

**ALABAMA DEPARTMENT OF MENTAL HEALTH
ANNUAL REPORT FISCAL YEAR 2020**



**MISSION:
SERVE
EMPOWER
SUPPORT**

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Vision
 Promoting the health and well-being of Alabamians with mental illnesses, developmental disabilities and substance use disorders

Letter to the Governor



Lynn T. Beshear

Commissioner

The Alabama Department of Mental Health has experienced a remarkable year, comprised of challenging moments, but also of wonderful opportunities within the world of mental health. The pandemic, which impacted so many lives in our state, has demonstrated the grace, generosity, and gratitude of the people of Alabama and allowed our department to live out our mission to Serve · Empower · Support as we saw all Alabamians' mental health impacted by COVID-19.

Many successes were achieved by our department this year with outcomes seen directly by the individuals we serve. Our year commenced with expansion of the Stepping Up Alabama Initiative and work began with five new rural crisis projects in June.

An increase in mental health services for children led to the expansion of the Infant and Early Childhood Mental Health program, and the School-Based Mental Health Collaboration. The state's nineteen mental health authorities, and to date, 71 school systems partner together through Tier 3 services.

The Division of Developmental Disabilities made substantial progress toward compliance with the Home and Community Based Settings Rule. The goal of statewide deconfliction of case management was achieved, allowing an increase in choice and independence for individuals with intellectual disabilities. Significant planning for the new Community Waiver Program (CWP) is ongoing. The CWP will be the first step to achieving the goal of eliminating the Waiting List for individuals with intellectual and developmental disabilities.

We now look to 2021, having received one the largest mental health appropriations in many years. I want to take this opportunity to thank Governor Ivey, the legislative leadership and the legislature for the bipartisan support for the funding needed to improve mental health services. As we anticipate the announcement of the first three Crisis Diversion Centers and the launch of the new Community Waiver Program, we move closer to achieving our wildly important goal of opening the gateway to care.



Interview with Rodney Barnes, Board of Trustees Member

For those struggling through mental health conditions, substance use disorders, or both, many have found that having a peer support specialist is an important part on the path to recovery. **Inspiration** is a keyword for Rodney Barnes, the Alabama Department of Mental Health's newest Board of Trustees member. Barnes, who currently works as a Certified Recovery Specialist, says sharing his story has played an important role in building a connection and passing along hope and strength to individuals working through recovery. He says that sharing his lived experience is at the core of peer support and very important to his role as a Board of Trustees member as well.



"People want to be met where their feet are. I understand the ground level and I want others to be comfortable talking and seeking help without worrying about the stigmas that associate with substance abuse," said Barnes.

Barnes' life began in 1968, living on the west side of Montgomery. He was a student of the Montgomery County school system, attending Bear Elementary, Cloverdale Middle School, and Jefferson Davis High School. At the age of 10, Barnes lost his father and grew up in a single-parent household with his mother.

"I was the oldest of two children and I was oftentimes sheltered from the real world," explained Barnes. *"My mom played a pivotal role in my life. She was a strong black woman who wanted the best for me and my siblings – many people always referred to her as a true lady. My mom was very much involved in my life and allowed me to pursue things that I loved."*

After graduating high school, Barnes received a baseball scholarship to attend Tuskegee University. Unfortunately, his college career was cut short due to his mother passing away from Lupus.

"My mom passed a decade after my father and that threw me under so many pressures, I was in the mix of having new freedoms as an adolescent and I didn't know how to cope with her death," said Barnes. *"Through the pressures of trying to stay focused, I ended up making bad decisions that caused my life to go into a spiral."* Barnes was determined to turn his life around and looked for solutions to getting him back on the right path.



"Through my recovery background with Narcotics Anonymous, I was able to stay clean. I completed my service work, and I would reach out to others. During that time, I often heard from previous members that I would make a great candidate as a peer support specialist. I began to do a little research myself because I knew this was right in the line with what I wanted to do – help people and share my story while meeting people where they are. Because of Pam Butler, ADMH Coordinator of Recovery Services, I was allowed the opportunity to take the 40-hour course and I've been really going strong ever since."

As a peer support team member since 2016, Barnes has been able to help break down the barriers of experience and understanding while supporting individuals to follow their own recovery paths, without judgment or expectations.

"I sit on a hotline for the Montgomery Tri-County area and I spoke with an individual who was in dire need of talking to someone to get a weight off his shoulder. I turned that phone conversation into an in-person conversation because I could tell this person had more to share and wasn't ready to hang the phone up," said Barnes. *"Oftentimes people just need to get it out – and hear themselves say it, that's where the healing process starts. I always hope that the lived experience that I have will allow others to open up to me so that I can get them the help they need."*

In addition to Barnes serving as a peer specialist, he is also a two-time Iraq war veteran, wounded in service, and has spent time working with other veterans through his own service initiative, the Alabama Warrior Outdoor Association. *"I have an annual fishing event in October and I'm grateful this event allows veterans not only a mental space to clear their heads, but it gives them an outlet to share their story. Being in the military teaches you to be strong. Everyone deals with things in different ways – some may result in bad habits however, I just want to show that there is healing in recovery, regardless of what may have happened."*

As a Trustee, Barnes recognizes his role is to help those seek recovery, and in addition, he hopes to be a model for others to follow. "I'm hoping to educate other members of the board so they will know the power in supporting peer support community centers. These spaces allow for individuals to connect with peers because it's important to not feel alone."



Launching the Alabama Crisis System of Care

Like a physical health crisis, a mental health crisis can be devastating for individuals, families and communities. Too often, that experience is met with delay, detainment and even denial of service that can all add to a person's trauma history. While a crisis cannot be planned, we can plan how we organize services to meet the needs of those individuals who experience a mental health crisis. It can also lead to hope, recovery and action.¹

Individuals in a mental health crisis often come into contact with the justice system, first responders, hospital emergency rooms and local jails, instead of the option for an appropriate and accessible behavioral health crisis response. Crisis Diversion Centers are the first step in expanding access statewide that is interconnected, effective, and just. In December 2019, the Alabama Department of Mental Health began planning and implementation of a crisis care system of care with the assistance of divisional staff, subject matter experts, national consultants, and our community partners.

In January 2020, the department requested \$18 million to establish and stand up the first crisis diversion centers in the state. The crisis diversion centers are a designated place for law enforcement, first responders, families, and hospitals to take an individual who is experiencing a behavioral health crisis. Without these types of centers in Alabama, those in crisis will continue to be boarded at hospital emergency departments or booked into jails.

Governor Ivey prioritized establishment of a mental health crisis continuum of care in her budget proposal. Her commitment, coupled with the collaborative work in the Alabama Legislature led by House Majority Leader Nathaniel Ledbetter during the legislative session, resulted in the requested funding for the centers being appropriated.

Sixteen meetings were held in eight regions across the state in February 2020 to educate and build diverse and widespread community and stakeholder support. An additional set of subject specific meetings with experts were offered to narrow down suggestions. Engagement and feedback were crucial in this planning process.

Over 750 participants, including hospital staff, law enforcement, court personnel, consumers, families, mental health providers, elected officials and interested citizens attended the meetings. The next step was a rigorous Request for Information and Request for Proposal process conducted with Alabama's nineteen community mental health centers in the summer of 2020.

The crisis continuum of care was officially launched on October 28, 2020 when Governor Kay Ivey, along with Commissioner Lynn Beshear of the Alabama Department of Mental Health and House Majority Leader Nathaniel Ledbetter, announced the three awardees of the new crisis diversion centers. Funding for centers was awarded to: AltaPointe Health Systems in Mobile, the Montgomery Area Mental Health Authority, and WellStone Behavioral Health in Huntsville.

The 24/7/365 crisis diversion centers will include both walk-in access for individuals, including temporary observation beds, short-term crisis stabilization beds, detox services and collaboration with specialty providers, if needed.

The Stepping Up Initiative, a program designed to decrease the number of individuals in jails and hospitals is an integral part of the crisis system of care. Stepping Up Alabama was piloted in 11 counties in the state and funding for 28 new sites was provided by the state legislature. The initiative is supported by ADMH and community mental health authorities, with collaboration from local communities. To learn more about Stepping Up Alabama, please visit <https://mh.alabama.gov/stepping-up-alabama/>.

The Alabama Department of Mental Health has begun the journey to a Alabama Crisis System of Care to reduce hospital emergency department admissions and jail bookings due to behavioral health crisis, promote integrated services, regardless of diagnosis (mental health, substance use disorder or co-occurring intellectual disability), decrease the rates of referral to expensive and restrictive inpatient care with extended lengths of stay, and develop a regional approach to crisis care through planning and collaboration.

To learn more, please visit mh.alabama.gov/crisis-system-care.

Suicide and Substance Use In Alabama:

- Suicide rate outpaced the national average every year since 1990
- Suicide is 3rd leading cause of death ages 10-24
- 2nd highest number of veteran deaths by suicide in the country
- 107.2 opioid prescriptions per 100 residents (National Average = 58.3)
- In 2018, over 11,000 overdoses required emergency department admission
- Nearly 1,000 Alabamians died related to an overdose in 2018

Crisis Diversion Centers will:

- Decrease the number of arrests
- Reduce the frequency of visits to hospital emergency departments
- Provide individuals in crisis access to care
- Promote sustained recovery and provide linkage to community agencies and organizations, psychiatric and medical services, crisis prevention and intervention services

¹ Crisis Now Academy. Taking the Lead. September 2019. <https://crisisnow.com/wp-content/uploads/2020/07/IIMHL-DC-Crisis-Declaration-FINAL-1-4.pdf>

Rural Crisis Care – Reaching Individuals Where They Are

Whether in the city or a rural area of the state, crisis care is a need known in all communities. Access to healthcare services is critical to good health, yet rural residents face a variety of access barriers. Being far away from larger cities and more populated areas, individuals in crisis often find themselves alone, without assistance, involved with local law enforcement and/or at a rural hospital.

While the prevalence of mental illness is similar between rural and urban residents, the services available are very different. Mental healthcare needs are not met in many rural communities across the country because adequate services are not present due to accessibility and availability, according to results from the 2019 National Survey on Drug Use and Health.

The goals for Rural Crisis programs are aligned with the overarching goals of the Alabama Crisis System of Care, which are to reduce the burden on emergency departments and hospitals, decrease the burden on law enforcement and jails, and improve access at the “right care, right time, right place.”

To ensure success for each of the sites, individualized technical assistance was provided to the centers. Each center has chosen to embed a 24/7/365 mobile crisis unit into their services, offering an on-demand response to mental health emergencies.

In addition to mobile crisis units, community mental health centers may also offer additional services. A co-response program with law enforcement and emergency medical personnel can assist and create the most appropriate outcome for an individual in crisis. Other services may include crisis peer support which promotes recovery-oriented care; crisis case management which may reduce future crisis episodes seen in frequently returning individuals; and respite options with beds to prevent the escalation of a crisis.

At WellStone Behavioral Health in Cullman, the mobile crisis unit staff went into action quickly this year. Chris Van Dyke, Chief Operating Officer relayed the story of a woman in crisis and how preparation and training assisted her.

“The probate judge in Cullman county called late one afternoon. It was closing time at the courthouse and there was a woman there who seemed to be in distress but would not speak and would not leave. The new Wellstone Mobile Crisis staff drove over immediately to assist. We found her in the lobby, unable to answer questions with more than a couple of words, very anxious, and accompanied by three deputies. We spent some time building trust and planned to take her home, that is until, when we learned that she was homeless and had been out in the extreme heat for an unknown amount of time.

We helped to place her in a hotel for the night. She slept 17 hours. Upon waking, she was better able to communicate. We learned that she is living with a developmental disability and mental illness. She had been physically abused and was completely estranged from her family. She had come to the courthouse for a hearing on a misdemeanor charge but did not know what to do once she got there.

That day at the courthouse, she could have been arrested or admitted to a hospital. But instead we placed her in a shelter, started case management and outpatient mental health services. She is now in process of finding an apartment with the help of her case manager, resolving her legal issue and continuing the journey of recovery.”

The rural crisis programs have begun initial services as of July 2020. The Alabama Department of Mental Health hopes to expand rural crisis programs to other areas of the state in FY22.

In FY2020, five rural community mental health centers were funded to establish or increase crisis care programs in their communities. The centers funded were:

Cahaba Center for Mental Health covering: Dallas, Perry, Wilcox Counties

Northwest Alabama Mental Health Center covering: Fayette, Lamar, Marion, Walker, Winston Counties

Southwest Alabama Behavioral Health Care Systems covering: Escambia County

WellStone Behavioral Health covering: Cullman County

West Alabama Mental Health Center covering: Choctaw, Greene, Hale, Marengo, Sumter Counties

School-Based Mental Health – Partnership and Collaboration

Since 2011, the Alabama Department of Mental Health and the Alabama State Department of Education have partnered to deliver mental health services within public schools through the School-Based Mental Health Collaboration.

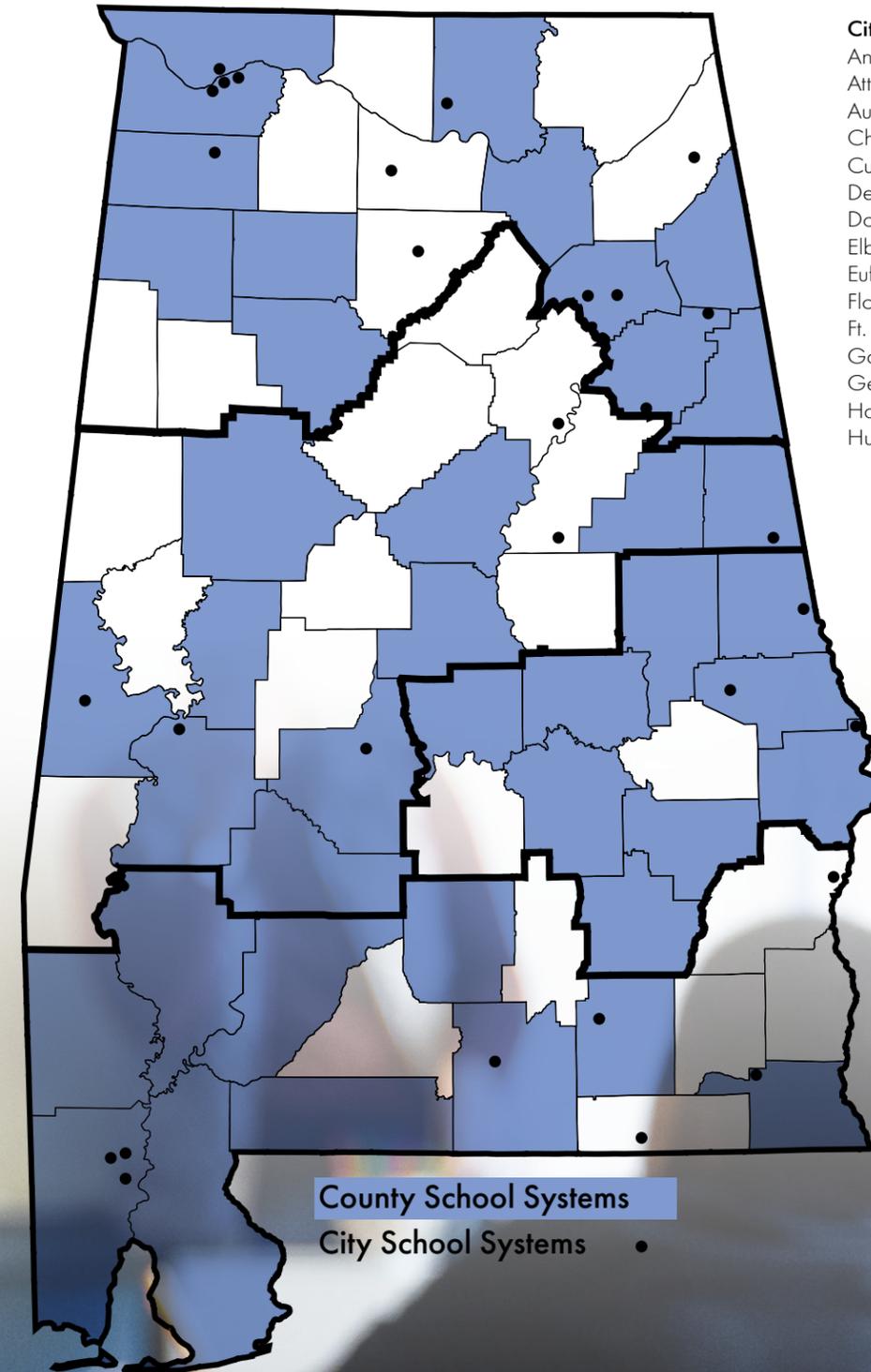
Beginning in 2019, the School-Based Mental Health (SBMH) Collaboration has expanded each year to include additional school systems, now found in more than 50 percent of public school systems in Alabama. The program is active in 71 school systems, with 15 new school systems added in the 2020-2021 school year. Through this partnership, over 10,000 students have been served. The SBMH Collaboration partners are: (1) the local school system and (2) the local community mental health center. The community mental health center provides a master's level mental health professional who serves as the School-Based Mental Health therapist.

Recently, the two agencies explored innovative ways to meet the needs of the youth of Alabama while recognizing the need for early identification of social and emotional needs and intervention. Consequently, the Mental Health Service Coordinator position was created and is funded through the Education Trust Fund budget, appropriated to the Alabama State Department of Education.

The Mental Health Service Coordinator will provide overall mental health information to all students and school personnel, as well as offer prevention and early intervention services to those students at risk of needing more intensive services. The position is designed to work closely with the community mental health centers, and will also identify local resources within their own community.

The Alabama Department of Mental Health developed a mental health certification for the Mental Health Service Coordinator that will soon be offer through online modules. Created in conjunction with Emory University, the modules consist of topics such as "Foundations of School Mental Health, Needs Assessment, Screening, and Early intervention and treatment" and more. Alabama-specific modules will also be developed. Each Mental Health Service Coordinator hired must earn this school-based mental health certificate.

Our hope is that through the education of school staff and students on mental health issues, the stigma associated with mental illness will be eradicated in the school environment and replaced with support and encouragement.



- City School Systems:**
- | | |
|------------|--------------------------------|
| Andalusia | Lanett |
| Attalla | Muscle Shoals |
| Auburn | Oxford |
| Chickasaw | Pell City |
| Cullman | Phenix City |
| Demopolis | Piedmont |
| Dothan | Roanoke |
| Elba | Russellville |
| Eufaula | Saraland |
| Florence | Satsuma |
| Ft. Payne | Selma |
| Gadsden | Sheffield |
| Geneva | Sylacauga |
| Hartselle | Tuscumbia |
| Huntsville | University Charter--Livingston |

Infant and Early Childhood Special Programs – Building a Stronger Foundation for Alabama’s Youngest

Many people do not realize babies, toddlers and preschoolers have mental health needs—but they do. In fact, there is a professional field of research and services devoted to just that called Infant and Early Childhood Mental Health (IECMH). IECMH is “the developing capacity of the child from birth to 5 years old to form close and secure adult and peer relationships; experience, manage and express a full range of emotions; and explore the environment and learn-all in the context of family, community and culture” (ZERO to THREE, 2017). IECMH is inclusive of not only the children in this age range, but also the adults who care for them.

In FY2020, ADMH created the Office of Infant and Early Childhood Special Programs (OIECSP), adding Infant and Early Childhood Mental Health (IECMH) Services to existing Early Intervention (EI) Services with newly appropriated state funding. This allowed the department to not only widen the scope of services provided to the Birth-5 population, their families and care providers, but guided ADMH to be the leading agency for Alabama’s growing Infant and Early Childhood Mental Health system of care. Funding support from the Legislature and additional dollars from the Alabama Department of Early Childhood Education assisted in the hiring of eight full-time IECMH consultants to provide these critical services.

Infant and Early Childhood Mental Health Consultation is a prevention-based service that pairs a mental health consultant with families and adults who work with infants and young children in the different settings where they learn and grow, such as child care, preschool, and their home. The aim is to build adults’ capacity to strengthen and support the healthy social and emotional development of children—early and before intervention is needed.

Long-range plans for OIECSP include expansion within these three sectors, as well as exploring IECMH Consultation within others, such as home visiting and pediatricians’ offices. OIECSP is actively engaged in many initiatives to improve the IECMH system of care.

Some of these include serving as lead agency for the U.S. Health Resources and Services Administration funded grant project, Pediatric Access to Telemental Health (PATHS), now going into the third of five years, and collaborating with Troy University to create the first Infant and Early Childhood Mental Health graduate certification program in the state. The first cohort of students enrolled in the Fall semester 2020 and Troy University plans to offer this certification program annually.

Staff within the Office of Infant and Early Childhood Special Programs and Infant and Early Childhood Mental Health have been recognized nationally by The ZERO TO THREE Policy and Advocacy Center and have been selected by Georgetown University Health Policy Institute/Center for Children and Families and the National Center for Children in Poverty to participate in technical assistance to improve policies and funding for and/or implementation of IECMH services.

The ADMH IECMH Consultants will work in the following settings:

- **First Class PreK - Alabama’s public 4-year-old pre-Kindergarten program**
- **Part C Early Intervention- Initially through a pilot of three programs, but eventually all EI programs will have access to IECMH Consultation**
- **Substance Abuse Treatment programs - OIECSP is partnering with the ADMH Substance Treatment program in the Mental Health Division to pilot IECMH Consultation in FY21 within an outpatient treatment center that serves pregnant women and mothers with young children**

“1 in 5 children has a diagnosable mental disorder, but factors that predict mental health problems can be identified in the early years.”

(ZERO to THREE, 2020).

“We know that safe, secure, and nurturing attachments are critical for healthy brain development. While strong IECMH and attachments form a solid foundation for the future, negative experiences can adversely impact brain development. These negative effects don’t last just through childhood, but for life.”

(Felitti, et. al, 1998).

Home and Community Based Services Settings Rule – Implementation Progress

By March 2023, the Alabama Department of Mental Health, Division of Developmental Disabilities, along with the Alabama Medicaid Agency, will fully implement the Home and Community Based Services (HCBS) Settings Rule. The rule is designed to improve the quality of services, provide rights protections for participants, maximize opportunities for individuals to have full access to the benefits of community living, and ensure individuals can receive services in the most integrated setting. HCBS programs serve a variety of targeted populations, including people with intellectual or developmental disabilities, and co-occurring disabilities.

Over the course of FY2020, the Division of Developmental Disabilities (DDD) made major advancements to ensure HCBS compliance. A stakeholder engagement group, with broad representation of advocates, providers, family members and others, was established to guide the state’s compliance plans. Smaller stakeholder work groups and plans were developed and implemented for each of the following: Education and Advocacy, Person-Centered Planning and Support Coordination and Residential and Day Service Settings, Validation and Monitoring.

HCBS education and advocacy resources were created and distributed across the state to inform stakeholders of the changes and increased opportunities that would soon be available. Educational materials such as posters, flyers, brochures, social media graphics and advertisements were developed and shared widely. The materials were presented to all DD service providers, in person or by mail, and posted on ADMH’s dedicated HCBS website and at hcbسالabama.org, where they are available for download.

Transforming DDD’s service coordination and implementing person-centered planning statewide were major accomplishments. Data and other findings from a person-centered planning pilot were used to revise and develop DDD’s Administrative Code standards and Operational Guidelines to promote best practices and models for service coordination. Next steps led to creating a person-centered assessment tool, plan and conversation guide, developed specifically for Alabama. A mentoring program was also established to assist service coordinators with person-centered planning, using subject matter experts. In addition, DDD established monthly 3-day person-centered planning training for newly-hired service coordinators. As of October 1, 2020, person-centered planning was implemented statewide.

During FY2020, work also focused on the validation and monitoring of provider self-assessments. Based on the validation tool and training developed by Moving To A Different Drum, LLC, DDD Regional staff completed validations of all 1353 waiver settings, which represents 151 DDD providers.

The Division of Developmental Disabilities instituted a tracking and reporting process as part of the State Transition Plan (STP) collaborations with Alabama Medicaid. In August 2020, Alabama Medicaid conducted a random review of actual validation data for 10 sites from each DDD Region, to evaluate inter-rater reliability. DDD began a similar random review of the validation data in September 2020.

Upon completion of the agencies’ review and evaluation of the validation data, the agencies met to review findings. The findings will assist both state agencies in ensuring accurate interpretation and application of HCBS requirements, especially as they apply to settings subject to “heightened scrutiny.”

On July 14, 2020, the Center for Medicare and Medicaid Services (CMS) issued a one-year extension, until March 17, 2023, for states’ compliance with the HCBS Settings Rule. The extension recognized the unique challenges and demands placed upon states due to the public health emergency, COVID-19.

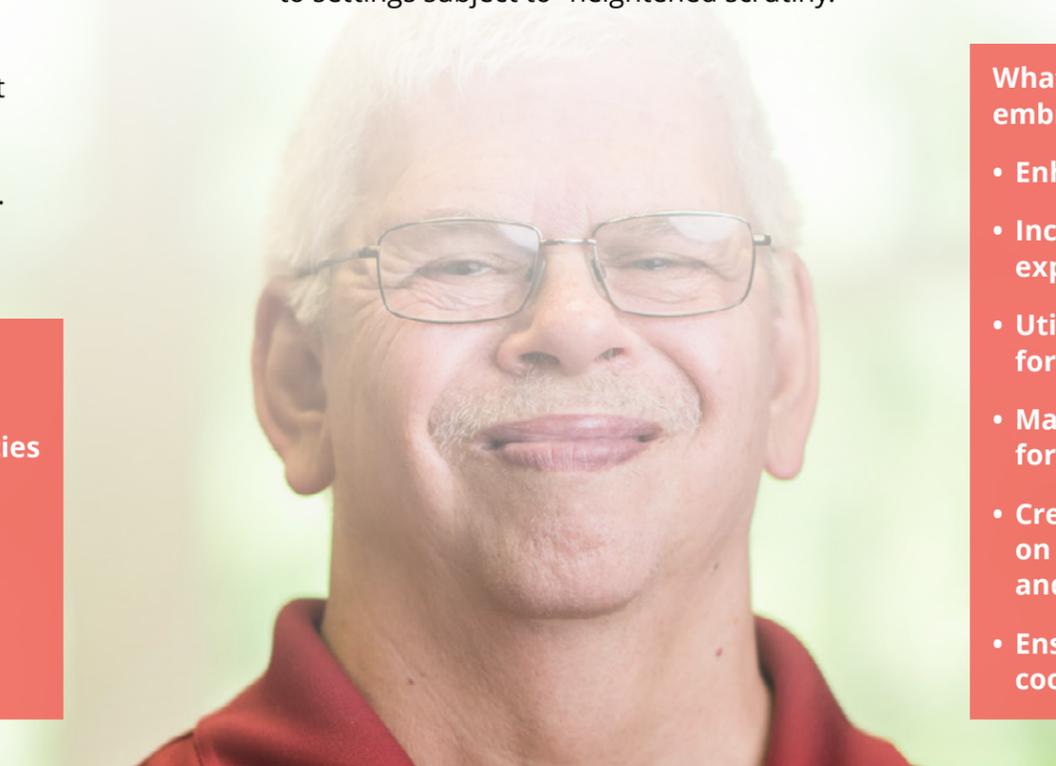
ADMH is committed to continuing its compliance work in conjunction with AMA and their partners to ensure full, successful implementation of the HCBS rule.

The new Medicaid Home and Community Based Services (HCBS) Settings Rule empowers people with developmental and intellectual disabilities to:

- Be free from abuse and neglect, protect health and safety, exercise rights and civil liberties
- Be part of the fabric of society and have choices
- Have a valued role in the community
- Form friendships and relationships
- Have independence, identity, and self determination

What is Alabama doing to embrace the rule?

- Enhancing self-directed services
- Increasing community experience and exposure
- Utilizing enabling technology for greater independence
- Making competitive employment for individuals a priority
- Creating a new waiver focused on keeping families together and reaching those in need
- Ensuring conflict free support coordination services



COVID-19 Pandemic Response

The COVID-19 pandemic opened the nation's eyes to the critical importance of emergency preparedness and presented incredible challenges. At the onset of the pandemic, leadership of the Alabama Department of Mental Health immediately sprang into action to rapidly respond, increase resources and address safety for all staff in our central office, regional offices and for patients residing within our three state facilities. During this unforeseeable event, the pandemic has served as a crucial opportunity for ADMH to personify its mission to Serve · Empower · Support.

ADMH quickly assessed what personal protective equipment (PPE) inventory existed and who needed it the most based on location and personnel working on the front lines. In addition, ADMH responded by closing its three facilities to visitors and began testing staff and patients. Essential workers at ADMH facilities in Tuscaloosa worked together efficiently to maintain a clean and healthy environment to protect patients and each other.

"The Alabama Department of Mental Health planned and implemented measures immediately after news of the pandemic was shared, to ensure the safety of our staff and patients," said Dr. Tammie McCurry, Associate Commissioner of Mental Health.

During the summer, Dr. Mark Woods, ADMH Medical Director, was honored by the State Personnel Department for his instrumental work at the beginning of the pandemic. He assisted in developing and implementing processes within ADMH hospitals to minimize the possibility of widespread COVID-19 exposure. Woods and all medical staff at the facilities continuously meet with the Infectious Control Specialist in Tuscaloosa and with the Alabama Department of Public Health to ensure all possible precautions are followed. In addition, he skillfully managed ADMH's supply of PPE as well as oversaw the treatment of COVID-19 positive patients housed in a newly established quarantine unit.

Until the beginning of May, our facilities experienced zero cases of COVID-19. Unfortunately, like many other congregant settings, cases did arise. Staff worked quickly to minimize exposure following ADPH and CDC guidance and with direct consultation from The University of Alabama at Birmingham's Infectious Disease Department. By the end of October 2020, cases were back down to zero.

To prevent an outbreak at ADMH's three state facilities, no new admissions were allowed for a period of time. Alternate sites were set up at three locations— Altapointe Health Systems in Mobile, Grove Hill Memorial Hospital in Grove Hill, and a Quarantine Unit in Tuscaloosa— to ensure hospitals around the state did not experience additional undue pressure.

New guidelines, a manual, related forms and policies to maintain the health of ADMH staff were introduced by Dr. Ileeia Cobb, COVID-19 Coordinator and Director for the Office of Policy and Planning which included employee leave management and telework guidance developed by Lynn Hubbard, Director of the Bureau of Human Resources Management. To mitigate the chance of COVID-19 exposure in offices, employees are required to complete a mandatory work screening form daily.

To assist employees and supervisors with COVID-19 related questions and concerns, an ADMH webpage was created with the manual, forms and notices related to the latest health orders, information on requesting and/or donating leave and resources on how to manage COVID-19 symptoms.

Successful planning and implementation allowed ADMH the opportunity to close out FY2020 with a celebration honoring our frontline staff at the mental health facilities. Each staff member was recognized with a "Healthcare Hero" pin given by Associate Commissioner for Mental Health, Dr. Tammie McCurry, large "Thank You" banners at the facilities, and a personalized video message from Commissioner Lynn Beshear.

Currently, ADMH workspaces are in the process of renovations to better accommodate physical distancing. Mask wearing is required throughout state buildings, and cleaning regimens have been increased for the health and safety of everyone.

ADMH would like to recognize and thank everyone for their cooperation and unwavering support during these uncertain times. We will continue to be a beacon of light for those in need of mental health services.

During the public health crisis of the COVID-19 pandemic, the Mary Starke Harper Geriatric Psychiatry Center implemented the following precautionary measures to ensure the safety of the facility's patients and staff.

- No outside vendors were allowed within the facility during the first few months
- Staff education was initiated along with the COVID-19 plan and storyboard
- Employees were required to complete a daily COVID-19 health check prior to coming into the workplace
- Patient screenings including daily temperature checks
- A daily risk management/COVID-19 meeting was held to update employee and patient safety concerns
- New admissions resumed in June 2020 and all new admits were required to have a negative test prior to admission
- All new admits will remain in quarantine following the latest CDC guidelines for patients under investigation



Achievements in Workforce Development

Many workforce challenges, including a high demand for and shortages in direct care workers, a large number of the current workforce reaching retirement age, drastically different expectations regarding the workplace and the nature of work from the new generation of workers, and a need for more training of existing workers have been experienced in many industries. The Alabama Department of Mental Health (ADMH), has been facing these challenges for many years. In FY2020, ADMH was committed to finding innovative, intentional, and efficient ways to increase workforce recruitment and retention. As part of the department's long-range planning (LRP) efforts, the Division of Administration, Human Resources Bureau, created a Workforce Development Task Force (WDTF) to address identified challenges and to expand the department's quality of workforce.

A component of the ADMH LRP addressed the need for workforce training. Two training opportunities were identified to coincide with workforce development: technology resource training and an ADMH mission, vision, and values training. With ever-evolving technology resources at our disposal, the ADMH Bureau of Information Technology Services (BITS) created a technology training series

The ADMH Mission, Vision, and Values training was developed to give staff an opportunity to identify how their work aligns with department priorities.

One strategy identified through the work of the WDTF was to improve recruitment across all ADMH exempt personnel classifications. Lynn Hubbard, Director of Human Resources Management said, "One of our concerns was that we were losing potential job applicants due to our antiquated application process which required the submission of paper applications and did not allow applicants to save and update their applications in order to apply for multiple jobs. We laid out an implementation plan to move to an electronic application process."

This plan was completed, and the system went into effect on September 18, 2020. Under the new electronic system, applicants can access, complete, and submit their application online. Brooke Hibbard, Assistant Director of Human Resources (HR) said, "We are hoping that this will increase the number of applications submitted for consideration since the process is now more user friendly and is accessible via mobile devices." The new system also saves time and resources of HR staff by automating many of the record keeping and notifications currently performed manually.

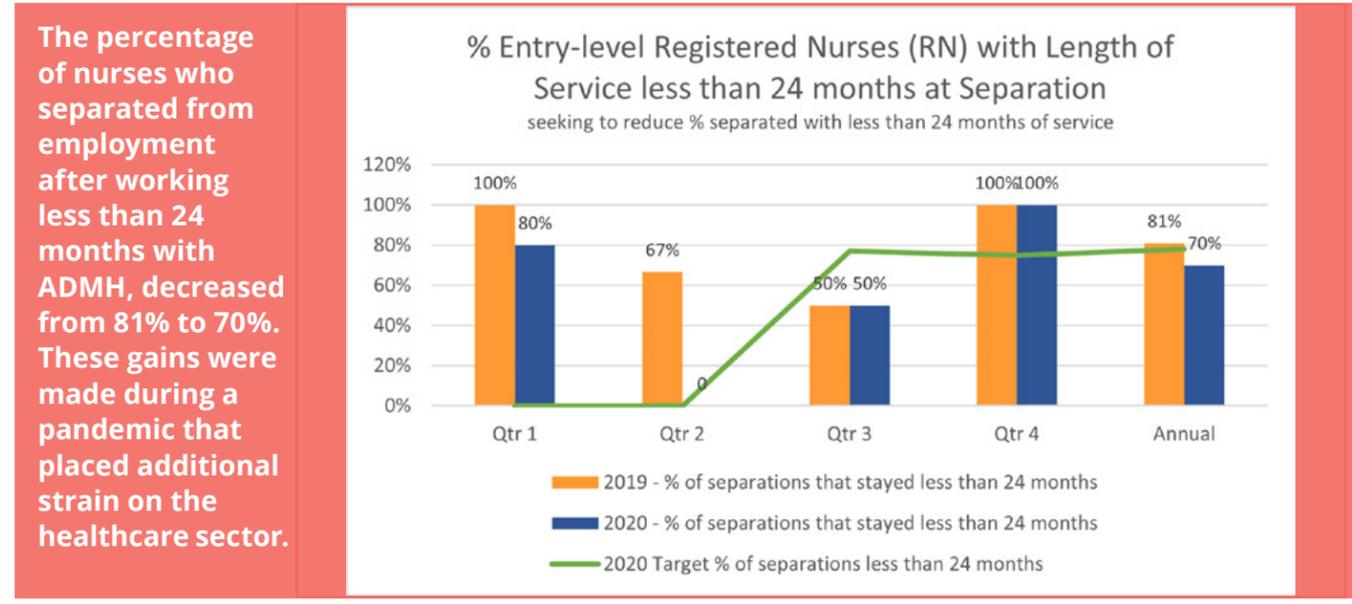
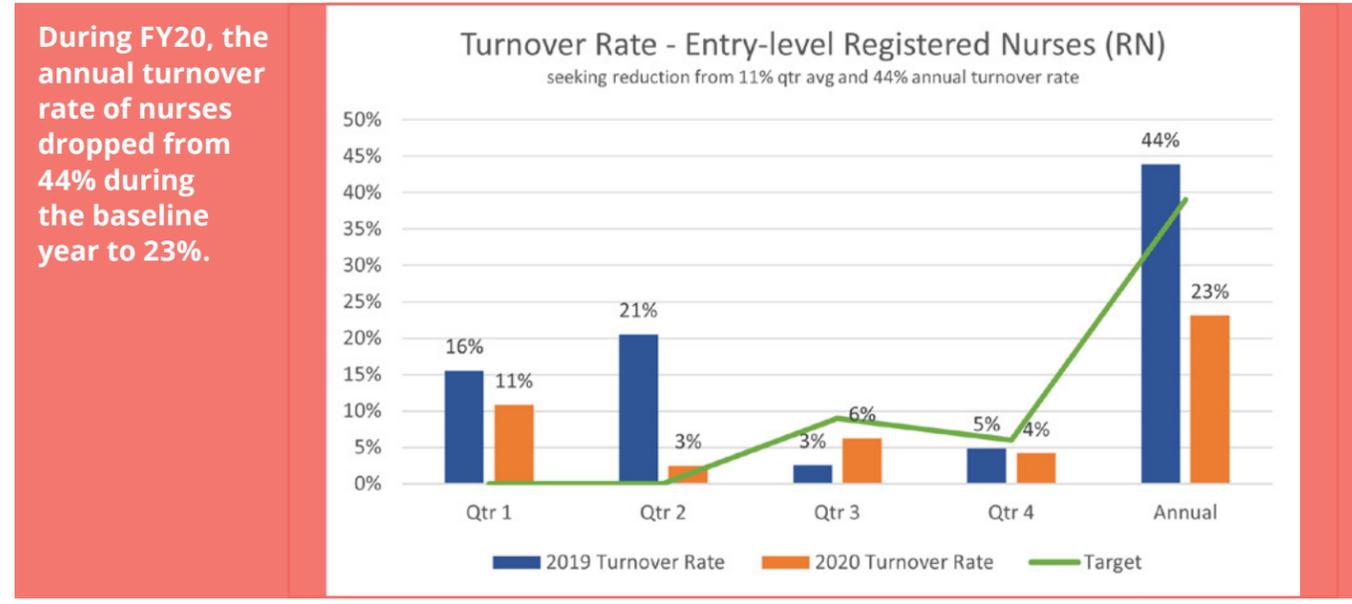
In addition, ADMH is meeting the challenge of recruiting and has improved the number of filled job vacancies by enlisting the help of e-recruit sites, sharing weekly posting of job announcements through social media, and collaborating with Public Information to distribute news releases of open positions.

Hibbard says another strategy HR plans to employ is to gain additional exposure to employment opportunities by developing a targeted email distribution list that will include two-year, four-year, and private secondary education institutions in Alabama. "We know that direct recruitment will benefit students who may have training that our positions require."

Through the work of the WDTF, specific measures were developed to identify and target areas of critical need. With the difficulty in recruiting Psychiatrists, Psychologists, Nurses, and Mental Health Workers (all of which have nationally identified shortages), a large part of the workforce development plan focused on recruitment and retention in these classifications.

The WDTF identified the need to adjust salaries for Psychiatrists and Psychologists, which required conducting a job analysis and salary survey, completing an operational plan revision, and increasing pay grades.

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Achievements in Workforce Development

“The salary adjustments were made not only to retain our current psychologists and psychiatrists, but to also make the positions more attractive to successfully recruit for these positions. We recognized the need to be more competitive within the current market,” said Hibbard.

Despite nursing salary increased effective January 1, 2019, data indicated that a large percentage of entry level Registered Nurses (RN) left the department within the first 24 months of employment. Therefore, the LRP incorporated the establishment of a promotional opportunity for employees in the RN I classification by establishing a new classification between the entry level, RN I, and the RN II. The RN I, Senior was established effective January 1, 2020. With the creation of this position, employees in the RN I classification who completed a probationary period and receive an annual appraisal at ‘meet standards or higher’ are eligible for promotion to the RN I, Senior classification. Employees receive a salary increase reflective of their experience with ADMH. It also allows for a possible 20 percent increase in salary during their first 18 months of employment, which should improve an ability to retain employees beyond the 24 months of employment.

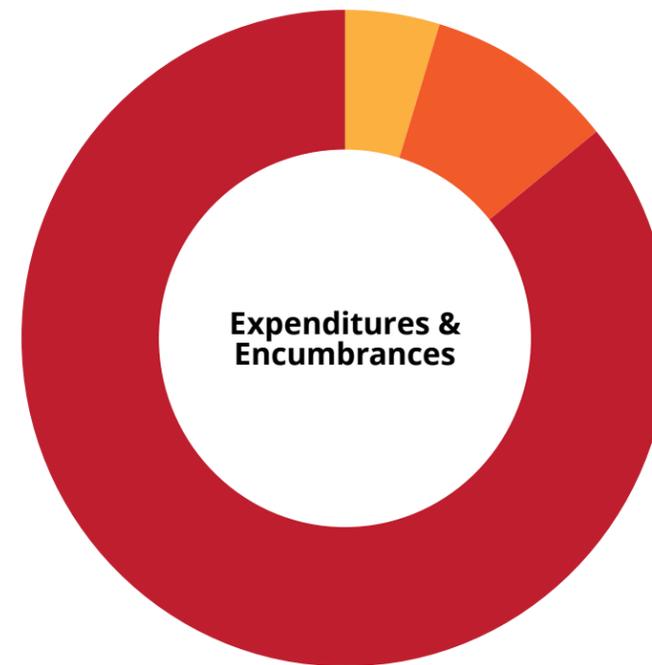
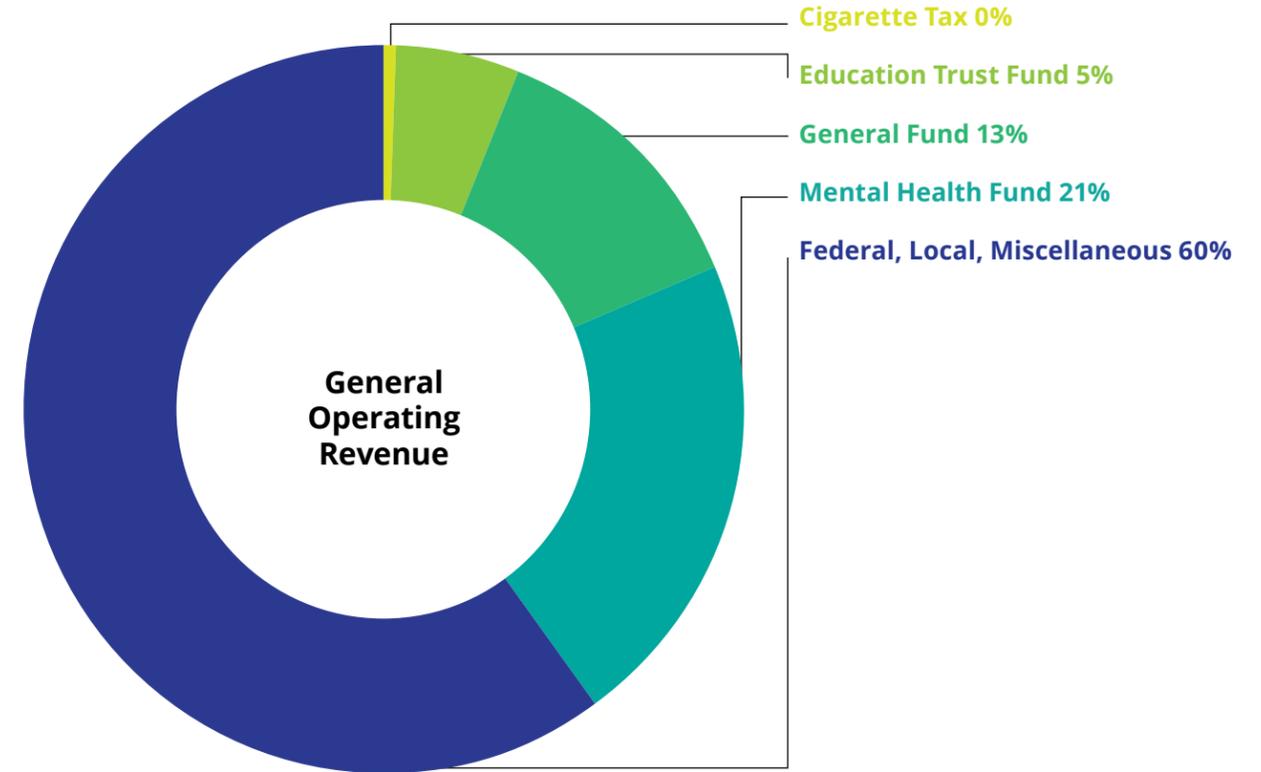
Lastly, the Workforce Development LRP identified the need to stabilize the direct care Mental Health Worker workforce. These positions, which currently have the highest turnover rates, are critical positions serving as the backbone to patient care. In October 2019, ADMH implemented an incentive bonus based on attendance. The incentive is designed to encourage current staff to report to work, providing optimum patient care. A reduction in call-ins was noted shortly after implementing this incentive, but data collected indicates an increase for the last two quarters, which can be attributed to the COVID-19 pandemic.

ADMH Human Resources collaborated with State Personnel to assist in developing a series of pay structures to retain current workforce and attract new employees. The established structure allows employees the ability to promote and obtain salary increases within the first 18 months of employment as they train, work independently, and become a fully functional Mental Health worker. Furthermore, to provide appropriate and competitive salaries for these classifications, the series includes increased pay grades. After collecting data for one full year, it is noted that ADMH has seen the greatest improvement in the retention and recruitment of RN I positions.



Lynn Hubbard summed up the Long Range Plan for Workforce Development by saying, *“As we move into the next year, we are optimistic that more favorable outcomes will be noted as a result of this intentional approach to expanding and developing our workforce. The Long-Range Plan has been an excellent tool in realizing goals and measuring outcomes that had not been available before. My hope is that as people read about our efforts, they will realize the value of our employees in carrying out our mission to serve, empower, and support. Strategies and plans do not promote the health and wellbeing of Alabamians with mental illnesses, developmental disabilities, and substance use disorders; our employees and those working in provider agencies across the state do.”*

Financial Report Fiscal Year 2021



Administration 5%	\$46,185,653
Special Services	19,924,124
Central Office	26,261,529
Facilities 9%	\$95,464,768
Bryce Hospital	48,566,636
East Alabama Medical Center	1,300,000
Harper Geriatric Psychiatry Center	25,322,921
Taylor Hardin Secure Medical Facility	20,285,211
Community Programs 86%	\$860,771,580
Developmental Disabilities	515,047,351
Mental Illness	273,292,931
Substance Use Disorder	72,431,298
Total	\$1,002,422,011

Number of Individuals Served

Developmental Disability Services

Intellectual Disabilities Waiver	5,061
Living at Home Waiver	510
Targeted Case Management Waiver	5,668
State Only	14
Total	5,798

SpectraCare Health Systems	3,891
WellStone	9,075
West Alabama MHC	1,612
Total	99,313

Mental Illness Services

Bryce Hospital	343
East Alabama Medical Center (Adolescent Unit)	15
Mary Starke Harper Geriatric Psychiatry Center	197
Taylor Hardin Secure Medical Facility	189
Total	744

Substance Abuse Treatment Services

AIDS Alabama	27
Alcohol and Drug Abuse Treatment	1,007
Aletheia House	2,744
Altapointe Health	1,326
Anniston Fellowship House	161
Birmingham Metro Treatment Center	396
Bradford Health Services	104
CED Fellowship House	308
Chemical Addictions Program	357
Cherokee-Etowah-Dekalb MHC	383
Central Alabama Wellness	896
Coosa Community Services: ROSS	46
Council on Substance Abuse	22
Dothan Houston County Drug Treatment Center	28
East Alabama MHC	944
East Central Alabama MHC	113
ECD Program	333
Family Life Center	1,090
Fellowship House	1,118
Franklin Primary Health Center	102
Gadsden Treatment Center	346
HealthConnect America	549
Highland Health	488
Hope House	146
Huntsville Metro Treatment Center	449

Huntsville Recovery	627
Indian Rivers	679
Insight Treatment Program	212
Lighthouse of Tallapoosa County	47
Lighthouse Cullman	83
Marion County Treatment Center	26
Marwin Counseling	227
MedMark Treatment Centers of Alabama - Dothan	168
MedMark Treatment Centers of Alabama - Oxford	431
Mobile Metro Treatment Center	407
Mom's	260
Montgomery Metro Treatment Center	241
Mountain Lakes	493
New Centurions	86
New Pathways	224
Northwest Alabama MHC	1,145
Phoenix House	286
Reclamation Center of Alabama	234
Recovery Organization of Support Specialist (ROSS)	551
Recovery Services of Dekalb County	582
Riverbend	629
Salvation Army Dauphin Way Lodge	202
Shelby County Treatment Center	473
Shoals Treatment Center	295
South Central Alabama MHC	538
Southeast Intervention Group	125
Southern Wellness Services	255
Southwest Alabama Behavioral Health Care Systems	232

SpectraCare Health Systems	1,594
St. Clair County Day Program	33
Substance Abuse Council of Northwest Alabama	66
Teens Empowerment Awareness with Resolutions	86
The Bridge	1,434
The Shoulder	161
Tri County Treatment Center	482
Tuscaloosa Treatment Center	852
UAB Drug Free	2,558
UAB Addiction Recovery	-
Walker Recovery Center	156
WellStone	1,291
West Alabama MHB	352
Total	32,306

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Commissioner's Offices

The Commissioner's Offices support the department-at-large with legal, legislative, communication and investigative issues, as well as protecting the rights of the people we serve and promoting mental health in Alabama.

Chief of Staff

Bureau of Special Investigations

Office of Rights Protection & Advocacy

Office of Internal Audit

Office of Legal Services

Office of Legislative & Constituent Affairs

Office of Public Information

Success

The Bureau of Special Investigations has developed a Special Agent position that is responsible for detecting, investigating or deferring investigations of allegations of criminal acts that occur within the group home settings that are regulated by the Alabama Department of Mental Health. The Special Agent has been instrumental in having alleged criminal cases presented to District Attorneys across the state for prosecution.

Success

This is the third year of the Alabama Opioid Overdose and Addiction Council. The council is now working to implement goals, objectives and strategies through its eight working subcommittees comprised of leaders and representatives of every organization and group that interfaces with individuals with substance use disorder and their families. Please read the 2020 Report to the Governor available on our website.

Administration

The Division of Administration provides support to the Alabama Department of Mental Health's Central Office and the Department's Facilities and Regional Offices through several specialized sections. Management of human resources and staff development, land and asset management, centralized accounting, policy and planning, information technology services, administrative support services, nurse delegation and nursing home screening services are housed in this division.

Bureau of Finance

Bureau of Human Resources Management

Bureau of Information Technology Services

Office of Land & Asset Management

Office of Administrative Support Services

Office of Certification Administration

Office of Life Safety & Technical Services

Office of Nurse Delegation Program

Office of Pre-Admission Screening

Office of Policy & Planning

Success

The Alabama Department of Mental Health utilizes less than three percent of the total budget for Central Office functions where services are delivered in a professional manner with a high degree of accountability.

Success

The technical team members of the Bureau of Information Technology (BITS) resolved over 9,500 service requests in 2020.

A focus in 2020 of BITS was to enhance our business continuity initiatives. With COVID-19, ADMH was able to expedite some of these projects to allow staff to carry out business functionality. Solutions such as electronic signature (eSignature), electronic fax (eFax), and virtual desktops (VD) were implemented to allow staff to perform business processes away from the office. Although designed for use for the pandemic and other business interruptions, these solutions will be used to enhance productivity during normal circumstances.

Developmental Disabilities

The Division of Developmental Disabilities (DDD) provides a comprehensive array of services and supports to individuals with intellectual disabilities and their families through community agencies, five regional community services offices, and three comprehensive support service teams that assist with behavioral, medical, psychiatric and dental services and supports.

The DDD staff provides oversight and support in planning, service coordination, service delivery, fiscal operations, contracts, eligibility, monitoring/ quality enhancement of services, and the monitoring and certification of all community agencies that provide services to individuals with intellectual disabilities.

Office of Administrative & Fiscal Operations

Office of Psychological & Behavioral Services

Office of Quality & Planning

Office of Supported Employment

Office of Self-Advocacy Services

Office of Systems Management

Office of Support Coordination

Success

The Office of Autism Services is up and running! We are accepting applications for individuals and providers and are currently serving clients in all regions of the state with Targeted Case Management and will be providing our Autism Rehabilitative Services statewide including; Behavior Support, In Home Therapy, Therapeutic Mentoring, Peer Support, and Psychoeducational Services.

Success

During the Fiscal Year, 82% of provider agencies created plans for de-confliction and were approved. This achievement allows for an increase in choice and independence for individuals with intellectual disabilities. Also, creating a person-centered assessment tool, plan and conversation guide, developed specifically for Alabama was major success for the Division. A mentoring program was also established to assist support coordinators with person-centered planning, using subject matter experts. As of October 1, 2020, person-centered planning was implemented statewide.

Mental Health & Substance Abuse

The Division of Mental Health & Substance Abuse (MHSA) is comprised of a comprehensive array of treatment services and supports through three state-operated mental health facilities and through contractual agreements with community mental health centers and substance abuse providers across the state.

Office of Certification

Office of Deaf Services

Office of Mental Illness Community Programs

Office of Peer Programs

Office of Pharmacy

Office of Prevention Services

Office of Quality Improvement & Risk Management

Office of Substance Abuse Treatment Services

In addition, the division manages the state's three mental health facilities: Bryce Hospital, Mary Starke Harper Geriatric Psychiatry Center, and Taylor Hardin Secure Medical Facility.

Success

The Office of Deaf Services (ODS) provided community-based services with 7,236 consumer contacts in FY20. ODS clinical staff experienced significantly increased contacts and caseloads, as more individuals were seeking help to deal with the COVID-19 pandemic. Agencies around the country seek assistance from ODS. Technical assistance and consultation were provided to 6,375 people and programs. Many of these requests were related to dealing with COVID-19 and how to provide safe and effective services to deaf and hard of hearing people.

Success

The Office of Substance Abuse Treatment Services (SATS) provides funding for Oxford House which is an evidenced based model of recovery housing. Under this initiative, 419 individuals were served which is an increase of 64% from FY19.

As a part of building and sustaining a skilled workforce, SATS sponsored 64 trainings during FY20 on topics such as motivational interviewing, strengthening families, developing trauma informed responses and other clinical areas. 1,325 individuals participated in the trainings and 27 become Train the Trainers on identified topics which will help to promote sustainability.



Employee Spotlights



Commissioner Lynn Beshear was named a 2020 Woman of Impact by Yellowhammer News for her compassion and understanding of others in September 2020.



Jane Duer, Director, Office of Infant and Early Childhood Special Programs, earned Endorsement® as an Infant Mental Health Policy Mentor in 2020 and will be added to the First 5 Alabama Endorsement® Registry.



Marguerite Walker, RN Supervisor, at Mary Starke Harper Geriatric Psychiatry Center was honored by the State Personnel Department in July 2020. Ms. Walker volunteered to work the COVID Unit, tested patients without hesitation, ensured the unit was properly set up for PPE usage, and took the initiative to clean and organize the unit without being asked and without complaint.



The Harper Heroes, employees at the Mary Starke Harper State Mental Facility, and were honored for their dedicated work in July 2020. ADMH opened an alternative care site away from the facility to assist ADMH in providing care to COVID-19 patients. The Harper Heroes worked in direct care with COVID-19 patients, caring for these patients by providing assistance needed to care for them and going above and beyond in their care of these patients. The Harper Heroes are Mental Health Workers I and II and include: Joyce Norwood, Sarah Hurst, Vera Milton, Jackie Humphries, Raymond Hendrix, Diane Patton, Earlie Jones, Willie Jackson, Mary Anderson, Gabriel Watson, Cynthia Pruitt, Alexis Small, Shandra Zanders, Chiquita McCoy, Shawanna Porter, Rose Thompson, Kimberly Tubbs, Aleah Smith, Debra Richardson, Briana Finch, Diykhembe Bishop, Janie Burns, Candace Cochran, Gayle Duncan, Brittany Mullenix, Latija Cochran, and Megan Moore.



Erin Harris and Tansley Marty of Bryce Hospital Pharmacy placed 2nd and 3rd in the Tuscaloosa Preservation Society 5K Heritage Race.



LaWana Kennedy, Infant and Early Childhood Mental Health Consultant, Office of Infant and Early Childhood Special Programs, received certification as Board Certified TeleMental Health Provider in October 2020.



Ida Lockette, ADMH Advocate and President of NAMI Mobile, assisted the chapter in winning the Shining Star Affiliate Award in August 2020 at the annual state conference.



Tyesha Durr, LPC, IMH-E® Infant Family Associate, Office of Infant and Early Childhood Special Programs, earned First 5 Alabama Endorsement for Culturally Sensitive, Relationship-focused Practice Promoting Infant Mental Health® as an Infant Family Associate (IECMH-IFA) and will be added to the national Endorsement® Registry in 2020.



Dr. Mark Woods, Medical Director, was honored by the State Personnel Department in July 2020 for his instrumental work from the beginning of the pandemic. He assisted in developing and implementing processes within ADMH hospitals to minimize the possibility of widespread exposure of COVID-19. Dr. Woods continuously consults with the Infectious Control Specialist in Tuscaloosa and with Public Health to ensure all possible precautions are followed. In addition, he works tirelessly to skillfully manage ADMH's supply of Personal Protective Equipment (PPE) as well as overseeing the treatment of COVID-19 positive patients housed in the newly established quarantine unit. Dr. Woods' exemplary service during this time remains the steady and trustworthy source of guidance for ADMH senior staff and thus for the ADMH system of care - both in ADMH hospitals and for staff working with our community providers.



Anna McConnell, State Autism Coordinator, was the 2020 CARES (Commitment to Autism Research, Education, and Service) Award Recipient at the Alabama Autism Conference.



Dorothy Melton, ASA-II, Division of Developmental Disabilities, completed her Associates Degree in Business Administration in 2020.

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