

FY23 Trust Grant Analysis

The analysis was generated to provide additional information about Trust-funded projects as the Trust prepares its [FY25 budget](#). We hope that the information in this analysis will support an understanding of the impacts of Trust funding, and the projects and initiatives included in the Trust's FY25 budget recommendations.

The analysis is sectioned by [Trust focus and priority areas](#), and also includes a section examining grants from our non-focus area portion of the annual budget. The Table of Content for this document is organized by budget line – some of those lines are specific to one grant, while some lines are “buckets” of funding that ultimately supported several projects. For “buckets,” each individual project supported is analyzed.

Projects in this analysis are supported by FY23 Authority Grants and MHTAAR funds (grants to state agencies) from budget lines that are also included in the proposed FY25 budget. Note that many grant projects initiated in FY23 are still ongoing. While information in this analysis reflects the most current information for each grant at the time the analysis was developed, final reports will be reviewed by staff when each grant closes.

This FY23 Trust Grant Analysis includes:

- A high-level project description with general information about the grant or budget line in the FY23 budget,
- a summary of grant progress,
- relevant comp plan goals and objectives,
- performance data, and
- project recommendations.

About Trust Grant-Making

On average the Trust annually awards over \$20M in individual grants, as outlined in our recent [FY22 Grant Investment report](#). These grant awards can range from \$2,500 for a conference sponsorship to over \$1M for a program or service that supports Trust beneficiaries. The Trust is proud to partner with many providers, nonprofits, state departments, local governments, and Tribal organizations to have a positive impact for beneficiaries, the providers of services, and our system of care. Trust grants are often prioritized to serve as catalytic funding that can help our partners implement system-level improvements. The Trust's grant funding can support partner efforts such as bringing on new lines of service, accessing innovative training opportunities, and implementing data-driven approaches to improving Alaska's system of behavioral health care. The Trust's largest grantee is the State of Alaska, with annual grants designated to various state agencies (MHTAAR grants) that provide supports and services to beneficiaries.

The categories of grants the Trust awards include:

- Capacity Building
- Capital - Equipment
- Capital - Construction
- Conference/Sponsorships
- Data Planning
- Direct Service
- Outreach
- Workforce Development/Training

In addition, for each grant award there is a signed grant agreement between the Trust and the grantee organization. The grant agreement includes:

- General Agreement as to the purpose of the grant
- Project Description
- Project Performance Measures
- Budget Agreement
- Payment Provisions
- Reporting Requirements

For each grant, project performance measures are developed by Trust staff in collaboration with the grant recipient. The Trust uses the Results Based Accountability framework for developing grant project performance measures. The Results Based Accountability (RBA) framework is based on three core questions (1) How much did we do? (2) How well did we do it? and (3) Is anyone better off? This framework allows us to gather consistent information from our grantees across grant categories.

All Trust grants are monitored throughout a project's duration to ensure project performance and compliance as outlined in the grant agreement. This includes evaluating project outcomes and accomplishments through the established performance measures, as well as reviewing financial records and other documentation.

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Non-Focus Area Allocations

| | | |
|--|---|--------------------------|
| Project Title: Mini-Grants for ADRD | | |
| Grantee: Alzheimer’s Resource of Alaska | | |
| Fund: Authority Grant | | |
| Years Funded: 25 | Project Category: Direct Service | |
| FY22: \$400,000 | FY23: \$400,000 | FY24: \$400,000 |
| <p>Project Description: The mini-grant program grants can include, but should not be limited to, therapeutic devices, access to medical, vision and dental, and special health care, and other supplies or services that might remove or reduce barriers to an individual's ability to function in the community and remain in their own home or home community as long as possible. Assistance with basic living needs not covered by current grants, such as transportation, clothing, and the like, will also be considered. These services will help Trust beneficiaries attain and maintain healthy and productive lifestyles. These items are determined to support beneficiaries in achieving stability and are critical supports to gaining self-sufficiency.</p> <p>Consumer mini-grants are essential to a system delivering individualized services that promote stability.</p> | | |
| <p>Summary of Grant Progress: The Mini Grants for ADRD (Alzheimer’s disease or related dementia) project is identified as a Non-Focus Area Allocation in the Trust budget. Mini-grant projects are long-standing Trust investments to fill small gaps in service or meet other needs that Trust beneficiaries have, to obtain services and items they need to remain in their home and community as long as possible. This project also offers Trust beneficiaries with ADRD the opportunity to improve their day-to-day well-being as most of this beneficiary population has retired and is no longer pursuing employment. Alzheimer’s Resource of Alaska (ARA) administers the funds and acts as the fiscal agent for applications. This contract continues to be a benefit both to the Trust as well as the applying beneficiaries. Because ARA is a primary service agency for people with ADRD, they can engage applicants and their families in conversations about additional support services offered in Alaska. If regular guidance is needed, a care coordinator is recommended for ongoing services through their affiliated agency, Care Coordination Resource of Alaska. Well-versed in the availability and qualifications to obtain Medicaid, Medicaid waiver, Medicare, and senior grant services, ARA ensures that mini-grant funds are used as a last resort when other resources are unavailable or fully expended. Applications for the Mini Grants for ADRD are reviewed and awarded monthly.</p> | | |
| Comp Plan Information | | |
| | Goal | Objective |
| | Goal 3 Economic and Social Well-being | 3.4 Basic needs services |
| <p>Relevant Comp Plan Goals and Objectives: The ADRD Mini Grants enhance beneficiaries’ timely access to basic needs and services through financial assistance.</p> | | |
| <p>Performance Data: In FY22, 191 unduplicated beneficiaries received mini-grants from this project. Mini-grants awarded to date are on track for FY23, with detailed data expected after the close of FY23. This contract continues to be a benefit both to the Trust as well as the applying beneficiaries.</p> | | |

FY22 ADRD Mini-Grants Awarded by Region

| Region | Total # of Grant Awards | Total \$ Amount Awarded |
|---|--------------------------------|-------------------------|
| Bethel, St. Mary's, Mt. Village, Hooper Bay | 2 | \$500.55 |
| Fairbanks, North Pole | 2 | 2,824.59 |
| Other Interior (Denali Borough, Nenana) | 3 | \$7,167.82 |
| Anchorage Municipality | 145 | \$190,940.31 |
| Juneau | 1 | \$1,965.31 |
| Southeast - Other | 16 | \$32,370.28 |
| Kenai Peninsula, Cordova, Valdez | 16 | \$23,689.37 |
| Mat-Su | 38 | \$43,680.71 |
| Nome, Kotzebue, White Mountain | 14 | \$2,894.86 |
| Kodiak Island | 1 | \$110.00 |
| Other (Willow, Talkeetna) | 4 | \$2,236.21 |
| TOTAL | 242 (191 beneficiaries) | \$308,380.02 |

FY22 ADRD Mini-Grants Awarded by Category

| Item Category | Total # of Grant Awards | Total \$ Amount Awarded |
|---------------|-------------------------|-------------------------|
| Accessibility | 47 | \$71,655.17 |
| Adaptive | 66 | \$48,018.23 |
| Dental | 9 | \$22,418.42 |
| Hearing | 1 | \$2,500.00 |
| Medical | 3 | \$1,430.00 |
| Respite | 45 | \$96,540.70 |
| Supplies | 65 | \$58,782.51 |
| Vision | 1 | \$1,000.00 |
| Other | 5 | \$6,034.99 |

| | | | | |
|--|--------------|--------------------------------|---------------------|--|
| | TOTAL | 242 (191 beneficiaries) | \$308,380.02 | |
| <p>Project Recommendations: This project is recommended for continued funding. This is a unique grant opportunity for Trust beneficiaries with Alzheimer’s disease or related dementia in Alaska. The funds are administered within the established guidelines and budget for the program. If the mini-grants were to be eliminated, no other program could take its place.</p> | | | | |

| | | | | |
|--|---------------------------------------|---|--------------------------|------------------------|
| Project Title: Mini-Grants for Beneficiaries with Developmental Disabilities | | | | |
| Grantee: Administered by Information Insights, the Trust’s contractor | | | | |
| Fund: Authority Grant | | | | |
| Years Funded: 25 | | Project Category: Direct Service | | |
| FY22: \$450,000 | | FY23: \$500,000 | | FY24: \$500,000 |
| <p>Project Description: The mini-grant program provides Trust beneficiaries with a broad range of equipment and services that are essential to directly improving their quality of life and increasing independent functioning. These can include, but should not be limited to, therapeutic devices, access to medical, vision and dental, and special health care, and other supplies or services that might remove or reduce barriers to an individual's ability to function in the community and become as self-sufficient as possible.</p> | | | | |
| <p>Summary of Grant Progress: The Mini-Grants for Beneficiaries with Intellectual and Developmental Disabilities (DD) project is identified as a non-focus area allocation in the Trust budget. This program is a long-standing Trust investment that fills small gaps in services or meets other needs of Trust beneficiaries with items or services needed to maintain their quality of life and increase independent functioning.</p> <p>Individual mini-grants are awarded to a community organization who applies on behalf of the beneficiary. Applications for mini-grants are reviewed each month by an evaluation committee consisting of representatives from the Trust and the Governor’s Council on Disabilities and Special Education.</p> <p>Developmental Disabilities mini-grants provide a direct-service to individual beneficiaries through assistance in securing needed items or services, which are not available through other funding sources.</p> <p>The primary challenge for the mini-grant program has been the capacity of community organizations to apply for and administer the grants on behalf of the beneficiaries they work with. These organizations provide a crucial service, but frequently have demands that exceed their capacity. The Trust will continue to work with these community organizations to look for ways to assist in these issues.</p> | | | | |
| Comp Plan Information | | | | |
| | Goal | | Objective | |
| | Goal 3 Economic and Social Well-being | | 3.4 Basic needs services | |
| Relevant Comp Plan Goals and Objectives: | | | | |
| Goal 3, Objective 3.4: Enhance timely access to basic needs and services. | | | | |

Performance Data:

FY22 Grants Approved = 246 (\$348,330.59)
 FY22 Grants Declined = 72 (\$133,822.91)
 Approval Rate = 77.4%, by request
 Total Grants Considered = 318 (totaling \$533,918.76)

| Approved grants by request type | Grants | % of Approved Requests | Funding | % of Approved Funding |
|---------------------------------|--------|------------------------|-----------|-----------------------|
| Medical | 49 | 19.9% | \$63,259 | 18.2% |
| Dental | 18 | 7.3% | \$37,687 | 10.8% |
| Vision | 1 | <1% | \$550 | <1% |
| Hearing | 1 | <1% | \$2,000 | <1% |
| PT/OT/ST (Therapy) | 103 | 41.9% | \$144,665 | 41.5% |
| Home/Env Mods | 10 | 4.1% | \$19,638 | 5.6% |
| Equipment/Supplies | 24 | 9.8% | \$24,758 | 7.1% |
| Educational | 7 | 2.9% | \$9,359 | 2.7% |
| Other | 33 | 13.4% | \$46,415 | 13.3% |

| Approved grants by region | Grants | % of Approved Requests | Funding | % of Approved Funding |
|---------------------------|--------|------------------------|-----------|-----------------------|
| Anchorage | 84 | 34.2% | \$125,119 | 35.9% |
| Southcentral | 73 | 29.7% | \$103,431 | 29.7% |
| Southeast | 45 | 18.3% | \$53,778 | 15.4% |
| Northern/Interior | 31 | 12.6% | \$45,137 | 13.0% |
| Southwest | 8 | 3.3% | \$11,955 | 3.4% |
| Northwest | 5 | 2.0% | \$8,910 | 2.6% |

Mini-grants awarded to date are on track for FY23, with detailed data expected after the close of FY23.

Project Recommendations: This project is recommended for continued funding. The mini-grant program is a unique grant opportunity for Trust beneficiaries with developmental disabilities and children enrolled in early intervention or infant learning. Mini-grant funds are administered within the established guidelines and budget for the program. If mini-grants were eliminated, there is no other program within the State that could take its place.

| | |
|---|---|
| Project Title: Mini-Grants for Beneficiaries Experiencing Mental Illness, Chronic Alcoholism and Substance Abuse | |
| Grantee: Administered by Information Insights, the Trust's contractor | |
| Fund: Authority Grant | |
| Years Funded: 25 | Project Category: Direct Service |

| | | |
|--------------------------|--------------------------|--------------------------|
| FY22: \$1,000,000 | FY23: \$1,000,000 | FY24: \$1,000,000 |
|--------------------------|--------------------------|--------------------------|

Project Description: The mini-grant program provides Trust beneficiaries with a broad range of equipment and services that are essential to directly improving their quality of life and increasing independent functioning. These can include, but should not be limited to, therapeutic devices, access to medical, vision and dental, and special health-care, and other supplies or services that might remove or reduce barriers to an individual's ability to function in the community and become as self-sufficient as possible.

Summary of Grant Progress:

The Mini-Grants for Beneficiaries Experiencing Mental Illness, Chronic Alcoholism, and Substance Abuse project is identified as a non-focus area allocation in the Trust budget. This program is a long-standing Trust investment that fills small service gaps or meets other needs of Trust beneficiaries with items or services needed to maintain their quality of life and increase independent functioning.

Individual mini-grants are awarded to a community organization that applies on behalf of a beneficiary. Mini-grant applications are reviewed monthly by an evaluation committee of Trust representatives.

Behavioral Health mini-grants provide a direct service to individual beneficiaries through assistance in securing important items or services, which are not available through other funding sources.

The primary challenge for the mini-grant program has been the capacity of community organizations to apply for and administer the grants on behalf of the beneficiaries they work with. These organizations provide a crucial service, but frequently have demands that exceed their capacity. The Trust will continue to work with these community organizations to look for ways to assist with these issues.

Comp Plan Information

| | |
|---------------------------------------|--------------------------|
| Goal | Objective |
| Goal 3 Economic and Social Well-being | 3.4 Basic needs services |

Relevant Comp Plan Goals and Objectives:

Goal 3, Objective 3.4: Enhance timely access to basic needs and services.

Performance Data:

FY22 Grants Approved 509 = \$806,529.10
 FY22 Grants Declined 167 = \$343,343.93
 Approval Rate =75.3%, by request
 Total Grants Considered = 676, totaling \$1,216,089.27

Approved grants by request type:

| Approved grants by request type | Grants | % of Approved Requests | Funding | % of Approved Funding |
|---------------------------------|--------|------------------------|--------------|-----------------------|
| Dental | 24 | 4.7% | \$50,268.88 | 6.2% |
| Education | 9 | 1.7% | \$14,654.76 | 1.9% |
| Equipment/Supplies | 90 | 17.6% | \$120,359.94 | 14.9% |
| Hearing | 1 | <1% | \$2,500 | <1% |

| | | | | |
|---------------|-----|-------|--------------|-------|
| Home/Env Mods | 97 | 19.0% | \$162,611.87 | 20.1% |
| Medical | 36 | 7.1% | \$63,434.81 | 7.8% |
| Other | 240 | 47.1% | \$375,057.60 | 46.5% |
| PT/OT/ST | 9 | 1.7% | \$15,503 | 1.9% |
| Vision | 3 | <1% | \$2,138 | <1% |

| Approved grants by region | Grants | % of Approved Requests | Funding | % of Approved Funding |
|---------------------------|--------|------------------------|--------------|-----------------------|
| Anchorage | 196 | 38.5% | \$319,224.51 | 39.5% |
| Southcentral | 149 | 29.2% | \$220,262.93 | 27.3% |
| Southeast | 118 | 23.1% | \$184,926.64 | 22.9% |
| Northern/Interior | 40 | 7.8% | \$73,958.35 | 9.1% |
| Southwest | 6 | 1.1% | \$8,156.67 | 1.0% |
| Northwest | 0 | 0.0% | \$0 | 0.0% |

| Approved grants by Population | Grants | % of Approved Requests | Funding | % of Approved Funding |
|-------------------------------|--------|------------------------|--------------|-----------------------|
| Mental Illness | 390 | 76.60% | \$603,441.71 | 74.80% |
| Substance Misuse | 96 | 18.80% | \$163,279.28 | 20.24% |
| Traumatic Brain Injury | 23 | 4.50% | \$39,808.11 | 4.90% |

Mini-grants awarded to date are on track for FY23, with detailed data expected after the close of FY23.

Project Recommendations: This project is recommended for continued funding. The mini-grant program is a unique grant opportunity for Trust beneficiaries to obtain necessary items and services unavailable through other sources. Mini-grant funds are administered within the established guidelines and budget for the program. If mini-grants were eliminated, no other program within the State could take its place.

| | | | |
|---|--|--|------------------------|
| Project Title: AMHB-ABADA Joint Staffing | | | |
| Grantee: Alaska Mental Health Board/Advisory Board on Alcoholism & Drug Abuse | | | |
| Fund: MHTAAR | | | |
| Years Funded: 19 | | Project Category: Data/Planning | |
| FY22: \$491,500 | | FY23: \$491,500 | FY24: \$491,500 |
| Project Description: This Trust funding provides a supplement to the basic operations of the merged staff of the Advisory Board of Alcoholism and Drug Abuse (ABADA) and Alaska Mental Health Board (AMHB) and requires the boards to meet the data, planning, and advocacy performance measures negotiated with the Trust. | | | |
| Summary of Grant Progress: The boards are critical partners in the work of the Trust by supporting the planning, development, and evaluation of the Trust’s initiatives and priority areas. The staff of the boards as well as board members engage closely with Trust Authority program officers that oversee focus areas and with trustees regularly at Trust board meetings. Mutual beneficial collaborations led to the production of the “Mental Health in Schools- Landscape Assessment – Phase 2”, furthering suicide prevention efforts and planning, engagement in justice reentry initiatives, and statewide implementation of the crisis now initiative. The Board staff also supported the Alaska Suicide Prevention Council in drafting a new five-year suicide prevention plan that involved Trust staff support and numerous stakeholder meetings across the state. | | | |

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| <p>Collaborative relationships like these are the hallmark of a high-functioning Board, which provides a solid foundation for gaining community feedback and support for furthering the Trust mission.</p> <p>As statutory advisory boards to the Trust, AMHB, and ABADA are vital partners in helping to educate, inform and provide recommendations to the Trust about issues impacting beneficiaries. The support for the boards has a direct impact on the Trust’s ability to meet its mission. The advisory boards helped track and educate advocates on crucial legislation that supports policy change for improving beneficiaries’ lives.</p> | |
| Comp Plan Information | |
| Goal | Objective |
| Goal 4 Substance Use Disorder Prevention | 4.1 Drug & alcohol misuse prevention |
| <p>Relevant Comp Plan Goals and Objectives: The boards work across all of the Comp Plan Goals, specifically Goal 4 Substance Use Disorder Prevention and 4.1 Drug & alcohol misuse prevention. The work of the Mental Health Board ties directly into early childhood intervention and prevention (Goal 1), Suicide Prevention (Goal 5), Protecting Vulnerable Alaskans (Goal 6), Services in the Least Restrictive Environment (Goal 7), and Services in Institutional Settings (Goal 8).</p> | |
| <p>Performance Data: In the arena of the board’s advocacy work, the boards successfully engaged and trained 1,650 advocates (including beneficiaries, family members, providers, and administrators) in joint advocacy efforts. Four super-advocate trainings were held over the year, training 89 individuals about self-advocacy and how to participate in policy development by sharing their voices and stories about the things they care about or believe to be most impactful. An additional 162 individuals participated in alternate advocacy training for justice-engaged individuals. The 2022 end-of-session Joint Advocacy Report was well done, highlighting the bills and budget items most impacting Trust beneficiaries. The boards have continued to successfully alert and educate the Trust about the needs, gaps and issues impacting Alaskan’s experiencing addiction, mental illness as well as special populations including youth and justice-involved.</p> | |
| <p>Project Recommendations: Staff recommends continued funding for AMHB and ABADA joint staffing in FY 25.</p> | |

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|--|--|------------------------|
| Project Title: GCDSE Joint Staffing | | |
| Grantee: DOH, Governor’s Council on Disabilities and Special Education | | |
| Fund: MHTAAR | | |
| Years Funded: 22 | Project Category: Capacity Building | |
| FY22: \$197,500 | FY23: \$184,500 | FY24: \$184,500 |
| <p>Project Description: The Governor’s Council on Disabilities and Special Education fills five distinct state and federal roles, including that of a statutory advisor for the Trust. Trust Joint Staffing funds support the basic operations of the Council as a statutory advisor related to data, planning, and advocacy as designated in the annual Statement of Intent. Positions funded are for staffing the Council, and funding goes directly to the Council. Activities of funded staff, including travel, ensure Council efforts are conducted within the framework of the Mental Health Trust Authority’s guiding principles while complying with state and federal rules and guidelines.</p> | | |

The Research Analyst III is a continuing project to provide the Governor's Council on Disabilities & Special Education. The position is primarily responsible for reviewing existing research and performing data collection and analysis related to the needs of individuals with developmental disabilities.

The Planner III position provides expertise and support related to the Comprehensive Integrated Mental Health Plan for issues related to early intervention, special education services, and beneficiaries experiencing developmental disabilities. Trust funds will partially support this position to ensure the Trust has consistent access to critical comprehensive planning information and resources related to specific interests of beneficiary interests informed by the Council.

Summary of Grant Progress:

This systems project supports joint staffing for the Governor's Council to continue engaging in Trust priorities on the advisory board level. The funding supports the Research Analyst II (RAII) position and part of the Planner III position. Both are critical positions with the Governor's Council in support of Trust data and planning interests.

Ongoing activities of the Research Analyst include facilitating the Alaska Disability Advisory Group (ADAG) (on Emergency Preparedness – meets monthly), assisting with the completion of the 2022-2026 5-year plan, research for the council, survey creation, data collection & analysis for GCDSE (such as PPR surveys, satisfaction surveys for webinars, etc.), as well as continued research and implementing accessibility standards (social media, PowerPoints) and providing primary staffing for the GCDSE council committee CISS (Community Including Supports and Services) as well as supported staffing the Self-Advocacy and Leadership committee. Additionally, the Research Analyst represents the Council on various collaborative partnerships with agencies such as the Trust Data Subcommittee, Disability, and Aging Coalition, Full Lives Committee, and Alaska Disability Pride Celebration.

Specific activities/projects RAIII has completed from July 1 2022-March 15, 2023, are:

- Responsible for creating surveys for the Program Performance Report (PPR) to reflect the new 5-year plan and committee makeup. Additionally, the information gathered was analyzed by the RA III staff and used for the Council's annual PPR.
- Lead for GCDSE Annual Report. Can be found at: https://health.alaska.gov/gcdse/Documents/Publications/Annual-Reports/2021_annualreport.pdf
- RA III conducted key informant interviews to identify gaps in services and supports to better the interagency collaboration between domestic violence/sexual assault agencies, tribal organizations, and disability agencies. This was a partnership with Alaska Native Justice Center.

Specific Planner Updates

- Council staff participated in weekly Mental Health Trust Joint Advocacy meetings each Friday from January 2023 and continued through the session. 2 Council staff followed legislative bills throughout the legislative session, providing the Joint Advocacy team with a summary “report out” on bill hearings. 2 Council staff participated in the Trust’s high-level Coordinated Communications Session, a pre-Joint Advocacy meeting that provided a smaller, more intimate group of staff to discuss and ask questions regarding the details of the legislative hearings that were followed by the team. Due to

| <p>staffing – GCDSE ED and PC2 covered these items for the Planner, while the Planner position will do these in the future.</p> <ul style="list-style-type: none"> Acting Planner and ED met with Trust Comprehensive Program Planning Coordinator to coordinate planning activities related to beneficiaries and Trust focus areas. Trust planner was invited and attended Council committee meetings. However, the Trust Planner position was vacant, and more targeted work on coordinated planning activities has been put on hold until that position is filled. RA III/Acting Planner attended Scorecard Check-in/ Planning meetings with Trust and Department of Health staff. <p>Significant staff turnover within GCDSE resulted in a vacant Planner position from May-August 2022, and then the RA III serving as the Acting Planner for six months. A high vacancy rate across other positions required significant time and resources to manage, and limited time and resources meant there was reduced capacity and effectiveness of staff working on the Joint Staffing Planner objectives. RA III was acting as Planner 3 from August 2022-February 2023. A new Planner was hired and started in March 2023.</p> | | | | | |
|---|---------------------------------|-----------|-----------------------------------|---------------------------------|--|
| Comp Plan Information | | | | | |
| <table border="1"> <thead> <tr> <th>Goal</th> <th>Objective</th> </tr> </thead> <tbody> <tr> <td>Goal 9 Workforce, Data, & Funding</td> <td>9.5 Data-driven decision making</td> </tr> </tbody> </table> | Goal | Objective | Goal 9 Workforce, Data, & Funding | 9.5 Data-driven decision making | |
| Goal | Objective | | | | |
| Goal 9 Workforce, Data, & Funding | 9.5 Data-driven decision making | | | | |
| <p>Relevant Comp Plan Goals and Objectives: This project is focused on data analysis and planning for beneficiaries experiencing developmental disabilities for improved Trust program investment and state system improvements. (Statutory Advisory Board)</p> <p>Goal 9: The State of Alaska has the workforce capacity, data, and technology systems in place to support the resources and funding of Alaska’s comprehensive integrated mental health program; 9.5 Encourage a culture of data-driven decision-making that includes data sharing, data analysis, and management to link support services across State of Alaska Departments.</p> | | | | | |
| <p>Project Recommendations: Trust staff recommends continuation of the current level of funding for FY24-25.</p> <p>This project continues to support staffing levels of the GCDSE that ensure ongoing data and planning alignment between Trust and GCDSE priorities on behalf of beneficiaries experiencing Intellectual and Developmental Disabilities. The GCDSE and the Trust work together to elevate the work of the “DD Vision” collaborative to improve services and lives for Trust beneficiaries. Trust staff will continue to monitor this project and work with program staff to identify alternative sustainable funding sources beyond FY 25.</p> | | | | | |

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|--|--|------------------------|
| Project Title: Alaska Commission on Aging Staffing and Beneficiary Program Support | | |
| Grantee: Alaska Commission on Aging | | |
| Fund: MHTAAR | | |
| Years Funded: 20 | Project Category: Data/Planning | |
| FY22: \$140,000 | FY23: \$200,000 | FY24: \$200,000 |
| Project Description: This project will fund the sole MHTAAR-funded planner position. The planner is responsible for supporting the Executive Director in coordination between the ACOA and the Trust, | | |

including gathering data for reporting, coordinating advocacy and planning, and preparing ongoing progress reports to the ACOA and the Trust. In addition, the planner position is a liaison with the other beneficiary boards, participating in developing joint advocacy efforts, state plans, and collaborative projects. The remaining funds will be used to coordinate listening sessions and work related to the new State Plan for Senior Services. The ACOA is a statutory advisory board to the Trust and has the duty and responsibility to advise the Trust on issues impacting the aging beneficiary population.

Summary of Grant Progress:

The Trust supports each of the Statutory Advisory Boards with one staff position. This project in FY23 has been renamed “ACOA Staffing and Beneficiary Program Support” to allow the agency flexibility in position type. It adds support to the office, so ACOA has the enhanced ability to engage senior beneficiaries. In FY23, the Planner position was vacant most of the year. The prior employee resigned, and the position was reclassified to attract additional candidates. The reclassification process took over six months, with interviews for candidates expected in June 2023. When filled, this position supports the implementation of legislation, programs, and responsive systems to meet the needs of seniors and advocates for positive outcomes for all seniors in Alaska. The Commission does focus more on the beneficiary group of Alzheimer’s disease and related dementias due to the conditions being predominantly experienced by older Alaskans; however, ACOA serves all Trust beneficiary categories who are also seniors. The project is identified as a Non-Focus Area Allocation in the Trust budget. However, ACOA often advocates for programs that align with the work of the Housing & Home and Community Based Services focus area.

The project has been challenged to reach its full potential due to vacancy and reclassification of the position in FY23. The Executive Director and Rural HCBS Coordinator have filled in to complete the project activities. The State Plan for Senior Services has been finalized. This work includes holding listening sessions in different parts of the state and virtually, issuing and analyzing the senior survey, managing the contractor, assisting with the job, and convening the State Plan Advisory Committee. ACOA is a partner in legislative advocacy for senior Trust beneficiaries. ACOA participates in Trust board meetings and other activities, sharing information and data relevant to Trust work, including the annual “Senior Snapshot.” These activities work to improve the systems that impact seniors in Alaska.

Comp Plan Information

| Goal | Objective |
|-----------------------------------|---------------------------------|
| Goal 9 Workforce, Data, & Funding | 9.5 Data-driven decision making |

Relevant Comp Plan Goals and Objectives:

The ACOA Staffing and Beneficiary Program Support project is connected to the Comprehensive Integrated Mental Health Plan through Goal 9, Objective 5: Encourage a culture of data-driven decision-making that includes data sharing, data analysis, and management to link support services across Alaska DHSS (now DOH & DFCS) divisions and other departments.

Performance Data:

Despite the extended vacancy of the position, ACOA was able to issue the Senior Snapshot for 2022: [Alaska Commission on Aging Senior Snapshot 2022](#), finalize the Alaska State Plan for Senior Services: FY2024-27 and participate in statewide advocacy activities.

Project Recommendations:

This project is expected to continue as an investment in our Statutory Advisory Board, the Alaska Commission on Aging. The reclassification of the position is expected to attract highly qualified candidates capable of completing the objectives of the Alaska Commission on Aging Staffing and Beneficiary Program Support project in future fiscal years.

Project Title: (Communications Line) Mental Health: In-Depth Look**Grantee:** Alaska Public Media**Fund:** FY23 Communications, Authority Grant**Years Funded:** 1**Project Category:** Outreach**FY22:** n/a**FY23:** \$77,000**FY24:** No request for funding yet been received

Project Description: This project represents the only grant awarded from the FY23 budget Communications line. In this effort, Alaska Public Media (AKPM) is producing content focused on mental health-related topics. This effort will leverage Trust communications work through the development of numerous pieces of public affairs programming and news stories on mental health topics. Content generated through this project will reach a broad, statewide radio and TV audience, and help to improve their understanding of issues impacting beneficiaries and their families. Media content developed under this project that is related to behavioral health and intellectual and developmental disability conditions also aligns with Trust communications goals by helping normalize conversations around these important issues and addressing stigma.

As a part of this project, Trust funds will partially support a health reporter/producer to serve as a point person for researching and writing news stories for statewide distribution, assisting other statewide network reporters to produce mental health solutions stories, and assisting in producing statewide programs examining mental health challenges in Alaska.

AKPM will provide the following programming focused on mental health in Alaska through the following mechanisms: Indie Alaska (television), Talk of Alaska (radio call-in), Line-One (radio call-in), Alaska Insight (television), and regular news stories.

This partnership will also increase brand awareness of the Trust through on-air and website/social media recognition. The Trust is also able to amplify AKPM material through its existing communications mechanisms such as social media.

Summary of Grant Progress: This grant is still underway, with final reporting not due until August 2023. That said, there have been numerous pieces of public affairs programming on AKPM's "Line One, Your Health Connection" and "Talk of Alaska" call-in programs on topics related to Trust beneficiary populations.

AKPM has hired a health reporter, though that action was delayed due to unsuccessful recruitment (workforce challenges) during this initial grant period.

Comp Plan Information

| Goal | Objective |
|---------------------------------------|----------------------------------|
| Goal 3 Economic and Social Well-being | Not associated with an objective |

Relevant Comp Plan Goals and Objectives: This project intersects all the objectives in Goal 3. Through programming and reporting on topics relevant to Trust beneficiary populations, we can help normalize conversations around important issues, which helps combat stigma. Stigma associated with Trust beneficiary conditions impacts housing, employment, relationships, and sometimes, particularly in the cases of self-stigma, access to care.

Mental health-focused content also helps increase awareness and understanding of the challenges our beneficiaries face, aligning with Trust communication goals.

Performance Data: A log of all stories and broadcasts by AKPM will be maintained throughout the year. The number of listeners/viewers of programming and engagement will be calculated.

Topics that have been covered by AKPM on various public affairs programs and through news stories are very pertinent to the Trust including opioid and fentanyl addiction, death rates related to alcohol misuse and traumatic brain injuries, tips for talking with youth about substance misuse, resources for eating disorders, developments in homelessness services, the impacts of loneliness on health and more. The content has been well done, and regular.

Project Recommendations: It is anticipated that AKPM will successfully fulfill all objectives of this project. If AKPM seeks additional funding from the Trust in FY24, it will be considered based on the performance of this project, and whether what it proposed aligns with the Trust’s mission and communication goals.

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|---|--|------------------------|
| Project Title: Comprehensive Program Planning & Consultative Services | | |
| FY23 Grantees (through 4/26/2023): | | |
| <ul style="list-style-type: none"> • Mat-Su Health Foundation- 2022 Mat-Su Community Health Needs Assessment, \$10,000 • Alaska Injury Prevention Center – Overcoming ACES with Resilience Survey, \$90,000 | | |
| Fund: Authority Grant | | |
| Years Funded: 6 | Project Category: To be determined based on individual project type | |
| FY22: \$350,000 | FY23: \$350,000 | FY24: \$350,000 |
| Project Description: The Comprehensive Program Planning & Consultative budget line is intended for use in supporting projects related to the implementation and monitoring of the Comprehensive Integrated Mental Health Program Plan and to fund grants and contracts that provide consultative services such as program evaluation, information and data development, analysis, and recommendations forecasting the needs of Trust beneficiaries. | | |
| <p>There were two grants funded out of this budget line during FY23: one to the Mat-Su Health Foundation for a Community Health Needs Assessment and one to the Alaska Injury Prevention Center for the implementation of a statewide community survey gathering data on adverse childhood experiences and resiliency factors. Other funds in this budget line were used to support contracts for data and information-gathering needs and are not included here.</p> | | |

Mat-Su Health Foundation- 2022 Mat-Su Community Health Needs Assessment - Summary of Grant Progress:

The intended goal of this grant was to support Mat-Su Health Foundation in gathering community health needs data and developing an implementation plan for addressing community needs. They attempted to gather input from a diverse sample of residents and stakeholders, including communities that would include the different Trust beneficiary groups. There was not a specifically targeted sampling of Trust beneficiaries. However, the Trust staff participated in the steering and planning group to ensure potential beneficiary needs were addressed.

This project is essential to the Trust as an opportunity to gather regional data from one of the state’s ten behavioral health regions related to Trust beneficiary needs and quality of life. It provides valuable systems-level data that can inform Trust focus areas and priority initiatives in the budget, systems programming, funding, and policy decision-making. Many of the identified needs complement data gathered in the Trust FY25 budget development process and are intended to provide direct improvements to Trust beneficiaries.

The Mat-Su Community Health Needs Assessment and Implementation Plan were completed and submitted to the US Internal Revenue Service as required.

Mat-Su Health Foundation- 2022 Mat-Su Community Health Needs Assessment - Comp Plan Information:

| Goal | Objective |
|-----------------------------------|---------------------------------|
| Goal 9 Workforce, Data, & Funding | 9.5 Data-driven decision making |

Mat-Su Health Foundation- 2022 Mat-Su Community Health Needs Assessment - Relevant Comp Plan Goals and Objectives:

This project has two primary relevant Comp Plan goals and associated objectives. The first is Goal 9, Workforce, Data, and Funding, and Objective 9.5, Data-driven decision making. This project helped the Mat-Su Health Foundation collect community health needs data in support of Goal 2 Healthcare, Objective 2.1 Access & Receive Quality Healthcare. Other Comp Plan goals and objectives will likely benefit from this project. The community health needs data were analyzed and used to develop an implementation plan for the foundation and Mat-Su Health Services to improve the availability of services for people living in the Mat-Su Borough. The prioritization of behavioral health as the top need helps forecast beneficiary needs for the Trust.

Mat-Su Health Foundation- 2022 Mat-Su Community Health Needs Assessment - Performance Data:

Feedback and input were received from more than 1,000 residents and stakeholders through interviews, community surveys, and focus groups. An extensive secondary analysis of data from local, regional, state, and national sources was included.

The top community health-related needs identified were housing, transportation, behavioral health, equitable access to food, healthcare and community resources, and social isolation.

The top 10 priorities identified during this community health needs assessment, in descending order: 1) Behavioral Health, 2) Child Maltreatment and neglect, 3) Economic Instability, 4) Affordable health care, 5) Lack of Transportation, 6) Access to local healthcare (i.e., primary care, emergency, or after hours), 7) Housing & Homelessness, 8) Equitable access to food, 9) Physical, Mental, Sexual Abuse and Threats of Violence, and 10) Lack of childcare.

Some behavioral health highlights of Trust beneficiary-related data include negative indicators of behavioral health functioning, especially during the COVID-19 pandemic. Before the pandemic, households experiencing depression increased from eight percent in 2016 to almost a quarter in 2020. During the pandemic, approximately 66% of respondents reported feeling sad or depressed than usual, and over half (52.1%) reported experiencing more worry or stress than usual about paying bills or expenses. Nearly 16% of those surveyed during the pandemic said someone in their house needed mental health or drug and alcohol services, of which 80% indicated an additional need for outpatient counseling and individual therapy services. There was an increase in alcohol or drug use, with over a quarter (27%) of those surveyed reporting using alcohol or drugs to cope, while 21% said more alcohol use in their household than before the pandemic. Entering the pandemic in 2020, the suicide mortality rate was 30.9 per 100,000, higher than the state rate of 27.9 per 100,000.

Mat-Su Health Foundation- 2022 Mat-Su Community Health Needs Assessment - Project

Recommendations: This project has concluded, and the Mat-Su Health Foundation has submitted the report and implementation plan to the United States Internal Revenue Service as required. They have begun the implementation of recommendations from the assessment. The Trust has the Community Health Needs Assessment and Implementation Plan and is using it to inform our FY25 budget development process. The assessment results and implementation plan are active for three years when an updated assessment and implementation plan will be required. If approached at that time, it is recommended that the Trust should consider providing funding and staff resources to support this project.

Alaska Injury Prevention Center – Overcoming ACES with Resilience Survey - Summary of Grant Progress:

This grant aims to implement a survey developed by the DOH Division of Public Health to gather data on adverse childhood experiences (ACEs) and opportunities for resilience in Alaska. The survey includes questions asking about Trust beneficiary status. This project is the first phase of a two-phase initiative focused on gathering ACEs data from adults that will be used to inform prevention and intervention-related programs, policy, and funding decisions for the Trust, Division of Public Health, and community organizations. This phase will gather a baseline data set, which will be compared to data collected during a second phase in FY25.

The intended goal of this grant was to support critical state and community partners in gathering data to assist in forecasting the needs of Trust beneficiaries. This project focuses on developing systems-level data and does not intend to provide direct beneficiary services.

This project is essential to the Trust as an opportunity to gather current information about adverse childhood experiences and opportunities for resilience across a broad and diverse sample of Alaskans. It provides valuable systems-level data addressing a specific Comp Plan goal and objective. It will inform Trust focus areas and priority initiatives in the budget, systems programming, funding, and policy decision-making. It is anticipated that results will be able to be used in the FY26/27 Trust budget development process.

Shortly after the grant award in May 2023, the grantee worked with a contractor to implement a statewide text message-based internet survey. Data has been collected and is currently in the analysis stage of the project. Results from the current phase are anticipated in FY24.

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| Alaska Injury Prevention Center – Overcoming ACES with Resilience Survey - Comp Plan Information: | | |
| | Goal | Objective |
| | Goal 9 Workforce, Data, & Funding | 9.5 Data-driven decision making |
| Alaska Injury Prevention Center – Overcoming ACES with Resilience Survey Relevant - Comp Plan Goals and Objectives: | | |
| <p>There are two relevant Comp Plan goals and associated objectives for this project. The first is Goal 9, Workforce, Data, and Funding, and Objective 9.5, Data-driven decision making. This project collects baseline data on adverse childhood experiences and resiliency factors to support Goal 1 Early Childhood, Objective 1.3 Reducing the Impact of ACEs. It will assist in funding, programming, and policy-related decision-making. The results of the current initiative will likely have the potential to impact beneficiaries across other Comp Plan goals and objectives, as well as Trust focus and priority initiative areas.</p> | | |
| Alaska Injury Prevention Center – Overcoming ACES with Resilience Survey - Performance Data: | | |
| <p>The grant was awarded and executed in May 2023, and no formal performance data is available for this project yet. After the grant award, the survey was fielded. The survey was active for approximately two weeks, was received by about 170,000 Alaskans via smartphone, and collected just over 3,000 survey responses. The grantee and staff from the DOH Division of Public Health are currently formatting, cleaning, and analyzing the survey data. We anticipate data analytics will occur over the next several months and will be reported more extensively after the grant in FY24.</p> | | |
| Alaska Injury Prevention Center – Overcoming ACES with Resilience Survey - Project Recommendations: | | |
| <p>Phase I of this project has been initiated. The initial survey data has been collected and is in the process of being analyzed, and the results of the analysis are anticipated in FY24. Results will be available before the implementation of Phase II in FY25, which will gather the comparison data. It is recommended that the project be supported until completion at the end of FY25. The results will inform the FY26/27 Trust budget development process. After Phase II, explore whether there needs to be further data collection or a plan for future data collection to track trends and the impact of funding, programmatic, or funding policy decisions. It is possible that future funding requests, separate from survey data collection, will arise out of the results and should be considered at that time.</p> | | |

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| Project Title: Scorecard Update | | |
| Grantee: Division of Public Health | | |
| Fund: MHTAAR | | |
| Years Funded: 10 | Project Category: Data/Planning | |
| FY22: \$42,300 | FY23: \$40,000 | FY24: \$40,000 |
| Project Description: Staff of the Department of Health, Division of Public Health (DPH)- Health Analytics & Vital Records will work closely with Trust staff to collect and update the information on the Alaska Scorecard and ensure there is consensus on how the data is portrayed and disseminated. | | |
| <p>The Alaska Scorecard follows the Results-Based Accountability (RBA) framework, which consists of:</p> <ul style="list-style-type: none"> • Indicators with progress scoring and beneficiary prevalence information that portrays the most current trends in the data. • A description of data sources and a brief explanation of the data trend and the current scoring of | | |

progress.

- A short “drill down” backup narrative for each indicator that provides:
 - An updated data baseline graph and a trendline explain how we are “turning the curve.”
 - Addresses the prevalence estimates of Trust Beneficiaries, which provides a “summary and explanation” section that includes graphs if relevant, basic interpretive information and trends about each of the prevalence items, and any relevant related issues and programs.

The DPH unit will utilize new staff as well as the experience of the staff that have managed updates in previous years. DPH staff will work with Trust staff to assist Trustees and other stakeholders in reviewing the draft of the Scorecard and supporting information.

Specifically, funds are to be used by the Department of Health, Division of Public Health (DPH) - Health Analytics & Vital Records to:

- 1) Update the data and other detailed information for the indicators and prevalence sections of the Alaska Scorecard.
- 2) Participate and assist in the data and stakeholder workgroup process to a) review and revise the scorecard indicators as identified by the process, and b) review and revise data and data sources as appropriate.
- 3) Participate and assist in the data and stakeholder workgroup process to review the status of relevant prevalence estimates.

Summary of Grant Progress:

The Alaska Scorecard is a data measurement tool supporting DOH capacity. It is a tool that examines the population health outcomes of Alaskans receiving care and services as described in Strengthening the System. The Scorecard is used primarily by grant writers, policymakers, and advocates. In FY2020, the revised Alaska Scorecard was published with new indicators and narratives consistent with the goals outlined in Strengthening the System. The Scorecard is updated annually with the most recent data available at publication. The tool itself does not have a “direct” impact on beneficiaries from a direct service standpoint. Still, the data drives funding and influences programmatic decisions that directly impact beneficiaries. The Scorecard was successfully updated on time during the Grant cycle, and no significant challenges arose. The most pressing challenge is collecting data from all necessary sources; often nationally-based sources are frequently delayed.

Comp Plan Information

| Goal | Objective |
|-----------------------------------|---------------------------------|
| Goal 9 Workforce, Data, & Funding | 9.5 Data-driven decision making |

Relevant Comp Plan Goals and Objectives:

The Alaska Scorecard is used for tracking critical indicators about the population served by the Comprehensive Integrated Mental Health Program as outlined in the Strengthening the System Plan. While the Scorecard is closely connected to all goals and objectives, it is primarily aligned with 9.5 Data-driven decision making.

Performance Data:

The Strengthening the System, i.e., the comp plan, is measured and evaluated by population health data through the use and design of the Alaska Scorecard. The Alaska Scorecard is the evaluation tool that displays all the data necessary to promote system change for beneficiaries. This system change enhances the vision that “Alaskans receive comprehensive prevention, treatment, and support services at the appropriate level of care across the lifespan, leading to meaningful lives in their home communities.” Regarding results-based

accountability: How much did we do – one Alaska Scorecard was updated and published on time, per the grant. How well did we do it- The Scorecard is downloaded and utilized approximately- 4200 times per year, indicating it is well used. Is anyone better off -The tool itself does not have a “direct” impact on beneficiaries from a direct service standpoint. Still, the data drives funding and influences programmatic decisions that directly impact beneficiaries.

Project Recommendations:

The plan for the next year includes continued funding, particularly during the critical phase of planning for a new comp plan launch in FY25. Following the implementation phase of the new comp plan in FY26, the corresponding Scorecard will need to be updated by FY27 to reflect any new measures. An evaluation should be conducted to determine appropriate funding levels and recommendations to continue this project. The Trust intends for this project to eventually be funded completely by DOH, but that may not be realized for several more years.

Project Title: Comprehensive Program Planning Coordinator

Grantee: Division of Public Health

Fund: MHTAAR

Years Funded: 4 **Project Category:** Data/Planning

FY22: \$75,600 **FY23:** \$75,000 **FY24:** \$75,000

Project Description: In FY20, in conjunction with the Trust, DHSS updated and implemented the Strengthening the System, Alaska’s Comprehensive Integrated Mental Health Program 5-year plan. The plan, required by statute, outlines the priorities and infrastructure needed for the next five years to inform program, planning, and funding decisions. The new position in DHSS was created in FY21 and reclassified in FY22 due to both recruitment and retention concerns. The position will likely have a successful candidate fill the role in FY23. Once the successful candidate is on board, they will prioritize working collaboratively with Trust staff will build needed capacity within DHSS. The additional capacity will facilitate, manage, and coordinate resources necessary to ensure ongoing implementation, evaluation, and monitoring of the Comprehensive Integrated Mental Health Program plan.

Summary of Grant Progress: The Comprehensive Program Planning Coordinator is responsible for coordinating the planning, implementation, and evaluation of the Mental Health Comp Plan in collaboration with internal and external stakeholders.

The role of the coordinator is to improve programs and systems that benefit all types of beneficiaries indirectly. This position is crucial for advancing the integrated mental health program and guiding funding priorities. It plays an essential role in collaboration with the Department of Health (DOH) and the Department of Family and Child Services (DFCS) to support the mission of the Trust.

Over the past four years, the position has faced numerous challenges, including turnover, COVID-19, workforce shortages, administrative changes, a cyber-attack, and a department’s bifurcation. However, on June 1, 2023, a successful hire was made, and the coordinator is currently onboarding and aligning projects with the Alaska Comprehensive Integrated Mental Health Plan. Close collaboration with the Trust, the Department, and Comp Plan partners is vital for achieving system impact. Despite the challenges and setbacks, the foundational goal of securing a permanent and upgraded position was accomplished.

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| Comp Plan Information | |
| Goal | Objective |
| Goal 9 Workforce, Data, & Funding | Not associated with an objective |
| <p>Relevant Comp Plan Goals and Objectives: The Comprehensive Program Planning Coordinator is the workforce coordinator responsible for facilitating the Comp Plan document. While the position is closely connected to all goals and objectives, it is primarily aligned with Goal 9, which focuses on Workforce, Data, and Funding. This alignment is mainly for budget coding purposes.</p> | |
| <p>Performance Data: The project has faced challenges related to staffing and subsequent position vacancies, resulting in a lack of achievement in most performance measures and underutilization of grant funding. A well-coordinated plan with the right hiring choice for the position will produce secondary performance data that will be used for timely decision-making at the programmatic level. The Comp plan will be measured and evaluated by population health data through the use and design of the corresponding Alaska Scorecard. Thus, the coordinator position, the Comp plan, the integrated program, and the Alaska Scorecard evaluation tool all fit together to promote systems change for beneficiaries. This system change enhances the vision that “Alaskans receive comprehensive prevention, treatment, and support services at the appropriate level of care across the lifespan, leading to meaningful lives in their home communities.”</p> | |
| <p>Project Recommendations: We anticipate that the coordinator role will bring value beyond Trust funding, with the coordinated plan for beneficiaries having an immeasurable lasting impact. DOH and DFCS Leadership also endorse the value and impact of this position and are matching funds. It is recommended to maintain the partnership and ensure the success of the newly hired Comprehensive Program Planning Coordinator by continuing funding for this position.</p> <p>The plan for the next year includes continued funding, particularly during the critical phase of planning for a new comp plan launch in FY25. Following the implementation phase of the new comp plan in FY26/FY27, an evaluation should be conducted to determine appropriate funding levels and recommendations to continue this project. Eventually, the Trust intends for this project to be fully funded by DOH, but that will be in the future as the current collaborative funding model is productive.</p> | |

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| Project Title: Alaska Health Workforce Profile | | |
| Grantee: Department of Labor and Workforce Development | | |
| Fund: MHTAAR | | |
| Years Funded: 8 | Project Category: Workforce Development/Training | |
| FY22: \$25,000 | FY23: \$25,000 | FY24: \$25,000 |
| <p>Project Description: The Department of Labor and Workforce Development's (DOLWD) Research and Analysis Section will focus on conducting workforce data analyses related to Trust beneficiaries and on maintaining the databases that make those analyses possible.</p> <p>Having access to data and analytical capacity is vital for the Trust to fulfill its mission and allow the Trust to forecast and plan for addressing the needs and improving the circumstances of beneficiaries.</p> | | |

The emphasis of this project will be to provide information to help forecast and plan for addressing the needs of beneficiaries.

Trust staff will work with DOLWD staff to identify discrete analyses that can be conducted either for the Trust directly or with other partners (previous collaborative projects with Trust funding have included the University of Alaska, for example), and collaborate on the dissemination of results. The work will continue to emphasize a broad definition of health care to include behavioral health and home and community-based services occupations. Growth in those occupations has been especially strong and expected to persist in the coming decade due to the aging population and aging workforce.

Where possible, it is the intent of this collaboration is to analyze and interpret the substantial amount of information that has already been produced in previous phases of this collaboration between the Trust, the University of Alaska, and DOLWD. This work will also integrate additional information, available from a wide variety of sources, to identify useful conclusions for the healthcare workforce development community (advocacy groups, policymakers, training providers, and career counselors, among others).

Summary of Grant Progress: Workforce development is a significant factor that negatively impacts Trust beneficiaries' access to a complete continuum of care. A lack of a competent and qualified workforce leads to a decreased quality of life and frequently results in beneficiaries receiving services in the most restrictive and costly settings. This project is important to the Trust as it allows for collaboration between DOLWD and the Trust to identify workforce-related data and analytics that can be used in forecasting the needs of Trust beneficiaries. The intended impact of this project is to support a collaboration that ensures data and analytical resources are available for use in budget, programmatic, and policy decision-making.

This term's work focused on developing systems-level data and capacity development and is not intended to provide direct beneficiary services. DOLWD staff provided consultation and information that assists capacity building and identification of workforce issues across beneficiary serving systems. Successes included providing workforce consultation and trends that might impact planning for Trust beneficiaries and educating Trust beneficiary provider organizations and policymakers about workforce trends to aid in decision-making and planning.

Comp Plan Information

| Goal | Objective |
|-----------------------------------|---------------------------------|
| Goal 9 Workforce, Data, & Funding | 9.5 Data-driven decision making |

Relevant Comp Plan Goals and Objectives: This project's primary Comp Plan goal and associated objectives are Goal 9, Workforce, Data, and Funding, and Objective 9.5, Data-driven decision making. This project creates a resource for workforce development-related data analysis that will support funding, programming, systems, and policy decision-making work across multiple areas of the Trust. Additionally, this resource will impact beneficiaries across other Comp Plan goals and objectives, as well as Trust focus and priority initiative areas.

Performance Data: This grant is for a capacity-building-focused project; while no specific data reports were produced, much of the work was consultative. For example, because of this project, DOLWD staff provided current trends in workforce-related information to community partners and Trust stakeholders such as the Alaska Association for Developmental Disabilities. Throughout the year, DOLWD staff report using the 2016

Alaska Health Care Workforce Profile report, developed for the Trust in partnership with the University of Alaska, to inform DOLWD's work regularly, on a monthly basis. There has been initial dialogue around updating this report. Additionally, the workforce issues related to the senior Trust beneficiaries and the potential needs of the expanding psychiatric crisis continuum of care have been raised.

Project Recommendations: As many Trust beneficiary systems of care are experiencing significant challenges and the potential closing of services, the Trust needs access to technical experts who can provide data and analytics. The Trust relies on others to generate and deliver data as a data consumer. It considers the DOLWD Research Division a critical resource in supporting the *Comprehensive Integrated Mental Health Program Plan*.

Given significant changes and issues impacting the Trust beneficiary-related workforce, to ensure ongoing access to this resource, it is recommended that this project continue to be funded in FY24/FY25. In the coming year, the project will explore the need to update the Alaska Health Care Workforce Profile report to reflect current needs for supporting a complete continuum of care for Trust beneficiaries and the potential for producing a series of Trust beneficiary workforce-related reports in the DOLWD *Trends* journal.

Given the depth of workforce development issues across systems of care, continued access to this resource is recommended. At this time, there is no planned exit strategy anticipated. However, the need for this resource will continue to be monitored to determine if any increase, or decrease, in funding is required.

Project Title: Beneficiary Mental Health Data Collection

Grantee: DOH Division of Public Health

Fund: MHTAAR

Years Funded: 3

Project Category: Data/Planning

FY22: \$45,000

FY23: \$45,000

FY24: \$85,000

Project Description: The intent of the Beneficiary Mental Health Status Data Collection project is to ensure there is Alaska-specific data about the mental health status of Trust beneficiaries. The DOH-Division of Public Health, Section of Chronic Disease Prevention and Health Promotion will use these funds to support the administration, outreach, collection, and analysis of Alaskan data through the Behavioral Risk Factors Surveillance System (BRFSS), the Youth Behavioral Risk Behavior Surveillance System (YRBS), and School Health Profiles. BRFSS funding will be consistent as an annual survey, while remaining funds may be allocated between the YRBS and School Health Profile programs differently in bi-annual cycles due to survey fielding occurring in alternating years.

Summary of Grant Progress: This project is essential to the Trust to assist in forecasting the needs of Trust beneficiaries. The intended impact of this project is to support public health data surveillance surveys that provide system-related data about the mental health status of Trust beneficiaries across the lifespan. It focuses on developing systems-level data and does not intend to provide direct beneficiary services. The data collected from this portfolio of surveys are used in various ways, including the monitoring, evaluation, and implementation of the Department of Health's *Comprehensive Integrated Mental Health Program Plan*, and highlighted in the Alaska Scorecard.

The BRFSS and YRBS surveillance systems are in a continuous cycle of survey preparation, implementation,

data collection, and analysis. Data is collected by the Division of Public Health, submitted to the Center for Disease Control and Prevention (CDC) for processing, and returned to the State. The BRFSS program completed data collection from the 2022 survey and is awaiting results from the CDC for secondary analysis. The data collection for 2023 has been in process. There were no challenges related to the BRFSS; however, there will likely be challenges related to increased costs for contracting surveyors in the future.

The YRBS completed its 2023 questionnaire development process, recruited participant school districts and schools, and initiated data collection. The data is to be submitted to the CDC in June. Challenges have been experienced in recruiting schools to participate, and several districts that have previously participated have opted out, which may affect the representativeness of the statewide results. Additionally, there was staff turnover that created some challenges during the survey administration period.

Comp Plan Information

| Goal | Objective |
|-----------------------------------|---------------------------------|
| Goal 9 Workforce, Data, & Funding | 9.5 Data-driven decision making |

Relevant Comp Plan Goals and Objectives: This project's primary Comp Plan goal and associated objectives are Goal 9, Workforce, Data, and Funding, and Objective 9.5, Data-driven decision making. This project collects data through three different public health surveillance surveys that will inform the State and Trust about the behavioral health status of Trust beneficiaries across the life span. The results of these surveys will be used to forecast the needs of Trust beneficiaries and to assist in funding, programming, and policy-related decision-making. The results of the current initiative will likely have the potential to impact beneficiaries across other Comp Plan goals and objectives, as well as Trust focus and priority initiative areas.

Performance Data: Performance data is limited now, as the Division of Public Health is waiting for results on the BRFSS from the CDC and submitting YRBS data to the CDC.

The BRFSS program completed data collection from the 2022 survey and exceeded their sample size target of 5,470 responses by five percent and is awaiting results for secondary analysis. The Division of Public Health, in partnership with the Alaska Native Tribal Health Consortium Native Epidemiology Center, stood up the Alaska BRFSS Data Center. This interactive data platform allows a user to query specific data questions. While it does not include the current year's data, it will assist in FY24. It does contain mental health data for 2019-2021. During 2019-2021, approximately 12.9% of Alaskans surveyed reported their mental health was not good for two or more weeks in the past 30 days, and 19% reported depression at some point in their lifetime. In the past 30 days, 19.1% reported heavy or binge drinking, 2.8% reported drunk driving, 19.9% reported marijuana use, and 7.9% reported opioid use. Additionally, 9.7% of adults surveyed reported confusion or memory loss in the past year.

Future years of BRFSS data will be incorporated into the data center, allowing trending analysis, and they are considering the addition of other data sets into the query system.

Project Recommendations: While parts of this project experienced some challenges, it successfully met its intended purpose. The collected mental health status data greatly benefits the tracking, monitoring, and implementation of the Department of Health's *Comprehensive Integrated Mental Health Program Plan*. This item is currently in the Trust's approved FY24 and FY25 budgets. In FY24 and FY25, additional funds were added to support the cost of potential community partners' Trust beneficiary-related proposals for other questions to the following year's survey.

The current funding has been proposed through FY28, with an exit strategy of increasing the base General Fund/Mental Health allocation to reduce Trust MHTAAR funding if possible. Given continued challenges to the State's fiscal situation, the exit from MHTAAR funding may be delayed.

To ensure the Trust maintains access to this data source to keep a representative sample available, continued support of this project is recommended at this time.

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| Project Title: Essential Program Equipment | | |
| Grantee: DOH Finance and Management Services | | |
| Fund: MHTAAR | | |
| Years Funded: 9 | Project Category: Capital - Equipment | |
| FY22: n/a | FY23: \$300,000 | FY24: n/a |
| <p>Project Description: Agencies providing services to Mental Health Trust beneficiaries need equipment to improve their service delivery's effectiveness, efficiency, and quality. Program equipment needs may include therapeutic equipment, computers, copiers, furnishings and general office equipment, security systems, and distance delivery technology or systems. Proposals will be solicited from service providers for all five beneficiary groups. This grant program has provided agencies with equipment (limited to \$25,000 per agency) that has significantly improved agencies' operational efficiencies. All funds are awarded through a statewide competitive process.</p> | | |
| <p>Summary of Grant Progress: The Trust supports this capital funding biannually to enable organizations serving trust beneficiaries opportunities to address essential equipment needs through grants administered by the Department of Health. This grant does not provide direct services to beneficiaries. It improves the capacity of beneficiary-serving organizations. There are twelve grants still active from FY22 funding. Thirty-seven applications were received for the FY23 solicitation. The most common requests were for mobile computer equipment: laptops, tablets, and similar devices. Printers, telehealth equipment, and security systems are other examples of items purchased through this grant. The Essential Program Equipment project is a Non-Focus Area Allocation as it supports agencies implementing programs across multiple focus areas.</p> | | |
| Comp Plan Information | | |
| | Goal | Objective |
| | Goal 9 Workforce, Data, & Funding | 9.4 Technology investments |
| <p>Relevant Comp Plan Goals and Objectives: This project optimizes information technology investments to improve process efficiency.</p> | | |
| <p>Performance Data: There are 12 active grants from FY22 funding. Thirty-seven applications were received for the FY23 solicitation. To ensure Trust beneficiaries maximally benefit from this grant, a re-evaluation of future funding with the Department of Health is recommended for funding beyond FY25.</p> | | |
| Project Recommendations: | | |

The Essential Program Equipment project is recommended for Trust funding paired with a GF/MH recommendation in FY25 with a re-evaluation of future funding with the Department of Health for funding beyond FY25. The project was initially implemented to help provide funding to agencies implementing electronic health records and has since modified its purpose over the years. While grant funds are in high demand, this project may need to narrow or change its focus to show the impact on Trust beneficiaries more directly. Discussions with the Department will include the effect of changing or discontinuing funds if either of those recommendations is made.

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| Project Title: Traumatic & Acquired Brain Injury Advisory Council Staff | | |
| Grantee: University of Alaska Anchorage, Center for Human Development | | |
| Fund: MHTAAR | | |
| Years Funded: 3 | Project Category: Capacity Building | |
| FY22: \$105,000 | FY23: \$105,000 | FY24: \$105,000 |
| <p>Project Description: This project funds a research professional position to support the Statewide Traumatic and Acquired Brain Injury (TABI) Advisory Council. This position is responsible for supporting the Brain Injury Program Director in coordination between the TABI Advisory Council and Trust, including gathering data for reporting, coordinating advocacy and planning, and preparing grant progress reports to the TABI Advisory Council and Trust. This position acts as a liaison with other beneficiary boards and injury prevention groups, leads TABI state plan development and implementation activities, and participates in developing joint advocacy efforts and collaborative projects.</p> | | |
| <p>Summary of Grant Progress: The Traumatic & Acquired Brain Injury Advisory Council Staff project is crucial for building capacity and the continuum of care for beneficiaries with brain injuries. This position supports the implementation of legislation and programs that impact beneficiaries with brain injury and advocates for additional services and supports for this population. It is identified as a Non-Focus Area Allocation in the Trust budget. However, The TABI Advisory Council often advocates for programs that align with the work of the Housing & Home and Community Based Services focus area. The council also advocates for beneficiaries with a brain injury to have access to health care services, behavioral health care services, and a trained workforce to meet the needs of Alaskans with a brain injury. The funding for a coordinator of the council is critical for ensuring stakeholders and beneficiaries with lived experience have a voice in crafting the continuum of care for people with brain injuries; this council uses the Trust funding as a match to leverage federal funding to implement the Alaska State Plan for Brain Injury.</p> <p>A new coordinator was hired in FY23. Meetings and committees have been held consistently, and the new coordinator has a passion for outreach and education, adding these components to the position's work. The Council has made great strides in brain injury awareness and data sharing. The Council continues to advocate for additional services for beneficiaries with brain injury and works with service providers and state agencies to create a more robust continuum of care.</p> <p>Note: The Council voted to change its name in FY23 to the Brain Injury Council of Alaska. The project name will be changed to the "Brain Injury Council of Alaska Staff."</p> | | |

| Comp Plan Information | |
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| Goal | Objective |
| Goal 9 Workforce, Data, & Funding | 9.3 Funding the COMP program |
| <p>Relevant Comp Plan Goals and Objectives: This project ensures funding is available to support Alaska’s Comprehensive Integrated Mental Health Program, targeting programs and services for people with brain injury.</p> | |
| <p>Performance Data: The Brain Injury Council of Alaska, previously known as the Traumatic and Acquired Brain Injury Council, continued progressing on awareness, training, infrastructure, advocacy, and data goals. Highlights of Council and subcommittee work is summarized below.</p> <p>Council Meetings: 6 The Council changed its name to a shorter, more accessible title and chose a logo to brand Council-related materials. Members added an Advocacy subcommittee (details below) and participated in several trainings.</p> <p>Prevention, Awareness, Resources Meetings: 10 A pamphlet was finalized for individuals with brain injury to indicate their symptoms and discuss with their doctor. The PAR also recommended prioritizing youth-focused messaging. This suggestion led to CHD working with Community Engaged Students at the University to create a brain injury social media toolkit in May 2023.</p> <p>Data Meetings: 4 This subcommittee previously agreed to support the CDC staff in completing a comprehensive data report on TBI in Alaska. The first draft of that report is complete and is being reviewed.</p> <p>SAFE Meetings: 6 SAFE members met to review Council agendas and recommend other topics to continue centering the voices of people with lived experience.</p> <p>Infrastructure Meetings: 5 Several brain injury waiver trainings were held. This subcommittee explores the costs, benefits, and challenges of potential brain injury waivers in Alaska.</p> <p>Advocacy Meetings: 1 This new subcommittee will organize in support of legislation, policies, and initiatives to improve the lives of people with brain injury. In their first meeting, they requested the Council’s approval for two letters of support related to bills introduced in this session.</p> | |
| <p>Project Recommendations: The Traumatic & Acquired Brain Injury Advisory Council Staff/Brain Injury Council of Alaska Staff project is recommended for continued funding. Though this council is not a statutory advisor, they are the only council dedicated to statewide advocacy and implementing a full continuum of care for beneficiaries with brain injury. The council includes at least 50% of its council members as beneficiaries with a brain injury and is a critical source of information and advocacy for this beneficiary group that is not represented by the councils, who are the Trust’s statutory advisors.</p> | |

Mental Health and Addiction Intervention Focus Area

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| Project Title: Recover Alaska | | |
| FY23 Grantee: Sultana New Ventures LLC dba The Foraker Group | | |
| Fund: Authority Grant | | |
| Years Funded: 9 | Project Category: Capacity Building | |
| FY22: \$100,000 | FY23: \$100,000 | FY24: \$100,000 |
| <p>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. The overarching goal of this partnership is to reduce the negative impacts of alcohol abuse in Alaska. Critical 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:</p> <ol style="list-style-type: none"> 1. Positive Social Norms Campaigns: Development of 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. Address policy issues that relate to alcohol consumption, industry and public health and prevention. 4. Partnering with Media: Raise awareness of the consequences of excessive alcohol consumption; and provide resource access for all Alaskans to obtain accurate, reliable information about prevention and treatment. <p>RA seeks to align six major funders to create a strategic, effective long-term campaign that changes the social acceptability and prevalence of excessive alcohol consumption.</p> | | |
| <p>Summary of Grant Progress: Recover Alaska (RA) is a community-based advocacy group whose mission is to reduce the impact of alcohol in Alaska through the partnerships of a multi-sector approach on a statewide and regional focus. Recover is funded by a partnership of private-public entities, which provides a strong foundation for supporting the agency’s mission. RA works with community partners around the state in increasing access to care through supporting local coalitions and convenings, taking challenges like workforce vacancies to the legislature through advocacy, sharing success stories of recovery, adding their voice to expanding the peer support workforce, supporting current data and evaluation projects, working on improved communications networks around the state, and supporting other agencies efforts to reduce alcohol misuse, like underage drinking. RA works closely with the Trust and its partners in bringing this critical public health issue to the forefront of community-level action. This is realized through their meeting the requirements of their performance measures. RA successfully educates and advocates for crucial policy legislation that impacts Trust beneficiaries around the issue of substance misuse.</p> | | |
| Comp Plan Information | | |
| | Goal | Objective |
| | Goal 4 Substance Use Disorder Prevention | 4.1 Drug & alcohol misuse prevention |
| <p>Relevant Comp Plan Goals and Objectives: RA’s work and advocacy have helped turn the curve on awareness, knowledge, and changing behaviors around alcohol misuse. This meets the intent of Comp Plan</p> | | |

Goal 4 and Objective 4.1.

Performance Data: 2022 was a momentous year for RA and partners like the Trust. After 11 years of leading the advocacy fight for rewriting Title 4, SB9 was passed by the legislature and signed into law by the Governor. This was a highly collaborative effort, but RA was the leader in making this happen. In addition to SB9, RA was instrumental in supporting the Trust to get HB 172 (Crisis Now) passed as well as other beneficiary related legislation. Getting policy-level changes introduced, championed, and passed into law is no small feat and one that takes the support of a community action-oriented group like RA.

RA in FY 22 also distributed 11 mini-grants to projects throughout the state promoting prevention, celebrating recovery, or expanding access to care for Alaskans. These are locally led activities, and the mini-grant process allows us to support local knowledge and trust that they know what they need. We also revamped our application process to prioritize projects led by people with lived experience, minoritized populations, and/or young people.

Project Recommendations: It is recommended by Trust staff to fund RA in FY 25 and explore future reductions in Trust funding support as the organization successfully diversifies funding and progresses with successful fund development. Recover Alaska is exploring nonprofit status, which will enable the organization to receive donations directly.

Project Title: Treatment Access & Recovery Supports

FY23 Grantees (through 4/26/2023):

- Alaska Behavioral Health Association – ABHA Renewal, \$100,000
- Alaska Hospital & Healthcare Association – Alaska Contingent to the National Update on Behavioral Emergencies Conference, \$10,000
- Christian Health Associates – Anchorage Project Access Pro Bono Counseling Project, \$100,000
- LINKS Mat-Su Parent Resource Center – High Utilizers Mat-Su (HUMS), \$50,000
- Maniilaq Association – Behavioral Health Crisis Stabilization Center, \$200,000
- True North Recovery – Day One Center Medical Providers, \$255,000

Fund: Authority Grant

Years in Budget: 9

Project Category: To be determined based on individual project type

FY22: \$750,000

FY23: \$1,000,000

FY24: \$1,000,000

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.

Alaska Behavioral Health Association – ABHA Renewal: Summary of Grant Progress:

The Alaska Behavioral Health Association is the leading trade entity representing behavioral health (BH) treatment access and care across the state of Alaska. ABHA represents over 70 BH organizations and is a key partner with the Trust in working together with the SOA DOH and DFCS in creating a system of care for beneficiaries. ABHA has undergone a strategic evaluation and assessment of its leadership and the role that they play in the BH system of care in the state. The outcome of the evaluation process led the ABHA staff and executive team to request funding support from the Trust, to be used in increasing the operational leadership of ABHA.

Over the last six months, ABHA has hired a permanent CEO and COO, who both have rural tribal BH treatment experience and are considered leaders in the state in providing treatment and care to beneficiaries. Both individuals have coordinated with the Trust and other BH stakeholders in working with the state to improve Medicaid reimbursements through the 1115 waiver to agencies who are providing those services. They were also instrumental in convening stakeholder meetings this spring with ABHA members in discussing the 1115 waiver regulation package, which was out for public comment. ABHA facilitated the meetings and delivered a comprehensive comment package from the association representing most of its membership, including the Trust. This level of leadership and collaboration has established a new standard for ABHA in helping BH agencies get their voice heard by the Department of Health and its divisions. This is what is needed in the current landscape where access to care, funding payments, and workforce are all critical issues hampering the work of BH staff statewide. This Trust-funded support has enabled ABHA to expand and work to increase its capacity and ability to support its members with operational-specific measures that enable them to continue providing treatment services to beneficiaries.

Alaska Behavioral Health Association – ABHA Renewal: Comp Plan Information

| Goal | Objective |
|-------------------|---|
| Goal 2 Healthcare | 2.1 Access & receive quality healthcare |

Alaska Behavioral Health Association – ABHA Renewal: Relevant Comp Plan Goals and Objectives: ABHA is the trade association for tribal and non-tribal BH providers statewide, so working with them to enhance and expand their services helps beneficiaries get care at the right time, place, and least intrusive. Increased access through the work of ABHA supports Comp Plan goal 2 and objective 2.1, by increasing access to healthcare services through its association members.

Alaska Behavioral Health Association – ABHA Renewal: Performance Data: ABHA was able to utilize the grant to fund the recruitment and retention of a full-time Chief Operating Officer, who joined the staff and immediately provided the support needed to facilitate a formal and comprehensive written response to the DBH regarding the new Medicaid 1115 waiver regulation package. The response was over 30 pages and contained comments from various members, rural and urban.

Alaska Behavioral Health Association – ABHA Renewal: Project Recommendations: This grant ends in August 2023, and any new funding decisions will be based on how the association is utilizing its increased operational capacity to improve access to care for its members, as well as looking at how beneficiaries’ lives are better off or not in connection to ABHA’s enhanced capacity.

Alaska Hospital & Healthcare Association (AHHA)– Alaska Contingent to the National Update on Behavioral Emergencies Conference: Summary of Grant Progress: The AHHA grant supported healthcare clinicians from Alaska to attend the National Update on BH Emergencies conference. The group learned about current best practices in emergency health treatment and how it relates to crisis services being delivered across Alaska. The intent of the group is to bring this information back to Alaska and help facilitate progress and meaningful change in improving the crisis continuum of care.

Upon returning to Alaska, this group met with a group of thought leaders around the Crisis Now initiative and how they can support the CN work from hospitals and clinics across the state. The deliverables for this funding were met and the dialogue and support from this group in partnership with the CN team are ongoing, so they have exceeded the performance measures outlined in the grant agreement.

Alaska Hospital & Healthcare Association – Alaska Contingent to the National Update on Behavioral Emergencies Conference: Comp Plan Information

| Goal | Objective |
|---------------------------|-------------------------------|
| Goal 5 Suicide Prevention | 5.2 Crisis system improvement |

Alaska Hospital & Healthcare Association – Alaska Contingent to the National Update on Behavioral Emergencies Conference: Relevant Comp Plan Goals and Objectives: AHHA’s work with the clinician group that attended the conference has been furthering the improvement of the crisis system of care by utilizing learned best practices in the emergency room in connection to community-based care within the CN system and framework. This supports Comp Plan Goal 2, objective 2.1 by informing current clinicians about how to enhance their practices and increase access to care.

Alaska Hospital & Healthcare Association – Alaska Contingent to the National Update on Behavioral Emergencies Conference: Performance Data:

AHHA has followed through on the performance measures for this grant, as well as exceeded the expectation for collaborating with the CN team. Those meetings and discussions on improving crisis services across the state are ongoing.

Alaska Hospital & Healthcare Association – Alaska Contingent to the National Update on Behavioral Emergencies Conference: Project Recommendations: The work of AHHA members, SOA DOH, and the Trust will continue to move forward with collaborating on improving crisis services to Trust beneficiaries. The benefit of engagement of this sector has led to improved collaboration across providers engaged in psychiatric care in hospital settings across Alaska. Progress on this improvement will be re-assessed and consideration of future funding will be evaluated at that time.

Christian Health Associates – Anchorage Project Access Pro Bono Counseling Project: Summary of Grant Progress: Alaska Project Access (APA) is the only safety net healthcare program in the state that provides the full array of medical/behavioral health services to uninsured Trust beneficiaries. The APA also works to get beneficiaries enrolled with insurance services like Medicaid. APA is working to enroll the 40,000 Alaskans who are not insured and not on Medicaid, this is important as many of these people are Trust beneficiaries and could receive services.

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| Christian Health Associates – Anchorage Project Access Pro Bono Counseling Project: Comp Plan Information | |
| Goal | Objective |
| Goal 2 Healthcare | 2.1 Access & receive quality healthcare |
| Christian Health Associates – Anchorage Project Access Pro Bono Counseling Project: Relevant Comp Plan Goals and Objectives: The APA meets the intent of Comp Plan goal 2, ensuring access to healthcare treatment at the right time and place by enrolling beneficiaries in Medicaid insurance, as well as providing services. | |
| Christian Health Associates – Anchorage Project Access Pro Bono Counseling Project: Performance Data: This grant project with CHA is in the beginning months of the project, and data will be available. | |
| Christian Health Associates – Anchorage Project Access Pro Bono Counseling Project: Project Recommendations: Once some data metrics are available around the project’s outcomes, program staff will then evaluate the results and apply those to any future grant request. | |

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| LINKS Mat-Su Parent Resource Center – High Utilizers Mat-Su (HUMS): Summary of Grant Progress: The HUMS project is primarily funded by the Mat-Su Health Foundation. The HUMS project resulted from evaluation studies on the utilization of the Mat-Su Regional Hospital emergency room, which showed that 100-200 individuals were using the ER 5-10 times a month, and a few were using it upwards of 50 times a month. This high utilization of the ER by a few Mat-Su residents was costing a great deal of funding. The HUMS idea was in response to this high usage. HUMS employs a clinical director who oversees 3-4 community health workers who engage with the top 100 high utilizers of the ER. They build a relationship with them and provide case management support with a focus on keeping them in the community and building up the needed resources that each individual needs. The Trust funding has allowed the HUMS program to expand and work towards building a more sustainable model through the potential of becoming an agency that bills for services. This program component is in progress with the hope of billing for services over the next 1-2 years. | |
| LINKS Mat-Su Parent Resource Center – High Utilizers Mat-Su: Comp Plan Information | |
| Goal | Objective |
| Goal 5 Suicide Prevention | 5.1 Suicide prevention system |
| LINKS Mat-Su Parent Resource Center – High Utilizers Mat-Su: Relevant Comp Plan Goals and Objectives: The HUMS program equips beneficiaries with the resources in the community so that they do not need to end up in the ER every time a need arises. This meets the intent of objective 5.1 of the Comp Plan. | |
| LINKS Mat-Su Parent Resource Center – High Utilizers Mat-Su: Performance Data: The HUMS program has successfully diverted over 90% of their HUMS clients from relying on the ER when a BH need develops. This system provides the safety net services needed for each individual’s network for support to engage with them before needing the ER. | |

LINKS Mat-Su Parent Resource Center – High Utilizers Mat-Su: Project Recommendations: The HUMS program has produced outcomes that help beneficiaries with their community support network, which means they are better off not relying on the ER for care. It is recommended to continue funding the HUMS program in FY 25.

Maniilaq Association – Behavioral Health Crisis Stabilization Center: Summary of Grant Progress: Maniilaq recently received a grant award approved by the Trustee Board for Crisis Now planning and implementing the crisis services in Kotzebue. This award will allow Maniilaq to pursue technical assistance from contractors who have expertise in the CN model, as well as business modeling skills around Medicaid reimbursements. This will work starting in the summer of 2023 and help build an integrated crisis care program.

Maniilaq Association – Behavioral Health Crisis Stabilization Center: Comp Plan Information

| Goal | Objective |
|---------------------------|-------------------------------|
| Goal 5 Suicide Prevention | 5.2 Crisis system improvement |

Maniilaq Association – Behavioral Health Crisis Stabilization Center: Relevant Comp Plan Goals and Objectives: The Maniilaq grant will support a crisis system of care that improves assistance to individuals in crisis. Maniilaq clinical staff and contractors will develop a crisis response system of 23-hour stabilization and short-term crisis residential beds that will support beneficiaries in crisis at the community level.

Maniilaq Association – Behavioral Health Crisis Stabilization Center: Performance Data: Maniilaq will use this money to hire a staff support and CN contractors for the purpose of planning and implementing a CN program in Kotzebue over the next 12 months.

Maniilaq Association – Behavioral Health Crisis Stabilization Center: Project Recommendations: This grant project is the first rural hub village program for learning how to adapt the CN model to a region that is remote and struggles with how to support a person with a BH crisis. It is recommended by Trust staff to continue supporting this project and, depending on the outcomes from this grant, look at supporting future endeavors that help stabilize beneficiaries in their home communities.

True North Recovery (TNR) – Day One Center Medical Providers: Summary of Grant Progress: TNR utilized the Trust funding grant to pay for two FTE nurse practitioners whose role is to medically oversee and manage the operational start-up of an 8-bed withdrawal management treatment center (Day 1) in Wasilla. This facility is the first of its kind in the Mat-Su. Agnew::Beck provided the business modeling for TNR around this facility and helped them establish a program that could sustain itself without future funding beyond what was reimbursable under insurance.

The withdrawal management beds opened in early 2023 and have provided services for needy Trust beneficiaries. In a recent site visit during May 2023, the Trustee Board was able to visit the Day 1 Center and hear from two beneficiaries who have received care there. At the time of the site visit, all 8 beds were full. The Day 1 Center is fully staffed, and the Trust grant funds are being utilized in funding the two nurse practitioner FTEs.

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| True North Recovery – Day One Center Medical Providers: Comp Plan Information | |
| Goal | Objective |
| Goal 4 Substance Use Disorder Prevention | 4.3 Treatment & recovery access |
| True North Recovery – Day One Center Medical Providers: Relevant Comp Plan Goals and Objectives: The TNR withdrawal management program meets objective 4.3 of the comp plan in that it helps expand access to critical residential beds for SUD withdrawal. This is a vital service in the continuum of care and one that did not exist in the Mat-Su before the opening of Day 1. | |
| True North Recovery – Day One Center Medical Providers: Performance Data: The Day 1 Center has 8 beds, and TNR has been operating them for the last four months, with a utilization of 7.2 beds during this review period. | |
| True North Recovery – Day One Center Medical Providers: Project Recommendations: This was a one-time funding request. Projects like the Day 1 Center meet the mission of the Trust and the Comp Plan by expanding access to care and treatment. It is the recommendation of Trust staff to support future projects like this one in FY 25. | |

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| Project Title: Crisis Continuum of Care | | |
| FY23 Grantees (through 4/26/2023): | | |
| <ul style="list-style-type: none"> Alaska Behavioral Health – Fairbanks Mobile Crisis Team, \$801,039 City of Fairbanks – Crisis Now Community Coordinator, \$100,000 Copper River Native Association – Mobile Integrated Village Health, \$391,089 Mat-Su Health Foundation, Mat-Su Multi-Disciplinary Team Cloud9 Implementation & Pilot Project, \$50,000 Providence Health & Services – Crisis Stabilization Center – Phase II Planning & Development, \$1,554,269 True North Recovery – Wasilla Mobile Crisis Team, \$499,591.24 | | |
| Fund: Authority Grant | | |
| Years in Budget: 4 | Project Category: Multiple | |
| FY22: \$4,500,000 | FY23: \$4,215,000 | FY24: \$4,000,000 |
| Project Description: The Trust along with other partners has 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 the 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. | | |

Alaska Behavioral Health – Fairbanks Mobile Crisis Team: Summary of Grant Progress: The mobile crisis team (MCT) in Fairbanks is operated by AK Behavioral Health (AKBH), which is part of the Crisis Now

Continuum of Care. The Crisis Now model is a three-pronged approach: crisis call center, MCT, and crisis stabilization center (CSC). Fairbanks has access to the call center and MCT. The CSC is in the planning stages at the community level. The Crisis Now MCTs are dispatched to anyone having a behavioral health crisis with support from emergency services when warranted. All Trust beneficiary groups fall into this category of potential help.

The MCT is dispatched by the 911 dispatcher located at the Fairbanks Emergency Communications Center. 911 dispatched over 700 behavioral health (BH) crisis calls to the MCT in year 1. Currently, about six months of data have been collected on the MCT in year 2 of funding, where they have been dispatched over 400 calls. In both data sets for year 1 and mid-year 2, the MCT is resolving 82% of the callouts in the community. This means law enforcement and the hospital were not the endpoints for the Trust beneficiary who was in crisis. The MCT was able to meet their needs in the community and provide follow-up care. This is a success as it exceeds the SAMHSA benchmarks for resolving the BH crisis in the community without the need for more restrictive and costly interventions.

The Fairbanks MCT is on course to triage 700-800 people in the community who are experiencing some level of BH crisis. The MCT is exceeding national benchmarks, which is a significant outcome since MCTs did not exist in Alaska prior to the launch of this MCT in Fairbanks. There are also additional significant data points that reflect the support provided by the MCT teams in the region. 40% of the people who responded to in community were provided follow-up care by a peer support specialist (PSS). 32% of the individuals who responded to in community were provided with an immediate referral for care. 30% of the individuals who responded to in community were able to work with the clinician in building a crisis safety plan. The MCT team is also expanding its reach outside of the city limits as the airport police have begun utilizing the BH support of the team on the grounds of the international airport terminal. The Alaska State Troopers have also begun calling on the MCT for assistance in their jurisdiction as well. These are all important aspects that show how well the MCT is performing and expanding into the region. Trust beneficiaries are better being better served in the Fairbanks region because of MCT work there. Over 900 people who were experiencing a BH crisis in the first 18 months of this program had their needs met in the community versus needing the hospital or jail.

Alaska Behavioral Health – Fairbanks Mobile Crisis Team: Comp Plan Information

| Goal | Objective |
|---------------------------|-------------------------------|
| Goal 5 Suicide Prevention | 5.2 Crisis system improvement |

Alaska Behavioral Health – Fairbanks Mobile Crisis Team: Relevant Comp Plan Goals and Objectives: The MCT is meeting the needs of Goal 5, Objective 5.2 by supporting and improving the system to assist individuals in crisis. This takes the form of meeting individuals in the community where they are emotionally, cognitively, and socially. The MCT assesses for needs, writes up safety plans, connects individuals to services, and provides PSS follow-up care. The MCT is meeting the needs of Trust beneficiaries in the community of Fairbanks.

Alaska Behavioral Health – Fairbanks Mobile Crisis Team: Performance Data: The MCT is dispatched by the 911 dispatcher located with the Fairbanks Emergency Communications Center. 911 dispatched over 700 behavioral health (BH) crisis calls to the MCT in year 1. Currently, about six months of data has been collected on the MCT in year 2 of funding, where they have been dispatched over 400 calls. In both data sets for year 1 and mid-year 2, the MCT is resolving 82% of the call outs in community. This means law enforcement and the hospital were not the endpoints for the Trust beneficiary who was in crisis. The MCT was able to meet their needs in community and provide follow-up care. This is a success as it exceeds the SAMHSA benchmarks for

resolving BH crisis in community without the need for more restrictive and costly interventions.

The Fairbanks MCT is on course to triage 700-800 people in community who are experiencing some level of BH crisis. The MCT is exceeding national benchmarks, which is a significant outcome, since MCTs did not exist in Alaska prior to the launch of this MCT in Fairbanks. There are also additional significant data points that reflect the support provided by the MCT teams in the region. 40% of the people responded to in community were provided follow-up care by peer support specialist (PSS). 32% of the individuals responded to in community were provided with an immediate referral for care. 30% of the individuals responded to in community were able to work with the clinician in building a crisis safety plan. The MCT is consistently stabilizing 82%-85% of individuals served in the community.

Alaska Behavioral Health – Fairbanks Mobile Crisis Team: Project Recommendations: It is recommended by Trust staff to fully fund this Crisis Continuum of Care initiative in FY 25. The Fairbanks MCT is following the Crisis Now best practice framework and is exceeding the national benchmarks for resolving BH crisis in community. This means Trust beneficiaries are being supported and taken care of in community, versus the need for more restrictive interventions. Currently, Medicaid 1115 reimbursements cover about 18% of the cost of the MCT to operate to the fidelity of the model. The long-term plan will involve the State of Alaska adjusting the rates for MCT reimbursements, in combination with braided funding from the state general fund, Trust funds, and potentially a 988 surcharge.

City of Fairbanks – Crisis Now Community Coordinator: Summary of Grant Progress: The Crisis Now (CN) Coordinator (CNC) is staffed in the City of Fairbanks (COF) Mayor’s office. The CNC is the person who oversees the coordination, planning, implementation, and outcome measures achieved by the agencies who are delivering the CN services. The CNC does not supervise the staff in those agencies but rather collaborates and serves as a resource to help them with challenges, communication, and liaison work with the Trust, SOA DOH, etc. The CNC is a critical staff person who spends their job time working to ensure the crisis continuum of care in Fairbanks is operationalized.

The crisis care system being operationalized by the CNC serves all Trust beneficiary types. This project is part of the MHAI focus area. The CNC has convened a monthly crisis coalition of regional and statewide members who help collaborate in learning about the Crisis Now model, and how to stand up the various services. The CNC has networked the infrastructure of the COF with dispatch, police, fire, EMS, and the mayor’s office to provide the foundation needed to start the CN services. This level of direction and oversight led to the 911 dispatch center being the focal point for triaging BH calls so that they could be re-directed to the crisis call center (Careline), or the MCT. The COF dispatch center was one of the leaders in developing a decision tree with the MCT provider and with support from the CNC. This decision tree guides the dispatch center to send the right level of support in each situation. This decision tree has guided the development of similar frameworks in Wasilla, Anchorage, and Juneau. This one aspect of the CN model was spearheaded by the CNC who kept the process moving forward.

One challenge for the MCT was responding to calls outside of the COF boundaries, where different law enforcement jurisdictions had legal oversight. Once the MCT was competent in managing the COF BH needs, they were ready to move outside the city. This necessitated the careful orchestrating of meetings and education for the International Fairbanks Airport police, North Pole Police, Alaska State Troopers, and the University of Alaska Fairbanks Police departments. Over the last year, the CNC has been key to making this

move forward. Currently, the MCT has memorandums of agreement (MOA) with the airport police and North Pole Police departments, where they are supporting them with a BH mobile response. There is good momentum with the State Troopers as well, and the UAF police are in discussion. This level of care and need could not have been obtained without a CNC directing these projects.

City of Fairbanks – Crisis Now Community Coordinator: Comp Plan Information

| Goal | Objective |
|---------------------------|-------------------------------|
| Goal 5 Suicide Prevention | 5.2 Crisis system improvement |

City of Fairbanks – Crisis Now Community Coordinator: Relevant Comp Plan Goals and Objectives: The CNC met or exceeded performance measures focusing on objective 5.2 by improving the crisis response system of care.

City of Fairbanks- Crisis Now Coordinator: Performance data: The CNC has consistently held monthly meetings with the local Fairbanks coalition, Trust CNC coordinators statewide, and with Trust staff. The CNC has developed and maintained an active CN website with the COF. The CNC has developed an MOA that is being used by the COF and police departments with the MCT. The CNC has planned with the Trust contractors: Agnew::Beck, and RI International. The following are some of the main data points being tracked and coordinated with the 911 dispatch center and the MCTs.

The Fairbanks MCT is on course to triage 700-800 people in the community experiencing some level of BH crisis. The MCT is exceeding national benchmarks, which is a significant outcome since MCTs did not exist in Alaska before the launch of this MCT in Fairbanks. There are also additional significant data points that reflect the support provided by the MCT teams in the region. 40% of the people responded to in the community were provided follow-up care by a peer support specialist (PSS). 32% of the individuals who responded to in community were provided with an immediate referral for care. 30% of the individuals responded to in The community was able to work with the clinician in building a crisis safety plan.

This position regularly participates in a joint meeting, facilitated by the Trust and contractor, of all community Crisis Now Coordinators. This ensures each community is progressing on a local implementation work plan, similar across communities, and populates into the broader state-wide Crisis Now Initiative implementation plan.

City of Fairbanks – Crisis Now Community Coordinator: Project Recommendations: The COF 911 dispatch center, referral calls to Careline (988), the MCTs, and community-based providers demonstrate through the data over the last 18 months that the CN system of care is working and keeping hundreds of Trust beneficiaries out of the emergency room and/or jail. The emotional and psychological support for beneficiaries is significant, as evidenced by over 700-800 people a year getting their needs met in the COF alone. Currently, the Fairbanks airport police and the North Pole police are utilizing the MCT as well, and we should have data on that soon. MCTs save time and trauma for police officers and emergency room medical staff, who are not trained for BH emergencies. That allows them to focus on the people that they are trained to support outside of the BH continuum. The next step for Fairbanks is bringing forward a “no wrong door” facility for crisis stabilization. This is something the CNC is actively working on with partners. Since this initiative is so impactful for Trust beneficiaries, it is the recommendation of Trust staff to fully fund this grant in FY25.

Copper River Native Association (CRNA) – Mobile Integrated Village Health: Summary of Grant Progress:

The Mobile Integrated Health (MIH) team in Copper Center is actively working towards operationalizing their teams. The MIH team has been slowed down by the death of a critical team member, as well as supervisory turnover. The current manager of the MIH team has been in charge for the last three months and is working well with CNCs across the state in learning how to adapt the model and get the team working. The MIH team differs from the MCT team because it is an integrated healthcare approach. It consists of an emergency medical technician (EMT) and a behavioral health aide (BHA) or peer support specialist. The idea is to take advantage of current assets, and CRNA already has these staff working in the organization. The task at hand is to recruit the right people for these positions and provide the extensive training needed to be out in the community in response to a BH crisis. This is imperative as the Copper River region is extensive and the two-person MIH team can be a long way from resources, so training and experience are needed to ensure safety for the team, as well as the beneficiaries they are supporting in the community.

CRNA is working and collaborating with the crisis response teams in Fairbanks, Wasilla, and Anchorage in developing their MIH team protocols, training, policies, dispatching decision trees, and job descriptions. This level of collaboration involves working with the individual MCT teams in each region and learning how they do their work safely and therapeutically. That is why the CRNA is working on a needs assessment of the people in the region, which will allow them to know whom they are dealing with in the community, how effective their services will be for this BH population, how best to implement those MIH services (things like follow-up care, etc.), and how best to train the MIH staff.

Copper River Native Association – Mobile Integrated Village Health: Comp Plan Information

| Goal | Objective |
|---------------------------|-------------------------------|
| Goal 5 Suicide Prevention | 5.2 Crisis system improvement |

Copper River Native Association – Mobile Integrated Village Health: Relevant Comp Plan Goals and Objectives:

CRNA is in the process of working on the needs assessment. The CRNA manager is hired and has been in place for 3-4 months, and they are actively working on the MIH team protocols, policies, procedures, hiring, training, and ride-along support with other regional teams. The team has not actually started being dispatched but is in the process to be at that stage by late summer. Most of the teams have been hired, and their onboarding process is in process.

Copper River Native Association – Mobile Integrated Village Health: Performance Data:

- Needs assessment in process, results due by the end of summer.
- MIH team director is hired, and MIH staff hired and being on-boarded.
- Collaboration with other regional teams is underway.
- CRNA MIH director is actively attending the Fairbanks Crisis Coalition and has spent time with the MCT and the CNC with the COF.

Copper River Native Association – Mobile Integrated Village Health: Project Recommendations:

The MIH team with CRNA has had some setbacks (including management turnover) but has overcome those and is fully locked into the planning, assessment (needs), and implementation of the MIH team for meeting the needs of Trust beneficiaries in the region. It is the recommendation of Trust staff to continue funding and supporting the MIH team in FY 25.

Mat-Su Health Foundation, Mat-Su Multi-Disciplinary Team Cloud9 Implementation & Pilot Project - Summary of Grant Progress: The Cloud 9 project is in the beginning stage of development and operationalization in the Mat-Su. Cloud 9 is a digital application (app) that networks all the professional and community-based treatment team members allowing Trust beneficiaries to have access to a needed support person 24/7. The High Utilizer Mat-su (HUMS) program, which works to keep high-risk beneficiaries out of the emergency room and supported in the community, is planning, and implementing this program as a pilot project to help increase the support network to the people who are in their network. The Trust award for this program was recent, and HUMS is working with Cloud 9 to begin the program this summer. There will be outcome reports on the status of this pilot by early 2024.

Mat-Su Health Foundation, Mat-Su Multi-Disciplinary Team Cloud9 Implementation & Pilot Project: Comp Plan Information

| Goal | Objective |
|---------------------------|-------------------------------|
| Goal 5 Suicide Prevention | 5.2 Crisis system improvement |

Mat-Su Health Foundation, Mat-Su Multi-Disciplinary Team Cloud9 Implementation & Pilot Project - Relevant Comp Plan Goals and Objectives: This project aligns with the Comp plan goal and objective 5.2 as it will support the crisis system of care in Anchorage changing to a more effective system of assisting beneficiaries in crisis. Currently, HUMS is working with their beneficiary network (up to 100 Trust beneficiaries), and Cloud 9 to launch the program. These beneficiaries can benefit from this initiative through improved response to individuals with behavioral health challenges and crises.

Mat-Su Health Foundation, Mat-Su Multi-Disciplinary Team Cloud9 Implementation & Pilot Project - Performance Data: Once the program is launched, HUMS will report to the Trust program/grants team with the data and progress of the application’s successes and challenges.

Mat-Su Health Foundation, Mat-Su Multi-Disciplinary Team Cloud9 Implementation & Pilot Project: Project Recommendations: This program is just starting, and the Trust program staff will not know until early 2024 if it is a viable program in the Mat-Su. If it can be replicated in other regions of the state and the Trust will consider supporting such efforts through future budgets.

Providence Health & Services – Crisis Stabilization Center – Phase II Planning & Development: Summary of Grant Progress: Providence Health and Services has been operationalizing the planning and development of the Crisis Stabilization Center (CSC) for the last four months. In that time, Providence has hired the director of the program, who has been working with the following stakeholders in preparing to open in early to mid-2024: contractors Agnew::Beck and RI International, Trust program staff, State of Alaska staff representing the Department of Law, the Division of Behavioral Health, Professional Licensing, and Medicaid, as well as the Anchorage Crisis Collaborative (ACC). The ACC represents the Municipality and various behavioral health (BH) providers who will be working with the CSC in providing community-based step-down options for outpatient and residential services.

The Providence director has been engaging in equipping the CSC with a viable licensing pathway with the SOA, as well as billing mechanisms for Medicaid 1115 BH crisis services. The level of detail and attention in developing the policies is extensive: working through staffing models, licensing regulations, pharmaceuticals procedures and mechanisms for billing (this has been a particularly difficult system to navigate as the 1115

waiver has no provision for BH CSCs to be reimbursed for using psychotropic medications), training for crisis service delivery (which is all new in Alaska), staff overtime payment models, legal regulations, and building MOAs with community-based providers for the “warm handoff” of Trust beneficiaries. This process is ongoing, as the grant agreement extends until June of 2024.

Providence Health & Services – Crisis Stabilization Center – Phase II Planning & Development: Comp Plan Information

| Goal | Objective |
|---------------------------|-------------------------------|
| Goal 5 Suicide Prevention | 5.2 Crisis system improvement |

Providence Health & Services – Crisis Stabilization Center – Phase II Planning & Development: Relevant Comp Plan Goals and Objectives: The Providence CSC project aligns with the Comp plan goal and objective 5.2 as it will support the crisis system of care in Anchorage changing to a more effective system of assisting beneficiaries in crisis, thereby preventing more costly services and potential suicides.

Providence Health & Services – Crisis Stabilization Center – Phase II Planning & Development: Performance Data: Providence CSC has met the early performance measures as the director is working with Trust contractors (Agnew::Beck & RI internationals) and SOA staff on the details needed to be operationalizing the facility. The plan is for it to open in summer of 2024.

Providence Health & Services – Crisis Stabilization Center – Phase II Planning & Development: Project Recommendations: It is recommended to continue providing contractual support to Providence CSC staff as they work to open up this new facility. A Phase 2 funding request is anticipated for start-up and launching of services.

True North Recovery – Wasilla Mobile Crisis Team: Summary of Grant Progress: The mobile crisis team (MCT) in Wasilla is operated by True North Recovery (TNR) and is part of the Crisis Now Continuum of Care. The Crisis Now model is a three-pronged approach: crisis call centers, MCTs, and crisis stabilization centers (CSC). Wasilla has access to the call center and MCT. The CSC is in the planning stages at the community level. The Crisis Now MCTs are dispatched to anyone having a behavioral health crisis with support from emergency services when warranted. All Trust beneficiary groups could benefit from this service.

The Wasilla MCT is dispatched by the 911 dispatcher located with the Wasilla Police Department’s Matcom. Matcom dispatched over 120 behavioral health (BH) crisis calls to the MCT in the last three months since the launch of the mobile team. Currently, three months of data have been collected, and the MCT is resolving 85% of the callouts in the community. This means law enforcement and the Mat-Su Regional Hospital were not the endpoints for the Trust beneficiary who was in crisis. The MCT was able to meet their needs in the community and provide follow-up care. This is a success as it exceeds the SAMHSA benchmark of 70% for resolving crises in the community without the need for more restrictive and costly interventions.

The TNR MCT is gaining competence in its ability to engage beneficiaries in the community and work with various partners across the region. TNR is part of the Mat-Su’s post-crisis community network with a memorandum of agreement and release of information signed among ten community-based providers. This means when TNR assesses the needs of an individual in the community, they have access to outpatient appointments, crisis beds, and residential treatment through the agreements and releases of information.

This provides a therapeutic environment in Wasilla that lends itself to the warm handoff that is needed to ensure a streamlined system of care. This level of care is vital to the Trust in providing a behavioral health response for a BH crisis in Wasilla, and as this effort grows, it will reach out to Palmer and the surrounding Mat-Su region.

True North Recovery – Wasilla Mobile Crisis Team: Comp Plan Information

| Goal | Objective |
|---------------------------|-------------------------------|
| Goal 5 Suicide Prevention | 5.2 Crisis system improvement |

True North Recovery – Wasilla Mobile Crisis Team: Relevant Comp Plan Goals and Objectives: The MCT is meeting the needs of Goal 5, Objective 5.2 by supporting and improving the system to assist individuals in crisis. This takes the form of meeting individuals in the community where they are emotionally, cognitively, and socially. The MCT assesses for needs, writes up safety plans, connects individuals to services, and provides peer support services as follow-up care. The MCT is meeting the needs of Trust beneficiaries in the community of Wasilla.

True North Recovery – Wasilla Mobile Crisis Team: Performance Data: The TNR MCT has been in operation for three months and in that time, it has exceeded national best practice benchmarks for stabilizing beneficiaries in the community. They have responded to over 120 call-outs in their first three months and have a stabilization rate of 85%. The other 15% needed additional help at the Mat-Su Regional Hospital and/or local law enforcement.

True North Recovery – Wasilla Mobile Crisis Team: Project Recommendations: It is recommended by Trust staff to fully fund this Crisis Continuum of Care initiative in FY 25. The TNR Wasilla MCT is following the Crisis Now best practice framework and is exceeding the national benchmarks for resolving crises in the community. This means Trust beneficiaries are being supported and taken care of in the community, versus the need for more restrictive interventions. Currently, Medicaid 1115 reimbursements cover about 18% of the cost of the MCT to operate to the model’s fidelity. The TNR MCT is located within the Day 1 Center, which has four other services being provided, of those five total services, three services generate enough revenue to offset the losses incurred by the MCT and one other service. These costs were factored into a business plan which has TNR being able to manage the expenses of the MCT and Day 1 Center by year three. It is recommended to continue to support funding for the TNR MCT as it moves to a self-sustaining model.

Project Title: Zero Suicide Initiative

FY23 Grantee: Division of Behavioral Health

Fund: MHTAAR

Years Funded: 3

Project Category: Capacity Building

FY22: \$71,500

FY23: \$62,500

FY24: \$62,500

Project Description: The Zero Suicide Program Coordinator (ZSPC) reports to the Statewide Suicide Prevention Program Coordinator and will be responsible for implementing the Zero Suicide Framework statewide. This new position with the Division of Behavioral Health will be instrumental in coordinating this best practice.

The seven elements of Zero Suicide represent the core components of safe care for individuals with

suicidal thoughts and urges. They represent a holistic approach to suicide prevention within health and behavioral healthcare 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 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, and the Trust, in addition to working closely with other divisions/departments. The Zero Suicide Program coordinator will also work closely with the DHSS grants and contract section to develop and post Requests for Proposals, Contracts, and Provider Agreements, review and make program award recommendations, develop and approve budgets, and monitor program activities.

Summary of Grant Progress: The Zero Suicide (ZS) initiative is a best practice framework that helps providers standardize their assessment and treatment for beneficiaries at risk of suicide. The Alaska Department of Health, Division of Behavioral Health (DBH), has partnered with Trust to co-fund this position within DBH. This position is also critical as it is one of the best practices that support the Crisis Now model of stabilization at the community level. The Zero Suicide system is made up of the following core elements: 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 ZSPC successfully performed a statewide environmental scan on what screening and assessment practices are utilized by hospital emergency rooms statewide. The analysis was a year-long project in which half the hospitals in the state participated. This information will provide the next steps in implementing a strategy and approach with partners for universalizing a best practice approach to suicide safer care. One challenge was the result of workforce and funding issues with some smaller hospitals that did not have the capacity to participate in the analysis.

Comp Plan Information

| Goal | Objective |
|--|---|
| Goal 7 Services in the Least Restrictive Environment | 7.1 Standardized screening & assessment |

Relevant Comp Plan Goals and Objectives: This MHTAAR project supports the work of goal 7, suicide prevention, of the Alaska Comprehensive Integrated Mental Health Plan. It addresses objective 7.1 promoting universal screening and standardized assessment tools. The ZSPC has established a strong foundation of evaluation, planning, and implementation for leading into this work for year 2, which is recommended by Trust staff.

Performance Data: A significant accomplishment in FY23 was the completion of the Environmental Scan of Suicide Care Practices in Alaska’s Hospitals. This year-long qualitative inquiry included interviews with 56.5% of Alaska’s hospitals regarding their suicide care practices. The robust information within these interviews provided substantial baseline data regarding suicide care in Alaska and outlined needed interventions in establishing Zero Suicide practices in Alaska. For instance, hospital providers across Alaska identified transitions in care as the number one barrier to implementing safer suicide care within Alaska.

Project Recommendations: The ZSPC with DBH has met the performance measures outlined for FY 22 and FY 23. This project is a vital component of the Crisis Now work statewide, and it is recommended by Trust staff for continued funding in FY 25 as an important component of the Trust’s work to improve the crisis continuum of care in Alaska.

| | | |
|---|--|-----------------------|
| Project Title: Statewide Designation, Evaluation, Stabilization & Treatment (DES/DET) | | |
| Coordinator | | |
| Grantee: DFCS, Department Support Services | | |
| Fund: MHTAAR | | |
| Years Funded: 4 | Project Category: Capacity Building | |
| FY22: \$78,800 | FY23: \$75,000 | FY24: \$87,000 |
| <p>Project Description: Housed in the Dept. of Family and Community Services (DFCS) Commissioner’s office, this position streamlines the coordination and review process of all ex-parte orders; currently, performed by the Department of Law paralegals in each judicial district across the state. By moving the body of this work to the Commissioner’s office, DFCS will ensure timely coordination and review of all ex-parte orders filed. This position will create a single point of contact for the department and partners.</p> <p>Through this Statewide DES/DET Coordinator, the department intends to improve patient care and reduce administrative burdens on emergency departments, DOC, and DET facilities including API and the Department of Law. This will be a significant change in practice and through this coordinated, patient-centered approach Trust beneficiaries will be better served.</p> | | |
| <p>Summary of Grant Progress: The DET Coordinator has worked to build coordination and oversight capacity in tracking individuals across the state under a Title 47 Civil commitment hold for evaluation and treatment. Before this position was established, the Department of Health did not have an effective way to track how long people on Title 47 holds were on waitlists for an inpatient bed, or effectively strive to address the issues faced by providers attempting to get beneficiaries into care.</p> <p>The DET/DES Coordinator is established as the single point of contact for all Title 47 questions and concerns and provides critical standardized statewide training on Title 47.</p> | | |

The DET/DES Coordinator has worked over the past year to increase knowledge and understanding of needs statewide. The coordinator continues to focus on gathering more detailed information about the cause of any delays and evaluating how the DET/DES Coordinator can collaborate with hospitals, transportation services, and local providers, and utilize that information to develop processes that will improve coordination overall.

Comp Plan Information

| Goal | Objective |
|---------------------------|-------------------------------|
| Goal 5 Suicide Prevention | 5.2 Crisis system improvement |

Relevant Comp Plan Goals and Objectives: The DES-DET Coordinator directly plays a role and has an impact in helping beneficiaries get the needed access to care and assisting them in crisis. This meets the intent of the Comp Plan goal 5 and objective 5.2.

Performance Data: Data indicates that 56% of beneficiaries were able to transfer to a DET/DES facility within 48 hours of an Order being approved, and a total of 1,942 beneficiaries were reported as being served during the project period. There have been many cases throughout the year the Coordinator and the DCFS legal team have been able to address concerns to the Courts and get the Title 47 hold released so the beneficiary can achieve a more appropriate placement. Increased communication with all parties from the petitioner to the final DET acceptance facility plays a large role in this success. The coordinator also provided training to 150 staff engaged in ex-parte cases.

Project Recommendations: Trustees approved funding for this project for 2023 and supported funding in FY24 and possibly FY25. It is anticipated that this capacity will be well established, coordinated, and provide a data feedback loop to assist DFCS, DOH, and the Trust to continue to reform and enhance the crisis systems and programs of care for individuals at the most significant risk of institutionalization. Staff recommends continued funding for this critical effort in FY25 with a re-evaluation of funding consideration in future years, including possible transition to GF/MH.

Project Title: Adult Protective Services (APS) III Position

Grantee: DOH, Division of Senior and Disabilities Services (SDS)

Fund: MHTAAR

Years Funded: 4

Project Category: Capacity Building

FY22: \$75,000

FY23: \$75,000

FY24: \$75,000

Project Description: This is a dedicated position responsible for assisting with institutional discharge planning from hospitals and Department of Corrections and petitions for guardianship and/or conservatorship, which will significantly improve discharge planning.

APS will benefit immensely from a position solely focused on institutional discharges from API, hospitals, and DOC. Currently, the unit has assigned an APS worker to each hospital to assist with communications on referrals, but is not able to prioritize these locations over other vulnerable adults in crisis. This position will be critical to assist Trust beneficiaries with earlier intervention when in crisis, and to assist with discharge after an ex-parte or detention.

The Trust-funded position will allow APS to maintain investigation capacity and dedicate an APS position to assist with institutional discharge planning from hospitals and Department of Corrections and petitions

for guardianship and/or conservatorship, which will significantly improve discharge planning.

Summary of Grant Progress: The Adult Protective Services (APS) III position pilots an APS position dedicated to working with people discharging from hospitals and institutions who are identified as needing the decision-making support of a conservator or guardian. This project serves all beneficiary types who have temporarily or permanently lost the capacity to keep themselves safe and seek services autonomously. The Trust funding leverages Medicaid administrative claiming. It is identified as a Mental Health and Addiction Intervention Focus Area project in the Trust budget and has both a system and direct level impact for Trust beneficiaries.

Senior and Disabilities Services was challenged by staff turnover and hiring for the position this year, leaving the position vacant for multiple months in FY23. Despite hospitals, the Alaska Psychiatric Institute, and the Department of Corrections serving people who lack the capacity to keep themselves safe, these institutions underreport abuse, neglect, self-neglect, and exploitation to APS. Mandated reporter education is expected to continue as an essential outreach method to the organizations and improve services to vulnerable Alaskans. Trust beneficiaries without decision-making capacity will benefit from the legal support of a guardian or conservator to assist with the discharge and post-institution service coordination process. The Adult Protective Services III position supports the work of the Mental Health and Addiction Intervention focus area and the Housing & Home and Community Based Services focus area, striving to transition beneficiaries from institutions with the support needed to remain independent in the community and connected to recovery services.

Comp Plan Information

| Goal | Objective |
|---------------------------------------|-----------------------------------|
| Goal 6 Protecting Vulnerable Alaskans | 6.4 Access to protective services |

Relevant Comp Plan Goals and Objectives: The Adult Protective Services III position works to increase timely access to protective services statewide.

Performance Data: In FY22, 19 beneficiaries were assisted, and 20 trainings were held during this grant period, reaching 139 people.

In FY23, the project has completed the following activities:

- Investigated reports of harm filed through Central Intake that met APS criteria from DOC/hospital/API admissions or discharge and other DES/DET facilities.
- Attended stakeholder’s meetings for Complex Case reviews as needed.
- Petition for guardianship/conservator as needed for vulnerable clients that lack the capacity to make decisions for themselves. APS ensured court actions were least restrictive before proceeding.
- APS supervisors and investigators staffed complex cases with APS Manager for direction.
- Request records from medical facilities, DOC, and API to file court actions.
- APS adopted new structured decision-making tools that assess safety, strength, and needs. This assessment tool is completed on every investigation with a face-to-face visit with the adult.
- APS is working on new APS Regulations
- APS trained Community providers on abuse/neglect /exploitation and how and where to report it.

Project Recommendations:

The Adult Protective Services III position is recommended for continued funding through FY25. The

Department of Health has experienced widespread staffing shortages, especially for Long Term Non-Permanent positions like this one. Due to the frequent vacancy in this position, additional time is needed to evaluate the project’s impact. Should the position not be able to implement its intended goals in FY24 or remain unfilled, continued funding will be reevaluated.

Project Title: Mental Health Professionals Off-site Evaluations/Legal Competency Restoration Pilot

Grantee: DFCS, Department Support Services

Fund: MHTAAR

Years Funded: 4

Project Category: Direct Service

FY22: \$300,000

FY23: \$300,000

FY24: \$300,000

Project Description: The Department of Family and Community Services (DFCS), Alaska Psychiatric Institute will utilize a portion of these funds to assist with a re-evaluation of Title 47 individuals who have not been admitted to a Designated Evaluation and Treatment (DET) facility or Designated Evaluation and Stabilization (DES) facility within 24-48 hours of the court order.

The remaining funding will be used to develop and implement a pilot outpatient and jail-based competency restoration program. DOH/API proposes to develop and pilot a 5–10 person outpatient restoration program limited to bail-eligible defendants charged with misdemeanors. The program will conduct an initial screening of individuals during competency evaluation for appropriateness, which will be done in conjunction with the Anchorage Mental Health Court. API will work with national experts to develop the pilot with the targeted start date of August of FY2023 (CY August 2022).

Concurrently, API will work with DOC annually to perform competency restoration services within the jail setting.

Summary of Grant Progress: The Department of Family and Community Services (DFCS) utilizes a portion of the funds from the Mental Health Professionals Off-Site Evaluations to provide a re-evaluation of Title 47 individuals that have not been admitted to a Designated Evaluation and Treatment (DET) facility within 24-48 hours of the Order Authorizing Hospitalization for Evaluation (Title 47 ex parte Order). As outlined in the Project Performance Measures related to the re-evaluation (Performance Measures 1-3), the DET/DES Coordinator continues to track ex parte orders and trigger a request for a re-evaluation if a respondent cannot transfer to a DET/DES facility within 48 hours. From July 1, 2022-March 1, 2023, seven re-evaluations were completed.

The number of evaluations and re-evaluations performed by department staff has steadily increased since the inception of this program mid-way through FY 21. COVID and staffing issues have hampered the full implementation of the project, which is anticipated to be fully operational in FY 24. Currently, additional benefits include a stronger positive relationship between DFCS and DOC. There are regular meetings between leaders within these two departments around the cases and transfers.

The department staff is scheduled to have both Jail-based and Outpatient Restoration programs up and running in the coming months and provide 20 additional seats for restoration services at any given time in FY24.

| Comp Plan Information | |
|---|---------------------------------------|
| Goal | Objective |
| Goal 8 Services in Institutional Settings | 8.1 Services in a psychiatric setting |
| <p>Relevant Comp Plan Goals and Objectives: The mental health professionals' off-site evaluations work meets the intent of Comp Plan Goal 8 and Objective 8.1 (a). This project works to reassess the best placement for an individual's competency restoration and whether that level is still needed, which helps to not institutionalize individuals who do not need that level of restrictive care.</p> | |
| <p>Performance Data: As outlined in the Project Performance Measures related to the re-evaluation (Performance Measures 1-3), the DET/DES Coordinator continues to track ex parte orders and trigger a request for a re-evaluation if a respondent is unable to transfer to a DET/DES facility within 48 hours. From July 1, 2022-March 1, 2023, seven re-evaluations were completed. The department is actively developing outpatient and jail-based restoration programs to increase the number of individuals receiving restorative services.</p> | |
| <p>Project Recommendations: It is recommended to continue funding this project in FY25 and re-assess future funding requests for this resource.</p> | |

Disability Justice Focus Area

| | | |
|---|--|------------------------|
| Project Title: Alaska Justice Information Center (AJIC) | | |
| Grantee: University of Alaska, Anchorage | | |
| Fund: MHTAAR | | |
| Years Funded: 9 | Project Category: Data/Planning | |
| FY22: \$225,000 | FY23: \$225,000 | FY24: \$225,000 |
| <p>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.</p> <p>AJIC will continue to work on an integrated data platform from critical criminal justice agencies such as the Alaska Department of Public Safety, the Alaska Department of Law, the Alaska Department of Corrections, and related state agencies such as the Alaska Department of Health. 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 studies and will be able to provide the following:</p> <ul style="list-style-type: none"> • 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.

Summary of Grant Progress: This project is a partnership between the Trust and the University of Alaska, Anchorage College of Health Justice Center, to support the Alaska Justice Information Center (AJiC). AJiC’s mission is to compile, analyze, and report criminal justice topics to policymakers and practitioners to improve public safety, increase criminal justice system accountability, and reduce recidivism. AJiC works to accomplish this mission by partnering with and supporting the data collection and analysis needs of 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.

While AJiC works with the entire criminal justice system, much of its work focuses on Alaskans and Trust beneficiaries who have become or are at risk of becoming involved with the criminal justice system.

AJiC’s work is vital to the Trust’s disability justice focus area and the Trust’s work on behavioral health emergencies. AJiC has worked with various partners to create criminal justice dashboards <https://www.uaa.alaska.edu/academics/college-of-health/departments/justice-center/alaska-justice-information-center/crime-dashboards.cshtml>, published academic papers on different issues facing the Alaska criminal justice system and Trust beneficiaries <https://www.uaa.alaska.edu/academics/college-of-health/departments/justice-center/alaska-justice-information-center/publications.cshtml>, and is currently providing extensive data analysis and technical assistance to mental health emergency providers to ensure that the desired metrics are reported accurately. AJiC’s assessment of current and future disability justice strategies gives the Trust and the State of Alaska a greater understanding of the criminal justice system and its impacts on Trust beneficiaries. It allows for data-driven adjustments to strategies over time. This work is vital for a criminal justice system that is as trauma-informed and as effective and efficient as possible for Trust beneficiaries who have or may become justice-involved.

Comp Plan Information

| Goal | Objective |
|-----------------------------------|---------------------------------|
| Goal 9 Workforce, Data, & Funding | 9.5 Data-driven decision making |

Relevant Comp Plan Goals and Objectives:

Goal and 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 (DOH) divisions and other departments.

- Strategy: Support innovation policies and collaborative planning efforts.
- Strategy: Understand what data is available and streamline efficiencies.
- Strategy: Enact purpose-driven data collection and data analysis.

Comp plan goal and objective 9.5 and strategies a-c focus on collecting and analyzing data to make informed policy decisions. AJiC relates to these comp plan goals, objectives, and strategies as it compiles, analyzes, and

reports criminal justice data to policymakers and practitioners as they work to assess and implement current and future criminal justice and behavioral health strategies that impact Trust beneficiaries and all Alaskans throughout the state.

Performance Data: AJiC has published several academic papers and surveys that impact Trust beneficiaries involved or at risk of becoming justice-involved. These papers, surveys, and presentations range from publications on Alaska Police Officer Use of Deadly Force: 2010-2020 <https://scholarworks.alaska.edu/handle/11122/11933>, to Adverse Childhood Experiences, Intimate Partner Violence, and Sexual Violence Among Persons Who May Be Alaska Mental Health Trust Beneficiaries <https://scholarworks.alaska.edu/handle/11122/12288>, to presentations on data from Alaska's pretrial enforcement program and recidivism to the Alaska Criminal Justice Commission <https://www.ajc.state.ak.us/acjc/>.

During the summer of 2023, AJiC is partnering with faculty members in the UAA Justice Center and UAA School of Social Work to study homelessness, intimate partner violence and sexual assault, police-public contacts, and school violence. These small projects are meant to serve as seed projects to increase future capacity to partner with faculty to answer questions at the intersection of mental health and criminal justice.

AJiC has gathered information on how other jurisdictions have measured and reported data regarding providing mental health crisis services to develop their technical assistance capacity for Alaska providers. This has included a detailed examination of the SAMSHA best practice toolkit and how it may apply to Alaskan providers.

AJiC is working with the Anchorage Fire Department mobile crisis team on their data, but this work has been hindered due to needing a business associate agreement (BAA). The BAA will allow AJiC to receive Health Insurance Portability Accountability Act (HIPAA) protected information and data from AFD. Executing a BAA with the Anchorage Fire Department has proven challenging. This agreement would allow AJiC to receive identified protected health information, enabling us to provide analyses of repeat clients and other metrics of interest. Establishing a BAA required the University of Alaska Anchorage to conduct a compliance review and create a template for future BAAs. We anticipate the process to be faster for future BAAs.

Workforce issues such as staff turnover and hiring also remain challenging, and AJiC is continually working to recruit and retain qualified staff.

AJiC's work helps the Trust, our partners, policymakers, and practitioners have and understand issues facing Trust beneficiaries and all Alaskans to improve public safety, increase the accountability of the criminal justice system, and reduce recidivism.

Project Recommendations: Funding is recommended in FY25. This project has a demonstrated history of providing positive outcomes to beneficiaries. Staff will continue to monitor this project and work with AJiC staff to identify alternative sustainable funding sources beyond FY25. Or, if the project outcomes for beneficiaries are not achieved, the team will work with AJiC to adjust accordingly or recommend that Trust funding be discontinued.

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| Project Title: Public Guardian Position | | |
| Grantee: Department of Administration, Office of Public Advocacy | | |
| Fund: MHTAAR | | |
| Years Funded: 6 | Project Category: Capacity Building | |
| FY22: \$91,500 | FY23: \$91,500 | FY24: \$91,500 |
| <p>Description: Trust funds will support a Public Guardian position (1 FTE) in the Department of Administration, Office of Public Advocacy (OPA). The position will be in Anchorage and serve the Western Alaska region, including Bethel, Dillingham, Naknek, and surrounding communities. Public guardians serve adult Trust beneficiaries found incapacitated by the Superior court. Public guardians must maintain benefits, manage finances, make medical decisions, and ensure suitable housing for each Trust beneficiary (ward). This position supports the OPA’s strategic plan to bring down current public guardian caseloads from approximately 100 cases per public guardian to the recommended national maximum of 40 cases per public guardian, resulting in improved services, supports, and overall management of Trust beneficiaries.</p> | | |
| <p>Summary of Grant Progress: This fiscal year saw continuity due to the same assigned Public Guardian (PG) handling the same regions for the last few years. Her knowledge of the resources and clients and her continued development of relationships in the rural areas are successes for both the agency and the clients. The most significant challenge remains travel inability due to covid and weather. The PG has yet to make as many trips due to both over the last fiscal year. They are highly cautious of bringing Covid into the villages when there is an uptick or new strain and, therefore, extremely careful about traveling during those periods. Weather is always challenging and can derail long-planned trips requiring rescheduling to the next quarter. The assigned guardian has developed strong relationships with the clients but has found that due to needing more resources in the rural areas, she can only keep clients in their villages if it would be in their best interest if the appropriate help or housing were available.</p> <p>To date, the Public Guardian in this rural position has continued to support wards with mental health issues in all aspects of their lives. Additionally, she has accepted new appointments. Kodiak was now removed from her docket to focus on the most rural areas.</p> <p>A significant concern for OPA is that they believe the court system needs to over-appoint the Public Guardian, reducing our resources/time available for each client. Due to this over-appointment by the courts, resources in rural Alaska continue to dwindle for these clients. In addition to the over-appointment by the courts, resources don’t exist to support private guardians and family members of those in need of guardians, which adds to the over-appointment issue. Recently, OPA sent a memo to the court that they are at maximum capacity and cannot receive any more cases.</p> <p>This position is imperative to Trust beneficiaries who are clients in rural areas in Alaska. It requires expertise in the culture, resources, and needs which have been developed in the position.</p> | | |
| Comp Plan Information | | |
| | Goal | Objective |
| | Goal 6 Protecting Vulnerable Alaskans | 6.5 Rights and responsibilities for Alaskans |
| <p>Relevant Comp Plan Goals and Objectives: The comp plan supports funding for the public guardian position. The most relevant goal, objectives, and strategies are 6.5(b-d), centered on improving access to</p> | | |

advocacy supports and legal services, creating a consistent statewide probate process, and access to protective services for Trust beneficiaries.

6.5 Objective: Ensure vulnerable Alaskans understand their rights and responsibilities.

- b) Strategy: Improve access to advocacy supports and quality civil and criminal legal assistance for all beneficiaries.
- c) Strategy: Support the court system in creating a consistent statewide probate process across judicial districts.
- d) Strategy: Establish pathways for vulnerable adults who are in institutional levels of care, such as the Alaska Psychiatric Institute (API), Department of Corrections (DOC), Division of Juvenile Justice (DJJ), residential psychiatric treatment centers (RPTC), or nursing homes to access protective services.

Performance Data: FY23 data is not yet available. During FY22, Trust funds supported a Public Guardian position (1 FTE) in the Department of Administration, Office of Public Advocacy. The place serves the Western Alaska region, including Bethel, Dillingham, and the surrounding area. The public guardian caseload now includes Utqiagvik and Kodiak, which served 95 beneficiaries. Of those, 95 (42) experienced mental illnesses; (39) developmental disabilities; (10) Alzheimer's disease and related dementia; and (4) Traumatic Brain Injury.

During FY22, of the 95 Trust beneficiaries served by the public guardian, 34 needed a conservator; 57 needed full guardianship; and four needed limited control. Also, of the 95 beneficiaries served, there were 152 total ward contacts, and the services provided were 15 care coordinators; 2 banking; 31 benefits; 66 PFD applications filed; 67 medical consents; and 142 complete benefit applications.

The OPA guardian funded by the Trust served clients living in 1 Alakanuk; 24 Anchorage (only housing resource); 2 Aniak; 22 Bethel; 1 Cheforak; 5 Dillingham; 2 Emmonak; 3 Fairbanks; 1 Grayling; 1 Henderson; 1 Juneau; 1 Kasigluk; 8 Kodiak; 1 Kokhanok; 1 Konginak; 1 Napaskaiak; 1 New Stuyahok; 1 Nightmute; 2 Pilot Station; 1 Selawik; 2 Seward; 1 Stebbins; 1 Togiak; 1 Tuluksak; 2 Upper Kalskag; 6 Utqiagvik.

Project Recommendations: This project has a demonstrated history of providing positive outcomes to beneficiaries, and Trust staff recommend continued funding and support. Staff will continue to monitor this project and work with OPA staff to identify alternative sustainable funding sources beyond FY25. Or, if the project outcomes for beneficiaries are not achieved, the team will work with OPA to adjust accordingly or recommend that Trust funding be discontinued.

Project Title: Crisis Intervention Team/Behavioral Health Training and Programs for First Responders

Grantee: Dept. of Public Safety, Alaska State Troopers, Alaska Police Standards Council (APSC)

Fund: Authority Grant (\$40,000) & MHTAAR (\$160,000)

Years Funded: 15

Project Category: Workforce Development/Training

FY22: \$200,000

FY23: \$200,000

FY24: \$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, other local funders, and 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 and skills to interact with Trust beneficiaries effectively. Thus, increasing the likelihood of positive interactions between CIT-trained law enforcement personnel and Trust beneficiaries and decreasing the possibility of beneficiaries being charged with a crime and booked into a correctional facility.

Summary of Grant Progress: This project maintains a critical component of the Trust's Disability Justice focus area by providing foundational knowledge for law enforcement and first responders on mental health disorders and cognitive impairments, best practices for responding to mental and behavioral health issues, laws centered around Title 47, and our state's community behavioral health system to municipal law enforcement, the Alaska State Troopers (AST), and other first responders. The funding enables the Department of Public Safety (DPS) and the Anchorage Police Department (APD) to provide support for APSC-certified municipal and state law enforcement, APSC-certified municipal and state correctional officers, APSC-certified probation officers, and village police officers 40 hours of Crisis Intervention Team training that adheres to the nationally recognized Memphis Model as well as training in behavioral health and peer support that will provide Alaska's first responders with the tools to best respond to calls for service involving persons with mental and behavioral health issues and who may be experiencing a mental health crisis thus, providing more excellent public protection and keeping Alaskans safe.

The CIT/BH Training and Programs for First Responders project has supported a diversified array of project activities that include a Crisis Intervention Team academy in Fairbanks, ASIST suicide prevention instructor training, specialized training for investigators in trauma-informed techniques of interviewing, a technical course on Autism Awareness for law enforcement, support rural agency attendance to the national CIT conference as well as enhanced access to behavioral health services such as peer support to Alaska's law enforcement personnel through financial support toward the Cordico application. These training and conferences give the officers the tools to identify and understand issues facing Trust beneficiaries experiencing a behavioral health emergency or who are justice-involved and apply trauma-informed people-centered principles while conducting public safety actions. This approach by law enforcement and first responders reduces the trauma experienced by Trust beneficiaries they have contact with and makes the first intercept of the sequential intercept model more efficient and effective for beneficiaries.

While DPS has successfully provided access to behavioral health training and services for Alaska's first responders, issues and barriers, impact their efforts. Issues affecting public safety in Alaska continue to exacerbate difficulties in supporting training for Alaska's first responders. High agency attrition and vacancy rates result in limited access to advanced and specialized course opportunities. There continues to be limited access to the regional hosting of Crisis Intervention Team academies. However, FY23 did see increases in the availability with the return of a Fairbanks-based course.

An essential primary focus remains the buildup of available training infrastructure, notably qualified CIT academy coordinators and trainers, to increase subsequent officers' access to this curriculum. Addressing the historic bottleneck caused by limited in-state training opportunities through expanding a certified instructor cadre is perceived as a primary effort in building Alaska's long-term sustainability of behavioral health and crisis response training for the public safety community. The DPS continually coordinates with

industry stakeholders and subject matter experts to review additional opportunities to support beneficiary services through enhanced public safety training. Through this form of coordination, DPS facilitated several new curricula for the State, further enhancing the scope of available training.

Comp Plan Information

| Goal | Objective |
|-----------------------------------|----------------------------|
| Goal 9 Workforce, Data, & Funding | 9.2 Workforce competencies |

Relevant Comp Plan Goals and Objectives: The CIT/BH Training and Programs for First Responders project spans multiple focus areas and comp plan goals and objectives. The most relevant goals, objectives, and strategies are 9.2(g) and 7.3(a-c), centered on providing training that educates and prepares attendees to work in inter-professional teams and diverts Trust beneficiaries away from institutionalization and incarceration when appropriate.

9.2 Objective: Advance the competencies of the healthcare, behavioral health, and public health workforce.

- g) Strategy: Expand the number and type of training and technical assistance opportunities that educate students and providers to work in inter-professional teams and participate in practice transformations.

7.3 Objective: Reduce the number of Trust beneficiaries entering or becoming involved with Alaska’s criminal justice or juvenile justice system.

- a) Strategy: Establish a process to use pre-charge and pre-arrest diversion without incarceration.
- b) Strategy: Increase awareness of least restrictive, long-term services and supports through counseling on options and person-centered interviewing.
- c) Strategy: Collaborate with other criminal or juvenile justice-involved partners to develop and implement services for Trust beneficiaries.

Performance Data: Data for the current reporting year has yet to be available; the following is data from FY22.

Due to the high number of Trust beneficiaries who encounter the justice and emergency medical system, ensuring first responders are adequately trained to deliver services to Trust beneficiaries experiencing a behavioral health emergency or involved with the justice system is a high priority. Despite limited data-collecting capabilities during FY22, the Alaska State Troopers reported responding to hundreds of calls involving persons experiencing a mental health crisis. AST also said that 50% of calls involving a person experiencing a mental health crisis involved CIT Troopers/Officers, and de-escalation tactics were the primary tactic used to diffuse the situation in 80% of the CIT-involved calls. AST reported there are currently 26 out of 349 (7.5%) Troopers who are CIT trained.

Unfortunately, due to the COVID pandemic and low staffing numbers within public safety agencies, there have been difficulties with first responders being able to attend in-person training. These issues led to only two CIT academies during FY22 and fewer first responders following the training. During FY22, 160 first responders received CIT or other behavioral health training such as mental health first aid, peer support, behavioral health trauma, and training on trauma for law enforcement, with support from the Trust to DPS. That number is double from FY21.

Project Recommendations: This project provides positive outcomes to beneficiaries, and Trust staff recommend continued funding and support for the agency until sustainability can be achieved. Staff will

continue to monitor this project and work with the Department of Public Safety (DPS) staff to identify alternative sustainable funding sources beyond FY25. Or, if the project outcomes for beneficiaries are not achieved, the team will work with DPS to adjust accordingly or recommend that Trust funding be discontinued.

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| Project Title: Training for Therapeutic Court Clinical Staff | | |
| Grantee: Alaska Court System | | |
| Fund: MHTAAR | | |
| Years Funded: 12 | Project Category: Workforce Development/Training | |
| FY22: \$15,000 | FY23: \$15,000 | FY24: \$20,000 |
| <p>Project Description: Trust funding is used to train teams from therapeutic courts statewide on the core principles and elements of therapeutic courts and the disorders experienced by Trust beneficiaries and the associated treatments. This training 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:</p> <ol style="list-style-type: none"> 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. | | |
| <p>Summary of Grant Progress: The Coordinated Resources Project (CRP)—also known as the Mental Health Court—is a voluntary “therapeutic” or “problem-solving” court. Located within the Anchorage, Palmer, and Juneau District Courts, these courts hear cases involving individuals with mental health disorders or disabilities who are charged with criminal offenses and are Trust beneficiaries.</p> <p>CRP courts are post-booking, diversionary responses to the problem of “criminalization”—an increased likelihood that Trust beneficiaries will be processed through the criminal justice system instead of the mental health system. The courts divert people with mental health disorders or disabilities charged with criminal offenses from incarceration into appropriate community treatment and services to prevent further contact with the criminal justice system. The project supports the well-being of Trust beneficiaries by identifying criminogenic risk factors (factors known to impact recidivism) and developing a comprehensive case plan responsive to the participant’s needs. The program addresses mental health and substance abuse, educational and vocational deficits, family and relationship problems, criminal thinking, and housing. The plan promotes engagement in meaningful activities and increases overall social functioning.</p> <p>The court diverts eligible offenders who are Trust beneficiaries from jail and into appropriate community treatment, focusing on their therapeutic and criminogenic needs (factors predictive of recidivism). With the second generation of mental health courts, we follow criminal justice research emphasizing the importance of addressing criminogenic needs when the case plan is developed.</p> <p>A critical highlight of CRPs is providing a single point of contact for a criminal defendant with a mental health disorder or disability. The project offers a multidisciplinary team of designated and trained judges, prosecutors,</p> | | |

defense attorneys, and probation officers who consistently participate in court hearings. A defendant can receive assistance from the project in developing, coordinating, and monitoring an individualized case plan. The court orders that plan as a condition of bail or probation. Participants are monitored by probation officers who work exclusively with CRP. The Division of Behavioral Health, Alcohol Safety Action Program employs CRP probation officers. Probation officers provide treatment, resource matching, and linkage to and monitoring the case plan.

The court monitors the participant’s adherence to the case plan through regularly held status hearings and receives reports on the participant’s progress. If treatment non-adherence occurs, the court may adjust the schedule to motivate adherence or employ non-jail-based sanctions or incarceration.

Having well-trained therapeutic court staff is paramount for the effective and efficient administration of the project. Trust funding is used to train teams from therapeutic courts statewide on the core principles and elements of therapeutic courts and the disorders experienced by Trust beneficiaries and the associated treatments. This training ensures 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.

Some challenges were encountered concerning the project performance measures outlined in the statement of intent. Part of Grant 3503.08 was used in FY22 to send two therapeutic court staff to the annual National Association of Drug Court Professionals (NADCP) conference in Maryland. As the country was beginning to emerge from COVID-related restrictions, it was unclear whether the meeting would be virtual or in-person until relatively close to the event, and there was not enough time to organize sending a whole team. The two staff who attended were from the Palmer Families with Infants and Toddlers (PFIT) Court, which works with OCS cases involving parents with chronic substance use issues and very young children.

The conference brings in national experts NADCP is holding two national meetings in this state fiscal year, and the project coordinator is planning to send at least two more teams to Houston during FY23, using a limited amount of Medicaid reimbursements and funds that might otherwise lapse. Per best practices, the goal is to send every therapeutic court team to a NADCP conference every 3 or 4 years.

A different challenge is to get detailed feedback from training attendees when we need more leverage. For NADCP conferences, attendees must complete a survey to fulfill the MHTAAR grant requirements to receive per diem reimbursement. For other training, the primary tool is to send constant reminders to complete the survey.

Comp Plan Information

| Goal | Objective |
|-----------------------------------|------------------------|
| Goal 9 Workforce, Data, & Funding | 9.1 Workforce capacity |

Relevant Comp Plan Goals and Objectives: The comp plan supports funding to Train Therapeutic Court Clinical staff. The most relevant goals, objectives, and strategies are 9.1(c & d), centered on developing intense leadership courses and promoting a culture supporting workforce development.

9.1 Objective: Strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization.

c) Strategy: Develop intense leadership courses and offerings.

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| d) Strategy: Promote an organizational culture that supports workforce development. |
| <p>Performance Data: A total of 20 therapeutic court team members and staff were sent to the 2022 NADCP annual conference in Nashville in July last year. All FY23 MHTAAR training funds were combined with budgeted state money, BJA grant funds, and Zero to Three funding to cover all costs. Personnel came from Palmer CRP and Wellness Courts, Palmer FIT Court, Anchorage Felony DUI and Drug Courts, and the two therapeutic court supervisory attorneys from the Dept. of Law and the Public Defender Agency. Because of some team member overlap in Palmer and Anchorage, we could send the equivalent of 4 teams to the intensive training.</p> <p>In December 2022, the two supervisory attorneys, Grace Lee from the Dept. of Law and Rick Allen from the Public Defender Agency, gave a presentation entitled “Therapeutic Courts – Due Process and Why You Should Refer Defendants.” The Alaska Bar Association hosted the exhibition, attracting more than 45 in-person and virtual attendees from around the state. Therapeutic courts incurred no costs for this presentation.</p> |
| <p>Project Recommendations: This project provides positive outcomes to beneficiaries, and Trust staff recommends continued funding and support. Staff will continue to monitor this project and work with Alaska Court System (ACS) team to identify alternative sustainable funding sources beyond FY25. Or, if the project outcomes for beneficiaries are not achieved team will work with ACS to adjust accordingly or recommend that Trust funding be discontinued.</p> |

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| Project Title: Training for Department of Corrections Mental Health Staff | | |
| Grantee: Department of Corrections | | |
| Fund: MHTAAR | | |
| Years Funded: 12 | Project Category: Workforce Development/Training | |
| FY22: \$25,000 | FY23: \$25,000 | FY24: \$50,000 |
| <p>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.</p> | | |
| <p>Summary of Grant Progress: As part of the disability justice focus area, the Trust allocated \$25,000 to assist the Department of Corrections (DOC) in staff training to aid in treating beneficiaries housed within the department. The number of Trust beneficiaries entering DOC with complex treatment needs continues to impact the department daily. The department services individuals with significant substance abuse, complex mental health needs, and neurological impairments. Many of these impairments require specialized care and interventions. Given the limited capacities within the state of Alaska to meet the needs of these populations, ADOC has had to seek increased training from outside resources to help meet the needs of these offenders. Providing staff with the needed training improves the care provided to Trust beneficiaries and increases DOC’s ability to recruit, train and retain staff within our system. The requested funds would focus on increasing medical, behavioral health, and security staff training.</p> <p>DOC continued to provide Mental Health First Aid training to all staff. In addition to MH First Aid training, the</p> | | |

department was able to offer a 4-day web-based training to training focused on the treatment of individuals who have mild to moderate mental and emotional health challenges—using evidence-based approaches including acceptance and commitment Therapy (ACT), cognitive-behavioral therapy (CBT), and dialectal behavior therapy (DBT).

The training focuses on evidence-based cognitive-behavioral therapy treatment programs that help people in the criminal justice system challenge their thinking to change their criminal and addictive behavior patterns.

This training assists the Department with efforts to move towards providing evidence-based interventions systemwide.

Providing the most up-to-date and relevant treatment options is critical for the engagement and success of treatment participants. Providing training equips our treatment facilitators with the most current and up-to-date information to help our clients overcome the challenges of addiction, trauma, and other related mental health disorders.

Comp Plan Information

| Goal | Objective |
|---|---------------------------------|
| Goal 8 Services in Institutional Settings | 8.3 Services while incarcerated |

Relevant Comp Plan Goals and Objectives: The comp plan supports funding to Train DOC Mental Health staff. The most relevant goals, objectives, and strategies are 8.3(a) and 9.2(a-d), centered on ensuring DOC staff are trained in Mental Health—First Aid, the professional development of behavioral health providers, and enhancing technology for distance-delivered curriculum.

8.3 Objective: Enhance and expand access to clinical and case management resources for incarcerated Alaskans.

- a) Strategy: Ensure all correctional and juvenile facility staff is trained in Mental Health First Aid or similar approaches to respond to crises as they occur correctly.

9.2 Objective: Advance the competencies of the healthcare, behavioral health, and public health workforce.

- e) Strategy: Expand training and professional development opportunities for all healthcare and behavioral health professionals.
- f) Strategy: Enhance the use of technology for distance-delivered educational opportunities.
- g) Strategy: Support curriculum development and the training of health professionals to ensure they learn, enhance, and update essential knowledge and skills.
- h) Strategy: Support training and other activities that enhance the health workforce’s competency in providing culturally and linguistically appropriate care.

Performance Data: The State of Alaska has historically had a very high recidivism rate of as high as 70%. That means for every 10 Alaskans released from incarceration, seven are rearrested within three years. Due to the efforts of the Trust and many partners, including the Alaska Department of Corrections, that number has been declining and is now just under 60%. This work is essential to Trust beneficiaries because they are disproportionality represented in the criminal justice system and the DOC incarcerated population than non-Trust beneficiaries. Due to the high number of justice-involved Alaskans incarcerated with an underlying behavioral health issue, the DOC is the largest behavioral health provider in the State of Alaska. Training for DOC mental health staff is crucial to ensuring that DOC personnel have the most up-to-date skills, practices,

and programming to provide the best outcomes for Trust beneficiaries.

FY 23 data is not yet available. In FY22, the Department of Corrections (DOC) continued its commitment to training all staff in Mental Health First Aid (MHFA) training, Trauma-informed interventions, and suicide prevention and intervention. This training is the basis for all care for Trust beneficiaries housed within the Department of Corrections. DOC mental health professionals also attended a 4-day web-based training focused on treating individuals with mild to moderate cognitive and emotional health challenges. They were using evidence-based approaches, including acceptance and commitment Therapy (ACT), cognitive-behavioral therapy (CBT), and dialectal behavior therapy (DBT). In FY22, DOC provided mental health training to 142 staff members.

Providing training for DOC personnel ensures that Trust beneficiaries will receive the most current support and services they need to achieve rehabilitation and successful reentry.

Project Recommendations: State departments have historically been challenged with having funds available for staff training; this will be even more challenging given the state’s fiscal position. To ensure the care provided to beneficiaries by DOC is current and of high quality, they must have resources available for ongoing training. This project offers positive outcomes to beneficiaries, and Trust staff recommends continued funding and support. Staff will continue to monitor this project and work with DOC staff to identify alternative funding sources beyond FY25. Or, if the project outcomes are not achieved, the team will work with DOC to adjust accordingly or recommend that Trust funding be discontinued.

Project Title: Specialized Skills & Services Training on Serving Criminally Justice-Involved Beneficiaries

Grantee: UAA-Center for Human Development (CHD)

Fund: MHTAAR

Years Funded: 19

Project Category: Workforce Development/Training

FY22: \$72,500

FY23: \$72,500

FY24: \$72,500

Project Description: This project will provide community providers with training opportunities for 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 conference will focus on training in specific interventions and support strategies targeting the needs of Trust beneficiaries involved in the criminal and juvenile justice systems.

The Reducing Recidivism and Reentry (RRR) Conference is the only such conference in Alaska. The RRR conference brings presenters and providers from around the United States and Alaska who are experts in providing support and services to justice-involved Trust beneficiaries to provide the most up-to-date data, information, and programs to Alaska. The RRR conference is part of the overall Trust strategy to reduce the number of Trust beneficiaries entering or becoming involved with the criminal justice system and to enhance and expand access to clinical and case management resources for incarcerated beneficiaries. The conference brings together case managers, coalition coordinators, behavioral health providers, peer support specialists, Department of Corrections and juvenile justice staff, and others serving Trust beneficiaries from all around the state and provides them with an opportunity to learn about the most up-to-date and successful

resources, programs, and services for justice-involved Trust beneficiaries.

Summary of Grant Progress: A major challenge with this year’s conference this year was costs, as all have risen significantly since 2019 before the COVID Pandemic. Further, this year’s conference saw record number of registrations (383) and 312 in attendance. This was addressed by leveraging partner resources and through Trust-supported training access funds provided by the Disability Law Center that supported 15 participants’ attendance.

The FY23 Planning Committee held a “debrief” session on March 3, 2023, to share FY 23 RRR Conference successes, challenges, and considerations for the future (FY 24).

One central discussion was around increasing involvement with/from policymakers. Elected officials to attend or present at the Conference next year (2024). The conversation moved to consider changing the traditional February dates to before the late January AK legislative session starts and looking at an early December date for the Conference. Pros and cons were discussed; it was a great conversation; however, no decision was made then.

Another consideration from the group was to have more outreach to new partners and sponsors next year (like Tanana Chiefs Conference) to help cover the increased costs of catering/hotel venue.

Comp Plan Information

| Goal | Objective |
|-----------------------------------|----------------------------|
| Goal 9 Workforce, Data, & Funding | 9.2 Workforce competencies |

Relevant Comp Plan Goals and Objectives: This grant approval is supported by comp plan goal, objective, and strategy 9.2(c,e,f,g), which are centered on professional development opportunities, curriculum development, enhancing competency, and providing training that educates and prepares attendees to work in inter-professional teams and divert Trust beneficiaries away from institutionalization and incarceration when appropriate.

9.2 Objective: Advance the competencies of the healthcare, behavioral health, and public health workforce.

- c) Strategy: Expand and enhance training and professional development opportunities for all healthcare and behavioral health professionals.
- e) Strategy: Support curriculum development and the training of health professionals to ensure they learn, enhance, and update essential knowledge and skills.
- f) Strategy: Support training and other activities that enhance the health workforce’s competency in providing culturally and linguistically appropriate care.
- h) Strategy: Expand the number and type of training and technical assistance opportunities that educate students and providers to work in inter-professional teams and participate in practice transformations.

Performance Data: On February 6 & 7, 2023, the UAA CHD Alaska Training Cooperative, in partnership with 22 representatives from stakeholder groups who served on the FY23 Planning Committee, successfully implemented a virtual/distance delivered the Annual Reducing Recidivism & Re-entry Conference- The Big Picture: Addressing Recidivism Through the Continuum of Services.

Three hundred eighty-three registrations (an increase of 55 from FY22 - 328).

312 (81%) attended one or both days of the FY 23 RRR Conference; 60 (19%) did not show up for any part of the event.

24 (7.7%) completed conference training and received National Association of Social Workers AK Chapter approved (11.75) general CEUs.

292 (76%) had fees waived (out of 383 registered participants)

This year the decision was made to partner with the Alaska Disability Law Center and assisted them in applying for a disability justice partnership grant from the Trust for Training Access Funds (TAF) so that RRR Conference participants and agencies could afford to travel from outside of the Anchorage area for the 2023 Conference. Fifteen participants took this opportunity for TA Funds, and a total of \$11,250.00 were awarded. For those unable to attend in person, the two Conference keynotes were video recorded and are being edited and will soon be made available to those who registered for the conference.

Three hundred fifty-five conference registrations included their communities: 89 from rural communities; (25%), 266 from urban communities (74.72%), and 10 (.28%) were from out of state. Twenty-one different communities were represented at the Conference this year (FY23).

A full FY23 conference evaluation report will be submitted, with the final Trust report due on October 1, 2023. Anecdotal positive feedback from FY 23 conference participants indicates that the conference was well-received and beneficial to those who attended.

Project Recommendations: This project offers positive outcomes to beneficiaries, and Trust staff recommends continued funding and support. Staff will continue to monitor this project and work with CHD staff to identify alternative sustainable funding sources beyond FY25. Or, if the project outcomes for beneficiaries are not achieved, the team will work with CHD to adjust accordingly or recommend that Trust funding be discontinued.

Project Title: Interpersonal Violence Prevention for Beneficiaries

Grantee: UAA Center for Human Development

Fund: MHTAAR

Years Funded: 18

Project Category: Workforce Development/Training

FY22: \$80,000

FY23: \$80,000

FY24: \$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:

- a) a train-the-trainer model to deliver a 10-week Friendships & Dating Program social skills curriculum and
- b) 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 children with serious emotional disturbance (SED). On-going clinical and technical assistance and support are provided to the trained facilitators every month to address issues in delivering information to beneficiaries and in 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 the Beneficiaries they work with.

Summary of Grant Progress: Meaningful interpersonal relationships are essential in the lives of Trust beneficiaries living with an intellectual and developmental disability (ID/DD). The difficulty of developing these relationships can be complicated by interpersonal violence. Persons with disabilities experience rates of victimization 1.5 to 10 times greater than people without disabilities, and beneficiaries living with ID/DD experience higher rates of violence and victimization than persons with any other type of disability. Risk factors of interpersonal violence, such as low socioeconomic status, low academic achievement, low self-esteem, and social isolation, are more frequent among individuals with disabilities. Individuals' developmental limitations, vulnerability, and lack of violence protection training also increase their risk. The problems of interpersonal violence and limited social networks are severe for persons with ID/DD, as they have limited opportunities to learn and acquire the skills to develop healthy relationships or to avoid abuse and other forms of victimization.

To address these concerns, the University of Alaska Anchorage (UAA) Center for Human Development (CHD), with support from the Alaska Mental Health Trust Authority, created the Friendships & Dating Program (FDP). A team of professionals developed the FDP as a primary prevention program to teach the social skills necessary to create healthy, meaningful relationships and to prevent violence in relationships for Trust beneficiaries living with ID/DD. Based on a review and recommendations found in the literature, the following guidelines were used to develop the FDP:

1. The program should focus equally on protecting oneself, creating opportunities, and helping people acquire the skills necessary to develop positive social relationships.
2. The program should include three core elements: information and instructions, modeling and rehearsing skills in role-play, and testing and rehearsing behaviors in situ.
3. The program should include collaboration between facilitators, caregivers, and participants.

The FDP curriculum is organized into a 10-week program with 20 sessions, two sessions per week. Each session is approximately 1.5 hours for a total of 30 program hours. The first session of the week (i.e., odd-numbered class sessions) presents concepts and skills modeled and rehearsed by facilitators and participants. In a subsequent session during the week (i.e., even-numbered community-based sessions), participants go out into their communities and have experiential learning opportunities to practice the skills and concepts presented in earlier sessions.

The FDP was designed for delivery with small co-ed groups of 6-8 participants. The program is based on a train-the-trainer model and is delivered by two community service providers trained as facilitators. Ideally, one is female and one male. Further, the FDP relies on a collaborative structure among participants, facilitators, and care providers (i.e., individuals who provide significant support in a participant's life).

During FY23, the program did encounter some challenges due to turnover in leadership. The Friendships & Dating Program coordinator transitioned to a management role at CHD in June of 2022. The search for a new Health Projects Coordinator was launched, and a new coordinator was hired in October 2022. The change did make it challenging to maintain all aspects of the program. However, the team remained focused on strengthening core program functions, expanding the program's reach, and increasing the program's quality through content development. Specifically, CHD is working to keep the program progressing and expand its reach by:

- Offering three facilitator training to Alaskan agencies per year

- Offering two pieces of training for DSPs and other care providers that focus on supporting a person’s relationship and sexuality goals.
- Presenting to meetings and conferences to increase the visibility of the program.
- CHD plans to increase the quality of the program and address other areas of development by:
- Implementing a new supplemental class about social media, dating apps, and the use of online resources to enhance relationships. This will involve training offered to current facilitators and printing and distributing materials to support the session.
- Continue updating handouts to modernize them and make them more visually impactful for program participants.
- Create new in-person and virtual activities to provide facilitators with various options for engaging participants. These activities will be added to the FDP website to ensure they are accessible to facilitators.
- Offer more supplemental training for trained facilitators to enhance their ability to implement the program effectively.
- The Support Network Orientation has been translated into Spanish. This partnership will continue, and the curriculum handouts will be next.

Comp Plan Information

| Goal | Objective |
|-----------------------------------|----------------------------|
| Goal 9 Workforce, Data, & Funding | 9.2 Workforce competencies |

Relevant Comp Plan Goals and Objectives: The comp plan supports the Interpersonal Violence Prevention project. The most relevant goals, objectives, and strategies are 9.2(a-d), centered on the professional development of behavioral health providers and enhancing technology for distance-delivered curricula. 9.2 Objective: Advance the competencies of the healthcare, behavioral health, and public health workforce.

- i) Strategy: Expand training and professional development opportunities for all healthcare and behavioral health professionals.
- j) Strategy: Enhance the use of technology for distance-delivered educational opportunities.
- k) Strategy: Support curriculum development and the training of health professionals to ensure they learn, enhance, and update essential knowledge and skills.
- l) Strategy: Support training and other activities that enhance the health workforce’s competency in providing culturally and linguistically appropriate care.

Performance Data:

The Interpersonal Violence Prevention project continues to demonstrate positive outcomes for beneficiaries and agency staff serving beneficiaries and raises awareness about interpersonal violence experienced by beneficiaries. The curriculum for this project is an evidence-based program with documented statically significant behavioral outcomes for program participants.

The data below is for FY23:

Friendships & Dating Program (FDP) Implementation

These agencies reported they used the FDP with individuals/groups during this reporting period:

Hearts and Hands of Care – 6 participants

Genacta – 6 participants
Alaska Psychiatric Institute – 8 participants
The Arc of Anchorage – 8 participants
Community Connections – 2 participants
Denali Family Services – 10 participants
MethodWorks – 1 participant

Training/Conference Presentations

FDP held the following trainings:

- One facilitator training - 16 Alaskans trained/9 agencies
- One poster session at the AUCD Annual Conference on November 14, 2022. The poster was created and presented by OHSU. CHD supported OHSU in answering questions during the audience interaction portion.
- One training for the DSP Badging Pilot on January 24, 2023, with 17 attendees. The focus was supporting people with intellectual and developmental disabilities (IDD) to develop healthy relationships and sexuality.
- 80/51One presentation to UAA’s LEND Program overviewing FDP on February 3rd, 2023. The audience included 12 LEND fellows and 9 LEND faculty.

Other Program Highlights

For the supplemental session focused on social media and dating, CHD has completed a draft session/handouts and is arranging a feedback session for people with lived experience.

FDP is scheduled for two upcoming events, both focusing on helping parents/guardians have more supportive interaction around healthy relationships and sexuality. These events include a booth at the Stone Soup Group Parent Conference and; a presentation at the Full Lives conference titled “Working with Guardians to Support Relationship Development and Healthy Sexuality.”

CHD worked with OHSU to obtain a Spanish translation of the Support Network Orientation Packet. This will be posted on the FDP website before the end of the year.

UAA- Center for Human Development staff expect Trust beneficiaries participating in the 10-week program to increase their knowledge about healthy relationships and socio-sexual skills. They are developing a tool to collect data to demonstrate the program’s overall effectiveness, favorable outcomes, and participant satisfaction. The development and implementation of this tool is expected to be completed following FY 23.

Project Recommendations: This project is believed to offer positive outcomes to beneficiaries, and Trust staff recommend continued funding and support for the agency. Staff will continue to monitor this project and work with CHD staff to identify alternative sustainable funding sources beyond FY25. Or, if the project outcomes for beneficiaries are not achieved, the team will work with CHD to adjust accordingly or recommend that Trust funding be discontinued.

Project Title: Flexible Funding for Therapeutic Court Participants (Anchorage, Juneau, Palmer, and PFIT)

Grantee: Partners for Progress

Fund: Authority Grant

| | | |
|---|---|------------------------|
| Years Funded: 16 | Project Category: Direct Service | |
| FY22: \$229,500 | FY23: \$229,500 | FY24: \$229,500 |
| <p>Project Description: This project provides financial resources to assist therapeutic court participants in meeting basic or emergent needs to maintain or progress in recovery and self-sufficiency and comply with court-ordered conditions.</p> <p>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. The mental health court Project Coordinator will authorize the disbursement of funds by established policies and procedures.</p> | | |
| <p>Summary of Grant Progress: The Coordinated Resources Project (CRP)—also known as the Mental Health Court—is a voluntary “therapeutic” or “problem-solving” court. Located within the Anchorage, Palmer, and Juneau District Courts, these courts hear cases involving individuals with mental health disorders or disabilities who are charged with criminal offenses and are Trust beneficiaries.</p> <p>CRP courts are post-booking, diversionary responses to the problem of “criminalization”—an increased likelihood that Trust beneficiaries will be processed through the criminal justice system instead of the mental health system. The courts divert people with mental health disorders or disabilities charged with criminal offenses from incarceration into appropriate community treatment and services to prevent further contact with the criminal justice system. The project supports the well-being of Trust beneficiaries by identifying criminogenic risk factors (factors known to impact recidivism) and developing a comprehensive case plan responsive to the participant’s needs. The program addresses mental health and substance abuse, educational and vocational deficits, family and relationship problems, criminal thinking, and housing. The plan promotes engagement in meaningful activities and increases overall social functioning.</p> <p>Objectives of the Community Resources Projects are to:</p> <ul style="list-style-type: none"> • Promote public safety. • Reduce inappropriate incarceration of Trust beneficiaries and promote their well-being in the community. • Relieve the burden on the Department of Corrections presented by inmates with mental health disorders or disabilities. • Reduce repeated criminal activity among offenders with mental health disorders or disabilities (legal recidivism). • Reduce psychiatric hospitalization of offenders with mental health disorders or disabilities (clinical recidivism). <p>To be eligible for participation in a CRP, a defendant must be:</p> <ul style="list-style-type: none"> • Charged with a misdemeanor or Class C felony. • Diagnosed with a mental illness (a beneficiary of the Alaska Mental Health Trust Authority). • Residing in a community with a CRP court. • Willing to voluntarily participate in an individualized case plan instead of traditional bail or sentencing conditions. • Eligible to receive community behavioral health services. <p>The court diverts eligible offenders who are Trust beneficiaries from jail and into appropriate community treatment, focusing on their therapeutic and criminogenic needs (factors predictive of recidivism). With the second generation of mental health courts, we follow criminal justice research emphasizing the importance of addressing criminogenic needs when the case plan is developed.</p> | | |

A critical highlight of CRPs is providing a single point of contact for a criminal defendant with a mental health disorder or disability. The project offers a multidisciplinary team of designated and trained judges, prosecutors, defense attorneys, and probation officers who consistently participate in court hearings. A defendant can receive assistance from the project in developing, coordinating, and monitoring an individualized case plan. The court orders that plan as a condition of bail or probation. Participants are monitored by probation officers who work exclusively with CRP. The Division of Behavioral Health, Alcohol Safety Action Program employs CRP probation officers. Probation officers provide treatment, resource matching, and linkage to and monitoring the case plan.

The court monitors the participant’s adherence to the case plan through regularly held status hearings and receives reports on the participant’s progress. If treatment non-adherence occurs, the court may adjust the schedule to motivate adherence or employ non-jail-based sanctions or incarceration.

The Flexible Funding for Therapeutic Court Participants program supports Trust beneficiaries participating in the therapeutic courts in Anchorage, the Mat-Su, and Juneau. Flex funds support these Trust beneficiaries by helping them with some of the costs associated with program participation, such as housing, transportation, medical/behavioral health services, and other fees, such as purchasing appropriate clothing for employment and issues around food security.

The Flex Funding program does face some challenges, primarily dealing with Trust beneficiary stigma and a lack of service providers due to workforce issues. Partners for Progress and the various therapeutic courts work to overcome these challenges by building relationships with housing providers and behavioral health providers. Partners for Progress also contracts with the Therapeutic Court Alumni Group to provide peer support services for participants to overcome workforce shortages among behavioral health providers.

Comp Plan Information

| Goal | Objective |
|--|--|
| Goal 7 Services in the Least Restrictive Environment | 7.3 Reduce beneficiaries involved in criminal justice system |

Relevant Comp Plan Goals and Objectives: The Flex Funds program is supported by comp plan goal, objectives, and strategies 3.1(b) and 7.3(b, c, and d), which are centered on housing services for beneficiaries in the least restrictive environment and expanding access to treatment and support services for justice-involved beneficiaries.

3.1 Objective: Alaskans have stable, safe housing with appropriate, community-based social supports to maintain a tenancy.

b) Strategy: Provide transition and housing services to enable individuals to live in the least restrictive housing option.

7.3 Objective: Reduce the number of Trust beneficiaries entering or becoming involved with Alaska’s criminal justice or juvenile justice system.

b) Strategy: Increase awareness of least restrictive, long-term services and supports through counseling on options and person-centered interviewing.

c) Strategy: Collaborate with other criminal or juvenile justice-involved partners to develop and implement services for Trust beneficiaries.

d) Strategy: Expand immediate access to treatment and support services for individuals who encounter law enforcement and the legal system.

Performance Data: The Coordinated Resources Project (CRP) courts operate in the Anchorage, Palmer, and Juneau District Courts, and the Flexible Funding for Therapeutic Court Participants program supports Trust beneficiaries who participate in these courts. FY23 data has yet to be available, but in FY22, flex funds supported needed services for about 147 Trust beneficiaries. The following is data regarding the flex funds for these courts from FY22, broken down by each court.

The Anchorage CRP Court ran at an average of 76% capacity during Q3 FY22, with 56% of the grant primarily used for housing. Seventeen unique individuals received housing assistance during FY22. Emergent needs could be provided by gift cards and clothing vouchers, with 6% spent from the grant funds and 4% spent on transportation. 66% of the budget was used, with an average cost of \$3,264.00 per participant. Partners continue to supplement the grant by requesting donations to help provide small emergent need items and incentives.

COVID Partners offered online employment workshops, computer training, computer access, money management counseling, clothing, haircuts, and bicycles to CRP Court participants. These were available at various housing locations.

In addition, Partners contracts with the Alaska Therapeutic Court Alumni (AKTCA) to provide Wellness Together Process Groups for all court participants. One CRP Court graduate works closely with Partners, the Alaska Therapeutic Court Alumni (AKTCA), to provide peer support for participants in the Anchorage CRP Court. Participants in the CRP Court fall into the combined beneficiary designations of Mental Illness, Chronic Substance Use and Mental Illness, Chronic Substance Use, and Traumatic Brain Injury. This year, due to COVID, Partners contracted with Alaska Therapeutic Court Alumni to provide ZOOM Peer Support Group Meetings for court participants. The AKTCA also offers monthly online activities for all court participants.

Partners work closely with the MHC project Coordinator to maintain housing and emergent needs for court participants while staying within the FY22 budget. Partners established a contract with Yellow Cab to provide transportation for CRP participants.

The Juneau CRP Court ran at an average of 51% capacity during FY22. It utilized 34% of its FY22 budget. One participant was provided housing for Tlingit & Haida Housing using 29% of the fiscal year's budget. Participants also received emergent needs items using 8% of the budget. The average cost per participant was \$3,037.00. Participants in the CRP Court fall into the combined beneficiary designations of Mental Illness, Chronic Substance Use and Mental Illness, Chronic Substance Use, and Traumatic Brain Injury.

Partners work with housing providers Gastineau Services, Juneau Alliance for Mental Health Inc., JAMHI, The Breakwater Inn, Central Council Tlingit, Haida, and Volunteers of America to keep abreast of housing availability. Partners also contract with Rachel's Rides to provide rides for court participants. Partners are working closely with the court team to find more safe, affordable housing for participants in the CRP Court. Increased housing opportunities may increase the number of participants in the CRP Court.

The Palmer CRP Court ran at an average of 71% capacity during FY22, costing \$2,252.00 per participant. Usually, this court runs at capacity, but the COVID-19 restrictions have affected new intakes. It utilized 55% of its FY22 budget. The heaviest demand has been housing, using 44% of the FY22 budget, helping 11 unique individuals this quarter, less than 9% spent on emergent needs, and 2% on transportation. Participants in the CRP Court fall into the following categories: Mental Illness and Chronic Substance Use; Mental Illness-Chronic Substance Use and Developmental Disabilities; Mental Illness, Developmental Disabilities: Chronic Substance

Use and Developmental Disabilities.

Partners work closely with the MHC project Coordinator to maintain housing and emergent needs for court participants while staying within the FY21 budget. A new housing provider, Set Free Alaska, Inc. was added. Partners continued to supplement the grant by requesting donations to help provide small emergent need items and incentives.

Partners work closely with the CRP Court Project Coordinator to establish policies and procedures that fit the activities and programs of that court.

Palmer FIT Court- The Palmer FIT court ran at an average of 67% capacity during FY22 with an average of \$1,371.92 cost per participant. The court usually runs at capacity but due to COVID-19 restrictions. The FIT court spent 71% of its budget during FV22, with 17% spent primarily on participant emergent needs, such as utilities, and specific requirements for children, 19% on housing, and 34% on transportation. FV22 FIT Court Funding assisted 18 Trust beneficiaries who fall into the beneficiary categories of Mental Illness, Chronic Substance Use, and a combination of Mental Illness and Chronic Substance Use.

Partners began working with the Palmer FIT Court in February 2018. Unlike the other therapeutic courts Partners works with, there is no parole officer supervision of the court participant or court representative monitoring requests. Partners work directly with the OCS case manager to determine the needs and assistance that participants may need.

Project Recommendations: This project is believed to offer positive outcomes to beneficiaries, and Trust staff recommends continued funding and support for the program as it works towards sustainability. Or, if the project outcomes for beneficiaries are not achieved team will work with Alaska Court System and Partners for Progress to adjust accordingly or recommend that Trust funding be discontinued.

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|--|--|-----------------------|
| Project Title: Centralized Competency Calendar Paralegal | | |
| Grantee: Alaska Court System | | |
| Fund: MHTAAR | | |
| Years Funded: 6 | Project Category: Capacity Building | |
| FY22: \$78,300 | FY23: \$78,300 | FY24: \$78,300 |
| Project Description: The Anchorage Centralized Competency Calendar is a project in the disability justice focus area that addresses delays in court proceedings of Trust beneficiaries who are justice-involved and have been ordered to undergo a forensic competency evaluation. | | |
| 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 more time incarcerated. In some cases, they spent 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, on average, it took 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 funds a paralegal position to assist with managing, collecting data, and tracking 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. Managing the Centralized Competency Calendar and collecting, tracking, and reporting these cases and trends are critical to understanding the reasons for the delays in evaluation and restoration orders and recommending solutions.

Summary of Grant Progress: Under Alaska State law, an Alaskan charged by the state with a crime must possess a mental competency sufficient to aid in their defense. When a question is raised that places the mental competency of the defendant in question, usually due to a severe and persistent mental illness or co-occurring disorder such as a substance use disorder, developmental disability, traumatic brain injury, or Alzheimer's or dementia, the court may order a forensic evaluation. Once the order is entered into the court's record, the case is held until an evaluation can occur and the findings are presented to the court. Suppose the person is found to be incompetent. In that case, the court may order restoration intended to restore the defendant's mental competency so they can participate in their defense.

The Alaska Court System case scheduling system is called a "calendar" to schedule and track cases as they move through the system. With the Anchorage Centralized Competency Calendar project, the Trust supports a paralegal to work with a competency calendar in the Anchorage 3rd Judicial District to schedule and track court cases where a competency evaluation has been ordered for the defendant. The paralegal assists with the management, data collection, and tracking of the issues on the 3rd Judicial District's Centralized Competency Calendar. The paralegal coordinates with the Alaska Psychiatric Institute (API) and the Alaska Department of Family and Community Services (DFCS) to ensure that forensic competency evaluations and subsequent restoration efforts happen promptly.

This project is valuable to Trust beneficiaries with severe and persistent mental illness and becoming involved with the criminal justice system. In the absence of a dedicated competency calendar with a paralegal, the competency process, as dictated under Alaska statute Title 12, can be lengthy and necessitate the defendant be incarcerated for a prolonged amount of time and sometimes longer than they would have been detained had they been convicted of the alleged criminal act. The Anchorage Competency Calendar and the paralegal supported by the Trust track these cases and ensure they are recovered, with Trust beneficiaries languishing in jail. In addition to providing timely possibilities, the paralegal collects, tracks, and reports data on these cases. Collecting data, tracking, and reporting these cases and trends are critical to understanding the reasons for the delays in evaluation and restoration orders and recommending solutions to ensure justice-involved Trust beneficiaries do not spend more time incarcerated than required.

The Centralized Competency Calendar has made the initial stages of competency proceedings run very efficiently; orders for evaluation are transmitted to API, the turnaround time for assessment from API is good, initial hearings to determine competency are held promptly, and in uncontested cases, orders on competency are issued swiftly. Because judges' calendars are generally full, it has become challenging to schedule contested competency hearings, and points can get "bogged down" in these instances. The Alaska court personnel have ideas for addressing this issue that they hope may alleviate it.

And, as has been the case for several years, there is still a significant backlog after a defendant has been determined to be incompetent and ordered to restoration, where the defendant remains on a "waitlist" for restoration services provided by API.

| Comp Plan Information | |
|---|--|
| Goal | Objective |
| Goal 7 Services in the Least Restrictive Environment | 7.3 Reduce beneficiaries involved in criminal justice system |
| <p>Relevant Comp Plan Goals and Objectives: The Anchorage Centralized Competency Calendar Paralegal project, with its most relevant goals, objectives, and strategies, is supported by comp plan Goal and Objective 7.3, process (d), centered on providing support and services for Trust beneficiaries who are involved with the criminal justice system in an effort for them to receive services in the lease restrictive environment.</p> <p>Goal and Objective 7.3: Reduce the number of Trust beneficiaries entering or becoming involved with Alaska’s criminal justice or juvenile justice system.</p> <p>d) Strategy: Expand immediate access to treatment and support services for individuals who encounter law enforcement and the legal system.</p> | |
| <p>Performance Data: As data from FY23 is forthcoming, the data provided is for FY22.</p> <p>In FY22, the competency calendar served 196 Trust Beneficiaries who were involved in the court system in Anchorage. Of the Trust Beneficiaries who helped, there were 232 where a competency evaluation was ordered (some beneficiaries had multiple cases). This is an increase of 79 orders from the 153 orders in FY21. Once called, the court received the results within 2.5 weeks on average. Of the 232 cases, 45 orders in cases involving only felony charges. There were 92 orders in cases where the defendant was charged with a felony and a misdemeanor. And there were 94 cases in which the defendant only had a misdemeanor charge.</p> <p>Of the cases where competency evaluations were ordered, the defendant was found competent in 78 instances and incompetent where charges were dismissed in 84 patients. In 51 points, the defendant was found unfit and ordered to API for restoration, and in 12 cases, the prosecutor dismissed the charges. For the 51 cases where the repair was ordered at API, the issue of competency was as follows: found incompetent and charges dismissed before restoration at API in 22 points; 7 cases are awaiting restoration on a waitlist; defendant found competent before API in 3 instances; the prosecutor has rejected charges before restoration at API in 7 patients; defendant found competent after repair in 6 cases; defendant found incompetent and charges dismissed in 6 cases.</p> <p>The average time between the restoration order and the defendant’s arrival at API was 150 days.</p> | |
| <p>Project Recommendations: This project is believed to offer positive outcomes to beneficiaries, and Trust staff recommends continued funding and support for the agency until sustainability can be achieved. Staff will continue to monitor this project and work with Alaska Court System (ACS) team to identify alternative sustainable funding sources beyond FY25. Or, if the project outcomes for beneficiaries are not achieved, staff will work with ACS to adjust accordingly or recommend that Trust funding be discontinued.</p> | |

| | | |
|--|---|------------------------|
| Project Title: Holistic Defense Model | | |
| Grantee: Public Defender Agency (Dept. of Administration) & Alaska Legal Services | | |
| Fund: MHTAAR & Authority Grant | | |
| Years Funded: 9 | Project Category: Direct Service | |
| FY22: \$270,100 | FY23: \$180,000 | FY24: \$403,400 |
| <p>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.</p> <p>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. They will be randomly selected from clients assigned to the public defender in the Bethel region.</p> <p>A criminal attorney will address project participants’ criminal legal needs, a social worker will 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.</p> | | |
| <p>Summary of Grant Progress: One issue facing Trust beneficiaries who become involved in the criminal justice system is difficulty in receiving services while in pretrial status. Trust beneficiaries are exposed to the investigative process during this critical period of the criminal justice system. This process includes serving search warrants and subpoenas and seizing records that contain medical and behavioral health diagnoses and treatment records that can be used against the accused in their criminal case. To avoid this issue, Trust beneficiaries who allegedly committed a crime often do not seek out or refuse behavioral health support and services.</p> <p>One opportunity to overcome this barrier to behavioral health support and services is the Holistic Defense Program. The Holistic Defense Program (HDP) is a partnership between the Alaska Public Defender Agency (PD) and Alaska Legal Services (ALSC) that provides criminal defense, civil legal assistance, and case management to Trust beneficiaries who have come into contact with the criminal justice system and are not participating in a therapeutic court. The Holistic Defense program has four core pillars:</p> <ul style="list-style-type: none"> • Seamless access to services that meet legal and social support needs <i>Holistic defense begins with a commitment to addressing clients’ most pressing legal and social support needs. Because these needs vary from community to community, a holistic defender office must begin by identifying the full range of client needs.</i> • Dynamic, interdisciplinary communication <i>The interdisciplinary team alone is not what drives the success of holistic defense — it is the team’s culture of open, frequent, and meaningful communication.</i> • Advocates with an interdisciplinary skillset <i>A holistic defender goes beyond the zealous advocacy of the committed public defender with an enhanced set of client-centered and interdisciplinary skills.</i> • A robust understanding of, and connection to, the community served <i>Holistic defense recognizes that an advocate who can better relate to their client by spending time in</i> | | |

their neighborhood and with community members will be more likely to provide authentic and effective representation.

The Holistic Defense program started in 2016 in Bethel, and after producing positive outcomes for Trust beneficiaries, such as connection to supports and services, cases dismissed due to participant’s therapeutic activities, and shorter sentences for beneficiaries participating in the program, expansion into Nome and Kotzebue was recommended and approved by Trustees.

The Public Defender (PD) and ALSC staff worked with project partners during the reporting period to expand the program. Expansion activities included hiring new teams by the PD and ALSC, onboarding and training staff, and pre-existing front-line staff working to refine outreach and referral protocols to increase efficiency and effectiveness.

While the Holistic Defense program continues to provide positive outcomes for Trust beneficiaries and progress on project expansion, partners have experienced some challenges related to pandemic-related court delays, workforce shortages, and a shortage of attorneys to provide legal representation. To overcome some of these challenges, the PD and ALSC had to adjust referral and operational protocols to account for social distancing and other health mandates, and both organizations raised attorney salaries to attract attorney candidates and retain current staff.

Comp Plan Information

| Goal | Objective |
|---------------------------------------|--|
| Goal 6 Protecting Vulnerable Alaskans | 6.5 Rights and responsibilities for Alaskans |

Relevant Comp Plan Goals and Objectives: The Holistic Defense program is supported by comp plan goal, objectives, and strategies 6.5(b) and 7.3(b, c, and d), which are centered on ensuring Trust beneficiaries have access to legal services and understand their legal rights and expanding access to treatment and support services for justice-involved beneficiaries.

6.5 Objective: Ensure vulnerable Alaskans understand their rights and responsibilities.

b) Strategy: Improve access to advocacy supports and quality civil and criminal legal assistance for all beneficiaries.

7.3 Objective: Reduce the number of Trust beneficiaries entering or becoming involved with Alaska’s criminal justice or juvenile justice system.

e) Strategy: Increase awareness of least restrictive, long-term services and supports through counseling on options and person-centered interviewing.

f) Strategy: Collaborate with other criminal or juvenile justice-involved partners to develop and implement services for Trust beneficiaries.

g) Strategy: Expand immediate access to treatment and support services for individuals who encounter law enforcement and the legal system.

Performance Data: The most recent performance data available is from FY 22, the sixth year of the Holistic Defense project.

This project is a formal joint partnership between the Public Defender Agency (PDA) and Alaska Legal Services Corporation Inc. (ALSC) through an MOU to address beneficiaries’ criminal and civil needs simultaneously. As the state and the court have ramped down COVID protocols that have significantly affected participation numbers, the team has been able to identify, recruit, and assist new clients who need

the unique services provided by the HDP. Also, during this year, there has been an increase in cases dismissed by prosecutors where a social service or rehabilitative approach is more appropriate.

During the reporting period, the project’s expansion into a new region took hold and started to show promise. It now serves Nome and Kotzebue and surrounding communities and those in the Bethel region. Development into the Mat-Su will begin during FY24.

In FY22, 104 beneficiaries were referred to and received services from the HDP. 21 beneficiaries experienced mental illness and substance use disorder, 9 experienced a developmental disability and mental illness, 4 experienced a developmental disability and substance use disorder, and one experienced substance use disorder and a traumatic brain injury. The HDP teams serving beneficiaries in Bethel, Nome, and Kotzebue were able to help 76 clients identify their needs, 60 had a resource for the identified need, and the HDP teams helped 14 clients enter treatment. The project provided a variety of services to HDP participants, with the most significant percentage of assistance has been with obtaining an assessment (37%), social histories taken (32%), received ongoing case management (28%), and received a referral to other services (22%).

In FY 22, the HDP teams closed 57 cases, 13 received dismissals, 18 sentences were mitigated, and two families were reunified.

Project Recommendations: The HDP project has a demonstrated history of providing positive outcomes to beneficiaries, and Trust staff recommends continued funding and support. Staff will continue to monitor this project and work with our partners to identify alternative sustainable funding sources beyond FY25. Or, if the project outcomes for beneficiaries are not achieved, staff will work to adjust accordingly or recommend that Trust funding be discontinued.

Project Title: Disability Justice Support Funding

FY23 Grantees (through 4/26/2023):

- Disability Law Center of Alaska - Training Access Funds for the 2023 Annual Reducing Recidivism & Re-entry Conference, \$22,500
- JAMHI Health & Wellness Juneau Reentry Advocacy Training and Reentry Simulation, \$2,600
- Ketchikan Wellness Coalition – Reentry Housing, \$15,000

Fund: Authority Grant

| | |
|------------------------|--|
| Years Funded: 3 | Project Category: To be determined based on individual project type |
|------------------------|--|

| | | |
|------------------------|------------------------|------------------------|
| FY22: \$150,000 | FY23: \$300,000 | FY24: \$200,000 |
|------------------------|------------------------|------------------------|

Project Description: This grant provides funding to support organizations serving Trust Beneficiaries within the Disability Justice Focus Area under Community Intervention/Diversion and In-facility Practices.

Disability Law Center of Alaska - Training Access Funds for the 2023 Annual Reducing Recidivism & Re-entry Conference: Summary of Grant Progress: In 2014, the Trust funded a study of the prevalence and characteristics of Trust beneficiaries who entered, exited, or resided in an Alaska Department of Corrections facility between July 1, 2008, and June 30, 2012. The study identified over 60,000 unique individuals, of which 30 percent were identified as Trust beneficiaries. Additionally, Trust beneficiaries accounted for more than 40 percent of the incarcerations each year, and their median length of a jail/prison stay was significantly longer than for non-Trust beneficiary offenders. The high prevalence of Trust beneficiaries incarcerated at any given

time and a recidivism rate more than two times the rate of non-Trust beneficiaries has led to the Alaska Department of Corrections becoming the largest provider of mental health services in the State of Alaska. Providing behavioral health services for Trust beneficiaries within DOC facilities is the least therapeutic and least effective environment.

The Reducing Recidivism and Reentry (RRR) Conference is the only conference of its kind in Alaska. The RRR conference brings presenters and providers from around the United States and Alaska who are experts in providing support and services to justice-involved Trust beneficiaries to provide the most up-to-date data, information, and programs to Alaska. The RRR conference is part of the overall Trust strategy to reduce the number of Trust beneficiaries entering or becoming involved with the criminal justice system and to enhance and expand access to clinical and case management resources for incarcerated beneficiaries. The conference brings together case managers, coalition coordinators, behavioral health providers, peer support specialists, the Department of Corrections and juvenile justice staff, and others serving Trust beneficiaries from all around the state. It allows them to learn about the most up-to-date and successful resources, programs, and services for justice-involved Trust beneficiaries.

Due to the high cost of travel in Alaska, many organizations serving justice-involved Trust beneficiaries in rural areas outside of Anchorage need help to pay for their staff to attend the RRR conference. The Disability Law Center received Trust funding from the disability justice focus area budget to cover travel costs for up to 30 conference participants outside Anchorage. Approving this request ensured behavioral health providers from rural communities on and off the road system could participate in the RRR conference and gain the skills and knowledge they need to stand up programs or provide services to justice-involved Trust beneficiaries in the most therapeutic and effective environment.

Disability Law Center of Alaska - Training Access Funds for the 2023 Annual Reducing Recidivism & Re-entry Conference: Comp Plan Information

| Goal | Objective |
|-----------------------------------|----------------------------|
| Goal 9 Workforce, Data, & Funding | 9.2 Workforce competencies |

Disability Law Center of Alaska - Training Access Funds for the 2023 Annual Reducing Recidivism & Re-entry Conference: Relevant Comp Plan Goals and Objectives:

The DLC RRR TAF grant approval is supported by comp plan goal, objective, and strategy 9.2(c,e,f,g), which are centered on professional development opportunities, curriculum development, enhancing competency, and providing training that educates and prepares attendees to work in inter-professional teams and divert Trust beneficiaries away from institutionalization and incarceration when appropriate.

9.2 Objective: Advance the competencies of the healthcare, behavioral health, and public health workforce.

- d) Strategy: Expand and enhance training and professional development opportunities for all healthcare and behavioral health professionals.
- g) Strategy: Support curriculum development and the training of health professionals to ensure they learn, enhance, and update essential knowledge and skills.
- h) Strategy: Support training and other activities that enhance the health workforce’s competency in providing culturally and linguistically appropriate care.
- i) Strategy: Expand the number and type of training and technical assistance opportunities that educate students and providers to work in inter-professional teams and participate in practice transformations.

Disability Law Center of Alaska - Training Access Funds for the 2023 Annual Reducing Recidivism & Re-entry Conference: Performance Data: During FY23, the RRR saw a record number of 312 actual in-person attendees. Due to the high number of participants and increased conference costs, the Disability Law Center applied for Trust support from the disability justice focus area support funding budget for Training Access Funds (TAF). This funding was used so that RRR Conference participants and agencies could afford to travel from outside of the Anchorage area for the 2023 Conference. Fifteen participants took this opportunity for TAF, and \$11,250.00 was utilized.

Disability Law Center of Alaska - Training Access Funds for the 2023 Annual Reducing Recidivism & Re-entry Conference: Project Recommendations: This was a one-time funding request, and any further funding for DLC for RRR TAF will be considered through the letter of interest process.

JAMHI Health & Wellness Juneau Reentry Advocacy Training and Reentry Simulation: Summary of Grant Progress: The Juneau Reentry Coalition (JREC) requested Trust funding to support a reentry advocacy training and reentry simulation held and conducted in Juneau from January 23 to January 25, 2023. The advocacy training was attended by reentry coalition coordinators, case managers, and individuals with lived experience. It gave them a practical understanding of advocacy and the skills to advocate for Trust beneficiaries in the justice system. In addition to the advocacy training, attendees assisted the JREC with conducting a reentry simulation for Alaskan Mental Health Trust Trustees, State of Alaska policymakers, and residents of Juneau. The simulation allowed participants to experience what it is like to be a returning citizen and better understand the obstacles they face as they reenter society. The advocacy training and reentry simulation benefited Trust beneficiaries by ensuring trained advocates can advocate on their behalf and that policymakers and interested parties understand what the justice-involved Trust beneficiary is experiencing.

In 2014, the Trust funded a study of the prevalence and characteristics of Trust beneficiaries who entered, exited, or resided in an Alaska Department of Corrections facility between July 1, 2008, and June 30, 2012. The study identified over 60,000 unique individuals, of which 30 percent were identified as Trust beneficiaries. Additionally, Trust beneficiaries accounted for more than 40 percent of the incarcerations each year, and their median length of a jail/prison stay was significantly longer than for non-Trust beneficiary offenders. The high prevalence of Trust beneficiaries incarcerated at any given time and a recidivism rate more than two times the rate of non-Trust beneficiaries has led to the Alaska Department of Corrections becoming the largest provider of mental health services in the State of Alaska. Providing behavioral health services for Trust beneficiaries within DOC facilities is the least therapeutic and least effective environment.

Approving this request allowed JREC to provide valuable advocacy training to those providing justice-involved Trust beneficiaries with the services and support they need to succeed. It assisted JREC with conducting the reentry simulation in Juneau.

JAMHI Health & Wellness Juneau Reentry Advocacy Training and Reentry Simulation: Comp Plan Information

| Goal | Objective |
|--|--|
| Goal 7 Services in the Least Restrictive Environment | 7.3 Reduce beneficiaries involved in criminal justice system |

JAMHI Health & Wellness Juneau Reentry Advocacy Training and Reentry Simulation: Relevant Comp Plan Goals and Objectives:

The JREC Advocacy Training and Reentry Simulation grant approval is supported by comp plan goal, objectives, and strategies 7.3(c and d), centered on providing training that increases collaboration to develop and implement services and expands access to treatment and support services for justice-involved beneficiaries.

7.3 Objective: Reduce the number of Trust beneficiaries entering or becoming involved with Alaska’s criminal justice or juvenile justice system.

- c) Strategy: Collaborate with other criminal or juvenile justice-involved partners to develop and implement services for Trust beneficiaries.
- d) Strategy: Expand immediate access to treatment and support services for individuals who encounter law enforcement and the legal system.

JAMHI Health & Wellness Juneau Reentry Advocacy Training and Reentry Simulation: Performance Data:

The advocacy training was attended by 25 advocates who participated in the reentry simulation. We do not have the total number of participants participating in the reentry simulation. Still, it appeared to be very well attended by Trust beneficiaries with lived experience, advocates, and policymakers. As a result of the advocacy training and reentry simulation, advocates could engage with policymakers throughout this legislative session. This engagement was vital in the introduction and passing of legislation to ensure reentrants who may be Trust beneficiaries have a valid state ID upon release and amendments to House bill 66 (HB 66) that removed language affecting “good time” that would have negatively impacted justice-involved Trust beneficiaries who are incarcerated.

JAMHI Health & Wellness Juneau Reentry Advocacy Training and Reentry Simulation: Project

Recommendations: This was a one-time funding request, and any further funding for advocacy training and reentry simulations will be considered through the letter of interest process.

Ketchikan Wellness Coalition – Reentry Housing: Summary of Grant Progress: Criminal Justice Reform and Reinvestment is a priority for Trust resources, funding, and staff. Approximately 40% of incarcerations annually are Trust beneficiaries. Trust beneficiaries spend more time incarcerated than non-Trust beneficiaries in pre-sentence and sentenced status. And within the first-year post-release, criminal recidivism rates for beneficiaries are twice the rate of non-beneficiaries. This high recidivism rate is due to the number of barriers facing returning Trust beneficiaries, such as finding employment, needing behavioral health services, and housing.

In Ketchikan, many returning beneficiaries have been trespassed, banned, or otherwise ineligible for shelter and do not have a safe and stable place to live. To overcome these barriers to housing, the Ketchikan Reentry Coalition provides the identified beneficiaries with housing support and peer support services to ensure returning beneficiaries participating in the program have safe and stable housing that will aid their successful reentry into society.

The Ketchikan Wellness Coalition is the fiscal agent for the Ketchikan Reentry Coalition Coordinator. In February of 2022, the Trust provided \$52,500.00 for the coalition to provide housing support for returning

beneficiaries who are confronted by barriers to housing due to their criminal history, mental illness, or another complicating factor. This request from the coalition was for \$15,000.00 of Disability Justice funds to continue providing housing support for returning beneficiaries currently receiving housing support. Now, success is the four returning citizens who are Trust beneficiaries living at home leased by the coalition using the funding previously provided by the Trust and the Ketchikan Indian Community (KIC).

Ketchikan Wellness Coalition – Reentry Housing: Comp Plan Information

| Goal | Objective |
|---------------------------------------|-------------|
| Goal 3 Economic and Social Well-being | 3.1 Housing |

Ketchikan Wellness Coalition – Reentry Housing: Relevant Comp Plan Goals and Objectives: The Ketchikan Wellness Coalition Reentry Housing grant approval is supported by comp plan goal, objectives, and strategies 3.1(b) and 7.3(cd), which are centered on housing services for beneficiaries in the least restrictive environment and expanding access to treatment and support services for justice-involved beneficiaries.

3.1 Objective: Alaskans have stable, safe housing with appropriate, community-based social supports to maintain tenancy.

c) Strategy: Provide transition and housing services to enable individuals to live in the least restrictive housing option.

7.3 Objective: Reduce the number of Trust beneficiaries entering or becoming involved with Alaska’s criminal justice or juvenile justice system.

d) Strategy: Expand immediate access to treatment and support services for individuals who encounter law enforcement and the legal system.

Ketchikan Wellness Coalition – Reentry Housing: Performance Data:

In addition to being housed, four beneficiaries are also receiving behavioral health services, and three are currently employed. Providing housing support to these beneficiaries makes it easier to receive additional support and increases their likelihood of successful reentry.

This funding was recently approved, and data is not currently available for this project continuation grant; however, the reentry housing and supports program serving justice-involved Trust beneficiaries in Ketchikan provides a safe place for these beneficiaries to live while transitioning back into their community.

Ketchikan Wellness Coalition – Reentry Housing: Project Recommendations: This was a one-time funding request, and any further funding for reentry housing and support will be considered through the letter of interest process.

Project Title: Alaska Prisoner Reentry Initiative: Reentry Coalition Capacity Development – Anchorage, Fairbanks, Mat-Su, and Juneau

Grantees:

- Anchorage: NeighborWorks Alaska, \$100,000
- Fairbanks: City of Fairbanks, \$100,000
- Mat-Su: Valley Charities, \$100,000
- Juneau: JAMHI Health and Wellness, \$100,000

Fund: Authority Grant

Years Funded: 9

Project Category: Capacity Building

FY22: \$400,000

FY23: \$400,000

FY24: \$480,000

Project Description: One of the most critical 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 support 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 focal point of contact for the DOC and its partners in reducing recidivism.

Since 2015, the Trust has funded and supported four coalitions and coalition coordinators in Anchorage, Juneau, Fairbanks, and Mat-Su. The Trust continues to support these positions and is actively engaged in the continued development of the ACR Program and the work of the reentry coalitions. The Trust-supported coalition coordinator facilitates and coordinates the team.

Since 2006, Disability Justice has been a priority area of focus for Trust resources, funding, and staff. In 2014, the Trust funded a study examining the prevalence and characteristics of Trust beneficiaries who entered, exited, or resided in an Alaska Department of Corrections facility between July 1, 2008, and June 30, 2012. The study identified over 60,000 unique individuals, of which 30 percent were identified as Trust beneficiaries. Additionally, Trust beneficiaries accounted for more than 40 percent of the incarcerations each year, and their median length of a jail/prison stay was significantly longer than for non-Trust beneficiary offenders. The high prevalence of Trust beneficiaries incarcerated at any given time and a recidivism rate more than two times the rate of non-Trust beneficiaries has led to the Alaska Department of Corrections (DOC) becoming the largest provider of behavioral health services in the State of Alaska.

Summary of Grant Progress: The Trust has long led and implemented system change for justice-involved beneficiaries, including working with partners to address Alaska’s extremely high and costly recidivism rate. Alaska’s Recidivism Reduction Plan was developed in 2015 when the adult population in the state’s prisons was increasing at an annual rate of 3 percent per year, and released inmates in Alaska had a 66 percent recidivism rate. The mission of Alaska’s 2015 Recidivism Reduction Plan has been to “improve public safety by reducing crime through implementation of a seamless plan of services and supervision developed with each returning citizen sentenced to 30 days or more, delivered through state and local collaboration, from the time they enter the prison through their successful transition, reintegration, and aftercare in the community.” The fundamental goals of this reform are to:

- Promote public safety by reducing the threat of harm to persons, families, and their property by citizens returning to their communities from prison.
- Increase success rates of reentrants by fostering effective, evidence-based criminogenic risk and need management and treatment, improving accountability of returning citizens and ensuring safety for the family, community, and victims; and
- Advance positive public health outcomes for returning citizens, such as access to health care services, substance use, mental health treatment, public benefit programs, and reduced homelessness.

One of the key elements to accomplishing these goals has been the development and implementation of the Alaska Community Reentry (ACR) Program, a collaborative partnership of state and community organizations and individuals working together to implement a robust reentry program. This partnership joins the network of other reentry services offered within Alaska.

The ACR Program envisions that inmates sentenced to thirty days or more will have the services and support needed to reenter their communities successfully. These services and supports include but are not limited to, access to healthcare (physical health, mental health, and substance use treatment), employment, transportation, education and training, and housing. Inmates are introduced to community services and providers during incarceration to gain familiarity and establish relations with the support they need for successful reentry. Communities with reentry programs work with local coalitions to support their capacity to meet the service needs of reentrants. These coalitions are supported, in part, through funding from the State of Alaska Department of Health (DOH) and the Trust. This funding is channeled through community grantees working directly with the coalitions.

The ACR Program is a collaborative partnership between local communities and DOC, DOH Division of Behavioral Health (DBH), and the Trust to achieve the goals of Alaska's Recidivism Reduction Plan and eight reentry coalitions. At the heart of this program is each community's ability to meet the service and support needs of the returning citizen. State, tribal, non-profit, and other community agencies support the needs of reentrants through various services related to housing, physical and behavioral healthcare, employment, education, training, and transportation.

ACR coalitions engage community partners, local businesses, and individuals to support individuals transitioning from corrections back into their communities and support reentrants in their engagement with these supports. The coalition is a point of contact for DOC, DOH, the Trust, and other statewide partners to learn what is working at the community level and which system-wide reforms support positive change for communities and individuals.

For reentrants to succeed, the coalitions work with communities to effectively manage available resources and supports and build capacity as needed. Adequate services in the following areas are critical: employment, housing, physical health, mental health, substance abuse treatment, educational and training programs, cultural and social connectedness, and transportation systems. Local reentry coalitions, such as those supported by the Trust, consist of a cross-section of people representing community members (including reentrants) and the services or funds available to the community. Reentry coalitions work to:

1. Educate the community about the justice system and the reentry program,
2. Identify local challenges facing reentrants,
3. Identify local gaps in reentry services and identify collaborative solutions to build capacity in the community, and

4. Serve as the focal point of contact for the DOC and its partners in reducing recidivism.

Trust-funded reentry coordinator’s responsibilities vary across the groups and may include the following items:

1. Support coalition activities such as:
 - a. Coordinate meeting logistics, develop and distribute agendas with chair(s) input, take meeting notes, and distribute minutes before the next meeting.
 - b. Maintain electronic file system, respond to written/electronic/telephonic communications directly or distribute to appropriate persons, and maintain contact lists.
 - c. Work with coalition chair(s), workgroups/committees, and partner entities to collect and allocate resources for coalition activities.
 - d. Maintain financial records and work with the coalition to identify spending priorities.
2. Conduct the following assessments annually and coordinate the coalition’s analyses of findings.
 - a. Coalition Capacity Assessment
 - b. Community Readiness Assessment
 - c. ACR Resource Assessment
3. Draft the ACR Comprehensive Community Reentry Plan based on the coalition’s annual planning sessions and update the plan as needed.
4. Support the work of the coalition to address gaps in resources and increase service capacity where needed.
5. Conduct and support institutional presentations about the ACR Program and coordinate representations by community providers about available resources and services.
6. Conduct outreach presentations to educate the community about programs and resources to support reentrants and share the ACR Program’s goals. These efforts are often coordinated in collaboration with coalition members.

The Reentry Coalitions have strategic plans consisting of focus areas such as coalition capacity building, community awareness, education, and advocacy; housing; case management services; employment opportunities and skill development; and inmate awareness and education about reentry services. Broadly, progress is being made on nearly all of the objectives within the plans. Most of the objectives are set to span the entire grant year. One notable goal that has been a very effective community awareness tool is hosting reentry simulations. During this fiscal year, coordinators hosted simulations in Fairbanks, Wasilla, and Juneau. All four coordinators will be hosting reentry simulations during the next fiscal year.

There are numerous challenges to successful reentry among state and local systems. Housing and homelessness among reentrants; access to DOC correctional institutions by community-based organizations and advocates to perform in reach; workforce issues in each community; difficulty obtaining services for individuals who have open cases or have yet to be charged; and difficulty for reentrants to obtain a state ID before release.

Comp Plan Information

| Goal | Objective |
|---|---------------------------------|
| Goal 8 Services in Institutional Settings | 8.3 Services while incarcerated |

Relevant Comp Plan Goals and Objectives: The comp plan supports funding for reentry coalition coordinators. The most relevant goal, objectives, and strategies are 8.3(i), centered on supporting coordinated reentry services for justice-involved Trust beneficiaries returning to their communities from

incarceration. The reentry coalition coordinators support this comp plan goal and objective by working with reentry service providers to ensure Trust beneficiaries have the support they need for successful reentry and lowering Alaska's high recidivism rate.

8.3 Objective: Enhance and expand access to clinical and case management resources for incarcerated Alaskans.

- i) Strategy: Support re-entry coordination for returning citizens.

Performance Data:

During FY22, there were 27,748 bookings into DOC facilities throughout Alaska; 16,978 were unique offenders. As of January 1, 2023, the Alaska DOC was responsible for 10,748 individuals with 191 on sentenced electronic monitoring, 339 in community residential centers (CRCs), 3,163 on probation or parole, 2,651 individuals on pretrial supervision, and 4,404 individuals being held in custody at Alaska DOC institutions throughout the state.

According to national statistics, about 90% of all incarcerated individuals will be released and return to their community. During 2021 Alaska DOC released 5,586 reentrants who returned to their community. In 2006, Alaska had a recidivism rate of 70%, which was one of the highest rates in the nation. Since then, the recidivism rate has dropped to approximately 59%. Applying these recidivism rates to the numbers from 2021 reduces 614 Alaskans, many of whom would be Trust beneficiaries.

Anchorage Release Data:

As the largest city in Alaska, with 39% (288,121) of the state's population (732,673) in 2021, Anchorage received almost half (46% or 2,556) of the state's total reentrants (5,586) For the same year.

Fairbanks Release Data:

As one of Alaska's larger geographical areas, with 13% (95,593) of the state's population (732,673) in 2021, Fairbanks and the Fairbanks North Star Borough received 530 (9%) of the state's total reentrants (5,586), for the same year.

Juneau Release Data:

As one of Alaska's larger geographical areas, with 4% (31,973) of the state's population (732,673) in 2021, Juneau received 192 (3%) of the state's total reentrants (5,586) For the same year.

Mat-Su Release Data:

As one of Alaska's larger geographical areas, with 4% (110,686) of the state's population (732,673) in 2021, the Mat-Su region received 593 (11%) of the state's total reentrants (5,586). For the same year.

Due to the number of reentrants, including Trust beneficiaries returning to Anchorage, Fairbanks, the Mat-Su, and Juneau, the reentry coalitions and the coalition coordinators are vital to achieving the goals of Alaska's Recidivism Reduction Plan.

During the reporting period, Reentry Coalition Coordinators engaged in activities with coalition partners in their communities and throughout the state.

- Coalition coordinators resumed in-person meetings with the DOC Institutional Probation Officers once monthly.
- Coalition coordinators hosted reentry simulations. The Reentry Simulations promote the understanding of community reentry challenges for reentrants through a hands-on, in-person event.

Attendees devote two hours to "walking in the shoes" of a reentrant and experience reentry challenges and successes through an exercise. Participants gain an understanding and build empathy for the struggles involved in rebuilding a life after incarceration.

- Continued engaging stakeholders in implementing a Project Rebound-inspired (case managers for reentrants pursuing higher education) program in Anchorage, Fairbanks, Mat-Su, and Juneau.
- Contributed to the Annual Reducing Recidivism and Reentry Conference.
- Met and engaged with programs and reentry stakeholders outside of Alaska, including VT DOC (COSA); the National Restaurant Association and Education Foundation; Northwest Credible Messenger; and Project Rebound.
- Created resources that serve as both a partner database and a substantive list of reentry services.
- Provided letters of support and recommendations to build local capacity around reentry.
- Continued to advocate for collaboration between corrections and homelessness service providers.
- Continued supporting reentry partners in other Alaska communities around the hosting and facilitating reentry simulations in their communities.
- Continue to serve as a platform and conduit for sharing information and giving new services opportunities to broadcast out to the community about their efforts.

Project Recommendations: This project is believed to offer positive outcomes to beneficiaries, and Trust staff recommend continued funding and support. Staff will continue to monitor this project and work with reentry partners and stakeholders to identify alternative sustainable funding sources beyond FY25. Or, if the project outcomes for beneficiaries are not achieved, staff will work with reentry partners and stakeholders to adjust accordingly or recommend that Trust funding be discontinued.

Project Title: Discharge Incentive Grants

Grantee: Alaska Housing Finance Corporation

Fund: MHTAAR

Years Funded: 19

Project Category: Direct Service

FY22: \$100,000

FY23: \$100,000

FY24: \$100,000

Project Description: This grant provides funding for a critical strategy of the Trust's Affordable Housing initiative and the Disability Justice workgroup. The Discharge Incentive Grant program is consistent with the Housing workgroup's focus on 'community re-entry' by targeting beneficiaries exiting Department of Corrections (DOC) settings who are challenging to serve and will require extended supervision and support services to avoid repeat incarceration and becoming public safety concerns. The supportive services shall be provided in collaboration with DOC and local behavioral health provider agencies. This project will be referenced in the Supported Housing Office Annual Work Plan as a priority for coordinating Trust-funded efforts.

Summary of Grant Progress: The Discharge Incentive Grant (DIG) has become an expected and crucial element of release planning for housing eligible homeless from DOC. This funding is part of the disability justice focus area budget. It provides monthly rent and various housing options to a vulnerable, marginal, and mentally acute DOC population for whom there are often few resources in the community. Over 100 individuals receive support from the DIG each year to increase the likelihood of successfully transitioning from jail to the community. Eligible recipients of the DIG are at high risk for recidivism, relapse, and homelessness, and DIG funding helps them to remain in the community. This is a significant source of

support for those experiencing mental illness and other cognitive disorders who often do not have a family to function in that role.

The DIG program is a partnership between the Trust, Alaska Housing Finance Corporation (AHFC), DOC, and the owners of transitional living boarding homes, who generously work more than full-time to provide this interim living, the most common housing option implemented with the DIG. The DIG also assists with augments to rent for high-risk-high-acuity participants that might pose issues at housing locations with their behaviors, symptoms, or criminal behavior. A significant challenge is that beds are often full, they are filled for longer, and the infrastructure of these places could be more transparent. Transitional locations need funds to assist them with this problem. Yet, the community takes them for granted for providing this type of housing with high depreciation but needs more financial support. This has caused the monthly cost of housing to go up in some places and for more augments to be requested. Augments can alleviate the difficult decision to take particular residents. Often the DIG can't afford the augments, so they are covered through cooperation with the Assess Plan Identify and Coordinate (APIC) reentry program.

Examples demonstrating how the DIG supports a vulnerable, needy, and often unwanted population are evidence of why DOC would continue to need and receive this fund in future years at its current amount or higher to offer transitional assistance to this population. Given the clinical acuity of those who are incarcerated and the high percentage of them who do not have family support or the ability to work, a fund such as the DIG is imperative, just as is the work of DOC MH, DBH, the Trust Authority, and the Wellness/Mental Health Courts to provide for this population once they are out of custody.

Problems at the Department of Public Assistance (DPA) have impacted DIG beneficiaries and providers. The DPA's inability to timely process SNAP ("food stamp") applications means that many DIG beneficiaries had no means to feed themselves. This crisis challenged Transitional Living Home providers and APIC staff to find ways to access other community resources (e.g., food banks) to provide these Trust beneficiaries. Inflation and higher utility rates have also negatively impacted Transitional Living Home providers. They pay commercial rates for utilities, and those costs have increased ahead of funding. Transitional Living Homes providing shelter to DIG beneficiaries have higher repair and maintenance costs. These costs need to be addressed before these facilities become unusable. DOC continues to appreciate this grant greatly and intends to maximize its potential over the next 6-month period and in future fiscal years as granted.

Comp Plan Information

| Goal | Objective |
|---------------------------------------|-------------|
| Goal 3 Economic and Social Well-being | 3.1 Housing |

Relevant Comp Plan Goals and Objectives:

The Discharge Incentive Grants program is supported by comp plan goals, objectives, and strategies 3.1(b) and 7.3(cd), centered on housing services for beneficiaries in the least restrictive environment and expanding access to treatment and support services for justice-involved beneficiaries.

3.1 Objective: Alaskans have stable, safe housing with appropriate, community-based social supports to maintain a tenancy.

- d) Strategy: Provide transition and housing services to enable individuals to live in the least restrictive housing option.

7.3 Objective: Reduce the number of Trust beneficiaries entering or becoming involved with Alaska’s criminal justice or juvenile justice system.

- e) Strategy: Expand immediate access to treatment and support services for individuals who encounter law enforcement and the legal system.

Performance Data: The State of Alaska has historically had a very high recidivism rate of as high as 70%. That means for every 10 Alaskans released from incarceration; seven are rearrested within three years. Due to the efforts of the Trust and many partners, such as the Alaska Department of Health (DOC), Alaska Housing Finance Corporation (AHFC), and the Alaska Department of Corrections (DOC), that number has been declining and is now just under 60%. This work is essential to Trust beneficiaries because they are disproportionately represented in the criminal justice system and the DOC incarcerated population than non-Trust beneficiaries.

Safe and secure housing is one of the most significant obstacles facing Trust beneficiaries who are returning citizens, and this funding provides direct housing support to beneficiaries discharging from DOC who are at risk of homelessness. Positive outcomes were demonstrated during this grant period. This structure allows for ease of additional investment by DOH and DOC. More considerable Re-Entry systems work is identifying the most efficient designs and methods of deploying rapid rehousing funds to people with support needs discharging from DOC to avoid homelessness.

From July 1-December 31, 2022 (Q2), the Discharge Incentive Grant (DIG) served 52 unduplicated, eligible individuals upon their release from the Department of Corrections (DOC). The DIG’s primary function is to provide funds for participants who experience a severe mental illness with or without a co-occurring disorder to assist them during their first crucial months in the community while they seek stability via treatment and other support. To be eligible, they cannot have other financial resources, generally lack a support system, and require housing and clinical oversight from the community. They must also agree to follow through on treatment recommendations to remain eligible, adhere to housing rules, and stay clean and sober.

During this 1st and 2nd quarter period, DIG has funded 106 rent occurrences at seven different providers. The time the DIG is needed varies between 1 day to one year (rare but not unheard of) depending on a person’s ability to pay from their income, such as social security or other means of self-pay. The average time a recipient needs the DIG is between 2-4 months. Each month the DIG uses its monthly expenditure (~\$12,500); there is another fund (APIC) to cover overflow or particular circumstances. Thus, the need for housing is much more significant than the DIG represents. The DIG can also cover costs such as phones, clothing, IDs, bus passes, and other reasonable items upon an institution's release. However, the DIG is primarily used for rent, and APIC can cover those items.

The DIG served 52 individuals in 106 rent occurrences during these six months. Of those, 2 (3.8%) returned to DOC custody while the DIG funded rent. Seven providers who received funds from the DIG were short-term transitional housing providers (used monthly). A substantial challenge is that the DIG is intended to be used for 1-3 months post-release but due to a myriad of complications with the Social Security Administration, issues with benefits applications (staffing, submissions), not having a payee or related things, some end up receiving these interim funds for longer than they were intended, which impacts ways it could otherwise be implemented and affects the independent living.

The average cost for each of the 52 participants was \$1,266.05. The lowest amount paid was \$22.50 for

one night, and the highest for one person was \$1,085 in 7 different locations. The average cost per provider was \$9,405.08. The time it takes to be Medicaid eligible for those receiving DIG is not measured because it is not relevant for receiving DIG funds. Generally, though, participants receive Medicaid within their first month out, which helps them get their treatment and medications.

While receiving the DIG fund, zero participants went to API during these six months. There were two arrests or remands of DIG recipients, as noted above, who went back to DOC while receiving DIG funds. The number of days each was incarcerated was not collected since they ceased being in the “program” upon arrest. However, DIG assisted new people; they are not served with this program until they are out of custody.

Housing providers need more support to provide a Housing First philosophy formally. Still, many have come to offer that very thing informally by giving participants ‘second chances’ when they use substances unless there is criminal activity, harm to others or property, or other factors heightening risk. This has been true for a few years. The DOC DIG program supports the rules and decisions of the housing providers so they can act in the best interest of all for safety.

Project Recommendations: This project is believed to offer positive outcomes to beneficiaries, and Trust staff recommends continued funding and support for the agency as they work towards sustainability. Staff will continue to monitor this project to identify alternative sustainable funding sources beyond FY25. Or, if the project outcomes for beneficiaries are not achieved team will work with AHFC to adjust accordingly or recommend that Trust funding be discontinued.

Project Title: Re-entry Transition Supports

FY23 Grantees (through 4/26/2023):

- New Life Development - Residential Re-entry and Supportive Services Subsidy Program, \$25,000
- Valley Charities – Mat-Su Reentry Housing Project, \$50,000

Fund: Authority Grant

Years Funded: 4

Project Category: To be determined based on individual project type

FY22: \$150,000

FY23: \$200,000

FY24: \$300,000

Project Description: The Re-entry Transition Supports Project is funding that provides housing support for returning beneficiaries who are confronted by barriers to housing due to their criminal history, mental illness, or other complicating factors.

New Life Development - Residential Re-entry and Supportive Services Subsidy Program: Summary of Grant

Progress: New Life Development Inc. (NLD) requested \$25,000.00 of the FY23 Re-entry Transition Supports funding to continue providing transitional housing supports and services for beneficiaries returning to Anchorage from incarceration and behavioral health treatment facilities who are confronted by barriers to housing due to its high cost and their criminal history, mental illness, or other complicating factors. This funding will support returning Trust beneficiaries by subsidizing some of their rental costs.

In Anchorage, many barriers confront Trust beneficiaries who need housing as they transition back into the

community from incarceration or behavioral health treatment centers. Housing in Anchorage and across the state is costly. Many returning Trust beneficiaries have been trespassed, banned, or otherwise ineligible for shelter at local shelters and other housing programs and do not have a safe and stable place to live. NLD provides services for these beneficiaries, some of whom are the hardest to serve with the most complex cases. NLD partners with the Alaska Department of Corrections and provides these services and supports to beneficiaries dealing with severe and persistent mental illness and cooccurring disorders and participating in the Assess Plan Identify and Coordinate (APIC) reentry program. To overcome these barriers to housing, NLD will continue to provide the identified population of beneficiaries participating in the program with safe and stable housing and supports to aid their successful reentry into society.

New Life Development - Residential Re-entry and Supportive Services Subsidy Program: Comp Plan Information

| Goal | Objective |
|--|--|
| Goal 7 Services in the Least Restrictive Environment | 7.3 Reduce beneficiaries involved in criminal justice system |

New Life Development - Residential Re-entry and Supportive Services Subsidy Program: Relevant Comp Plan Goals and Objectives: The Re-Entry Transition Supports is supported by comp plan goal, objectives, and strategies 3.1(b) and 7.3(b, c, and d), and 8.3(i), which are centered on housing services for beneficiaries in the least restrictive environment and expanding access to treatment and support services for justice-involved beneficiaries and supporting coordinated reentry services for justice-involved Trust beneficiaries who are returning to their communities from incarceration.

3.1 Objective: Alaskans have stable, safe housing with appropriate, community-based social supports to maintain tenancy.

- e) Strategy: Provide transition and housing services to enable individuals to live in the least restrictive housing option.

7.3 Objective: Reduce the number of Trust beneficiaries entering or becoming involved with Alaska’s criminal justice or juvenile justice system.

- h) Strategy: Increase awareness of least restrictive, long-term services and supports through counseling on options and person-centered interviewing.
- i) Strategy: Collaborate with other criminal or juvenile justice-involved partners to develop and implement services for Trust beneficiaries.
- j) Strategy: Expand immediate access to treatment and support services for individuals who encounter law enforcement and the legal system.

8.3 Objective: Enhance and expand access to clinical and case management resources for incarcerated Alaskans.

- j) Strategy: Support re-entry coordination for returning citizens.

New Life Development - Residential Re-entry and Supportive Services Subsidy Program: Performance Data:

New Life Development Inc. (NLD) is a residential supportive services program that provides structured housing in a semi-communal, drug and alcohol-free environment. NLD provides services for women and men released from incarceration, residential substance misuse treatment, homeless shelters, and other non-permanent living circumstances. NLD provides case management, food, clothing, free laundry, free computer/internet access, onsite NA/AA meetings, professional mentorship groups, employment support, and other necessary assistance to prepare clients for a healthy, productive, and independent life upon graduation from our program. NLD works closely with various Federal, State, and Municipal agencies, including the Courts and Therapeutic Court system, the Department of Corrections, APIC, and the Anchorage

Health Department. We partner with other community organizations like Partners Re-entry Center/Partners for Progress, the AWAIC Shelter, Beans Café, the Rescue Mission, Catholic Social Services, and many others. NLD reports data into the AKHMIS homeless reporting system to help the state track efforts to address the needs of the unhoused population better.

This grant funding was used to subsidize program housing costs for approximately 85 program participants who are in the most need. Due to the rise in housing costs and inflation in Anchorage, the New Life Development program raised program fees to maintain its current level of operations. The funding provided by the Trust has allowed some of the most acute program participants who are Trust beneficiaries to remain in the program longer, averaging one year per participant, with some staying well into their second year. This has allowed them to remain securely housed rather than homeless, where they are more likely to recidivate.

New Life Development - Residential Re-entry and Supportive Services Subsidy Program: Project Recommendations: This was a one-time funding request, and any further funding for New Life Development – Residential and Supportive Services will be considered through the letter of interest process.

Valley Charities – Mat-Su Reentry Housing Project: Summary of Grant Progress: Trustees approved the Flexible Special Needs Housing allocation of \$150,000.00 for the FY21 budget to fund returning beneficiaries reentering society after being incarcerated and needing housing support. Valley Charities, Inc. is the fiscal agent for the Trust-funded Mat-Su Reentry Coalition Coordinator and is requesting \$50,000.00 of the FY21 Flexible Special Needs Housing funds to provide housing support for returning beneficiaries who are confronted by barriers to housing due to their criminal history, mental illness, or other complicating factors.

In the Mat-Su, many returning beneficiaries have been trespassed, banned, or are otherwise ineligible for shelter and need a safe and stable place to live. To overcome these barriers to housing, the Mat-Su Reentry Coalition will provide the identified beneficiaries with housing support and peer support services to ensure returning beneficiaries participating in the program have safe and stable housing that will aid their successful reentry into society.

Valley Charities – Mat-Su Reentry Housing Project: Comp Plan Information

| Goal | Objective |
|--|--|
| Goal 7 Services in the Least Restrictive Environment | 7.3 Reduce beneficiaries involved in criminal justice system |

Valley Charities – Mat-Su Reentry Housing Project: Relevant Comp Plan Goals and Objectives: The Re-Entry Transition Supports is supported by comp plan goal, objectives, and strategies 3.1(b) and 7.3(b, c, and d), and 8.3(i), which are centered on housing services for beneficiaries in the least restrictive environment and expanding access to treatment and support services for justice-involved beneficiaries and supporting coordinated reentry services for justice-involved Trust beneficiaries who are returning to their communities from incarceration.

3.1 Objective: Alaskans have stable, safe housing with appropriate, community-based social supports to maintain tenancy.

f) Strategy: Provide transition and housing services to enable individuals to live in the least restrictive housing option.

7.3 Objective: Reduce the number of Trust beneficiaries entering or becoming involved with Alaska’s criminal

justice or juvenile justice system.

- k) Strategy: Increase awareness of least restrictive, long-term services and supports through counseling on options and person-centered interviewing.
- l) Strategy: Collaborate with other criminal or juvenile justice-involved partners to develop and implement services for Trust beneficiaries.
- m) Strategy: Expand immediate access to treatment and support services for individuals who encounter law enforcement and the legal system.

8.3 Objective: Enhance and expand access to clinical and case management resources for incarcerated Alaskans.

- k) Strategy: Support re-entry coordination for returning citizens.

Valley Charities – Mat-Su Reentry Housing Project: Performance Data: Through its Fiscal Agent, the Mat-Su Reentry Housing Project allowed the Mat-Su Reentry Coalition to provide rental assistance to reentrants for three to five months or on a case-by-case basis until sustainable, and funds to support utilities to meet the same timelines as rent for qualified applicants. To be eligible to participate in this project, the person must be a Trust Beneficiary and have been incarcerated at least once in the preceding three years. A Mat-Su Reentry Case Manager also collaborated with community partners to help make participants in this program self-sufficient.

Data for FY23 will be available after 8/31/2023. For FY22, The Mat-Su Reentry Housing Project served 41 beneficiaries, three recidivated, a rate of 7%, 52% below the state recidivism rate.

The coalition sees individuals released daily from prison who fall through the cracks in obtaining short-term emergency and long-term permanent housing. The ability to obtain and maintain stable housing impacts every aspect of a person’s life, including employment, mental health services, outpatient treatment, and staying alive during winter.

The Mat-Su Reentry Coalition is a collaboration of individuals, community stakeholders, public and non-profit agencies, and faith-based and business partners who are united and committed to supporting projects that help reduce recidivism among returning citizens to the Mat-Su community.

Continued support was contingent upon the participant’s initiative towards securing employment within 30 days and saving money to assume rent payments at the project's conclusion. The coalition may exit participants from the project by increasing their rent payment participation based on their ability to pay.

Valley Charities – Mat-Su Reentry Housing Project: Project Recommendations: This project is believed to offer positive outcomes to beneficiaries, and Trust staff recommends continued funding and support. Staff will continue to monitor this project to identify alternative sustainable funding sources beyond FY25. Or, if the project outcomes for beneficiaries are not achieved team will work with Reentry Coalitions to adjust accordingly or recommend that Trust funding be discontinued.

Beneficiary Employment & Engagement Focus Area

| | | |
|--|--|---------------------------|
| Project Title: Individual Placements & Supports (IPS) Capacity Building | | |
| Grantee: DOH Division of Behavioral Health | | |
| Fund: MHTAAR | | |
| Years Funded: 3 | Project Category: Capacity Building | |
| FY22: \$40,000 | FY23: \$30,000 | FY24: \$50,000 |
| <p>Project Description: The Individual Placement & Supports (IPS) Capacity Building project will support DOH Division of Behavioral Health (DBH) 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.</p> <p>Additionally, funds will support collaboration with the IPS national technical assistance and training program through the IPS national training institute. Activities will support IPS-related recommendations from the Work Matters Task Force, which convened in 2021-2022.</p> | | |
| <p>Summary of Grant Progress: The Individual Placement and Supports (IPS) supported employment model is an evidence-based practice that has been a key Trust and state strategy to improve employment outcomes for beneficiaries experiencing behavioral health needs. The model is supported by a national center that provides technical assistance to the Alaska leadership team and training and other opportunities for programs implementing the model. Trust funds are granted to DBH to support activities and contracts necessary for the state to support grantees that receive state funding to implement the model.</p> <p>FY23 allowed the Division of Behavioral Health to continue conducting fidelity reviews with their agency grantees implementing the IPS model through Trust-funded support. The mid-year report stated that two fidelity reviews had been conducted so far for FY23. The sites visited were South Peninsula Behavioral Health and Central Peninsula General Hospital. One Quality Assurance review was conducted at Frontier Community Services. All three sites will have a fidelity review conducted before the end of FY23. Technical assistance is being provided to all the IPS grantees.</p> <p>The Division of Behavioral Health, in partnership with the Division of Vocational Rehabilitation (DVR) and the Trust, held an IPS open house to educate community partners on the IPS model and to gauge interest in implementation in the Anchorage region. VOA Alaska indicated an interest in implementing the model. It was invited to submit a funding proposal to the Alaska Mental Health Trust for start-up costs to implement the IPS model. Challenges include ongoing workforce issues within community agencies attempting to implement the model and ongoing lack of reimbursable funding for employment services through behavioral health Medicaid.</p> <p>DBH, DVR, and Trust staff met and identified who should serve on the statewide IPS steering committee. An in-person meeting of the steering committee was held at the end of March.</p> | | |
| Comp Plan Information | | |
| | Goal | Objective |
| | Goal 3 Economic and Social Well-being | 3.2 Integrated employment |
| Relevant Comp Plan Goals and Objectives: | | |

This project is focused on technical assistance and capacity building on the state level for improved Trust program investment and state system improvements in supported employment services for beneficiaries experiencing behavioral health needs. (Beneficiary Employment & Engagement Focus Area)

The project aligns with Comp Plan Goal 3: Economic and social well-being; 3.2 Ensure that competitive and integrated employment at part-time or full-time jobs pays minimum wage or above in integrated, typical work settings.

Performance Data: This project is currently active for FY23. Performance measures examining planning, implementation, operations, and integration will be reported after the project period closes.

Project Recommendations: Trust staff recommends this project for continued funding through FY24-25 to ensure continuity for community grantees to access state resources as they work toward implementation and fidelity to the IPS model. The level of recommended funding varies slightly from year to year due to planned cycles of state and national activity related to beneficiary employment, such as statewide disability employment conferences, which may not occur annually.

Trust staff will monitor progress on Performance Measures, particularly planning activities such as the Alaska IPS Strategic Plan deliverable noted as a performance measure. DBH agrees to continue to convene and facilitate a statewide IPS steering committee that will meet quarterly. DBH states that they will continue to provide training, technical assistance, and fidelity reviews to the IPS programs and continue efforts to expand IPS across the state. Trust staff will continue to monitor this project and work with program staff to identify alternative sustainable funding sources beyond FY 25.

Project Title: Evidence-Based and Promising Employment and Engagement Practices

FY23 Grantees (through 4/26/2023):

- Access Alaska – Peer Mentor Program, \$71,493
- Alaska Statewide Independent Living Council – Joint Independent Living/Employment First Conference, \$20,000
- Peer Power of Alaska – Capacity Building, \$15,000
- Peer Power of Alaska – Sixth Annual Peer Power Advocacy Summit, \$15,000
- Southeast Alaska Independent Living (SAIL) – Outreach and Training Project, \$17,250
- Southeast Alaska Independent Living (SAIL) – Employment through Recreation for Transition-Age Youth, \$50,000

Fund: Authority Grant

Years Funded: **Project Category:** To be determined based on individual project type

FY22: \$350,000 **FY23:** \$350,000 **FY24:** \$200,000

Project Description: Trust funding has been allocated to support provider agencies and community partners in the 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 employment and engagement support for Trust beneficiaries statewide.

Access Alaska – Peer Mentor Program - Summary of Grant Progress:

This project is intended to establish a statewide network of trained peer mentors and mentees. The network would enable people with disabilities to connect and support each other by addressing mutual goals, barriers, and lived experiences.

This is a single grant award for a two-year project timeframe within the first year of implementation.

Access Alaska – Peer Mentor Program - Comp Plan Information:

| Goal | Objective |
|--|-----------------------------------|
| Goal 7 Services in the Least Restrictive Environment | 7.2 Long-term services & supports |

Access Alaska – Peer Mentor Program Relevant - Comp Plan Goals and Objectives:

This project is focused on capacity building related to peer mentorship and increased access to the benefit of support offered through the lived experience of Trust beneficiaries to services and supports in the least restrictive environment. (Beneficiary Employment & Engagement Focus Area / Home and Community Based Services Focus Area)

Goal 7: Services in the least restrictive environment; 7.2 Increase access to effective and flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement (Beneficiary Employment & Engagement Focus Area)

Access Alaska – Peer Mentor Program - Performance Data: Reporting on this project has not yet been submitted and will be available later. (Report due 12/31/2024)

Access Alaska – Peer Mentor Program Project Recommendations: Staff recommends assessing the grant upon project completion and following report submission in December 2024, and further analysis based on reported progress if additional funds are requested for the project at a future date.

Alaska Statewide Independent Living Council – Joint Independent Living/Employment First Conference

Summary of Grant Progress: Trust funds were used to leverage other non-profit state resources to support the annual Statewide Independent Living Council (SILC) conference to integrate employment themes throughout the event that took place in Anchorage from September 21-23, 2022. Funds were used to support essential conference activities and supplies.

Trustees approved funds for an FY22 employment conference event that did not occur due to grantee capacity issues during that time (Governor’s Council on Disabilities and Special Education). SILC leadership offered this alternative and multiple Trust partners agreed upon this course of action.

Alaska Statewide Independent Living Council – Joint Independent Living/Employment First Conference Comp Plan Information:

| Goal | Objective |
|---------------------------------------|---------------------------|
| Goal 3 Economic and Social Well-being | 3.2 Integrated employment |

Alaska Statewide Independent Living Council – Joint Independent Living/Employment First Conference
Relevant Comp Plan Goals and Objectives: This project is focused on conference support related to competitive and integrated employment for Trust beneficiaries. (Beneficiary Employment & Engagement Focus Area)

The project aligns with Comp Plan Goal 3: Economic and social well-being; 3.2 Ensure that competitive and integrated employment at part-time or full-time jobs pays minimum wage or above in integrated, typical work settings.

Alaska Statewide Independent Living Council – Joint Independent Living/Employment First Conference
Performance Data: 133 attendees received training through the conference, many of whom were Trust Beneficiaries, but accurate numbers for each beneficiary category are not known, because this was not tracked in the registration process.

Stakeholder groups represented included the Statewide Independent Living Council, three of the four Centers for Independent Living, the Governor’s Council on Disabilities and Special Education, the Division of Vocational Rehabilitation, The Trust, the Alaska Workforce Investment Board, the UAA Center for Human Development, the Alaska Commission on Aging, the Alaska Mental Health Board/Advisory Board on Alcoholism and Drug Abuse, the State Vocational Rehabilitation Committee, the Division of Senior and Disabilities Services, the Department of Transportation, and a small number of providers belonging to the Alaska Association on Developmental Disabilities. Communities represented included Anchorage, Wasilla, Fairbanks, Juneau, Sitka, Haines, Petersburg, Wrangell, Ketchikan, Kenai, Soldotna, Homer, Kodiak, and Bethel. The conference had very good stakeholder and community representation. Roughly two-thirds of attendees were staff of Centers for Independent Living.

Alaska Statewide Independent Living Council – Joint Independent Living/Employment First Conference
Project Recommendations: Staff recommends consideration of future requests for beneficiary employment conference support as statewide agency leadership emerges to facilitate the planning and implementation of events. Currently, the SILC plans to hold its next conference in Spring 2024 and may or may not incorporate themes of beneficiary employment in the content.

Peer Power of Alaska – Capacity Building - Summary of Grant Progress: Peer Power requested funds to support hiring a part-time coordinator to facilitate ongoing capacity building and organizational growth plan implementation. Peer Power is a statewide organization, focused on empowering people with developmental disabilities. Peer Power was created and led by beneficiaries who experience developmental disabilities and provides training and self-empowerment tools to this beneficiary population. A primary goal of the organizational growth plan to be implemented is that Peer Power become self-sustaining for eventual reduction and end of requested funds from the Trust to support staffing and operations.

Progress reporting on this project has not yet been submitted and will be available later.

| | |
|--|-----------------------------------|
| Peer Power of Alaska – Capacity Building - Comp Plan Information: | |
| Goal | Objective |
| Goal 7 Services in the Least Restrictive Environment | 7.2 Long-term services & supports |
| <p>Peer Power of Alaska – Capacity Building - Relevant Comp Plan Goals and Objectives: This project is focused on capacity building related to peer mentorship and increased access to the benefit of support offered through the lived experience of Trust beneficiaries to services and supports in the least restrictive environment. (Beneficiary Employment & Engagement Focus Area / Home and Community Based Services Focus Area)</p> <p>Goal 7: Services in the least restrictive environment; 7.2 Increase access to effective and flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement.</p> | |
| <p>Peer Power of Alaska – Capacity Building - Performance Data: Reporting on this project has not yet been submitted and will be available later.</p> | |
| <p>Peer Power of Alaska – Capacity Building - Project Recommendations: Staff recommends assessing performance data when available to determine future funding for this project if requested. Peer Power continues to emerge as a leading statewide organization in support of beneficiaries experiencing I/DD. This project directly aligns with Trust priorities related to advocacy and stigma reduction through the realization of the "DD Shared Vision."</p> | |

| | |
|--|-----------------------------------|
| Peer Power of Alaska – Sixth Annual Peer Power Advocacy Summit - Summary of Grant Progress: | |
| <p>Peer Power of Alaska requested funds for its sixth annual Peer Power Summit in April 2023. Peer Power is a 100% Trust beneficiary-driven organization, whose sole purpose is to help improve the lives of Alaskans with an intellectual and/or developmental disability (I/DD). The Summit ran for three days and was expected to host over 100 Trust beneficiaries with I/DD. The purpose of the Summit is to bring beneficiaries together to share current challenges in receiving care, and what they can do to help overcome those barriers. Their goal at the Summit was to equip Alaskans with I/DD to live the lives they choose by supporting a robust system of care through community-based agencies and the State of Alaska Department of Health continuum of care services.</p> <p>Progress reporting on this project has not yet been submitted and will be available later.</p> | |
| Peer Power of Alaska – Sixth Annual Peer Power Advocacy Summit - Comp Plan Information: | |
| Goal | Objective |
| Goal 7 Services in the Least Restrictive Environment | 7.2 Long-term services & supports |
| <p>Peer Power of Alaska – Sixth Annual Peer Power Advocacy Summit Relevant Comp Plan Goals and Objectives: This project is focused on capacity building related to peer mentorship and increased access to the benefit of support offered through the lived experience of Trust beneficiaries to services and supports in the least restrictive environment. (Beneficiary Employment & Engagement Focus Area / Home and Community Based Services Focus Area)</p> | |

This project aligns with Comp Plan Goal 7: Services in the least restrictive environment; 7.2 Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement.

Peer Power of Alaska – Sixth Annual Peer Power Advocacy Summit - Performance Data: Reporting on this project has not yet been submitted and will be available later.

Peer Power of Alaska – Sixth Annual Peer Power Advocacy Summit - Project Recommendations: Staff recommends future consideration of annual summit support as Peer Power continues to emerge as a leading statewide organization supporting beneficiaries experiencing I/DD. This project directly aligns with Trust priorities related to advocacy and stigma reduction through the realization of the "DD Shared Vision".

Southeast Alaska Independent Living (SAIL) – Outreach and Training Project - Summary of Grant

Progress: Southeast Alaska Independent Living (SAIL) Inc., in partnership with the Division of Vocational Rehabilitation (DVR) requested Trust funding to support ongoing agency capacity building for young Trust beneficiaries preparing to leave school and enter the workforce. SAIL has been a critical partner to the Trust and DVR in this work for many years and continues to provide reliable programmatic support to increase student beneficiary access to Pre-Employment Transition Services (Pre-ETS) such as job exploration counseling, work-based learning opportunities, workplace readiness skills, and instruction in self-advocacy.

Trust funds will be used to leverage and augment federal funding allocated on a per-student basis through DVR to schools and agencies working directly with young Trust beneficiaries. Trust funds awarded to SAIL enable DVR and partners to respond flexibly to community and beneficiary needs when designing Pre-ETS services, and dramatically expand the reach of these supports into rural communities that may otherwise have limited access. The federally funded Pre-ETS program aims to improve the transition of students with disabilities from school to postsecondary education or an employment outcome. Trust funds will support personnel, travel, and supply costs for Pre-ETS programming not otherwise covered by DVR and matched funds, thereby maximizing the impact of all funders and increasing the reach and capacity of providers to improve beneficiary youth education and employment outcomes.

Reporting on this project has not yet been submitted and will be available later.

Southeast Alaska Independent Living (SAIL) – Outreach and Training Project - Comp Plan Information

| Goal | Objective |
|---------------------------------------|---------------------------|
| Goal 3 Economic and Social Well-being | 3.2 Integrated employment |

Southeast Alaska Independent Living (SAIL) – Outreach and Training Project - Relevant Comp Plan Goals and Objectives: This project provides flexible program implementation funding to increase access to federally funded vocational rehabilitation services related to pre-employment training and services that promote competitive and integrated employment for young Trust beneficiaries. (Beneficiary Employment & Engagement Focus Area)

This project aligns with Comp Plan Goal 3: Economic and social well-being; 3.2 Ensure that competitive and integrated employment at part-time or full-time jobs pays minimum wage or above in integrated, typical work settings.

Southeast Alaska Independent Living (SAIL) – Outreach and Training Project - Performance Data: Reporting on this project has yet to be submitted and will be available later.

Southeast Alaska Independent Living (SAIL) – Outreach and Training - Project Recommendations: Staff recommends assessing the grant upon project completion and following report submission, and further analysis based on reported progress if additional funds are requested for the project at a future date. This project was initially recommended for funding as Pre-ETS programs are a longstanding priority of the Beneficiary Employment & Engagement Focus Area, and in alignment with objectives of Comp Plan Goal 3 related to integrated competitive employment for Trust beneficiaries.

Southeast Alaska Independent Living (SAIL) – Employment through Recreation for Transition-Age Youth Summary of Grant Progress: Southeast Alaska Independent Living Center (SAIL) serves Trust beneficiaries in the Juneau and Southeast region of the state with a variety of services, including recreational and pre-employment transition services (Pre-ETS) for beneficiary youth in partnership with the Division of Vocational Rehabilitation (DVR), other state agencies, and community partners.

SAIL requested one-time funding from the Trust to support training and accreditation for recreational therapy support staff to safely and effectively contract with DVR to help young beneficiaries engage in their community and develop "soft skills" critical for successful future employment through team building and social interactions in natural, fun settings.

SAIL has a history of service to Trust beneficiaries who are juvenile justice-involved and has partnered with the Division of Juvenile Justice to provide therapeutic and educational support to institutionalized youth to assist with social and employment readiness skills when they return to their communities.

Acquisition and practice of "soft skills" are highlighted by strategies found within the Beneficiary Employment and Engagement focus area and are particularly effective for school-age beneficiaries. Participation and engagement in DVR services before graduation, such as Pre-ETS, is believed to increase graduation rates and encourage workforce participation for children and youth with disabilities after exiting school services. Trust advisory boards and partners highly support beneficiary youth engagement, active community participation, and soft skill development as critical employment focus area work strategies.

Reporting on this project has yet to be submitted and will be available later.

Southeast Alaska Independent Living (SAIL) – Employment through Recreation for Transition-Age Youth Comp Plan Information:

| Goal | Objective |
|---------------------------------------|---------------------------|
| Goal 3 Economic and Social Well-being | 3.2 Integrated employment |

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| <p>Southeast Alaska Independent Living (SAIL) – Employment through Recreation for Transition-Age Youth</p> <p>Relevant Comp Plan Goals and Objectives: This project provides capacity-building funding to create additional opportunities for young Trust beneficiaries related to pre-employment training and services that promote competitive and integrated employment. (Beneficiary Employment & Engagement Focus Area)</p> <p>This project aligns with Comp Plan Goal 3: Economic and social well-being; 3.2 Ensure that competitive and integrated employment at part-time or full-time jobs pays minimum wage or above in integrated, typical work settings.</p> |
| <p>Southeast Alaska Independent Living (SAIL) – Employment through Recreation for Transition-Age Youth</p> <p>Performance Data: Reporting on this project has yet to be submitted and will be available later.</p> |
| <p>Southeast Alaska Independent Living (SAIL) – Employment through Recreation for Transition-Age Youth</p> <p>Recommendations: Staff recommends assessing the grant upon project completion and following report submission and further analysis based on reported progress if additional funds are requested for the project at a future date. This project was initially recommended for funding as Pre-ETS programs are a longstanding priority of the Beneficiary Employment & Engagement Focus Area and aligned with objectives of Comp Plan Goal 3 related to integrated competitive employment for Trust beneficiaries.</p> |

| | | |
|--|---|------------------------|
| Project Title: Covey Academy Youth Employment Training | | |
| Grantee: Covenant House Alaska | | |
| Fund: Authority Grant | | |
| Years Funded: 2 | Project Category: Capital - Construction | |
| FY22: \$0 | FY23: \$250,000 | FY24: \$250,000 |
| <p>Project Description: Covey Academy is a Vocational Training Center that offers on-site housing for youth aged 18 to 24 who are homeless, low-income, exiting foster care, or face other barriers to employment and housing success. This multi-purpose campus will offer state-of-the-art training for in-demand skills while offering intensive, individualized services that ensure vulnerable young people transition into meaningful careers and permanent housing.</p> <p>Directly adjacent to CHA’s Youth Engagement Center, this \$14 million project will include a first-floor Training Center with high-tech training capabilities and space for partners to deliver on-site services. The second floor will consist of 19 small apartments for students.</p> | | |
| <p>Summary of Grant Progress: The Covey Academy, Youth Employment Training Project renovates and opens the Covenant House Alaska’s (CHA) Covey Academy. The Covey Academy is a Vocational Training Center that offers on-site training and housing for young people ages 18 to 24 who are homeless or face barriers to success. This multi-purpose campus will provide state-of-the-art training for work skills in high-demand Alaskan careers, such as maritime, commercial driving and culinary occupations, heavy equipment operation, aviation, and more. The program also offers intensive, individualized services and case management that ensure vulnerable young people transition into meaningful careers and permanent housing. Youth enrolled in the program can contact CHA if they have questions or need help overcoming obstacles in the future. The Covey Academy Youth Employment Training project budget line item is in the Beneficiary Employment and</p> | | |

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|---|---------------------------|
| Engagement focus area budget, with the Trust being a partner funder. This project is also connected to the Workforce Priority Area and Housing & Home and Community Based Services focus area. | |
| Comp Plan Information | |
| Goal | Objective |
| Goal 3 Economic and Social Well-being | 3.2 Integrated employment |
| Relevant Comp Plan Goals and Objectives: The Covey Academy Youth Employment Training project aligns with Comp Plan Goal 3, Objective 3.2: Ensure that competitive and integrated employment at part-time or full-time jobs pays minimum wage or above in integrated, typical work settings. | |
| Performance Data: The Covey Academy completed renovations and opened in the summer of 2022. FY23 is the first year of the project, with data on occupancy and enrollment expected in FY24. | |
| Project Recommendations: The Covey Academy Youth Employment Training project, is recommended for FY25 as the final year of start-up funding. Covenant House Alaska is confident the program will continue after Trust funding ends. Other committed funders involved in the project and fundraising efforts will be able to sustain the project. | |

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|--|---|------------------------|
| Project Title: BPI Program Grant – CHOICES, Inc. | | |
| Grantee: CHOICES, Inc. | | |
| Fund: Authority Grant | | |
| Years Funded: 16 | Project Category: Direct Service | |
| FY22: \$404,170 | FY23: \$404,170 | FY24: \$404,170 |
| <p>Project Description: CHOICES, Inc. (CHOICES) is a mental health service provider in Anchorage that offers beneficiaries strategies, opportunities, resources, and support for personal growth, recovery, peer support, and thriving 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 experience an improved life, as evidenced by success in working, living, school, and personal relationships. Trust funding supports the Recovery Coordination Program of CHOICES. The program strives to work with beneficiaries to prevent hospitalizations, improve transitions from psychiatric hospital care and provide intensive case management and wrap-around support 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:</p> <ul style="list-style-type: none"> • Peer Support: workers are critical 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 in accessing community services, 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 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 to formalize the certification process for peer support, including training, testing, certifying, marketing, and service availability.

Summary of Grant Progress: CHOICES is a Beneficiary Project Initiative (BPI) agency that offers beneficiaries strategies, opportunities, resources, and support for personal growth, recovery, peer support, and thriving community integration by promoting a stigma-free environment, supporting individuality and self-determination. CHOICES utilizes peer support specialists with lived experience to provide services and support for Trust beneficiaries such as the Recovery Coordination Program (RCP). The RCP supports beneficiaries living with a mental illness (MI), substance use disorder (SUD), developmental disabilities (DD), traumatic brain injury (TBI), and co-occurring disorders to prevent hospitalizations, improve transitions from psychiatric hospital care and to provide intensive case management and wrap-around supports and services in the community. CHOICES braids funding from the Trust and the Alaska Department of Health (DOH) to support their current recovery-oriented peer support services and RCP activities.

The services provided by CHOICES have direct and systems-level impacts on Trust beneficiaries as they provide the support and assistance needed for beneficiaries to live their best life in the least restrictive environment. In addition to peer support and RCP, CHOICES also provides Outreach and Engagement with community partners, advocacy, and community education of MI, SUD, DD, and TBI, as well as co-occurring diagnosis and a continuum of services. These services support Trust beneficiaries to live in their community, access community services, housing and employment resources, and mental health and recovery support and services. These services and supports enable Trust beneficiaries to live their lives without fear of institutionalization and incarceration as they live their best life.

Like many other providers throughout the state, CHOICES faces issues such as sustainable funding, hiring and retaining qualified staff, and fallout from the COVID pandemic. CHOICES continues to work with the Trust, state agencies, partners, and other stakeholders to overcome these issues and provide services for Trust beneficiaries.

Comp Plan Information

| Goal | Objective |
|--|---------------------------------|
| Goal 4 Substance Use Disorder Prevention | 4.3 Treatment & recovery access |

Relevant Comp Plan Goals and Objectives: CHOICES’ organization provides services that span multiple focus areas and comp plan goals and objectives. The most relevant goals, objectives, and strategies are 4.3(c) and 4.4(a), centered on providing support and services for Trust beneficiaries through community-based outpatient community support and peer support.

4.3 Objective: Improve treatment and recovery support services to reduce the impact of mental health and substance use disorders.

- c) Strategy: Increase access to community-based outpatient services and other community supports.

4.4 Objective: Utilize ongoing recovery support services to end the cycle of substance misuse.

- a) Strategy: Increase awareness of available peer supports regarding drug and alcohol misuse for

individuals and family members.

Performance Data:

During this reporting period, CHOICES served the following Trust beneficiary groups:

- Mental Illness – 55
- Developmental Disabilities – 3
- Chronic Alcoholism or Substance Use Disorder – 18
- Traumatic Brain Injury – 9

During the reporting period, CHOICES received re-accreditation by CARF International. Also, during the reporting period, CHOICES collaborated with Access Alaska to increase services for beneficiaries living with a TBI. CHOICES continues to facilitate quarterly follow-up surveys with clients. Of the 55 clients served, 13 surveys were completed and returned, all reporting a rating of Excellent or Very Good for their programs.

During the reporting period, CHOICES found that:

- b) 19 of 55 (34%) clients demonstrated an increased ability to manage challenging situations.
- c) 11 of 55 (20%) clients demonstrated an increased ability to manage challenging behaviors.
- d) 12 clients-maintained stability after being housed.
- e) 4 clients obtained employment.
- f) 5 clients decreased substance use.
- g) 2 clients had decreased legal involvement.
- h) 13 clients demonstrated increased healthy behaviors.
- i) 14 clients demonstrated a reduction in the number of days they presented with physical and mental health symptoms.
- j) 14 clients were connected to benefits programs with Alaska Public Assistance.

Two success stories of beneficiaries being better off due to this program follow below.

DP has been engaged with CHOICES with the presenting complaint, "I need to keep my blood sugars under control, and I need to apply for Medicaid." The client was diagnosed with Serious Mental Illness of a Mood Disorder, which they manage with psychotropic medication. CHOICES provided Case Management Services and Psychotherapy.

DP was poorly managing the medical condition of Diabetes by not taking insulin, not keeping medical appointments, and neglecting to fill prescriptions. The problem was exacerbated by his being underinsured and not knowing how to secure available coverage through Medicare. During the winter of 2021, the client lost their housing status at the motel they were staying and had to go to the Sullivan Area for shelter. While at the top, their insulin was stolen. Additionally, the client was poorly managing monthly social security funds through excessive spending, a trait of their mental health disorder. At the end of every month, the client had a negative balance of over -\$500 in their bank account.

Through clinical supervision, staff explored options for addressing the client's presenting issues. The Case Manager that worked with the client intervened to assist the client in applying for a Mini-Grant covered insulin cost for about three months. The Case Manager linked the client to Medicare Coverage which began to cover the cost of insulin prescription. Staff assisted the client in being rehoused. Notably, the client was re-established with a primary care provider. Moreover, the team motivated the client to get payee services and

advocated for the client with payee services.

The client now manages health, no longer overdraws on their account, has adequate housing, and has medical coverage.

The client is up to date, is attending all preventative and medical appointments, and has diabetes under control; per the doctor's report, Medicare is covering the prescription, and the client reports liking where they stay. The client has a family member who is a secondary beneficiary engaged in his treatment through CHOICES Inc.

Another beneficiary, SW, sought support from CHOICES with the presenting complaint that they were "Dealing with death in the family and moving through the grief process." "Filtering out healthy relationships." The beneficiary stated, "I would like to have somebody I can talk to about the innermost stuff and not feel judged or ridiculed or that I should've kept it to myself." The client has diagnoses of Anxiety Disorder and Substance Use Disorder in Remission.

The client faced family issues that affected their relationship with their partner and children. The client believed their substance use history significantly affected their family relationships. The Case Manager supported the client with legal issues, mental health, education, employment, and housing. The client attended school and obtained a CDL (Commercial Driver's License). After graduation, the client secured their first employment as a driver. The client resolved their legal issue, coordinated visitation for their children, and found transitional housing.

The client's Case Manager with the Recovery Coordination Program was instrumental in advocating for the client to attend school, secure sober transitional living, and resolve legal issues.

The current update is that the beneficiary continues to manage their sobriety, engages in mental health counseling, seeks new employment, maintains a relationship with their children, and remains in sober living.

Project Recommendations:

In light of the current fiscal and workforce issues facing behavioral health providers throughout the state, CHOICES will not likely become self-sustaining in the near term. This project has a demonstrated history of providing positive outcomes to beneficiaries, and Trust staff recommends continued funding and support for the agency until sustainability can be achieved. Staff will continue to monitor this project and work with CHOICES staff to identify alternative sustainable funding sources beyond FY25. Or, if the project outcomes for beneficiaries are not achieved team will work with CHOICES to adjust accordingly or recommend that Trust funding be discontinued.

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|---|---|------------------------|
| Project Title: BPI Program Grant – Alaska Mental Health Consumer Web | | |
| Grantee: Alaska Mental Health Consumer Web | | |
| Fund: Authority Grant | | |
| Years Funded: 19 | Project Category: Direct Service | |
| FY22: \$333,600 | FY23: \$333,600 | FY24: \$333,600 |
| Project Description: This grant supports 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 adverse life circumstances. The prevailing philosophy at The Web is the development of relationships using peer mentors and their experiential knowledge of mental illness, substance abuse, homelessness, and other similar life experiences. The Web utilizes the relationship established through the peer-to-peer connection to meet each person’s needs. Individuals experiencing chronic homelessness, 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 and affordable housing organizations remain a crucial area of focus for the Web to streamline access to support 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.

Summary of Grant Progress: The Web’s Peer Mentors work daily to connect participants with appropriate services for primary care, behavioral health, substance misuse treatment, employment, and housing. This support includes pre- and post-treatment services both in person and via Zoom as needed. Life skills groups provided throughout the week empower participants to share their successes, challenges, and failures in a supportive environment. Peer Mentors work one-on-one with each participant to develop and refine their plan for sobriety, wellness, recovery, employment, and housing based on the individual's goals and priorities. Peer staff assists each week in receiving food from the various food pantries, as many participants struggle with food insecurity. The Web had to change how it provided food assistance during the Pandemic; they work with the individual food pantry to ensure our participant is registered and eligible to receive weekly or monthly food. Once there is confirmed eligibility, a staff person will pick up the food box and bring it to The Web for distribution to the participant.

With the recent closure of Sullivan Arena Mass Shelter, the Web has seen a dramatic increase in participants who need more financial resources to obtain housing and are struggling to identify emergency shelter options. The Web’s Peer Mentors are working closely with these individuals to connect them to housing support and services. During FY23, the Web continued to work through challenges produced by the COVID-19 pandemic. The pandemic negatively impacted member participation as well as staff and workforce stability. The Web also experienced a transition in leadership as the long-time executive director retired, and a new director was hired. Despite these obstacles, the Web had a smooth leadership transition and is now fully staffed. This successful leadership transition and staff building is mainly due to a sound transition plan, an active and dedicated board, and support from the Trust.

Comp Plan Information

| Goal | Objective |
|--|-------------------------------|
| Goal 4 Substance Use Disorder Prevention | 4.4 Recovery support services |

Relevant Comp Plan Goals and Objectives: The Web provides services that span multiple focus areas and comp plan goals and objectives. The most relevant goals, objectives, and strategies are 4.3(c) and 4.4(a), centered on providing support and services for Trust beneficiaries through community-based outpatient community support and peer support.

4.3 Objective: Improve treatment and recovery support services to reduce the impact of mental health and substance use disorders.

d) Strategy: Increase access to community-based outpatient services and other community supports.

4.4 Objective: Utilize ongoing recovery support services to end the cycle of substance misuse.

k) Strategy: Increase awareness of available peer supports regarding drug and alcohol misuse for individuals and family members.

Performance Data:

During FY23, the Web collected the following data for the number of Trust beneficiaries served:

- beneficiaries experiencing mental illness – 418
- beneficiaries experiencing developmental disabilities – 202
- beneficiaries experiencing substance use disorder – 609
- beneficiaries experiencing Alzheimer's Disease or related dementias – 27
- beneficiaries experiencing a traumatic brain injury – 161
- beneficiaries experiencing co-occurring disorders – 328

The Web has over 2,000 active members who utilize the center over 20,000 times annually for services such as computer access, support for substance abuse recovery, peer mentoring, support groups, assistance obtaining employment and housing, community involvement, recreation, and education.

The Web conducts a semi-annual satisfaction survey 100 surveys were distributed; 98 surveys were returned: for a 98% return rate. Please note: % is based on responses to each question; not all questions received a response—Ninety-six members (98%) report they are satisfied with the services at The Web. Of the surveys with answers given, 100% indicated satisfaction.

a) 83 members (88.30%) report that The Web has helped them access some of life's necessities.

i.) 88 members (94.62%) report that The Web has helped them feel better through personal support.

ii.) 77 members (82.80%) report that The Web has helped them with personal challenges such as mental illness.

iii.) 71 members (76.34%) report that The Web offers increased access to housing opportunities.

iv.) 61 members (67.78%) report that The Web offers increased access to paid employment.

v.) 86 members (88.66%) report that The Web helps them stay sober.

vii.) 95 members (98.96%) report that The Web is safe during the day.

ix.) 7 members assisted with crisis intervention, 19 gained paid employment, eight moved into housing, and 30 received or were given referrals for APA/Food Stamps/SSI/SSDI.

Two stories shared by program participants are below.

Story 1) AB: "The Web allowed me a safe place to be during the day while I figured out my situation in Alaska. I moved here from Las Vegas and have been working to try and figure out what to do. I have no family here, and I have served time in prison. I wanted a fresh start, and I found that on the Web. I was able to get some warm clothes for the winter, have access to computers, attend cooking classes, and, best of all, have somewhere warm and safe. Since I was able to use the computers, I was able to apply for a job at Wendy's! I also received assistance from the Web to get needed medication. I have dealt with many nonprofits in Anchorage to try and get help, and the Web has by far been the best!"

Story 2: DA: "The Web assisted me in getting a job by providing me with a place to apply and helping me through the application process. I was also able to use the phone and internet to keep regular contact with the hiring company, which led to me getting the job. Had I not been able to use these resources on the Web, I don't know how I would have done it. I could also use the scanner to send my ID and information to the company to make my hiring process quicker! Everyone on the Web is always super helpful, and now I have a

chance to live my dream by saving up money from my new job to start a taco truck maybe someday! I love the Web for what it did for me!”

Project Recommendations: In light of the current fiscal and workforce issues facing behavioral health providers throughout the state, the Web will not likely become self-sustaining in the near term. This project has a demonstrated history of providing positive outcomes to beneficiaries, and Trust staff recommend continued funding and support for the agency until sustainability can be achieved. Staff will continue to monitor this project and work with the Web staff to identify alternative sustainable funding sources beyond FY25. Or, if the project outcomes for beneficiaries are not achieved team will work with the Web to adjust accordingly or recommend that Trust funding be discontinued.

Project Title: BPI Program Grant - Northern Hope Center Mental Health Drop-In Center

Grantee: Northern Hope Center

Fund: Authority Grant

Years Funded: 9

Project Category: Direct Service

FY22: \$50,062

FY23: \$100,000

FY24: \$154,000

Project Description: Northern Hope Center (NHC) is a drop-in center in Fairbanks for adults with mental illness who need daily activities and support as they continue their recovery process. The mission of the NHC is to provide adults with serious mental illness relief from isolation and stigma. The center provides a member-driven, member-run, comfortable, and safe place. NHC promotes empowerment by providing opportunities free from the stress, guilt, shame, and demands of society. NHC is here to help individuals identify their purpose and direction beyond their mental illness. At NHC, members develop and implement activities on topics such as relationships, work, wellness, recovery, nutrition, self-sufficiency, and self-advocacy.

Summary of Grant Progress: In FY23, the Trust provided a partnership grant to support NHC through the Partnership grant program. A drop-in center in Fairbanks, NHC provides peer-led services for adult Trust beneficiaries with mental illness who need daily activities and support as they continue their recovery process. Since its creation in 2015, NHC has been a place of trustworthiness, choice, safety, collaboration, and empowerment, supporting communities by providing hope and support. It is a safe place for socialization, support, and activities for varying degrees of mental illness. The mission of the Northern Hope Center is to provide adults with serious mental illness relief from isolation and stigma. NHC exists to help individuals identify their purpose and direction beyond their mental illness. At NHC, members develop and implement activities on topics such as relationships, work, wellness, recovery, nutrition, self-sufficiency, and self-advocacy.

NHC faces challenges similar to other behavioral health services providers, such as funding sustainability and workforce issues. Based on staff recommendations, NHC will be a Beneficiary Project Initiative (BPI) agency beginning in FY24. As a peer-led provider, NHC uses the skills of volunteer peer support specialists to augment their staffing levels and provide services to Trust beneficiaries.

| Comp Plan Information | |
|---|---------------------------------|
| Goal | Objective |
| Goal 4 Substance Use Disorder Prevention | 4.3 Treatment & recovery access |
| <p>Relevant Comp Plan Goals and Objectives: NHC’s organization provides services that span multiple focus areas and comp plan goals and objectives. The most relevant goals, objectives, and strategies are 4.3(c) and 4.4(a), centered on providing support and services for Trust beneficiaries through community-based outpatient community support and peer support.</p> <p>4.3 Objective: Improve treatment and recovery support services to reduce the impact of mental health and substance use disorders.</p> <p> c) Strategy: Increase access to community-based outpatient services and other community supports.</p> <p>4.4 Objective: Utilize ongoing recovery support services to end the cycle of substance misuse.</p> <p> a) Strategy: Increase awareness of available peer supports regarding drug and alcohol misuse for individuals and family members.</p> | |
| <p>Performance Data: Northern Hope Center served over 275 unduplicated individuals during this fiscal year. The daily average count was 25 plus individuals per day. NHC served over 6000 breakfast and lunch meals, and more than 5500 persons participated in activities beyond breakfast and lunch. NHC served over 100 unduplicated members, 200 unduplicated guests, and unduplicated visitors who were potential new members. There were 350 referrals to other services made last year.</p> <p>NHC has participated in events such as the Fairbanks symposium, where members who receive services from the agency participated in a panel discussion on peer support in the community. The members discussed how essential NHC’s services are and how they have positively impacted their lives. These members spoke with Trust staff at the symposium and shared their gratitude for the Trust and the support NHC has received from the Trust.</p> <p>Members continue to help with the center’s daily operations when possible, and NHC staff continues to utilize a more in-depth cleaning routine for sanitation. NHC provides members with opportunities to develop their skills and talents through a variety of events (e.g., movie days, relaxation days, board game days) and classes (e.g., arts and crafts, baking/cooking, community awareness, computers, education, finances, hygiene, sewing, typing). Members are continuing to participate in weekly Wednesday member meetings. NHC transports members to and from the center, medical appointments, and grocery shopping. NHC continues to assist members in clearly identifying their views and benefits of peer-to-peer services to identify strategies to increase motivation towards in-depth outreach and increasing volunteering. Members are doing well with their overall mental health.</p> <p>NHC staff continues to perform weekly welfare checks, phone calls, and visits to members absent from the center for more than three days. NHC is seeing an increase in members interacting and socializing with each other daily. NHC is a vital member of the region’s Homeless Coalition, Wellness Coalition, Reentry Coalition, and Community Action Plan (CAP) team. These groups are working to develop a more structured system of care for the Fairbanks Community as a whole. These teams are focusing on developing adequate, sustainable mechanisms to implement supported programs for the underserved populations in the North Star Borough. Members are invited to attend coalition meetings with NHC. Peer Support Specialist offers hope, guidance, advocacy, and camaraderie for members at NHC. Peer Support Specialists deliver peer support through face-</p> | |

to-face support groups, phone calls, or individual meetings. The NHC Peer Specialists have lived experience in mental health that supports people in their recovery by sharing their experiences.

NHC peer specialists partner with other members in a wide variety of ways, including:

- Create a Wellness Recovery Action Plan
- Help create Psychiatric Advance Directives
- Listen, relate, and provide hope regarding mental health recovery
- Assist with locating employment.
- Accompany members to appointments and meetings.
- Help locate community supports for social and personal interests.

The NHC members strongly feel they are better off by having the center. NHC emphasizes helping members feel autonomous and make decisions. Members have something to offer each other by helping with daily operations of the center and supporting each other. Members develop a sense of usefulness, increase their well-being, and minimize their risk of hospitalization. Empowerment is central to drop-in centers. Members plan their own recovery. Drop-in centers have been far ahead of traditional mental health services in embracing the concept of recovery: the belief that people can focus on building better lives rather than simply treating symptoms. By becoming involved with drop-in centers, members have begun to shed the labels and limits they have experienced and see opportunities.

Member feedback is highly valued, and NHC is an organic organization, meaning each year, NHC evolves based on economic conditions, community needs, and member needs. NHC holds an annual Community Meeting in November. The community and center members are invited to nominate and vote on individuals for the board of directors, review budgets, and discuss policies and procedures. Also, the strategic plan and financial reports are available for review at the annual meeting, and questions are welcomed and answered. NHC members have been and will continue to be integrally involved in planning services. With the board of directors composed of a majority of NHC members, the majority vote decides all major decisions concerning the direction of NHC. Weekly center meetings are open to all members and are solely held to plan and develop strategies to support the center's operations. NHC Members actively and substantially developed policies, procedures, and job descriptions and continue to enhance the mission and philosophy of the organization.

Project Recommendations: NHC is new to the Trust BPI program and budget starting in FY24, and in light of the current fiscal and workforce issues facing behavioral health providers throughout the state, it is not likely that NHC will become self-sustaining in the foreseeable future (2-4 yrs). This project is believed to offer positive outcomes to beneficiaries, and the Trust must continue to provide funding and support for the agency until sustainability can be achieved. Staff will continue to monitor this project and work with NHC staff to identify alternative sustainable funding sources beyond FY25. Or, if the project outcomes for beneficiaries are not achieved staff will work with NHC to adjust accordingly or recommend that Trust funding be discontinued.

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|--|---|------------------------|
| Project Title: BPI Program Grant – Polaris House | | |
| Grantee: Polaris House | | |
| Fund: Authority Grant | | |
| Years Funded: 18 | Project Category: Direct Service | |
| FY22: \$213,000 | FY23: \$213,000 | FY24: \$213,000 |
| <p>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 support (employment, housing, and recovery supports). Beneficiaries with severe mental illness and challenges 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 support 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 in creating self-directed plans for community involvement, which in most cases leads to paid work or volunteer positions.</p> <p>Polaris House strives to ensure no member is homeless through a complete array of support for 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, PFDs, etc. It facilitates beneficiary access to Trust-funded mini-grants through the Trust Authority.</p> | | |
| <p>Summary of Grant Progress:</p> <p>Polaris House is the only clubhouse drop-in center certified by Clubhouse International, serving Trust beneficiaries with severe mental illness and challenges with other disabilities, including substance use disorder, traumatic brain injury, and developmental disabilities.</p> <p>Polaris House aims to empower members by involving them in every aspect of its operations. Each member's skills, talents, creative ideas, and efforts are needed and encouraged daily. Participation is voluntary, but each member is always invited to participate in the work of the clubhouse, which can include outreach, office work, reception, food service, and much more. The daily activity of the clubhouse revolves around the Work Ordered Day, an 8-hour period that models the typical business hours found in the community. Staff and members work side-by-side as partners and colleagues to complete the vital work of the clubhouse. Clubhouse unit meetings are held daily to organize tasks and build relationships. Participating in the Work Ordered Day can assist members in regaining confidence, purpose, and self-worth.</p> <p>During the pandemic, the Polaris House worked tirelessly to keep members engaged with the clubhouse and each other. One example is demonstrated by staff and members following safety protocols to prepare and deliver meals to those who could not leave their residences or engage with other members. After the pandemic, Polaris House has been working to reengage with members who could not meet in person. Polaris House is also working to overcome issues facing members, such as community housing shortages, workforce issues, and delays in receiving benefits.</p> | | |
| Comp Plan Information | | |
| | Goal | Objective |

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|---|--|---------------------------------|--|
| | Goal 4 Substance Use Disorder Prevention | 4.3 Treatment & recovery access | |
| <p>Relevant Comp Plan Goals and Objectives: Polaris House’s organization provides services that span multiple focus areas and comp plan goals and objectives. The most relevant goals, objectives, and strategies are 4.3(c) and 4.4(a), centered on providing support and services for Trust beneficiaries through community-based outpatient community support and peer support.</p> <p>4.3 Objective: Improve treatment and recovery support services to reduce the impact of mental health and substance use disorders.</p> <p> c) Strategy: Increase access to community-based outpatient services and other community supports.</p> <p>4.4 Objective: Utilize ongoing recovery support services to end the cycle of substance misuse.</p> <p> a) Strategy: Increase awareness of available peer supports regarding drug and alcohol misuse for individuals and family members.</p> | | | |
| <p>Performance Data:</p> <p>During the reporting period, Polaris House reported the following data:</p> <ul style="list-style-type: none"> • Mental Illness – 60 • Co-Occurring disorders – 42 <p>Polaris House continues to use Zoom for connecting with members who aren’t yet ready to engage in person, and during this reporting period, they had 42 Zoom meetings. These meetings are focused on keeping these members connected and engaged with the clubhouse and recovery support. Other metrics include:</p> <ul style="list-style-type: none"> • 50% of active members have paid employment. • 95% of active members self-reported overall satisfaction with programs. • 12-15 members attend daily. • 95% of members report that the clubhouse consistently provides support that improves their quality of life. • 90% report an increased ability to manage challenges in situations. • 97% of members were housed by the end of the reporting period. • 100% of members are connected to benefit programs. | | | |
| <p>Project Recommendations:</p> <p>Considering the current fiscal and workforce issues facing behavioral health providers throughout the state, Polaris House will not likely become self-sustaining in the near term. This project has a demonstrated history of providing positive outcomes to beneficiaries, and Trust staff recommends continued funding and support for the agency until sustainability can be achieved. Staff will continue to monitor this project and work with Polaris House staff to identify alternative sustainable funding sources beyond FY25. Or, if the project outcomes for beneficiaries are not achieved team will work with Polaris House to adjust accordingly or recommend that Trust funding be discontinued.</p> | | | |

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|---|---|------------------------|
| Project Title: BPI Program Grant – NAMI Juneau | | |
| Grantee: NAMI Juneau | | |
| Fund: Authority Grant | | |
| Years Funded: 15 | Project Category: Direct Service | |
| FY22: \$100,550 | FY23: \$100,550 | FY24: \$100,550 |
| <p>Project Description: This grant provides funding to support NAMI Juneau, the only agency in Juneau that offers free, peer (family) driven educational and support programs for families caring for a loved one with mental illness. NAMI Juneau 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 members, reducing the threat of adverse outcomes such as suicide, homelessness, and 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.</p> <p>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 support. NAMI programs include 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 adverse effects like hospitalization, incarceration, and suicide.</p> | | |
| <p>Summary of Grant Progress: The Trust supports NAMI Juneau, one of four local affiliates of the Alaska National Alliance on Mental Illness (NAMI). NAMI Juneau provides peer-driven education, advocacy, and support programs to Trust beneficiaries with mental illness and/or substance use disorders and family members and caregivers. NAMI Juneau provides advocacy and community education while leveraging key community partnerships to raise awareness and reduce stigma for individuals with mental illness(es) and/or substance use disorders.</p> <p>This project aligns with the Trust goals and Priority Initiative of the Beneficiary Project Initiative with the goal of targeted programs designed, managed, and/or run by beneficiaries of the Trust that address a defined need and increase the quality of life for Trust beneficiaries. Additionally, the project aligns to utilize ongoing recovery (including peer and family) support services to reduce the impact of mental health and substance use disorders.</p> <p>The project has focused on Family-to-Family and Peer-to-Peer education and support to individuals living with a mental condition and family members caring for loved ones with moderate to serious mental illness through direct service, advocacy, and outreach. Offering numerous educational and support groups, NAMI Juneau uses evidence-based and promising practices to aid individuals and families in navigating mental illness and the array of services and systems of care. NAMI Juneau advocacy and local community partnership building is evident in a critical key role in the Juneau Suicide Prevention Coalition and other community groups and coalitions. The agency partners with local providers and schools to provide regular</p> | | |

educational forums to practitioners and community members focused on various facets of mental illness and/or substance use disorders. Program evaluation activities continue to reveal positive outcomes, including access to services and increased community awareness of beneficiary needs.

NAMI Juneau continued to navigate challenges due to the COVID-19 pandemic and easing restrictions by serving 239 beneficiaries living with mental illness. NAMI Juneau continues to provide critical education, peer support, and coordination of services to beneficiaries with mental illness, their families, and the community. According to surveys and testimonials, beneficiary feedback continues to be overwhelmingly positive. NAMI Juneau is an exemplary grantee with consistent and high-quality reporting of financial and program activities.

Comp Plan Information

| Goal | Objective |
|--|---------------------------------|
| Goal 4 Substance Use Disorder Prevention | 4.3 Treatment & recovery access |

Relevant Comp Plan Goals and Objectives: This project aligns with the Strengthening the System: Alaska’s Comprehensive Integrated Mental Health Program Plan through Goal 4, Substance Use Disorder Prevention, and Objectives 4.3 and 4.4 related to improving treatment and recovery support services (including peer support services) to reduce the impact of mental health and substance use disorders and utilize ongoing recovery support to end the cycle of substance misuse.

Performance Data: NAMI Juneau was able to issue an Annual Report for activities and the impact of services during 2021-2022:
<https://www.namijuneau.org/annual-report>.

An estimated minimum of 239 primary Trust beneficiaries and numerous secondary Trust beneficiaries were served in this project year. Examples of services delivered in the FY23 project year are included below.

Highlights of NAMI Juneau events and activities:

- 77 presentations to 2,021 community members about mental health and suicide prevention.
- 34 adults participated, and 387 adults accessed support services.
- 202 youth participated, and 185 youth accessed support services.
- Partnerships with 42 community organizations on 191 projects.
- 6,165 individuals accessed NAMI Juneau resources to navigate Juneau’s mental health system.
- Multiple community interactions at various community events such as health and resource fairs, social media individual impressions, and numerous activities with an estimated minimum of nearly 70,000 in total outreach.
- Multiple advocacy opportunities in Legislation.

In one individual’s words, the participant shares the impact of NAMI Juneau’s work, *“NAMI Juneau has made such a positive difference in my life and mental health, they have helped me tremendously in maintaining independence and increasing my quality of life, so I can successfully make my mental health/health appointments.”*

Project Recommendations: The project is expected to continue as an investment in our Beneficiary Project Initiative. This project has demonstrated positive outcomes for beneficiaries as an advocacy and support

agency, and Trust staff recommends that the program receive Trust funding. Trust staff will continue to monitor this project and work with NAMI Anchorage staff to identify alternative sustainable funding sources beyond FY 25. Should the project deliverables and outcomes for Trust beneficiaries not be achieved, Trust staff will work with NAMI Anchorage staff to adjust work accordingly or recommend that Trust funding be discontinued.

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| Project Title: BPI Program Grant – NAMI Anchorage | | |
| Grantee: NAMI Anchorage | | |
| Fund: Authority Grant | | |
| Years Funded: 16 | Project Category: Direct Service | |
| FY22: \$154,071 | FY23: \$154,071 | FY24: \$154,071 |
| <p>Project Description: NAMI Anchorage is a local National Alliance on Mental Illness affiliate. The agency provides support, education, and advocacy to individuals 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 direct advocacy and support to beneficiaries and their families, and leveraging key partnerships to further educate and advocate for Trust beneficiaries living with mental illness.</p> <p>NAMI Anchorage provides family-to-family and peer-to-peer education and support to individuals struggling with mental illness and family members 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. It is an active participant in Anchorage’s suicide prevention efforts. The agency educates consumers and families about diagnoses, symptoms, and 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.</p> | | |
| Summary of Grant Progress: | | |
| <p>The Trust supports NAMI Anchorage, one of four local affiliates of Alaska's National Alliance on Mental Illness (NAMI). The agency provides support, education, and advocacy to individuals with mental illness (consumers), their families, and the community. NAMI Anchorage serves Trust beneficiaries and families in Anchorage and throughout the state through direct services with support and education groups and via advocacy and community awareness to reduce stigma for individuals living with mental illness(es). NAMI Anchorage offers education and training for families experiencing mental illness. NAMI Anchorage provides direct advocacy and support to beneficiaries and their families while leveraging key partnerships to further educate and advocate for Trust beneficiaries living with mental illness.</p> <p>This project aligns with the Trust goals and Priority Initiative of the Beneficiary Project Initiative with the goal of targeted programs designed, managed, and/or run by beneficiaries of the Trust that address a defined need and increase the quality of life for Trust beneficiaries. Additionally, the project aligns to utilize ongoing</p> | | |

recovery (including peer and family) support services to reduce the impact of mental health and substance use disorders.

The project has experienced challenges due to staffing changes resulting in the Executive Director and Program Manager vacancies in FY23. Despite staffing challenges and the ongoing navigation of services being delivered during the COVID-19 pandemic and easing of restrictions, NAMI Anchorage was able to successfully provide various virtual support groups and classes and attend public events to Trust beneficiaries, families, and friends of beneficiaries and the community.

NAMI Anchorage navigated the complications presented by staffing and ongoing restriction of the COVID-19 pandemic and reported serving 80 Trust beneficiaries and numerous families and friends of Trust beneficiaries and community members. 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. The project continued to support and facilitate MHATS: Mental Health Advocacy Through Storytelling, a youth-founded twelve-week program focused on youth-led storytelling to raise awareness and reduce stigma around mental illnesses.

Comp Plan Information

| Goal | Objective |
|--|---------------------------------|
| Goal 4 Substance Use Disorder Prevention | 4.3 Treatment & recovery access |

Relevant Comp Plan Goals and Objectives:

This project aligns with the Strengthening the System: Alaska’s Comprehensive Integrated Mental Health Program Plan through Goal 4, Substance Use Disorder Prevention. Objectives 4.3 and 4.4 related to improving treatment and recovery support services (including peer support services) to reduce the impact of mental health and substance use disorders and utilize ongoing recovery support to end the cycle of substance misuse.

Performance Data:

Despite the staffing challenges and vacancies of the Executive Director and Program Manager positions, NAMI Anchorage was able to continue to offer many services and support Trust beneficiaries, families, friends, and community members needing support and community while living with mental illnesses and substance use disorders. An estimated minimum of 80 primary Trust beneficiaries and numerous secondary Trust beneficiaries were served in this project year. Examples of services delivered in the FY23 project year are included below.

Highlights of NAMI Anchorage events and activities:

- Six participants completed the Family-to-Family (F2F) course.
- Ten participants in the Peer-to-Peer (P2P) course.
- Seven MHATS: Mental Health Advocacy Through Storytelling workshops and roughly 100 attendees at the MHATs storytelling show at the Nave in Spenard in Anchorage, AK (<https://www.mhatsak.org/>).
- Multiple community interactions at various community events, such as health and resource fairs, with an estimated minimum of 100 attendees.

- Multiple advocacy opportunities in Legislation, both National and Alaska.

In one participant evaluation comments comment, the participant shares the impact of the NAMI Peer-to-Peer (P2P) as *“The exercise that showed even though we have different mental health conditions, there are similarities on how we feel about having a mental health condition.”* And another shares, *“It was nice to hear everyone’s stories and participate in making myself more whole.”*

In a participant’s comments after attending NAMI Anchorage Family-to-Family (F2F), they shared, *“The class taught me how to listen to and talk to my daughter better. It can still be really hard, but I think I have a better understanding of her illness and how it makes her feel and behave. And I think we will try the support group too.”*

In a participant’s comments after engaging in the MHATS: Mental Health Advocacy Through Storytelling, the participant shares, *“I joined because a friend was but wasn’t sure if I had a good MHATS story. ... I told my story at the show and advocated for mental health education in schools. ... I like that MHATS is a youth-led and want to volunteer... It really opened my eyes and inspired me and made me confident to tell my story.”*

Project Recommendations:

The project is expected to continue as an investment in our Beneficiary Project Initiative. This project has demonstrated positive outcomes for beneficiaries as an advocacy and support agency, and Trust staff recommends the program receive Trust funding. Trust staff will continue to monitor this project and work with NAMI Anchorage staff to identify alternative sustainable funding sources beyond FY 25. Should project deliverables and outcomes for Trust beneficiaries not be achieved, Trust staff will work with NAMI Anchorage staff to adjust work accordingly or recommend that Trust funding be discontinued.

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|--|---|------------------------|
| Project Title: BPI Program Grant – Alaska Youth and Family Network | | |
| Grantee: Alaska Youth and Family Network | | |
| Fund: Authority Grant | | |
| Years Funded: 17 | Project Category: Direct Service | |
| FY22: \$208,650 | FY23: \$208,650 | FY24: \$208,650 |
| <p>Project Description: Alaska Youth and Family Network (AYFN) is 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 programming 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 serves approximately 700 families annually. Services are focused on families with one or more members involved in Alaska’s behavioral health and other family and child-serving systems (juvenile justice, special education, child welfare, intellectual and developmental disabilities, medical, legal, etc.) or at risk for involvement in those systems. AYFN’s Family and Youth Peer Navigators engage families using a strength-based, shared-decision making model. Navigators provide support and services rooted in their lived (peer) experience of being a family member of a person addressing mental health or substance use recovery and achieving successful recovery themselves. Lived experience is enhanced by professionally</p> | | |

developed knowledge and skills gained in formal training settings and work experience. Navigators address the healing and support needs of the entire family in a holistic manner focused on relieving internal and external stressors and improving the family member’s recovery, resilience, and overall health.

Summary of Grant Progress: Alaska Youth and Family Network (AYFN) is a Beneficiary Project Initiative (BPI) agency that provides education, advocacy, and behavioral health peer-support and rehabilitative services to Trust beneficiaries throughout Anchorage and the Mat-Su. AYFN primarily serves families who live with behavioral health issues or intellectual and developmental disabilities or are the legal guardian of a child who experiences those challenges and who are involved in systems such as Alaska’s juvenile justice, special education, child welfare, justice, or at risk for involvement in those systems. AYFN’s Family and Youth Peer Navigators have lived experience that helps them to provide support and services that holistically address the unique needs of the families they serve that focus on relieving internal and external stressors, improving recovery, resilience, and overall health.

AYFN’s work is critical to Trust beneficiaries and their families as they help them to navigate these various systems and provides them with the advocacy, support, and services they need to limit the trauma they may experience and not recidivate. In addition to their peer navigation services, AYFN is also involved with various task forces, committees, and projects, such as the Drug Endangered Children’s (DEC) project in the Mat-Su, where they train DEC Alliance members to serve families in crisis.

Despite all the work and areas where AYFN is engaged, they need help with sustainable funding sources and workforce shortages. To overcome the sustainable funding challenge, AYFN is working towards billing Medicaid for their billable services to offset the decrease in grant funding provided by the State of Alaska. The workforce is an issue facing nearly every behavioral health provider in the state. AYFN continues to work on strategies to recruit and retain the staff they need to continue serving this vulnerable population of Trust beneficiaries.

Comp Plan Information

| Goal | Objective |
|--|---------------------------------|
| Goal 4 Substance Use Disorder Prevention | 4.3 Treatment & recovery access |

Relevant Comp Plan Goals and Objectives: AYFN’s organization provides services that span multiple focus areas and comp plan goals and objectives. These goals, objectives, and strategies that are most relevant are 4.3(c), 4.4(a), and 1.3(b), which are centered on providing support and services for Trust beneficiaries through community-based outpatient community support, peer support, and services for families.

4.3 Objective: Improve treatment and recovery support services to reduce the impact of mental health and substance use disorders.

d) Strategy: Increase access to community-based outpatient services and other community supports.

4.4 Objective: Utilize ongoing recovery support services to end the cycle of substance misuse.

b) Strategy: Increase awareness of available peer supports regarding drug and alcohol misuse for individuals and family members.

1.3 Objective: Reduce the instances and impact of Adverse Childhood Experiences (ACEs) through community engagement and by improving social determinants of health.

c) Strategy: Increase access to family and peer support services that address resiliency by reducing early adversity, toxic stress, and childhood trauma. Building protective relationships supports

cultural identity and self-regulation skills.

Performance Data: During FY23, AYFN has served 256 caregivers and 126 children and youth—337 beneficiaries experiencing mental illness.

- 91 beneficiaries are experiencing developmental disabilities.
- 211 experiencing chronic alcoholism.
- five beneficiaries are experiencing a traumatic brain injury.
- During FY23, AYFN served several Trust beneficiaries with more than one behavioral health diagnosis. Of those served, 137 Trust beneficiaries had a dual diagnosis of a mental health disorder and substance use disorder, and 5 Trust beneficiaries had a mental health disorder, substance use disorder, and traumatic brain injury.

During FY23, AYFN the number of new beneficiaries served during the reporting period

- 171 caregivers
- 73 youth and children
- MH caregivers 211/256 or 82%
- MH youth 126/126 or 100%
- SUD caregivers 179/256 or 70%
- SUD youth 32/126 or 25%
- DD caregivers 70/256 or 23%
- DD youth 18/126 or 14%
- TBI caregivers 5/256 or 2%
- TBI youth 0/126 or 4%

During FY23, AYFN hosted regularly scheduled family support nights and support and education groups.

- 910 caregivers (duplicated count) and 306 youth and children (duplicated count) attended.

AYFN also received 108 Support, Information, and Referral Calls this year from across the state. The majority of calls came from people located in South Central Alaska.

During FY23, AYFN provided intensive family preservation, reunification, and crisis stabilization to families, youth, and children this quarter. AYFN provided case management, systems navigation, care coordination, crisis support and stabilization, individualized treatment planning, collaboration, recovery-oriented mental health and substance use support, peer support, recovery and social connection-based groups, classes, skill-building, and connection to resources. AYFN navigators utilize motivational interviewing, relapse prevention planning, DEC Protocol, FAN(s), recovery-based individual and group support, and transportation support to facilitate recovery-based activities.

Of the satisfaction surveys AYFN received this reporting period, 94% of 88 reported that they are/were satisfied with services, and 100% of 12 youth reported being satisfied with their support from AYFN.

Of those Trust beneficiaries who received AYFN services, 88% of families achieved milestones in at least one category during the reporting period, improving their quality of life and overall functioning.

The outcomes that AYFN has collected during the reporting period are as follows:

- Positive employment and education outcomes: 28
- Positive housing outcomes: 43

- Reunification: 21 families
- Number of children returning home: 73
- Positive parenting outcomes: 230
- Positive adjustments in visitation allowances: 88
- Positive mental health outcomes: 267
- Positive substance use outcomes: 155
- Additional positive results: 366

Other outcomes achieved include no-repeat maltreatment, closed OCS case, connection to resources, received legal support, obtaining vehicles, increased healthy behaviors, improved quality of life, increased social connections, accessing primary care, etc. Families in AYFN’s program were also engaged with over 80 other agencies while engaged in their services. AYFN also provided excellent support to children considered secondary beneficiaries in this report, who are navigating their own significant behavioral health challenges but whose parent is the primary beneficiary. This support produces positive outcomes for these children. The support AYFN provides to these kids is often life-altering.

A single mother experiencing bipolar disorder, schizophrenia, heroin addiction, and domestic violence came in seeking support. Her child is in OCS custody, and she struggled to interact appropriately with her peers. She would come to the group and lash out at others verbally, have conversations where she worked to self-regulate, refuse medication, and speak compulsively about past traumas. She received intensive case management and has: engaged in mental health treatment, is compliant with her medication management, is sober, has left a domestic violence relationship, has secured housing, is self-regulating and has successfully completed a parenting class, is attending groups weekly where she is appropriate and kind to her peers, and gained stable housing.

A father has continued to engage with OCS and providers with support. He has gained even more visits and is approaching a THV. He was granted community visits. His extended family has been allowed to be included in his visits, and AYFN advocated that his natural supports be allowed to supervise some of his visits, which was approved. He has maintained his employment and housing, he has maintained his employment, housing, treatment, and sobriety, and improved his mental health and parenting skills. He continues to see his daughter and the contentious relationship with her foster parent has been mediated, and they are now engaged in positive communication.

Project Recommendations: In light of the current fiscal and workforce issues facing behavioral health providers throughout the state, it is not likely that AYFN will become self-sustaining in the near term. This project has a demonstrated history of providing positive outcomes to beneficiaries, and Trust staff recommends continued funding and support for the agency until sustainability can be achieved. Staff will continue to monitor this project and work with AYFN staff to identify alternative sustainable funding sources beyond FY25. If the project outcomes for beneficiaries are not achieved, staff will work with AYFN to adjust accordingly or recommend that Trust funding be discontinued.

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|---|--|------------------------|
| Project Title: Beneficiary Employment Technical Assistance | | |
| Grantee: DOH, Governor’s Council on Disabilities and Special Education (FY23) <i>*Note: Grantee in FY24 is the UAA Center for Human Development</i> | | |
| Fund: MHTAAR | | |
| Years Funded: 7 | Project Category: Data/Planning | |
| FY22: \$123,500 | FY23: \$123,5000 | FY24: \$200,000 |
| <p>Project Description: FY23 Beneficiary Employment & Engagement (BEE) Technical Assistance activities will change in scope and intensity from previous years due to changing capacity of the Governor’s Council on Disabilities and Special Education (GCDSE) as well as changing needs of BEE focus area to promote broader beneficiary population impact. This year will focus on cross-division/departmental collaboration and sustainable partnerships to connect critical activities and relevant policy initiatives and promote improved outcomes for Trust beneficiaries. Some activities may transition to other partner agencies to support sustainability during FY23 and/or beginning in FY24.</p> <p>Coordination will build provider and state agency capacity to ensure beneficiaries have greater access to employment, related support services, and accurate resources and information on how paid employment impacts Social Security and other benefits (health, housing, food, etc.).</p> <p>Council staff will engage in the following activities:</p> <p>TECHNICAL ASSISTANCE:</p> <ol style="list-style-type: none"> 1. Support Trust program officer and key employment partners to assist with the planning, development, and implementation of activities related to increasing employment outcomes for Trust beneficiaries 2. Assess the current and future level of support needed to ensure the sustainability of the Alaska Project SEARCH program. Develop a long-term plan for Project SEARCH sustainability 3. Support the Trust program officer to convene key partners (DVR, UAA-CHD, etc.) to guide contractual work related to the DB101 website. This may involve contractual expansion for FY23 website redesign and training videos. <p>EMPLOYMENT FIRST & POLICY:</p> <ol style="list-style-type: none"> 4. Support DOLWD/DVR and Trust to finalize and plan the next steps related to Work Matters Task Force recommendations <p>PUBLIC AWARENESS & TRAINING:</p> <ol style="list-style-type: none"> 5. Engage with UAA-CHD to develop a long-term plan for authentic rural transitions for students with disabilities series <p>FY23 funding for this project may be awarded lower than budgeted due to the scaling down of activities this fiscal year and transitional planning for FY24-25 budget periods.</p> | | |
| <p>Summary of Grant Progress: FY23 marks a transition year for this project. Beginning in FY24 the Beneficiary Employment and Engagement Technical Assistance funds will be awarded to the UAA Center for Human Development to widen activities and the population focus of the project to include all categories of beneficiaries. Most activities reported support</p> | | |

the goal of a seamless transition of activities and contractual services overseen by this project from the Governor’s Council on Disabilities and Special Education to the UAA Center for Human Development.

GCDSE staff frequently met with the Trust Program Officer and key employment partners to assist with planning, developing, and implementing activities related to increasing employment outcomes for Trust beneficiaries. The Work Matters Task Force report was printed and distributed in multiple ways, including posting to the GCDSE and DVR websites, social media, and listserv publications. The first meeting of the ad hoc committee to follow up on task force recommendations was held in April 2023.

The GCDSE continues to assess the current and future level of support needed to ensure the sustainability of the Alaska Project SEARCH program and develop a long-term plan for its sustainability. All sites have found the funding necessary to continue without Council/Trust support, but the Council still assists with national training.

GCDSE met with Trust Program Officer and critical partners to guide contractual work related to the “Disability Benefits 101” website and/or alternative options to support benefits counseling for Trust beneficiaries. Council staff met with the contractor in July 2022 to discuss contract matters such as setting up monthly meetings, training videos, website upgrades, and data access. They had a follow-up meeting with them in March to discuss the project’s future. The project will transition as planned to CHD in July 2023.

GCDSE consulted with the Alaska Traditional Transitions Curriculum author to develop a long-term plan for authentic rural transitions for students with disabilities series and develop a plan for curriculum training and dissemination. GCDSE supported the program by creating a flyer and funding the curriculum author to present at the special education conference in February 2023. GCDSE disseminated curriculum information at Committee meetings, through listserv publications, and through other opportunities. Meetings are underway to develop further and implement the program’s pilot project and long-term plan.

A significant challenge has been with the state contractor for “Disability Benefits 101.” Staff coordinated meetings with funders and partners to discuss these concerns. Council staff consulted with the State of Alaska IT staff in January 2023 to discuss the possibility of the state building a site like DB101, which is not feasible now. Council staff met with procurement/admin staff to explore alternative options and submit a Request for Information (RFI) to identify other vendors who could provide the same type of service. GCDSE staff and partners finally met the vendor and their leadership team regarding deliverables that the vendor was not fulfilling. The outcome of the DB101 program is pending and discussions are ongoing.

This project supports systems-level change in support of the Trust’s Beneficiary Employment & Engagement Focus Area. The FY24 transition of these supports to the UAA Center for Human Development will be reassessed throughout the coming fiscal year, with the potential formation of an ad hoc advisory group to help guide higher-level planning and strategy work related to the focus area moving forward.

Comp Plan Information

| Goal | Objective |
|---------------------------------------|---------------------------|
| Goal 3 Economic and Social Well-being | 3.2 Integrated employment |

Relevant Comp Plan Goals and Objectives:

This project is focused on systems-level technical assistance and guidance for improved Trust program investment and state system improvements related to competitive and integrated employment for Trust beneficiaries. (Beneficiary Employment & Engagement Focus Area)

The project aligns with Comp Plan Goal 3: Economic and social well-being; 3.2 Ensure that competitive and integrated employment at part-time or full-time jobs pays minimum wage or above in integrated, typical work settings.

Performance Data:

This project is currently active for FY23. Performance measures examining engagement and planning efforts will be reported after the project period closes.

Project Recommendations:

Staff recommends funding for this project as previously approved for FY24 and FY25 by the Trustees. The increased amount previously approved for FY25 reflected an initial interest in advisory boards and stakeholders to contract to expand the current “Disability Benefits 101” website to incorporate a youth focus. Currently, it is not clear if the expansion option is the preferred path due to contractual issues over the past 12 months, and the increased funding would in that case be used for expansion of the “Alaska Traditional Transitions Curriculum” which also has a beneficiary youth employment and engagement focus.

FY23 marks a transition year for this project. Beginning in FY24 the Beneficiary Employment and Engagement Technical Assistance funds will be awarded to the UAA Center for Human Development to widen activities and the population focus of the project to include all categories of beneficiaries. This project supports systems-level change in support of the Trust’s Beneficiary Employment & Engagement Focus Area. The FY24 transition of these supports to the UAA Center for Human Development will be reassessed throughout the coming fiscal year, with the potential formation of an ad hoc advisory group to help guide higher-level planning and strategy work related to the focus area moving forward.

Project Title: Micro Enterprise Funds

Grantee: University of Alaska Anchorage, Center for Human Development

Fund: MHTAAR

Years Funded: 19 **Project Category:** Direct Service

FY22: \$175,000 **FY23:** \$175,000 **FY24:** \$175,000

Project Description: Before 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 allowed 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.

Developing individual micro-enterprises is an integral part of the Self Determination movement. 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 Center for Human Development (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 to maintain self-employment and wellness successfully. A portion of FY23 Microenterprise project funds may be designated to identify and provide support and referrals to other services as needed for identified beneficiaries or to support self-employed beneficiaries negatively impacted by the COVID-19 pandemic. The program evaluation design will be modified to measure the effectiveness of additional support 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)

These funds will increase access to microenterprise funding for Trust beneficiaries and support economic recovery and stability during COVID-19 recovery.

Summary of Grant Progress: Microenterprise remains a key Trust strategy within the Beneficiary Employment and Engagement focus area. The program offers direct access to Trust financial resources for beneficiaries seeking to start or expand a small business. The program is administered and operated through a multi-agency partnership with the University of Alaska Anchorage Center for Human Development (CHD), Division of Vocational Rehabilitation, Governor’s Council on Disabilities and Special Education, and many others.

Microenterprise grants strive to increase access to self-employment opportunities for persons with disabilities who are Trust beneficiaries. Up to \$10,000 per individual beneficiary per lifetime may be awarded for this purpose. Grant funds may be used for costs associated with starting a new business, expanding a current business or acquiring an existing business. The Recipient must qualify as a Trust beneficiary. The business must meet the definition of a microenterprise, a business with total capital needs of not more than \$35,000 and fewer than five employees. Allowable costs include but are not limited to business license, insurance, permits, inventory, raw materials to make a product, equipment, supplies, rent or lease for space to offer a service or product, utilities, furnishings, marketing activities, transportation costs not related to vehicle purchases, accounting services, and training/support services.

Direct impacts include individual businesses supported through microenterprise grant funds with many beneficiaries reporting a high level of satisfaction and increased opportunity through this access. Systems impacts include outreach and multi-agency collaboration resulting in increased opportunities and access to employment and related resources for Trust beneficiaries statewide. Many individual beneficiaries report sustained positive impacts to their livelihood, health, and well-being beyond Trust investment in their small business. During FY23, program staff was able to identify and hire a new business consultant to support

beneficiary business planning and development to facilitate more successful beneficiary applications for funding. She has been very successful at assisting applicants and has conducted outreach to DVR counselors about the program.

In fiscal year 2023, there are two application periods, one in the fall of 2022 and another in the spring of 2023. The review committee will meet approximately 3-4 times for the two application periods to review and make award determinations on funding requests. Sixteen applications were received during FY23. Five applications were not forwarded to the committee for review because they were submitted incompletely, and the applicants did not respond to attempts to contact them or were unable to complete them in the time allotted or did not qualify as a microenterprise. Final data on FY23 awards will be available with end-of-year reporting after the grant period ends.

The most significant challenge by far is when the total application requests exceed the funds available for beneficiary businesses. This year those requests are expected not to exceed the funds available. The funding increase for FY22 and FY23 helped meet the need for Trust beneficiary funding of small businesses more readily. Another challenge is the number of vendors who don't accept checks (the UAA system is limited in payment options). The fund administrator is currently working to find ways around this and other solutions to getting the funds to the beneficiary without creating this additional barrier.

Trust staff continues to work closely with the UAA team and connects with partners and beneficiaries to identify opportunities for improvement.

Comp Plan Information

| Goal | Objective |
|---------------------------------------|--------------------------|
| Goal 3 Economic and Social Well-being | 3.3 Long-term employment |

Relevant Comp Plan Goals and Objectives:

This project is focused on the expansion of small business and self-sufficiency opportunities for Trust beneficiaries. (Beneficiary Employment & Engagement Focus Area)

This project aligns with Comp Plan Goal 3: Economic and social well-being; 3.2 Ensure that competitive and integrated employment at part-time or full-time jobs pays minimum wage or above in integrated, typical work settings.

Performance Data:

This project is currently active for FY23, performance measures such as the number and type of businesses supported, how many participants reviewed coaching, participant satisfaction and more will be reported after the project period closes:

Project Recommendations:

Staff recommends this project for continued funding as a primary strategy of the Trust's Beneficiary Employment & Engagement Focus Area.

Trust staff continues to work with UAA staff to identify areas of quality improvement based on feedback from beneficiaries, state agency, and community partners. FY24 will continue the exploration of process and

policy changes that would make Microenterprise more accessible to more Trust beneficiaries. It is possible that recommendations for FY26-27 will include changes based on outreach and feedback solicitation occurring in FY23-25. This project is expected to continue as a core focus area strategy with ongoing Trust funding as long as the program supports beneficiaries successfully and remains a priority of the statutory advisory boards.

Housing & Home and Community Based Services Focus Area

| | | |
|--|--|------------------------|
| Project Title: Rural Housing Coordinator – Northwest Arctic Borough | | |
| Grantee: Alaska Housing & Finance Corporation (AHFC) | | |
| Fund: MHTAAR | | |
| Years Funded: 3 | Project Category: Capacity Building | |
| FY22: \$135,000 | FY23: \$135,000 | FY24: \$135,000 |
| <p>Project Description: These funds will support the continuation of the Rural Housing Coordinator position housed in the Northwest Inupiat Housing Authority, tasked with addressing issues of inadequate housing in rural Alaska. The Coordinator will be based in Kotzebue and anticipated to travel to villages in the region to gather data on existing residential structures, overcrowding, and resources available to Trust beneficiaries.</p> | | |
| <p>Summary of Grant Progress:</p> <p>The Rural Housing Coordinator (RHC) has taken on the role of convener, facilitator, and primary point of contact for the Northwest Alaska Homeless Coalition (NWAHC). It is identified as a Housing & Home and Community Based Services Focus Area project in the Trust budget and has a system and direct level impact for Trust beneficiaries. Northwest Inupiat Housing Authority’s (NWIHA) pilot program has completed its third year and continues to develop new approaches to ending rural homelessness. NWIHA staff has established year-round services for at-risk and homeless individuals in Kotzebue. In addition to the seasonal overnight warming shelter, NWIHA staff established a summer food program, providing hot meals and pantry items to individual families in need. The RHC has coordinated federal and state funding to provide rapid rehousing programs and emergency vouchers and open an emergency housing program in Selawik, a village outside of Kotzebue.</p> <p>As the project evolves, more funding may need to shift into small projects to meet the emergent needs in the community as vacancies have necessitated a reduction in personnel expenditures. AHFC has been a key partner critical to the success of the project. Connection directly to AHFC has ensured that the RHC understands how to use and implement funds and programs available through AHFC. The RHC made significant progress in establishing formal partnerships between coalition members, and the coalition has become a separate non-profit organization. The RHC has been a catalyst in the community to supply basic needs to beneficiaries and has both a system and direct service impact for the community.</p> | | |

Comp Plan Information

| Goal | Objective |
|---------------------------------------|-------------|
| Goal 3 Economic and Social Well-being | 3.1 Housing |

Relevant Comp Plan Goals and Objectives: The Rural Housing Coordinator - NWAB project aims to ensure Alaskans have stable, safe housing with appropriate community-based social supports to maintain tenancy.

Performance Data: The overnight warming shelter provides low-barrier overnight shelter to up to ten individuals a night in Kotzebue. In addition to a safe, comfortable shelter, the winter shelter provides meals, health care referrals, and cultural connections through traditional foods and other community support. The shelter was an essential emergency service during a series of winter storms in February/March 2023. The community experienced significant snowfall, high winds, and intermittent power outages, leading to a “boil-water” notice.

As of February 1, 2023, 68 individuals participated in the summer day shelter program. This program provided food and supportive services to at-risk community members. Fifteen people received temporary emergency shelter (overnight) and rapid rehousing assistance.

Three persons stayed at the emergency overnight shelter during the Point in Time count (January 30). Due to staff shortages and intermittent power outages, the overnight emergency shelter count is delayed. The RHC is starting the Housing Needs assessment, long a goal of the RHC program. This project has been delayed due to staff turnover and COVID-19 travel restrictions. In February, NWIHA finalized their housing needs assessment survey and will complete a housing quality assessment of communities in the Northwest Arctic Borough, including Kotzebue. The survey will compile data on the total number and overall quality of residential structures per community and how many persons reside there. Overcrowding in rural Alaska severely affects family stability and maybe a higher risk factor for AMHTA beneficiaries becoming homeless.

Project Recommendations: The Rural Housing Coordinator - NWAB is scheduled for Trust funding to end with the completion of FY25, as the housing coordinator positions historically receive five years of start-up funding. This pilot project has provided one successful path forward to establish housing coordinator positions in rural Alaska. Each community is unique in how they utilize or continue with housing coordinator positions or duties after Trust funding ends. Some communities have maintained a formal housing coordinator as part of the local government staffing structure, and others have created close relationships between the local housing and homeless coalition and local government to implement programs. Kotzebue is formalizing the local housing and homeless coalition to address future needs. This coalition is made up of a combination of local government and provider agency voting members, among other seats.

| | | |
|--|--|------------------------|
| Project Title: Rural Housing Coordinator – New Region | | |
| Grantee: Alaska Housing & Finance Corporation (AHFC) | | |
| Fund: MHTAAR | | |
| Years Funded: 3 | Project Category: Capacity Building | |
| FY22: \$135,000 | FY23: \$135,000 | FY24: \$135,000 |
| <p>Project Description: These funds will support the Expansion of the Rural Housing Coordinator program tasked with addressing issues of inadequate housing in rural Alaska. AHFC will complete a competitive bid process to determine the hub community hosting the second Rural Housing Coordinator program. The program will develop a homeless and housing coalition to identify barriers to accessing safe and stable housing in the region and identify resources to address those concerns, particularly for AMHTA beneficiaries at higher risk of literal homelessness.</p> | | |
| <p>Summary of Grant Progress: The Rural Housing Coordinator position is intended to positively impact a local community through a local government or housing authority that convenes and coordinates local resources to improve the rural area's housing and homeless services continuum of care. This is an expansion of the successful program that started in the Northwest Arctic Borough. The Trust budget identifies it as a Housing & Home and Community Based Services Focus Area project. It has both a system and direct level impact for Trust beneficiaries.</p> <p>The project could not be implemented in FY23 due to capacity issues for the grantee, local area governments, and housing authorities. Two large rental assistance grants were in progress for AHFC during FY22 and FY23, both time-limited projects with funding related to COVID and COVID recovery. Necessarily, time and resources needed to be dedicated to implementing and distributing these funds so that communities across Alaska had access to flexible rental assistance and case management. Local governments and housing authorities also received direct funding for COVID and COVID recovery that had to be spent or allocated by deadlines during this fiscal year, limiting the capacity to implement new programs.</p> | | |
| Comp Plan Information | | |
| | Goal | Objective |
| | Goal 3 Economic and Social Well-being | 3.1 Housing |
| <p>Relevant Comp Plan Goals and Objectives: The Rural Housing Coordinator project aims to ensure Alaskans have stable, safe housing with appropriate community-based social supports to maintain tenancy.</p> | | |
| <p>Performance Data: The project could not be implemented this fiscal year due to capacity issues for the grantee, local area governments, and housing authorities.</p> | | |
| <p>Project Recommendations: A contract for a Rural Housing Coordinator in a new community is expected to be completed at the end of FY23 or the beginning of FY24. Should the position not be able to begin in FY24, continued funding should be reevaluated.</p> | | |

| | | |
|---|--|-----------------------------------|
| Project Title: IDD System Capacity Development | | |
| Grantee: Alaska Association on Developmental Disabilities | | |
| Fund: Authority Grant | | |
| Years Funded: 7 | Project Category: Capacity Building | |
| FY22: \$65,000 | FY23: \$65,000 | FY24: \$65,000 |
| <p>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. These changes impact providers’ provision of services and have significant fiscal ramifications. This funding will work to achieve the following four goals:</p> <ol style="list-style-type: none"> 1) Advocate for a robust system and best practices through involvement with national trends and organizations. 2) Change management support for leadership in provider organizations related to changes within the Intellectual and Developmental Disabilities (IDD) system required by Medicaid Redesign and federal requirements. 3) Provide for Agency sustainability by supporting agencies in adapting to costing models needed under the changes to the IDD system. 4) Workforce development to address the training needs of agency staff | | |
| <p>Summary of Grant Progress: The IDD System Capacity Development project is a core IDD systems change initiative for Alaska that corresponds with implementing the DD Vision. AADD advocates for best practices to be implemented by its members and the state system. AADD encourages members to obtain training on both business acumen and service delivery. The agency 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 the use of technology, consumer-driven decision-making, and implementing recommendations made by self-advocates. The agency has been 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. This project has met its expected deliverables to date. It is identified as a Housing & Home and Community Based Services Focus Area project in the Trust budget and has a system-level impact on Trust beneficiaries. This project also furthers the goals of the Workforce Priority Initiative.</p> | | |
| Comp Plan Information | | |
| | Goal | Objective |
| | Goal 7 Services in the Least Restrictive Environment | 7.2 Long-term services & supports |
| <p>Relevant Comp Plan Goals and Objectives: The IDD System Capacity Development project is connected to the Comp Plan Objective 7.2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement and the Comp Plan Objective 9.1: Strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization.</p> | | |
| <p>Performance Data: AADD has implemented the IDD System Capacity Development project through multiple advocacy efforts, including guardianship alternatives, person-directed services, rate rebasing and increased funding for HCBS, care coordination improvements, and data-driven decision-making. This project has met its expected deliverables to date.</p> | | |

Project Recommendations:

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. AADD is unique in its ability to support providers and implement system-level change through a network of service providers and advocates in partnership with state agencies.

Project Title: ADRD and TABI Capacity Building**FY23 Grantees (through 4/26/2023):**

- ME Rider and Associates (*contract*)
- MapHabit

Fund: Authority Grant

Years Funded: 6

Project Category: To be determined based on individual project type

FY22: \$150,000

FY23: \$150,000

FY24: \$100,000

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.

Summary of Grant Progress:

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 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. Instead, the 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. The project is identified as a Housing & Home and Community Based Services Focus Area project in the Trust budget and has a system-level impact for Trust beneficiaries.

Two projects were funded in FY23:

1. **Dementia Action Collaborative facilitation.** A competitive RFP was issued for FY23, and **M.E. Rider and Associates** was awarded the contract. During this fiscal year, the Division of Public Health (DPH) hired a Dementia Education and Awareness Program Manager and applied for Building Our Largest Dementia (BOLD) Infrastructure for Alzheimer’s Act funding from the Centers for Disease Control. Part of the work of this federal grant is to maintain a coalition or collaborative to guide the dementia work of the state. The Dementia Action Collaborative supported moving to DPH to continue its work. To prepare for BOLD and a likely transition to DPH, a new competitive RFP will be issued in FY24 to accommodate the additional work outlined, intending to transfer the project to DPH by FY26.

2. The **MapHabit Pilot Project** for Assistive technology to provide critical services for ongoing Intellectual and Developmental Disabilities (IDD) and Traumatic Brain Injury (TBI) care challenges (MapHabit) is a unique

approach to behavioral health using a care management platform focused on visual map building to improve personal interactions, quality of life, and independence for individuals and their circle of support. In partnership with Health TIE, a healthcare innovation hub catalyzing new healthcare options for Alaskans, MapHabit is coordinating an Alaskan demonstration project between the Alaska Association of Developmental Disabilities (AADD), Stone Soup Group, and Daybreak Inc. to illustrate the benefits of using assistive technology to provide critical services and address the ongoing Intellectual and Developmental Disabilities (IDD) and Traumatic Brain Injuries (TBI) care challenges to highlight a viable alternative way forward for Alaskans with disabilities as well as their care communities.

Additional projects were anticipated but have yet to come to fruition. A planned data project expanded into a more significant request from the evaluation team. Two other projects were discussed, but partners were not ready to execute them in FY23.

Comp Plan Information

| Goal | Objective |
|--|-----------------------------------|
| Goal 7 Services in the Least Restrictive Environment | 7.2 Long-term services & supports |

Relevant Comp Plan Goals and Objectives: Both projects align with Comp Plan Objective 7.2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement.

Dementia Action Collaborative Facilitation Performance Data: A competitive RFP was issued for FY23 Dementia Action Collaborative facilitation, and M.E. Rider and Associates was awarded the contract to facilitate meetings and activities of the collaborative.

MapHabit Pilot Project Performance Data: The MapHabit Pilot Project for Assistive technology to provide critical services for ongoing Intellectual and Developmental Disabilities (IDD) and Traumatic Brain Injury (TBI) care challenges (MapHabit) was approved in the last quarter of FY23, with data expected in FY24.

Project Recommendations:

The funding to support ADRD and TABI system capacity development is recommended to continue in FY25, with a decrease in funds beginning in FY24, and evaluated for the continued need for FY26. In FY24, the recommended decrement was approved and transferred to fund TABI and ADRD services and supports where there was greater demand for funding projects.

| | | |
|---|---|-----------------------|
| Project Title: Legal Resources for Trust Beneficiaries | | |
| Grantee: Alaska Legal Services Corporation | | |
| Fund: Authority Grant | | |
| Years Funded: 12 | Project Category: Direct Service | |
| FY22: \$75,000 | FY23: \$75,000 | FY24: \$75,000 |
| <p>Project Description: Alaska Legal Services Corporation will provide direct free civil legal assistance to beneficiaries on issues that are critical to preventing homelessness, such as those that threaten their physical safety, stability, and self-sufficiency and thereby place them at risk of becoming homeless or that are contributing to current homelessness. This grant also provides support to train Alaska Legal Services Staff.</p> | | |
| <p>Summary of Grant Progress: Legal Resources for Trust Beneficiaries is a key project that prevents homelessness through beneficiary education that is unavailable 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 can delay or prevent eviction, reducing homelessness for Trust beneficiaries by providing free legal assistance. Part of the grant is used for staff training. Trust funding is used as match to leverage federal funding opportunities and is one of many necessary sources of funding Alaska Legal Services uses to maintain services. Rental assistance funded through ARPA is coming to an end. People, many of whom are Trust beneficiaries, who cannot maintain regular employment or have challenges with maintaining their housing may find themselves in a stage of eviction and need a legal intervention to maintain housing while services and income are obtained to sustain housing. The Legal Resources for Trust Beneficiaries project is identified as a Housing & Home and Community Based Services Focus Area project in the Trust budget. It has a direct level impact on Trust beneficiaries.</p> | | |
| Comp Plan Information | | |
| | Goal | Objective |
| | Goal 3 Economic and Social Well-being | 3.1 Housing |
| <p>Relevant Comp Plan Goals and Objectives: The Legal Resources for Trust Beneficiaries project aligns with the Comp Plan Objective 3.1 Alaskans have stable, safe housing with appropriate, community-based social supports to maintain tenancy.</p> | | |
| <p>Performance Data: In FY22, ALSC staff provided legal help to 455 Trust beneficiaries. The legal assistance offered included assisting: 19 beneficiaries with consumer protection issues; 23 beneficiaries with education/employment issues; 111 beneficiaries with family law matters, 31 beneficiaries with Health law issues; 133 beneficiaries with housing issues; 101 beneficiaries with legal matters related to income maintenance; 37 beneficiaries with other legal problems.</p> | | |
| <p>Project Recommendations: This project is recommended for funding in FY25. Funding for eviction prevention and other no-cost legal services has been volatile in the recent past. As long as this project demonstrates positive outcomes and funding continues to be needed, it is recommended that Trust’s funding partnership with Alaska Legal Services Corporation continue.</p> | | |

| Project Title: Special Needs Housing Grant | | | | | | |
|--|--|------------------------|------|-----------|---------------------------------------|-------------|
| Grantee: Alaska Housing Finance Corporation | | | | | | |
| Fund: MHTAAR | | | | | | |
| Years Funded: 9 | Project Category: Capacity Building | | | | | |
| FY22: \$200,000 | FY23: \$200,000 | FY24: \$200,000 | | | | |
| <p>Project Description: The Special Needs Housing Grant (SNHG) provides operating and residential support service funds for permanent housing programs that provide safe and stable housing to Trust beneficiaries. Grantees applied for initial three-year funding and can receive additional funding as part of a non-competitive renewal process subject to funding levels and subsidy needed.</p> <p>Special Needs Housing Grants are usually awarded with construction awards and often in response to an identified subpopulation need, such as returning citizens or rural homelessness. Pairing federal building grants and state operating funds incentivizes supported housing development. SNHG funds reduce barriers to housing for high-need, low-income beneficiaries who can maintain independence with minimal support.</p> | | | | | | |
| <p>Summary of Grant Progress: The Special Needs Housing Grant (SNHG) combines Alaska Housing Finance Corporation (AHFC), GF/MH and Trust funds to serve youth 18-24, families, veterans, victims of domestic violence, and single adults. Eligible program participants must be Trust beneficiaries and qualify for supportive housing services. Special Needs Housing Grants are competitively awarded in conjunction with construction funding. Grantees who have previously received SNHG funds can apply for non-competitive renewal funding every three years, depending on funding availability. SNHG is identified as a Housing & Home and Community Based Services Focus Area project in the Trust budget and directly impacts Trust beneficiaries.</p> <p>SNHG grants provide primarily operating and supportive services for permanent supportive housing programs. For projects based on scattered site housing, funds are used for rental assistance and supportive services. Permanent supportive housing (PSH) is an intervention that serves the most vulnerable homeless individuals who have multiple co-occurring disorders, such as mental illness and addiction, complicated by housing barriers that may include corrections history, many years of homelessness, current substance use, evictions, or lack of income. People accessing PSH are chronically homeless and 100% Trust beneficiaries. This intervention offers low-barrier housing and optional support services. People who are homeless and have a mental illness or addiction, brain injury, developmental disability, or dementia often go without the services and medications they need to manage symptoms to remain stably housed. Permanent supportive housing is one of the few options available to beneficiaries with active untreated symptoms.</p> | | | | | | |
| Comp Plan Information | | | | | | |
| <table border="1"> <thead> <tr> <th>Goal</th> <th>Objective</th> </tr> </thead> <tbody> <tr> <td>Goal 3 Economic and Social Well-being</td> <td>3.1 Housing</td> </tr> </tbody> </table> | | | Goal | Objective | Goal 3 Economic and Social Well-being | 3.1 Housing |
| Goal | Objective | | | | | |
| Goal 3 Economic and Social Well-being | 3.1 Housing | | | | | |
| <p>Relevant Comp Plan Goals and Objectives: The Special Needs Housing Grant is connected to the Comprehensive Integrated Mental Health Plan through Goal 3, Objective 3.1; Alaskans have stable, safe housing with appropriate community-based social supports to maintain tenancy.</p> | | | | | | |
| <p>Performance Data: In SFY 2023, two SNHG projects were renewed through FY25. Partners for Progress received \$927,000 to serve returning citizens through transitional housing, supportive services, and permanent supportive housing. Nome Community Center received \$600,000 as a renewal of an SFY19 Special Purpose SNG award to develop rural permanent supportive housing. Nome’s progress since receiving the award has been impressive. In addition to supporting a full-time homeless coordinator and up to 10 permanent supportive housing (scattered site) units, Nome has successfully applied for GOAL funds to develop permanent supportive</p> | | | | | | |

housing in 2022. There are twelve SNHG awards that will be applied to renewal applications in the next twelve months.

Permanent supportive housing is a proven intervention that disrupts the hospital, corrections, and homelessness cycle to allow people to remain stably housed and have the opportunity to engage in supportive services to meet their goals. People who were housed through Phase 1 of the Forget-Me-Not PSH project in Juneau showed that after 6 months of being housed: emergency room visits decreased by 65%, sleep-off center usage decreased by 99%, and police contact decreased by 72%. This is significant for any population and incredibly impactful considering the median number of months homeless for this group was 180 months - approximately 15 years. Five years of data have been collected from the Phase 1 and Phase 2 projects through studies conducted by the University of Alaska Anchorage, School of Social Work. The "Forget Me Not Final Outcomes Report and Five-Year Data Summary". This study showed statistically significant decreases in police interaction and emergency room usage across projects and time frames. The number of days of drinking alcohol and binge drinking reduced after being housed and both self-reported physical and mental health and wellbeing improved. The outcomes support additional investment in this type of intervention.

Project Recommendations:

This project routinely receives more applications than there is funding available. This is a long-standing investment for the Trust. While the Trust does not typically provide ongoing funding for programs, the partnership with AHFC facilitates the Trust's ability to contribute to the work of many organizations efficiently and effectively to prevent beneficiary homelessness and fund additional units of PSH. This project is recommended for continued funding paired with AHFC and GF/MH resources.

| | | |
|---|---|------------------------|
| Project Title: Homeless Assistance Program - Capital | | |
| Grantee: Alaska Housing Finance Corporation | | |
| Fund: MHTAAR | | |
| Years Funded: 2 4 | Project Category: Direct Service | |
| FY22: \$950,000 | FY23: \$950,000 | FY24: \$950,000 |
| Project Description: The Homeless Assistance Program is one of AHFC's core funding programs. The Basic Homeless Assistance Program (BHAP) was established in 1993 and provides operating support and direct assistance funds for emergency shelter services, homelessness prevention, rapid re-housing efforts, and capital needs for these grantees. The Special Needs Housing Grant program is a long-time AHFC/DHSS (now DOH)/Trust housing program and services partnership to provide permanent supported housing to Trust beneficiaries. In 2007, AHFC restructured the Homeless Assistance Program and the Special Needs Housing Program to better serve hundreds of homeless and near-homeless families. These programs work on the continuum of care to assist families in obtaining or retaining safe and stable housing, and with nonprofit partners to create sustainably supported housing over time. Demand for this program has steadily increased. | | |
| Summary of Grant Progress: | | |
| AHFC, GF/MH, and Trust funds fund the Homeless Assistance Program (HAP). It is identified as a Housing & Home and Community Based Services Focus Area project in the Trust budget and has a system and direct level impact for Trust beneficiaries. Funds are awarded competitively to agencies that provide emergency or transitional housing and services to prevent homelessness or rapidly re-house those who have been displaced. The Homeless Assistance Program serves all populations, including youth under 18, youth 18-24, families, veterans, and single adults. | | |

Preventing homelessness, much like preventing injury or illness, not only provides better outcomes for individuals but is the most effective, efficient, and economical approach to addressing homelessness. The funds are used to prevent eviction, provide utility assistance, fix a car needed for employment, and meet other critical needs to ensure a person can continue their existing tenancy.

Rapid re-housing rapidly connects families and individuals experiencing homelessness to permanent housing through a tailored package of assistance that may include time-limited financial assistance and targeted supportive services. Rapid rehousing programs help families and individuals living on the streets or in emergency shelters solve the practical and immediate challenges to obtaining permanent housing while reducing the amount of time they experience homelessness, avoiding a near-term return to homelessness, and linking to community resources that enable them to achieve housing stability in the long-term.

AHFC opened the BHAP program for renewal in the spring of 2022. This program was limited to previous recipients of BHAP funds. AHFC awarded funding to 35 grantees in 20 communities. Services directly benefitting homeless or at-risk Alaskans received priority over community or state-level administrative programs. These organizations provide emergency shelter, re-entry assistance for persons released from corrections, transitional housing, short-term rental assistance, and services to prevent homelessness. COVID-19 response continues to affect the BHAP program. Many BHAP grantees also participate in other AHFC or state/locally-funded rental assistance programs funded through the American Rescue Plan Act or similar short-term federal programs. Through the layering of assistance, BHAP grantees are stretching programs to meet the increased needs in their community. Rental assistance and increased admin provide grantees with unique opportunities to expand their programs and develop internal administrative procedures and other resources to strengthen their organizations after the temporary funds are exhausted. The reverse is also true, grantees are stretching to do more and, as a result, are experiencing hiring shortages and other growing pains.

BHAP funds are a primary funding source for many emergency shelters around the state. As awards have remained flat or reduced, or the past few years, emergency shelter administrators are operating on shoestring budgets. AHFC provides technical assistance to grantees seeking additional funding resources to maintain and expand services in their communities.

Comp Plan Information

| Goal | Objective |
|---------------------------------------|-------------|
| Goal 3 Economic and Social Well-being | 3.1 Housing |

Relevant Comp Plan Goals and Objectives:

The Homeless Assistance Program is connected to the Comprehensive Integrated Mental Health Plan through Goal 3, Objective 3.1; Alaskans have stable, safe housing with appropriate community-based social supports to maintain tenancy.

Performance Data: AHFC opened the BHAP program for renewal in the spring of 2022. This program was limited to previous recipients of BHAP funds. AHFC awarded funding to 35 grantees in 20 communities.

AHFC is preparing the SFY 2024 Notice of Funding Opportunity process for BHAP grantees. We are looking at incorporating more opportunities for results-based accountability and ways of tracking community impact beyond the existing demographic and outcome tracking through the shared AKHMIS database.

The strain between the usefulness of demographic data and the need to respect a client’s right to privacy hampers efforts to learn more about the homeless population served in all programs. Gathering demographic data about Trust beneficiaries who are accessing emergency services appears to be incomplete. This is based on other data sets that imply a higher percentage of individuals accessing all housing interventions qualify as beneficiaries. BHAP grantees would benefit from additional training or other resources to assist them in maintaining accurate demographic data while continuing to prioritize the clients right to privacy. Detailed reports on beneficiaries served in FY23 will be available after the data is collected from grantees at the close of the fiscal year.

Project Recommendations: This project has demonstrated positive outcomes and received more applications than available funding. This is a long-standing investment for the Trust. While the Trust does not typically provide ongoing funding for programs, the partnership with AHFC facilitates the Trust's ability to contribute to the work of many organizations efficiently and effectively across the state to prevent beneficiary homelessness. This project is recommended for continued funding paired with AHFC and GF/MH resources.

Project Title: Supportive Housing Projects

FY23 Grantees (through 4/26/2023):

- Bethel Community Services – Bethel Permanent Supportive Housing Project, \$375,000
- Nome Community Center – Nome’s Housing First Project: HomePlate, LLC, \$375,000

Fund: MHTAAR

Years Funded: 3

Project Category: To be determined based on individual project type

FY22: \$750,000

FY23: \$750,000

FY24: \$750,000

Project Description: The Supportive Housing Project “bucket” is identified as a Housing & Home and Community Based Services Focus Area project in the Trust budget and directly impacts Trust beneficiaries. The purpose of identifying these funds in a line item for supportive housing projects without named grantees is to ensure there is funding for future supportive housing projects that have notoriously difficult pre-development and construction timelines to estimate far in the future when Trust budgets are approved initially. The Trust is a partner funder in these projects, and to date, this budget line item has been used for capital projects to construct new units. Permanent supportive housing is a critical option for Trust beneficiaries and a key strategy for this focus area.

Permanent supportive housing is an evidence-based intervention that disrupts the hospital, corrections, and homelessness cycle to assist people to remain stably housed and engage in supportive services to meet their goals. A similar project in Juneau showed that after six months of being housed, resident emergency room visits decreased by 65%, sleep-off center usage decreased by 99%, and police contacts 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 incredibly impactful, considering the median number of months of homeless for this group was 180 months - approximately 15 years. Two communities, Nome and Bethel, were ready to build permanent supportive housing projects in their communities simultaneously. The Trust funded each project at the \$375,000 level as one of many partner funders supporting each project.

Nome Community Center (NCC) will coordinate the construction and operation of a new building with 16 units of permanent supportive housing for Nome's Housing First Project: HomePlate. NCC and community providers will

provide wrap-around individualized supportive services for Nome's most vulnerable, chronically homeless individuals. Fifteen units will be studios specifically built to house this population, made up entirely of Trust beneficiaries, with one unit as housing for an on-site apartment manager with social services expertise. This is the first permanent supportive housing project in Nome and will fill a significant gap in the continuum of care. As the name suggests, the project will use the Housing First model, using housing as the first and best intervention toward health, well-being, and recovery. This project results from a decade of advocacy, community education, and cross-sector regional partnerships.

Bethel Community Services Foundation will construct a 20-unit Permanent Supportive Housing apartment complex in Bethel on the Bethel Winter House site. The units will serve an identified population of vulnerable individuals eligible for permanent supportive housing - people experiencing chronic homelessness, including at least one disabling condition. All of the future residents of the project are Trust beneficiaries. Bethel Community Services Foundation will manage the construction process, and Bethel Winter House will serve as the owner/operator once construction is complete. This will be the first permanent supportive housing project in Bethel using the Housing First model as the first and best intervention toward health, well-being, and recovery. Community-wide partnerships are in place to support operations and meet the service needs of residents. Bethel also connects the overnight shelter to the permanent supportive housing common area to reduce operating costs. This configuration is new for Alaska and is a promising practice to follow and evaluate for future replication in other communities.

Bethel Community Services – Bethel Permanent Supportive Housing Project: Summary of Grant Progress:

Bethel Community Services – Bethel Permanent Supportive Housing Project has completed the site’s development, placed pilings, and started building construction in May 2023. Construction is expected to be completed by the end of the calendar year.

Bethel Community Services – Bethel Permanent Supportive Housing Project: Comp Plan Information

| Goal | Objective |
|---------------------------------------|-------------|
| Goal 3 Economic and Social Well-being | 3.1 Housing |

Bethel Community Services – Bethel Permanent Supportive Housing Project: Relevant Comp Plan Goals and Objectives: The Bethel Community Services – Bethel Permanent Supportive Housing Project aligns with the Comp Plan Objective 3.1, Alaskans have stable, safe housing with appropriate community-based social supports to maintain tenancy.

Bethel Community Services – Bethel Permanent Supportive Housing Project: Performance Data: The pilings have been placed, and building construction began in May 2023.

Bethel Community Services – Bethel Permanent Supportive Housing Project: Project Recommendations:

Additional funding is not anticipated at this time.

Nome Community Center – Nome’s Housing First Project: HomePlate, LLC: Summary of Grant Progress:

The Nome Community Center – Nome’s Housing First Project: HomePlate has completed the site’s development, placed pilings, and started building construction in late May 2023. Construction is expected to be completed by the end of the calendar year.

| | | |
|---|---------------------------------------|-------------|
| Nome Community Center – Nome’s Housing First Project: HomePlate, LLC: Comp Plan Information | | |
| | Goal | Objective |
| | Goal 3 Economic and Social Well-being | 3.1 Housing |
| Nome Community Center – Nome’s Housing First Project: HomePlate, LLC: Relevant Comp Plan Goals and Objectives: The Nome Community Center – Nome’s Housing First Project: HomePlate aligns with the Comp Plan Objective 3.1, Alaskans have stable, safe housing with appropriate community-based social supports to maintain tenancy. | | |
| Nome Community Center – Nome’s Housing First Project: HomePlate, LLC: Performance Data: The pilings have been placed, and construction began in May 2023. Construction is expected to be completed by the end of the calendar year. | | |
| Nome Community Center – Nome’s Housing First Project: HomePlate, LLC: Project Recommendations: Additional funding is not anticipated at this time. | | |

| | | |
|--|--|------------------------|
| Project Title: Services and Supports Identified as Priorities in TABI and ADRD State Plans | | |
| FY23 Grantees (through 4/26/2023): | | |
| <ul style="list-style-type: none"> Alzheimer’s Resource of Alaska – Executive Search Support, \$30,000 Hospice and Palliative Care of Kodiak – Dignity for Kodiak, \$28,000 Southcentral Foundation – Traumatic and Acquired Brain Injury (TABI) Early Identification Services Planning, Design, and Capacity Building, \$100,000 Concussion Legacy Foundation - Patient Services Project Alaska Expansion, \$100,000 | | |
| Fund: Authority Grant | | |
| Years Funded: 3 | Project Category: To be determined based on individual project type | |
| FY22: \$420,000 | FY23: \$450,000 | FY24: \$500,000 |
| 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 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 service providers grappling with how to expand services to meet the increasing demand for ADRD and TABI services. The project is identified as a Housing & Home and Community Based Services Focus Area project in the Trust budget and directly impacts Trust beneficiaries. | | |

Alzheimer’s Resource of Alaska (ARA) – Executive Search Support Summary of Grant Progress: ARA operated without a qualified, full-time CFO in-house for many months. The traditional hiring platforms normally used produced no results. Using The Moran Group resulted in a successful hire after two rounds of advertising and posting. Due to staff limitations, the time, energy, and diligence that the recruiters brought

to the effort could not have been replicated in-house. Every beneficiary served through ARA will ultimately be better off with continued operations. ARA is one of the largest agencies serving Trust beneficiaries with ADRD and one of the few specializing in services for people with ADRD in Alaska. It is critical that they remain financially sound so that beneficiaries receive continued access to services and supports tailored for them.

Alzheimer’s Resource of Alaska – Executive Search Support Comp Plan Information

| Goal | Objective |
|-----------------------------------|------------------------|
| Goal 9 Workforce, Data, & Funding | 9.1 Workforce capacity |

Alzheimer’s Resource of Alaska – Executive Search Support Relevant Comp Plan Goals and Objectives:
 The Alzheimer’s Resource of Alaska – Executive Search Support Project aligns with the Comp Plan Goal 9, Objective 9.1: Strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization.

Alzheimer’s Resource of Alaska – Executive Search Support Performance Data: A Chief Financial Officer was recruited and hired for ARA.

Alzheimer’s Resource of Alaska – Executive Search Support Project Recommendations:

This project is not expected to recur as this was a one-time request.

Hospice and Palliative Care of Kodiak – Dignity for Kodiak Summary of Grant Progress: Hospice and Palliative Care of Kodiak (HPCK) is focused on addressing the needs of those with Alzheimer’s disease and related dementia (ADRD) by implementing a new project titled Dignity for Kodiak. Care is provided free of cost, delivered by a team of compassionate and highly skilled volunteers and two full-time staff members. HPCK has seen a rise in clients with ADRD and needs to implement a training program on this topic. Additional support and services are necessary for families and individuals experiencing dementia throughout Kodiak Island Borough, including Kodiak’s six rural villages.

This project proposes to better meet the needs of Trust beneficiaries with ADRD and their caregivers through a three-pronged approach. Dignity for Kodiak will provide ongoing training opportunities for volunteers and community members, resources and tools for clients and families, including a lending library, and support and compassion for caregivers. Trust beneficiaries throughout the Kodiak Island Borough will feel fulfilled and have a higher quality of life through the Dignity for Kodiak project. Regular physical and mental stimulation can slow down the progression of dementia symptoms. Through well-trained volunteers and specialized tools, Trust beneficiaries will find meaning and connection regardless of where they are at in their diagnosis.

Hospice and Palliative Care of Kodiak – Dignity for Kodiak Comp Plan Information

| Goal | Objective |
|--|-----------------------------------|
| Goal 7 Services in the Least Restrictive Environment | 7.2 Long-term services & supports |

Hospice and Palliative Care of Kodiak – Dignity for Kodiak Relevant Comp Plan Goals and Objectives:
 The Dignity of Kodiak project aligns with the Comp Plan Goal 7, 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.

Hospice and Palliative Care of Kodiak – Dignity for Kodiak Performance Data: This project was approved in the final quarter of FY23, and data is expected in FY24.

Hospice and Palliative Care of Kodiak – Dignity for Kodiak Project Recommendations: The project plans to sustain the project with local funding requests in the future. A future request could be considered based on the performance of the project.

Southcentral Foundation – Traumatic and Acquired Brain Injury (TABI) Early Identification Services

Planning, Design, and Capacity Building Summary of Grant Progress: The purpose of the Traumatic and Acquired Brain Injury (TABI) Early Identification Services Planning, Design, and Capacity Building project is to ensure that individuals with TABI are screened, assessed, and diagnosed in Southcentral Foundation (SCF) outpatient settings so intervention and supportive services can be provided early to maximize the quality of life. A gap analysis was completed on early identification and intervention services, exploring best practices, and designing a pilot project for implementation.

In January, an affinity exercise was completed by critical stakeholders throughout Southcentral Foundation’s healthcare system. In March, Dr. Dan Hartman, Jomarie Gleason, and Katie Jacques completed a community affinity exercise, “Where We Are, Where We Want to be...Brain Injury in Alaska,” for the University of Alaska Anchorage annual Full Lives Conference. Lastly, an affinity exercise will be performed with the Brain Injury Council of Alaska, formerly the Traumatic and Acquired Brain Injury Advisory Council. Information collected during the affinity exercises was utilized to create the gap analysis buckets of data, community collaboration, rural community access, customer-owner accessibility, environmental and operational, staffing, training, customer-owner, family education, and service delivery system. It also helped to brainstorm the aim: “Improving care coordination for Alaska Native families affected by traumatic and acquired brain injury through building service pathways, education, and training by June 2024.”

Kelly Jensen, Scott Mitchell, and Katie Jacques visited the Marcus Institute for Brain Health and Colorado Children’s in February. In March, Jessica Davis, Kelly Jensen, Dan Mansberger, and Sarah Lyrata visited Boston Children’s and Spaulding. They gathered information on screening and identification, diagnoses and treatment, programmatic team design and structure, awareness and education, and resources and care coordination. There is now a national partnership between established TABI programs and Southcentral Foundation.

Certified Brain Injury Specialist (CBIS) is a credential for individuals who assist persons with brain injury in restoring, maintaining, and promoting optimal health. It is a nationally recognized and respected credential and shows that the clinician has a vested interest in the field of acquired brain injury. Several SCF providers have been studying information to be the first cohort to become CBIS providers successfully. That group includes Dr. Anne White, Dan Mansberger, Scott Mitchell, Meera Davenport, Sarah Lyrata, Christian Pankhurst, Toni Taylor, and Tom Robinson. The aim is to have the CBIS trainers establish a Train the Trainer program within SCF. This structure will be explored to carry over for the community by the BICA group.

The Traumatic Brain Injury course for Community Health Aides is available online on the Distance Learning

webpage. The training provides instruction and interactive exercises on:

- How people acquire TBIs in Alaska, and how often,
- What population groups acquire the most TBIs,
- What CHAs can do to help prevent TBIs,
- How to determine if a patient has a new or pre-existing TBI, and
- What steps a CHA can take to provide care for a patient with a TBI.

The course has a quiz and assessment at the end. CHAs who pass the examination and complete the assessment receive two medical hour credits.

The activities of the planning grant led to designing a program in SCF to screen, assess, diagnose, and treat people with brain injuries in the SCF health system.

Southcentral Foundation – Traumatic and Acquired Brain Injury (TABI) Early Identification Services Planning, Design, and Capacity Building Comp Plan Information

| Goal | Objective |
|-------------------|---|
| Goal 2 Healthcare | 2.1 Access & receive quality healthcare |

Southcentral Foundation – Traumatic and Acquired Brain Injury (TABI) Early Identification Services Planning, Design, and Capacity Building Relevant Comp Plan Goals and Objectives: The Traumatic and Acquired Brain Injury (TABI) Early Identification Services Planning, Design, and Capacity Building project aligns with the Comp Plan Goal 2, Objective 2.1: Alaskans have access to and receive quality healthcare services.

Southcentral Foundation – Traumatic and Acquired Brain Injury (TABI) Early Identification Services Planning, Design, and Capacity Building Performance Data: The activities of the planning grant were completed, including site visits and program reviews of best practices implemented in other states, conference attendance, training program implementation, and program design. 20 Community Health Aides have completed the TBI training to date.

Southcentral Foundation – Traumatic and Acquired Brain Injury (TABI) Early Identification Services Planning, Design, and Capacity Building Project Recommendations: This planning grant request is not expected to recur. The activities of the planning grant led to designing a program in SCF to screen, assess, diagnose, and treat people with brain injuries in the SCF health system.

The Trust approved the related Traumatic and Acquired Brain Injury (TABI) Early Identification and Intervention Services Planning, Design, and Capacity Building grant for FY24 to SCF for \$500,000. This project will create and implement processes for early identification and intervention services for TABI that require system-level changes to provide direct services to beneficiaries using the SCF health service. There are three identified phases: 1) Adults empaneled to SCF clinics residing in the Municipality of Anchorage and the Matanuska-Susitna Borough; 2) Adults empaneled to SCF’s rural Community Health Centers; 3) Children empaneled to Alaska’s Tribal Healthcare System. The intent is to ensure that individuals with TABIs are identified and provided supportive services at the earliest point in time possible to maximize their quality of life.

Concussion Legacy Foundation (CLF) - Patient Services Project Alaska Expansion Summary of Grant Progress: Concussion Legacy Foundation (CLF) - Patient Services Project Alaska Expansion brought the services offered by CLF to Alaska, focusing on professional training, outreach, and support. CLF offered continuing medical education (CME) and provided agendas, syllabi, live presentations, and evaluations to educate 135 physicians, nurses, and allied health professionals. CLF will produce concise summaries for ongoing reference. Summaries will be distributed to previous and new participants for upcoming, pre-funded CME courses. CLF engaged statewide organizations that support CME promotion, including the Alaska State Medical Association, Alaska Hospital & Healthcare Association, and Alaska Native Tribal Health Consortium. A CLF helpline was extended to Alaskans, and two commercials and a resource brochure raising brain injury awareness were produced.

The Concussion Legacy Foundation (CLF) Patient Services Project Alaska Expansion will build upon CLF's previous work and leverage matching funding to provide Trust beneficiaries with best-in-class resources. The project expansion will improve ongoing CME content, develop targeted guidebooks for caregivers of beneficiaries with a TBI, and create intimate partner violence (IPV) induced brain trauma content in collaboration with subject matter experts. CLF will distribute these resources via digital advertising, direct email marketing, and print materials. CLF will also prioritize promoting these resources via ConcussionFoundation.org/Alaska and CLFHelpLineAK.org website hubs and subsidiary pages. This project was approved in the final quarter of FY23, and data is expected in FY24.

Southcentral Foundation – Traumatic and Acquired Brain Injury (TABI) Early Identification Services Planning, Design, and Capacity Building Comp Plan Information

| Goal | Objective |
|-------------------|---|
| Goal 2 Healthcare | 2.1 Access & receive quality healthcare |

Concussion Legacy Foundation - Patient Services Project Alaska Expansion Relevant Comp Plan Goals and Objectives: The Concussion Legacy Foundation (CLF) - Patient Services Project Alaska Expansion project aligns with the Comp Plan Goal 2, Objective 2.1: Alaskans have access to and receive quality healthcare services.

Concussion Legacy Foundation - Patient Services Project Alaska Expansion Performance Data:

The Concussion Legacy Foundation (CLF) - Patient Services Project Alaska Expansion project was approved in the final quarter of FY23, and data is expected in FY24.

Past performance has been positive, with the grantee completing or exceeding deliverables. In FY22, CMEs were provided, and attendees voiced the need for content summary booklets to support learning outcomes. Participants rated CME quality 4.5 of 5 and requested session summaries for long-term clinical application. A CLF helpline was extended to Alaskans, and two commercials and a resource brochure raising brain injury awareness were produced.

Concussion Legacy Foundation - Patient Services Project Alaska Expansion Project Recommendations:

This is the second year of funding to the Concussion Legacy Foundation to expand brain injury training and services in Alaska. This project is not expected to recur; however, another proposal could be considered based on project performance and community need.

| Project Title: Rural Home and Community-Based Services (HCBS) Coordinator | | | | | | |
|--|---|-----------------------|-----------|--|-----------------------------------|--|
| Grantee: DOH, Division of Senior and Disabilities Services (SDS) | | | | | | |
| Fund: MHTAAR | | | | | | |
| Years Funded: 4 | Project Category: Capacity Building | | | | | |
| FY22: \$82,000 | FY23: \$81,000 | FY24: \$81,000 | | | | |
| <p>Project Description: The Rural Home and Community Based Services (HCBS) Coordinator is engaging in a comprehensive and coordinated approach to long-term care development for seniors that address the serious infrastructure gaps in Alaska's smaller communities and rural villages. The goal is to assist with developing sufficient home and community-based services, so Trust beneficiaries can stay in their community when they have extensive care needs that their families cannot provide. The incumbent in this position will provide outreach, education, and intensive community-based technical assistance to meet the needs of people with Alzheimer's disease and related dementias and other related cognitive disabling conditions, as well as with elders with co-occurring behavioral health conditions and addictions. This position supports the Alaska Commission on Aging (ACoA) and be supervised by the SDS Grants Unit. ACoA will coordinate with SDS as appropriate.</p> | | | | | | |
| <p>Summary of Grant Progress: Senior and Disabilities Services and Trust funds fund the Rural Home and Community Based Services (HCBS) Coordinator position. This position is expected to impact the system of care and will also address questions from providers and occasionally Trust beneficiaries. This position has had challenges with vacancy and covering duties of other vacant positions within ACoA during this project period and could not meet its objectives. A new coordinator was hired in October of 2022.</p> <p>Since October, the coordinator has actively engaged with individuals and organizations to understand their needs and challenges better. The coordinator organized listening sessions in Kodiak and an outreach visit in Nome, which both successfully gathered feedback and input from community members. Additionally, while gathering information about rural communities, the coordinator has been working on producing educational materials to help raise awareness and provide resources for those in rural communities. ACoA is a small office, and in December 2022, the Planner resigned, leaving the Rural HCBS Coordinator to assist with some of those duties while the position was vacant for the remainder of the fiscal year.</p> <p>The Rural Home and Community Based Services Coordinator project is identified in the Trust budget under the focus area of Housing & Home and Community Based Services. It works to help communities provide the services and supports Trust beneficiaries need to remain independent in their homes and communities.</p> | | | | | | |
| Comp Plan Information | | | | | | |
| | <table border="1"> <thead> <tr> <th>Goal</th> <th>Objective</th> </tr> </thead> <tbody> <tr> <td>Goal 7 Services in the Least Restrictive Environment</td> <td>7.2 Long-term services & supports</td> </tr> </tbody> </table> | Goal | Objective | Goal 7 Services in the Least Restrictive Environment | 7.2 Long-term services & supports | |
| Goal | Objective | | | | | |
| Goal 7 Services in the Least Restrictive Environment | 7.2 Long-term services & supports | | | | | |
| <p>Relevant Comp Plan Goals and Objectives: This position is connected to the Comprehensive Integrated Mental Health Plan through Goal 7, Objective 7.2, Increase access to adequate and flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement.</p> | | | | | | |
| <p>Performance Data: At the time of this report, the FY23 narrative was not available. The coordinator was able to conduct outreach with two communities to date. Due to the frequent vacancy in this position over multiple years, the project's impact cannot be evaluated.</p> | | | | | | |

Project Recommendations:

This project is recommended for discontinuation of Trust funding at the end of FY25. Consistent, reliable staffing is critical to the success of a position of this nature to provide quality technical assistance. Despite trying different units and agencies to manage the position, a coordinator has not yet stayed in the position for a year or was covering the duties of other vacancies. This has resulted in inconsistent performance in completing the grant activities over multiple fiscal years. If the position can be consistently staffed and complete the grant activities in FY24 and FY25, there may be enough data to transition the total funding of the position to the Department beyond FY25.

Project Title: Care Coordination Support**Grantee:** DOH, Division of Senior and Disabilities Services**Fund:** MHTAAR**Years Funded:** 3**Project Category:** Capacity Building**FY22:** \$55,300**FY23:** \$55,300**FY24:** \$55,300

Project Description: Senior and Disabilities Services (SDS) needs 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 the 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 care coordinators.
- 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 for recruitment efforts.
- Care coordinators must now use the Harmony database to upload content for support plans and amendments. However, despite SDS providing months of robust outreach and training opportunities, care coordinators still have not completed the necessary training to navigate the Harmony system successfully. A dedicated position will assist the SDS Training Unit in matching identified training needs with resources and work to alleviate the 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 to explain the data components 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, develop a career ladder, and help create a rate increase proposal 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 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 program closures for

recipients. A dedicated position can 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 created by implementing the Division of Behavioral Health’s Section 1115 Behavioral Health waiver. Care coordinators’ questions include: Should care coordinators play a role in facilitating the 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 clients’ success and the 1115 waiver program.

Summary of Grant Progress: The Care Coordination Support project funds a position at Senior and Disabilities Services (SDS) to support care coordinators in the home and community-based services (HCBS) system. Trust funds will support part of the cost of a Long-Term Non-Permanent Health Program Manager 2 position to serve as a Care Coordinator Liaison, with SDS providing the remaining funds. This position is necessary due to the declining number of care coordinators in the HCBS system and the Medicaid waiver program structure requiring a care coordinator for a beneficiary to access services. It is identified as a Housing & Home and Community Based Services Focus Area project in the Trust budget. It has both a system and direct level impact for Trust beneficiaries. This project also furthers the goals of the Workforce Priority Initiative.

The Care Coordinator Liaison has been touted as a resounding success by both SDS and care coordinators for improved communication between the entities and resolution of problems encountered by care coordinators during their day-to-day work. The Care Coordinator Liaison plans and facilitates monthly “Info Share” meetings for Care Coordinators. The position organizes the topics to include updates and training and to have SDS managers come and provide helpful information to the audience. In the past quarter, the position has developed resource guides on Environmental Modifications and the Public Assistance process when Medicaid is denied. A resource guide on Assistive Technology is currently in development. This position worked with Division Leadership to clarify the use and acceptance of electronic signatures and distributed a director’s memo. Additionally, care coordinators and SDS have utilized the position to track and flag problems encountered by multiple care coordinators as system issues that require internal analysis for resolution, improving efficiency.

Comp Plan Information

| Goal | Objective |
|--|-----------------------------------|
| Goal 7 Services in the Least Restrictive Environment | 7.2 Long-term services & supports |

Relevant Comp Plan Goals and Objectives: The Care Coordinator Liaison project aligns with the Comp Plan Goal 7, Objective 7.2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement.

Performance Data: Between January and November 2022, the number of care coordinators has grown by 10.

This project will impact a substantial number of Trust beneficiaries currently receiving services and improve the system of care for beneficiaries receiving Medicaid waiver services in the future. The Intellectual and Developmental Disabilities waiver serves approximately 2,100 people. The Individualized Supports Waiver serves 620 people per year. The Alaskans with Physical and Developmental Disabilities waiver serves about

150 people. All three of these waivers have 100% usage by Trust beneficiaries who have an Intellectual or Developmental Disability. The other two waivers, the Alaskans Living Independently (serving approximately 3,050 people) and Children with Complex Medical Conditions (serving about 360 children), have eligibility criteria based on the nursing facility level of care or medical conditions. While these waivers do not primarily serve Trust beneficiaries, some recipients of these two waivers have secondary conditions that span all Trust beneficiary categories. Waiver recipients often have multiple secondary conditions and may not need to identify on their application a situation that would place them in a Trust beneficiary category, making tracking the number of Trust beneficiaries served through these waivers difficult. A total of approximately 2,870 Trust beneficiaries with Intellectual and Developmental Disabilities will be served through this project as well as the Trust beneficiaries who are eligible for the other waivers. Every person receiving a Medicaid HCBS waiver is required to use a care coordinator to access services. Without adequate care coordination services, beneficiaries will experience long wait times to obtain waiver services.

Project Recommendations: The Care Coordination Support project is recommended for continued funding through FY25. The project has been able to complete identified activities to date, despite it being its first year of full staffing. More time is needed to gather the data required to evaluate whether the position is suitable for longer-term total funding through the Department. Should the project not be able to implement its intended goals, other funding sources are available, or it is no longer needed, continued funding should be reevaluated.

Project Title: Aging and Disability Resource Centers

Grantee: DOH, Division of Senior and Disabilities Services

Fund: MHTAAR

Years Funded: 16

Project Category: Direct Service

FY22: \$300,000

FY23: \$300,000

FY24: \$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 accessing services that support them in the community. Integrating information about the home and community-based 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 focus on streamlining the entrance into all programs administered by Senior and Disabilities Services, in addition to targeted efforts to reach ADRC users who can 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 a crisis intervention. Options counseling and decision support is an interactive service that includes information, referral, and education but also emphasizes building a relationship with the user and developing a plan that allows for choice. ADRC users should be informed of all their services options to choose what services best meet their needs. ADRCs 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 Alaska's home and community-based service delivery system 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 crucial for reporting our state's unmet needs for long-term care resources.

Summary of Grant Progress: 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. ADRCs are a good investment in the health and well-being of Trust beneficiaries. The ADRCs give Trust beneficiaries of any category critical information to plan and apply for long-term services and supports. This service system is exceptionally complex and has multiple steps to obtain needed services successfully. The integration of information regarding long-term services and supports 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 focus on assisting with streamlining the entrance into long-term services and supports and reach ADRC users who can privately pay for services. The project is identified as a Housing & Home and Community Based Services Focus Area project in the Trust budget and directly impacts Trust beneficiaries. This project is funded by the Trust, GF/MH, and Medicaid Administrative Claiming. The ADRCs continued to obtain a high Medicaid Administrative Claiming rate, improving progress toward sustainability.

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 a 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 to choose what services best meet their needs. ADRCs also follow up with individuals to ensure they access services and, if not, what follow-up is needed. The ADRC standardization project continues to progress in completing a systems-wide assessment of ADRC operations, programming, and areas of need and improvement. While the system assessment and stakeholder input processes were time-intensive, SDS has made significant progress on major milestones this fiscal year. First, the revised Person-Centered Intake (PCI) form was approved by the ADRC working group and was implemented in August 2022. This modified form was accompanied by a change in the workflow and documentation process for how ADRC and DDRC programs document contacts by the public. This emerging data will allow SDS to better track and report on the number of total contacts by agency and what topics the ADRCs are being contacted about. This data will help SDS demonstrate the full scope of work being conducted by ADRCs, identify strengths and areas of need by geographic region and content area, provide insight into training and partnership development areas, and better manage agency performance.

A second major deliverable that is nearing completion in FY23 is the finalization of the ADRC Program Manuals. These guides are working documents that outline program purpose, expectations, and standard operating procedures. SDS staff will make minor adjustments to the draft guides and then distribute them to agency partners. These guides will need to be updated in the near future with new workflow guidance and screenshots, as SDS is transitioning the ADRCs to a new database system in the next several months.

Comp Plan Information

| Goal | Objective |
|--|-----------------------------------|
| Goal 7 Services in the Least Restrictive Environment | 7.2 Long-term services & supports |

Relevant Comp Plan Goals and Objectives: The Aging and Disability Resource Center Project is connected to the Comprehensive Integrated Mental Health Plan through Goal 7, Objective 7.2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement.

Performance Data: Through December 31, 2022, the ADRCs have served 4,403 unique individuals. This represents approximately a two-fold increase from data tracking in prior reporting periods due to implementing more robust data collection practices. The workflow and data collection changes were implemented in August 2022, and programs are adjusting to the new procedures. SDS believes that increased recorded contacts will be seen when programs and staff implement the new processes.

Project Recommendations: The Aging and Disability Resource Centers project has been a long-time investment for the Trust and is recommended for continued funding paired with GF/MH recommendations. The state continues to aim to expand this service to other regions and implement the service components necessary to become fully functioning ADRCs. Should the project obtain additional sustainable funding or not meet its intended goals, continued funding should be reevaluated.

Project Title: Develop Targeted Outcome Data

Grantee: DOH, Division of Senior and Disabilities Services

Fund: MHTAAR

Years Funded: 7

Project Category: Data/Planning

FY22: \$80,000

FY23: \$80,000

FY24: \$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 significant effort among states to standardize the collection of performance and outcome measures for home and community-based services (HCBS) on a system level. Standard data collection allows states to compare and share results 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 the community, human security, relationships, choices, and goals. This information is critical as Alaska undergoes significant systems transformation, and for others as there has been an increasing effort by the federal partners to make advances in measuring outcomes for HCBS services.

Summary of Grant Progress:

The Develop Targeted Outcome Data project provides funding for obtaining data on home and community-based services outcomes. These funds will be used to advance the state’s implementation and use of the National Core Indicators and other best practices that can be used at the community level. The National Core Indicators represent a significant 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 providers’ data for establishing national benchmarks and report more meaningfully than just the number served and dollars spent.

This project period analyzed in-person surveys conducted in 2020/2021, and three surveys issued in FY22:

- Child Family Survey (questions answered by family members with a waiver recipient 18 or younger living in their home): Total eligible population – 667, the target sample size – 152. Total surveys completed – 193 (27.7%).
- Adult Family Survey (questions answered by family members with an adult waiver recipient living in their home): Total eligible population - 855, the target sample size - 160. Total surveys completed - 216

(24.4%).

- Staff Stability Survey: Total eligible population – 154, the target sample size – 111. Total surveys completed – 112 (72.7%).

Presentations were held to review and discuss the information with stakeholders. Additional presentations are planned through the calendar year of 2023.

Comp Plan Information

| Goal | Objective |
|-----------------------------------|---------------------------------|
| Goal 9 Workforce, Data, & Funding | 9.5 Data-driven decision making |

Relevant Comp Plan Goals and Objectives: The Develop Targeted Outcome Data project is connected to the Comprehensive Integrated Mental Health Plan through Goal 9, Objective 9.5: Encourage a data-driven decision-making culture that includes data sharing, data analysis, and management to link support services across Alaska DOH divisions and other departments.

Performance Data: SDS has met monthly with critical partners at the University of Alaska Center for Human Development (UAA/CHD), who conducted the Adult and Child Family Surveys for NCI surveys, to discuss and implement a data dissemination plan. The data obtained from the In-Person Family Survey was presented at the SDS managers’ meeting on 9/1/2022. Managers found the information insightful and interesting and were excited to be a part of the next steps in understanding and utilizing this data to help improve the services provided to recipients. UAA/CHD provided data and information learned from the In-Person Survey at an all-staff meeting for SDS staff on 12/9/2022.

The workgroup also identified the importance of presenting the data and information learned to participants of the In-Person survey to give feedback on the overall findings, include them in the process, and encourage participation in future surveys. The thought is that if they were provided the results, the information would be helpful to both recipients and their families. The team felt it was important to recognize their contribution to the survey by presenting the results to those who participated. The information was disseminated to both individuals and families through a Family ECHO session in collaboration with UAA/CHD held on 2/22/2023.

An additional presentation was given to the Alaska Association on Developmental Disabilities (AADD) in May to discuss the results from two workforce surveys comparing the data to national benchmarks.

Project Recommendations:

The Develop Targeted Outcome Data project is recommended for continued funding in FY25. This project has demonstrated positive outcomes in its workforce survey and has shown substantial progress in executing the consumer survey through a distance-delivered format. This suite of survey tools is the first data collected and analyzed that can be reliably compared to other states and national averages at the outcome level for HCBS. This project has a multi-year cycle, with the first comparative study results available in 2022. Further discussions are necessary to identify if the funding will become part of the base allocation in FY26 or if additional support is needed to support outcome-level program evaluation for the HCBS waiver programs.

Workforce Development Priority Area

| | | |
|--|---|------------------------|
| Project Title: The Alaska Training Cooperative | | |
| Grantee: UAA-Center for Human Development | | |
| Fund: MHTAAR | | |
| Years Funded: 18 | Project Category: Workforce Development/Training | |
| FY22: \$885,600 | FY23: \$885,600 | FY24: \$835,000 |
| <p>Project Description: The Alaska Training Cooperative (AKTC) is responsible for providing non-academic training, 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 needs, understanding rural perspectives and cultural attunement, and training delivery and accessibility. The AKTC provides evidence-based, culturally attuned training through state-of-the-art delivery models to remote, rural, and urban areas of Alaska.</p> | | |
| <p>Summary of Grant Progress: The AKTC is the lead training entity for Trust beneficiary serving agencies, which is reflected in the breadth and depth of the training courses offered on a statewide level. The AKTC provided 129 training classes to almost 6000 provider staff, of which almost 4000 were unduplicated. Over 500 agencies benefited from this training support in evidenced-based or evidenced-informed best practice training. Every training opportunity offered by the AKTC is followed up with satisfaction surveys, which collect data on training satisfaction, self-rating of the participant’s level of knowledge on a learning objective before and after the training, and the level of motivation to implement skill or knowledge gained from training. From these surveys, 95% of the participants were satisfied or highly satisfied with the training content and delivery. 5% were somewhat satisfied or not satisfied. Most staff from the social service field are satisfied with the work of the AKTC, which results in a better-trained and equipped workforce.</p> <p>In FY22, the AKTC provided training for over 3,800 unduplicated adult workers. This is in the same range of training staff over the last five years. Over 60% of the participants filled out evaluations regarding the training, and 95% of them were either highly satisfied or satisfied with the AKTC’s courses. As measured through this instrument, the likelihood for change indicated a solid motivation to use what was learned in training when providing services to Trust beneficiaries or others. The average score on a scale of 0-5 (with 0= no chance to 5= definitely) was 4.29, indicating the willingness to utilize the learned knowledge and skill in a community-based setting. This data points to a workforce utilizing the learned skills which help Trust beneficiaries’ lives be better off.</p> | | |
| Comp Plan Information | | |
| | Goal | Objective |
| | Goal 9 Workforce, Data, & Funding | 9.1 Workforce capacity |
| <p>Relevant Comp Plan Goals and Objectives: The AKTC meets the needs of Comp Plan Goal 9 by strengthening workforce capacity through the dissemination of evidence-based training and support. The AKTC works with state partners like the Division of Behavioral Health, who identify a need for training and leverage the resources of the Training Cooperative to</p> | | |

get the skills and education out to the community agency staff. CAMS, or Collaborative Assessment and Management of Suicide, is an example of this process. CAMS is a nationally recognized best practice treatment model for working with a beneficiary experiencing some level of suicidality. Utilizing the ability of the AKTC to get this training out to community members has resulted in hundreds of behavioral health staff statewide receiving this training and the needed follow-up support to ensure the fidelity of the model is being practiced.

Performance Data: In FY22, the AKTC trained over 3,800 unduplicated adult workers. This is in the same range of training staff over the last five years. Over 60% of the participants filled out evaluations regarding the training and 95% of them were either highly satisfied or satisfied with the AKTC's courses. As measured through this instrument, the likelihood for change indicated a solid motivation to use what was learned in training when providing services to Trust beneficiaries or others. The average score on a scale of 0-5 (with 0= no chance to 5= definitely) was 4.29, indicating the willingness to utilize the learned knowledge and skill in a community-based setting.

Project Recommendations: The AKTC has averaged 100-200 training courses, and 5000 training seats over the previous five years. This is significant since the worldwide pandemic and the current inflationary economic state have dramatically impacted our agency partners. The AKTC has taken on a Direct Support Professional (DSP) training pilot project in partnership with the Division of Senior and Disability Services. This project is mid-way through a two-year pilot with 128 DSPs across 15 agencies. The pilot is focused on DSP certification through the National Alliance for Direct Support Professionals (NADSP), which is a national accrediting entity for DSP certification and based on DSP core competencies from the Centers for Medicare and Medicaid Services (CMS).

Phase 1 is focused on providing 100 hours of FREE accredited training between Sept. 1, 2022 – June 30, 2023, and includes financial incentives (total of \$1,500 for each DSP and \$1,500 employing agency per DSP) as each DSP completes specific training hour completion benchmarks. In FY 24, Phase 2 of this pilot will focus on the AKTC achieving full NADSP accreditation as an approved training entity and on each DSP pilot participant completing NADSP certification expectations to obtain DSP Level I, DSP Level II, and DSP Level III. In addition, the pilot will continue to provide financial incentives for both DSPs and their agencies as each DSP completes its certification levels. By the end of FY 24, a DSP has the potential to earn a total of \$6,000 and NADSP certification levels, and their employing agency can earn a total of \$6,000 per their employed successful DSP in this pilot.

This is one example of how the AKTC is poised and equipped to partner with Trust stakeholders in supporting staff who directly assist and support Trust beneficiaries at the community level. The staff participating in the training are gaining more knowledge and skills and are motivated to utilize them in the workplace, demonstrating a high level of caring for Trust beneficiaries. This helps create a more vital therapeutic environment for beneficiaries, who have the chance at an improved life. The Trust has been making incremental reductions to its funding for this initiative – this, coupled with slight increases in our GF/MH recommendation, represents the planned long-term sustainability of this important initiative. It is recommended by Trust program staff to fund this in FY 25 at \$835,000.

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|--|---|------------------------|
| Project Title: Providing Support for Service to Health Care Practitioners (SHARP) | | |
| Grantee: Division of Public Health | | |
| Fund: MHTAAR | | |
| Years Funded: 17 | Project Category: Workforce Development/Training | |
| FY22: \$200,000 | FY23: \$200,000 | FY24: \$100,000 |
| <p>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 with reentry and recidivism reduction efforts for justice-involved beneficiaries.</p> <p>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 various medical, dental, and behavioral health occupations. Participating clinicians receive education loan repayment in partial exchange to provide outpatient clinical care within federal professional shortage areas.</p> | | |
| <p>Summary of Grant Progress: The SHARP program is a support-for-service system that brings in and retains healthcare clinicians across the state. Staff with the Division of Public Health competently manage SHARP, and the Trust funding needed to secure matching federal dollars is fiscally responsive. The healthcare industry is growing across Alaska in size and scope, which means the need for more licensed healthcare professionals is needed. The SHARP program is helping to provide one mechanism to bring in staff to fill needed positions in rural Alaska, as well as our city centers.</p> <p>At the mid-point of FY 23, there were 107 SHARP contracts awarded to 26 agencies across 23 communities. On average, during the last two years, SHARP clinicians account for 45,000 client appointments, of which, 70% are with beneficiaries (this is determined from serving clients who qualify for Medicaid, Medicare, and no insurance). This represents a 23% increase over the previous ten years of data collection regarding quarterly client visits. DPH did not provide any reasons for the increase in client visits, but there is good reason to believe that with the expansion of SHARP 3 on January 1, 2021, more SHARP clinicians are working and taking clients. This expansion set the stage for increasing access to care, which lends itself to the mission of the Trust.</p> <p>SHARP’s challenges are workforce-related, as the DPH program director has retired, and the division is looking for a replacement. The past director is the staff who started the program and helped build it into what it is today, with the help of the Trust and many other stakeholders.</p> | | |
| Comp Plan Information | | |
| | Goal | Objective |
| | Goal 9 Workforce, Data, & Funding | 9.1 Workforce capacity |
| <p>Relevant Comp Plan Goals and Objectives: Goal 9 of the Comp Plan is supported by the SHARP program because its sole purpose is to recruit and retain needed staff within the BH workforce continuum of care. Since its inception 15 years ago, this program has contracted with 630 healthcare staff.</p> | | |
| Performance Data: The SHARP program continued to expand and improve the support for service federal | | |

programs across Alaska during the FY22 fiscal year. The SHARP program supported 187 clinicians across the state with contracts in 38 organizations tribal and non-tribal. There was a 90% very satisfied approval rating from the clinicians involved in the program, and 98% thought the program exceeded or met expectations from a support-for-service program like SHARP. This data represents a program exceeding and/or meeting expectations for recruiting and retaining a workforce.

SHARP contracts last from 2 to 3 years, with the capacity to be re-upped twice for 6 to 9 years, which helps retain the clinician and make a lasting impact on the healthcare continuum. The following outcomes demonstrate the effectiveness of this program and Trust investment. 60% of the 187 contracts are with tribal behavioral health corporations, all considered rural. This year, there were 181,000 care visits for Trust beneficiaries, all provided by the 187 SHARP contracted clinicians.

Project Recommendations: This has been a successful project of the Trust for 15 years, and it is recommended to continue funding in the next fiscal year as it continues to become a self-sustaining initiative within the Division of Public Health (DPH). This is partly achieved through a 5% fee on each contract, which supports the programmatic needs of the DPH’s SHARP program. The collecting of these fees began in 2021 as the passage of AS 18.29 took place.

It is recommended to continue funding the SHARP program with the AK DPH in FY25 at the \$100,000 level.

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|--|--|------------------------|
| Project Title: Peer Support Certification | | |
| Grantee: Division of Behavioral Health | | |
| Fund: MHTAAR | | |
| Years Funded: 4 | Project Category: Capacity Building | |
| FY22: \$139,500 | FY23: \$130,000 | FY24: \$100,000 |
| <p>Project Description: The need to develop a Behavioral Health Peer Support Worker Certification for Alaska has been identified for several years. Provider agencies have promoted the development of certification to provide greater assurance of the capabilities and qualifications of their peer support staff. Peer support workers have advocated for 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 services.</p> <p>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 and other recommendations for promoting a recovery orientation in the public behavioral health system.</p> <p>Central to the recommendations was funding for an independent Certification Body to do the work of creating the certification. DBH recently awarded a competitive contract to the Alaska Commission for Behavioral Health Certification to become the certification body through the guidance of a multidisciplinary advisory council. Additionally, stakeholder recommendations call for developing a training program for new Peer Support Workers which would be one of the requirements for individuals to achieve certification.</p> | | |

Summary of Grant Progress: The Peer Support Certification initiative managed by DBH moved this project forward from its first year of work. FY 22 represents year two of funding from the Trust, and they got 72 individuals trained and certified as Peer Support Professionals, as well as putting on a virtual peer support conference. DBH was also able to work with contractors in implementing the first peer support supervisory workshops. Research shows that most workers leave their jobs due to poor supervisory relationships. Working in the mental health or substance use disorder field is hard work, and having a good supervisor is critical, hence the need for training supervisors who oversee peers. The outcomes in year two exceeded the performance goals and have helped move the dial on this project.

Through a combination of peer training classes, peer conferences, and supervisory workshops, 322 unduplicated individuals were trained this fiscal year. 105 of those people attended the three-day peer conference, which focused on “Building Bridges”, an essential aspect of peer work in building therapeutic relationships with beneficiaries. 156 individuals received peer training, which is needed for the certification. 72 of these people met the qualifications for certification. This program equips social service agencies across Alaska with peers in their workforce. The peer job class is the fastest-growing social service sector of the workforce in Alaska. This program directly provides more workforce staff to support Trust beneficiaries at the community level.

Comp Plan Information

| Goal | Objective |
|--|---------------------------------|
| Goal 4 Substance Use Disorder Prevention | 4.3 Treatment & recovery access |

Relevant Comp Plan Goals and Objectives: Goal 4 of the Comprehensive Integrated Mental Health Plan Objective 4.3 highlights improved treatment and recovery services. Equipping the SUD workforce with certified peers is one method for achieving this goal and objective. It is recommended to continue funding this project through DBH in FY 24.

Performance Data: There have been 48 certified peers in 2023. Since the program’s inception in January 2021, there have been 146 peers certified through the program. Recertifications are starting this year, as the program has been operational for two years. In February, the certification commission received the first four recertifications. With 72 peers in FY 22 and 48 in FY 23, 120 are staff certified statewide and working in the behavioral health workforce.

Project Recommendations: It is recommended by Trust staff to continue funding the peer support certification project through DBH in FY 25. During the last legislative session, the topic and role of peers in the BH workforce were discussed in several legislative committees, as a crisis of vacancies in the BH workforce was an ongoing topic. Legislators heard from advocates in the BH field and agency staff who supported expanding the peer support training and certification process. As the next couple of years unfolds, the Alaska Department of Labor forecasts that the workforce vacancy rate will continue to be high and does not expect the issue to improve until 2035. With the current environment of increased need for staff and few applicants, it is imperative to invest in supporting the growth and potential of the peer workforce to increase and help with the hundreds of open positions statewide in the agencies that serve Trust beneficiaries.

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| Project Title: Alaska Area Health Education Centers | | |
| Grantee: University of Alaska Anchorage | | |
| Fund: MHTAAR | | |
| Years Funded: 8 | Project Category: Workforce Development/Training | |
| FY22: \$55,000 | FY23: \$55,000 | FY24: \$100,000 |
| <p>Project Description: The Alaska Health Education Centers (AHEC) program will implement summer career pathways programming to expose and engage youth in behavioral health careers. Students will explore careers including social workers, counselors, behavioral health aides, psychologists, psychiatrists, and other positions within 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.</p> | | |
| <p>Summary of Grant Progress: The University of Alaska Anchorage Alaska Health Education Center (AHEC) is the primary workforce development program focusing on “Grow Your Own”. This grant project supports exposing middle and high school adolescents to health-related careers and opportunities. This program utilizes current experts and elders who work and support the healthcare workforce for teaching school-age students across the state. This is one of the state's only effective “grow your own” workforce initiatives.</p> <p>The AHEC program is the most successful program in the state for building awareness and opportunities for adolescents and young adults to learn about the healthcare industry across Alaska. This program does provide this opportunity in the cities across the state, but more importantly, it provides these pathway camps and pipeline jobs in hub villages. The outcomes from this work help educate and introduce young people to the healthcare industry. The need for this is critical and timely, as the healthcare industry (integrated health) has a high vacancy rate and the need for home-grown workers is high.</p> <p>This program directly supports Comp Plan Goal 9 in recruiting and retaining people for the healthcare workforce. In FY 23, the AHEC staff are planning on hosting 19 camps across rural Alaska, with the plan to support over 200 students attending the BH camps. The program is also working with the State of Alaska Department of Education to ensure Pathway Camp education programs provide credit that works for local school districts. The AHEC program is also working with the University of Alaska School of Social Work to provide faculty support in the classes. This program connects young Alaskans to healthcare-related jobs and can potentially support this workforce long-term across rural Alaska. It is recommended to continue funding this program.</p> | | |
| Comp Plan Information | | |
| | Goal | Objective |
| | Goal 9 Workforce, Data, & Funding | 9.1 Workforce capacity |
| <p>Relevant Comp Plan Goals and Objectives: This grant supports strategy A of comp plan goal 9. This strategy is about engaging and preparing Alaska’s youth for health careers. The AHEC provides the Health Career Pathways camps across the state and is successfully bringing youth into the program. The program utilizes the Alaska Area Health Education Center (AHEC) infrastructure to provide a rotated schedule of intensives and/or camps to a variety of communities throughout the state, including but not limited to Bethel, Nome, Juneau, Utqiagvik, Anchorage, Fairbanks, Kodiak, and Dillingham.</p> | | |

Performance Data: Camps provided in the fiscal year 2022 occurred in Kotzebue, Nome, North Slope, Fairbanks, Anchorage, Wasilla, Kodiak, Kenai, King Cove, and Juneau, with over 180 students participating in the pathway. The students learned about careers in nursing, behavioral health, and tribal health. Evaluation of the students completing the program in FY 22 reported their likeliness to go into a health career at 47%, and 65% reported an increased interest in health careers. 96% of the students reported that their knowledge about health careers increased. The AHEC Pathway’s camps did introduce 180 youth to careers in the healthcare industry. These youth are from rural Alaska, and they have successfully completed coursework on behavioral health crisis care, as well as how to intervene when a beneficiary is thinking about suicide, so they are better off, and have the ability to now work with Trust beneficiaries in the workforce once they are of age to be employed.

Project Recommendations: In FY24, this MHTAAR funding will be increased from \$55K to \$100K. This will allow the UAA AHEC to provide and expand all the regional centers with funds annually for this workforce capacity-building work, moving away from the current regional rotation model. This will provide a more stable platform for the “grow your own” network with regional hub villages and their network of village schools. There is no other effort like the BH pathway camps, which provide a proven pipeline for the Trust to support healthcare workforce expansion within Alaska. The Trust staff recommends continuing funding for this work.

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|---|---|------------------------|
| Project Title: Supported Employment Workforce | | |
| Grantee: University of Alaska Anchorage, Center for Human Development | | |
| Fund: MHTAAR | | |
| Years Funded: 4 | Project Category: Workforce Development/Training | |
| FY22: \$100,000 | FY23: \$100,000 | FY24: \$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 Employment and Engagement strategies. A highly trained workforce is critical to ensure access to supported employment and related services as beneficiaries seek competitive integrated employment. CHD will respond to supported employment workforce needs identified in an FY20 needs assessment. CHD will also continue implementing 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 (CRPs) to provide quality employment placement and retention services. | | |
| Summary of Grant Progress: This project provides the only training available in Alaska that meets the Division of Vocational Rehabilitation requirement for service organizations providing employment services to Trust beneficiaries. One success included updating the National Certificate in Employment Services (NCES) during July and August to align with the Association of Community Rehabilitation Educators (ACRE) revised competencies that certify the training and prepare for ACRE review for recertification. The following best practices were offered during the course of the review year: NCES, Customized Employment training, Assistive Technology, Self-Employment, and PASS training were not offered due to low enrollment, Financial and work incentive training is an on-demand online training option. | | |
| Comp Plan Information | | |

| | Goal | Objective | |
|--|---------------------------------------|---------------------------|--|
| | Goal 3 Economic and Social Well-being | 3.2 Integrated employment | |
| <p>Relevant Comp Plan Goals and Objectives: The Supported Employment project meets Comp Plan goal 9’s need to equip agency staff to provide customized employment programming. By equipping agency staff with the ability to support Trust beneficiaries with competitive employment best practices, objective 3.2 is met. Beneficiaries who receive this training and support gain employment and can lead improved lives.</p> | | | |
| <p>Performance Data: While data for FY23 is forthcoming, 85 participants engaged in employment services training provided during FY22. All the courses were distance delivered using Zoom. Participants were in communities across the state: Anchorage, Eagle River, Juneau, Soldotna, North Pole, Fairbanks, Sitka, Craig, Ketchikan, Kodiak, Palmer, Sand Point, Valdez, Ward Cove, Wasilla.</p> <p>A follow-up survey was conducted to determine how many beneficiaries became employed, maintained employment, or participating in a work experience following the supported employment courses. Twenty-four participants responded, making the response rate 48%. The respondents indicated that they collectively served 133 beneficiaries within 90 days after the training. Of those 133 beneficiaries, participants estimated that 74 were individuals with developmental disabilities, 51 had mental illnesses and 12 had traumatic brain injuries. Assuming the respondents served the same number of beneficiaries every 90 days after the training, by extrapolation, the respondents would serve approximately 532 beneficiaries during 12 months. Since the response rate to the follow-up survey was not 100%, the number of beneficiaries served by those who completed the training may be much higher. However, turnover in the field would instead lower the estimate.</p> | | | |
| <p>Project Recommendations: It is recommended to fund this Supported Employment Beneficiary training grant in FY 25. This initiative is one of the best practice systems for helping Trust beneficiaries gain employment through the training of their agency staff.</p> | | | |

Early Childhood Intervention & Prevention Priority Area

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| Project Title: Keep the Kids Home: Pediatric Behavioral Health Treatment Coordination | | |
| FY23 Grantees (through 4/26/2023): | | |
| <ul style="list-style-type: none"> Denali Family Services – 2023 FFTA Conference, \$15,000 Trinity Family Counseling - Group Therapy to Promote Resiliency in Adolescents, \$25,000 | | |
| Fund: Authority Grant | | |
| Years Funded: 3 | Project Category: To be determined based on individual project type | |
| FY22: \$50,000 | FY23: \$50,000 | FY24: \$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.

Denali Family Services – 2023 FFTA Conference Summary of Grant Progress:

This capacity-building project will help Alaska child placement agencies better support children in treatment/therapeutic foster care by attending the only annual treatment foster care conference in the country in Columbus, Ohio. The funding will allow multiple Alaska-based agencies to attend the national Family Focus Treatment Association conference to gain best practice information on treatment foster care. In the past, this event has been noted by state health department and child placement agency staff as the most beneficial learning opportunity available to enhance support for Alaska's children in treatment foster care. Treatment foster care continues to be highlighted by partners in annual stakeholder discussions as a key strategy to be supported by Trust investment on both the policy and practice levels. Denali Family Services will act as the FY23 fiscal agent (Community Connections has done so in previous years) for equitable distribution of Trust funds to participating agencies and foster care providers to ensure maximum participation.

Funds have been requested for statewide provider participation in this event for the past several years with high levels of satisfaction from participants. Very few opportunities exist to train Alaska’s critical treatment foster care provider workforce and this annual event is a primary source of information for the statewide system of care for beneficiary youth who require this level of support.

Denali Family Services – 2023 FFTA Conference Comp Plan Information

| Goal | Objective |
|------------------------|-------------------------------|
| Goal 1 Early Childhood | 1.3 Reduce the impact of ACEs |

Denali Family Services – 2023 FFTA Conference Relevant Comp Plan Goals and Objectives: This project is focused on workforce capacity building specifically on behalf of Trust beneficiary children who are involved in the child welfare system and can benefit from Treatment Foster Care services. This service has been identified by the state and partners as a key intervention to reduce institutionalization and keep beneficiary children closer to their home communities and families. (Early Childhood Intervention & Prevention Priority Area)

This project aligns with Comp Plan Goal 1: Programs serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services; 1.3 Reduce the instances and impact of Adverse Childhood Experiences (ACEs) through community engagement and by improving social determinants of health.

Denali Family Services – 2023 FFTA Conference Performance Data:

This project is currently active for FY23 with performance measures to be reported after the project period closes.

Denali Family Services – 2023 FFTA Conference Project Recommendations:

Event has not yet occurred – no recommendations available. Staff typically recommend this project for funding due to the lack of other high quality professional development opportunities specific to the specialized treatment foster care provider network in Alaska.

Trinity Family Counseling - Group Therapy to Promote Resiliency in Adolescents Summary of Grant Progress:

Trinity Family Counseling is an Eagle River based counseling agency with a focus on child and adolescent mental health supports in a variety of environments to accommodate social emotional needs of beneficiary youth across settings. The agency was awarded FY23 Trust funds that will be matched with Division of Vocational Rehabilitation (DVR) Pre-Employment Transition Supports funds to offer a therapeutic summer group program for two cohorts of Eagle River beneficiary youth for separate four-week sessions. This project responds to widespread understanding that children and youth, particularly adolescent youth, are experiencing profoundly negative mental health impacts from the isolation and social disruptions of the COVID-19 pandemic.

The agency will provide group therapy (direct services) in an extended summer camp format (six hours per day, two days per week for four weeks) for beneficiary youth in the Eagle River area identified primarily in partnership with Anchorage School District partners and parents. The project will offer a blend of recreational and processing therapy to provide a fun and engaging social environment to acquire and practice newly developed skills. These youth may be at higher risk for suicidal behaviors, presenting a unique opportunity to provide immersive earlier intervention to help adolescents gain tools and skills to build their individual and collective protective factors.

Community-based services, including group therapy, are identified as high priority in the former Trust "Bring the Kids Home" focus area initiative, as well as the December 2022 US Department of Justice "Investigation of the State of Alaska's Behavioral Health System for Children." Enhanced community-based services including group therapy are not currently widely available due to workforce and other infrastructure issues. This type of project, as proposed by Trinity Family Counseling, complements, and can be blended with DVR youth program funds to ensure both sustainability and a focus on soft skill development that elevates Trust and partner goals related to beneficiary employment.

The project will begin in June 2023 and will report data following its conclusion in fall 2023.

Trinity Family Counseling - Group Therapy to Promote Resiliency in Adolescents Comp Plan Information

| Goal | Objective |
|------------------------|-------------------------------|
| Goal 1 Early Childhood | 1.3 Reduce the impact of ACEs |

Trinity Family Counseling - Group Therapy to Promote Resiliency in Adolescents Relevant Comp Plan Goals and Objectives: This direct service project provides supportive group therapy in a recreational environment to support Trust beneficiary children who are experiencing negative mental health impacts from isolation and stressors related to the COVID-19 pandemic. This work will be co-funded by the Division of Vocational Rehabilitation through Pre-Employment Transition Services (Pre-ETS) funds.

This project aligns with Comp Plan Goal 1: Programs serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services; 1.3 Reduce the instances and impact of Adverse Childhood Experiences (ACEs) through community engagement and by improving social determinants of health.

Trinity Family Counseling - Group Therapy to Promote Resiliency in Adolescents Performance Data:

The project will begin in June 2023 and will report data following its conclusion in fall 2023.

Group Therapy to Promote Resiliency in Adolescents will be two groups of youth each participating in a 4-week program. First session, June 6-June 29 and second session, July 18-August 10. Both sessions will meet biweekly, Tuesday and Thursdays, for 6 hours per day. The first group will service early adolescents, ages 12-15, and the second group will serve ages 15-18. This program will provide extensive time in a cooperative environment that will help adolescents learn and practice necessary skills to help them become successful members of their society as they grow.

The Child and Youth Resilience Measure (CYRM•R) will be used to measure project success. Specifically, the Youth revision of the survey that is appropriate for ages 10-23. The CYRM-R is a self-report survey that measures social-ecological resilience. The CYRM-R contains 17 questions that are measured with a 3-point Likert scale. The survey uses simple language to measure the occurrence of common obstacles confronted by youth. The CYRM-R will be used as a pre-test and post-test quasi-experimental design to provide data on the desired outcome of increased resilience and improved lives of beneficiaries. Permission to use the CYRM-R has been obtained by Trinity Family Counseling.

Trinity Family Counseling - Group Therapy to Promote Resiliency in Adolescents Project

Recommendations:

Project has not yet occurred – no recommendations available.

This project presents a unique opportunity to blend flexible youth focused vocational rehabilitation funding with Trust therapeutic intervention funding to support high-risk beneficiary youth who will benefit from immersive recreational experiences in a group environment with trained clinical staff.

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| Project Title: Children’s Mental Health Conferences | | |
| Grantee: Child Welfare Academy – University of Alaska Anchorage | | |
| Fund: Authority Grant | | |
| Years Funded: 3 | Project Category: Conference | |
| FY22: \$50,000 | FY23: \$50,000 | FY24: \$50,000 |
| Project Description: Funding consecutively each spring supports two annual key children’s mental health-related conferences. 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. | | |
| Summary of Grant Progress: | | |
| <ul style="list-style-type: none"> • Funding was intended to support two annual key children’s mental health-related conferences held each spring consecutively. • Due to the continued planning of these formerly live event conferences as virtual events since FY21, the funds were not needed and, therefore, not allocated to the Child Welfare Academy during FY23. | | |

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| Comp Plan Information | |
| Goal | Objective |
| Goal 9 Workforce, Data, & Funding | 9.2 Workforce competencies |
| <p>Relevant Comp Plan Goals and Objectives: Goal 9: The State of Alaska has the workforce capacity, data, and technology systems to support the resources and funding of Alaska’s comprehensive, integrated mental health program; 9.2: Advance the competencies of the healthcare, behavioral health, and public health workforce.</p> | |
| <p>Performance Data: N/A per funds not expended.</p> | |
| <p>Project Recommendations: Staff recommends continued funding for this project in FY25 with project title edit (remove previously referenced conferences by name to allow allocation of funds to support other children’s mental health conferences beyond those currently named).</p> <p>Children’s mental health workforce continues to emerge as a high priority for state and community partners. Thus, ensuring Trust funds are flexibly available to support the current and future need for conferences related to children’s mental health is essential. Staff will work with partners and potential grantees to identify the most appropriate agency to receive these funds in coming years, should Trustees support the change recommendation.</p> | |

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|--|--|------------------------|
| Project Title: Help Me Grow Alaska: Early Childhood Community Outreach and Developmental Screening | | |
| Grantee: All Alaska Pediatric Partnership | | |
| Fund: Authority Grant | | |
| Years Funded: 3 | Project Category: Capacity Building | |
| FY22: \$100,000 | FY23: \$100,000 | FY24: \$150,000 |
| <p>Project Description: This project will benefit beneficiaries experiencing developmental disabilities through increased early detection and intervention of developmental delays and disabilities in children. This project will serve beneficiaries experiencing developmental disabilities and those experiencing mental illness through increased awareness and access to Help Me Grow Alaska services, including care coordination and access to developmental and social-emotional screening. Secondary beneficiaries will be provided support, tools, and education on understanding child development and access to monitoring and screening resources as well as support navigating the care system for their family. Service providers serving beneficiaries will receive high-quality training to better prepare them for their work with beneficiary populations and their families.</p> | | |
| <p>Summary of Grant Progress:</p> <p>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 through coalition networks and state partnerships such as the “Partner Access Line: Pediatric Alaska (PAL PAK) project help engage families and children not being reached by other systems. Help Me Grow continues to be an essential program for child development (early identification of developmental delays) and mental health service referral and coordination for children and</p> | | |

their family members. Program staff and centralized resource center specialists assist with identifying developmental needs and assessing social determinants of health that may be supported through resource referral and coordination. This project serves beneficiaries of all categories and provides direct services while supporting training (capacity building) and engaging in systems work for pediatric mental health and disability service expansion for beneficiary families.

Help Me Grow Alaska through preliminary and quarterly partnership reporting continued to show growth in awareness and program participation into FY23 with a sharp increase in families utilizing services, specifically for connection to mental health services. The program is exploring further diversified funding streams for long-term sustainability beyond Trust funding, including state and federal funds.

Comp Plan Information

| Goal | Objective |
|------------------------|---|
| Goal 1 Early Childhood | 1.2 Accurate identification & Tx for children |

Relevant Comp Plan Goals and Objectives:

This project is focused on improved early identification and referral for young Trust beneficiaries and their families in addition to state system improvements for early intervention services and children’s mental health. (Early Childhood Intervention & Prevention Priority Area)

This project aligns with Comp Plan Goal 1: Programs serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services; 1.2 Provide ongoing support to ensure accurate identification and treatment of social-emotional needs for children and their caregivers, congruent with their cultural identification. (Early Childhood Intervention & Prevention Priority Area)

Performance Data:

This project is currently active for FY23 with performance measures including the number of trainings and trained individuals, as well as families reached to be reported after the project period closes.

Project Recommendations: Trust staff recommends this project for continued funding in FY24-25.

Help Me Grow Alaska is regularly highlighted by Trust partners within the state government and community provider agencies as a critical referral and coordination resource for beneficiary families and providers statewide. The previously approved level of funding from Trustees will support the ongoing growth and expansion of statewide services that identify and provide coordination for families needing developmental and behavioral health support. Increased funding will help respond to stakeholder requests to increase access to care coordination and resource and referral for beneficiary families and children with mental health needs exacerbated by the COVID-19 pandemic. Trust staff will continue to monitor this project and work with program staff to identify alternative sustainable funding sources beyond FY 25.

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|---|--|------------------------|
| Project Title: Intensive At-Risk Early Intervention Services | | |
| Grantee: DOH, Division of Senior and Disabilities Services | | |
| Fund: MHTAAR | | |
| Years Funded: 2 | Project Category: Capacity Building | |
| FY22: \$0 | FY23: \$460,000 | FY24: \$460,000 |
| <p>Project Description: The State of Alaska’s Early Intervention/Infant Learning Program (EI/ILP) is housed within the Department of Health, Division of Senior & Disability Services (SDS) which serves as a single point of entry for infants and toddlers whose families or others have concerns about their child’s development. Under the Individuals with Disabilities Act (IDEA), EI/ILP is responsible for implementing services to young children, birth to three years, who experience developmental delays and disabilities.</p> <p>This innovative project is focused on high-risk families with young children. Trust funds will be administered by SDS and granted directly to community agencies to hire highly qualified EI/ILP providers for up to four regional Family Service Coordinator positions. Family Service Coordinators will provide screening, developmental monitoring, relationship-based parenting guidance and resource/referral supports to high-risk families with infants and toddlers referred by child welfare agencies. This project will provide intensive services to at least 200 at-risk families annually who would not otherwise be identified as eligible for early intervention under existing funding source criteria. The project will also work to remove systems barriers and identify sustainable funding to support the work after Trust funding fades over time.</p> <p>This project aims to promote the success of children in their home communities by identifying young beneficiaries who may not otherwise be identified, and then providing evidence-based services that support development and improve outcomes. By screening, evaluating and enrolling more high-risk children in ILP services beneficiary children are better prepared for kindergarten socially and developmentally - a key indicator of later success. This project will support and strengthen parents in most effectively support their child’s development and by increasing linkage and access to the parenting resources they need. Family Service Coordinators will work to remove barriers to participation by tailoring family engagement strategies for this group of children and families. Pre-enrollment activities will be designed to increase engagement of this often transient and reluctant group of families with children at increased risk of developmental delays, disabilities and early mental health/social emotional concerns.</p> <p>Trust funding is requested for 4 years (currently projected through FY26) to have a birth cohort engage in services from birth to age 3 years. This timeframe will allow the project to gather consistent outcomes data and build policies for enhanced service delivery and financial sustainability. If families are identified as eligible for EI/ILP and enrolled, services would then be funded under IDEA Part C. Other potential sources of sustainable funding will be explored during the project period.</p> | | |

Summary of Grant Progress: During FY23, grantees were selected, and grants were awarded on October 17th for communities in Kenai (Sprout Family Services), Kodiak (Kodiak Area Native Association), Juneau (REACH, Inc.), and Fairbanks (Alaska Center for Children and Adults). Monthly grantee meetings have focused on strategies and requirements for the recruitment of qualified staff, which was a challenge, but all programs are now fully staffed.

ILP staff have begun regular meetings at the local and state level with Office of Children's Services representatives to discuss improvements in the quality of referral information provided when children are referred from OCS to ILP and to discuss ideas for better coordination of services. In addition, state ILP staff have met with staff from our legal department to share questions and concerns about necessary paperwork to document OCS custody, which has been a barrier to local programs serving children. The ILP legal team is reaching out to the OCS legal team to discuss possible solutions. Local programs have met with providers of services to high-risk families in their communities, hosted outreach activities such as training and play groups, and are developing new outreach materials. They have provided developmental screenings, developmental evaluations and enrollment for high-risk children referred by OCS and other community partners.

Challenges related to implementation of the project began with recruitment of highly qualified staff. ILP programs have generally been having difficulty recruiting providers of all disciplines, so this project was no exception. However, grantees are beginning to report success with meeting our performance measures related to increasing identification, engagement, and enrollment of high-risk children, and successfully referring children to complementary family supports. Another challenge has been working with our database developers to define and understand how to track outcomes of children who are brought to the ILP program through this project. We are working to add data fields to our system to allow us to identify the children served through this project in our enrollment and outcome data. Another data challenge is related to referrals. Most referrals for this project come to ILP through an automated referral system from the OCS database. Understanding the limitations and possibilities of this referral system has been challenging. Systemic issues at OCS including high caseloads and contact information that is missing or not current in the data system are one of the major barriers we are addressing.

During FY24 this project will be fully implemented. Four local programs will continue to work with their local OCS office and expand relationships with other community partners who serve high-risk families, such as women's shelters, substance abuse treatment programs for pregnant and parenting women, prevention programs at OCS such as family preservation and family reunification programs, Parents as Teachers, and other similar programs. Activities will include education about Infant Learning Program services, development and distribution of new materials, developmental screening, hearing and vision screening, developmental evaluation, playgroups, family service coordination, and more. Memorandum of Agreements will be developed on the local level to strengthen relationships.

Work with families on the local level will continue and increase. Providers for this project will develop and discover methods for following up with high-risk families who are referred to the project, such as increasing the level of outreach, providing family support during the enrollment process, and addressing barriers to enrollment such as transportation concerns. Families will be allowed increased flexibility in the enrollment timeline and process, and additional strategies will be utilized to build trust and empower families in their parenting roles, to increase the likelihood of parent engagement. Relationship-based and Infant Early Childhood Mental Health supports will be utilized in this project.

An advisory group will be established to assist with project success, bringing key partners to the table in order to build understanding of the challenges, barriers and strategies for success that this project can utilize. The state ILP office will continue to work individually with OCS on the state level to problem-solve challenges related to referral, information sharing, and family engagement. The state ILP office will continue to work with

Medicaid to expand Targeted Case Management billing codes to allow us to bill Medicaid for pre-enrollment engagement activities, an important step to establish sustainability for this project.

Changes to the data system will be finalized early in FY24 and data tracking for the project performance measures will begin to be measured and reported quarterly. Quarterly reporting on project successes will be shared with the Advisory Group, as well as with the statewide Infant Learning Program providers. By sharing strategies and successes with statewide ILP providers, all ILP programs in the state will benefit from the lessons learned through this AMHTA project.

Comp Plan Information

| Goal | Objective |
|------------------------|---|
| Goal 1 Early Childhood | 1.2 Accurate identification & Tx for children |

Relevant Comp Plan Goals and Objectives: This project is focused on capacity building and direct outreach to young beneficiary families involved in the child welfare system. The project will help identify individual families and supports and inform improved Trust program investment and state system improvements for early intervention services and children’s mental health. (Early Childhood Intervention & Prevention Priority Area)

This project is aligned with Comp Plan Goal 1: Programs serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services; 1.2: Provide ongoing support to ensure accurate identification and treatment of social-emotional needs for children and their caregivers, congruent with their cultural identification.

Performance Data: This project is currently active for FY23. Performance measures pertaining to the identification of high-risk children, enrollment, and successful referrals will be reported after the project period closes:

Project Recommendations: Staff recommends this project for continued FY24-25 funding as a statutory advisory board and partner-prioritized project to improve access to early intervention services for beneficiary families that are child welfare involved.

State staff working on the project are committed to the work’s success and have overcome multiple obstacles to identify and establish the four grantees who will provide these services over the next 3-4 years if funding continues to be approved. Year 2 (FY24) will allow further analysis of the project with more robust data and will guide staff recommendations for future funding. Trust staff will continue to monitor this project and work with program staff to identify alternative sustainable funding sources beyond FY25.

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| Project Title: Rural Student Behavioral Health Counseling | | |
| Grantee: Department of Education & Early Development | | |
| Fund: MHTAAR | | |
| Years Funded: 3 | Project Category: Capacity Building | |
| FY22: \$150,000 | FY23: \$150,000 | FY24: \$120,000 |

Project Description: This project will leverage early success from a previously Trust-funded partnership with the Department of Education and Early Development (DEED) to support increased capacity for trauma-engaged practice and mental health support in schools. An additional FY23 focus will support the Department's Positive Behavior Interventions and Supports (PBIS) in schools.

This project will assist school districts to develop mental health support for students of all ages, prioritizing rural and remote school districts that do not otherwise have available mental health support. Funds will continue to support a long-term non-permanent position within the Department of Education and Early Development to provide services to staff and coaching to school districts. Emerging data related to the COVID-19 pandemic indicates a significant need for student and family mental health support and indicate 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 support as schools operate in a post-pandemic environment.

DEED staff will work collaboratively with Trust, the Department of Health, and other partners to promote the expansion of behavioral health supports in schools through a long-term non-permanent behavioral health specialist position embedded within DEED. The position will continue to work closely with under-resourced and rural districts that have identified the need and interest in enhancing access to student behavioral health support. The counselor position will provide direct support to staff to support students 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 staff, and school districts, online through telehealth and eventually through a blended model of telehealth and in-person support as appropriate.

Summary of Grant Progress: The position funded by this capacity-building project continues to support the Department of Education and Early Development's Positive Behavioral Intervention and Support (PBIS) project which is serving 31 schools in 8 rural districts. This project supports the mental health of students and creates a positive school environment that can help beneficiaries be able to be more successful now and in the future. Training on the data system to monitor these efforts was completed and initial training for school districts has been started. The Position supports ongoing efforts to get rural school staff informed and trained in Trauma-Engaged practices. The position has been part of the team updating the three main eLearning modules around Adverse Childhood Experiences and schools. This is a primary source for rural districts to offer training on these topics to school staff.

There have been consultations with rural districts and some social-emotional lessons for beneficiary students in districts without counselors. The position is being used to initiate and lead a project in conjunction with the Division of Behavioral Health, Seattle Children's Hospital, and the University of Washington to support rural school counselors focusing on those working itinerantly. For many of the Trust's school-age beneficiaries, these counselors are often their primary support in rural areas. Training and regular support through virtual methods are being initiated. The initial response has been enthusiastic. Coordinating time together can be challenging when working with multiple districts. Presentations are recorded and disseminated to ensure that all participants have access to the training.

Trauma-engaged practices and PBIS work will continue to be a focus of this position. This position will continue to work with other organizations to develop and implement a coaching model for Trauma-Engaged practices in

Alaska schools. This position will also continue to work with Cohorts 1 and 2 implementing PBIS in their schools. The outreach program for rural and itinerant counselors will be continued and reviewed through ongoing informal assessment and a survey after a year of meetings. This survey will be conducted in the spring of 2024.

PBIS will continue to impact rural Trust beneficiaries through implementation in the coming year. Data monitoring and support for schools will be completed to inform progress. Training in Restorative Practices will take place in spring 2023. Once training is complete, this position can promote Restorative Practices in Alaska schools. Additional funding for the position’s sustainability continues to be discussed along with the potential for the position to become permanent. At this time additional funding has not been identified and remains a challenge. Trust funding remains crucial to the ongoing implementation of this work, which is part of helping to guide a broadening statewide initiative related to mental health support in schools.

Comp Plan Information

| Goal | Objective |
|------------------------|---|
| Goal 1 Early Childhood | 1.2 Accurate identification & Tx for children |

Relevant Comp Plan Goals and Objectives:

This project is focused on school district early intervention and mental health support capacity building for improved Trust program investment and state system improvements for children’s mental health. (Early Childhood Intervention & Prevention Priority Area)

This project aligns with Comp Plan Goal 1: Programs serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services; 1.2: Provide ongoing support to ensure accurate identification and treatment of social-emotional needs for children and their caregivers, congruent with their cultural identification. (Early Childhood Intervention & Prevention Priority Area)

Performance Data:

This project is currently active for FY23, performance measures related to participants served, skill development and more will be reported after the project period closes:

Project Recommendations:

Staff recommends this project for continued funding in FY24 and a slight increase in FY25 to accommodate for increased costs related to inflation and travel (required by the position for rural school district training and technical assistance).

The work of this position complements and augments Trust investments related to this growing body of work which is integral to the statewide partner discussion related to the comprehensive youth mental health continuum of care. This project has been identified as a high priority by Trust advisory boards and multiple partners as a critical 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. Trust staff will continue to monitor this project and work with program staff to identify alternative sustainable funding sources beyond FY25.

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|---|--|------------------------|
| Project Title: Infant and Early Childhood Mental Health Capacity Building | | |
| FY23 Grantees (through 4/26/2023): | | |
| <ul style="list-style-type: none"> Alaska Association for Infant and Early Childhood Mental Health - Project Compass, \$50,000 Anchorage School District – ASD Mental Health Consultative Model, \$50,000 | | |
| Fund: Authority Grant | | |
| Years Funded: 4 | Project Category: To be determined based on individual project type | |
| FY22: \$100,000 | FY23: \$100,000 | FY24: \$400,000 |
| <p>Project Description: This funding category is consistent with Comp 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. The goal of these funds is to build on prior investment related to infant and early childhood mental health capacity building, sometimes referred to as “social and emotional health,” which relates to the developing capacity of the child from birth to five years of age to form close and secure adult and peer relationships. This is a critically formative period for Trust beneficiaries experiencing developmental disabilities, and effective supports during this time period can help mitigate and prevent children experiencing trauma from developing chronic behavioral health issues such as mental illness and substance use disorders later in life.</p> <p>Primary strategies related to this category could include statewide workforce-related efforts consistent with those in progress with the Alaska Association for Infant and Early Childhood Mental Health (AK-AIMH) as well as regional efforts such as those occurring with REACH Infant Learning Program (Juneau-Southeast) and others.</p> | | |

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| <p>Alaska Association for Infant and Early Childhood Mental Health - Project Compass Summary of Grant Progress: The main goal of Project Compass is to build capacity in Alaska to deliver specialized Infant and Early Childhood Mental Health services by providing statewide access to training for professionals who offer such services. Over the past ten years and with the introduction of Medicaid Waiver 1115, Alaskan leaders identified a scarcity of qualified practitioners in Alaska's behavioral health, education, social services, and justice sectors. This scarcity is thought to be due to insufficient access to comprehensive professional development for practitioners working with the 0-6 population.</p> <p>FY23 funds support year three of implementation of a previously funded Trust initiative with the Alaska Association for Infant & Early Childhood Mental Health (AK-AIMH) related to training and professional development for the Infant & Early Childhood Mental Health Workforce. This third year of the project builds on two years of Trust funds leveraging an Alaska Children’s Trust-funded infrastructure grant in collaboration with the UAA Center for Human Development. Trust funds supported required personnel and contractual efforts to effectively develop training opportunities in partnership with multiple organizations involved with infrastructure building. Trainings hosted by the project through the UAA Center for Human Development focus on competencies of practitioners as aligned with national standards for this specialized workforce.</p> <p>This capacity-building project continues to provide basic training infrastructure for the state’s emerging field of infant & early childhood mental health practitioners. This workforce is experiencing an increase in demand as the value and need has been exacerbated by the pandemic and providers in health and education sectors struggle with behavioral issues they observe in young children and with beneficiary families.</p> <p>Year 2 (FY22) of the project reported a high level of success in reaching 157 unduplicated practitioners with</p> |
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quality training that they reported they would use in their practice to work more effectively with beneficiary families with young children. FY23 data is not yet available but is anticipated to be in line with successes of previous years reporting.

Alaska Association for Infant and Early Childhood Mental Health - Project Compass Comp Plan Information

| Goal | Objective |
|------------------------|---|
| Goal 1 Early Childhood | 1.2 Accurate identification & Tx for children |

Alaska Association for Infant and Early Childhood Mental Health - Project Compass Relevant Comp Plan Goals and Objectives:

This project is focused on workforce development and capacity building to increase beneficiary family access to Infant & Early Childhood Mental Health services. This approach supports both parents/caregivers and young children to establish strong attachment and bonding which also serves as a protective factor against child maltreatment to prevent abuse and neglect.

This project aligns with Comp Plan Goal 1: Programs serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services; 1.2: Provide ongoing support to ensure accurate identification and treatment of social-emotional needs for children and their caregivers, congruent with their cultural identification.

Alaska Association for Infant and Early Childhood Mental Health - Project Compass Performance Data:

Projected outcomes (performance measure reporting data not yet available):

- (1) fifty unique providers will gain competencies by attending Project Compass-delivered training;
- (2) training participants will represent diverse communities, cultures, and service sectors;
- (3) decrease reliance on outside reflective supervisors/consultants by supporting endorsed practitioners to become AK reflective consultation providers;
- (4) foster collaborative relationships among key partners (i.e., Family Services Training Center).

Alaska Association for Infant and Early Childhood Mental Health - Project Compass Project

Recommendations: FY23 was the third and final year of this project planned as a standalone early childhood workforce development project and as originally recommended for Trust funding by staff. Staff recommends that for FY24 and moving forward this project be integrated into the UAA Family Services Training Center through available funding that is already approved by Trustees and/or additional funding identified by the grantee. This recommendation may be revisited in future years as additional state and federal early childhood workforce funds become available. Trust staff will continue to monitor this project and work with program staff to identify alternative sustainable funding sources beyond FY 25.

Anchorage School District – ASD Mental Health Consultative Model Summary of Grant Progress: This project continued the Anchorage School District (ASD) preschool mental health consultation pilot services originally funded in FY19 with some disruption in subsequent years due to the COVID-19 pandemic. Results from the pilot indicate a high level of satisfaction from pre-school educators supporting young beneficiaries in their classrooms - particularly those within special education pre-school classrooms. The pilot program has allowed ASD to pursue additional funding sources (AK Children's Trust and Municipality of Anchorage Alcohol Tax) to expand services and blend funding to reach more beneficiaries. This project provides indirect services to Trust beneficiary children through consultation with adult professionals who support them in the

classroom and school environment. It may be considered both a direct service and capacity building project.

ASD preschool has seen a significant increase in the number of children experiencing intensive needs in special education settings. The needs have varied from physical to trauma-related, manifesting in high-needs behaviors. Many children in both general education and special education preschool experience these needs. Continuing the 2022-2023 school year, ASD Preschool continued services with the mental health consultative model, benefiting Trust beneficiary children that experience significant needs. The continuation of these services provides opportunities for children and families to have access to mental health services, reduce teacher/staff stress, and increase positive emotional response to children and families in need. This project improves the practice of teachers working with children who are struggling with mental health issues.

ASD staff report a high level of satisfaction with this relatively inexpensive project that supports teachers and whole schools to better serve the mental health and educational needs of beneficiary children. This is a model that other districts would like to replicate, and leveraging local and other funding creates an expanding and sustainable system of supports for young beneficiaries.

Anchorage School District – ASD Mental Health Consultative Model Comp Plan Information

| Goal | Objective |
|------------------------|---|
| Goal 1 Early Childhood | 1.2 Accurate identification & Tx for children |

Anchorage School District – ASD Mental Health Consultative Model Relevant Comp Plan Goals and Objectives:

This capacity-building project is focused on increased beneficiary family and educator access to Infant & Early Childhood Mental Health Consultation services in the preschool setting with needed extension into more comprehensive home and community-based services for the family as needed. This approach supports both parents/caregivers and young children to establish strong attachment and bonding which also serves as a protective factor against child maltreatment to prevent abuse and neglect. Mental Health consultation services offered in an early childhood setting is a national best practice and integrated in the Headstart model. This project is one of the first school district adaptations of this model in Alaska with other districts and early childhood programs interested in replicating. (Early Childhood Intervention & Prevention Priority Area)

Goal 1: Programs serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services; 1.2: Provide ongoing support to ensure accurate identification and treatment of social-emotional needs for children and their caregivers, congruent with their cultural identification. (Early Childhood Intervention & Prevention Priority Area)

Anchorage School District – ASD Mental Health Consultative Model Performance Data: Projected outcomes (performance measure reporting data not yet available):

It is estimated that this project will directly serve approximately 500 students with suspected or identified developmental delays, some of which are identified mental illness, while indirectly benefiting all students, staff, and families in the classroom and wider school community. Approximately 60 or more adults will be trained regularly by this project with strategies to use with students. These adults include classroom teachers, teacher assistants, and related services staff, itinerant special education staff, and building support staff.

Anchorage School District – ASD Mental Health Consultative Model Project Recommendations: Staff recommends consideration of future funding for continued support of this project, if requested and if funding is available.

This project represents a highly successful use of Trust funds to build and expand a best practice strategy that is inexpensive and effective to support young beneficiary children and their caregivers. Early Childhood Mental Health Consultation is a strategy being increasingly requested by providers statewide as they strive to meet the needs of young children and families to prevent suspension and expulsion from preschools, and higher levels of care with costlier services in more restrictive settings.

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

FY23 Grantees (through 4/26/2023):

- All Alaska Pediatric Partnership – Alaska Early Childhood Network Retreat, \$18,700
- Family Resource Center Association – Support and Tools for the AK Family Resource Center Network, \$21,051

Fund: Authority Grant

Years Funded: 4

Project Category: To be determined based on individual project type

FY22: \$70,000

FY23: \$70,000

FY24: \$265,000

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.

All Alaska Pediatric Partnership – Alaska Early Childhood Network Retreat Summary of Grant Progress:

The Alaska Early Childhood Network (ECN) requested Trust funding for an in-person retreat on Feb. 16-17, 2023. The ECN was formed in 2020 as a partnership between Help Me Grow Alaska, a program of the All Alaska Pediatric Partnership and the Early Childhood Comprehensive Systems (ECCS) grant project within the State of Alaska, Division of Public Health. The purpose of the retreat was to strengthen the Early Childhood Network to become more effective and sustainable. A contracted facilitator was hired to help the ECN build a Charter for membership, with an accompanying Memorandum of Understanding to be signed by each community committing to the ECN. Thirty-two attendees from 14 different communities gathered for two days of networking, relationship building and planning. A draft charter and draft MOU were completed because of the retreat. This is a capacity-building project that also informs systems change as the network develops.

For the past two years, this informal group of community leaders has grown from a small group initially supported by a state grant to a group of leaders in both the health and education fields related to early

childhood from over 20 diverse communities across Alaska. Monthly meetings take place virtually from September - May. As our network matures in purpose and scope, both the All Alaska Pediatric Partnership and the State of Alaska Division of Public Health recognize the need for an in-person gathering of ECN leaders for the purpose of relationship building and strategic planning. The ECN has filled a great need for connection and resource-sharing during and after the COVID-19 pandemic. It is now poised to have an even greater and sustainable impact on participating communities and Trust beneficiary families with the completion of the facilitated strategic plan.

The ECN is comprised of early childhood professionals and leading advocates from over 20 communities across Alaska, from Nome to Whale Pass. ECN members serve in a variety of fields including early care and learning centers, to local native health corporations, to leaders of nonprofit coalitions. Funds were used for travel and lodging, food and the fee for a strategic planning facilitator.

All Alaska Pediatric Partnership – Alaska Early Childhood Network Retreat Comp Plan Information

| Goal | Objective |
|------------------------|-------------------------------|
| Goal 1 Early Childhood | 1.3 Reduce the impact of ACEs |

All Alaska Pediatric Partnership – Alaska Early Childhood Network Retreat Relevant Comp Plan Goals and Objectives:

Goal 1: Programs serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services. 1.3 Reduce the instances and impact of Adverse Childhood Experiences (ACEs) through community engagement and by improving social determinants of health. (Early Childhood Intervention & Prevention Priority Area)

All Alaska Pediatric Partnership – Alaska Early Childhood Network Retreat Performance Data:

Thirty-two people from the following 14 communities were able to participate: Anchorage, Copper River, Dillingham, Fairbanks, Girdwood, Kenai, Kodiak, Kotzebue, Mat-Su, Nome, Petersburg, Seldovia, Sitka, and Seward. Not able to participate were members from: Homer, Juneau, Valdez and Whale Pass.

Evaluation of the retreat was very positive, with most attendees stating that the retreat met its goal of strengthening the ECN to become more effective and sustainable. This was done by the creation of a charter that lines out the Purpose, Membership and Primary Activities of the ECN, and the commitment made by members.

80% of responders stated that they better understand what the ECN is and how it can support their community.

86% stated that attending the retreat supported their work and early childhood goals for their community.

All Alaska Pediatric Partnership – Alaska Early Childhood Network Retreat Project Recommendations:

Staff recommends review of any future funding requests for this project if it becomes a recurring event. This was the first event of its kind and the first such request for support.

Family Resource Center Association – Support and Tools for the AK Family Resource Center Network Summary of Grant Progress:

Through collaboration with the Alaska Impact Alliance, the Alaska Family Resource Network (AFRN) was granted funds to support community-based Family Resource Centers which are developed and operated by local community organizations and coalitions. Funds were granted to support Alaska Impact Alliance capacity building for the Family Resource Center Association (FRCA) in Colorado to assist building a similar network in Alaska.

Trust grant funds for the FRCA are being used to explore and design an implementation plan for Alaska to replicate the Colorado Family Resource Center Network model. The Colorado model has been selected as an example of a successful system to support implementation of community-based Family Resource Centers in Alaska. The Colorado network will offer guidance, tools and training to expedite Alaska's planning and implementation of this critical infrastructure in support of Trust beneficiary families. Once established, the Alaska Family Resource Network will be sustained through a combination of statewide funding (including current state budget allocations) and agency partner fees and contributions to the network.

This capacity-building grant was initiated in early 2023 with a goal to build a network of Family Resource Centers in Alaska communities that want them and to safely reduce the need for OCS intervention by supporting family wellbeing. Success of this project will be seen throughout the year with limited information available at this time beyond interested communities engaging with the grantee and through partnership with the Alaska Impact Alliance.

Family Resource Center Association – Support and Tools for the AK Family Resource Center Network Comp Plan Information

| Goal | Objective |
|------------------------|-------------------------------|
| Goal 1 Early Childhood | 1.3 Reduce the impact of ACEs |

Family Resource Center Association – Support and Tools for the AK Family Resource Center Network Relevant Comp Plan Goals and Objectives:

Goal 1: Programs serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services. 1.3 Reduce the instances and impact of Adverse Childhood Experiences (ACEs) through community engagement and by improving social determinants of health. (Early Childhood Intervention & Prevention Priority Area)

Family Resource Center Association – Support and Tools for the AK Family Resource Center Network Performance Data:

No data yet available due to project start date of early 2023, and no reports yet submitted.

Family Resource Center Association – Support and Tools for the AK Family Resource Center Network Project Recommendations:

This project was requested as a one-time funding expenditure for the FRCA in Colorado to support the work of the Alaska Impact Alliance and partners in Alaska. Staff recommends reviewing results of the grant when that information is available.

| | | |
|---|--|-----------------------|
| Project Title: Early Childhood Governance: Public-Private Partnership | | |
| FY23 Grantees (through 4/26/2023): | | |
| <ul style="list-style-type: none"> N/A | | |
| Fund: Authority Grant | | |
| Years Funded: 3 | Project Category: To be determined based on individual project type | |
| FY22: \$50,000 | FY23: \$50,000 (not awarded due to extended FY22 timeline) | FY24: \$50,000 |
| <p>Project Description: This first year of funding for this project supports the next phase of outreach for the State of Alaska and community partner collaborative 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 the potential for broad systems transformation that will improve beneficiary outcomes.</p> <p>A core group of dedicated early childhood representatives has 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.</p> | | |
| <p>Summary of Grant Progress:</p> <p>Note: FY23 funds were not awarded due to the extension of FY22 funds that supported activities throughout FY23. This summary will analyze activities of FY22 awarded funds to the All-Alaska Pediatric Partnership as the workgroup identified lead for this project and will make recommendations for FY24.</p> <ul style="list-style-type: none"> This project was intended to lead the outreach and stakeholder engagement phase of the Early Childhood Governance Workgroup which convened in 2020 to develop a recommendation for a new approach to early childhood governance for Alaska. This work is identified as a systems change strategy in the state’s 2020-2025 early childhood strategic plan and is supported by many Trust partners and stakeholders related to early childhood services. Specifically, goal 3 of the plan recommended creating an improved, sustainable, and accountable governance approach with decision-making authority. This systems-level work prioritizes beneficiary families with young children of multiple beneficiary groups, particularly those who have experienced trauma (such as child welfare/foster care involved families) and require multiple state and federally funded services. These services are currently fragmented and often uncoordinated, which creates barriers to access and reduces opportunities for early intervention and prevention support. This work aligns with strategies of the Trust’s Early Childhood Intervention and Prevention priority area to improve access and streamline services for beneficiary families with young children. | | |

- This project was intended as a multi-year systems change project that would leverage public and private funds. The grantee, the All-Alaska Pediatric Partnership, successfully leveraged Trust funds during FY23 and obtained a 100% private donation match for the total Trustee approved budget to expand this work to date.
- FY22-23 activities were successful in convening focus groups and conducting interviews to develop a draft proposal for governance change based on the work of the original workgroup which convened in 2020. The grantee also successfully leveraged Trust funds to receive the above-mentioned private foundation donation match which will assist with contractual and other support to ensure the work continues to be collaborative. Challenges include changes in state and community agency leadership and the need for continuous education and engagement of all levels of agency staff.

Comp Plan Information

| Goal | Objective |
|------------------------|-------------------------------|
| Goal 1 Early Childhood | 1.3 Reduce the impact of ACEs |

Relevant Comp Plan Goals and Objectives: This project is focused on structural systems improvements for improved Trust and state program investment for beneficiary families with young children. (Early Childhood Intervention & Prevention Priority Area)

The project aligns with Comp Plan Goal 1: Programs serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services; 1.3 Reduce the instances and impact of Adverse Childhood Experiences (ACEs) through community engagement and by improving social determinants of health.

Performance Data:

FY22 funded activities were completed during FY23 and reported below. FY23 funds were not allocated due to shifted project timeline.

PM 1: Narrative that describes the timeline and activities

- electronic copy of draft recommendations produced (included in the report)

PM2: Roundtable audience reach

- 5 sessions held with varied target audiences invited
- 106 total participants

Project Recommendations: Staff recommends continued funding for this project in FY24-FY25.

Partners and stakeholders continue to highlight the need for improved state structures to reach families more effectively in need with appropriate services. This project supports the ongoing development of governance and state systems work as a solution to the current fragmentation of services. FY24 plans include continued outreach and analysis of current systems and potential future improvements, and the ongoing linkage to other state and Governor initiatives related to early childhood intervention and prevention, including childcare priorities. Trust staff will continue to monitor this project and work with program staff to identify alternative sustainable funding sources beyond FY25.

| | | |
|--|--|-------------------------------|
| Project Title: Kinship Caregiver Support | | |
| Grantee: Volunteers of America - Alaska | | |
| Fund: Authority Grant | | |
| Years Funded: 3 | Project Category: Capacity Building | |
| FY22: \$85,000 | FY23: \$85,000 | FY24: \$150,000 |
| <p>Project Description: The purpose of the Kinship Program is to offer services that promote the health and wellness of relatives raising children in Alaska and 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 various services for the caregiver and children, including emotional support, information & assistance, case management, support groups, caregiver training, respite, and other supplemental services.</p> <p>These services are delivered by a peer worker who has lived experience as a child raised by 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 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 accompanying 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.</p> | | |
| <p>Summary of Grant Progress: Trust beneficiary families involved in the child welfare system may identify family, or kinship, caregivers to care for children when their parents are unable to do so. Through state, federal and Trust funding, VOA offers a statewide program to support beneficiary families who provide kinship care rather than enter the foster care system. These families often feel overwhelmed and lack financial and other supports that are often accessible to foster families but not kinship families.</p> <p>FY23 services offered through this program were expanded to include therapeutic services. Therapeutic services will include Early Intervention and Support for Youth, Home-based, Individual, and Family Therapy. Services will be offered to Kinship Families, in addition to families and youth receiving services from VOA Alaska, regardless of behavioral health diagnosis.</p> <p>This project aligns with Early Childhood Intervention & Prevention priority area strategies in support of children who have experienced trauma, and also supports Trustee elevated priorities related to support of children and youth in the foster care system. The increase in Trust budgeted funds beginning in FY24 reflects this priority elevation which continues through FY25 as a Trust recommendation.</p> | | |
| Comp Plan Information | | |
| | Goal | Objective |
| | Goal 1 Early Childhood | 1.3 Reduce the impact of ACEs |

Relevant Comp Plan Goals and Objectives: This project is focused on direct services and capacity building for young beneficiaries involved in foster care who live in a relative placement. The project informs Trust program investment and state system improvements for children’s mental health.

The project aligns with Comp Plan Goal 1: Programs serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services; 1.3 Reduce the instances and impact of Adverse Childhood Experiences (ACEs) through community engagement by improving social determinants of health (Early Childhood Intervention & Prevention Priority Area)

Performance Data: FY22 reporting of this project indicated a high level of success as a direct service project for Trust beneficiary families, including 130 children enrolled in the program;) 70 family units served during the reporting period, for all program staff; 70% of children placed with a grandparent, 24% of children placed with aunt/uncle, 6% placed with a sibling; and 214 peer to peer hours provided during this reporting period. Families reported a high level of satisfaction with services (100%) during FY22, and 85% of survey participants reported an increase in their family’s quality of life and ability to continue caring for their children because of participating in the project.

This project is currently active for FY23; performance measures such as the number of children and families served, participant satisfaction, and self-reported quality of life improvements will be reported after the project period closes:

Project Recommendations:

Trust staff recommends this project for continued funding in FY24-25.

This multigenerational project is supported by all Trust advisory boards, including the Alaska Commission on Aging. Increased Trust budgeted funds beginning in FY24 for this program reflects Trustee requested priority shift of resources to beneficiary children in foster care, and the increased amount continues through FY25 as a staff recommendation. Fiscal projections based on cost modeling from VOA through technical assistance anticipate that new billable funding streams will make the expanded services and this program sustainable without Trust funding by FY26. Staff will continue to monitor the sustainability of this project and modify recommendations if required.

| | | |
|---|--|------------------------|
| Project Title: ACEs Data Linkage and Analysis | | |
| Grantee: DOH Division of Public Health | | |
| Fund: MHTAAR | | |
| Years Funded: 3 | Project Category: Capacity Building | |
| FY22: \$100,000 | FY23: \$100,000 | FY24: \$100,000 |
| Project Description: This project supports critical work highlighting the relationship between Adverse Childhood Experiences (ACEs) and the lifelong health that impacts Trust beneficiary outcomes. These funds will support staff and/or contractual work guided by the Department of Health, Division of Public Health’s Section of Women’s Children’s Family Health Epidemiology Unit. The project will plan, organize, and implement data analyses to guide the development of data-driven strategies and policies related to early intervention and prevention and enhance statewide capacity to evaluate childhood trauma-related data comprehensively. The project will work closely with Trust staff, advisory board staff, and the various Departments in developing short-term and long-term plans for ongoing initiatives that support the | | |

Trust's mission, vision, and priority areas related to early intervention and prevention of behavioral health disorders.

This FY23 project will build on previous work supported by the Trust and support the creation of a new Long-term non-permanent position (Epidemiology Specialist II (ES II)) within the Division of Public Health (DPH), Maternal Child Health Epidemiology Unit. The new position effectively upgrades the previous Trust Research Analyst III (RAIII) position. It will enhance work initiated and supported by the Alaska Mental Health Board and the Advisory Board on Alcoholism and Drug Abuse. The ES II position will support the work of the Boards to expand the research and analysis capacity of the Adverse Childhood Experiences (ACEs) links to health outcomes and trends, focusing on families experiencing mental, behavioral, and substance use challenges. The position will also support the Trust in reviewing and developing a methodology for more accurate and repeatable 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 Disorders have been linked with childhood 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 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. If history repeats itself, the impact of stressors resulting from significant disruptions in life due to natural disasters will be manifested by increased abuse and neglect. Further research continues to document a link between intergenerational trauma transmissions and cyclical manifestations of substance use behavior and mental health challenges. The Alaska Longitudinal Child Abuse and Neglect Linkage (ALCANLink) project has a unique data system and the ability to measure population-level impacts of child maltreatment over time and across generations, the ESII position is critical to ensure that the information mined from the ALCANLink project can help fill this gap in knowledge and support our many families with children who are at an increased risk of abuse, neglect, and other forms of trauma that contribute to increased adult mental health challenges and substance use issues.

Summary of Grant Progress:

- The project incumbent staff (Dr. Robyn Husa) funded by this project continues to be essential and well-respected members of cross-disciplinary teams that the Trust relies upon for beneficiary child/family data and program-related guidance. This project is a direct outcome of prior Trust funding focused on using data to better understand the impact of Adverse Childhood Experiences (ACEs) on Alaska children and adults. FY23 progress toward this goal includes scientific publication, a peer-reviewed article, the development of a pre-birth household challenges screening tool, data linkage expansion, multiple

presentations, the testing of a birth record predictive model, and a standard data structure with the child welfare system that will allow more robust shared analyses to improve services and supports for child welfare involved families and children in foster care.

- All beneficiary types benefit from the systems-level work of this data linkage project, particularly those who experience trauma and whose beneficiary status is related to trauma. This is a systems-related project with a focus on data linkage and integration.
- This project is a direct outcome of prior Trust funding focused on using data to better understand the impact of Adverse Childhood Experiences (ACEs) on Alaska children and adults. The increased understanding that Trust beneficiaries experience higher numbers of ACEs than the general population became the groundswell for statewide awareness and education on the topic and has made Alaska one of the leading states in the nation in trauma-engaged systems change.
- The systems level impact, while broad, currently provides a critical data and linkage point to integrate the new (as of FY23) state Department of Health and Department of Family & Community Services to streamline and improve support and monitoring of services for child welfare involved families. This work is critical to strategies identified by the Trust and partners through the Early Childhood Intervention & Prevention priority area. The impact of this project is expected to last beyond Trust funding as the linkages and protocol across systems are further institutionalized.
- The project experienced two main challenges this fiscal year. First, by expanding the ALCANLink cohort from 2009-2011 births to 2018, the sample size increased from roughly 3500 to over 11000. This is beneficial for precision but did result in the need to develop and validate a new statistical approach for estimating standard errors. After a statistical consult on complex survey designs and survival analysis, the grantee can return reliable and accurate results. Second, publishing information on the state website has been challenging due to various ill-defined requirements related to the accessibility of web content, the small number of releases, and data sharing. These internal processes are being worked on but have resulted in slower analysis to distribution of information products.

Comp Plan Information

| Goal | Objective |
|-----------------------------------|---------------------------------|
| Goal 9 Workforce, Data, & Funding | 9.5 Data-driven decision making |

Relevant Comp Plan Goals and Objectives:

This project is focused on data integration for improved Trust program investment and state system improvements for children’s mental health. (Early Childhood Intervention & Prevention Priority Area)

The project aligns with Comp Plan Goal 9: The State of Alaska has the workforce capacity, data, and technology systems in place to support the resources and funding of Alaska’s comprehensive integrated mental health program; 9.5 Encourage a culture of data-driven decision-making that includes data sharing, data analysis, and management to link support services across DOH divisions and other departments.

Performance Data: This project is currently active for FY23. Performance measures related to data analysis and planning will be reported after the project period closes.

Project Recommendations: Staff recommends continued funding for this project in FY24-FY25.

Partners and stakeholders continue to value the contributions of this funded position with the DOH Division of Public Health in increasing state and community capacity to understand the impact of ACEs on

beneficiary populations and design state and community interventions to support families and young children better. FY24 plans include the analysis and distribution of a new adult survey developed to better understand ACEs on a statewide level, which is anticipated to lead to beneficiary population insights. Additionally planned is an evaluation of the impact of home visiting programs using ALCANLink cohort data, as well as other analyses and dissemination that will help inform and guide future Trust investment across beneficiary groups and focus areas. Trust staff will continue to monitor this project and work with program staff to identify alternative sustainable funding sources beyond FY 25.

Project Title: Youth Brain Injury Program Coordinator

Grantee: Southeast Regional Resource Center

Fund: Authority Grant

Years Funded: 2

Project Category: Capacity Building

FY22: \$0

FY23: \$93,074

FY24: \$255,000

Project Description: The proposed Youth TBI Program Coordinator position will serve as the bridge connecting education sectors and families with medical and rehabilitation services to help students with brain injury achieve educational success. The position will be supported by and engage with multiple state partners including the Trust, the Division of Public Health (DPH), Division of Juvenile Justice (DJJ), Department of Education and Early Development (DEED), Division of Vocational Rehabilitation (DVR), as well as contractual and technical assistance from national and other expert consultants/coaches through additional contractual support.

This funding request is for FY22 and will facilitate the initiation of this project to align with position recruitment based on education workforce timelines. An anticipated second allocation for FY23 is expected in early 2023 and will be based on actual cost findings following this initial phase. The project is also planned for recommendation in the Trust FY24-25 budget with reduced funding over time as additional funding partners are identified over the first 2-3 years of this systems-building project. The initial goal of this project is to increase screening capacity through workforce development to improve services to justice-involved youth. After the successful implementation of the DJJ pilot project to screen justice-involved youth for a history of head injuries and current symptomology, the project will eventually expand to improve the health, academic and social outcomes of all Alaskan children/youth with traumatic brain injury (TBI) through support and mentorship of a newly created Brain Injury Coordinator position. The timeline for expansion is expected to begin after an initial approximately 12-month launch period. However, this timeline will be further developed through collaborative planning and partnership with SERRC staff and all involved partners.

The work will be contractually supported by two outside agencies who provide technical support and mentorship for the two arms of the project. SERRC will work closely with the Trust, the Division of Public Health and related partners as well as the agencies below:

Outside technical assistance includes:

1. University of Oregon: Return to School and Brain Injury Coordinator Mentorship:

The University of Oregon Center for Brain Injury Research and Training (<https://cbirt.org/>) (CBIRT) will provide mentorship and training to SERRC staff, in addition to other deliverables related to systems development for the ongoing work of the TABI Program Coordinator and education partners, including

the development of the Rapid Alaska Brain Injury Tool (RABIT) to screen justice-involved youth and development of a new website returntoschool.org/AK. State general funds and federal CDC Core State Injury Prevention funds from DPH were leveraged for this work.

2. NASHIA: National Association of Head Injury Administrators:

With funding from the Alaska Mental Health Trust (Disability Justice Focus Area grant), Alaska was accepted into the (NASHIA) Learning Practice Academy for professionals working with correction and juvenile justice partners focused on brain injury. NASHIA is the leading source of information and education for state governments that support brain injury programs by promoting partnerships and building systems to meet the needs of individuals with brain injury and their families.

Summary of Grant Progress: This capacity building and direct service project initiative is an Alaska statewide response to the long-identified need for Return to School (post-brain injury accommodations in schools) and community-based TABI resources for youth. The project leverages systems and capacity-building funds from the Division of Public Health (GF and federal). It will effectively build infrastructure for coordinated and long-term services for youth affected by TABI and their families. This project has strong support from DJJ partners as it will increase their internal capacity to understand and respond to justice-involved youth with brain injury and provide a streamlined community and school service referral process to ensure beneficiary youth needs are met.

Alaska has one of the highest rates of traumatic brain injury in the nation. Evidence indicates that as many as 40% of youth involved in the juvenile justice system have a history of brain injury. The AK-DOH, Injury Prevention Unit braided funding across the state and federal sources including, state general funds, CDC, and the Trust to coordinate a brain injury awareness public education campaign, develop a standard process for brain injury screening in the juvenile justice system as well as facilitation of community and school-based supports for youth identified in the project.

FY23 activities were highly successful and further quantitative data will be reported by the agency when the project period concludes in June 2023. Feedback from state and community partners has been overwhelmingly positive and supportive of program expansion beginning in FY24. FY23 grant achievements include SERRC hiring a Youth Brain Injury Coordinator, securing key partnerships with the Division of Juvenile Justice (DJJ), creating a new Defend Your Brain public education campaign, and engaging outside technical assistance from the National Association of State Head Injury Administrators (NASHIA) and University of Oregon Center for Brain Injury Research and Training (CBIRT). During FY23, this collaborative project planning resulted in the development and launch of an Alaska "Return to School" website with resources for educators, parents, and support school staff, the creation of the Rapid Alaska Brain Injury Tool (RABIT) for screening justice-involved youth, creation of a DJJ policy to administer and track screening outcomes, workforce training of DJJ staff about brain injury and how to support youth experiencing brain injury effectively, and identification of critical community-based support opportunities such as vocational rehabilitation.

FY24 plans currently include expansion into the Bethel region through the support of a newly hired regional youth brain injury coordinator with SERRC using Trustee approved funds. The team continues to provide educational and networking opportunities related to youth brain injury and aligns with Trust systems work for brain injury service improvements.

Comp Plan Information

| | Goal | Objective | |
|--|--|-----------------------------------|--|
| | Goal 7 Services in the Least Restrictive Environment | 7.2 Long-term services & supports | |
| <p>Relevant Comp Plan Goals and Objectives: This project is focused on capacity building and service linkage for justice-involved youth beneficiaries experiencing brain injury. The project informs beneficiary population work and guides Trust program investment and state system improvements.</p> <p>This project aligns with Comp Plan Goal 7: Services in the least restrictive environment; 7.2 Increase access to effective and flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement.</p> | | | |
| <p>Performance Data: This project is currently active for FY23, performance measures related to referrals, activities and participants will be reported after the project period closes:</p> | | | |
| <p>Project Recommendations: Staff recommends this project with increased funding for additional staff to expand the program beyond the pilot community of Fairbanks (trustees approved FY24 increase in May 2023) with a recommended slight additional increase in FY25 to support inflation costs and ensure continuity of services.</p> <p>This project supports the priorities of the TABI advisory council related to the "Return to School" best practices for beneficiary students returning to school services following brain injury. The collaborative work of the TABI council and its members supports and guides this project which the Division of Public Health Injury Prevention Unit and key partners primarily drive. Future years of funding will expand measures to include evaluating the "Return to School" framework implemented in Alaska through technical assistance and coaching from the University of Oregon, CBIRT. Trust staff will continue to monitor this project and work with program staff to identify alternative sustainable funding sources beyond FY 25.</p> | | | |