

**Albuquerque  
Bernalillo County  
Government  
Commission  
(ABCGC)**

# Behavioral Health Initiatives

- \$17,000,000 seems like a large amount, however due to a lack of Medicaid funding, this money will be spent quickly.
- In order to maximize this amount, the City of Albuquerque and Bernalillo County are working to find opportunities to leverage funding.

# Overall Goals

Multiple Behavioral Health studies and reports demonstrate the need for:

- Increased access and open more front doors
  - Implement crisis call hotline
  - Expand stabilization services
- Crisis Diversion from the Criminal Justice System
  - Mobile Crisis Teams

# Overall Goals cont.

- Resiliency Supports
  - Effective case management / housing
- Education and Intervention
  - Mental Health First Aide
  - Identify and assist at risk populations

# Front Doors

In the past 8-12 months, two new front doors have been established or enhanced. These front doors create core services necessary to build a crisis service network.

## **New Mexico Crisis & Access Line (NMCAL)**

- Statewide Crisis Hotline funded by Human Services Department.
- NMCAL and Bernalillo County are working on assisting 911 dispatch with behavioral health crisis calls.

Cost to Behavioral Health Tax: Estimated 0  
Expected implementation: April 2016.

# Front Doors cont.

## UNMH Expansion - UNMH Lease Negotiations

- Medical Assessment / Triage
  - Increase access to Mental Health urgent care services
- Development of mid level medical services
  - Partial Hospitalization/Day Habilitation
  - Respite services for continued stabilization
  - Medication management
- Development / expansion of social/non medical supports
  - Short term intense Case Management
  - Assessment Referrals and discharge planning

Cost to Behavioral Health Tax: Estimated 0

Expected to begin some phases of implementation: July 2016

# The Four Behavioral Health Focus Areas:

The Behavioral Health focus areas were created in response to previous reports and studies which identified Behavioral Health needs in Bernalillo County.

1. Housing

2. Stabilization and Supports

3. Crisis Services

4. Prevention Intervention and Harm Reduction

# Housing

Adding to existing resources and coordinating with the City of Albuquerque (shared resources)

## First Steps:

- Supportive scattered site housing.
  - Our goal is to create 100 new vouchers between the City of Albuquerque and Bernalillo with case management services on the County side. We would add this to our current Supportive Housing Pilot Program. Completion time is estimated at 8-12 months depending on development of case management.
- Creation of single site supportive housing.
  - 100 new beds with support. Putting a small City/County workgroup together to plan and identify appropriate locations.

# Stabilization and Supports

Initial focus will be on Case Management.

## First Steps:

- Identification of target population. This is being done through our high utilization study. Estimated completion date is July 2016.
- Focus initial committee work on defining the scope of work and expectations for case management services, outcomes, and data collection.

# Crisis Services

The UNMH preliminary commitment to provide: crisis respite services, assessment and referrals, intense short term case management, and partial hospitalization, allows the focus to be on accessing more diversion resources to first responders and law enforcement

## First Steps:

### Mobile Crisis Units

- The City of Albuquerque and Bernalillo County are forming a small internal working group to discuss mobile crisis unit partnerships.

# Prevention Intervention and Harm Reduction

## First Steps:

- **A Community Engagement Team Pilot:**  
Community Engagement Teams are comprised of peer level support for those with behavioral health issues to intervene before a crisis episode, or to intervene after a crisis to prevent re-occurrence.
- **Reduction of Adverse Childhood Experiences Pilot:**  
Focus on at risk families to identify children who are at risk of developing mental health and/or substance use disorders because of their adverse childhood experiences (ACE), refer them to appropriate services, and fund those services where they don't already exist.

## Behavioral Health Categories and Structure

### Committee of the Whole

- All members from each of the four committees will meet both initially as well as quarterly as a whole to insure individual committee objectives and projects are in line with overall program goals. Initial meeting will also aid in determining prioritization.

#### Housing

Service Area Examples:

- Supportive
- Congregate
- Scattered

#### Stabilization and Supports

Service Area Examples:

- Substance Abuse Treatment Programs
- Case Management

#### Crisis Services

Service Area Examples:

- Crisis hot and warm lines
- Crisis Respite
- Mobile Crisis Teams

#### Prevention Intervention / Harm Reduction

Service Area Examples:

- Community Engagement Teams
- Expansion of Narcan Programs
- Early childhood prevention and screening

### Albuquerque/ Bernalillo County Government Commission

Project Approval/ Denial

#### County Approval

RFP / Contract Process

#### City Approval

RFP / Contract Process

#### The Purpose is to:

- Provide Structure / Framework around service areas within service description.
- Define targeted population.
- Gain Public Input/ feedback through out
- Present Committee approved projects to ABCGC.

\*Each of the sub-committees will be populated with subject matter experts and community representatives/consumers. Services within each category are proposed and vetted through these sub-committees prior to gaining approval/denial of the ABCGC.

# Proposed Behavioral Health Structure

The small working group has discussed this model with the public, interested groups, elected officials and staff.

- The Small Working Group believes - for now - this process reflects the values you requested:
  - Transparency
  - Fiscal responsibility
  - Community input
  - Awareness to cooperate local jurisdictions
  - Collaborative

# FAQ's about Behavioral Health Vetting Process

**Q. Who is going to make decisions on which project to develop or fund?**

**A.** The small working groups recommending that the ABCGC begin with the community reports that have identified as a priority Crisis Services, Stabilization and Supports, Housing, and Prevention Intervention/ Harm Reduction. This will expand and strengthen a safety net of services.

As requested by the ABCGC, subject matter experts and local community have input in the efficacy and design of programs, however the final say on the funding of programs rests with elected officials.

**Q. With the subcommittees how do you ensure that there isn't "silo-ed" thinking (e.g. Trying to expend the 17 million on one particular project), and to ensure over all inter-operability of projects?**

**A.** On the Behavioral Health Categories and Structure diagram you will notice on top a "committee of the whole." This committee will meet first and then consistently throughout the process to set priorities and to ensure coordination.

## **FAQ's about Behavioral Health Vetting Process cont.**

**Q. How do you ensure that the community will participate and have a voice on behavioral health decisions?**

**A.** Every committee is made up of subject matter experts and at least one at large community member. Every meeting of the sub-committees, the committees of the whole will be publically noticed meetings with an agenda and open for public comment. ABCGC meetings, County Commission, and City Council meetings provide further opportunities for public engagement.

**Q. What are the next steps and when will the ABCGC be vetting and approving specific projects?**

**A:** Once we populate the committees, the Small Working Group will need to orient members, then we will be taking the first initial projects through the committee process. The Small Working Group will be working as quickly as possible but, realistically, we believe that we will be able to present specific behavioral health projects at the June ABCGC meeting.

## **FAQ's about Behavioral Health Vetting Process cont.**

**Q: What do you need from the ABCGC today?**

**A: The Small Working Group needs the ABCGC to approve the vetting structure and authorize the Small Working Group to move forward in populating the committees.**