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Represents the state at large

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09/11/18 - 04/10/21

Represents the state at large

Dear Governor Kay Ivey,

The Alabama Department of Mental Health (ADMH) is pleased to present the Annual Report for fiscal year 2021. The report summarizes the department's accomplishments and showcases our dedication to building better lives for thousands of Alabamians with mental illness, substance use disorder and developmental disabilities. Our theme this year is Launching a New State of Mind.

The COVID-19 pandemic resulted in challenges to everyone's mental health; however, the national crisis offered our department an opportunity to help all Alabamians address the mental health challenges encountered during the pandemic. In partnership with the Alabama Emergency Management Agency, the department received a grant to stand up the Alabama Apart Together Crisis Information Line which served over 171,000 people by the end of fiscal year 2021. Many thanks to our partners at Jefferson, Blount, St. Clair Mental Health Center for delivering these essential services.

The announcement of three mental health Crisis Centers located in Mobile, Montgomery, and Huntsville put into place the foundation for building the Alabama Crisis System of Care. Now, Alabamians have someplace to go to receive crucial services instead of going to jail or boarding in an emergency department. Our department and the thousands of individuals and families we serve in the state are grateful for your continued support.

In addition to Crisis Centers, mobile crisis services continued to expand in some of Alabama's rural communities. Mobile crisis services provide the ability for someone to respond during a crisis instead of deploying law enforcement or emergency medical services.

In the coming months, we look forward to launching behavioral health crisis responses and suicide prevention services through the national 988 initiative which establishes a three-digit crisis line number. The universal crisis line phone number, 988, offers Alabamians more direct access to help in a mental health crisis through the ability of having someone to call. This work, along with continuing to build the behavioral health infrastructure for the Alabama Crisis System of Care, will create a structure - that ensures all Alabamians have someone to call, someone to respond, and someplace to go when they are in a behavioral health crisis.

Additionally, the Community Waiver Program (CWP) launched to serve individuals with intellectual disabilities (ID). In its first year, the Community Waiver Program aims to serve 500 individuals, supporting full participation in their communities, including opportunities for integrated employment, and ensuring support for preserving their natural and existing living arrangements to the fullest extent possible. Crucial to the success of the CWP is comprehensive person-centered planning.

On behalf of all Alabamians, we thank you for your leadership and support. Many thanks to the Alabama Legislature, our community providers, and stakeholders including our state hospitals. We are grateful for all who continued to work so diligently during the pandemic. We are proud of the progress that we are making together and remain tireless in our efforts to continue the strong growth reflected in this report.

Thank you,

Kimberly G. Boswell Kimberly G. Boswell, Commissioner

ALABAMA CRISIS SYSTEM OF CARE

Crisis Centers: Someplace to Go

In FY21, Governor Kay Ivey and key legislative leaders appropriated new state funds to establish and stand up the first three pilot Crisis Centers, and in October 2020, Ivey announced the awardees of the first three centers. The community mental health center awardees are AltaPointe Health (Mobile), Montgomery Area Mental Health Authority (Montgomery), and WellStone Inc. (Huntsville).

BY THE NUMBERS

524 Screenings

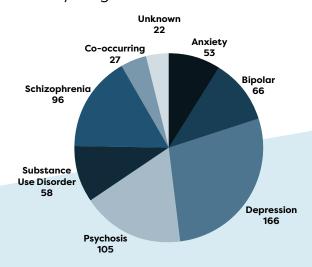
471 Individuals Avoided Jail Admission or Emergency Department Admission

111 Walk-ins

85 Law Enforcement Drop-offs

MOST COMMON

Primary Diagnosis



Crisis Centers are a designated place for communities, law enforcement, and first responders to take an individual who is experiencing a mental health crisis. Crisis Centers also include walk-in access for individuals, offering a safe and comfortable environment. A Crisis Center offers the individual in need "someplace to go."

The Crisis Centers offer more than just one service or program to someone in need. They also offer core components of crisis care; 24 hours a day, 7 days a week, 365 days per year access, assessment and linkage to resources; temporary (23 hours) and extended observation (<7 days), and collaboration with specialty providers such as those in the fields of Intellectual or Developmental Disability (IDD), Child and Adolescent Psychiatry, and Autism Spectrum Disorder.

Crisis Center services include master's level clinician assessment, physician services and medication management, nursing care, clinician led individual and group therapy, peer support and discharge planning/warm handoff. The Crisis Centers are first of their kind in Alabama and reflect a significant expansion of the system of care serving all individuals in need.

Having "someplace to go" when an individual or their family member is in crisis is now a reality in Alabama - having access to the right care, at the right time, in the right place. The Alabama Crisis System of Care is a critical resource which will change and save lives in Alabama, while decreasing the burden on law enforcement and emergency departments.



"I feel like the staff really listened to me. They were encouraging and I got the help I needed. The key thing is to stay as long as the medical staff feel is necessary then you can leave with the coping mechanisms and confidence to lead a good life."

> - Individual served at WellStone Emergency Services Crisis Center

"I got a lot of good treatment. Staff members were extremely nice. They understood what I was going through and that means so much to me."

> - Individual served at WellStone Emergency Services Crisis Center

"They took care of me in a very bad situation and got me healthy again. They put me first and showed me the utmost respect. They got me the help I needed."

> - Individual served at WellStone Emergency Services Crisis Center

"The staff at AltaPointe's Behavioral Health Crisis Center has always been amazing, and they are all willing to help ... Working in mental health care is a calling, and only special people like them can work in this field."

> - Individual served at AltaPointe Behavioral Health Crisis Center

The Alabama Crisis System of Care is focused on four critical goals:

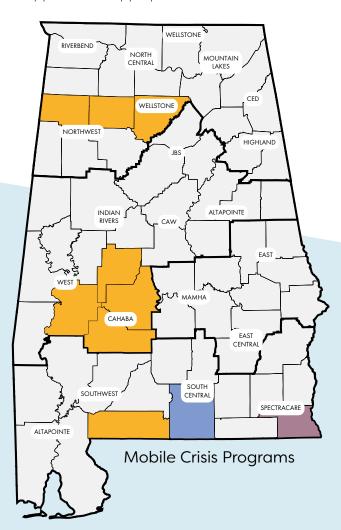
- Reduce the number of jail bookings and hospital emergency department boarding time due to a behavioral health crisis.
- Promote integrated services regardless of diagnosis (mental illness, substance use disorder, or co-occurring intellectual disability).
- Decrease the rate of referrals to more expensive inpatient care with extended lengths of stay.
- Develop a regional approach through planning and collaboration.

ALABAMA CRISIS SYSTEM OF CARE

Mobile Crisis: Someone to Respond

A mental health crisis can occur anywhere, at any time. It may occur in an urban or metro area of our state where immediate assistance is readily accessible, or it may occur in a rural area, where transportation is a major barrier to access care. Mobile crisis teams are a vital component of our state's system of care, as their mobility enables them to more quickly respond to and address mental health crises no matter when or where they occur.

In the FY20 state General Fund budget, the Alabama Legislature invested \$2.5 million in rural crisis care programs through a supplemental appropriation.



Five rural crisis projects were funded using the mobile crisis team model in the Substance Abuse and Mental Health Services Administration (SAMHSA) "National Guidelines for Behavioral Health Crisis Care – Best Practice Toolkit." Mobile crisis teams deploy with emergency medical services or law enforcement so behavioral health crisis calls going to 911 can have "someone to respond" with expertise in behavioral healthcare. In addition, mobile crisis services address the transportation barrier experienced in rural communities.

Five community mental health centers across the state received \$500,000 each in funding:

- · Cahaba Center for Mental Health
- Northwest Alabama Mental Health Center
- Southwest Alabama Behavioral Health Care Systems
- WellStone Behavioral Health (Cullman)
- West Alabama Mental Health Center

ADMH works directly with these five providers to provide technical assistance and guidance to ensure their program development was connected to the Alabama Crisis System of Care, tailored to the specific needs of their rural communities. Each of the five sites have unique services but common in their designs are mobile crisis services that include co-response with law enforcement.

With the introduction of the SAMHSA 5% Crisis Set Aside funds (both through the standard federal Mental Health Block Grant and the two COVID/American Rescue Plan Act supplemental funds), additional mobile crisis teams will be established. Two providers were selected for mobile crisis services expansion through the previous Crisis Center RFP process:

- SpectraCare
- · South Central Mental Health Center

Through these new funding efforts, there are currently seven mobile crisis teams operating out of community mental health centers across the state.

¹Source: SAMHSA National Guidelines for Behavioral Health Crisis Care – Best Practice Toolkit



"My family experienced a crisis issue with my daughter. I took her to the hospital. She was experiencing a psychotic episode. She did not feel comfortable staying there.

I called the Montgomery Mental Health Crisis Line. Ms. Galati was assigned the case and immediately came the same evening. Ms. Galati assessed my daughter, and determined she required immediate care. Mr. Pugh, a Crisis Representative, assured me they would do whatever they could to help my daughter.

I appreciate the entire staff who have a passion for mental health care. It is not easy to obtain care for adult children (with mental health disorders). The police will take them

to jail for disorderly conduct. A court date is given that they may or may not remember. They will be arrested many times and given fines that they cannot pay. This is a vicious cycle in the life of a person who deserves the care of a crisis counselor. I wonder, "Why is there always a jail cell, but never enough beds available for our mentally ill citizens?"

We are blessed to have the support of the Montgomery Area Mental Health Authority to partner with and to support mental health for adults like my daughter."

> The Mother of an Individual served by the Montgomery Area Mental Health Authority Mobile Crisis Team/Crisis Center

Centers for Medicare & Medicaid Services (CMS) Crisis Mobile Planning Grant

The Alabama Medicaid Agency and ADMH are honored to receive a CMS State Planning Grant for Mobile Crisis Services, a 12-month grant enabling transformation efforts to current mobile crisis model within the Alabama Crisis System of Care. The grant will assist in increasing the quality of care of all mobile crisis teams to obtain national standards, as well as to secure the appropriate Medicaid funding strategy for future financial sustainability. These efforts are vital for the expansion, development, and sustainability of mobile crisis services.

ALABAMA CRISIS SYSTEM OF CARE

988: Someone to Call

On July 16, 2022, the 988 National Suicide Prevention Crisis Line will become available, offering direct support for those seeking help for a mental health crisis. The three-digit telephone number has been designated as the alternative number to 911 calls and will provide the public access to more direct and appropriate mental health care.

Families know too well the impact of a tragedy that may occur when a loved one is in a mental health crisis. Someone reaches out to dial 911 in search of help – and unfortunately, the right resources are not always readily available. Mental health care is needed. Now, with 988, a direct link to crisis care will be made.

Like the 911 number – which was first launched in Haleyville, Alabama – the new three-digit 988 dialing is an easy-to-remember number to access crisis lines that link to potentially life-saving resources. Dispatchers will align the importance and level of care of crisis services with the same urgency as 911 emergency services.

988 is an essential element of a crisis care infrastructure which includes someone to call, someone to respond, and someplace to go for care. 988 will fulfill the element of "someone to call" with a consistent and memorable number for the public to dial. "988 is not only about answering calls—it's also about making appropriate and accessible referrals, creating a system that connects people to a continuum of care at critical moments," explained Commissioner Boswell. "The crisis line provides an opportunity for the Alabama Department of Mental Health to meet Alabamians where they are and expand resources and support during difficult times."

The crisis lines bring 988 into a crisis response system which significantly reflects a growing momentum around the issue of mental health crisis response at the federal, state, and local levels. In FY21, a Study Commission (ACT 2021-359) was created to prepare for the 988 Comprehensive Behavioral Health Crisis Communication System.

The Commission studies and provides recommendations for the implementation of the 988 system to enhance and expand behavioral health crisis response and suicide prevention services in response to the 988 national implementation on July 16, 2022.

Meetings with the appointed commission members, stakeholder groups and agencies were held throughout 2021 to determine the recommendations related to strategies for implementation. A report was submitted to the legislature and governor prior to the 2022 Regular Legislative Session.

Mobile Crisis Teams found in several regions of the state offer "someone to respond." These teams are an outreach of the local community mental health center (CMHC) and will have the ability to respond to an individual in need. The element of "someplace to go for care" is filled by Crisis Centers currently located at AltaPointe Health in Mobile, Montgomery Area Mental Health Authority in Montgomery, and WellStone in Huntsville. These three initial Crisis Centers were first funded in FY20. A fourth center, located in the Birmingham area, has been awarded and funded in FY22, with an anticipated opening in Summer 2022.

"The ability to directly call a mental health care crisis line, and receive care, is a huge step forward in addressing the stress, anxiety and mental health needs of individuals in our state," said Boswell. "Overdose and suicide attempts have sharply risen and 988 offers individuals access to care more quickly and directly than ever before." The fully implemented 988 crisis line will reduce avoidable emergency department or hospital admissions for people in crisis and avoid traumatic engagements with the criminal justice system.

The 988 number will be available for use on July 16, 2022, for both calling and texting. Until that date, individuals should continue calling 1-800-273-8255 (1-800-273-TALK) or through an online chat. Members of the military, veterans and their families can reach the Veterans Crisis Line by calling the number and pressing 1, by texting 838255 or through an online chat.



Alabama and the National Suicide Prevention Lifeline

2020

What's the Lifeline?



tree and contidential support to people in suicidal crisis or emotional distress





The Lifeline connects more than 80% of callers to a call center on the first routing attempt (within 30 seconds after the greeting)

and around **95%** on subsequent attempts (within 60-90 seconds after the greeting)



If a local center is unable to answer, the call is rerouted to one of our national backup centers.

Administered by **Vibrant** through a grant from **SAMHSA**

V!brant



Lifeline calls in Alabama

3

Lifeline-affiliated centers currently in Alabama

Alabama Lifeline Call volume has increased 57% since 2016

57%

In 2020, the Lifeline received nearly 2.4 million crisis calls across the United States

2.4 million

35,095

calls were from

22,013

calls were connected to crisis centers in state



Of the 35,095 callers, 9,006 pressed "1" to be transferred to the **Veterans Crisis Line**

and 497 pressed "2" for the Spanish Language Line (



ALABAMA APART TOGETHER

Crisis Information Line

1-888-442-1793

www.alabaamaaparttogether.org

As a direct result of the COVID-19 pandemic, many people experienced significant, unimaginable hardships, too challenging to undergo individually. In partnership with the Alabama Emergency Management Agency (AEMA), the Alabama Department of Mental Health (ADMH) recognized a critical need to address the challenging hardships experienced by individuals within the state. Through this recognition, the aforesaid agencies collaborated and applied for a grant designed to help Alabamians endure presenting challenges.

The partner agencies received funding from the Federal Emergency Management Agency (FEMA) and Substance Abuse and Mental Health Services (SAMHSA) for the development of the Alabama Apart Together (AAT) grant project to address the needs of Alabamians during the COVID-19 pandemic. ADMH utilized the grant to establish, support, and provide important information statewide through various means and strategies. For example, the COVID-19 Crisis Line was created to be utilized by Alabamians, and it was staffed by experts in the mental health field. Through the leadership, vision, and implementation achieved by the AAT Staff, the project grew significantly and continued to be successful in meeting the needs of the state. Significant staff members of the AAT Project included State Contact, Dr. Ileeia A. Smith, State Project Director, Lisa Turley, State Project Coordinator Vivian Smith, and State Administrative Assistant Velma Nix.

AAT supported community-based outreach, counseling, and other mental health services through ADMH community mental health centers statewide. "We were grateful for another opportunity to provide Alabama citizens with links to essential supports, during this challenging time of the pandemic," said Dr. Ileeia Smith, Director, Office of Policy and Planning, ADMH. The project was instrumental in providing resources and other services to individuals, older adults, individuals with disabilities, healthcare professionals, first responders, frontline workers, teachers, and all others experiencing stress or anxiety related to the COVID-19 pandemic.

When an individual sought assistance through AAT, various available service options were presented. Service options included referral resources, online support groups, anxiety and stress management techniques, educational materials for social distancing, quarantine and isolation support services, and other emotional well-being services to be utilized throughout the COVID-19 outbreak and pandemic. AAT facilitated the direct connection between citizens and the resources available to provide assistance.

Throughout the transition from various stages of the pandemic since early 2020, individual support needs were amplified as school systems resumed face-to-face instruction and as individuals increase participation in social activities. Enhanced vaccination efforts across rural areas and among special populations also impacted individual support needs. As a result, the AAT Staff continuously addressed the following COVID-19 response areas:

 Anxiety and Stress Management: AAT staff diligently addressed the emotional and mental stressors citizens have experienced since the start of the grant project; however, staff members observed an increase in persons reporting significant levels of stress and anxiety. AAT staff screened and referred those with needs beyond the scope to the statewide FEMA/SAMHSA Alabama COVID-19 Response Unit team for long-term counseling support and other relevant services. Two statewide media campaigns addressed anxiety and stress management broadcasted throughout the state. One campaign addressed the challenging return to school for parents, caregivers, school-based employees, and students. The other campaign addressed the complex anxiety, apprehension, and stress experienced by employees and employers.



- Vaccination Campaign Information and Media:
 AAT staff developed specific vaccine campaign
 materials to be distributed to the African
 American community, the Spanish-speaking
 community, parents of school-age children,
 first responders, and the general public. These
 campaign materials were distributed hand to-hand, electronically, and/or via media
 outlets. The AAT staff recognizes the significant
 population of Alabamians steadfast in their
 resistance to vaccination efforts. As a result, AAT
 Staff members were equally steadfast in their
 commitment to provide factual information
 to the population along with the scientific
 evidence supporting the benefits of vaccination.
- COVID-19 Testing: AAT broadcasted active COVID-19 testing sites on local and statewide social media sites, webpages, and phone/ in-person encounters in order to ease the accessibility of the necessary testing information for the general public. AAT staff interacted daily with local health departments and private providers offering testing to the community to obtain accurate, updated information regarding service locations, hours, and testing protocol.
- Delta Variant Information: Staff saw a rise in questions and concerns in individual callers regarding perceived risk, the continued use of masks, social distancing, and ongoing fear of another "Stay at Home" order statewide. Topics to be included in the Vaccination/Testing/ Variant discussions are the following: How COVID-19/Delta variant attacks the immune system, how vaccinations work, Long Hauler Education, COVID-19 Fatigue, COVID-19 Anger Displacement, and Building COVID-19 Resilience.

Rental and Utility Assistance Information: AAT
Teams partnered with various organizations
to achieve the following: assist and facilitate
the connection of citizens to the necessary,
available services; educate the public
about available benefits and resources;
and promote the rental/utility assistance
services and locations on all of the AAT
social media platforms. More citizens were
financially stressed; therefore, staff promoted
information as broadly as possible to ease
an already emotionally exhausted public.

At the end of FY21, 171,091 individuals were served by the AL APART TOGETHER Crisis Line, far surpassing the expected number of 37,000. The grant program ended direct service 12/30/2021. The 1-888-442-1793 line ended operation on 03/29/2022.

DEVELOPMENTAL DISABILITIES

Home and Community-Based Settings Rule

The Alabama Department of Mental Health Division of Developmental Disabilities' (DD) work in FY21 to comply with the Home and Community-Based Settings Rule (HCBS) has been a consistent progression from the last two years, creating more independent and innovative opportunities for individuals with intellectual and developmental disabilities.

As in previous years, the Stakeholder Task Force and small work groups, with broad representation of advocates, providers, family members and others, continued their engagement to guide the state's compliance plans. A large portion of the HCBS work focused on person-centered planning, settings validation, and transition to compliance planning.



DD also revised the Support Coordination Monitoring Tool, which provides vital information about the content and quality of personcentered plans. The information learned from monitoring of the Support Coordination Agencies was then used to train Support Coordinators. Bimonthly meeting were also held with Support Coordination Supervisors to provide guidance and feedback about person-centered practices. DD also met with Support Coordination Executive Directors monthly during the fiscal year.

ADMH continued to promote the campaign and information to stakeholders through its dedicated HCBS website at www.hcbsalabama.org. This website includes all educational materials related to the HCBS Settings Rule.

Relevant workgroups worked closely with the Alabama Medicaid Agency (AMA) in reviewing validation data for both residential and non-residential settings.

Despite the impacts of COVID-19, DD was able to move forward with its work to achieve compliance with the HCBS Settings Rule. In the next year, work group meetings, trainings and other initiatives will resume to fully engage all critical partners in this work. The next year should also see the State Transition Plan (STP) published and ultimately, approved by CMS.

As in previous years, the Associate Commissioner and staff of the ADMH-DD are acknowledged for their hard work in developing and implementing work plans. Likewise, the dedication of critical stakeholders of advocates, families, providers, and other constituents of the department, is also acknowledged for their contributions and commitment to promoting full community integration and inclusion of Alabamians with intellectual disabilities.

COMMUNITY WAIVER PROGRAM

Launching into Fiscal Year 2022

The Division of Developmental Disabilities (DD) launched a new waiver program in 2021, focused on serving individuals before they and/or their family members are in crisis. The Community Waiver Program (CWP), approved by Centers for Medicare and Medicaid Services (CMS), and fiscally managed by the Alabama Medicaid Agency (AMA), focuses on maintaining family relationships and promoting community inclusion and competitive employment, which are of utmost importance to an individual's health, well-being and happiness, The waiver provides needed supports that can enable individuals with developmental disabilities to continue to live with family or in their own homes.

In 2022, the Community Waiver Program aims to serve 500 individuals who will come directly off the waiting list, reducing it by twenty-five percent. The new waiver program will be targeted to serve persons with intellectual disabilities not currently receiving services through a current Home and Community-Based Services waiver, including persons currently on the waiting list for the existing Intellectual Disabilities or Living at Home waivers. Service providers in this new program will focus on goals of Home and Community-Based Services programs such as community integration, opportunities for employment, and developing skills for independence.

The Community Waiver Program offers services to persons with intellectual disabilities in five enrollment groups, based on age and relative independence, each with a set of services designed particularly to serve them:

- 1. Children (ages 3-13) with intellectual disabilities who live with family or other natural supports
- 2. Transition-age youth with intellectual disabilities who (ages 14-22) live with family or other natural supports or who (ages 18-22) live independently
- 3. Working age or older adults (ages 22+) with intellectual disabilities who live with family or other natural supports or who live independently
- 4. Individuals (ages 3+) with intellectual disabilities who are unable to live with family or other natural supports or to live independently
- 5. Individuals with intellectual disabilities, ages 22 and older, who have a minimum of one substantial functional limitation

What are the Goals of the CWP?

- To keep families together by serving individuals in their own home, family home or with other natural supports
- To assist individuals and their families before they are faced with crisis situations
- To promote true community integration and inclusion, including competitive integrated employment
- To reduce Alabama's Waiting List

PERSON-CENTERED PLANNING

The Alabama Department of Mental Health (ADMH) Division of Development Disabilities (DD) has been actively involved in Home and Community-Based Services (HCBS) over the last two years. One major element of HCBS is Person-Centered Planning (PCP). A person-centered approach is a strengths-based approach to the delivery of services. The existing strengths and abilities of the individual, their community, natural supports, and other impact resources are identified.

Individuals have a primary voice in identifying and celebrating their own unique strengths and abilities. It is possible to celebrate one's strengths while also exploring other possibilities needed to achieve life goals. Family members who encounter person-centered, strength-based planning reinforce a model of support for their loved ones.

Support Coordinators (SC) assist individuals in the development of plans that meet personal goals of achieving one's best life experience. The use of "A Conversation Guide" begins the process. The ADMH proudly acknowledges the completion of our first year utilizing Person-Centered Planning which began on October 1, 2020. This statewide initiative has now transitioned to the use of SCs who are responsible for facilitating the personcentered assessment and planning process.

A network of direct service providers collaborates on vital aspects, which include: development of the person-centered plan; putting the plan in motion; and assisting in the delivery of opportunities that aid in the achievement of identified goals. Communities are encouraged to engage in the process. The collective good of all is advanced by the active involvement of individuals, families, and providers.

In an effort to better serve individuals across the state, the Division of Developmental Disabilities expanded work on Person-Centered Planning in FY21. To better develop the program, the Support Coordination Monitoring feedback tool was revised.

Additionally, a Strategic Steering Committee was developed; recommendations from this committee were utilized to update Basic Assurances for Support Coordination. Out of this gathering of individuals, families, and stakeholders, a forum emerged. The input offered on the continuing adjustments to PCP gained assurance the approach remained user-friendly. Staff working in the Division are now in the process of developing training for provider agencies as Qualified Developmental Disabilities Professionals.

PERSON-CENTERED PLANNING GUIDE



What is Person-Centered Planning?

It's all about you! Your goals, dreams, needs, wants, likes, and dislikes. We are here to follow your lead, and help you connect to the resources you need to live the life of your choosing.

Think about & share:

- What are your communication preferences and needs?
 Examples- Language, sign language, written information (large print, braille, audio, accessible electronic formats, other formats.)
- What role do you want to take in this process?
 Examples- lead process, share the lead with another, or would you like to learn more about how to lead



Who do you want on your team?

You, your legal decision maker (if you have one), and a support coordinator will always be part of your team. You are the central part of your team and you should be involved in every part of developing your person-centered plan.



On July 1, 2021, PCP implemented the revised Support Coordinator Monitoring Tool. This revision resulted in an increase in the frequency of Support Coordination agencies who assisted with improvement of person-centered plans. The staff worked more efficiently using the Microsoft Teams Channel group for Support Coordination Agency staff as a resource to answer questions and provide real time updates.

Training was provided for initial Person-Centered Assessment and Planning Training to newly hired Support Coordinators across the state. Staff also provided follow-up training bimonthly on specific content areas to Support Coordinators and Day-4 PCP training to all SCs across the state.

The Division continues to engage Support Coordination Directors and Supervisors in monthly meetings to discuss PCP changes and updates. Monthly communications offers guidance and training to both Direct Service and Support Coordination providers.

This new approach ensures unique strengths and abilities are celebrated and explored in achieving one's life goals. Individuals are equal partners in support of living their best life. The department is excited to continue the work into FY22 and beyond.

To view full PCP Planning Guide, please visit https://bit.ly/30B31ng.

TRAUMATIC BRAIN INJURY

Traumatic Brain Injury (TBI) is a condition that can have many negative impacts on the lives of the individuals affected. Undiagnosed, TBI can lead to inappropriate treatment and intervention and higher rate of relapse.¹

In FY21, the Alabama Department of Rehabilitation Services (ADRS) Traumatic Brain Injury Program concluded a two-year Federal Administration for Community Living Grant, partnering with the Alabama Department of Mental Health (ADMH) to screen, identify and customize treatment interventions for individuals with TBI within the state behavioral health and substance use disorder programs. The partnership led to a brief screener for TBI in mental health settings to test the feasibility of implementation of such a screener, and to examine the scope of TBI among patients with mental health and/or substance use disorder.

186 people screened

47%

46%

Female Non-Caucasian

90%

36%

22-59 years old Employed

Veteran

Uninsured

The 2021 TBI/ADMH dissemination report showed one in three individuals within the mental health system screened positive for a history of TBI. Those with a suicide attempt were 2.6 times likely to have a TBI, and those diagnosed with a trauma disorder were 1.14 time more likely to have a history of TBI.

Also, during FY21, the ADRS TBI Program was awarded a new Federal Administration for Community Living TBI Grant for the next five years totaling \$1,000,000 for TBI Systems Change in the state. This grant will continue to build upon the success of a previous grant in partnering with ADMH to expand head injury screening and education statewide to ADMH Community Providers, Crisis Centers, and Hospital Behavioral Health Units. A statewide TBI navigation system will be developed within ADRS for helpline calls, Resource Facilitation, and Information/Referral Services. ADRS will also partner with the Alabama Head Injury Foundation to provide a Statewide TBI Caregiver Peer to Peer Mentoring Program.

For more information, please visit www.alabamatbi.org.

To view the final report and recommendations, please visit https://bit.ly/3dKx4Z9.

To view full infographic related to the final report, please visit https://bit.ly/3m0jNAn.



Nearly 1 in 3 screened positive for TBI

¹Source: Corrigan et al., 2017

BRYCE HOSPITAL MUSEUM

Honoring the History of Mental Health in Alabama

Bryce Hospital, formerly Alabama's oldest and largest inpatient psychiatric facility, has broken ground to be transformed into the Bryce Hospital Museum and the Performing Arts Academic Center at The University of Alabama.

The museum and the location were established with the deed of sale of the historic Bryce Campus to The University of Alabama. The museum will be located on the second floor of the Bryce Main above the Catherine and Pettus Randall Welcome Center.

Throughout the museum, visitors can expect to see and learn about four distinct areas of the hospital, the history of Bryce Hospital, life at Bryce Hospital, the architectural structure of Bryce Hospital, and a rotating exhibit space that will feature hospital memorabilia.

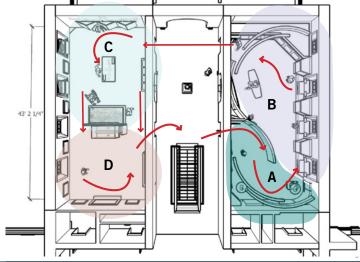
The Alabama Department of Mental Health's Historian Steve Davis says there will be a bust of Dr. Peter Bryce in the hallway along with a life-size painting of Dr. Bryce and his wife Ellen Clarkson Peter-Bryce.

"The rotating exhibit will have an emphasis on Searcy Hospital at Mount Vernon, AL and its relationship with Bryce. In addition, it will also feature a separate exhibit on cemeteries at the state hospitals," said Davis.

"While the life at Bryce Hospital section will be focused on patients and their environment at the institution there will be an emphasis on where to receive help today, what the mission statement of the Alabama Department of Mental Health is and how the mission continues today," explained Davis.

One of the museum's highlighted features will be an architecture section of Bryce, which will include the original plans of the main building, as well as photographs of how the hospital became one of the largest buildings in the world.







OFFICES

Alabama Department of Mental Health

Commissioner's Offices

The <u>Commissioner's Offices</u> 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.

The Commissioner's Offices are comprised of the <u>Chief of Staff</u> who supervises the Bureau of <u>Special Investigations</u>, Office of <u>Rights Protection & Advocacy</u>, and Office of <u>Internal Audit</u>; the Office of <u>Legal Services</u>; the Office of <u>Legislative & Constituent Affairs</u>; and the Office of <u>Public Information</u>.

Success

The Office of Rights Protection and Advocacy accomplished the following for FY21:

- Conducted investigations into 70 complaints of alleged rights violations
- Taught 93 classes on topics such as Do You Know Your Rights/Responsibilities? (for staff and clients) and Conducting Serious Incident Investigations (for staff)
- Conducted 1,396 unannounced monitoring visits to ADMH certified programs resulting in the advocate making recommendations to providers on 171 of those visits
- Provided 3,657 information and referral services
- Addressed 6,887 calls made to the program's 1-800 line
- Participated in 8,068 phone calls and meetings regarding the plans/concerns of individuals receiving ADMH services

Administration

The <u>Division of Administration</u> provides support to the departments's central office and the 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.

The division is comprised of the Bureau of Finance; the Bureau of Human Resources
Management; the Bureau of Information
Technology Services; the Office of Land &
Asset Management who supervises Office
of Administrative Support Services, Office
of Certification Administration, Office of Life
Safety & Technical Services, and Office of Nurse
Delegation Program; the Office of Pre-Admission
Screening, and the Office of Policy and Planning.

Success

The Office of Pre-Admission Screening (PASRR) Program provided screenings for approximately 230 nursing homes and provided 6,700 comprehensive evaluations to determine need, level of care, and appropriateness for nursing facility care.

Program Specialists provided PASRR technical assistance to stakeholders in all of Alabama's 67 counties. Within the past year, in addition to regular regulatory rules, guidance and assistance was provided to hundreds of stakeholders inquiring about the PASRR 1135 Waiver. The waiver allows a 30-day PASRR Screening delay for COVID-19 related needs during the Public Health Emergency Declaration. The program has screened approximately 6,596 waiver admissions for Medicaid certified nursing homes.

Developmental Disabilities

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

The DD 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.

The division is comprised of the Office of Administrative & Fiscal Operations; the Office of Psychological & Behavioral Services; the Office of Quality & Planning; the Office of Supported Employment who supervises the Office of Self-Advocacy Services; the Office of Support Coordination; and the Office of Systems Management.

Success

The Office of Infant and Early Childhood Mental Health (IECMH) provided leadership to 23 ADMH community providers as services returned to the homes of the families as they were prior to COVID protocol of virtual telehealth services. Office staff received national recognition for innovation in establishing and delivering IECMH consultation and addressing policies and funding needs to sustain these services.

Success

The Office of Supported Employment received a Work Incentives Planning and Assistance (WIPA) Grant from the Social Security Administration, which allows ADMH's Community Work Incentives Coordinators to enable beneficiaries with disabilities to receive accurate information and use that information to make a successful transition to work.

The office also had three Employment Resource Specialists certified through Marc Gold and Associates in Discovery and Customized Employment training, who then trained providers across the state.

Mental Health & Substance Abuse

The <u>Division of Mental Health and Substance</u>
<u>Abuse</u> (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.

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

The division is comprised of the Office of Certification; the Office of Deaf Services; the Office of Mental Illness Community
Programs; the Office of Peer Programs; the Office of Pharmacy; the Office of Prevention
Services; the Office of Quality Improvement
& Risk Management; and the Office of Substance Abuse Treatment Services.

Success

The Office of Deaf Services (ODS) provided community-based services with 10,378 consumer contacts in FY21. ODS clinical staff experienced significantly increased contacts and caseloads, as more individuals were seeking help to deal with the COVID-19 pandemic. Technical assistance and consultation were provided to 6,316 people and programs.

Most notably, ODS has been deeply involved in the national dialogue on crisis care with several national presentations related to making those services culturally and linguistically appropriate. Altogether, ODS staff gave 33 training events attended by 1,871 people.

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Success

The Office of Mental Illness Community
Programs (MICP), Individual Placement and
Support (IPS) - Supported Employment,
highlighted success stories of clients and
employers, and the benefits of the program
with a series of videos and testimonials in
FY21, increasing awareness and education
on this vital service. IPS changes lives with a
recovery-oriented culture, grounded by mental
wellness and acceptance, through the value of
employment. Since the inception of IPS services
in Alabama in 2015, over 263 of Alabama's
businesses have played a vital role in the
success of individuals receiving employment.

Also in the MICP office, the School-Based Services Collaboration includes 18 Community Mental Health Centers (CMHCs) and 80 local education agencies. In FY21, the collaboration, served approximately 10,000 students with mental health care in the school setting.

Success

The Office of Peer Programs continually hosts the Respect Initiative, a program that trains individuals in recovery from mental illness and substance use disorders to share their experiences with their illnesses and how they are rebuilding their lives. Seventeen individuals were trained in FY21, bringing the total to 100 in the state! There are more than 40 individuals on the waiting list, eager to train with the Respect Initiative.

Success

The Office of Substance Abuse Prevention Services offered numerous activities and events in FY21, including a successful Red Ribbon Week that included the addition of a Historically Black College and University (HBCU), Alabama State University, into the partnership of prevention providers. The office also was honored to have the Retirement Systems of Alabama 'Light Up Red' buildings in Montgomery and Mobile for Red Ribbon Week, promoting the prevention of drugs and alcohol abuse in teens.

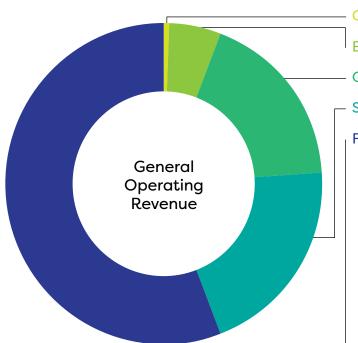
Success

The Office of Substance Abuse Treatment Services (SATS) as part of a collaboration, along with the Alabama Network of Family Resource Centers and the Alabama Department of Child Abuse and Neglect Prevention, provided 22 "Strengthening Families and Communities: Preventing and Addressing Trauma" trainings. The trainings provided participants with a broader understanding of childhood trauma's long-term effects and how to develop concrete steps to support strong families in their work. A total of 509 participants from all 67 counties completed the training.

The SATS office received a grant to expand the number of subspeciality and treatment options available for behavioral health care treatment which includes treatment for substance use and opioid use disorders. The grant will supply telehealth equipment and technologies to 10 new sites in rural counties throughout the state. This will provide a mechanism for reducing rural health disparities and expanding the use of evidenced-based practices for the treatment of substance use and opioid use disorders.

Through partnerships and grants, the SATS office provided 4,434 Naloxone kits, a life-saving medication for opioid overdoses, to law enforcement throughout the state. Additionally, 5,561 kits were distributed to individuals, pharmacies, schools, recovery houses and treatment centers.

FINANCIAL REPORT



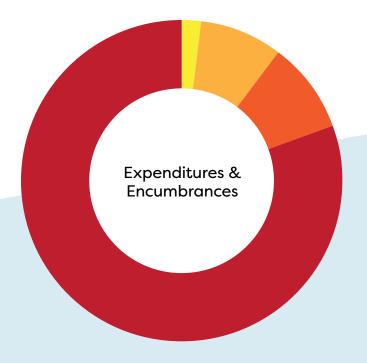
Cigarette Tax 0%

Education Trust Fund 5%

General Fund 18%

- Special Mental Health Trust Fund 20%

Federal, Local, Miscellaneous 56%



Special Services 2%	\$19,385,634
Central Office 8%*	\$89,281,925
Facilities 9%	\$96,372,382
Bryce Hospital	48,698,265
East Alabama Medical Center	1,500,000
Taylor Hardin Secure Medical Facility	20,705,546
Mary Starke Harper Geriatric Psychiatry Center	25,468,571
Community Programs 81%	\$863,806,599
Developmental Disabilities	508,794,408
Mental Illness	279,508,977
Substance Use Disorder	75,503,214
Total	

\$1,068,846,540

^{*}Administrative costs include a one-time expenditure for a capital project at Taylor Hardin Secure Medical Facility.

INDIVIDUALS SERVED

Developmental Disability Services		Substance Abuse Treatment Service	ces
Intellectual Disabilities Waiver	4,744	AIDS Alabama	23
Living at Home Waiver	471	Alcohol & Drug Abuse Treatment	779
Targeted Case Management	5,634	Aletheia House	2,668
State Only	12	AltaPointe Health	1,225
Total	5,713	Anniston Fellowship House	123
Montal Illnoor Convices		BHG Huntsville	539
Mental Illness Services	757	BHG Stevenson	62
Bryce Hospital	353	Birmingham Metro Treatment Center	353
East Alabama Medical Center (Adolescent Un		Bradford Health Services	191
Mary Starke Harper Geriatric Psychiatry Center		CED Fellowship House	485
Taylor Hardin Secure Medical Facility	179	Cherokee-Etowah-Dekalb MHC	409
Total	730	Central Alabama Wellness	587
AltaPointe Health	18,178	Coosa Community Services	86
Cahaba Center for Mental Health	2,348	Council on Substance Abuse	10
Cherokee-Etowah-Dekalb MHC	3,393	Dothan Houston County Drug Treatment Center	22
Central Alabama Wellness	2,639	East Alabama MHC	884
East Alabama MHC	7,536	East Central Alabama MHC	133
East Central Alabama MHC	2,684	ECD Program	274
Highland Health	3,215	Family Life Center	971
Indian Rivers	4,297	Fellowship House	1,065
J.B.S. Mental Health Authority	5,389	Franklin Primary Health Center	198
MHC of North Central Alabama	3,529	Gadsden Treatment Center	330
Montgomery Area MH Authority	4,814	HealthConnect America	527
Mountain Lakes	2,732	Highland Health	440
Northwest Alabama MHC	3,598	Hope House	173
Riverbend Center for MH	5,596	Huntsville Metro Treatment Center	374
South Central Alabama MHC	3,370	Huntsville Recovery	1
Southwest Alabama BHC	2,646	Indian Rivers	569
SpectraCare Health Systems	3,895	Insight Treatment Program	270
WellStone	9,301	Lighthouse of Tallapoosa County	50
West Alabama MHC	1,558	Lighthouse Cullman	88
Total	96,494	continued in next	column

Substance Abuse Treatment Services continued

Marion County Treatment Center	18
Marwin Counseling	299
MedMark Treatment Centers - Dothan	163
MedMark Treatment Centers - Oxford	437
Mobile Metro Treatment Center	282
Mom's	273
Montgomery Metro Treatment Center	176
Mountain Lakes	485
New Centurions	125
New Pathways	315
Northwest Alabama MHC	1,015
Phoenix House	250
Reclamation Center of Alabama	353
Recovery Organization of Support Specialists	883
Recovery Services of Dekalb County	658
Riverbend Center for MH	578
Salvation Army Dauphin Way Lodge	169
Shelby County Treatment Center	459
Shoals Treatment Center	298
South Central Alabama MHC	502
Southeast Intervention Group	106
Southern Wellness Services	296
Southwest Alabama BHC	219
SpectraCare Health Systems	1,698
St. Clair County Day Program	35
Substance Abuse Council of Northwest Alabama	60
Teens Empowerment Awareness with Resolutions	103
The Bridge	1,710
The Shoulder	142
Tri County Treatment Center	312
Tuscaloosa Treatment Center	1,079

Total	31,386
West Alabama MHC	364
WellStone	1,248
Walker Recovery Center	105
UAB Drug Free	2,262

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Alabama Department of Mental Health

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