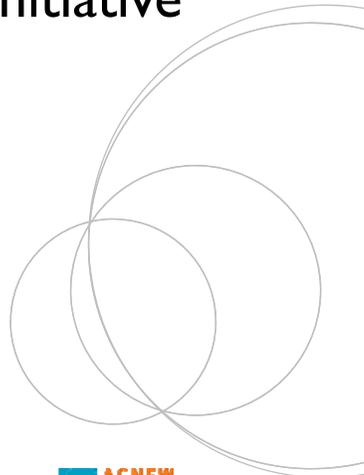


Beneficiary Projects Initiative

Alaska Mental Health Trust Authority
Planning Committee
July 26, 2016



Engage Plan Implement  AGNEW
BECK

Presentation outline

1. Peer Support - National trends
2. Organizational Assessment & Findings
3. Recommendations
4. Discussion

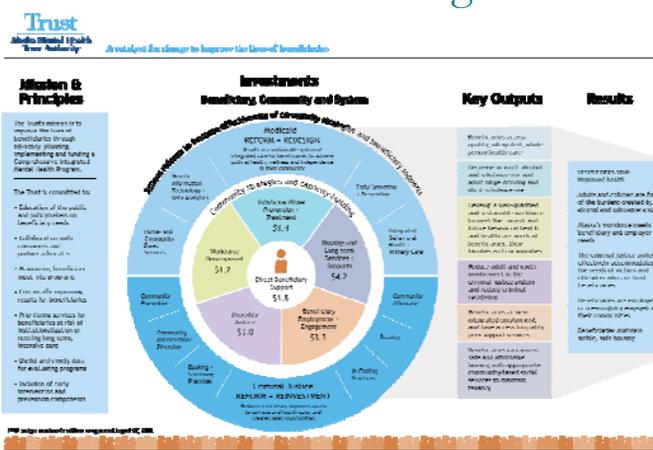
Peer Support

Individuals with lived experience helping to support others

- Outreach and engagement
- Assistance in daily management
- Social and emotional support
- Linkages to clinical care and community resources
- Ongoing support, extended and overtime

National trends

Beneficiary organizations play a key role in systems reform and achieving results



National trends

Estimated 7467 groups run by and for mental health consumers and/or families in the U.S.

- Of these, 3315 (44.4%) classify themselves as mental health mutual support groups, 3019 (40.4%) as mental health self-help organizations, and 1133 (15.2%) as consumer-operated services.
- Less than 1% of consumers view the activities of support groups as a substitute for services received by mental health professionals.
- 94% report that they were referred from psychiatrists, therapists, hospitals or mental health agencies.

Source: National Estimates for Mental Health Mutual Support Groups, Self Help Organizations, and Consumer-Operated Services, 2006;

National trends

- Outreach and engagement
- Reduction of emergency room use and hospital admissions
- Recovery maintenance/reduced relapse
- Increase retention in treatment
- Improved relationships with providers
- Increased satisfaction with services

National trends

A 2008 Australian study of mental health peer support provided in a hospital setting:

- 300 bed days saved in first 3 months, equating to \$93,150 AUS saved after project set up, delivery and administration costs of approximately \$19,850. Feedback from all stakeholders was overwhelmingly positive.

National trends

In a study of participants in Vermont and Minnesota, participants reported significant increases in

- their hopefulness for their own recovery;
- awareness of their own early warning signs of decompensation;
- use of wellness tools in their daily routine;
- awareness of their own symptom triggers;
- having a crisis plan in place;
- having a plan for dealing with symptoms;
- having a social support system;
- ability to take responsibility for their own wellness.

Assessing Organization Capacity

Organizations assessed:

- Alaska Mental Health Consumer Web (Anchorage)
- Alaska Peer Support Consortium (statewide)
- Alaska Youth and Family Network (Anchorage + Mat-Su)
- Brave Heart Volunteers (Sitka)
- CHOICES Consumers Having Ownership In Creating Effective Services (Anchorage)
- NAMI Anchorage
- NAMI Juneau
- Polaris House (Juneau)

Assessment method

Goals of assessment:

- Understand the capacity, strengths, weaknesses of the cohort and individual grantee organizations;
- Understand the sustainability options available to them, and to inform decision-making around future technical assistance;
- Assess organizations capacity to report on impact with data
- Track change and growth over time.

Assessment method

Domains of assessment:

- Organizational foundation
- Program
- Human resources
- Communications + Decision making
- Fiscal
- Process + Performance improvement
- Board

Assessment method

1. Comprehensive organizational document review
2. Qualitative interviews
3. Self and contractor evaluation with tool
4. Agreement on evaluation scores
5. Key recommendations for organizational capacity development & strategic planning

ASSESSMENT FINDINGS

Alaska Youth and Family Network Overview

- Multi-community family fun, peer-delivered provider employing qualified beneficiaries to provide home and community based services to other beneficiaries
- Over 2,900 beneficiaries served – individual beneficiaries & families

Alaska Youth and Family Network Strengths

- Home and community based services
- Highly-qualified/trained staff, who bring lived, personal experience with behavioral health issues, to their work.
- Effective advocacy and navigation among state agencies – focus on family
- Meet the individual and family where they are

“AYFN is receiving national recognition and being presented as a model to family-run organizations nationwide as an example of how to successfully blend and professionalize parent-to-parent, youth-to-youth support and advocacy at individual level with more traditionally oriented community-based therapeutic behavioral health services.”

Alaska Youth and Family Network Challenges

- More diverse and strategic partnerships and alliances with other for-profit, nonprofit and public sector entities.
- Need improved mechanism or tools for rigorously evaluating program outcomes.
- Need long term funding/sustainability plan, diversifying revenue streams and outlining and managing target goals.

Alaska Youth and Family Network

- Provided support to 458 families and 1,046 family members during third quarter, 56% of whom were involved with OCS; only 9 of the 485 (2%) of children and youth served moved to a more restrictive level of care. (May 2014 Demonstration Project Proposal)

Alaska Youth and Family Network Fiscal Outlook

- Grant funded – outreach, engagement/navigation
- Possibility of Medicaid for independent case management services or as a waiver provider and provide limited Medicaid services
 - Other potential billing options through Tri-Care and/or Magellan
- Contractual fee-for-service

CHOICES

Overview

- Peer-run community mental health provider empowering and guiding consumers on self-directed path to improve their lives, learn ways to manage mental health issues and begin journey of recovery.
- Offer strength based/person-centered programs:
 - Peer Bridgers: engagement and relationship support for individuals in inpatient psychiatric facilities to guide and mentor during transition back to community
 - Recovery Coordination: Intensive Case Management and Care Coordination
 - Housing First-Assertive Community Treatment: comprehensive, cross-disciplinary services brought to homeless consumers needing intensive support to move forward on path to recovery

CHOICES

Recovery Coordination Program (data from first half of FY16)

- Of the 45 clients served:
 - 90% were satisfied with the program's services
 - 80% felt their quality of life improved as a result of services
 - 22% secured housing
 - 20% secured employment

Peer Bridger Program (data from third quarter of FY16)

- Of the 227 clients served:
 - 59% were living in private residences, 18% were in residential care, and 16% are homeless or living in a shelter
 - 81% were unemployed, 13% were not in the labor force, and 4% were employed

CHOICES

Housing First-Assertive Community Treatment Program (first half of FY16)

- Of the 71 clients served, 41% (29) were enrolled in program, receiving active outreach and engagement services.
- 31% placed in permanent/stable housing
- 72% received tenancy support & access to public benefits

CHOICES - Fiscal Outlook

- **Grant funded**
 - Peer Bridger program built on grant funding
 - Housing First program grant funded for start-up with intention to bill Medicaid for services
 - Rate review for ACT services
- **On billing path toward sustainability**
 - Not all services reimbursable but working toward billing Medicaid for more services
- **Billing Medicaid and other sources, fundraising**

Alaska Peer Support Consortium Overview

- Statewide, membership-based non-profit of 28 peer support organizations
- Provides trainings and support services to peers, communities and peer-run organizations across Alaska
- Services empower member organizations to support individuals who are least likely to receive services from clinical settings
- Mentoring to other peer organizations, or entities pursuing peer services
- Peer community meetings

Alaska Peer Support Consortium

Peer participant feedback in trainings identified that trainings/workshops improve people's lives in two primary ways:

- Improved ability to remain well with a better understanding of self-care and personal responsibility, and
- Ability to be a more effective Peer Specialist through skills acquisition, allowing for improved job performance and increased employment options

Alaska Peer Support Consortium Fiscal Outlook

- Grant funded – limited contractual income
- Need to identify clear role for Consortium and how to best meet the needs of the peer support community
- Prioritize fee-for-service for trainings and services provided to peer support organizations, fundraising

Brave Heart Volunteers Overview

- Provides a continuum of quality education and support services for families and individuals facing terminal or chronic illness, dementia, frailty, disabilities and hospitalization
- Fills a gap in Sitka and provides a safety net for individuals, families and caregivers
- Out of approximately 700 families served, More than 50% of care receivers were residents of the Sitka Pioneer Home

Brave Heart Volunteers

- Over 80% of recipients of services re-engage with BHV as volunteers or donors (Trust Grant Report, FY14)
- In 2014,
 - More than 2,912 volunteer hours visiting with isolated elders and chronically ill community members.
 - More than 73 professionals and family caregivers trained to improve support for individuals with Alzheimer's Disease and Related Dementia (ADRD).

Brave Heart Volunteers

Fiscal Outlook

- On path toward sustainability through fundraising, donations, and an endowment fund
 - In FY14, 48% of funds came from event fundraising, “friend raising” and donations
 - Endowment is over \$114,000 with the goal of over \$400,000 through future *planned giving* commitments
- Focus: fee-for-service for workshop participants, large multi-year federal grant, fundraising

NAMI Anchorage + Juneau

Overview

- Provide *support, education, and advocacy* for individuals living with mental illness, their families and friends, and the larger community
- Utilizes peer volunteers to run most of its programs and services
 - All activities, programs and events provided at no charge to consumers
- NAMI Anchorage served over 110 Trust beneficiaries
- NAMI Juneau served over 185 Trust beneficiaries and had over 70 members

NAMI Anchorage

- Support groups, break isolation, learn coping skills and feel better about situation
- High degree of satisfaction
- Improved quality of life with NAMI support
- Improvements in life functioning

NAMI Juneau

- Served approximately 200 beneficiaries, families & provider.
- Facilitates education and training to community
 - 88% (n=69) stated presentations provided them with new mental health information
- Family support and Family to Family (EBP)

NAMI Anchorage + Juneau Fiscal Outlook

- **Grant funded**
 - NAMI Anchorage: 80% reliant on grant funding from The Trust
 - NAMI Juneau: funded through The Trust and other community grants
- **NAMI National doesn't allow NAMI affiliates to bill for services**
- **NAMI Anchorage: fundraising, other grant sources, donations**
- **NAMI Juneau: foundation-based funding, two major fundraisers, donor development, earned revenue, membership dues**

Polaris House Overview

- Clubhouse International model, an accredited peer-support program that has been included on SAMHSA's National Registry of Evidence-Based Practices and Programs
- Designed for people whose lives have been severely disrupted by mental illness; offering a safe, restorative environment where relationships build and members can begin to experience success.
- Provided support for 84 of its 390 members in the most recent quarter whose primary diagnoses were:
 - Schizophrenic/schizophrenic affective disorder (37%)
 - Bipolar disorders (37%)
 - Major depressive disorders (24%)

Polaris House Outputs for Q1-Q3 of FY16

	Q1 FY 16	Q2 FY 16	Q3 FY 16		Q1 FY 16	Q2 FY 16	Q3 FY 16
EMPLOYMENT				TRANSPORTATION			
In the first three quarters of FY 2016, the number of the 84 members who ...				In the first three quarters of FY 2016, the number of the 84 active members who ...			
Received job readiness training	22	34	29	Received assistance in applying for entitlement programs	24	11	16
Received assistance completing resumes	17	15	11	Participated in "Member's Needs" transportation	37	23	26
Received transportation to interviews	5	0	0	Received transportation to health care	12	5	7
Received coaching for job interviews	12	30	17	Received transportation to behavioral health agency	6	3	6
Participated in transitional employment	10	20	25	Received transportation to food banks	8	10	13
HOUSING				Received transportation to clothing banks			
In the first three quarters of FY 2016, the number of the 84 members who ...				Received transportation to other community resources			
Were homeless at the beginning of the period	12	10	10	OTHER			
Were homeless at the end of the period	10	9	11	In the first three quarters of FY 2016, the number of the 84 active members who ...			
Were in improved housing situations	16	2	6	Received support in applying for Trust Maui Grants	4	3	5
Received advocacy supports with landlords	11	2	2	Received outreach services	75	66	78
Received assistance with moving	6	3	3	Were hospitalized for acute mental health need	3	3	3
Assisted in applications for housing funds	1	5	2	Were involved with police (self report or staff monitoring)	6	13	6
Assisted in rental applications	19	10	8	EDUCATION			
In the first three quarters of FY 2016, the number of the 84 active members who ...				In the first three quarters of FY 2016, the number of the 84 active members who ...			
Enrolled in GED programs	2	0	1	Enrolled in certification programs	3	3	3
Enrolled in certification programs	3	3	3	Enrolled in college classes	1	1	1
Enrolled in college classes	1	1	1	Participated in literacy efforts in the clubhouse	2	12	3
Participated in literacy efforts in the clubhouse	2	12	3				

Polaris House

Outcomes

- 29% (24) improved their housing over the first three quarters of FY16, generally moving out of homelessness or from temporary/emergency shelter to longer-term housing.
- On average, 13% of its active members are homeless at engagement.
- Polaris House has supported 11% of its 84 active members in securing employment.

Polaris House fiscal outlook

- Grant funded
- Medicaid incongruent with clubhouse model
- May be able to provide fee-for-service employment services through supportive employment programs at DVR
- Fee-for-service for meals, snacks and certain employment supports, fundraising

Alaska Mental Health Consumer Web Overview

- Member-based, drop-in and recovery center serving an average of 73 consumers daily; membership of over 2,000 persons
- 92% of clients are Trust beneficiaries
 - Of the 425 Trust Beneficiaries served, 66% (280) sought housing assistance and 44% (185) sought supportive services
- Services well-suited for members who have become disenfranchised from traditional support services and are weary of asking for help
- Individual and group support; classes to help with employment, financing, life skills, housing; as well as transportation to activities and appointments

Alaska Mental Health Consumer Web

Temporary Housing and Placement (data from FFY2015)

- Of 36 members who were living in temporary shelter, 38% moved into permanent housing.
- Of 49 homeless or temporarily sheltered members who found permanent housing, 59% (29) were in subsidized housing; 37% (18) secured unsubsidized housing; 2% (1) permanently moved in with friends; 2% (1) moved into supportive housing.

Employment (data from second half of SFY2015)

- Of the 45 members requesting employment, 58% (26) obtained full-time employment and 20% (9) obtained part-time employment.
- Of the 35 total employed, 57% (20) maintained employment.

Alaska Mental Health Consumer Web

Outreach (data from FY2015)

- Of the 412 persons served through outreach activities,
 - 5% (22) left the streets for a shelter or transitional program; 2% (7) left the streets for substance abuse treatment; and 2% left homelessness for a permanent housing solution.

Alaska Mental Health Consumer Web Fiscal Outlook

- Grant funded (DBH, Trust, AHFC)
- Challenges with Medicaid and impact on services
- May be able to provide fee-for-service employment services through supportive employment programs at DVR
- Focus: donations, fundraising, identify contractual fee for service opportunities through Medicaid reform

RECOMMENDATIONS

Recommendations

Peer support is critical for systems change:

“Early in treatment, peer providers may possess distinctive skills in communicating positive regard, understanding, and acceptance to clients and a facility for increasing treatment participation among the most disengaged, leading to greater motivation for further treatment and use of peer-based community services. **Findings strongly suggest that peer providers serve a valued role in quickly forging therapeutic connections with persons typically considered to be among the most alienated from the health care service system.**”

Source: Sells, D., Davidson, L., Jewell, C., Falzer, P., & Rowe, M. (2006). The treatment relationship in peer-based and regular case management for clients with severe mental illness. *Psychiatric Services* 2006, 57(8):1179–1184.

Recommendations

Organizational Capacity:

- Support organizations to develop, implement and monitor strategic planning, goals and action plans and tracking clear outcomes + indicators

Recommendations

Program:

- Continue to support organizations as strong advocates for the clients they serve, who help their clients find their voices to advocate for themselves
- Improve partnerships with State and other community organizations to increase referrals and community and stakeholder perception

Process and Performance Improvements:

- Assist organizations with identifying and tracking measurable outcomes aligned with Trust priorities
- Focus on impacts
- Training needed to build capacity and knowledge of gathering, tracking and using data

Recommendations

Fiscal health:

- Assist with developing clear strategic business plans and financial pro forma to identify targets for financial sustainability
- Pursue DVR funding for employment
- Support developing compelling messaging for fundraising and positive public image
- Training to increase appropriate Medicaid billing
- Leverage reform opportunities fully

Recommendations

Human Resources:

- Help organizations to provide adequate salary and benefit packages for staff to increase retention
- Support succession planning and clear roles and expectation for executive directors
- Increase volunteer support especially related to fundraising
- Training to engage board members effectively

Recommendations

Communications:

- In general an area of improvement opportunity

Boards of Directors:

- Significant focus on recruitment and retention of qualified board members – with 51% beneficiary governance structures in place
- Emphasis on roles and responsibilities
- Fiscal and revenue

Recommendation forward

- Programs are filling gaps in communities for Trust beneficiaries.
- Growing opportunities for peer workforce (Reentry, integration, health homes, recovery navigation etc.)
- In a changing environment through reforms, key to leverage opportunities to refinance, where possible peer support.
- Other states have successfully included peer support in reforms and waiver demonstrations.
- Programs need assistance in successfully using data to have narrative on impacts to further justify role in Comprehensive Mental Health Plan.

Discussion

Thank you!