ALASKA MENTAL HEALTH TRUST AUTHORITY PLANNING COMMITTEE MEETING

Teleconference

August 6, 2014 9:03 a.m.

Taken at:
Alaska Mental Health Trust Authority
3745 Community Park Loop, Suite 200
Anchorage, Alaska 99508

Trustees Present:

Paula Easley, Chair Mary Jane Michael Russ Webb Laraine Derr Larry Norene Mike Barton (via telephone)

Trust staff present:

Jeff Jessee
Steve Williams
Nancy Burke
Carley Lawrence
Valette Keller
Marilyn McMillan
Carrie Predeger
Kevin Buckland
Michael Baldwin
Amanda Lofgren
Katie Baldwin-Johnson
Luke Lind
Miri Smith-Coolidge

Others Participating:

Denise Daniello; Kate Burkhart; Teresa Holt; Jill Hodges Still; Tawny Buck; Adam Rutherford; Kathy Craft; Lisa Cauble; Sheila Soule; Laura Shue (via telephone); Aleesha Towns-Bain; Stephanie Krost; Gayle Sorenson, (via telephone).

PROCEEDINGS

CHAIR EASLEY calls the Planning Committee meeting to order at 9:03 a.m. She recognizes the Trustees present and states that the committee members are Russ Webb, Mary Jane Michael, she, and Mike Barton as ex-officio. She moves on to the changes on the agenda, explaining that Housing and Long-Term Services and Supports has been moved to tomorrow at 9:00 a.m.; Workforce Development has been moved to 2:30 p.m. today; and Beneficiary Employment and Engagement moved to 3:30 this afternoon. She asks for any other changes. There being none, she asks for any announcements.

MR. WILLIAMS acknowledges all the work that gets done by Marilyn McMillan, Kevin Buckland and Valette Keller in developing what was presented yesterday.

CHAIR EASLEY moves on, beginning with the Governor's Council on Disabilities and Special Education, and recognizes Teresa Holt.

GOVERNOR'S COUNCIL ON DISABILITIES AND SPECIAL EDUCATION

MS. HOLT begins her presentation and states that the Council is not making any operating GF/MH recommendations this year, adding that the last three or four years have been pretty successful. She continues that the three projects that are being brought before the Trust are not intended to be ongoing, sustainable projects; and there is a need to talk to those folks and see where their plan is for the future, and how they will sustain these projects. She states that the first one is the Autism Workforce Development Capacity-Building. She continues that this is money that goes through Public Health, Maternal, Family, and Child Health. She explains that three things are done with this money: Training folks to become board-certified training analysts to work with individuals, Trust Beneficiaries, who have significant behavior challenges; second is working with UAA to provide a Certificate of Occupational Endorsement around autism; and to provide a Summer Autism Institute that trains both professionals and families regarding autism. She continues that when talking about sustainability there was a change in requirements around board-certified behavior analysts and supervision that were prepared to be done this fiscal year. She states that one of the requirements for this program is having 1500 hours of supervision, which is needed. She explains the program, and answers questions. She moves on, stating that the next agency set of funding is for the Alaska Autism Resource Center, which is run out of the Special Education Service Agency. She continues that this started with the Council's autism initiative to fund a place where families, providers, anyone could get information and referral to provide some training and then host a national presenter every year. She adds this project started with Trust money, and Patrick Pillai, the executive director of SESA, explained that sustainability has not been thought of at this point. She continues that they are asking for continued funding for FY16 and possibly '17. She explains the program and how it was developed and how it works. She moves on, stating that the next program is a national curriculum for parent training and positive behavioral supports through the CFF 1. It goes through two different groups, the Stone Soup Group and Thread, which is the State child care referral agency. She continues that there has been a great response from the parents and the staff. She states that the Council feels that this is important because it seems to reach both parties at the crisis moment. She asks that funding continue through FY16 at \$40,000, which

would be for the project at Thread. She adds that this money actually goes through the Early Intervention Infant Learning Program. She asks for any questions.

A short discussion ensues.

MR. WILLIAMS states that the information and presentations today are to provide Trustees the opportunity to hear the budget recommendations, to provide updates and answer questions. He continues that no action needs to be taken by the Trustees at this time.

CHAIR EASLEY thanks Mr. Williams for the clarification, and recognizes Denise Daniello.

ALASKA COMMISSION ON AGING

MS. DANIELLO states that she is the executive director for the Alaska Commission on Aging and thanks the Trustees for the opportunity to present the budget recommendations for '16 and '17. She gives a quick update on population trends for the Senior Trust Beneficiaries; then introduces the GF/MH recommendations for FY2016, talks a bit about the recommendations using the RBA framework and how they align with the Department of Health and Social Services' performance accountability RBA framework; and then answers any questions. She explains that the Alaska Commission on Aging is an 11-member board with the majority of members being public members appointed by the Governor, most of which are of senior age. She continues that the Commission works hard to make Alaska the best place to live to meaningfully contribute and to grow old with dignity. She adds that they also work to make sure that seniors and Senior Trust Beneficiaries have access to high-quality appropriate services at home when they are needed. On the budget recommendations she begins with a \$325,000 GF/MH increase in base funding for the National Family Caregiver Support Program; next is a recommendation for a \$350,000 GF/MH increase in base funding for senior in-home services; and the third is for the Aging and Disability Resource Centers, with an increase of MHTAAR funding in the amount of \$300,000, which is \$175,000 additional funding. She states that the total recommendation is \$975,000 to the Trust, which includes \$675,000 GF/MH, and \$300,000 MHTAAR to the Housing and Long-Term Support Services focus area.

A question-and-answer discussion ensues.

MS. DANIELLO continues her slide presentation, explaining as she goes along. She moves on, explaining the budget recommendations, stating that the goal is to develop more competent and stable unpaid caregivers because caregiving for a person with dementia is a much longer period of time than someone with a lot of health conditions and is a lot more difficult. She continues that another goal is to make sure that family caregivers get the supports needed to continue providing care at home. She moves on and gives the number of Trust Beneficiaries served in FY2013: people with mental illness was 829; people with intellectual and developmental disabilities, 725; people with Alzheimer's disease and related dementia, 520; people with brain injury, 350. She asks for any questions.

CHAIR EASLEY thanks Ms. Daniello, and calls for a break.

(Break.)

CHAIR EASLEY calls the Planning Committee back to order and recognizes Kate Burkhart, who will address the 2016 capital recommendations for the four advisory boards.

2016 CAPITAL RECOMMENDATIONS FOR THE FOUR ADVISORY BOARDS

MS. BURKHART states that she is the executive director of the Alaska Mental Health Board and the Advisory Board on Alcoholism and Drug Abuse. She adds that Teresa Holt and Denise Daniello will help with the presentation because these are joint capital recommendations as a group; and the focus is on those projects that benefit all Beneficiary groups. She begins with deferred maintenance with a recommendation of \$1 million in GF/MH for this ongoing capital project. She states that this program is important and continues to operate because most health and social services agencies have a limited ability to build up reserves with which to deal with emergency issues and often prioritize services to Beneficiaries' services over facility upgrades.

CHAIR EASLEY states that ENSTAR increased their cost of service by 48 percent and some adult seniors are frantic about that because they are on fixed incomes. She adds that this has a potential for throwing some people into the homeless classification.

MS. BURKHART responds that the heating assistance program is available to seniors and low-income families. She states that the concern with the heating assistance program is that the Alaska State Legislature capped the program two years ago. She continues that it used to be run as an entitlement program, but now has limited access and the funding has been reduced. She adds that this is compounded by the fact that Federal LIHEAP funds and State allocations are being reduced. She explains that LIHEAP is the Low-Income Heating and Energy Assistance Program. She moves on to coordinated transportation, stating that this is an ongoing program and an annual recommendation. She explains that the Department of Transportation & Public Facilities operates a competitive grant program through which communities can apply for funds for coordinated transportation. She states that the Mental Health Board and the Advisory Board on Alcoholism and Drug Abuse are on operating increments and have not had an opportunity to make MHTAAR recommendations. She continues that the limited resources have been prioritized to help quantify the impact of no growth rather than attempting to secure increments.

CHAIR EASLEY thanks Ms. Burkhart, and recognizes Mr. Baldwin who will go through the RBA scorecard review.

RBA SCORECARD REVIEW

MS. BALDWIN begins with an update on the software and how that will apply to the focus areas. He states that they are in the process of transitioning into using the software to monitor the RBA matrices, the results indicators and performance measures. He continues that one of the main goals is to shift to using this as opposed to hard copies; keep it updated and current on a regular basis; and to embed this into the Web site. He gives a demonstration of how to use the program by opening and going through Bring the Kids Home. He states that it could be opened during a meeting with the goal of always keeping it current.

CHAIR EASLEY asks if the whole scorecard could be printed.

MR. BALDWIN replies that the behavioral health scorecard is separate from this.

CHAIR EASLEY asks if this would feed into it.

MR. BALDWIN replies that it is two separate processes, although some of the information might potentially feed up into the behavioral health scorecard. He goes through Housing and Long-Term Services.

CHAIR EASLEY states that this will be helpful for any of the advocacy groups presenting to the Legislature.

MR. BALDWIN agrees, and states that the goal is to keep it concise, readable and accessible to everyone.

MS. BURKHART states that this tool is a constant way to update the partners and is amazing.

A short discussion ensues.

CHAIR EASLEY asks for any questions.

MS. JESSEE gives a quick update on Bring the Kids Home, stating that they have been phasing out of that focus area. He continues that there are a few things left to do -- the most important being maintaining the surveillance on the numbers and to maintain the partnerships created. He adds that one of the best things about the whole work group process is being able to get OCS, DJJ and DBH regularly engaged with each other and collaborating on how to develop services across the entire service system. He states that it will no longer appear in the budget and will continue to be a continuing project.

TRUSTEE WEBB asks for more information and details.

MR. JESSEE states that the Office of Children's Services runs their own residential system of beds, and the goal was to integrate all those into one division so it could be managed as a group. He continues that Brita Bishop, the coordinator, is moving out of the Commissioner's Office, back into the Division of Behavioral Health, and will continue the role of coordinator. He states that bringing the education system onboard so that these kids can be identified earlier never really got finished.

CHAIR EASLEY asks for any questions. There being none, she thanks Mr. Jessee and breaks for lunch. She states that the meeting will reconvene at 1:15.

(Lunch break.)

CHAIR EASLEY calls the Planning Committee meeting back to order, and recognizes Nancy Burke with an introduction to the focus areas.

MS. BURKE begins with a short historical review of why the focus areas were started and how it was done. She states that the first four were Disability Justice, Bring the Kids Home, Beneficiary Projects Initiative and the Affordable Housing focus areas. She continues that Workforce was then added, and moves on, going through all the new focus areas. She explains that the focus areas will be presented by each of the overseeing program officers.

CHAIR EASLEY asks Mr. Williams to go through Disability Justice.

MR. WILLIAMS states that for Disability Justice the Court System is always involved, the Office of Public Advocacy, Department of Law, and Public Defender Agency. He continues that the advisory boards have been involved with the strategy and budget development, as well as Center for Human Development and the Division of Juvenile Justice and Behavioral Health. He states that four highlighted goals are: sustaining and expanding of therapeutic court intervention and other types of divergent projects; continue working with the Barrow community; working on the Hornby Zeller report; and fourth is continuing to work with Norton Sound in Nome to develop a wellness center that can provide expanded substance abuse services to the Bering Strait region.

TRUSTEE MICHAEL asks if the most needed types of services are being tracked.

MR. WILLIAMS replies that it is not being tracked formally, but it is not too difficult to identify. He states that the behavioral health centers have restricted their target populations to those with severe and persistent mental illnesses; and the services directed to that are those that can be billed directly to Medicaid.

MS. BURKHART clarifies that it is not the community behavioral health centers that have decided to only serve individuals with serious alcohol or substance abuse problems; that is a determination made by the Department of Health and Social Services. She continues that while community outreach is not billable, all behavioral health services that are medically necessary are billable, whether they are delivered in the clinic or in the community. She states that the issue is that the time it takes to get from the clinic to the person is not billable, because that is not a medical service.

A short discussion ensues.

TRUSTEE WEBB points out that the system which once was robust is now eroded to the point of servicing only the minimal group of the most severely impacted people and those involved primarily in the criminal justice system or institutionalized at API. He states that the issue raises a need to rethink some of the strategies in this particular focus area because many are dependent on a system, which at the time the strategies were begun, were relatively robust.

TRUSTEE MICHAEL agrees, and asks to be included in that conversation. She states the need to be able to identify the options for those people so they can get some level of service.

MR. WILLIAMS states that some of the approaches are being adjusted for what is going on out in the community. He continues on how to take the approaches that have demonstrated results and get them to provide the largest impact for the system.

TRUSTEE MICHAEL states agreement and is interested in knowing what the gaps are, what it will take to fix or at least pilot so the rest of the funders can see what it looks like.

CHAIR EASLEY asks if the Hornby Zeller report addresses some of those gaps with recommendations.

MR. WILLIAMS replies yes, and continues his presentation. He moves on to the percent of Trust Beneficiaries identified in the Department of Corrections on a single day, June 30, 2012; June 30, 2006; June 30, 1997. He states the key differences between the studies is the latest is a broader sample of DOC population; from a research approach there were additional datasets used to cross-reference DOC population; it has an expanded definition of Trust Beneficiary; and how Trust Beneficiaries were identified. He continues that, in addition, there has been a significant increase not only in behavioral health/mental health clinical capacity, but also what the Department is implementing in terms of treatment programming within institutions. He adds that it is a huge increase looking back to the other study, and the four-year time frame that research was conducted. He states that additional datasets were used in this study to cross-reference DOC populations, and this study also has an expanded definition of Trust Beneficiary. He continues, explaining the study as he goes along.

TRUSTEE WEBB asks for an explanation of what LSI-R means.

MR. WILLIAMS replies level of service inventory revised.

TRUSTEE WEBB states that this version looks at risk factors and needs of the target population.

MR. WILLIAMS states that this is new to DOC. He continues that DOC is trying to make sure that their resources are targeted to the right individuals at the right levels that will do two things: make sure the public is protected; and to make sure that something is not being overdone that will have a counterproductive effect on the individual. He moves on to the budget worksheet and the matrix document, and goes through the highlights of things that are different from FY15 changes.

CHAIR EASLEY asks if Hornby Zeller identified drug-based incarceration that might be changed.

MR. WILLIAMS replies that they did not make any recommendation on whether possession of certain drugs or amounts of certain drugs should be changed.

CHAIR EASLEY asks if the percentage of Trust Beneficiaries who might have been incarcerated because of drug possession is known.

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MR. WILLIAMS replies that the report does not have that.

MS. BURKHART states that the DOC issues an offender profile every year, and it is a three-year picture. She continues that it is available on the research and reports DOC page. She adds that it is public information and all sorts of offender characteristics can be gleaned, including the type of charge that led to the admission.

TRUSTEE NORENE states that there should be more emphasis on the problem of drugs and alcohol and treatment within the correctional institution.

MR. WILLIAMS states that Adam Rutherford from the Department of Corrections, the director of behavioral health, can give some additional information about the types of substance abuse treatment programs offered within DOC.

MR. RUTHERFORD states that anyone in the system for 120 days or more receives substance abuse services. He continues that all individuals that enter the system are screened to look at the level of services that may be potentially needed. He adds that there is community-based treatment within certain communities.

TRUSTEE WEBB asks what the ability of the community system is to accept those referrals and actually doing anything with it.

MR. RUTHERFORD replies that is part of the challenge and partially why DOC has its own community-based programs. He states that was an area in the community that needed assistance.

TRUSTEE WEBB asks how those are funded.

MR. RUTHERFORD replies that funding is through the legislation, a State-funded program.

CHAIR EASLEY recognizes Kate Burkhart.

MS. BURKHART states that she has the offender profile for fiscal year 2013 that has been reported by the Department of Corrections. She continues that it is the information about offenders who have listed as their most serious charge an offense related to drugs or alcohol. She reports that in all of the institutions in fiscal year 2013, 365 people had their most serious charge as involving alcohol; and 442 had their most serious charge as involving drugs; 807 had drugs and alcohol as their most serious charge. She states that the CRCs, the community programs, alcohol had 105 offenders placed, drugs had 73, alcohol and drugs had 178. She continues to the special programs in Anchorage, Fairbanks, Juneau, Kenai, Ketchikan, and Palmer, there were 90 offenders placed for alcohol as the most serious charge; 49 for drugs; and 139 for alcohol and drugs. She adds that in all categories, men were overrepresented compared to women.

CHAIR EASLEY asks if any Trust Beneficiaries can be identified.

MS. BURKHART replies no, and that is what is available quickly and publicly.

TRUSTEE WEBB notes that this picture deals only with the most serious charge that someone is booked on, which everyone needs to be aware of.

MR. WILLIAMS moves on, explaining and going through the budget, answering questions as he goes along. He states that the FASD population was recommended and explains the offender conference. He asks for any other questions.

TRUSTEE WEBB asks about the CIT training in Anchorage, which has never done what it was intended to do, which was to develop a crisis intervention team. He states this will be something that he will have to be convinced of funding in the future.

MR. WILLIAMS agrees, stating that it does not adhere to the Memphis model that Sam Cochran developed for CIT.

A short discussion ensues.

CHAIR EASLEY asks that any further questions be asked at the end, and recognizes Kathy Craft for the Workforce Development focus area. She thanks Mr. Williams.

MS. CRAFT states that she is with the University of Alaska Anchorage, director of the health program development and the director of the Alaska Workforce Health Coalition. She gives a short history of how the Workforce focus area and Alaska Health Workforce Coalition combined their efforts and aligned their work. She states that their mission is to ensure and work towards having a qualified and sustainable workforce to meet the health of Alaskan citizens. She continues that all of the decisions, strategies and goals are based on the health data received. She adds that there are 43 strategies that are being worked toward and are now getting ready to plan the 2016-2019 action agenda by looking at new strategies, new systems changes, and capacitybuilding goals. She states that the goals since the original Trust Workforce Development focus area were to strengthen the workforce, broaden the concept of workforce, improve the structural supports, and then do marketing and public education for behavioral health, home- and community-based services and long-term care positions. She continues that 12 of the 43 strategies have been completed; 21 are on target to meet their deadline; and 6 have slowed. She adds that the 43 are being sustained through industry and government engagements. She continues her presentation, explaining as she goes along. She states that the vacancy study for 2012 has been completed, and all the data tables are available online. She adds that the 2014 vacancy study will start this fall and is in the budget. She continues that the Key Coalition met with the Governor and was asked to put together a concept paper about the issues regarding family living wages or the issues around compensation packages for direct-care workers. She adds that a group got together and drafted a document to be taken to the Governor where he can decide whether he wants to put together a statewide task force to look into the issue. She moves on, stating that the Learning Management System is continuing to work and finesse the business plan, but have issues with regard to access to care. She explains that this is one of the ones that have slowed. She continues talking about being unable to get the substance abuse providers to the table to talk about the challenges being seen in the field. She moves on to the budget, going through answering questions as she goes along.

TRUSTEE DERR asks what all is contained in the Trust Training Cooperative.

MS. CRAFT replies that it is a full continuum of training from paraprofessionals to train in the Alaska core competencies for direct care workers.

TRUSTEE DERR asks if the Trust is paying for professors.

MS. BURKE states that Lisa Cauble, who manages the TTC, can answer that question. She continues that there are three important things that are wanted in the Trust Training Cooperative: First was implementing the running management systems for a resource that the providers can use to track the trainers, which is about one third of the cost; the second third is the need for a coordinated, centralized place to say this training is really needed in the system; and the other third is where funders or community providers come to the Trust Training Cooperative and ask for coordination for a specific type of training.

TRUSTEE DERR asks how this will transition into sustainability in looking forward to closing out Workforce Development as a focus area down the line.

A discussion ensues.

MS. CAUBLE states that the main aspect of the strategy that the Trust Training Cooperative incorporates is a statewide coordinating body that was not available five years ago. She continues that professors are not employed, and if training needs need to be addressed, experts are contracted. She explains what has been worked on over this last year.

The discussion continues.

MS. CRAFT continues going through the budget, answering questions as she goes along.

MR. BUCKLAND adds that the Legislature approved temporary increments and it was set up for multiple years. He states that it will take action from the Trust to actually change those increments and bring them back in-house.

The discussion continues.

MS. BURKE summarizes that the Planning Committee has gone in depth over the last year with many of the focus areas, and one of the problems is that when Trustees fund something results need to be seen. She states that a lot of the results are system stuff that are difficult to quantify.

MS. CRAFT adds that there are small pockets of positive things that are also happening.

The discussion continues on the challenges.

CHAIR EASLEY calls for a break.

(Break.)

CHAIR EASLEY calls the meeting back to order and moves to the Beneficiary Employment Engagement.

MS. BALDWIN-JOHNSON states that there is a handout entitled Beneficiary Projects Initiative, a Snapshot of Successes which will be available on the Web site. She continues that folks were working diligently doing some retrospective data mining to put a snapshot together. She states that Ms. Lofgren has been focused on the ramp-up of the employment strategy. In FY15 the importance of maintaining positive system change accomplished with the work in the original strategies around developing capacity within the State for peer-support programs to provide services will continue to be emphasized. She highlights that the title, the Beneficiary Employment and Engagement, is a proposed title. She gives a bit of background before transitioning into the overview about the grant projects. She states that the emphasis is helping to support the organizations, the executive directors and the boards of the programs, to really understand the process of nonprofit management and everything that goes along with that.

MS. LOFGREN highlights that the title reflects the cornerstone of wellness and recovery for individuals. She continues that it is important to have health, relationships, housing and employment, and tying together the relationships and the employment.

MS. BALDWIN-JOHNSON moves on to the budget and begins talking about the programs that have been funded. She gives some updates on where they are. She states that the handout is a summary of highlights of some of the outcomes that the grantees have been reporting. She adds that the grantees have been improving on their reporting. She continues her presentation, going over the initial goals and highlights of the information in the handouts.

MS. LOFGREN highlights that the Employment Initiative is in its infancy stages. She states that they have been working closely with partners to find out what the current environment is and what the existing programs are. She adds that the work that has been going on around employment over the last several years is impressive, and is in multiple different stages. She states that they are trying to figure out how the initiative can enhance the existing efforts and also identify where resources can be most valuable. She continues her presentation. She states that there was a large stakeholder meeting in May and the first day began with the Governor signing the Employment First Bill. There were about 90 people that participated the first day, and 52 that participated the full two days. She continues that the contractors will make recommendations for policies for the larger system, and a couple of smaller policies were identified to work on initially in the next several months. She goes through the Beneficiary employment goals, and states that it is pretty exciting.

TRUSTEE MICHAEL states that one of the goals should be national best practices, because these funds were meant to look at what the trendsetter is and what are people doing to move this forward.

A discussion ensues.

MS. LOFGREN states that the next steps are to really finalize the employment report which includes identifying what some of the national trends are, what is working and not working; develop the work groups around the result areas; and design and implement identified strategies. She moves on to the Beneficiary Employment and Engagement Matrix. She states that around the employment component this is just a skeleton because there has not been a chance to develop each of the result areas, strategies or performance measures. She highlights that employment is in its data developments stages and over the next year this will be filled out and completed with a lot more detail specific to the result areas that are identified.

MS. BALDWIN-JOHNSON states that included within the packet is the existing RBA matrix for the BPI focus area prior to adding in employment initiative, and not much has changed within it. She transitions into the budget.

MS. LOFGREN and MS. BALDWIN-JOHNSON begin going through the budget items, explaining and answering questions as they go through it.

MS. BALDWIN-JOHNSON concludes the budget and asks for any additional questions.

CHAIR EASLEY asks for any questions from the committee. She states that, as promised earlier in the day, there is some time for questions. There being none, she recesses the meeting until 9:00 a.m. tomorrow morning.

(Planning Committee adjourned at 4:30 p.m.)