This project supports Goal 7.3 of Strengthening the System: Alaska's Comprehensive Integrated Mental Health Program Plan.

Grantee: Interior Alaska Center For Non- Violent Living

Fund: Authority Grant

Years Funded: 7	Project Category: Capacity Building	
FY20: \$100,000	FY21 \$100,000	FY22: \$100,000

Project Description: One of the most important aspects of implementing the Alaska Community Reentry Program, is the local capacity of any given community to effectively support the needs of all returning citizens, including Trust beneficiaries, as they transition back into our communities. Local reentry coalitions consist of a cross section of people representing the services or supports available to reentrants in the community. Reentry coalitions:

- 1. Educate the community about the criminal justice system and the reentry program,
- 2. Identify local challenges facing reentrants,
- 3. Identify local gaps in services and identify collaborative solutions to build capacity in the community, and
- 4. Serve as the local point of contact for the DOC and its partners in reducing recidivism.

The Fairbanks Reentry Coalition Coordinator works closely and collaboratively with its Reentry Coalition membership, the Trust, the Department of Corrections and Health and Social Services and other key state and community stakeholders as a partner in the Alaska Community Reentry Program. Establishing and maintaining strong, and effective partnerships is critical to the success of the Alaska Community Reentry Program and the individual reentrants.

Analysis:

The Fairbanks Reentry Coalition is a network of diverse organizations and individuals working together to build clear and supportive pathways for individuals to success reenter the Fairbanks community after incarceration. This issue is too large and complex for any one person or organization to solve alone. The Fairbanks Reentry Coalition Coordinator worked with the coalition to:

1. Facilitate coalition activities;

2. Conduct a Coalition Capacity Assessment to assess coalition's ability to work as a collaborative team and identify areas for the coalition to make improvements to strengthen the coalition;

3. Conduct a Community Readiness Assessment to assess the degree to which a Fairbanks is ready to act and be responsive to the needs of individuals after incarceration;

4. Conduct (and update as needed) the Community Resource Assessment to examine the Fairbanks community's service and support capacity to meet the needs of individuals after incarceration and provide the coalition with a unified understanding of its community's resource needs, instead of multiple individual perceptions and experiences;

5. Develop the Fairbanks Coalition's Comprehensive Community Reentry Plan (strategic plan);

6. Conduct institutional presentations about the Alaska Community Reentry Program and facilitate presentations by community providers about available resources and services, and;

7. Educate the Fairbanks community about reentry and criminal justice reform efforts.

Fairbanks Reentry Coalition meetings were held virtually as the coalition and its members continued working on issues such as employment, housing, and transportation. The coalition coordinator and coalition members participated in various statewide virtual meetings and attended community meetings throughout the year. These meetings were held virtually due to the ongoing pandemic. The coalition meeting attendance is vital for reentry partners to collaborate and coordinate on reentry efforts and the services they provide.

Continued community service coordination, in-reach to correctional facilities, and public education about reentry and criminal justice reform efforts is critical. Trust staff will continue to work to identify and develop other funding sources to replace or augment Trust funding. Trust staff recommends continued funding in FY24/25. This project supports Goal 7.3 of Strengthening the System: Alaska's Comprehensive Integrated Mental Health Program Plan.

Project Title: Alaska Prisoner Reentry Initiative: Reentry Coalition Capacity Development - Juneau Grantee: JAMHI Health and Wellness

Grantee: JAIMHI Health and Wellh

Years Funded: 7	Project Category: Capacity Building		
FY20: \$100,000	FY21: \$100,000	FY22: \$100,000	

Project Description: One of the most important aspects of implementing the Alaska Community Reentry Program, is the local capacity of any given community to effectively support the needs of all returning citizens, including Trust beneficiaries, as they transition back into our communities. Local reentry coalitions consist of a cross section of people representing the services or supports available to reentrants in the community. Reentry coalitions:

- 1. Educate the community about the criminal justice system and the reentry program,
- 2. Identify local challenges facing reentrants,
- 3. Identify local gaps in services and identify collaborative solutions to build capacity in the community, and
- 4. Serve as the local point of contact for the DOC and its partners in reducing recidivism.

The Juneau Reentry Coalition Coordinator works closely and collaboratively with its Reentry Coalition membership, the Trust, the Department of Corrections and Health and Social Services and other key state and community stakeholders as a partner in the Alaska Community Reentry Program. Establishing and maintaining

strong, and effective partnerships is critical to the success of the Alaska Community Reentry Program and the individual reentrants.

Analysis:

The Juneau Reentry Coalition (JREC) is a network of diverse organizations and individuals working together to build clear and supportive pathways for individuals to successfully reenter the Juneau community after incarceration. COVID-19 continues to present many obstacles for the coalition. Throughout the pandemic and the fiscal year, the JREC and coalition members focused on the areas of behavioral health, community engagement, and housing. Throughout the year the coalition coordinator and coalition members attend and participated in many community meetings and events (most were held virtually), during which the coalition coordinator and JREC members advocated for and on behalf of Trust beneficiaries who are returning to their communities after being released from a correctional institution.

Some of these meetings and events were associated with gatherings of partner organizations including the Juneau Housing and Homelessness Coalition, the Juneau Suicide Prevention Coalition, Juneau Restorative Justice Community Model, and Juneau Opioid Working Group just to name a few.

Trust staff will continue to work with NeighborWorks Alaska to identify and develop other funding sources to replace or augment Trust funding. Trust staff recommends continued funding in FY24/25. This project supports Goal and Objective 7.3 of Strengthening the System: Alaska's Comprehensive Integrated Mental Health Program Plan.

Project Title: Alaska Prisoner Reentry Initiative: Reentry Coalition Capacity Development - Anchorage

Grantee: NeighborWorks Alaska

Fund: Authority Grant

Years Funded: 7	Project Category: Capacity Building	
FY20: \$100,000	FY21: \$100,000	FY22: \$100,000

Project Description: One of the most important aspects of implementing the Alaska Community Reentry Program is the local capacity of any given community to effectively support the needs of all returning citizens, including Trust beneficiaries, as they transition back into our communities. Local reentry coalitions consist of a cross section of people representing the services or supports available to reentrants in the community. Reentry coalitions:

- 1. Educate the community about the criminal justice system and the reentry program,
- 2. Identify local challenges facing reentrants,
- 3. Identify local gaps in services and identify collaborative solutions to build capacity in the community, and
- 4. Serve as the local point of contact for the DOC and its partners in reducing recidivism.

The Anchorage Reentry Coalition Coordinator works closely and collaboratively with its Reentry Coalition membership, the Trust, the Department of Corrections and Health and Social Services and other key state and community stakeholders as a partner in the Alaska Community Reentry Program. Establishing and maintaining strong, and effective partnerships is critical to the success of the Alaska Community Reentry Program and the individual reentrants.

Analysis:

The Anchorage Reentry Coalition is a network of diverse organizations and individuals working together to

build clear and supportive pathways for individuals to successfully reenter the Anchorage community after incarceration. This issue is too large and complex or large for any one person or organization to solve alone. The Anchorage Reentry Coalition Coordinator has worked with the Anchorage coalition to:

1. Facilitate coalition activities;

2. Conduct a Coalition Capacity Assessment to assess coalition's ability to work as a collaborative team and identify areas for the coalition to make improvements to strengthen the organization;

3. Conduct a Community Readiness Assessment to assess the degree to which Anchorage is ready to act and be responsive to the needs of individuals after incarceration;

4. Conduct (and update as needed) the Community Resource Assessment to examine the Anchorage community's service and support capacity to meet the needs of individuals after incarceration and provide the coalition with a unified understanding of its community's resource needs, instead of multiple individual perceptions and experiences;

5. Develop the Anchorage Coalition's Comprehensive Community Reentry Plan (strategic plan)

6. Conduct institutional presentations about the Alaska Community Reentry Program and facilitate presentations by community providers about available resources and services;

7. Educate the Anchorage community about reentry and criminal justice reform efforts.

Coalition and reentry efforts were greatly impacted by the COVID-19 pandemic. The Alaska DOC did not allow coalition members to have access to correctional facilities so coalition members were unable to perform in-reach activities to connect with reentrants prior to release.

Coalition meetings were held virtually as the coalition and its members continued working on issues such as employment, housing, and transportation. The coalition coordinator and coalition members provided formal presentations on reentry to various groups and attended community meetings throughout the year. These meetings were held virtually due to the ongoing pandemic. These presentations and meeting attendance are vital for reentry partners to provide accurate information on reentry and the services they provide. These opportunities ensure that community stakeholders and members understand the importance of coordinated reentry services to overall public safety and to the lives of Trust beneficiaries.

Continued community service coordination, in-reach to correctional facilities, and public education about reentry and criminal justice reform efforts is critical. Staff recommend continued funding for this project in FY24/25. This project supports Goal 7.3 of Strengthening the System: Alaska's Comprehensive Integrated Mental Health Program Plan.

Project Title: Implement the AF	IC (Assess, Plan, Identify and Co	oordinate) Discharge Planning Model	
Grantee: Department of Correct	ions		
Fund: MHTAAR			
Project Title: Implement the API	C (Assess, Plan, Identify and Coord	dinate) Discharge Planning Model	
Grantee: Department of Correct	ions		
Fund: MHTAAR			
Years Funded: 17	Project Category: Direct Serv	Project Category: Direct Service	
FY20: \$260,000	FY21: \$290,000	FY22 : \$290,000	
Project Description: APIC (Assess, Plan, Identify, Coordinate), is an evidenced-based reentry model being			
administered by the Department	of Corrections (DOC) that serves 1	Frust beneficiaries releasing from correctiona	

institutions. This project assures continuity of care for Trust beneficiaries transitioning from the correctional system back into the community while maintaining public safety and increasing the ability of the criminal justice system to accommodate, support, protect, and provide treatment for offenders who are Trust beneficiaries.

Analysis:

As a part of release planning efforts, over 344 of the 859 unique and valid APIC program referrals or At least 40% of all mental health releases include application to one or more benefits (food stamps/adult public assistance/social security/disability/general relief). The application and subsequent approval for these benefits are critical for accessing community-based services and successful reentry. Also, 773 or 90% of APIC participants were connected to or engaged with a community provider to receive mental health services within 10-20 days of being released and 190 or 22% accessed APIC/Discharge Incentive Grant (DIG) housing funds. Approximately 70% of total funds available were used to provide housing for participants. Access to safe, affordable housing continues to be a challenge; however, those served through APIC are generally able to have secured housing upon release as a result of the pre-release planning that occurs. APIC and the Trust's partnership with DOC continues to demonstrate positive value for Trust beneficiaries being released from correctional settings.

207 or 24% of all duplicated and unduplicated referred individuals experiencing serious and persistent mental illness (SMPI)/with or without co-occurring disorders returned to jail either for being remanded for a technical violation or an arrest for a new crime. This percentage is far below the State of Alaska statewide recidivism rate of 60%. Continued support and partnership in this area is critical to reducing the number of Trust beneficiaries in Alaska's correctional facilities and overall rates of criminal recidivism.

This project has a demonstrated history of providing positive outcomes to beneficiaries. Staff will continue to monitor this project and work with DOC staff to identify alternative sustainable funding sources, and recommends continued funding in FY24/25. APIC and its services support Goal and Objective 7.3 of Alaska's Comprehensive Integrated Mental Health Program Plan.

Giance. Alaska Housing Hilan	ce Corporation		
Fund: MHTAAR			
Years Funded: 17	Project Category: Direct Servio	Project Category: Direct Service	
FY20: \$100,000	FY21 : \$100,000	FY22: \$100,000	
the Housing workgroup's focus	s on community reentry by targeting	tive Grant program is consistent with beneficiaries exiting Department of vill require extended supervision and	

Analysis:

This is a specialized housing voucher for the state that is critical for a reentrant's successful return to the community. As long as this project demonstrates positive outcomes it is recommended that Trust's funding partnership with Alaska Housing Finance Corporation (AHFC) to support Discharge Incentive Grants continue.

This project aligns with the Comp Plan Goal 7, Objective 7.3, reducing the number of Trust beneficiaries entering or becoming involved with Alaska's criminal justice or juvenile justice system.

Project Title: Re-entry Transition Supports	
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Grantees: FY22: Valley Charities, JAMHI Health & Wellness, Partners for Progress

Fund: Authority Grant		
Years Funded: 15	Project Category: Direct Service	
FY20: \$150,000	FY21: \$150,000	FY22: \$150,000

Project Description: The Re-entry Transition Supports Project is funding which provides housing support for returning beneficiaries who are confronted by barriers to housing due to their criminal history, mental illness, or other complicating factors. FY22 grantees were Valley Charities, JAMHI Health & Wellness, Partners for Progress.

Analysis:

A variety of different housing options are needed to support people returning to the community from incarceration. This project provides another option to the available transitional housing, focusing specifically on supporting people with a substance use disorder who are leaving corrections.

This is a new approach to re-entry housing for the state that has not existed to-date, and monitoring is underway. As long as this project demonstrates positive outcomes it is recommended that Trust's funding of the Flexible Special Needs Housing project continue in FY24/25. This project aligns with the Comp Plan Goal 7, Objective 7.3, reducing the number of Trust beneficiaries entering or becoming involved with Alaska's criminal justice or juvenile justice system

Beneficiary Employment and Engagement

	Grantee: Governor's Council on Disabilities and Special Education					
Fund: MHTAAR	1					
Years Funded: 1	Project Category: Co	onference				
FY20: \$0	FY21: \$0		FY22: \$70,000			
Project Description: This FY22 Empresent to focus on public awareness first event held in October 2019 was Education, and Health & Social Serv providers. The FY22 event will build upon the sparticipants, including more foundation tailored to beneficiaries. The Governor's Council on Disabilititievent and use funds to support relabeneficiary/provider travel from run Analysis: Due to limited GCDSE staff conference did not occur in time for will lapse back to the Trust. It is hop elements of the conference to occur	and training opportun s highly successful and ices, and in collaborat success of the previous tional information rela s seeking employment es and Special Educati ted expenses including ral and remote Alaska f capacity related to tu an FY22 event and th ed that collaboration r in Fall of 2022 (FY23)	ities for beneficiary emp coordinated across Dep ion with many Trust par s event and incorporate ated to specific supported , and more opportunitie on will lead the cross de g, venue costs, speaker f communities to ensure s irnover and organization e conference was postpowith a non-state entity v	ployment related issues. The partments of Labor, tners and community evaluative feedback from ed employment models, mor es to engage with employers. epartmental planning for the fees, participating statewide participation. mal transition, planning for th oned. Most allocated funds will allow for some key			
Trust staff recommends future budg time for identification of an appropri		•				
This project aligns with Goal 3 of the social well-being of Trust beneficiar		grated Mental Health Pla	an related to economic and			
Project Title: Individual Placements & Supports (IPS) Capacity Building						
Grantos: DHSS. Division of Rehavioral Health						

Grantee: DHSS, Division of Behavioral Health

Fund: MHTAAR

Years Funded: 1	Project Category: Capacity Building	
FY20: \$0	FY21: \$0	FY22: \$40,000

Project Description: The Individual Placement & Supports (IPS) Capacity Building project will support DHSS/Division of Behavioral Health staff in comprehensive coordination, training, and oversight of IPS systems development and grantee support throughout the state. Funds would be used for IPS fidelity reviews, training, technical assistance, and general outreach and awareness related to beneficiary employment. Additionally, funds will support collaboration with the IPS national technical assistance and training program through the IPS national training institute and services from this organization will be aligned with the FY22

Empowerment Through Employment conference coordinated by the Governor's Council on Disabilities and Special Education to ensure streamlined access to accurate and effective supports for Alaskan supported employment providers.

Analysis: The Division of Behavioral Health (DBH) has been leading a multi-year effort to establish and expand beneficiary access the IPS supported employment model. This first year of MHTAAR support to DBH for this work allowed for streamlined access to Trust funds to enhance the training and technical assistance capacity of DBH staff in support of community partners implementing the model.

DBH utilized Trust funding to support grantee and state team participation in the annual IPS International Learning Community which convened in Detroit, MI. Funds were also used to support quality/fidelity reviews of the IPS Alaska grantee sites (Kenai Peninsula and Sitka) and convene grantees in Anchorage in June 2022 to create an Alaska IPS Learning Community and kick off the formation of a statewide steering committee for this supported employment model. Trust beneficiaries will benefit from a strong state network of IPS providers as the model is proven to improve employment outcomes for people experiencing behavioral health needs. Unspent funds were intended, in part, to support IPS specific content for the FY22 employment conference that did not occur due to organization capacity with the Governor's Council on Disabilities and Special Education.

Trust staff recommends this project for continued annual funding at a slightly reduced level (\$30K) to support ongoing efforts of DBH to build statewide capacity and a cohesive cohort of IPS providers to support improved employment outcomes for Trust beneficiaries. An additional funding line will be proposed for FY24-25 specific to community partners and implementation of the IPS model.

This project aligns with Goal 3 of the Comprehensive Integrated Mental Health Plan related to economic and social well-being of Trust beneficiaries.

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Fund: Authority Grant

Years Funded: 1	Project Category: To be determined based on individual project type	
FY20: \$0	FY21: \$0	FY22: \$350,000

Project Description: Trust funding has been allocated to support provider agencies and community partners in planning and implementation of evidence based and promising employment and engagement practices. Funds are intended to be responsive to community partner interests and help build capacity and access to supports related to employment and engagement for Trust beneficiaries statewide.

Analysis: This funding line was created to support community partnerships and program development related to beneficiary employment and engagement. Prior budgets also supported the intent of this allocation with slight change in FY22 to reflect a focus on evidence based and promising practices.

The COVID-19 pandemic continued to limit capacity for community provider partnership related to beneficiary employment this project period and more than half the allocated funding line is unobligated as of June 2022. Outreach to potential partners identified workforce limitations as a primary concern and barrier for continued/expanded services for beneficiaries related to employment and community engagement. Examples of funded projects include operational support for Northern Hope drop-in center in Fairbanks, summer engagement projects with Ionia in Kasilof, a peer mentorship and support pilot project with Access Alaska with multiple communities, and an indoor greenhouse and community farming/job training program with the Fairbanks Soil and Water Conservation District in Fairbanks.

This project is funded in FY23 and Trust staff recommends reductions in FY24-25 allocated funds to be

responsive to community partner capacity for work related to this focus area. An additional funding line is proposed for FY24-25 specific to the implementation of the Individual Placement and Supports model which will allow this existing funding line to focus on other supportive projects.

This funding allocation aligns with Goal 3 of the Comprehensive Integrated Mental Health Plan related to economic and social well-being of Trust beneficiaries.

Project Title: BPI Program Grant – CHOICES, Inc.

Grantee: (HOICES, Inc.
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Fund: Authority Grant		
Years Funded: 15	Project Category: Direct Service	
FY20: \$404,170	FY21: \$404,170	FY22: \$440,170

Project Description: CHOICES is a mental health service provider that offers beneficiaries strategies, opportunities, resources and supports for personal growth, recovery, peer support and successful community integration. CHOICES promotes a stigma free environment, supporting individuality and self-determination. Supports and services are provided primarily by people who have experienced recovery from mental health challenges. People who participate with CHOICES, Inc. experience an improved life as evidenced by success in working, living, school, and personal relationships. Trust funding supports the Recovery Coordination Program of CHOICES, Inc. The program strives to work with beneficiaries to prevent hospitalizations, improve transitions from psychiatric hospital care and to provide intensive case management and wrap around supports in the community. Trust funding complements DHSS funding to operate the Assertive Community Treatment Program focused on beneficiaries who experience homelessness and chronic mental illness. With continued Trust funding, CHOICES proposes to continue current recovery-oriented peer support services and Recovery Coordination activities, including:

- Peer Support: workers fulfill a critical role in the CHOICES continuum of services by providing wellness education classes and ongoing support groups to CHOICES program participants.
- Outreach and engagement: CHOICES peer staff will continue to work with community partners by providing
 information and assistance accessing community services, as well as wellness education and recovery
 support to beneficiaries as requested.
- Individual Case Management (Recovery Coordination): Recovery Coordination offers less intensive but individualized case management services to adults living with severe mental health and substance use issues. Like peer support staff, all Recovery Coordination case managers will be trained individuals who self-identify as living with behavioral health issues.
- Advocacy and Community Education: CHOICES will continue to work with the state in their efforts to formalize the certification process for peer support including training, testing, certifying, marketing and service availability.

Analysis: CHOICES Community Options Program complements other community-based services to meet a specific beneficiary need in Anchorage through an intensive community outreach model that includes psychiatric and peer delivered case management supports. The program is designed to support transitions/stabilizations between episodes of hospitalization, to help beneficiaries access stable housing, and to have a positive impact on quality of life.

CHOICES has experienced challenging leadership transitions since late 2018 and as of June 2021 is working to stabilize with a new executive director. Despite these challenges, however, the agency maintains Commission

on Accreditation of Rehabilitation Facilities (CARF) accreditation and provides services for more than 77 Trust beneficiaries living with a mental illness, substance use disorder, Alzheimer's, or Traumatic Brain Injury. Largely the beneficiaries served report overall satisfaction with the programs offered. CHOICES leadership reports increased access to Medicaid billing which will help diversify the agency's revenue and should have the effect of reducing reliance on Trust and other grant funding.

This project continues to demonstrate positive outcomes for beneficiaries and staff recommends that Trust funding continue. This project aligns with Comp Plan Objective 4.3 and 4.4 related to improved treatment and recovery support services (including peer support services) to reduce the impact of mental health and substance use disorders.

Project Title: BPI Program	Grant – Alaska Mental Health Consum	er Web		
Grantee: Alaska Mental Health Consumer Web				
Fund: Authority Grant				
Years Funded: 17 Project Category: Direct Service				
FY20: \$333,600 FY21: \$333,600 FY22: \$333,600				
Project Description: This g	rant provides funding to support the Alas	ka Mental Health Consumer Weh (the		

Project Description: This grant provides funding to support the Alaska Mental Health Consumer Web (the Web), the only peer run recovery-oriented drop-in and engagement center in Anchorage. The Web serves individuals who experience life challenges including mental illness, addiction issues, homelessness, and other Trust beneficiaries who encounter an array of negative life circumstances. The prevailing philosophy at The Web is the development of relationship through the use of peer mentors and their experiential knowledge of mental illness, substance abuse, homelessness and other similar life experiences. The Web endeavors to utilize the relationship established through the peer- to-peer connection to meet the individual needs of each person. Individuals experiencing chronic homelessness and co-occurring substance abuse disorders and mental illness tend to be the hardest to reach because they do not integrate easily into the conventional behavioral health system. Because of the difficulty integrating, at times the Web is the last service option for many of these individuals, as they may have burned bridges within the traditional social service agencies. Partnerships with and referrals to other community organizations and affordable housing organizations continues to be a key area of focus for the Web to streamline access to supports and services for participants. Additionally, Web leadership continues to be engaged in the multi-year peer support certification work of the Division of Behavioral Health in partnership with the Trust.

Analysis: The Alaska Mental Health Consumer Web (the Web) provides a critical safety net drop-in center for difficult to serve Trust beneficiaries in Anchorage. The Web provides a supportive and recovery-oriented environment for people with severe and persistent mental illnesses and other behavioral health related conditions. The Web uses a recovery-oriented model of peer support services to link beneficiaries with basic needs such as housing and food while promoting a sense of community inclusion and wellness.

The Web reported serving approximately 1,416 unduplicated beneficiaries as well as providing training for 73 individuals despite enduring obstacles presented by the COVID-19 pandemic. Trust beneficiaries utilized the Web as a sober, safe haven that provides assistance with employment and housing opportunities, peer support and mentoring, peer group discussions, 12-step meetings, computer access, transportation to medical appointments, haircuts, nutrition and cooking classes, as well as referral and coordination of support services such as dental care and medical treatment.

Beneficiary feedback continues to be overwhelmingly positive according to surveys and testimonials provided in reporting as well as in person during site visits and other interactions. The relationship with community

partners continues to be a key area of focus for the Web to identify and streamline access to supports and services for participants.

Drop-in center agencies such as the Web are not likely to be self-sustaining in the immediate future because Medicaid and other revenue sources are inadequate to sustain this model of service and the agency does not have the administrative capacity to become a Medicaid provider.

Trust staff will continue to work with the Web to identify and develop other revenue options to replace or augment Trust funding where possible. Trust staff believe this model of serving beneficiaries with beneficiaries is being well delivered by the Web and recommends continued funding. Trust funding of the Web and its programs and services support Goal 3 and Goal 4 of Strengthening the System: Alaska's Comprehensive Integrated Mental Health Program Plan.

Fund: Authority Grant		
Years Funded: 17	Project Category: Direct Service	vice
FY20: \$208,650	FY21: \$208,650	FY22: \$208,650
Project Description: Alaska Y	'outh and Family Network (AYFN) is a	family-run, non-profit, organization
that provides comprehensive	support, education, advocacy and b	ehavioral health peer-support and
rehabilitative services to Trus	t beneficiaries throughout Anchorag	e and the Mat-Su. All AYFN's
programming and services are	e peer provided, strength-based, cult	urally responsive, trauma-informed,
		en, and youth) or emancipated young
people to age twenty-five wh	o are experiencing the challenges of	living with mental health, substance
		-
use disorder, or intellectual a	nd developmental disabilities or cari	ng for a child who experiences those
use disorder, or intellectual a challenges. AYFN serves appr	nd developmental disabilities or cari oximately 700 families annually. Serv	rices are focused on families with one or
use disorder, or intellectual a challenges. AYFN serves appropriate more members who are invol	nd developmental disabilities or cari oximately 700 families annually. Serv lved in Alaska's behavioral health and	vices are focused on families with one or d other family and child-serving systems
use disorder, or intellectual a challenges. AYFN serves appr more members who are invol (juvenile justice, special educ	nd developmental disabilities or cari oximately 700 families annually. Serv lved in Alaska's behavioral health and ation, child welfare, intellectual and	rices are focused on families with one or d other family and child-serving systems developmental disabilities, medical,
use disorder, or intellectual a challenges. AYFN serves appr more members who are invol (juvenile justice, special educa- legal, etc.) or at risk for involv	nd developmental disabilities or cari oximately 700 families annually. Serv Ived in Alaska's behavioral health and ation, child welfare, intellectual and vement in those systems. AYFN's Far	vices are focused on families with one or d other family and child-serving systems developmental disabilities, medical, nily and Youth Peer Navigators engage
use disorder, or intellectual a challenges. AYFN serves appro more members who are invol (juvenile justice, special educa legal, etc.) or at risk for involv families using a strength base	nd developmental disabilities or cari oximately 700 families annually. Serv lved in Alaska's behavioral health and ation, child welfare, intellectual and vement in those systems. AYFN's Far ed, shared-decision making model. N	vices are focused on families with one or d other family and child-serving systems developmental disabilities, medical, nily and Youth Peer Navigators engage avigators provide support and services
use disorder, or intellectual a challenges. AYFN serves appr more members who are invol (juvenile justice, special educa legal, etc.) or at risk for involv families using a strength base rooted in their lived (peer) ex	nd developmental disabilities or cari oximately 700 families annually. Serv lved in Alaska's behavioral health and ation, child welfare, intellectual and vement in those systems. AYFN's Far ed, shared-decision making model. No sperience of being a family member of	vices are focused on families with one or d other family and child-serving systems developmental disabilities, medical, nily and Youth Peer Navigators engage avigators provide support and services of a person addressing mental health or
use disorder, or intellectual a challenges. AYFN serves appro- more members who are invol (juvenile justice, special educa- legal, etc.) or at risk for involv families using a strength base rooted in their lived (peer) ex substance use recovery, as we	nd developmental disabilities or cari oximately 700 families annually. Serv lved in Alaska's behavioral health and ation, child welfare, intellectual and vement in those systems. AYFN's Far ed, shared-decision making model. No sperience of being a family member of ell as achieving successful recovery t	vices are focused on families with one or d other family and child-serving systems developmental disabilities, medical, nily and Youth Peer Navigators engage avigators provide support and services of a person addressing mental health or nemselves. Lived experience is
use disorder, or intellectual a challenges. AYFN serves appro- more members who are invol- (juvenile justice, special educ- legal, etc.) or at risk for involv families using a strength base rooted in their lived (peer) ex substance use recovery, as we enhanced by professionally d	nd developmental disabilities or cari oximately 700 families annually. Serv lved in Alaska's behavioral health and ation, child welfare, intellectual and vement in those systems. AYFN's Far ed, shared-decision making model. No operience of being a family member of ell as achieving successful recovery t eveloped knowledge and skills, gaine	vices are focused on families with one or d other family and child-serving systems developmental disabilities, medical, nily and Youth Peer Navigators engage avigators provide support and services of a person addressing mental health or nemselves. Lived experience is and in both formal training settings and
use disorder, or intellectual a challenges. AYFN serves appr more members who are invol (juvenile justice, special educa- legal, etc.) or at risk for involv families using a strength base rooted in their lived (peer) ex substance use recovery, as we enhanced by professionally d work experience. Navigators	nd developmental disabilities or cari oximately 700 families annually. Serv lved in Alaska's behavioral health and ation, child welfare, intellectual and vement in those systems. AYFN's Far ed, shared-decision making model. No operience of being a family member of ell as achieving successful recovery t eveloped knowledge and skills, gaine	vices are focused on families with one or d other family and child-serving systems developmental disabilities, medical, nily and Youth Peer Navigators engage avigators provide support and services of a person addressing mental health or nemselves. Lived experience is ed in both formal training settings and of the entire family in a holistic manner

Analysis: This project supports Alaska Youth and Family Network (AYFN) a family-run, non-profit organization that provides comprehensive support, education, advocacy and behavioral health peer-support and rehabilitative services to Trust beneficiaries throughout Anchorage and the Mat-Su. AYFN's programs and services are peer-provided, strength-based, culturally responsive, trauma-informed, and family and youth driven. AYFN serves families (parents, children, and youth) or emancipated young people to age twenty-five who are experiencing the challenges of living with mental health, substance use disorder, or intellectual and developmental disabilities or caring for a child who experiences those challenges.

AYFN's work is critical to the Trust's investment in beneficiary engagement and the peer support model of

recovery and employment. Additionally, there continues to be a general lack of home and community-based services willing or able to work with the population currently served by AYFN. AYFN's primary services include counseling and support, case management and family preservation, and stabilization for families at risk for out-of-home care or with youth that are returning home from residential psychiatric treatment placements. AYFN currently serves families in the Anchorage and Mat-Su communities. AYFN continues working to develop Medicaid billing infrastructure to leverage opportunities presented by the 1115 Medicaid Behavioral Health Waiver.

AYFN served 895 individuals, between two locations in Anchorage and the Mat-Su. AYFN received referrals from the Office of Children's Services (OCS) and families were involved with both OCS and the Division of Juvenile Justice (DJJ). AYFN reported families served had at least one parent/caregiver with an active mental illness and/or substance use issue. Families achieve positive outcomes through intentional support and connection. AYFN's successes include families that had their visits reinstated with their children, began trial home visits, or were reunified with their children after working to address their family's issues. AYFN guided parents through parenting education and coaching and by helping them gain an understanding of their child's disability or their own.

Trust staff will continue to work with AYFN to identify and develop other revenue options to replace or augment Trust funding. Trust staff believe the family navigation and peer support model of serving beneficiaries with beneficiaries is being well delivered by AYFN and recommends continued funding. This project aligns with Comp Plan Objectives 4.3, 4.4, 6.2 and 6.3 related to improved treatment and recovery support services (including peer support services) to reduce the impact of mental health and substance use disorders, and early intervention and supports for families involved with the child welfare systems due to maltreatment.

Project Title: BPI Program Grant – Polaris House

Grantee: Polaris House

Fund:	Authority	Grant
	,	oranc

Years Funded: 17	Project Category: Direct Service	
FY20: \$182,959	FY21: \$182,959	FY22: \$182,959

Project Description: This grant provides funding to support the Polaris House Clubhouse which through an evidenced based model provides Trust Beneficiaries in Juneau with rehabilitation services and supports (employment, housing and recovery supports). Beneficiaries with severe mental illness and challenged with other disabilities including traumatic brain injuries, developmental disabilities and addiction benefit from engagement, training and support provided to successfully obtain employment, obtain stable housing and receive daily supports through the supportive structure of Polaris House. All beneficiaries served by Polaris House are in an employment-oriented environment that supports all members who choose paid work. Members who state they are not ready for paid employment participate to create self-directed plans for community involvement, which in most cases lead to paid work or volunteer positions.

Polaris House strives to assure no member is homeless thorough a complete array of supports to beneficiaries to secure, maintain or improve housing circumstances. Polaris House will continue to support beneficiaries for integration into local education opportunities such as; GED classes, obtaining Food Worker Cards, participation in Food Safety Manager Training, and the Computer Learning Center. Polaris House advocates for beneficiaries in securing and maintaining relative benefits such as; Medicaid, Social Security, Food Stamps, housing vouchers, Trust mini-grants, APA, PFD's, etc. and facilitates beneficiary access to Trust funded mini-grants through the Trust Authority.

Analysis: Polaris House (PH) provides a critical safety net of direct service for difficult to serve Trust beneficiaries in Juneau and is a nationally accredited Clubhouse (an evidenced based model, which provides a comprehensive and dynamic program of support and opportunities for people with severe and persistent mental illnesses). The organization and related programs offer a safe and supportive environment for Trust beneficiaries experiencing mental illness and co-occurring issues. Polaris House emphasizes employment and these operational BPI funds are sometimes augmented with additional grant funds specific to employment support services for Clubhouse members.

Polaris House reported serving 66 beneficiaries as well as providing training for 5 individuals despite complications due to the COVID-19 pandemic. Beneficiary feedback continues to be overwhelmingly positive according to surveys and testimonials provided in reporting as well as in person during site visits and other interactions. Peer-delivered services by agencies like Polaris House are not likely to be self-sustaining in the immediate future because Medicaid and other revenue sources are inadequate to sustain this model of service.

During FY22, the Polaris House underwent a leadership transition involving both its executive director and various board members. The Trust met with the remaining board members on numerous occasions to provide support during the organization's executive and board member search. Polaris House was successful in adding additional board members and hiring a permanent executive director. The Trust will continue to support the new leadership team as they work to continue providing a high level of services to Trust beneficiaries.

Trust staff will continue to work with Polaris House to identify and develop other revenue options to replace or augment Trust funding. Trust staff believe this model of serving beneficiaries with beneficiaries is being well delivered by Polaris House and recommends continued funding. Trust funding to support Polaris House and its programs and services support Goal 3 and Goal 4 of Strengthening the System: Alaska's Comprehensive Integrated Mental Health Program Plan.

Project Title: BPI Program (Grant – NAMI Anchorage	
Grantee: NAMI Anchorage		
Fund: Authority Grant		
Years Funded: 15	Project Category: Direct Servic	e
FY20: \$154,071 FY21: \$154,071 FY22: \$154,071		
Project Description: NAMI	Anchorage is a local affiliate of the Natior	nal Alliance on Mental Illness. The agency

Project Description: NAMI Anchorage is a local affiliate of the National Alliance on Mental Illness. The agency provides support, education, and advocacy to individuals living with mental illness (consumers), their families, and the larger community. NAMI Anchorage serves beneficiaries and families in Anchorage and throughout the state. NAMI Anchorage offers instrumental education and training for families experiencing mental illness, providing both direct advocacy and support to beneficiaries and their families and also leveraging key partnerships to further educate and advocate on behalf of Trust beneficiaries living with mental illness.

NAMI Anchorage provides family to family/peer to peer education and support to individuals struggling with mental illness and family members who are caring for loved ones with mental illness through direct service, advocacy and outreach. NAMI Anchorage uses evidenced-based and promising practices (NAMI Family-to-Family Education, NAMI Connection Recovery Support Groups and Family Support Groups) to

aid families in navigating mental illness and the myriad of services that can be daunting. NAMI Anchorage has forged strong collaborations with the Veteran's Administration, community agencies throughout Anchorage and the Anchorage Police Department in support of the Crisis Intervention Team (CIT) academy, and is an active participant in Anchorage's suicide prevention efforts. The agency provides education to consumers and families about diagnoses, symptoms, medication management; NAMI Anchorage engages consumers and families in case management assistance, skill-building and socialization, daily living and personal care, referrals to the mental health court, crisis intervention, hospitalization support, and more.

Analysis: Grant funds support NAMI Anchorage as a local affiliate of the National Alliance on Mental Illness. The agency provides support, education, and advocacy to individuals living with mental illness (consumers), their families, and the larger community. NAMI Anchorage serves beneficiaries and families in Anchorage and throughout the state. NAMI Anchorage offers education and training for families experiencing mental illness, providing both direct advocacy and support to beneficiaries and their families while also leveraging key partnerships to further educate and advocate on behalf of Trust beneficiaries living with mental illness.

NAMI Anchorage navigated the complications presented by the COVID-19 pandemic and reported serving 175 beneficiaries experiencing mental illness. NAMI Anchorage provides education to consumers and families about mental illness diagnoses, symptoms, and medication management; and NAMI Anchorage engages consumers and families in case management assistance, skill-building and socialization, daily living and personal care, referrals to the mental health court, crisis intervention, hospitalization support, and more. NAMI Anchorage continues to provide advocacy, critical education, peer support and coordination services to beneficiaries with mental illness, their families, and the community.

This project has demonstrated positive outcomes for beneficiaries as an advocacy and support agency and Trust staff recommends the program receive Trust funding. This project aligns with Comp Plan Objectives 4.3 and 4.4 related to improved treatment and recovery support services (including peer support services) to reduce the impact of mental health and substance use disorders.

Project Title: BPI Program Grant – NAMI Juneau				
Grantee: NAMI Juneau				
Fund: Authority Grant				
Years Funded: 14	Project Category: Direct Service			
FY20: \$100,550	FY21: \$100,550	FY22: \$100,550		
Project Description: This grant provides funding to support NAMI Juneau, the only agency in Juneau that provides free, peer (family) driven educational and support programs for families caring for a loved one with mental illness. NAMI Juneau currently offers three signature programs for family members, including Family				

Project Description: This grant provides funding to support NAMI Juneau, the only agency in Juneau that provides free, peer (family) driven educational and support programs for families caring for a loved one with mental illness. NAMI Juneau currently offers three signature programs for family members, including Family to Family, the NAMI Family Support Group and more recently NAMI Basics- all signature NAMI National programs. NAMI programs empower individuals to be more informed and effective advocates for their family member, reducing the threat of negative outcomes such as suicide, homelessness, emergency and institutional care. NAMI provides vital support, education and advocacy skills for Trust beneficiaries and their families for families in Juneau and other southeast communities.

NAMI Juneau serves as a central community voice on mental illness and serves a unique role in the community providing peer-driven and peer-led education and support programs to individuals living with mental illness (primary beneficiaries), and their family members (secondary beneficiaries). The agency is

the local affiliate of the National Alliance on Mental Illness and the mission is to help individuals affected by mental illness build better lives through education, support and advocacy. The office continues to provide soft navigation services, linking individuals affected by mental illness to needed services and supports. NAMI programs take the form of recurring mutual support groups, advocacy training, and 6, 9 and 12-week Biopsychosocial education classes. NAMI's evidence-based programs empower participants to be more informed and effective advocates for themselves or a family member. These programs have been shown to improve mental health outcomes, promote family engagement in treatment, and reduce the threat of negative outcomes, such as hospitalization, incarceration and suicide.

Analysis: NAMI Juneau focuses on family to family/peer to peer education and support to family members who are caring for loved ones with moderate to serious mental illness (direct service, advocacy and outreach). Offering a number of educational and support groups, NAMI uses evidenced-based and promising practices to aid families in navigating mental illness and the myriad of services that can be daunting. NAMI Juneau and their advocacy plays a key role in the Juneau Community Action Plan, the Juneau Suicide Prevention Coalition as well as the Juneau Reentry Coalition as a standing steering committee member. The agency partners with the local hospital to provide regular educational forums to practitioners and community members focused on various facets of mental illness. Program evaluation activities continue to reveal positive outcomes, including access to services and increased community awareness of beneficiary needs.

NAMI Juneau continued to overcome obstacles presented by the COVID-19 pandemic by serving 225 beneficiaries living with mental illness and trained 8 individuals. Beneficiary feedback continues to be overwhelmingly positive according to surveys and testimonials provided in reporting as well as in person during site visits and other interactions (see attachment). NAMI Juneau is an exemplary grantee with consistent and high-quality reporting of financial and program activities.

NAMI Juneau continues to provide critical education, peer support and coordination services to beneficiaries with mental illness, their families, and the community.

This project has demonstrated positive outcomes for beneficiaries as an advocacy and support agency and Trust staff recommends the program receive Trust funding. This project aligns with Comp Plan Objectives 4.3 and 4.4 related to improved treatment and recovery support services (including peer support services) to reduce the impact of mental health and substance use disorders.

Project Title: Peer Support Certification				
Grantee: DHSS, Division of Behavioral Health (DBH)				
Fund: MHTAAR				
Years Funded: 3	Project Category: TBD			
FY20: \$125,000	FY21: \$125,000	FY22: \$139,500		
Project Description: The need to develop a Behavioral Health Peer Support Worker Certification for Alaska has been identified for a number of years. The Center for Medicare and Medicaid Services (CMS) has strongly encouraged States to develop a certification in conjunction with adding Peer Support Services to their Medicaid plan. Provider agencies have promoted the development of a certification to provide greater assurance of the capabilities and qualifications of their peer support staff. Peer support workers have advocated for a certification to acknowledge the training and experience they possess. Of particular importance is the fact that the 1115 Medicaid Waiver now calls for the certification of peer support workers for participation in those particular services.				

DBH and the Trust have made a concerted effort to lay the groundwork for a Peer Support Worker Certification through an extensive stakeholder process including peers, peer support workers, agency providers, State staff, and others interested in the topic. The result was a detailed set of recommendations on a framework for the certification as well as other recommendations of promoting a recovery orientation in the public behavioral health system.

Central to the recommendations was funding for an independent Certification Body to do the work of actually creating the certification. DBH recently awarded a competitive contract to the Alaska Commission for Behavioral Health Certification to become the certification body through guidance of a multidisciplinary advisory council. Additionally, stakeholder recommendations call for the development of a training program for new Peer Support Workers which would be one of the requirements for individuals to achieve certification.

Funding will be used to support training for prospective peer support workers, including a potential peer support conference event in FY21 depending on social distancing recommendations related to COVID-19.

Analysis: A healthcare workforce is needed to provide services and care to Trust beneficiaries. The Peer Support Specialist (PSS) has been one job classification that is targeted to support the healthcare workforce. Peers have been a part of the workforce, but not recognized as a professional position, or one that could be utilized to bill for services, for many years. The advent of the Medicaid 1115 waiver changed this in a way that allows for agencies to bill for peer related work with clients. Hence, the need for the certified professional development of the PSS.

DBH worked with community partners to build the certification system and equip the Commission for Behavioral Health Certification to oversee the program. The certification board has certified 44 peer support professionals from July 1, 2021 to February 28, 2022. This is in line with the target goal of 50 certifications by June 30, 2022. Five of the 44 certifications are Traditional Peer Support Specialists, which incorporates the traditional Native healing practices with peer support. An important component to the success of this program was creating a system for educating peers who were interested in getting certified. This was achieved on multiple levels and provided classes that allowed over 300 individuals to receive class credit that went towards their certification.

The PSS certification system allows for behavioral health agencies across Alaska to expand their service array in offering treatment to Trust beneficiaries. Expanding the healthcare workforce with peers helps beneficiaries get care more expediently and at the right level. This directly ties into Comp Plan Goal 9 for expanding efforts for recruiting and retaining the healthcare workforce. This certification program has provided the necessary steps for professionalizing the peer job position and making it a credible part of the healthcare industry. It is recommended to continue supporting the SOA DBH with funding support in FY 24 and 25.

Project Title: Micro Enterprise Funds				
Grantee: University of Alaska Anchorage, Center for Human Development				
Fund: MHTAAR				
Years Funded: 19	Project Category: Direct Service	Project Category: Direct Service		
FY20: \$150,000	FY21 : \$150,000	FY22: \$175,000		
Project Description: Prior to COVID, Alaska's economy was increasingly moving towards small business				

ownership. Data from a 2019 Alaska Small Business Development Center report shows 73,354 small businesses in Alaska (from Ketchikan to Utqiagvik) and 141,147 Alaskans employed by small businesses. However, individuals with disabilities are seldom provided with the option to own their own businesses. As a result of the Trust funding for the Economic Development Alliance, a mechanism to train and support individuals with disabilities to own their businesses is in place.

The development of individual micro-enterprises is an integral part of the movement for Self Determination. The concept of 'employment' must be challenged by individuals who experience multiple and severe disabilities for whom the idea or possibility of holding a 'regular' job is often out of reach. This should not deny a person from earning income. Through micro-enterprise development, it is possible for people to have income that offsets costs usually borne by public funds. More importantly, for the individual, earning money gives a person a sense of worth and value.

These funds will be primarily used for Trust beneficiaries to start their own businesses and receive ongoing business/self-employment coaching to sustain and grow their businesses. In addition, the CHD will use these funds to leverage funds from individual entrepreneurs, families, and State agencies such as the Department of Community and Economic Development and the Division of Vocational Rehabilitation.

The need for targeted additional support (i.e. peer support, substance abuse, mental health, unforeseen business expenses, additional training or other brief intervention) has been identified for some past Microenterprise beneficiaries in order to successfully maintain self-employment and wellness. A portion of FY21 Microenterprise project funds may be designated to identify and provide supports and referrals to other services as needed for identified beneficiaries or to support self- employed beneficiaries negatively impacted by the COVID-19 pandemic. Program evaluation design will be modified to measure effectiveness of additional supports and services received.

Availability of these additional supports and services will be on a first come, first served basis, with supports prioritized as follows:

- Mental health or substance use counseling or rehabilitation services
- Unforeseen business expenses critical to sustaining a viable business
- Continuing Education (conferences or trainings related to business needs)

Analysis: The Microenterprise program continues to be a successful anchor project within the Beneficiary Employment and Engagement focus area for the Trust. The University of Alaska Anchorage, Center for Human Development serves as the administrator for the program and conducts outreach, coordinates technical support for applicants, and oversees funding allocation for successful beneficiary applicants to start or expand a small business. FY22 project activities have required a high level of support from the UAA administrator as the business consultant typically contracted for this project passed away in late FY21 and a replacement has not yet been successfully recruited. The administrator has been collaborative and highly supportive of the Microenterprise project as it connects to the larger body of work related to beneficiary employment which increases the systemic impact of the project.

This project is funded at the current level in FY23 and in the proposed FY24-25 Trust budget with ongoing analysis of demand and effectiveness through evaluation and collaboration.

This project aligns with Goal 3 of the Comprehensive Integrated Mental Health Plan related to economic and social well-being of Trust beneficiaries.

Housing & Home and Community Based Services

Project Title: Rural Housin	ng Coordinator – Northwest Arctic B	orough
Grantee: Alaska Housing &	& Finance Corporation (AHFC)	
Fund: MHTAAR		
Years Funded: 1	Project Category: Capacity	Building
FY20: \$0	FY21: \$0	FY22: \$135,000
Project Description: These	e funds will support the continuation o	f the Rural Housing Coordinator position
housed in the Northwest	nupiat Housing Authority, tasked with	addressing issues of inadequate housing in
		al Needs Housing Grant as a strategy to
		osition to be a catalyst in the community for
		d to the creation of a specific project in the
-	•	ed to travel to villages in the region to gather
data on existing residentia	al structures, overcrowding and resour	ces available to Trust beneficiaries.
Analysis: The initial Rural	Housing Coordinator was hired in Kotz	ebue and serves the Northwest Arctic
Borough. This grant, in combination with partner funding from AHFC, supports the coordinator position and a		
small pool of funds for small projects. The fund has been named the Rural Housing Catalyst Fund and can be		
accessed by the Rural Housing Coordinator through submitting a project proposal to AHFC with review by both		
the Trust and AHFC. The fund helped to open a homeless shelter in Kotzebue and addressed food security for		
the region. The Rural Housing Coordinator position was able to successfully obtain several grants to benefit		
homeless services and food security for the region. The project met or exceeded expectations for its identified		
performance measures. Past Housing Coordinator positions have been funded for 3 to 5 years due to the		
length of time needed to see systems change and implement housing projects. Trust staff support this project		
to improve housing and homeless services in rural Alaska and recommend continued funding to further the		

to improve housing and homeless services in rural Alaska and recommend continued funding to further the work of the Housing and Home and Community Based services focus area. The Rural Housing Coordinator – Northwest Arctic Borough supports Goal 3, Objective 3.1 of Strengthening the System: Alaska's Comprehensive Integrated Mental Health Program Plan.

Project Title: Rural Housing Coordinator – New Region		
Grantee: Alaska Housing & Finance Corporation (AHFC)		
Fund: MHTAAR		
Years Funded: 1	Years Funded: 1	
FY20: \$0	FY21: \$0	FY22: \$135,000
with addressing issues of inadequa determine the hub community off program. The program will develop	te housing in rural Alaska. AH the road system that will host a homeless and housing coa	the Rural Housing Coordinator program tasked HFC will complete a competitive bid process to at the second Rural Housing Coordinator alition to identify barriers to accessing safe and hose concerns, particularly for AMHTA

Analysis:

beneficiaries who are at higher risk of literal homelessness.

The second rural housing coordinator position was not able to begin in FY22. The unused funds will lapse back to the Trust. Both eligible agencies and AHFC experienced a dramatic increase in workload because of the necessity to spend American Rescue Plan Act funds and implement other new programs in a short amount of

time. Throughout the fiscal year there were agencies that showed interest, but ultimately a contract was not executed. Despite the project not being able to come to fruition in FY22, Trust staff support this project to improve housing and homeless services in rural Alaska and recommend continued funding to further the work of the Housing and Home and Community Based services focus area. If a contract is not able to be executed in FY23 this strategy will be reevaluated for future funding. The Rural Housing Coordinator – New Region supports Goal 3, Objective 3.1 of Strengthening the System: Alaska's Comprehensive Integrated Mental Health Program Plan.

Project Title: IDD System Capacity Development

Grantee: Alaska Association on Developmental Disabilities

Fund: Authority Grant

Years Funded: 5	Project Category: Capacity Building	
FY20: \$65,000	FY21: \$65,000	FY22: \$65,000

Project Description: Alaska Association on Developmental Disabilities (AADD) provider agencies continue to experience the stresses of changing federal regulations, the state budgetary and programming changes. Each one of these changes impact providers in the way services are provided and have significant budgetary ramifications. This funding will work to achieve the following four goals:

- 1) Advocate for a strong system and best practices through involvement with national trends and organization.
- 2) Change management support for leadership in provider organization related to changes within the Intellectual and Developmental Disabilities (IDD) system required by Medicaid Redesign and federal requirements.
- 3) Provide for Agency sustainability through supporting agencies in adapting to costing models needed under the changes to the IDD system.
- 4) Work force development to address training needs of agency staff

Analysis: This project has met its expected deliverables to date. This is a core IDD systems change initiative for the state that corresponds with implementing the DD Vision. AADD advocates for best practices to be implemented by its members and the state system as whole. AADD encourages members to obtain training on both business acumen and service delivery. AADD is active in statewide workforce initiatives, especially those surrounding direct service professionals. An active participant in the DD Vision, AADD works to implement recommendations made including use of technology, consumer-driven decision making, and implementing recommendations made by self-advocates. In FY22, AADD was a strong advocate for rate increases for the industry and for a review of how the State of Alaska can reinvigorate the struggling Care Coordination service. As long as this project demonstrates positive outcomes it is recommended that Trust's funding partnership with AADD continue to improve the IDD service provider system capacity unless the project fails to meet stated goals. This project aligns with Comp Plan Objective 9.1: Strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization.

Project Title: System Infrastructure and Capacity Development for ADRD and TABI State Plans

Grantee: To be determined

Fund: Authority Grant

Years Funded: 7	Project Category: TBD	
FY20: \$100,000	FY21 : \$150,000	FY22: \$150,000

Project Description: This funding is identified to further the planning and systems change work for the Traumatic and Acquired Brain Injury (TABI) and Alzheimer's Disease and Related Dementia (ADRD) service systems. Past grantees have included, among others, Alzheimer's Resource Association. These service systems have experienced rapid change and budget constraints creating the need to increase capacity to serve new generations with new expectations of what the service system should look like to provide support. Both the State of Alaska and home and community-based service providers are grappling with how to use technology, expand workforce, and incorporate person directed care into an already fatigued system.

Analysis: The System Infrastructure and Capacity Development for ADRD and TABI State Plans project funding helps to support infrastructure and capacity development to strengthen the existing home and community based service system. TABI and ADRD both have statewide plans developed through broad community partnerships and stakeholder engagement. Projects selected for funding must further the priorities identified in these plans. This line item does not have a specified grantee during the initial budget creation. Rather, projects identified are intended to meet a need that arises during the fiscal year. This flexibility allows for responsive funding as the TABI and ADRD committees meet throughout the year to develop or identify projects and initiatives that could be implemented in Alaska. Three projects were funded in FY21: 1. Dementia Action Collaborative facilitation; 2. Mind Aerobics; and 3. MatSu Senior Services Senior Activity Program. These projects met or exceeded expectations for their identified performance measures.

It is recommended that Trust's funding to support ADRD and TABI system capacity development continue over the next 3 years, with a decrease in funds beginning in FY24, and evaluated for continued need for FY26. It is recommended that the FY24 decrement be transferred to fund TABI and ADRD services and supports where greater demand to fund projects was experienced. This project aligns with Comp Plan Objective 7.2: Increase access to effective and flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement.

Giance. Alaska Legal Selvin	ces Corporation		
Fund: Authority Grant			
Years Funded:	Project Category: Direct Servic	ce	
FY20: \$75,000	FY21: \$75,000	FY21 : \$75,000 FY22 : \$75,000	
beneficiaries on issues that safety, stability, and self-su	Legal Services Corporation will provide of are critical to preventing homelessness fficiency and thereby place them at risk or rent homelessness. This grant also provi	such those that threaten their physical of becoming homeless or	

Analysis: This is a key project that prevents homelessness through beneficiary education that is not available through any other resource. Many people who receive notice of eviction or have problems with their landlord do not have the resources to hire representation. Alaska Legal Services is able to delay or prevent eviction, reducing homelessness for Trust beneficiaries by providing free legal assistance. This funding is used as match to leverage federal funding opportunities. As long as this project demonstrates positive outcomes it is recommended that Trust's funding partnership with Alaska Legal Services Corporation continue. This project aligns with the Comp Plan Objective 3.1 Alaskans have stable, safe housing with appropriate, community-based social supports to maintain tenancy.

Project Title: Special Need	ds Housing Grant	
Grantee: Alaska Housing F	inance Corporation	
Fund: MHTAAR		
Years Funded: 5	Project Category: Direct Service	9
FY20: \$200,000	FY21 : \$200,000	FY22: \$200,000
Project Description, The S	nacial Needs Housing Grant program is a l	ong time housing program and convisos

Project Description: The Special Needs Housing Grant program is a long time housing program and services partnership between AHFC and the Trust to provide permanent supportive housing to Trust beneficiaries. In 2007, AHFC began a restructuring of the Homeless Assistance Program and the Special Needs Housing Program to better serve hundreds of homeless and/or near-homeless families to obtain or retain safe and sanitary shelter each year and to create sustainable supported housing over time. The Homeless Assistance Program (HAP) was established in 1993 supporting emergency shelter services, homelessness prevention and rapid rehousing efforts as well as capital needs for these grantees. The Trust contributes funding as a partner to ensure beneficiaries who are homeless can access shelter and housing.

Analysis: Demand for this program has steadily increased as federal and municipal sources have diminished. Both HAP and SNHG programs are underfunded and could issue more grants to additional communities in Alaska if funding increased. Medicaid does not pay for housing and HUD funding allocations to Alaska do not meet the demand for affordable housing. Both HAP and SNHG programs are underfunded and could issue grants to additional unfunded communities or projects in Alaska if funding increased. Trust funding and GF/MH recommendations are critical to maintain the statewide network of safety net shelter and housing substantially serving Trust beneficiaries.

Trust staff recommend continued funding for FY24 as a part of the Housing and Home and Community Based Services focus area. This investment paired with GF/MH and AHFC funding, has a greater impact on the homeless services system than if the Trust were to issue individual grants. As long as this project demonstrates positive outcomes it is recommended that Trust's funding partnership with AHFC to support the Special Needs Housing Grant continue until the program is adequately funded to meet demand or the project fails to meet stated goals. The Homeless Assistance Program supports Goal 3, Objective 3.1 of Strengthening the System: Alaska's Comprehensive Integrated Mental Health Program Plan.

Project Title: Juneau Rapid Rehousi	ing	
Grantee: Family Promise of Juneau		
Funding: Authority Grant		
Years Funded: 3	Project Category: Direct Service	
FY20: \$150,000	FY21: \$150,000	FY22: \$150,000

Project Description: Family Promise Juneau and Saint Vincent de Paul, in partnership with AWARE (Juneau's domestic and sexual violence shelter), propose development of a multi-agency shared Homeless Prevention and Rapid Rehousing program for clients in the Coordinated Entry System. This program will follow the National Alliance to End Homelessness and Supportive Services for Veterans Families standards. The proposed program will work with landlords to help prevent evictions and provide short-term rental assistance and services to those with our housing to obtain housing quickly, increase self- sufficiency, and stay housed. Family Promise of Juneau's approach is different than traditional rapid rehousing housing projects as it works with landlords to help prevent evictions where the tenant is interested in remaining in the leased property. This keeps an eviction off the tenant's record and reduces eviction costs for landlords.

The goals of this project are to: Create a network of reliable landlords that are willing to house individuals and families leaving homelessness, assist individuals and families in moving into realistic private market rental units of their choosing, provide goal-oriented case management for up to one year and offer limited tapering financial support that provides housing stability while fostering the client's independence.

Analysis:

This funding strengthens the existing housing and homeless service system in Juneau. Rapid Rehousing is a cost effective housing program for homeless families and addresses the reasons the family became homeless. This project works with families to improve financial literacy, gain and maintain employment, and access services needed to stabilize family members that need additional help. One example is a child with undiagnosed mental illness that presented as behavior problems in school. The mother missed a significant amount of work time responding to her child at school and after school care and lost her job. The two parent family needed both incomes to afford rent and necessities and lost their apartment. Connecting the family to medical insurance and obtaining an assessment and treatment for their child has led to significant improvement in behavior and school performance for the child so that the mother was able to return to work. Case management combined with funds for a security deposit helped end this family's homelessness. A majority of those served have one or more Trust beneficiaries in the family. This project originally was identified as having a three-year duration and reduced funding is recommended for an additional year to provide stability while the agency applies for grants to replace Trust funding in FY24. This is an example of a project that would benefit from ongoing funding from the Homeless Assistance Program if additional funds were approved to be able to expand the number of grantees served. This project aligns with the Comp Plan Objective 3.1 Alaskans have stable, safe housing with appropriate, community-based social supports to maintain tenancy.

Project Title: Homeless Assistance Program - Capital		
Grantee: Alaska Housing Finance Corporation		
Fund: MHTAAR		
Years Funded: 20	Project Category: Direct Service	
FY20: \$950,000	FY21 : \$950,000	FY22: \$950,000

Project Description: The Homeless Assistance Program is one of Alaska Housing Finance Corporation's (AHFC) core funding programs. The Homeless Assistance Program (HAP) was established in 1993, and has been a core program for Alaska Housing Finance Corporation to support emergency shelter services, homelessness prevention and rapid re-housing efforts as well as capital needs for these grantees. In 2007, AHFC began a restructuring of the Homeless Assistance Program and the Special Needs Housing Program to better serve hundreds of homeless and/or near-homeless families to obtain or retain safe and sanitary shelter each year and to create sustainable supported housing over time. Demand for this program has steadily increased as federal and municipal sources have diminished.

Analysis: In FY21, AHFC awarded HAP funding to 35 organizations in 20 communities statewide to assist Alaskans experiencing homelessness or at-risk of homelessness. These organizations provide emergency shelter, reentry assistance for persons released from corrections, transitional housing, short-term rental assistance, and/or services to prevent homelessness. This project has substantially met or exceeded Trust expectations against the performance measures outlined in the project grant agreement. In SFY21 15,396 unduplicated individuals received services in HAP-funded programs (July 1, 2020 - June 30, 2021).

Medicaid does not pay for housing and HUD funding allocations to Alaska do not meet the demand for affordable housing. Both HAP and SNHG programs are underfunded and could issue grants to additional unfunded communities in Alaska if funding increased. Trust funding and GF/MH recommendations are critical to maintain the statewide network of safety net prevention, shelter, and housing stability services substantially serving Trust beneficiaries. Trust staff recommend continued funding for FY24 as a part of the Housing and Home and Community Based Services focus area. The Trust investment paired with GF/MH and AHFC funding, has a greater impact on the homeless services system than if the Trust were to issue individual grants. As long as this project demonstrates positive outcomes it is recommended that Trust's funding partnership with AHFC to support the Special Needs Housing Grant continue until the program is adequately funded to meet demand or the project fails to meet stated goals.

The Homeless Assistance Program supports Goal 3, Objective 3.1 of Strengthening the System: Alaska's Comprehensive Integrated Mental Health Program Plan.

Project Title: Rural Home and Comr	nunity Based Services (HCBS) Coordinator	
Grantee: DHSS, Division of Senior and	d Disabilities Services (SDS)	
Fund: MHTAAR		
Years Funded: 2	Project Category: Capacity Building	
FY20: \$0	FY21: \$81,000	FY22: \$82,000
serious infrastructure gaps in Alaska development of sufficient home and their community when they have ex- provide outreach, education and inter- the needs of people with Alzheimer conditions as well as with elders w	proach to long term care development for 's smaller communities and rural villages. The community-based services so Trust beneficia tensive care needs that their families cannot ensive community based technical assistance 's disease and related dementias and other re- tith co-occurring behavioral health conditions mission on Aging (ACoA) and be supervised to a a appropriate.	e goal is to assist with the pries do not have to leave provide. This position will work to assist in meeting elated cognitive disabling s and/or addictions. This

Analysis: This funding helps to supports infrastructure and capacity development to strengthen the existing home and community-based services system with a focus on rural Alaska. This project began in FY21 and originally had a three-year duration. Length of time to hire and vacancies have contributed to inconsistency in implementing this project. Trust staff recommend extending the funding to a five year period and evaluated for continued need for FY26. If the project continues to have long periods of vacancy or fails to meet stated goals, it will be adjusted accordingly. This project aligns with Comp Plan Objective 7.2: Increase access to effective and flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement.

Project Title: Decision Mal	king Support	
Grantee: Alaska State Asso	ciation for Guardianship and Advocacy	
Fund: Authority Grant		
Years Funded: 3	Project Category: Capacity Buil	lding
FY20: \$48,200	FY21: \$48,200	FY22 : \$48,200
Ducient Decerimticus, Alaska	Ctata Association for Cuandianship and /	

Project Description: Alaska State Association for Guardianship and Advocacy (ASAGA) provides necessary, consistent and vital assistance, education and support to families and providers navigating the guardianship system. ASAGA intends to expand intake sources across the State to include being a formal resource to the Alaska Court System when the courts encounter problematic guardianships.

ASAGA will provide information, non-legal consultations and education to family guardians and those serving vulnerable adults. ASAGA provides informational access to a large array of individuals who with no legal background, may struggle with the guardianship system. ASAGA also provides information to guardians and people seeking guardianship about alternatives such as a supported decision-making agreements. ASAGA supports the State of Alaska moving toward guardianship best practices and plans to continue to stay engaged with stakeholders after the WINGS (Working Interdisciplinary Network of Guardianship Stakeholders) project funding ended in FY19. The ASAGA project affects all beneficiary categories for individuals who need support making decisions.

Analysis: This funding helps support private guardians and family members seeking guardianship to discuss whether or not court intervention is necessary or if another type of decision making support can be utilized. ASAGA also held a conference open to guardians and professionals. ASAGA is working to develop an app that aids guardians to track expenses to auto fill into the annual guardianship report required by the court to ease the burden on non-professional guardians. This project has a limited duration, with FY22 being the final year of funding. This project has met or exceeded expectations for its performance measures. The Alaska Court System successfully obtained a federal grant to continue this work. This funding supports Comp Plan Goal 3.4, by ensuring beneficiaries have access to benefits, supports, and basic needs.

Project Title: Home Modifications and Upgrades - Capital		
Grantee: DHSS, Finance and Management Services		
Fund: MHTAAR		
Years Funded: 20	Project Category: Capital - Equipment	
FY20: \$300,000	FY21 : \$300,000	FY22: \$250,000

Project Description: This capital project provides housing modifications to persons experiencing a disability, allowing them to remain in their homes and reducing the potential cost of providing assisted living or nursing home care. Funds help to increase the accessibility of current housing so that Trust beneficiaries, and other special needs populations, can move into or remain in their own homes. Home modifications are available to people wherever they reside, regardless if they own or rent or with whom they live. Typical kinds of assistance provided are accessibility modifications or additions (e.g., widen doorways, remodel bathrooms and/or kitchens, install entrance ramps, add bathrooms and/or bedrooms) and related equipment. Home modifications have been shown to delay or prevent institutionalization. Funds are awarded to non-profit agencies through a competitive process.

Analysis: In FY21, the Housing Modifications and Upgrades to Retain Housing program struggled to meet Trust expectations for the performance measures outlined in the project grant agreement. Funds are awarded to non-profit agencies through a competitive process and total of 13 beneficiaries were served during the period. COVID created delays in obtaining building supplies and specialized equipment and additional installation delays were experienced by grantees. To improve ease of use for both participants and providers, it is recommended that consolidation and alignment of practices be explored between this grant program, the home modification program at Alaska Housing Finance Corporation (AHFC) and the environmental modification program offered through Senior and Disabilities Services waiver programs. The population served through the Housing Modifications and Upgrades to Retain Housing program has shifted almost entirely to senior beneficiaries so that funds can be paired with the AHFC program to fund larger projects. This is allowed through the grant, but it is believed that the same population could qualify for the Medicaid waiver and the projects could be funded through that source.

Trust funding and advocacy for GF/MH provides grant funding for home modification services for a small number of people annually. These services are needed; however the Trust has provided 20 years of support to this project. The service has been refined, positive outcomes have been demonstrated and more sustainable funding sources for this service are available through Medicaid. The State of Alaska does have the opportunity to fund this service more sustainably through Medicaid waiver, community first choice, or state plan services. Environmental modifications are currently available through the Medicaid Home and Community Based Waivers and are drastically underutilized. Community partners identify that the additional processes required to approve this waiver service create barriers that deter use. For these reasons, MHTAAR funds have been reduced in recent years with corresponding recommended increases in GF/MH to wind down the project. Trust staff recommend discontinuing MHTAAR funding in FY24 and continuing to advocate for GF/MH funding and improved processes in existing programs. Housing Modifications and Upgrades to Retain Housing supports Goal 3 of Strengthening the System: Alaska's Comprehensive Integrated Mental Health Program Plan.

Grantee: DHSS, Division of	Senior and Disabilities Services		
Fund: MHTAAR			
Years Funded: 14	Project Category: Direct Servic	Project Category: Direct Service	
FY20: \$300,000	FY21 : \$300,000	FY22: \$300,000	
Project Description: Aging	and Disability Resource Centers (ADRCs)	serve as a visible, trusted place for	
people to go to for information and assistance with accessing services that support them in the community.			
The integration of informat	ion about home and community-based s	services can reduce the frustration and	

feelings of being overwhelmed experienced by people when trying to understand and access available options. ADRC services are unique from other information and referral services because they have the added focus of assisting with streamlining the entrance into all programs administered by Senior and Disabilities Services, in addition to targeted efforts to reach ADRC users who are able to privately pay for services.

One critical component of ADRC programs is Options Counseling and decision support. This service focuses on the immediate needs of an ADRC user but is not crisis intervention. Options counseling and decision support is an interactive service that includes information and referral along with education, but also includes an emphasis on building a relationship with the user and developing a plan that allows for choice. ADRC users should be informed of all their services options so they can then make an informed choice about what services best meet their needs. ADRC's also follow up with individuals to ensure they assessed services, and if not what follow up is needed.

The ARDCs are a primary entry point to the home and community-based service delivery system in Alaska and a resource for the Department of Health and Social Services to screen and appropriately refer individuals to available programs. The Aging and Disability Resource Centers are also an important resource for reporting the unmet needs of long-term care resources in our state.

Analysis: The ADRC is critical community infrastructure for beneficiaries and their families to access and understand the various yet complicated broad array of home and community-based service and support options. The ADRCs successfully provide information and services and discuss options to access multiple resources that best support those seeking services. As a conflict free agency, the ADRCs ensure each individual is presented with options to make informed decisions to best support themselves or their loved ones. This project has substantially met or exceeded Trust expectations against the performance measures outlined in the project grant agreement.

The department has implemented the use of Medicaid administrative claiming to diversify funding for these services for expansion and in FY22 has initiated additional strategies to maximize this funding source. The implementation of person-centered intake approach for this service system has also been completed. During this grant period, SDS has worked to align data entry and training across the ADRC and Developmental Disabilities Resource Center network to better analyze outcomes of the centers and impact on the overall SDS system. To further reduce dependence on grants and continue to strive toward regional statewide coverage, it is recommended that the department look at reinvesting savings the ADRCs create from right sizing service referrals through the person-centered intake process. It is also recommended that the department review opportunities to co-locate or consolidate information and referral, benefits counseling and system navigation funding to increase visibility and community access.

Trust staff recommend future funding and advocacy for GF/MH. Using Trust funds to leverage continued expansion is a positive step for access to HCBS services in rural Alaska. The transition of this project to a Department of Health fully funded project or GF/MH is not likely in the next 2-4 years. As long as this project demonstrates positive outcomes for beneficiaries it is recommended that Trust's funding partnership with SDS to support ADRCs continue until the state has sustainable funding for a statewide network of fully functioning ADRCs or the project fails to meet stated goals. This project aligns with Comp Plan Objective 7.2: Increase access to effective and flexible, person centered, long-term services and supports in urban and rural areas to avoid institutional placement.

			- · - ·
Project	Title: Develo	n largeted	Outcome Data
TOJECE	THE DEVELO	pruigeteu	Outcome Dutu

Grantee: DHSS, Division of Senior and Disabilities Services

Fund: MHTAAR

Years Funded: 15	Project Category: Data/Planning	
FY20: \$80,000	FY21: \$80,000	FY22: \$80,000

Project Description: The Trust, Division of Senior and Disabilities Services (SDS) and key partners have identified the need to better track outcomes measures for home and community-based services (HCBS), but more specifically, on the person centeredness of our system to achieve the desired impact of the unified vision for each individual receiving publicly funded services and supports. These funds will be used to advance the state's implementation and use of the National Core Indicators (NCI). NCI represents a major effort among states to standardize the collection of performance and outcome measures for home and community-based services on a system level. Standard data collection allows states to compare results with other states and provider data for the establishment of national benchmarks but also to report in a more meaningful way than just numbers served and dollars spent. These specific indicators may look at an individual's access to community, human security, relationships, choices and goals is critical as Alaska undergoes significant systems transformation or others as there has been an increasing effort by the federal partners to make advances in measuring outcomes for HCBS services.

Analysis: SDS has engaged with a community led evaluation and data group that is part of the developmental disabilities (DD) Vision movement to collaborate between state and community-based agencies on meaningful program evaluation tools. The NCI surveys take multiple years to implement. In FY21, the consumer survey was completed. The adult family, child family, and staffing stability surveys are currently open, with these being the second surveys issued of these types. One series was conducted pre-COVID and with these surveys being post-COVID, it will be interesting to compare them. This project has substantially met or exceeded Trust expectations against the performance measures outlined in the project grant agreement.

This is a core data collection and analysis project for the state that is expected to be incorporated into existing continuous quality improvement processes and measurements for IDD programs and the state as a whole. NCI has also introduced a suite of surveys for the aging and other disability populations. As long as this project demonstrates positive outcomes it is recommended that Trust's funding partnership with SDS to support implementation of NCI or a similar process continue until the state can operationalize this work or the project fails to meet stated goals. The project aligns with Comp Plan Objective 9.5: Encourage a culture of data-driven decision-making that includes data sharing, data analysis, and management to link support services across Alaska Department of Health and Social Services (DHSS) divisions and other departments.

Project Title: IT Application/Telehe	alth Service System Improvements	
Grantee: DHSS, Division of Senior an	d Disabilities Services	
Fund: MHTAAR		
Years Funded: 7	Project Category: Capacity Building	
FY20: \$38,100	FY21 : \$38,100	FY22: \$38,100

Project Description: Senior and Disabilities Services (SDS) will continue its efforts to increase the number of telehealth assessments throughout Alaska. SDS will look at how mobile technology or connections with technology in an applicant's home can be used to meet this goal. SDS will also develop an understanding of how other units within SDS can benefit from telehealth and distance delivered services. SDS will update a State of Alaska telehealth policies and procedures to outline stakeholder involvement in its telehealth process. SDS will explore assistive technology opportunities to improve service delivery and support recipients in their own homes.

Analysis:

This grant has met or exceeded its performance measures and shown a successful on time implementation of distance delivered services in SDS. The position funded by the project is critical for capacity building of the agency to implement the use of technology both internally and externally to positively impact beneficiaries. It is used to explore how SDS can provide additional services via distance, engage people needing to be assessed through a direct platform, and continue to maintain current contracts for telehealth to ensure individuals have options to obtain a distance assessment at their local clinic or provider's office. The transition of this project to Department of Health and Social Services operations and SOA GF/MH funding was successful. In FY23 Trust funding for the project will end and SDS will provide funding for the position. Advocacy for the continuation of GF/MH funding is necessary to ensure success of the project. This project aligns with the Comp Plan Objective 9.4: optimize information technology investments to improve process efficiency and enable innovation.

Project Title: Care Coordina	ation Support	
Grantee: DHSS, Division of Senior and Disabilities Services		
Fund: MHTAAR		
Years Funded: 1	Project Category: Capaci	ty Building
FY20: \$0	FY21 : \$0	FY22: \$55,300
• •	and Disabilities Services (SDS) need	ds a dedicated staff member to serve as a liaison

with care coordinators to address the following needs:

- The number of certified care coordinators has declined drastically in 2021, to the point where there are few if any with capacity to take new people onto their caseload. Recruitment of more care coordinators is a dire need for SDS; a dedicated position will develop a marketing plan and materials and target specific groups of people who meet the minimum qualifications to serve as a care coordinator.
- Rural areas traditionally have been and remain underserved, despite allowing most contacts to be done using distance delivery methods during COVID. A dedicated position will develop contacts in hub communities to use in recruitment efforts.
- Care coordinators are now required to use the Harmony database for all uploading content for support plans and amendments, but despite SDS providing months of robust outreach and training opportunities, there are still care coordinators who have not completed the necessary trainings to successfully navigate the Harmony system. A dedicated position will assist the SDS Training Unit to match identified training needs with resources, and work to alleviate fear of Harmony.
- The monthly payment rate for care coordination services has not increased in many years, despite additional duties being added to the list of responsibilities of care coordinators; these unfunded mandates mean care coordinators must work longer hours or cut short the time spent with each recipient, for the same rate of pay. A dedicated position will assist in evaluating the need for a rate increase, and work with the Office of Rate Review with explaining the data components that are used

to build a new rate.

- Care coordinators have long asked SDS to create a career path that starts with a care coordinator "trainee" and includes recognition of specialized training in areas of need (traumatic brain injury, dementia, complex behaviors, for example). A dedicated position can evaluate training possibilities and develop a career ladder and help put together a proposal for a rate increase that would reflect compensation for additional skill levels obtained.
- SDS' Quality Assurance Unit responds to recipient complaints and concerns related to care coordinators. A dedicated position will provide a consistent SDS "face" for these responses and provide ongoing monitoring and technical assistance should an improvement plan be warranted.
- In monitoring performance measures which are reported to CMS, SDS has struggled to improve the timeliness of applications and support plans, but these are ultimately the responsibility of care coordinators. When support plans are submitted late, it can lead to delayed services and/or program closures for recipients. A dedicated position will be able to focus on and assist care coordinators who are consistently not meeting upcoming deadlines.
- A significant and recent need for SDS is to increase understanding among care coordinators, other providers, and recipients into the service possibilities being created by the implementation of the Division of Behavioral Health's Section 1115 Behavioral Health waiver. Questions that care coordinators have raised include: Should care coordinators play a role in facilitating delivery of 1115 services to SDS clients? Do settings requirements for SDS services also apply to 1115 services? Can care coordinators who also are therapists or social workers provide 1115 services without conflict? The Division would use the care coordinator liaison position to provide education, training, and support to care coordinators in navigating these questions, enhancing the likelihood of the success of clients as well as the 1115 waiver program itself.

Analysis: This project's funding was approved in January 2022. SDS was able to hire a Care Coordination Liaison in the spring of 2022. The position started the onboarding and planning processes necessary to organize a new body of work for the position. Initial meetings with internal SDS staff and external stakeholders have occurred. Given the extended hiring time for Department of Health and Social Services positions, this grant has met or exceeded its performance measures and shown a successful on time implementation by hiring and onboarding the Care Coordination Liaison within this limited timeframe.

Trust staff recommend funding this project for a three-year period and reevaluate the project for continued need for FY26. If the project is able to find sustainable funding through the Department of Health or fails to meet stated goals, it will be adjusted accordingly or Trust funding may be discontinued. This project aligns with Comp Plan Objective 7.2: Increase access to effective and flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement.

Project Title: Anchorage Homeless	Solutions	
Grantee: Catholic Social Services		
Fund: Authority Grant		
Years Funded: 1	Project Category: Direct Service	
FY20: \$0	FY21 : \$0	FY22: \$500,000
Project Description: The Anchorage	Homeless Solutions budget line item funded o	ne large project. Catholic
Social Services will operate a Comple	ex Care Shelter in the former Sockeye Inn in Ar	ichorage to provide long
term shelter for Trust beneficiaries and other individuals experiencing homelessness who have complex care		
needs including the medically fragile	, and individuals experiencing substance abuse	e and mental illness. This

project is a result of the facilitated Anchorage Mass Care Transition Plan, jointly created by the Mayor and Assembly, and community partners to transition individuals experiencing homelessness from Anchorage's current mass shelter. As a part of the transition plan, shelter services for people with complex care needs were identified as an unmet need in Anchorage and this project will fill that gap. Mass congregate shelters are not equipped to adequately address the needs of persons with complex care issues; the Complex Care Shelter will provide shelter to up to 83 Trust beneficiaries and other guests experiencing functional impairments, physical disabilities, or behavioral health needs. In addition to providing emergency shelter, this facility will provide individualized case management services designed to assess the unique needs of each guest, as well as offer person-centered plans to address housing, medical, behavioral health, and additional service needs.

Analysis: The Complex Care Shelter project funds startup costs to better serve homeless Trust beneficiaries in Anchorage. Overnight shelter, especially one that specializes in beneficiary needs, fills a component of the continuum of care for homeless services giving people a safe, warm place to stay. This shelter will allow for longer stays and connect beneficiaries to needed medical and behavioral health care to resolve additional needs a person may have prior to transitioning to housing.

The Trust provided partner funding alongside other investors, with the primary source of operating funding coming from the Municipality of Anchorage. The project has identified operating funding for the next three years and Catholic Social Services has started the analysis of evaluating if Medicaid funding can be a sustainable resource for this project. This is an example of a project that would benefit from ongoing funding from the Homeless Assistance Program if additional funds were approved to be able to expand the number of grantees served. The Complex Care Shelter supports Goal 3, Objective 3.4 of Strengthening the System: Alaska's Comprehensive Integrated Mental Health Program Plan.

Project Title: Supportive Housing Projects

Grantee: Providence Health & Services

Fund: Authority Grant		
Years Funded: 1	Project Category: Direct Service	
FY20: \$0	FY21: \$0	FY22: \$750,000

Project Description: The Supportive Housing Projects line item supported one project in FY22. Providence Alaska House will develop 51 units of permanent supportive housing for chronically homeless adults who suffer from alcoholism, co-occurring disorders, and have a history of high emergency service utilization. The building will be located at the old Providence Extended Care site in Anchorage and designed so that future expansion is possible. This project will focus on a sub-population of seniors who are homeless and access to supportive services will include the behavioral health services that are typical for permanent supportive housing projects and also chronic medical condition support and functional supports that are commonly needed for seniors. 100% of the residents are Alaska Mental Health Trust Authority beneficiaries. This project is a collaboration between many community partners and is a priority for the Anchorage Anchored Home Community Plan.

Homeless beneficiaries are at great risk of institutionalization. Permanent supportive housing is an evidencebased intervention that disrupts the hospital, corrections, homelessness cycle to allow people to remain stably housed and have the opportunity to engage in supportive services to meet their goals. A similar project in Juneau showed that after 6 months of being housed resident's: emergency room visits decreased by 65%, sleep off center usage decreased by 99%, and police contact decreased by 72%. Two years later, 25% of residents reduced drinking from daily use to once a month or less. This is significant for any population and especially impactful considering the median number of months of homeless for this group was 180 months - approximately 15 years. Providence Health & Services Washington has a proven track record of successful permanent supportive housing project implementation in multiple states. It is an incredible benefit to the state to bring in this additional expertise and capacity.

Analysis: This project provides the opportunity to end homelessness for our senior beneficiaries living in shelters and on the streets of Anchorage. Our senior beneficiaries deserve the dignity of permanent housing and access to the medical care and support services needed to remain as independent as possible and age well. This project provides one time funding for construction of 51 units of permanent supportive housing. A groundbreaking ceremony was held this fiscal year to commemorate the start of construction.

The Trust provided partner funding alongside other investors, with the operating entity being Providence. The project is partially funded through Alaska Housing Finance Corporation's GOAL program which includes funding from the Special Needs Housing Grant, established to increase the availability of permanent supportive housing in Alaska. Providence Alaska House supports Goal 3, Objective 3.1 of Strengthening the System: Alaska's Comprehensive Integrated Mental Health Program Plan.

Grantee: Contract with HCBS Strate	egies	
Fund: Authority Grant		
Years Funded: 3	Project Category: Direct S	ervice
FY20: \$150,000	FY21: \$150,000	FY22: \$150,000
Project Description: This contrac	t is specifically intended to ass	ist Department of Health and Social Services,
Senior and Disabilities Services (D	HSS/SDS), the Trust, and the c	ther stakeholders identified by the Trust or
SDS by providing the following as	sistance in two key areas: proj	ect management support and program
operations and policy developme	nt support. The contract inclue	des funding for consulting and site visits to
assist with the development of op	perations and policies to inclue	le but not limited to:
o Development of regulations o Development of protocols, tools, and changes to existing operations		
necessary to change progra	ams	
o Researching national best	practices and CMS regulations	and guidance
o Identifying, reviewing, and	developing alternative plans t	hat reflect requirements and/or opportunities
created by changes at the	federal level o Facilitating mee	tings to achieve agreement on policies and
operations		
o Stakeholder engagement		
Analysis: The HCBS Reform Contra	act continues a long history of	partnership between SDS and the Trust to
improve home and community-ba	ased services (HCBS) in Alaska.	In FY22, examples of projects include
strategizing projects to support co	omplex care, standardizing inta	ake and referral processes of the HCBS
system, and reviewing the home i	modification programs in Alas	ka for sustainability. A consultant who has
worked with other states to imple	ement these programs provide	s the history and perspective necessary to
promote efficient implementatior	n. HCBS Strategies was awarde	ed this contract through a competitive request
for proposal process. As long as the	nis project demonstrates posit	ive outcomes it is recommended that Trust's
funding partnership with SDS and	a contractor specializing in H0	CBS and Medicaid program implementation

continue unless the project fails to meet stated goals. This project aligns with Comp Plan Objective 7.2: Increase access to effective and flexible, person-centered, long term services and supports in urban and rural areas to avoid institutional placement.

Project Title: Services and Supports Identified as Priorities in TABI and ADRD State Plans

Grantee: Various

Fund: Authority Grant

Years Funded: 1	Project Category: Direct Service	
FY20: \$0	FY21: \$0	FY22: \$420,000

Project Description: The Services and Supports Identified as Priorities in TABI and ADRD State Plans project provides funding to implement services and supports identified as priorities for the Traumatic and Acquired Brain Injury (TABI) and Alzheimer's Disease and Related Dementia (ADRD) service systems. TABI and ADRD both have statewide plans developed through broad community partnerships and stakeholder engagement. Projects selected for funding must further the priorities identified in these plans. The ADRD and TBI beneficiary categories do not have support through Medicaid home and community-based services unless they have an eligible co-occurring condition or a brain injury that would qualify them for IDD services occurs and is documented in youth or childhood. This funding aims to pilot or expand services and supports for people with ADRD or a TABI with a long-term goal of implementing a robust continuum of care. These service systems have both the State of Alaska and home and community-based services grappling with how to expand services to meet the increasing demand for ADRD and TABI services.

Analysis: This funding supports services and supports to strengthen the existing service systems for beneficiaries with a traumatic or acquired brain injury (TABI) or Alzheimer's disease or related dementia (ADRD). This line item does not have a specified grantee during the initial budget creation. Rather, projects identified are intended to meet a need that arises during the fiscal year. This flexibility allows for responsive funding as the TABI and ADRD committees meet throughout the year to develop or identify projects and initiatives that could be implemented or expanded in Alaska. Five projects were funded in FY22: Brain Bus (TABI), Soldotna Area Seniors Caregiver Support project (ADRD), Concussion Legacy Foundation (TABI), Independent Living Center TABI Program, and the Southeast Educational Regional Resource Center Youth TABI Coordinator (serves statewide). All the projects are in process and not yet ready to review progress.

It is recommended that Trust's funding to support ADRD and TABI services and supports increase and continue over the next 3 years with a reevaluation for continued need for FY26. Representatives from the Department of Health and Social Services participate in both stakeholder groups and have been instrumental in identifying ways the current system supports beneficiaries and exploring options for the future. This project aligns with Comp Plan Objective 7.2: Increase access to effective and flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement.

Other Priority Areas

Project Title: The Alaska Training Cooperative

Grantee: UAA-Center for Human Development

Fund: MHTAAR	•	
Years Funded: 15	Project Category: Capacity Building	
FY20: \$984,000	FY21 : \$984,000	FY22: \$885,600

Project Description: The Alaska Training Cooperative (AKTC) is responsible for providing non-academic trainings, professional development, technical assistance and continuing education to direct service providers who serve Trust beneficiary populations, and to identify and meet additional training needs identified through Medicaid expansion, redesign and reform and criminal justice reinvestment. Program services include statewide training coordination, marketing available training opportunities, technical assistance to address identified training gaps and need, understanding rural perspectives and cultural attunement, as well as training delivery and accessibility. The AKTC provides evidenced-based, culturally attuned training through state of the art delivery models to remote, rural, and urban areas of Alaska.

The AKTC works to:

- 1. Facilitate and maintain coordination and collaboration of training entities.
- 2. Provide technical assistance support to address training opportunities, training needs and gaps identified by providers serving Trust beneficiaries.
- 3. Document and report training data.
- 4. Increase evidenced-based training delivery.
- 5. Increase availability of training that equips the home and community-based and behavioral health workforce to provide culturally attuned services throughout Alaska and for our unique Alaska Native populations.

Analysis: The direct care professional (DSP) workforce is the primary staffing support for Trust beneficiaries to receive care and support. The AKTC is the primary entity for providing the DSP workforce with training and technical support across the state. Alaska is a geographically and culturally diverse state, which means you need a nimble and responsive training entity like the AKTC to support the DSP staff from Ketchikan to Kotzebue. This is not an easy task, and one that the AKTC has continued to improve over the years with experienced staff and a systematic, evaluative process for providing what is needed at the agency level. This iterative process has involved meeting the changing needs of evidenced-based practices and moving the industry to certification of direct care staff at all levels, but primarily the DSP position. It is critical to have a responsive organization like the AKTC that can meet the changing needs of the industry, which ultimately helps provide quality services to Trust beneficiaries.

The AKTC met their performance measures by providing 135 trainings in 171 communities to 5,648 individuals during FY21. These trainings occurred among 568 provider agencies, which provide services to Trust beneficiaries across Alaska. The AKTC team includes a skilled group of trainers, who provide technical assistance and training on multiple best practice models. The staff team consists of behavioral health practitioners who have worked in law enforcement, hospital psychiatric emergency rooms, in-patient residential, and long-term care facilities.

Goal 9 of the Alaska Comprehensive Integrated Mental Health Program outlines two objectives with 13 strategies that support the capabilities and competence of the healthcare workforce. The AKTC has developed trainings and workshops that prepare direct support staff and their supervisors to be more competent in delivering quality care to Alaska Trust beneficiaries. The AKTC works in a collaborative manner with Trust partners to advance recruitment and retention of healthcare staff. It is recommended by Trust staff that this project continue to be funded.

Project Title: Providing Support for Service to Health Care Practitioners (SI	HARD)
Toject Title. Providing support for service to nearth care Practitioners (sr	HARF/

Grantee: DHSS, Division of Public Health

Fund: MHTAAR

Years Funded: 15	Project Category: Direct Service	e
FY20: \$200,000	FY21: \$200,000	FY22: \$200,000

Project Description: The Department of Health and Social Services has partnered with the Trust to apply for a National Health Services Corps State Loan Repayment grant that requires matching funds from the state. This loan repayment and incentives program allows DHSS to bring in additional funds for loan repayment and incentives for health professionals who work with Trust beneficiaries which will also impact Alaska's Medicaid Expansion, Reform and Redesign and with reentry and recidivism reduction efforts for justice involved beneficiaries.

SHARP-1 is derived from a federal HRSA partnership grant entitled "State Loan Repayment Program," which Alaska has now competitively received five times. This program provides two-year support-for- service awards in the form of loan repayment for selected clinicians. These practitioners are found in a broad range of medical, dental and behavioral health occupations. Participating clinicians receive education loan repayment in partial exchange for the provision of outpatient clinical care within federal professional shortage areas.

Analysis: The Trust funded SHARP programs have supported the healthcare workforce. In FY21, SHARP helped secure 168 clinicians across the state, who provided 151,159 patient visits to a local healthcare provider. So far in FY22, 123 contracts have been added to the SHARP 1 and 3 totals, which bring the total number of contracts over the last 15 years to 515. The term clinician is a generic term that refers to medical doctors, nurses, dentists, pharmacists, case managers, etc. Over half of these appointments were for our Trust underserved beneficiaries, either through Medicaid, Medicare, or no insurance. SHARP is paving the way for Trust beneficiaries to get care and ongoing treatment.

The SHARP program also supports retention of the healthcare workforce. The SHARP contracts are for 2- or 3year periods of time and are renewable two additional times. This helps stabilize the workforce and lends itself to providing more consistent care to Trust beneficiaries. Aside from the fact that the SHARP program supports the 9.1 workforce goal of the Comprehensive Mental Health Integrated Plan, it also allows the healthcare workforce to be more responsive in getting critical lifesaving care to at-risk people in the community. Goal 2.1 of the Comprehensive plan relates to access and quality of care, which is improved through the contracting and retention of more healthcare clinicians. The SHARP program is working as demonstrated by the 60 agencies who are utilizing the contracted clinicians, and it helping to support Trust beneficiaries live a better life. It is recommended to continue funding the SHARP program in FY24 and 25 and that the Trust transition some financial support to the public/private partnership that is advancing the SHARP 3 initiative.

Project Title: Alaska Area Health Education Centers

Grantee: University of Alaska Anchorage

Fund: MHTAAR

Years Funded: 6	Project Category: Workforce Development/Training	
FY20: \$55,000	FY21: \$55,000	FY22: \$55,000

Project Description: The Alaska Health Education Centers (AHEC) program will implement summer career pathways programming to expose and engage youth into behavioral health careers. Students will explore careers including social workers, counselors, behavioral health aides, psychologists, psychiatrists, and other positions within the field of behavioral health and social services. The program will also include Mental Health First Aid training for students; opportunities to earn dual credit; presentations from local Elders, clinicians, substance abuse counselors, and behavioral health aides; tours of the Behavioral Health facilities; and regional sessions specific to the community of implementation.

Analysis: The UAA AHEC program provides one of the only "Grow Your Own" opportunities in rural Alaska for school aged students to learn about careers in the healthcare industry. The program is called Health Career Pathways and, through weeklong intensive healthcare camps, exposed youth to careers in the field. The AHEC program is built around connecting these students to potential healthcare jobs through the teaching of mentors and Alaska Native Elders. Alaska has had a lack of staff across the state in healthcare related fields, and "Grow Your Own" is one pathway for bringing more people into the field.

There were 13 camps provided in this fiscal year, with over 110 students participating. The students learned about careers in nursing, behavioral health, and Tribal health. The need for staff in these fields is growing. The current pandemic has caused even greater pressure on the healthcare industry, hence the need to grow this workforce. Tribal health has struggled over the years to recruit and retain healthcare workers in rural Alaska, and the AHEC program is one that has successfully introduced young people to careers in this field and retain them. This program directly supports the Comp Plan Goal 9 in recruiting and retaining people for the healthcare workforce.

The AHEC program has successfully utilized virtual learning in making accommodations for the COVID pandemic. The program is also working with the State of Alaska Department of Education and Early Development to ensure Pathway Camp education programs provide credit that aligns with local school districts. The AHEC program is also working with the University of Alaska School of Social Work in providing the opportunity for faculty support in the classes. This program is connecting young Alaskans to healthcare related jobs and the potential for supporting this workforce long-term across rural Alaska. It is recommended to continue funding this program in FY24-25.

Grantee: University of Ala	ska Anchorage, Center for Human Develop	oment	
Fund: MHTAAR			
Years Funded: 5 Project Category: Workforce Development/Training			
FY20: \$65,000 FY21: \$100,000 FY22: \$100,000			
Project Description: The Center for Human Development (CHD) at the University of Alaska Anchorage will			
continue to expand workforce development and educational opportunities related to Trust Beneficiary			
	nent strategies. A highly trained workforce services as beneficiaries seek competitive	e is critical to ensure access to supported integrated employment. CHD will respond	

to supported employment workforce needs identified in an FY20 needs assessment. CHD will also continue to implement a multi-level approach to benefits counseling to ensure service providers have the capacity and skills to assist Trust beneficiaries and their families to fully understand how earned income will affect their benefits as they work towards self-sufficiency. In addition, CHD collaborates and supports a statewide infrastructure that includes training, credentials and certification for Community Rehabilitation Providers (CRP's) to provide quality employment placement and retention services.

Analysis: Supported employment is a critical component for many Trust beneficiaries quality of life. Employment can be central to a person's quality of life and purpose. This supported employment project overseen by the University of Alaska Anchorage Center for Human Development provides the mechanism for Trust beneficiary providing organizations to get their staff trained in how to administer and coach within a supported employment program. 152 participants took the certification classes, with 113 finishing and getting certified. Participants who took the customized employment classes and were certified were satisfied with the class, with some noting that their job analysis went very well, and the insights learned were valuable for how to setup a program within their agency. The positive behavioral supports section of the class was highlighted several times as challenging but rewarding. It does meet the Comp Plan need for equipping agency staff to provide customized employment programming. This project is recommended for continued funding in FY24-25.

Project Title: Keep the Kids Home: Pediatric Behavioral Health Treatment Coordination

Grantee: TBD	
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Fund: Authority Grant

Years Funded: 1	Project Category: Capacity Building	
FY20: \$0	FY21: \$0	FY22: \$50,000

Project Description: This funding allocation is intended to be responsive to state and community partners in support of work related to ongoing recommendations from the former "Bring the Kids Home" focus area. Projects related to children's mental health promotion, prevention and early intervention are prioritized for this funding.

Analysis: This funding line was designed to support continuity of efforts related to the previous "Bring the Kids Home" Trust focus area. The shift to "Keep the Kids Home" language acknowledges the ongoing need to ensure young Trust beneficiary needs are met in their home communities whenever possible and at the lowest level of care reasonable.

State and community partnerships organized during the FY22 project period which included analysis of statewide data and existing programs. The Alaska Impact Alliance formed to support early intervention and prevention efforts on behalf of children and families involved in the child welfare system, including children in foster care. FY22 funds in this budget line were used to support work of the Alaska Impact Alliance (AIA), including a grant to the National Family Support Network for training of community partners statewide working to establish or enhance family resource centers to support families seeking support with their children's behavioral health and related needs.

Trust staff recommends this project for continued funding in the FY24-25 Trust budget, and the creation of a new funding line specifically designated for work of the AIA. Dedicated funding for the AIA will allow greater Trust programmatic response to the needs of children in foster care and families involved in the child welfare

system.

This funding category is consistent with Comprehensive Integrated Mental Health Plan Objectives 1.2 and 1.3 related to trauma informed services and reducing the instances and impact of Adverse Childhood Experiences. Funds will also support Objectives 6.1 and 6.2 through strategies related to prevention of child maltreatment and neglect.

Project Title: Children's Mental Health Conferences (CAFBH & IECMH)

Grantee: Child Welfare Academy – University of Alaska Anchorage

Fund: Aut	hority Grant

Years Funded: 1	Project Category: Conference	
FY20: \$0	FY21 : \$0	FY22: \$50,000

Project Description: Funding supports two annual key children's mental health related conferences held consecutively each spring. The Infant & Early Childhood Mental Health Institute (IECMH-I) and the Child Adolescent & Family Behavioral Health (CAFBH) conference offer professional development and continuing education for the public and private workforce supporting beneficiary families and children.

Analysis: The IECMH-I and CAFBH conference help to maintain and strengthen in-state workforce capacity for supporting beneficiaries with mental health conditions and their families. Building up and maintaining this instate capacity was a core element of the former Bring the Kids Home focus area and is critical to keeping beneficiary youth from being sent out of state, in addition to effectively supporting those youth returning from out of state or other residential treatment. Conference attendance remains high regardless of virtual or in person formatting, and continues to receive high ratings on participant evaluations for content and delivery of IECMH and children's mental health topics and strategies for engagement.

Trust staff recommends this project for continued funding in FY24-25 Trust. This funding category is consistent with Comprehensive Integrated Mental Health Plan Objectives 1.2 and 1.3 related to trauma informed services and reducing the instances and impact of Adverse Childhood Experiences. Funds will also support Objectives 6.1 and 6.2 through strategies related to prevention of child maltreatment and neglect.

Fund: Authority Grant		
Years Funded: 2	Project Category: Capacity Build	ding
FY20: \$0	FY21 : \$100,000	FY22: \$100,000
through increased early det Beneficiaries experiencing of by this project through incre coordination and access to be provided support, tools a monitoring and screening re	roject will benefit beneficiaries experien rection and intervention of development developmental disabilities and those exp eased awareness and access to Help Me developmental and social emotional scr and education on the understanding of o esources as well as support navigating th eneficiaries will receive high quality train lations and their families.	tal delays and disabilities in children. beriencing mental illness will be served e Grow Alaska services, including care eening. Secondary beneficiaries will child development and access to he system of care for their family.

Analysis: Help Me Grow Alaska (HMG-AK) continues to experience significant growth with a sharp increase in

families utilizing services, specifically for connection to mental health services. This project aims to serve families statewide by ensuring the capacity of the HMG-AK Centralized Access Point (call center) is sufficient to meet the increasing demand and to continue availability and access to developmental screening. Increased outreach done in local communities to engage families and children not being reached by other systems and assist with identifying both developmental needs and assess social determinants of health that may be supported through resource referral and coordination.

Trust staff recommends this project for continued funding in FY24-25 to support continued growth and expansion of statewide services that both identify and provide coordination for families in need of developmental and behavioral health supports. Increased funding will help respond to stakeholder requests to increase access to care coordination and resource and referral for families and children with mental health needs which have been exacerbated by the COVID-19 pandemic.

This project aligns with Objectives 1.1, 1.2 and 1.3 of the Comprehensive Integrated Mental Health Plan related to early childhood intervention, screening and early identification of developmental and social emotional needs of young children, and family supports.

Grantee: DHSS, Division of Be	ehavioral Health	
Fund: MHTAAR		
Years Funded: 1 Project Category: Capacity Building		
FY20: \$0	FY21: \$0	FY22: \$50,000
Project Description: The DH	ISS Division of Behavioral health ha	as requested funding to support a system
for Behavioral Health Screen	ning in Primary Care for children an	nd youth and referral to care coordination
and/or behavioral health ser	rvices. This effort will build on iden	tified priorities consistent with the Trust
funded Bring the Kids Home	efforts as well as national best pra	actice related to integrated care and early
identification and intervention	on of behavioral health needs for o	children and youth.
DBH staff will work collabora	ativaly with the Truct advicory has	under einen une werten einen der Seleinen steht einen eine
		ards, and partners to identify and
implement validated behavior	oral health screening systems to be	e used in primary care practice. Protocol
implement validated behavior related to screening, referra	oral health screening systems to be I and treatment will be collaboration	e used in primary care practice. Protocol vely established with primary care and
implement validated behavior related to screening, referra behavioral health providers	oral health screening systems to be I and treatment will be collaboration to ensure effective integration of s	e used in primary care practice. Protocol vely established with primary care and services consistent with goals of the 1115
implement validated behavior related to screening, referra behavioral health providers waiver as well as public heal	oral health screening systems to be I and treatment will be collaboration to ensure effective integration of s th and Trust priorities. The creation	e used in primary care practice. Protocol vely established with primary care and services consistent with goals of the 1115 on of a behavioral health screening system
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implement validated behavior related to screening, referra- behavioral health providers waiver as well as public heal for primary care providers is	oral health screening systems to be I and treatment will be collaboration to ensure effective integration of s th and Trust priorities. The creation	e used in primary care practice. Protocol vely established with primary care and services consistent with goals of the 1115 on of a behavioral health screening system nealth and reduce cost outcomes of the
implement validated behavior related to screening, referra behavioral health providers waiver as well as public heal for primary care providers is 1115 waiver through early ic	oral health screening systems to be I and treatment will be collaboration to ensure effective integration of s I h and Trust priorities. The creation expected to improve population h dentification and treatment of beh	e used in primary care practice. Protocol vely established with primary care and services consistent with goals of the 1115 on of a behavioral health screening system health and reduce cost outcomes of the avioral health issues in children.
implement validated behavior related to screening, referra- behavioral health providers waiver as well as public heal for primary care providers is 1115 waiver through early ic Analysis: This project was in	oral health screening systems to be I and treatment will be collaboration to ensure effective integration of s th and Trust priorities. The creation expected to improve population h dentification and treatment of behavior ntended to identify tools and proce	e used in primary care practice. Protocol vely established with primary care and services consistent with goals of the 1115 on of a behavioral health screening system health and reduce cost outcomes of the avioral health issues in children.
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implement validated behavior related to screening, referra- behavioral health providers waiver as well as public heal for primary care providers is 1115 waiver through early ic Analysis: This project was in in primary care. Increased ac considered a best practice n and youth with special healt FY22 project funds were not capacity and reorganization	oral health screening systems to be I and treatment will be collaboration to ensure effective integration of so thand Trust priorities. The creation expected to improve population health dentification and treatment of behavioral needed to identify tools and proce- ccess to behavioral health screening ationally as a prevention and early th care needs, including Trust benear expended by the Division of Behavioral	e used in primary care practice. Protocol vely established with primary care and services consistent with goals of the 1115 on of a behavioral health screening system health and reduce cost outcomes of the avioral health issues in children. esses for integrated behavioral health screening and supports in primary care settings is intervention strategy, particularly for children ficiaries. vioral Health as planned due to limited staff funds will lapse back to the Trust. Trust staff

with some modifications.

Trust staff recommends this project for continued funding at the current level in FY23 for the final year of DBH funding for this project.

This project supports Comprehensive Integrated Mental Health Plan Objectives 1.1, 1.2 and 1.3 related to screening and early intervention services, trauma informed services, and reducing the instances and impact of Adverse Childhood Experiences. This best practice of integrated care is identified under Objective 4.4 in the context of recovery support services to end the cycle of substance misuse for both children and adults.

Project Title: Partnership Access Line – Pediatric Alaska (PAL-PAK)

Grantee: DHSS, Division of Behavioral Health

Fund: MHTAAR

Years Funded: 3	Project Category: Capacity Building	
FY20: \$89,000	FY21: \$89,000	FY22: \$89,000

Project Description: Seattle Children's Hospital's (SCH) Partnership Access Line team will continue to implement and expand the Alaskan pediatric psychiatric program, Partnership Access Line – Psychiatry AK (PAL-PAK). SCH contracts with the All Alaska Pediatric Partnership who oversees the Help Me Grow – AK (HMG-AK) programs. SCH and HMG will be the contractors that manage the PAL- PAK program. The PAL-PAK program will be comprised of the University of Washington (UW) psychiatrists, and HMG-AK outreach and care coordination services.

SCH will promote statewide behavioral health integration in pediatric primary care settings through distance delivered consultations, training and technical assistance to primary care medication prescribers. SCH will ensure that the HMG contract will include telehealth health options for behavioral health in their on-line data referral system, plus, primary care outreach and engagement to promote PAL-PAK. To promote the PAL-PAK program, while educating primary care providers, SCH will collaborate with HMG to provide in-state trainings, present at in-state conferences, and host webinars. The program will continue to promote the Alaska based treatment care guide and ensure that HMG-AK referral database is enriched by the PAL-PAK program.

The PAL-PAK team is comprised of ten licensed pediatric psychiatrists based in the state of Washington, plus, Alaska based HMG care coordinators to facilitate referrals and coordinate ongoing supports as needed. SCH provides a staffed toll-free call line for Alaska medication prescribers, from 7am to 4pm Alaska Standard Time, Monday through Friday. The provider hotline is answered by an administrative team member, who records basic caller and case information before transferring the primary care provider to a consulting child psychiatrist. If a child psychiatrist is not immediately available, call-backs occur as quickly as possible, preferably on the same day. The child psychiatrist works with Help Me Grow to ensure that the primary care provider or family receives care coordination and referrals to recommended local services.

Analysis: Partnership Access Line – Pediatric AK (PAL-PAK) is a 5-year federally funded HRSA Pediatric Mental Health Care Access grant. FY22 is in the 4th year with an award amount of \$407,116.00, plus, the AMHTA yearly match of \$89,000. PAL-PAK uses two evidenced based practices: 1) Seattle Children's Hospital (SCH) Partnership Access Line (PAL) for pediatric psychiatric telehealth consultation, and 2) Help me Grow – AK for care coordination and referral services. PAL-PAK addresses access to care issues and workforce shortages, and builds provider capacity, integrates behavioral health with primary care and

intervenes earlier in children's lives. PAL-PAK provided 67 consults on 59 unique patients from July 1, 2021 to present. HMG-AK's statewide referral data base has grown to 2,100+ resources (from inception) for all kinds of support, including mental health, for children and families. Additionally, HMG-AK is engaged in the following outreach activities:

- The monthly HMG-AK newsletter features a section on PAL-PAK, including information on how to reach Seattle Children's Hospital and an Informational Zoom Webinar for providers.
- A concentrated effort to review the usage reports from Seattle Children's and to do targeted outreach, by phone and email, to communities not using the consultation call line.
- PAL PAK specific outreach has been shared with statewide Early Childhood Coalition leaders and community champions through the Alaska Early Childhood Network (ECN) and peer-to-peer network co-hosted by Help Me Grow Alaska and the Early Child Systems Specialist within the section of WCFH through DPH, DHSS, SOA.

A highlight FY22 was completion of the PAL-PAK 4 minute promotional video. Filming was conducted in a rural setting as well as in Anchorage with prominent Alaskan pediatricians discussing the consultation resource. The video overviews the consultation line and resource referrals available through HMG-AK.

The primary challenge for FY22 was expanding the use of the PAL-PAK call-line during the continuation of the COVID-19 pandemic.

Trust match funding for this federally funded project will end in FY23 as the final year of the federal current grant award. Staff will continue to work with DBH and partners to identify opportunities for program sustainability and quality improvement during that time including exploring potential to reapply for federal funding with a non-required match.

This project supports Comprehensive Integrated Mental Health Plan Objectives 1.1, 1.2 and 1.3 related to screening and early intervention services, trauma informed services, and reducing the instances and impact of Adverse Childhood Experiences. This best practice of integrated care is identified under Objective 4.4 in the context of recovery support services to end the cycle of substance misuse for both children and adults.

Grantee: TBD		
Fund: Authority Grant		
Years Funded: 2	Project Category: Capacity Bu	lilding
FY20: \$0	FY21: \$100,000	FY22: \$175,000
informed services and reduct these funds are built on prio that promote a culture of sat could include expansion of t settings), school district staff should focus on culturally se	r investment related to trauma- inform fety, empowerment, and healing). Prin rauma-informed training for early care , as well as clinical and other behavior nsitive approaches to trauma-informe	se Childhood Experiences. The goals of ned care (the adoption of practices mary strategies related to this category e and education teachers (i.e. childcare ral health support staff. Strategies d practice.
childhood mental health trai		vith the funding intent including an early OCS) providers called "Facilitating Attuned

facilitation project to promote mental health policy integration into schools in response to locally controlled district inquiries (awarded to the Association of Alaska School Boards), and an early childhood systems analysis to examine the workforce and infrastructure needs to increase access to infant & early childhood mental health supports for beneficiary children and families (awarded to the All Alaska Pediatric Partnership). These projects collectively will help move Trust and partner priorities related to trauma informed/engaged practice promotion and support additional Trust and state funded efforts to improve infant and child mental health.

Trust staff recommends continued funding in FY24-25 to be responsive to community partner requests and systems/capacity building in process.

This project supports Comprehensive Integrated Mental Health Plan Objectives 1.2 and 1.3 related to trauma informed services and reducing the instances and impact of Adverse Childhood Experiences.

Project Title: Rural Student Behavioral Health Counseling				
Grantee: Department of Education and Early Development				
Fund: MHTAAR				
Years Funded: 1 Project Category: Capacity Building				
FY20: \$0 FY21: \$0 FY22: \$150,000				
Project Description: This proje	ct will leverage early success	from previously Trust funded partnership		

Project Description: This project will leverage early success from previously Trust funded partnership with the Department of Education and Early Development (DEED) to support increased capacity for Rural Student Behavioral Health Counseling.

This project will provide mental health support to students of all ages, prioritizing rural and remote school districts who do not otherwise have available mental health supports, through a new long term non- permanent position within the Department of Education and Early Development (DEED). Emerging data related to the COVID-19 pandemic indicates a significant need for student and family mental health supports and indicates schools as critical infrastructure for providing that support now and into the future. Teachers and faculty in all Alaska school districts, and particularly those smaller districts with fewer mental health resources, have expressed a need for increased mental health supports as schools anticipate reopening mid- pandemic.

DEED staff will work collaboratively with Trust, DHSS and other partners to promote expansion of behavioral health supports in schools through a long term non-permanent Mental health specialist position embedded within DEED. The position will continue to work closely with under resourced and rural districts who have identified the need and interest in enhancing access to student behavioral health supports. The counselor position will support students and staff in rural districts and will inform Trust and advisory board efforts to expand behavioral health student supports statewide. The position will provide outreach and on demand supports to students, and school districts, initially through telehealth and eventually through a blended model of telehealth and in-person supports as appropriate.

This project has been identified as a high priority by Trust advisory boards and multiple partners as a key COVID-19 response and recovery project. DEED and partners will continue to explore additional funding opportunities to enhance and sustain the work of this project.

Analysis: This project leverages early success from previously Trust funded partnership with the Department

of Education and Early Development (DEED) to support increased capacity for Rural Student Behavioral Health Counseling. The MHTAAR allocation allows DEED to continue and expand school-based access to mental health supports for beneficiary students.

The project continued to support rural students and schools in FY22, as well as engage and inform systems work led by the Trust and partners including the second phase of the "Mental Health in Alaska Schools Landscape Assessment" which investigates case studies and data to further analyze current school-based services systems and opportunities. FY23 project objectives are shifting slightly to focus more on teacher coaching/mentoring rather than direct student services. This shift will align with DEED's renewed commitment to the Positive Behavior Intervention and Supports (PBIS) model to improve school safety and promote a positive climate for improved student behavioral health and educational outcomes.

Staff recommends continued funding in FY24-25 and a renaming of the project to more accurately reflect the coaching/PBIS focus of the long term non-permanent position.

This project supports Comprehensive Integrated Mental Health Plan Objectives 1.2 and 1.3 related to trauma informed services and reducing the instances and impact of Adverse Childhood Experiences.

Project Title: Infant and Early Childl	hood Mental Health Capac	city Building
Grantee: TBD		
Fund: Authority Grant		
Years Funded: 2	Project Category: Capacity	Building
FY20: \$0	FY21: \$150,000	FY22: \$100,000
	•	mp Plan Objectives 1.2 and 1.3 related to
trauma informed services and reduc	ing the instances and impact	t of Adverse Childhood Experiences. Funds wi
		prevention of child maltreatment and negled
-	•	o infant and early childhood mental health
		al health," which relates to the developing
		and secure adult and peer relationships. This
		developmental disabilities, and effective
		hildren experiencing trauma from developing
chronic behavioral health issues suc	h as mental illness and subst	tance use disorders later in life.
Primary strategies related to this cat	egory could include statewig	de workforce related efforts consistent with
		y Childhood Mental Health (AK-AIMH) as well
	-	arning Program (Juneau-Southeast) and
others.		
others.		
Analysis: FY22 funding for this budge	et lined supported two proje	ects consistent with programmatic intent and
		rly childhood mental health (IECMH)
supports. Funded projects included a second (of three year) funding allocation for the "Project Compass"		
		ber of qualified IECMH practitioners in the
state (awarded to Alaska Association	n of Infant and Early Childhoo	od Mental Health), and an additional year of
funding for the Juneau based Infant	Learning Program provider a	agency to continue with IECMH expert
consultation to increase the quality	of services and improve outo	comes for the beneficiary families they serve
(awarded to REACH).		

Trust staff recommends this funding line continue through FY24-25 in order to respond to increased community need and provider interest in IECMH training and services for beneficiary families with young children.

This funding category is consistent with Comprehensive Integrated Mental Health Plan Objectives 1.2 and 1.3 related to trauma informed services and reducing the instances and impact of Adverse Childhood Experiences. Funds will also support Objectives 6.1 and 6.2 through strategies related to prevention of child maltreatment and neglect.

Project Title: Improve Social Determinants of Health for Families and Young Children; Peer Support/Parenting Policy, Data and Programs

Grantee: TBD

Fund: Authority Grant

Years Funded: 1	Project Category: Capacity Building	
FY20: \$0	FY21: \$203,700	FY22: \$70,000

Project Description: This funding category supports Comp Plan Objectives 1.2 and 1.3 related to trauma informed services and reducing the instances and impact of Adverse Childhood Experiences and specifically focused on improving social determinants of health for families and young children. Funds will also support Objectives 6.1 and 6.2 through strategies related to prevention of child maltreatment and neglect. This funding category allows the Trust to be flexible and responsive to stakeholder and community partner strategies to fill identified gaps in services and explore systems issues that perpetuate inequality in access to supports and services for young Trust beneficiaries and their families. Primary strategies related to this category could include family and peer support service development to improve family resilience, parenting skill development, and other systems related work to improve trauma-informed practice through policy development.

Analysis: FY22 funding for this budget line supported two projects consistent with programmatic intent to increase beneficiary access to supports that improve social determinants of health. Funded projects included a second (of two year) funding allocation for a pediatric subspecialty systems planning project intended to address the chronic shortage of specialized pediatric services in the state which disproportionately impacts Trust beneficiary families (awarded to the All Alaska Pediatric Partnership), and support for members of the statewide treatment foster care association to attend the annual conference for that highly specialized treatment modality supporting young Trust beneficiaries in foster care (awarded to Community Connections).

Trust staff recommends continued funding for FY24-25 to respond to increased community need and provider interest in supporting partnerships and programs that increase access to needed supports for families such as parenting classes and home visiting programs. These are programs that are highly sought by families and providers to help fill gaps in clinical mental health services, particularly in rural communities where behavioral health workforce issues have been exacerbated by impacts of the COVID-19 pandemic.

This funding category is consistent with Comprehensive Integrated Mental Health Plan Objectives 1.2 and 1.3 related to trauma informed services and reducing the instances and impact of Adverse Childhood Experiences and specifically focused on improving social determinants of health for families and young children. Funds will also support Objectives 6.1 and 6.2 through strategies related to prevention of child maltreatment and neglect.

Project Title: Early Childhood Governance: Public -Private Partnership

Grantee: All Alaska Pediatric Partnership

Fund: Authority Grant

Years Funded: 1	Project Category: Capacity Building	
FY20: \$0	FY21 : \$0	FY22: \$50,000
	•	

Project Description: This first year of funding for this project supports the next phase of outreach for a DHSS and DEED supported project to craft recommendations for a new early childhood governance structure for Alaska to better support young beneficiaries and their families. The need for a redesigned system of governance for improved equity in early childhood services for Trust beneficiaries and other early childhood populations experiencing disparities in service access has been documented in numerous assessments and program evaluations and was highlighted in the Early Childhood Alaska: A Strategic Direction 2020-2025 of which the Comp Plan was a source document. These funds were identified in the Trust budget for this purpose beginning in FY22 to support activities set in motion in previous fiscal years. The project has strong support among Trust early childhood stakeholders and partners and has recognized potential for broad systems transformation that will improve beneficiary outcomes.

A core group of dedicated early childhood representatives have made up a multidisciplinary task force that has developed a basic outline of recommended governance redesign components. The group is now preparing to present these draft recommendations to a broader audience for feedback to inform a finalized set of recommendations with policy and practice implementation for the state early childhood system. The task force requested Trust funding budgeted for this work be allocated to the All Alaska Pediatric Partnership (AAPP) to coordinate and organize the outreach phase. AAPP will continue to be closely connected with the Trust and all task force partners to ensure representation and a high level of collaboration.

Analysis: The AAPP and collective leadership of the governance task force implemented FY22 funds to contract with a local firm to plan and conduct outreach and public communications/roundtables to elicit and document feedback on the draft early childhood governance model proposal. Analysis of outreach findings is ongoing, and the leadership team has recognized the need for continued general public education on the needs of the system and the current state of early childhood authority/governance in order to more effectively engage stakeholders in the work. Next steps are in development with the goal of continued work in FY23 to continue outreach and revise the draft model to a set of final recommendations to redesign the early childhood governance structure for greater efficacy and coordination of early childhood programs across the state.

Trust staff recommends this project to continue funding for FY24-25 (with possible future increase recommended) to support implementation of finalized early childhood governance model if needed.

This funding category is consistent with Comprehensive Integrated Mental Health Plan Objectives 1.2 and 1.3 related to trauma informed services and reducing the instances and impact of Adverse Childhood Experiences and specifically focused on improving social determinants of health for families and young children. Funds will also support Objectives 6.1 and 6.2 through strategies related to prevention of child maltreatment and neglect.

Project Title: Kinship Caregiver Support
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Grantee: Volunteers of America - Alaska

Fund: Authority Grant

Years Funded: 1	Project Category: Capacity Building	
FY20: \$0	FY21: \$0	FY22: \$85,000

Project Description: The purpose of the Kinship Program is to offer services that promote the health and wellness of relatives raising children in Alaska, as well as the children in their care. There are many reasons parents may not be able to care for their children, including substance use, mental illness, incarceration, or death. In these cases, when children enter the care of a relative (such as a grandparent, aunt or adult sibling), the family is eligible for enrollment in the kinship program at Volunteers of America (VOA) Alaska. This project will support an array of services for the caregiver and children that include emotional support, information & assistance, case management, support groups, caregiver training, respite and other supplemental services.

These services will be delivered by a peer worker, who has lived experience as a child raised by a relative caregivers and experience as a relative caregiver. This position, called the Kinship Care Coordinator, will work to strengthen the community of relative caregivers around Alaska while addressing individual family needs. There are significant and unique challenges to raising relative children, including the stigma that is associated with substance use or mental illness of parents; confusing navigation of legal arrangements; caring for children with special needs; and the high level of family stress that accompanies the placement. The Kinship Care Coordinator will walk beside families and offer the support they need to navigate these many challenges, build meaningful connections with others who have shared experiences, and support the development of these vulnerable children.

Analysis: VOA continues to provide support and services specific to kinship care families while exploring expansion and sustainability through technical assistance and business planning for this important beneficiary service. The needs of kinship care families are unique and, if well met, supportive services have the potential to break the cycle of multigenerational trauma experienced by many beneficiary families who are child welfare and justice involved. As a newly funded Trust project, initial report data is limited as the first year of grant services conclude, though verbal reporting and interactions from VOA staff and leadership indicates the project has a positive impact on young beneficiary outcomes and continues to be in high demand. Kinship care supports are prioritized by the Alaska Impact Alliance and are broadly regarded as a key strategy in the service array on behalf of beneficiary children in care.

Trust staff recommends this project for continued funding in FY24-25 to support ongoing implementation of the kinship program support services on behalf of beneficiary families.

This project is aligned with Comprehensive Integrated Mental Health Plan Objectives 1.2 and 1.3 related to trauma informed services and reducing the instances and impact of Adverse Childhood Experiences and specifically focused on improving social determinants of health for families and young children. Funds will also support Objectives 6.1 and 6.2 through strategies related to prevention of child maltreatment and neglect.

Project Title: Evidence Based Practice – Family Treatment Model

Grantee: DHSS, Division of Behavioral Health

Fund: MHTAAR

Years Funded: 1	Project Category: Capacity Building	
FY20: \$0	FY21: \$0	FY22: \$100,000

Project Description: This project is the development of a Family Services Training Center in partnership with UAA under the Center for Human Development. The goal of the training center is to increase the accessibility of, and enhance competency in using evidence-based and promising family treatment models for Alaska State Behavioral Health Providers. In addition, the Family Services Training Center (FSTC) will provide foundational skills training to support and engage families. This project would leverage state and potential federal funding to support identification and implementation of family treatment and recovery evidence-based practices (FBPs) that allow for local

implementation of family treatment and recovery evidence-based practices (EBPs) that allow for local training and replication of services. Family intervention models with a curriculum to engage families in improving communication and reducing discord is pivotal to keeping youth from out-of-home placements. Workforce development is a critical issue in Alaska and is necessary for successful development of the 1115 waiver services.

The Division of Behavioral Health (DBH) has historically invested in a highly effective but expensive and proprietary model of family treatment (Parenting with Love and Limits, aka PLL) which does not allow for local capacity building through train the trainer or other local training opportunities. Expansion of evidence-based outpatient intervention models is critical for the success of 1115 waiver efforts to divert high-risk youth from intensive residential treatment which is costly and traumatic for children and their families. Additionally, residential treatment often separates the youth from the home/community and frequently the family dynamics are not adequately addressed to result in sustained positive change. Supporting family intervention models including training allows for DBH to encourage a service intervention that is frequently overlooked by agencies for many reasons. Frequently clinicians do not have specific family therapy training and it can be difficult to engage families in outpatient treatment with their youth. Special consideration for outlying rural communities by active outreach and developing specific interventions that are culturally sensitive. An EBP model offers tools for measuring success which demonstrates model effectiveness.

MHTAAR funds will be administered by DHSS-DBH to support implementation of findings from planning conducted in FY21. Options for family treatment and recovery EBPs will be identified for an in-state family therapy training, coaching, and fidelity monitoring process with a steering committee to provide oversight.

Analysis: The first year of funding for implementation of a Family Services Training Center in collaboration with the Division of Behavioral Health under the administration of the University of Alaska Center for Human Development has successfully created needed infrastructure to train and expand the behavioral health workforce that supports beneficiary families and children. As of March 15, 2022 (first three quarters of FY22) the center conducted a first year needs assessment and delivered 14 trainings to include training in evidenced based practice models and foundational training to support and engage families. During that timeframe, 515 unduplicated participants engaged in training, and of those 140 identified as rural providers. Over 95% of respondents to training surveys strongly agreed or agreed that they were satisfied with the training they received. This project continues to build and expand resources and services through guidance of a multidisciplinary team including Trust staff, state agency and community partners. FY23 and beyond will focus on inclusion of more evidence-based practices that support the implementation of 1115 Waiver

services for children and youth, with a special focus on integrating/enhancing existing and hopeful infant & early childhood mental health workforce specific trainings to support upstream prevention and early intervention work prioritized by the 1115 Waiver concept.

Trust staff recommends this project for funding in FY24-25 to continue implementation and planning of the training center, particularly related to infant & early childhood mental health workforce training, and to implement the recommendations related to enhancement of infant & early childhood services training and supports.

This project supports Comprehensive Integrated Mental Health Plan Objectives 1.2 and 1.3 related to trauma informed services and reducing the instances and impact of Adverse Childhood Experiences and specifically focused on improving social determinants of health for families and young children. Funds will also support Objectives 6.1 and 6.2 through strategies related to prevention of child maltreatment and neglect as well as Objectives 9.1 and 9.2 related to workforce capacity and advancing competencies of the beneficiary serving workforce.

Grantee: DHSS, Division of P	ublic Health			
Fund: MHTAAR				
Years Funded: 1	Project Category: Data/Planni	ng		
FY20: \$0	FY21: \$0	FY22: \$100,000		
Project Description: This p	roject builds on the work of the Trust a	nd advisory boards, specifically related		
to AMHB/ABADA, in the on	going data linkage and analysis of Adve	rse Childhood Experiences (ACEs) and		
the impact on lifelong heal	th and Trust beneficiary outcomes. Fund	ds will support staff and/or contractual		
work guided by the DHSS D	ivision of Public Health's Section of Wo	men's Children's Family Health		
Epidemiology Unit. The pro	ject will plan, organize and implement o	data analyses to guide development of		
data-driven strategies and	policies related to early intervention an	d prevention and enhance statewide		
capacity to comprehensive	ly evaluate childhood trauma-related da	ata. The project will work closely with		
Trust staff, advisory board	staff and the various Departments in de	veloping short-term and long-term		
plans for ongoing initiatives	s that support the Trust and board missi	ion, vision, and priority areas related to		
early intervention and prev	ention of behavioral health disorders.			
This FY22 project transfers	responsibility and funding to the Divisio	on of Public Health (DPH), Maternal		
Child Health Epidemiology	Unit, to continue work initiated and sup	ported by the Alaska Mental Health		
Board and the Advisory Boa	ard on Alcoholism and Drug Abuse. The	Boards and DPH are requesting		
continued funding for a lon	g-term, non-permanent position to be l	based in Anchorage. This position will		
be a Research Analyst II/III	to support the work of the Boards on e	panding data analysis capacity of the		
		· · · · · · · · · · · · · · · · · · ·		

Adverse Childhood Experiences (ACEs) links to health outcomes and trends. The position will be housed in partnership with the Division of Public Health to develop methodology for more accurate beneficiary prevalence estimates. Additionally, the position will support and create additional analysis linking data to systems and eventually lead to strategy development and planning of potential policy changes. Thousands of Trust beneficiaries have their very status as a beneficiary related to early life events which are only partially understood:

- Alzheimer's Disease and Related Disorder has been linked with child trauma in an Alaskan study suggesting that up to 60% of the issues around memory loss later in life are tied back to early life events.
- Various substance abuse conditions and their links to early life events range from a low of 28%

for heavy drinking to 67% for intravenous drug use.

- Developmental delays which are tied back to potentially preventable early events range from 22% for speech and language delays to 39% for having a diagnosed developmental delay.
- Mental illness also has a range depending on the diagnostic category. Up to 80% of youth suicide
 attempts are tied back to early life factors and even ADHD may be as much as 40% linked to
 preventable exposure to stressors.
- For TBI the link may be as high as 20% of exposure is tied back to early life trauma.

In addition to typical daily stressors, COVID-19 has directly and indirectly impacted all Alaskan families. With the implementation of various mandates multiple jobs were lost, schools closed, and isolation increased. These stressors all have a signification association with increased in child abuse and neglect. If history repeats itself, the impact of these stressors will be manifested in increased in abuse and neglect. We have an immediate need to understand the impact of these various stressors on the family resulting from COVID-19 mandates. The ALCANLink project has a unique data system and ability to measure population level impacts of child maltreatment, the RAIII position is critical to ensure that ALCANLink project can help fill this gap in knowledge and support our many families with children who are at an increased risk of abuse.

Analysis: The research analyst position supported by these funds has had a significant impact on increasing the amount and depth of analyses completed using the ALCANLink data. Recent work focused on understanding and elucidating factors that impact the development of ACEs, child maltreatment, and early education readiness and performance. Some key highlights include completing a study documenting that a change in household stressors impacts future child welfare involvement, a study identifying household factors that impact poor school readiness (a peer-reviewed manuscript is accepted with revisions), a partnership with Washington University at Saint Louis to build a structural equation model exploring constructs impacting education readiness, an update to statewide Abusive Head Trauma statistics, an estimation of impact of COVID-19 on child maltreatment reporting, an expansion of ALCANLink years by linking in 2012-2018 PRAMS data increasing the sample from just over 3,800 to over 11,000. Using these expanded ALCANLink data, the analyst has built trends in cumulative incidence, household challenges, and working to understand and measure ACEs by age 3 years through linked data over time. Additionally this position has worked closely with MHT staff to investigate alternative methodology for quantifying the beneficiary population, has provided evaluative support for the Plans of Safe Care model, and worked through assessing the utility of using Medicaid data to identify and understand Foster care kids with complex medical needs. During FY23 many of the projects initiated in FY22 will be completed with information products completed. Specifically, Division of Public Health partners anticipate having at least 3 peer-reviewed publications, multiple information products, and to deliver various presentations to different audiences.

Trust staff recommends for continued funding in FY24-25 to ensure continued enhancement of data linkage project relevant to Trust beneficiary programs and planning, as well as a resource for data related consultation for division and departmental projects and initiatives.

This project supports Comprehensive Integrated Mental Health Plan Objectives 1.2 and 1.3 related to trauma informed services and reducing the instances and impact of Adverse Childhood Experiences and specifically focused on improving social determinants of health for families and young children. Funds will also support Objectives 6.1 and 6.2 through strategies related to prevention of child maltreatment and neglect as well as Objectives 9.5 related to data driven decision making and linkage of data and services across state divisions and departments.