Investing ARPA Funds in Behavioral Health Crisis Response

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COVID-19 Recovery Clearinghouse (naco.org)

COVID-19 RECOVERY CLEARINGHOUSE

In a major viotory for America's counties, the State and Local Coronavirus Fiscal Recovery Funds legislation, part of the American Resoue Plan Act, was signed into law by President Biden on March 11. The legislation includes \$65.1 billion in direct, flexible aid to every county in America, as well as other crucial investments in local communities.







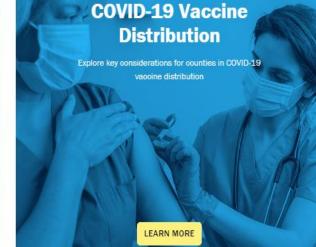


LEARN MORE

Local Government ARPA Investment Tracker

The Local Government ARPA Investment Tracker, powered by NACo, Brookings Metro and National League of Cities provides a detailed local investment pioture of American Resoue Plan Act funding

ACCESS TRACKER





State & Local Fiscal **Recovery Funds**

Find Treasury guidance, FAQs, NACo's analysis and

OVERVIEW OF PUBLIC HEALTH CATEGORY

BEHAVIORAL HEALTH CARE

Treasury clarifies this eligible use category covers an expansive array of services for prevention, treatment, recovery, and harm reduction for behavioral and mental health services, including:

- Behavioral health facilities and equipment
- Prevention, outpatient treatment, inpatient treatment, crisis care, diversion programs
- Enhanced behavioral health services in schools
- Services for pregnant women or infants born with neonatal abstinence syndrome
- Support for equitable access to reduce disparities in access to reduce disparities in access to highquality treatment
- Peer support groups, costs for residence in supportive housing or recovery housing, the 988
 National Suicide Prevention Lifeline
- Expansion of access to evidence-based services for opioid use disorder prevention, treatment, harm reduction and recovery

OVERVIEW OF PUBLIC HEALTH CATEGORY

BEHAVIORAL HEALTH CARE- VIOLENCE PREVENTION

- Evidence-based practices like focused deterrence, street outreach, violence interrupters, and hospital-based violence intervention models
- Wraparound services such as behavioral therapy, trauma recovery, job training, education, housing and relocation services, and financial assistance
- Capacity-building efforts at community violence intervention programs
- Strategies to reduce gun violence

"Given the increased rate of violence during the pandemic,
Treasury has determined that this enumerated eligible use is responsive to the impacts of the pandemic in all communities.."

OVERVIEW OF PUBLIC HEALTH CATEGORY

CAPITAL EXPENDITURES

Treasury clarifies the following are examples of capital expenditure projects for the public health response:

- Improvements or construction of:
 - COVID-19 testing sites and laboratories & equipment purchase
 - COVID-19 vaccination sites
 - Medical facilities for COVID-19 treatment and mitigation
 - Emergency operation centers/ equipment purchase
 - Adaptations to congregate living facilities
 - Mitigation measures in small businesses, nonprofits & impacted industries

QUESTIONS?

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NATIONAL ASSOCIATION OF COUNTIES - FULTON COUNTY FOCUS "HOW ARPA FUNDING CAN MAKE A DIFFERENCE"

BEHAVIORAL HEALTH CRISIS CENTER



- WHAT problem are we trying to solve?
- **WHO** would the county target for treatment?
- **HOW** can Fulton address the needs of the target population?
- **WHERE** should we locate the Center?
- WHEN can it be done?



WHAT PROBLEM ARE WE TRYING TO SOLVE?

BEHAVIORAL HEALTH CONTINUUM OF CARE

BARRIERS

PREVENTION » OUTPATIENT » OUTPATIENT +

CRISIS

→ 23hr

→ Crisis

observation

stabilization

→ Detoxification

management/

interventions

→ Medication

→ Clinical

→ Discharge

planning

COMMITMENT

- → Housing
- → Employment
- → Education/ workforce development
- → financial resources
- → ID services
- → Legal support
- → Primary care

- → Awareness, education & training
- → Community engagement
- → Sign/symptom s awareness
- → Wrap-around & community resources
- → Intervention
- → Precipitation factors

- → Individual /group/family therapy
- → Medication management
- → Case management
- → Peer support
- → Support group

- → Intensive outpatient
- → Assertive community treatment (act)
- → Intensive family intervention (ifi)
- → Medication assisted outpatient treatment



Low availability of crisis services

- → Psychiatric treatment for:
- → Adult mental health
- → Forensic services
- → Developmental disabilities



Good availability of resources to address barriers to BH care * Better coordination

needed



Good availability of resources to support access to prevention



Good availability of network for core BH services



Some availability of intensive outpatient services



Low availability of commitment services



WHO WOULD THE COUNTY TARGET FOR TREATMENT?

ADULTS & ADOLESCENTS IN MENTAL HEALTH CRISIS

Any situation in which a person's actions, feelings, and behaviors can lead to them hurting themselves or others, and/or put them at risk of being unable to care for themselves or function in the community in a healthy manner.

- ADULTS & ADOLESCENTS WHO REQUIRE DETOXIFICATION
 - **Medical required** treatment of an alcoholic or drug addiction involving abstention from drugs or alcohol until the bloodstream is free of toxins. Not equivalent to a sobering center.
- ADULTS & ADOLESCENTS WHO NEED CORE BEHAVIORAL HEALTH OUTPATIENT & WRAP AROUND SERVICES

HOW CAN FULTON ADDRESS TARGETED NEEDS?

FULTON COUNTY BEHAVIORAL HEALTH CRISIS CENTER

CRISIS SERVICES OPERATING MODEL

GOALS

- Expand access to mental health/ substance abuse crisis care
- 2. Prevent suicide
- 3. Relieve regional emergency departments

RESPONSE MODEL

Provide 24/7 access to **psychiatric stabilization**, detoxification, & immediate treatment for individuals experiencing a **mental health %/or addiction crisis.**

Serve as a residential alternative to/or diversion from inpatient hospitalization, offering psychiatric stabilization & withdrawal management services. The program provides medically monitored residential services.

ADMISSION CRITERIA

- Lower level treatment care was attempted/considered.
- Individual experiencing a severe situational crisis.
- Individual presents a substantial risk of harm.
- Individual has insufficient resources or skills cope.
- Individual meets diagnostic criteria for substance use, and can be expected to respond to withdrawal management treatment.



WHERE SHOULD WE LOCATE THE CRISIS CENTER?

2 Alternatives for a 50,000 Sq. Ft Facility

NEW CONSTRUCTION ESTIMATE

\$350 PER SQ. FT.	\$17,500,000
Design Services @ 10%	\$1,750,000
FFE @14%	\$2,450,000
Contingency @14%	\$2,450,000
TOTAL	\$24,150,000



TOTAL	\$11,175,000
Contingency @25%	\$1,875,000
FFE @14%	\$1,050,000
Design Services @ 10%	\$750,000
\$150 PER SQ. FT.	\$7,500,000

RECOMMENDATION

RENOVATE OAK HILL CHILD & ADOLESCENT FAMILY CENTER



PROS

Approx. 48K sq. ft. owned property in good condition Renovate v. build Originally designed for BH Space for diversion and all

other program needs

Expedited delivery time:

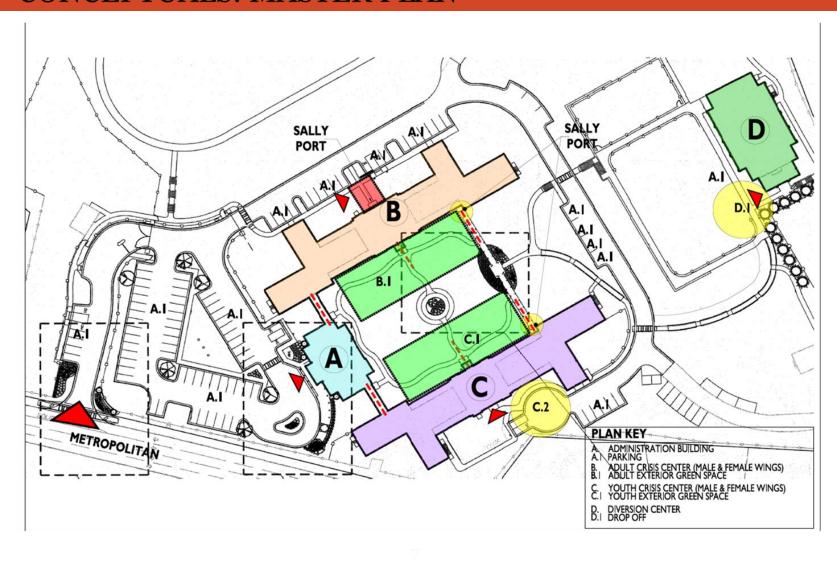
CONS

Health services
Realignment of Community programs
Temporarily relocate
Behavioral Health
Outpatient services

Need to shuffle Board Of

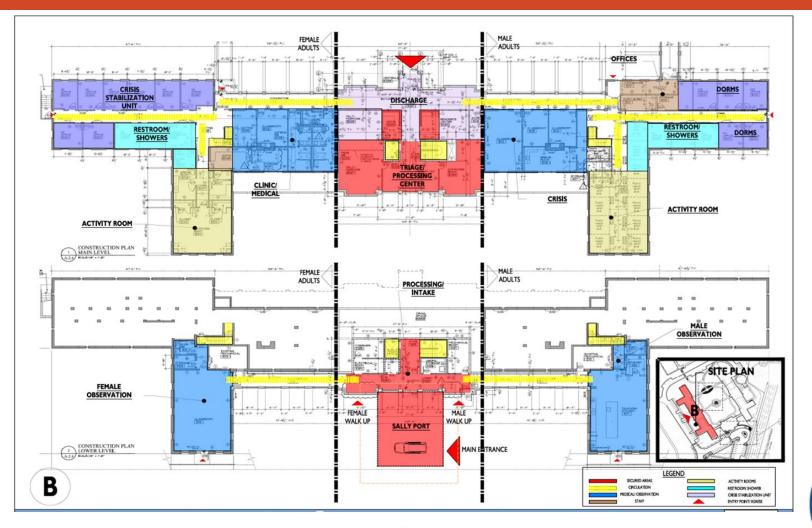


CONCEPTUALS: MASTER PLAN



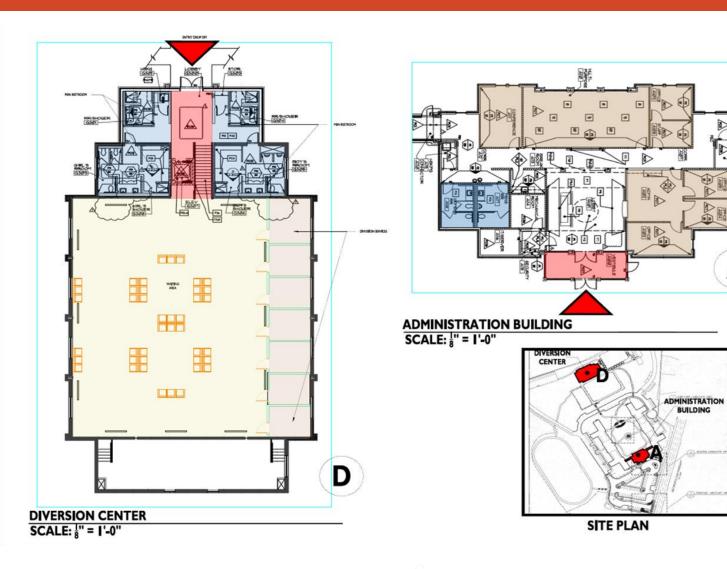


CONCEPTUALS: ADULT CRISIS CARE





CONCEPTUALS: ADMINISTRATION





Lancaster County Investment in Behavioral Health Services with ARPA Funding



SARA HOYLE, DIRECTOR OF LINCOLN AND LANCASTER COUNTY HUMAN SERVICES

ARPA Focus Areas for Human Services

LANCASTER
C O U N T Y

- ► Youth Crisis Response
- ► Racial Equity
- ▶ Youth and Adult Behavioral Health
- ▶ Basic Needs
- ► Victim Safety & Violence Prevention

Youth Crisis Response



- Data
- Community Needs Assessment
- Stakeholders
- Outside Consultant
- Community Engagement
- ▶ Research/Site Visits
- ► Common Vision/Mission
- Shared Terminology
- Solid Plan
- Sustainability Outline



Community Based Support through ARPA Funding Grant Solicitation



- Identify basis of need or negative impact of the COVID-19 public health emergency to your organization.
- Describe how this proposed project will respond to the coronavirus public health emergency or its negative impacts.
- Provide data demonstrating how the proposed target population was disproportionality impacted by the coronavirus pandemic.

Performance Reporting and Data Collection



- Partnership with University
- Centralized system to collect data related to ARPA allocations
- Reporting demographical information
- Did the service address the needs as the result of the COVID-19 public health emergency

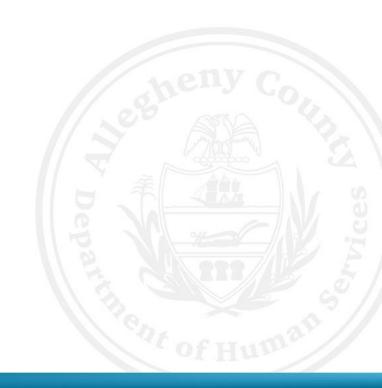




Allegheny County

Pennsylvania

Investing ARPA Funds in Behavioral Health Crisis Response National Association of Counties 2.22.22



Allegheny County

- 1.2 million residents
 - White 79%
 - Black 13%
 - Asian 4%
- 744 square miles
- 130 self-governed municipalities
- 120 police departments
- 43 school districts

Allegheny County Department of Human Services 2020 Snapshot

Total

- 200K people served
- 405 Contracted Providers
- \$1.1B Budget
- 68 funding sources

Office of Behavioral Health

- 59K persons served
- 140 contracted providers
- \$148M Budget
 - 94% allocated to contracted providers

2020 Mental Health Crisis Numbers

- Telephone Contacts
 - 96,000+
 - ~67,000 incoming
- Residential
 - ~1,800
- Walk-in
 - ~6,100
- Mobile
 - ~9,000

ARPA Funds: Mobile Crisis Expansion and Peer Run Respite

- Crisis Stakeholder Workgroup
 - 30 stakeholders across crisis systems
 - Sixteen recommendations
 - (2) Expanding mobile options and functions
 - (8) Increase availability of easy access, low barrier respite centers, and similar models
 - (9) Launch co-response teams to respond to 911 calls
 - (11) Increase availability of preventative and proactive outreach supports to prevent a crisis before it occurs.
- Mobile Crisis Expansion
 - 400 police dispatches a day may involve individuals with unmet behavioral health needs
 - Highest rates of 911 behavioral health dispatches are communities of color
- Peer Run Respite
 - Easily accessible
 - Low barrier
 - Short-term overnight
 - Non-clinical alternative to hospitalization

Contact Information

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Questions?



THANK YOU!

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