

**Making It Work**  
**Behavioral Health in Alaska**

Annual Implementation Report  
January 2009

**Advisory Board on Alcoholism  
and Drug Abuse**



**Alaska Mental Health Board**

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## Our Joint Vision: Alaskans Living Healthy, Productive Lives

### Introduction

The Advisory Board on Alcoholism and Drug Abuse (ABADA) and the Alaska Mental Health Board (AMHB) share a vision of every Alaskan living a healthy and productive life. This means that Alaska's children have safe and stable childhoods and that Alaska's adults are engaged in healthy lifestyles that sustain mental, physical, emotional and spiritual health. This is a continuum, where our children grow up healthy to become healthy and productive adults who raise healthy children, perpetuating the wellness of Alaska's people.

The work of ABADA and AMHB is established by statute. It includes the following functions: to **Plan, Coordinate, Educate, Advise, Evaluate, and Advocate** so that Alaskans can lead productive, healthy lives. To guide our work in these areas, ABADA and AMHB adopted *Making It Work: Behavioral Health in Alaska*, a five-year strategic plan for 2007-2011. This plan identifies desired population results and ways to achieve those results.

In partnership with key stakeholders, the Department of Health and Social Services (DHSS), the Alaska Mental Health Trust Authority (the Trust), and other state and federal agencies, ABADA and AMHB accomplished the following in FY08:

- ★ Successfully advocated for increased behavioral health treatment and prevention services (\$2.3 million in additional increments), Medicaid rate rebasing, appropriations for workforce development, and funding for supportive housing;
- ★ Improved collaboration with the Division of Behavioral Health (DBH) through the Medicaid Behavioral Health Collaborative, the Mental Health Block Grant, development of budget recommendations for shared priorities, and grant reviews;
- ★ Published an updated statewide behavioral health resource directory;
- ★ Collaborated on joint data analysis projects with the Department of Corrections and DHSS related to services provided to incarcerated Trust beneficiaries;
- ★ Sponsored community forums and opportunities for public comment, including a legislative breakfast reception at the homeless shelter in Juneau and community forums in Bethel and Barrow; and
- ★ Participated in the biennial rural outreach trip sponsored by the Trust, during which board members and staff visited Kotzebue and villages in the Northwest Arctic Borough.

This report focuses on the specific progress made toward the goals identified in our strategic plan. A more comprehensive report of our work in FY08 is available in our Annual Report, available online at <http://hss.state.ak.us/abada/> or <http://hss.state.ak.us/amhb/>.

For each population result identified in *Making it Work*, we have reported on **selected** measures within each strategy for achieving that goal. This is a summary of our progress toward each goal. Activities are rated using the following symbols:

-  = activity is on target and going well
-  = activity is moving forward, but needs continued attention
-  = activity will be implemented later, needs review, or has encountered obstacles to success

**Desired Result: Alaskans are physically, mentally, spiritually, and emotionally healthy and are engaged in productive lifestyles to sustain well being.**

Strategy: Identify current behavioral health system strengths and gaps in services.

Strategy: Advocate for a comprehensive behavioral health service.

Strategy: Review, monitor and evaluate behavioral health services at the community, client, provider and state system level.

Board planned activity by statutory role:	What we have done to date:	Track
<b>Plan</b>		
<p>Continue to review existing needs assessments across the behavioral health service spectrum.</p> <p>Work with Division of Behavioral Health (DBH), the Trust, consumers, providers, as well as other stakeholders to continue the development of a clear vision of an effective behavioral health system to guide policy and funding decisions.</p>	<p>Conducted public forums in Bethel, Juneau, and Barrow.</p> <p>Secured one time funding for series of rural community site visits to solicit public input re: strengths and needs of behavioral health system.</p> <p>Find sustainable funding for rural community site visit program.</p> <p>Staff actively participated in data and planning efforts related to the Comprehensive Integrated Mental Health Plan (Comp Plan); the executive director is part of the Comp Plan leadership team and executive committee.</p>	<p style="text-align: center;"></p> <p style="text-align: center;"></p> <p style="text-align: center;"></p> <p style="text-align: center;"></p>

<b>Coordinate</b>		
Coordinate with other advisory boards, the Trust, providers, consumers, and DBH to identify gaps in the service delivery system and ways to fill them.	Partnered with DHSS in application for Mental Health Block Grant, targeting grant funds for peer support services and programs to increase employment for mental health consumers.	
	Review and update final Connecting Systems project paper.	 for FY09
Develop and maintain working relationships with tribal health corporations, private providers, and providers of behavioral health services in other parts of the human service system to identify how all of these systems serve Alaskans and gaps in the larger system.	Staff attended monthly ABHA stakeholder meetings; ANTHC and Rural Human Services representatives attended and/or reported at board meetings; Executive Director has attended and offered reports at both semi-annual ABHA-SADA meetings.	
Work with members of the behavioral health system to continue to assure that training and administrative support is provided for behavioral health program integration as identified in the behavioral health model at all levels.	Assisted in curriculum development and provided financial support for Fall 2008 Change Agent Training.	
<b>Educate</b>		
Increase policymakers' knowledge about our present system of care and identification of strengths and gaps in the system.	FY06-08 Annual Reports are complete and available online.	
Increase public knowledge about available services.	Updated Resource Guide completed, distributed in hard copy, and available online.	
<b>Advise</b>		
Use the Trust funding recommendations process to build on continued communication with providers and consumers regarding system needs.	DHSS staff, provider organizations, advisory boards, stakeholders, consumer groups, board members all participated in development of FY10-11 budget recommendations to the Trust targeting gaps in services and maintaining assets in behavioral health system.	

<b>Evaluate</b>		
Get feedback from public hearings and community meetings about how the system is working in their community.	Public comment was received from board meetings, the Trust rural outreach trip, BTKH community summits, underage drinking town hall meetings, etc.	
<b>Advocate</b>		
Survey legislators, staff about strengths and weakness of system of care in their districts.	Informal survey of legislators conducted; formal survey to be done.	
Use information about existing system strengths to advocate for continuing effective programs.	FY09 budget included recommended increments to increase funding to the continuum of care for behavioral health treatment and prevention services.	

**Desired Result: Alaskan children, youth, and families lead safe, stable, happy, productive lives.**

Strategy: Support the planning, funding, and provision of a comprehensive system of care within Alaska for children, youth, and their families.

Board planned activity by statutory role	What we have done to date:	Track
<b>Plan</b>		
Participate in the early childhood mental health workgroup to develop a program that assures earlier identification and intervention of mental health disorders of children birth to 21, supporting the use of standardized screening and assessment tools.	Board members have presented on the topics of early childhood mental health at 2008 board meetings.	
Implement activities to assess need, monitor quality, and develop advocacy outlined above for adult behavioral health programs for programs that serve children and youth as well.	Staff and board members participate in the BTKH workgroup and other efforts focused on serving children and youth.  Staff attended 2008 Spirit of Youth Conference.	  

<b>Coordinate</b>		
Actively participate in BTKH Initiative and the four sub-committees: care coordination; home and community-based services; client tracking/monitoring; and workforce development.	Staff participated in BTKH committees, bringing concerns raised by parents and youth through Family Voice.	
Work with DHSS, Department of Education and Early Development (DEED) to implement effective, culturally appropriate practices by providers and school districts across the state and to further integrate behavioral health service provision with schools.	Attendance of board meetings by DEED ex-officio member with early childhood expertise, promoting stronger collaborations.	
Coordinate the Family Voice working group.	Winter 2008 training provided as part of BTKH quarterly meeting.	
	Began planning for restructuring of Family Voice grant implementation, including both parent/peer navigation agencies in development of new activities.	
Continue to work with Suicide Prevention Council and others to address youth suicide in Alaska. Use results from the track-back study to identify programs that may address this issue.	Board members serve on SSPC.	
	Staff worked with SSPC project coordinator on suicide prevention initiative.	
<b>Educate</b>		
Coordinate monthly teleconference that involves family, youth, and adult consumers, to combine education and consumer discussion of programs and involve consumers in addressing system problems.	Teleconferences were conducted for the first 3 quarters of 2008, but declining attendance necessitated a restructuring of the grant implementation.	
	Began planning for restructuring of Family Voice grant implementation, including both parent/peer navigation agencies in development of new activities.	

<b>Evaluate</b>		
Work with OISPP and other data groups to assess effectiveness of the continuum of services for children, youth, and families.	OISPP review of BTKH data; completion of Comp Plan scorecard, which includes data and assessment of services for children and youth.	
<b>Advocate</b>		
Support full funding for SCHIP federal youth insurance funding and Denali Kid Care program at the state and federal level	Board member and stakeholder advocacy re: SCHIP funding to federal legislators.  Mobilized advocacy campaign to increase Denali KidCare eligibility to 200% of FPIG.	  
Identify and advocate for programs, regulations, and funding that support transition age youth. Advocate for increased early intervention services for children & families through age 21.	Successfully advocated for expansion of community based services for youth. Contributed budget and policy recommendations for continued support of early intervention and prevention services.	

**Desired Result: Alaskans live free from the negative consequences of alcohol and other drug use.**

Strategy: Support a continuum of care for those experiencing alcohol and substance abuse disorders and those at risk.

Board planned activity by statutory role	What we have done to date:	Track
<b>Plan</b>		
Support treatment services for the estimated 90% of incarcerated Alaskans who have experienced a problem with substance abuse.	Collaboration with DOC on budget recommendations for expansion of treatment services in institutions.	

<b>Coordinate</b>		
Partner with the DBH Prevention to review grants, identify best practices, and decrease substance abuse in adults and youth.	Participated in development of prevention grant RFP and review of applications. Partnered with DBH to encourage rural communities to access grant opportunities, providing logic model training.	
<b>Educate</b>		
Educate children on the risks of alcohol and drug consumption leading to addiction and abuse.	Supported development of underage drinking initiative.	
<b>Advise</b>		
Review plans for revision of Title 47 holds and advocate for appropriate use of this legislation to serve chronic substance users.	Successfully advocated for funding to implement SB100 and developed recommendations for continued funding.	
Continue to be involved in development of regulations that support parity for substance abuse programs and professionals in the behavioral health arena.	Board members contributed to nationwide advocacy for federal mental health parity bill.	
<b>Advocate</b>		
Identify and continue to advocate for solutions to substance abuse issues for Alaska's aging population	Partnered with ACOA to recommend funding for SBIRT services for seniors.	
Advocate for use of alcohol tax revenues to support substance abuse treatment services.	Partnered with the Trust and DHSS to provide clarity to advocacy efforts related to substance abuse funding. Continued the "supplement vs. supplant" advocacy discussion re: use of alcohol tax revenues.	

**Desired Result: Alaskans live with dignity and respect as valued members of their families and communities.**

Strategy: The Boards will advocate for a safe, accessible, and affordable continuum of housing options for beneficiaries.

Strategy: The Boards will advocate for increased opportunities for employment, education, and meaningful participation in the activities of choice.

Strategy: The Boards will advocate for and support interagency collaboration among criminal justice, behavioral health, community, and government agencies to prevent unsuitable or unnecessary arrest, incarceration, and/or prosecution of persons with behavioral health problems.

Board planned activity by statutory role	What we have done to date:	Track
<b>Plan</b>		
Participate in planning efforts related to housing, employment/education, and justice.	Staff actively participated in continued review and update of Comp Plan, focus area budget development.  All staff attended 2007 Housing Summit.	 
<b>Coordinate</b>		
Participate in Trust housing, disability justice, and workforce development focus areas.	Staff actively participated in all Trust focus area workgroups.	
<b>Educate</b>		
Promote efforts to increase the number of assisted living beds available for persons with a severe mental illness being released from state-funded institutions by monitoring the housing and supportive service resources in Alaska.	Coordinated efforts to educate policymakers re: the need for services for seniors with severe mental illness — whether through Pioneers’ Homes or private assisted living/nursing homes — with ACOA.	
<b>Advise</b>		
Continue to provide recommendations re: improving beneficiary opportunities to the Governor, the Trust, the Department, the Legislature and interested stakeholders.	Participated in DHSS, Trust, and community efforts to improve quality of life for beneficiaries through housing, employment opportunities and alternatives to arrest/incarceration.	

<b>Advocate</b>		
Support development of the Alaska Housing Trust.	With partners, successfully advocated for \$300 million for housing and supportive services, though the Housing Trust was not established.	
Advocate for expansion of mental health, substance abuse, family, and wellness courts to divert beneficiaries from incarceration to treatment.	Continued advocacy for funding for therapeutic courts, treatment services in corrections, crisis intervention services, and training.	
Support initiative re: increasing recruitment, employment, advancement, and retention of people with mental illness, addiction and/or co-occurring disorders.	Advocated for greater emphasis on programs that support employment opportunities for beneficiaries in Mental Health Block Grant application for 2009	

Strategy: The Boards will reduce stigma about behavioral health issues by teaching Alaskans about the importance of behavioral health, promoting wellness, and emphasizing the potential that Treatment Works, Recovery Happens.

<b>Board planned activity by statutory role</b>	<b>What we have done to date:</b>	<b>Track</b>
<b>Educate</b>		
Present information on behavioral health, existing programs, and future directions in public forums such as conferences, health fairs, and arenas.	Staff and board members continue to present information that “Treatment Works, Recovery Happens” in a variety of public forums, including 2008 Legislative Health Fair.	 
Support the “ <b>You KNOW Me</b> ” anti-stigma campaign.	Board members and stakeholders appeared in TV and print ads statewide.	
<b>Advocate</b>		
Work within the system to change the way we talk about clients. Eliminate the word “patient” from most discussions. Be sure that language reflects the person, not the problem.	All work product uses person centered language.	

**Abbreviations** – A number of abbreviations are used in this document to make it best fit the formatting. They are explained below.

ABADA – Advisory Board on Alcoholism and Drug Abuse  
AHFC – Alaska Housing Finance Corporation  
AKAIMS – Alaska Automated Management Information System  
AMHB – Alaska Mental Health Board  
API – Alaska Psychiatric Institute  
APIC – Assess, Plan, Identify, Plan, Coordinate model for integrating people leaving the corrections system back into everyday life  
BTKH – Bring the Kids Home  
CAPWIZ – an online advocacy tool  
CIT – Crisis Intervention Training  
CSR – Client Status Review  
DBH – Behavioral Health, a division of the Alaska Department of Health and Social Services  
DOC – Department of Corrections  
DVR – Division of Vocational Rehabilitation  
FASD – Fetal Alcohol Spectrum Disorders  
FPL – Federal Poverty Level  
FY – Fiscal Year  
MHBG – Mental Health Block Grant  
NAMI – National Alliance on Mental Illness  
OISPP – Outcomes Identification and System Performance Project  
RFR – Request for Recommendations  
RPTC – Residential Psychiatric Treatment Center  
SB – Senate Bill  
SCHIP – the children’s health insurance program  
SED – Severely Emotionally Disturbed  
SSPC – Statewide Suicide Prevention Council  
TBI – Traumatic brain injury