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**BEFORE THE INTERIM LEGISLATIVE COMMITTEE  
ON MENTAL HEALTH AND SUBSTANCE ABUSE**

**September 19, 2006**

**Testimony of Kathleen P. Allyn, Administrator  
Division of Behavioral Health**



# **BEHAVIORAL HEALTH**



**From Fragments to a System**

# Three sets of proposals:

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- Immediate actions that have already been initiated to improve current services
- Proposals to be taken to the Legislature to build a behavioral health system during SFY 2008
- Longer term proposals to build a behavioral health system

# **“GOOD” SYSTEM CHARACTERISTICS**

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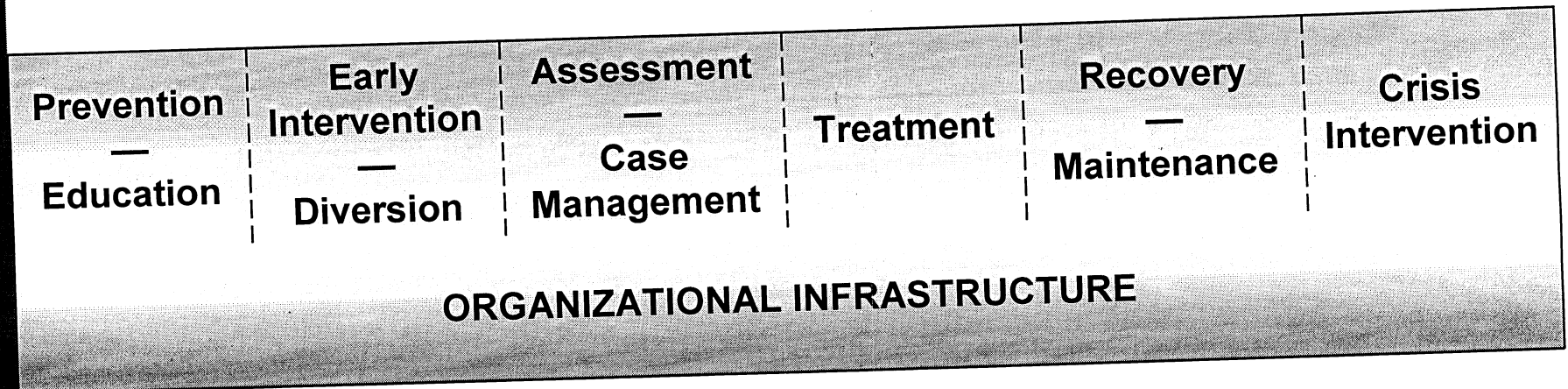
- Client focus and engagement
- Commitment to recovery/resiliency
- Clarity of system design
- Clinical and service excellence
- Sufficiency of resources

# **“GOOD” SYSTEM CHARACTERISTICS**

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- Attention to human resources
- Equity of access and continuity
- Integration of care
- Community-based solutions
- Accountability for public funds

# BEHAVIORAL HEALTH SERVICE CONTINUUM



# DEPARTMENT ACTIONS UNDERWAY

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- **Partner with Health Districts in Mental Illness and Substance Abuse Primary Prevention**
- **Partner with the Courts in Co-occurring Disorder Training**
- **Increase the Number of Children Receiving Wraparound Services**
- **Improve the Mental Health Data System**

# Transition to State Priorities

	SFY 2007	SFY 2008
State Substance Abuse Program	\$19,071,900	\$20,369,900 New SGF \$6,500,000
Prevention/Ed	\$2,973,000	\$2,949,000
Early Intervention	\$0	New SGF\$1,671,300
Assess/Case Mng	\$1,780,238	New SGF\$1,940,000
Direct Treatment	\$8,727,738	\$9,188,600 New SGF\$800,000
Treatment Admin	\$3,467,200	\$2,465,700 New SGF\$593,500
Quality Improve	\$135,000	New SGF\$135,000
Recovery Support	\$2,123,624	\$2,020,300 New SGF\$1,360,200 <sup>8</sup>



# Co-locate Clinicians with County Juvenile Justice Programs

Increase capacity to serve clients

<b>Change in 2008</b>	<b>New FTEs</b>	<b>Cost (DU)</b>
<b>525 additional assessments</b>	<b>14</b>	<b>\$1.3 Million (\$1.16 SGF)</b>
<b>—</b>		
<b>338 additional clients in case management</b>		

# Expand Wrap Around Services

Triple the number of children with SED served

<b>Change in 2008</b>	<b>New FTEs</b>	<b>Cost (DU)</b>
<b>210 additional clients</b>	<b>0</b>	<b>\$130,000 SGF</b>

# Increase Capacity of Community MH Centers

## Increase local services

<b>Change in 2008</b>	<b>New FTEs</b>	<b>Cost (DU)</b>
<b>250 screenings — 360 clients in ongoing treatment</b>	<b>15</b>	<b>\$1.24 M (\$1.08 M SGF)</b>

# Integrated Mental Health and Substance Abuse Training

Provide training at local level

<b>Change in 2008</b>	<b>New FTEs</b>	<b>Cost (DU)</b>
<b>Local training in Mental Health and Substance Abuse</b>	<b>7</b>	<b>\$561,000 (\$533,000 SGF)</b>

# Resources Necessary for JCAHO Accreditation of SHN

Determine needs to get JCAHO accreditation

<b>Change in 2008</b>	<b>New FTEs</b>	<b>Cost (DU)</b>
<b>JCAHO accreditation</b>	<b>0</b>	<b>\$40,000 (\$40,000 SGF)</b>

# Quality Assurance of Medicaid Mental Health Clinic Services

Local visits, audits & training for service providers

Change in 2008	New FTEs	Cost (DU)
Review of MH clinic services including partial care	15	\$1.1 M (\$558,000 SGF)

## **LONGER TERM DEPARTMENT ACTIONS**

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- **Behavioral Health System Implementation Plan.**
  - **Coordinate and Integrate Behavioral Health Services.**
  - **Integrate Mental Health and Substance Abuse Advisory Groups.**
  - **Address the Estimé Report to:**
    - **Improve Recruitment and Retention of Professional Staff.**
    - **Develop Community-based Crisis Respite Facilities.**
    - **Care For People Dangerous To Themselves Or Others.**
    - **Operate New Facilities through Public-Private Partnerships**

# LONGER TERM DEPARTMENT ACTIONS

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- **Implement an Integrated System of Care Model for Co-occurring Disorders.**
- **Review Medicaid Funding of Mental Health and Substance Abuse Services.**
- **Work with Partners to Adopt Uniform Assessment Tools.**

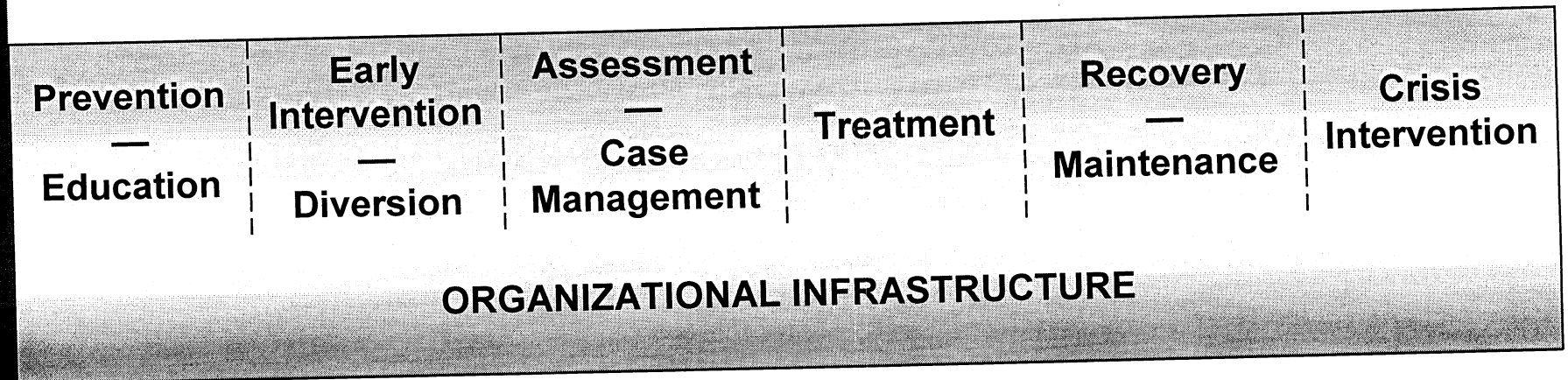


# LONGER TERM DEPARTMENT ACTIONS

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- **Broaden the Definition of Serious Emotional Disturbance Used for Children and Adolescents.**
- **Negotiate Reduced Rates for Community Hospitalization.**
- **Conduct a Community and Family Psycho-education Pilot.**
- **Work With Other Agencies To Clearly Establish Agency Responsibilities.**

# BEHAVIORAL HEALTH SERVICE CONTINUUM



# BH CONTINUUM WITH IDHW RECOMMENDATIONS

Prevention	Early Intervention	Assessment	Treatment	Recovery	Crisis
<p>— Education</p>	<p>— Diversion</p>	<p>— Case Management</p>		<p>— Maintenance</p>	
<p>Partner with District Health</p>					
<p>Integrated Mental Health Substance Abuse Training</p>					
<p>Psycho-education Pilot</p>					

ORGANIZATIONAL INFRASTRUCTURE

# BH CONTINUUM WITH IDHW RECOMMENDATIONS

Prevention — Education	Early Intervention Diversion	Assessment Case Management	Treatment	Recovery — Maintenance	Crisis Intervention
Partner with District Health  Integrated Mental Health Substance Abuse Training  Psycho-education Pilot	Adolescent Intervention  Intervention for Children of Addicts				

**ORGANIZATIONAL INFRASTRUCTURE**

# BH CONTINUUM WITH IDHW RECOMMENDATIONS

Prevention — Education	Early Intervention Diversion	Assessment Case Management	Treatment	Recovery — Maintenance	Crisis Intervention
Partner with District Health  Integrated Mental Health Substance Abuse Training Psycho-education Pilot	Adolescent Intervention  Intervention for Children of Addicts	Uniform Assessment Tools  Co-occurring Disorder Training with Courts  Co-locate Clinicians with County  Localize Access to SA Services			

## ORGANIZATIONAL INFRASTRUCTURE

# BH CONTINUUM WITH IDHW RECOMMENDATIONS

Prevention — Education	Early Intervention Diversion	Assessment Case Management	Treatment	Recovery — Maintenance	Crisis Intervention
Partner with District Health  Integrated Mental Health Substance Abuse Training  Psycho-education Pilot	Adolescent Intervention  Intervention for Children of Addicts	Uniform Assessment Tools  Co-occurring Disorder Training with Courts  Co-locate Clinicians with County  Localize Access to SA Services	Negotiate Reduced Rates for Hospitalization  Evaluate JCAHO Accreditation of SHN		

## ORGANIZATIONAL INFRASTRUCTURE

# BH CONTINUUM WITH IDHW RECOMMENDATIONS

Prevention — Education	Early Intervention — Diversion	Assessment — Case Management	Treatment	Recovery — Maintenance	Crisis Intervention
<p>Partner with District Health</p> <p>Integrated Mental Health Substance Abuse Training</p> <p>Psycho-education Pilot</p>	<p>Adolescent Intervention</p> <p>Intervention for Children of Addicts</p>	<p>Uniform Assessment Tools</p> <p>Co-occurring Disorder Training with Courts</p> <p>Co-locate Clinicians with County</p> <p>Localize Access to SA Services</p>	<p>Negotiate Reduced Rates for Hospitalization</p> <p>Evaluate JCAHO Accreditation of SHN</p>		
<p>Increase the Capacity of Community MH Centers</p>					
<p>Increase Wrap Around Services</p>					

## ORGANIZATIONAL INFRASTRUCTURE

# BH CONTINUUM WITH IDHW RECOMMENDATIONS

Prevention — Education	Early Intervention Diversion	Assessment Case Management	Treatment	Recovery — Maintenance	Crisis Intervention
Partner with District Health  Integrated Mental Health Substance Abuse Training  Psycho-education Pilot	Adolescent Intervention  Intervention for Children of Addicts	Uniform Assessment Tools  Co-occurring Disorder Training with Courts  Co-locate Clinicians with County  Localize Access to SA Services	Negotiate Reduced Rates for Hospitalization  Evaluate JCAHO Accreditation of SHN		
Increase the Capacity of Community MH Centers Increase Wrap Around Services Broaden the Definition of SED Implement a Co-occurring Disorders Model Review Medicaid Funding					

## ORGANIZATIONAL INFRASTRUCTURE



# BH CONTINUUM WITH IDHW RECOMMENDATIONS

Prevention	Early Intervention Diversion	Assessment Case Management	Treatment	Recovery — Maintenance	Crisis Intervention
<p>Education</p> <p>Partner with District Health</p> <p>Integrated Mental Health Substance Abuse Training</p> <p>Psycho-education Pilot</p>	<p>Adolescent Intervention</p> <p>Intervention for Children of Addicts</p>	<p>Uniform Assessment Tools</p> <p>Co-occurring Disorder Training with Courts</p> <p>Co-locate Clinicians with County</p> <p>Localize Access to SA Services</p>	<p>Negotiate Reduced Rates for Hospitalization</p> <p>Evaluate JCAHO Accreditation of SHN</p>		
<p>Increase the Capacity of Community MH Centers</p> <p>Increase Wrap Around Services</p> <p>Broaden the Definition of SED</p> <p>Implement a Co-occurring Disorders Model</p> <p>Review Medicaid Funding</p> <p>Develop a Behavioral Health System Implementation Plan</p>					
<p><b>ORGANIZATIONAL INFRASTRUCTURE</b></p>					

# BH CONTINUUM WITH IDHW RECOMMENDATIONS

<b>Prevention</b> — <b>Education</b>	<b>Early Intervention</b> — <b>Diversion</b>	<b>Assessment</b> — <b>Case Management</b>	<b>Treatment</b>	<b>Recovery</b> — <b>Maintenance</b>	<b>Crisis Intervention</b>
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## ORGANIZATIONAL INFRASTRUCTURE

- Improve the Mental Health Data System**
- Contract for Quality Improvement**
- Quality Assurance of MH Clinics**
- Clearly Establish Agency Responsibilities**

# BH CONTINUUM WITH IDHW RECOMMENDATIONS

Prevention — Education	Early Intervention Diversions	Assessment Case Management	Treatment	Recovery — Maintenance	Crisis Intervention
<p>Partner with District Health</p> <p>Integrated Mental Health Substance Abuse Training</p> <p>Psycho-education Pilot</p>	<p>Adolescent Intervention</p> <p>Intervention for Children of Addicts</p>	<p>Uniform Assessment Tools</p> <p>Co-occurring Disorder Training with Courts</p> <p>Co-locate Clinicians with County</p> <p>Localize Access to SA Services</p>	<p>Negotiate Reduced Rates for Hospitalization</p> <p>Evaluate JCAHO Accreditation of SHN</p>		
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# BEHAVIORAL HEALTH SYSTEM

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QUESTIONS?