## **General Takeaways and Considerations**

### Holistic and Family-Centered Approaches

- Several groups emphasized the importance of holistic and family-based services to support youth and their families within their home environments.
- Cultural Sensitivity
  - Incorporating cultural aspects, traditions, and indigenous knowledge into care and services was a recurring theme, recognizing the importance of cultural sensitivity in the region.

### • Communication and Collaboration

- The importance of improving communication and collaboration within the community, as well as with tribal organizations and various partners, was emphasized.
- The value of face-to-face interactions and ongoing dialogue for meaningful progress was acknowledged.

- Focus on Youth and Families
  - The need to support parents in navigating the behavioral health system and helping children access services was highlighted.
  - Strategies to empower families and involve them in the decision-making process were discussed.
- Stigma Reduction and Community Engagement
  - Several groups discussed the importance of reducing stigma surrounding mental health issues and fostering a culture of understanding and support within the community.
- Interest in Improving Crisis Response and Acute Systems
  - There was a focus on the need to improve how youth can access both crisis and acute services during times of crisis, with local momentum for creating change.
  - It was acknowledged that there were no representatives of acute care present.

Six Service Categories: Prevention/Early Intervention, Social Supports, Health Related Social Needs Mental Health in Schools Community Level Supports/Home and Community Based Services/Outpatient Residential Services Crisis Services Acute Care

### **Current Resource Inventory**

A note on how this document is structured: Denali Daniels + Associates (DDA) provided facilitation for the regional event. The tables below represent the culmination of two-days of structured conversations with approximately 44 participants (attendance fluctuated across two-day/hybrid meeting). Groups developed these priority solutions, including plans with next steps to address some of the largest gaps this region faces. The last page is a current resource inventory that is non-comprehensive and is designed to evolve through ongoing edits; bolded names on this list represent that they appear in two or more service categories.

DDA took notes, capturing both the online and in-person conversations. These notes were streamlined into the current table format; a copy of these notes was then shared with the Steering Committee as well as our Tribal partners for input on accuracy and completeness.

These notes are a starting point for information-gathering. If additional information is added subsequent to the event, that **text will be blocked in a different color and in bold** *italics*. Additionally, the *[last updated]* date in the footer will be refreshed to reflect the most recent change date.

## SERVICE CATEGORY DEFINITIONS

### Prevention, Early Intervention, Social Supports, Health Related Social Needs

Efforts to cultivate healthy homes, foster positive peer relationships, and nurture a robust cultural environment. Encompasses ensuring basic physical necessities are met, empowering individuals to make informed choices, and providing ample support. These initiatives extend beyond billable services, focusing on holistic well-being.

### **Community Based Services and Supports**

A broad spectrum of accessible resources within the community setting. Examples include primary care facilities, outpatient mental health services, telehealth options, and various clinics. These services are designed to enhance community members' overall well-being and provide necessary support.

### **Mental Health in School**

The closest approximation to a universal environment for young individuals. Within this context, comprehensive educational and supportive structures are implemented to facilitate the development and growth of students, promoting their academic achievements and personal well-being.

#### **Residential Services**

Diverse settings where individuals reside for extended periods. This category includes recovery camps, residential child care facilities, and locations where individuals live round-the-clock. These environments are tailored to provide a supportive living arrangement, offering necessary care and guidance.

### **Crisis Services**

Dedicated crisis response systems, such as call centers, mobile response teams, and crisis centers. These facilities serve as essential points of contact for individuals facing acute crises, offering immediate assistance, intervention, and support during challenging situations.

### Acute Care

The highest level of care provided in hospital or inpatient settings. This category includes emergency rooms, inpatient psychiatric hospitals, and short-term inpatient stays. Acute care facilities are equipped to address severe medical or psychiatric conditions, ensuring timely and specialized treatment for patients in critical situations.

# Prevention/Early Intervention, Social Supports, Health Related Social Needs

Identified priority: Youth 360 (Icelandic Model) Planet Youth

Priority because	Challenges	Next Steps	Partners
<ul> <li>Fostering a culture of positivity and community-wide engagement.</li> <li>Encouraging parental involvement and family buy-in.</li> <li>Implementing upstream prevention strategies.</li> <li>Promoting a community-wide shift from individual to collective action.</li> <li>Achieving a universal reduction in risk factors.</li> <li>Realizing long-term cost savings through strategic initiatives.</li> </ul>	<ul> <li>Community-wide culture shift and widespread buy-in.</li> <li>Measuring and assessing the efficacy of prevention efforts.</li> <li>Allocating funding for spaces (SeaLevel in Ketchikan).</li> <li>Long-term commitment with a focus on sustained results, akin to the "tortoise versus hare" approach, emphasizing a 1000-foot view over a 15-year horizon.</li> <li>Logistics, including transportation, location, and access.</li> <li>Time constraints and bandwidth limitations.</li> </ul>	<ul> <li>Planning and Communication         <ul> <li>Develop strategic plan</li> <li>Expand upon the Youth Risk Behavior Survey (YRBS) to include community-level insights and perspectives.</li> <li>Publicize instances where residents naturally embody the proposed model.</li> <li>Implement educational initiatives targeted at community partners to enhance understanding and collaboration.</li> <li>Secure resources for staffing and transportation by exploring funding avenues in extracurricular activities, sports, music, faith-based initiatives, and the arts.</li> <li>Implement parental waivers to streamline and facilitate participation.</li> </ul> </li> <li>Programs and Activities</li> <li>Develop programs dedicated to educating youth on relevant topics and fostering holistic development</li> <li>Social Structures</li> <li>Acknowledge and reward community members who actively embrace and drive positive change.</li> </ul> <li>Create Spaces</li> <li>Establish a youth panel to ensure active participation and buy-in from the younger demographic.</li> <li>Secure funding for spaces catering to youth needs. SeaLevel/CAP funding.</li>	Local Churches Community systems Local government (city/borough) Non-profits Parents School districts Sports leagues Youth Native leaders <u>State</u> Legislature Statewide systems Other Youth 360 <u>National</u> Federal funds Media Nike/Under Armor sponsors

## Mental Health in Schools

### Identified priority: Pilot Program - Enhancing Communication Strategies for Holistic Family Support

Priority because	Challenges	Steps	Partners
Establishes a channel for communication between service providers and families, creating an opportunity for the implementation of comprehensive wrap-around services.	<ul> <li><u>Behavioral</u> <ul> <li>Cultural differences</li> <li>Mental health stigma</li> <li>Overcoming "power" differentials and fostering collaboration in parent literacy support</li> <li>Historical and present injustices</li> </ul> </li> <li><u>Life Skills and Home Setting</u> <ul> <li>Parental understanding of mandated reporting</li> <li>Other</li> <li>Hard to get everyone in the same room</li> </ul> </li> </ul>	Funding         • Secure funding         • Inception meeting         • Inception meeting         • Engagement with agencies and service providers (school-based)         • Development of procedures: Release of information (ROI), Memorandum of Agreement (MOA), meeting norms, calendar, and note sharing         Supports         • Inclusion of parents members and representation         • State representative support (as required)         • Identifying missing voices in dialogue	<ul> <li><u>Education</u></li> <li>School guidance counselors</li> <li>School social workers/licensed professional counselors</li> <li>School staff/administration</li> <li><u>Community Support Services</u></li> <li>DV advocates: HOPE, KIL, WISH</li> <li>ICWA/Tribal supports</li> <li>KIC Behavioral Health</li> <li>Local children's mental health providers (i.e., Community Connections private providers)</li> <li>RYC: outpatient and re-entry</li> <li>Southeast Alaska Independent Living (SAIL)</li> <li><u>Public Safety</u></li> <li>Local and State police</li> <li>OCS (Office of Children's Services)</li> <li><u>Employment and Rehabilitation</u></li> <li>Vocational rehab</li> </ul>

## **Community Level Supports/Home and Community Based Services/Outpatient**

Identified priority: Multi-disciplinary team coordination and case history development.

Priority because	Challenges	Steps	Partners
<ul> <li>Enhance overall outcomes through the reduction of the burden associated with reconstructing cases for new providers or crisis situations.</li> <li>Enhance inter-team communication and bolster client empowerment.</li> <li>The duplication of efforts in reassembling and rehashing information represents an inefficient utilization of time and resources.</li> <li>Imperative to alleviate families from the necessity of repeating their stories, thereby preventing potential re-traumatization.</li> </ul>	<ul> <li><u>Technology</u></li> <li>Database management</li> <li><u>Other</u></li> <li>Release of information (ROI) and confidentiality</li> <li>Effective release of information, including past OCS history and DJJ medical records, while upholding confidentiality standards to guarantee security and compliance.</li> </ul>	<ul> <li><u>Planning</u></li> <li>Conduct a comprehensive assessment of the potential applications of the AK Health Information Exchange (HIE) to function as the designated database.</li> <li>Identify the primary leadership entity for the initiative, considering the involvement of OCS, DJJ, and MH/SUD stakeholders.</li> <li>Examine the financial aspects of the project, including the source of funding, service codes, and potential grant-funded avenues.</li> </ul>	<ul> <li>Information Resources</li> <li>Health eConnect Alaska (HIE)</li> <li>Three-tiered structure (State Model)</li> </ul>

## **Residential Services**

### Identified Priority: Regulations to Allow Residential Child Care Facilities (RCCFs) to Offer Crisis Care

Priority because	Challenges	Steps	Partners
<ul> <li>Increased restrictions may render youth crisis services unfeasible.</li> <li>Ensure youth-specific regulations.</li> </ul>	<ul> <li><u>Administrative</u></li> <li>Balancing safety and regulatory oversight without imposing undue restrictions on facility types.</li> <li>Coordination across regulatory entities</li> <li>Coordination with various regulatory</li> </ul>	<ul> <li><u>Planning</u></li> <li>Engaging providers who are currently offering or interested in offering crisis services in different facility types</li> <li>Put out draft regulations</li> </ul>	<ul> <li>Bartlett Regional Hospital (Juneau)</li> <li>Residential Youth Care (RYC)</li> <li>Community Connections (Ketchikan)</li> <li>Southeast Alaska Regional Health Consortium (SEARHC)</li> </ul>
	prerequisites, such as residential licensing requirements.	<ul> <li><u>Service Provision</u></li> <li>Active/interactive education with providers</li> </ul>	

## **Crisis Services**

### Identified Priority: Short Term Crisis Holding Space to Re-enter Local Behavioral Health Service or Prepare for Transition to Residential Care

Priority because	Challenges	Steps	Partners
<ul> <li>Time for youth stabilization</li> <li>Establish secure and safe environment</li> <li>Access to psychiatry services through Tele- Psych or in-person consultations</li> </ul>	<ul> <li>Services</li> <li>Hospital Outpatient 1115 Billing – 23 hours/7 days</li> <li>Challenges with providers refusing to accept Medicaid/issues with payment</li> <li>Programming</li> <li>Limited age range (12–18 years)</li> <li>Defining the concept of "holding space" in rural areas</li> <li>Mobile response strategies for targeted outreach to youth</li> <li>Address co-occurring diagnoses (developmental disabilities/mental health/substance use disorders)</li> <li>Need for enhanced medical monitoring due to significant health issues</li> <li>Considerations for children 11 and under</li> <li>Ongoing development of mobile integrated team paramedic/social work</li> <li>Determining duration of holds</li> <li>Administrative burden in behavioral health</li> <li>Challenges defining responsibility and issuing community resource updates</li> </ul>	<ul> <li>Funding</li> <li>Develop a comprehensive funding plan for long-term financial sustainability.</li> <li>Planning</li> <li>Conducting a thorough regulation review.</li> <li>Initiating dialogues with Bartlett Regional Hospital or SEARHC for collaborative planning.</li> <li>Incorporate youth perspectives in the planning response.</li> <li>Collaborate with federal and other state providers operating in rural communities.</li> <li>Distinguish federal and state regulatory frameworks.</li> <li>Increase recruitment efforts for Treatment Foster Care (TFC) homes.</li> <li>Establish reliable transportation mechanisms.</li> <li>Advocate for kinship care options.</li> <li>Facilitate open dialogues on foster care.</li> <li>Training</li> <li>Enhance training for local community behavioral health providers.</li> <li>Workforce</li> <li>Define necessary staffing and resource requirements to ensure safety.</li> </ul>	Advocates/Organizations Alaska Behavioral Health Association Partnership Access Line – Pediatric Alaska (PAL-PAK) <u>Government and Public Safety</u> Tribal support State/Medicaid/OCS/Trust <u>Service Providers</u> Local community behavioral health providers SEARHC Medical providers Nursing In-home supports (HCBW resource) <u>Other</u> Kotzebue model Nursing in-home supports (Home and Community Based Waiver resource)

## Acute Care

### Identified Priority: Patient Navigator

This priority was identified, but no discussion took place and was consolidated with the Crisis Services group discussion above.

Priority because	Challenges	Steps	Partners
•	•	•	•

### **CURRENT RESOURCE INVENTORY**

#### Prevention and Early Intervention Adolescent Drug/Alcohol Early Intervention Akeela/KAR House AST AWARE Juneau Bartlett Regional Hospital and the **Birthing Center** Bartlett Regional Hospital training and summer internship programs Community Connections Crisis Now Family Preservation & Reunification Food Stamps (DPA) Front Street Clinic (JNU) Head Start Juneau Behavioral Health (SEARHC) Juneau Job Center Juneau Suicide Prevention Coalition Juneau WIC Clinic Juneau Youth Court KAP (Ketchikan After School Program) Kasaan Wellness Court Ketchikan Afterschool (KAP) Ketchikan Gateway School District Ketchikan Indian Community (KIC) Ketchikan Police Department (KPD) Ketchikan Wellness Coalition (KWC) Ketchikan Youth Court КІС KWC KYC Marijuana Education NAMI Group Advocacy & Support Meetings Office of Children's Services (OCS) Parenting classes & support groups PeaceHealth Ketchikan PIERS (Task Force) PKRMC POW Health Network Prenatal Classes

**Residential Youth Care Residential Youth Care (RYC) Rural Cap Head Start** SEARHC Southeast Alaska Independent Living STAC (Church) The Learning connection (JNU) thread (Juneau) **Tlingit & Haida Head Start Tlingit and Haida Tlingit and Haida Behavioral** Health **Tobacco Cessation Tongass Substance Screening** University of Alaska Southeast **Career Education Department** Wil la mootk Women in Safe Homes

#### Community Based Services and Supports

Early Childhood Home Based Services Community Connections Head Start Rural Cap Head Start Southeast Alaska Independent Living Tlingit & Haida Head Start Women in Safe Homes

#### SUD Counseling KIC RYC

Mental Health Services Akeela/KAR (no children's program) Annette Island Service Unit Oilean Wellbeing-Caitlin Andrews Community Connections KIC PKRMC Healing Hearts RYC Ruth Bullock Your Space Counseling-Roseann Lynch Chris Glanzer (no under 16) Karla Gelhar (no under 16) Women in Safe Homes (shelter counselors) Rebecca Moon (Ketchikan) Caitlin Andrews (no Medicaid)

Psychiatric Assessment/Trtmt Akeela/KAR (no children's program) Annette Island Service Unit KIC PKRMC RYC (Dr. Baines) Groups AA, NA, AlAnon TABI Support Groups Prince of Wales Health Network -Smart Recovery sessions

Medication-Assisted Treatment (MAT) Ideal Option кіс PeaceHealth Ketchikan Power of Wellness Island EMS Coalition - building emergent MAT through Mobile Integrated Health Program (live Jan 2024) Other 2 CAH Annette island SUV unit – adult and child ANTHC treatment Bartlett Bartlett outpatient behavioral health Community supports athletic/activity travel and connections Culture camps Ideal Option JAHMI Health and Wellness (Juneau) Juneau Public Health Center KAP Ketchikan after school program Ketchikan Indian community

Ministry associations Mountainside Clinic PeaceHealth Ketchikan Peer support groups Plight club programs Pow health network/smart recovery/peer support Power of Wellness Primary care BH, SUD, COD, DENTAL, PT Raven's Way - Lighthouse School activities School districts Scouts Sealaska – youth camps SEARHC Sources of Strength (high school level) Southeast Alaska Independent Living (SAIL, Inc.) Teen Health Telehealth TIDES Tlingit and Haida Behavioral Services Healing Center (Juneau) **Tlingit and Haida Navigators** Tribes Wellness Court Wil la mootk Zach Gordon Youth Center Mental Health in School Brightways/phlight club **Clinical Director Frank Bayles** Community Connection/School **District Collaborative summer** groups In school based direct service mental health groups (Community connection)

School case manager School Counselors and mental wellness clinicians School receiving on going trauma informed care training School Social Worker Sources of Strength (high school level) Juneau Suicide prevention - QPR training SEARHC Teen Health Center (Juneau High Schools) Youth mental health first aide **Residential Services** TLP (now owned by SEARHC) (not currently taking youth) Akeela/KAR Ketchikan Gateway Borough School District Raven's Way - Lighthouse

Northern Lights (JYS) (not

Shéiyi Xaat Hít Youth Shelter

Akeela/KAR (no therapeutic

Ketchikan Gateway Borough

Medically Monitored Inpatient

currently taking youth)

Lighthouse (JYS)

Montana Creek

RYC

Detox

KIC

Crossings (SEARHC)

(Spruce Root House)

Therapeutic Tx Homes

homes in KTN or JUN)

**Residential Education** 

School District

**Community Connections** 

Spruce Roots House Women in Safe Homes

Emergency Mental Health Youth Services Akeela/KAR (not serving youth anymore) AWARE Bartlett Regional Hospital KGBSD - RISE team PeaceHealth Ketchikan RYC Spruce Roots House Other 988 hotline **Bartlett Regional Hospital** BRH Emergency Room (short-stay) DET/DES/PES providers KIC crisis walk-ins **KTN** cares line KWC (working on MIH) (Ketchikan) OCS PeaceHealth Ketchikan POW Health Network drop in peer support RYC SEARHC Spruce Roots House (Juneau) Trevor project crisis line Wil la mootk counseling center (Metlakatla)

KIC tribal scholars KYFC - Ketchikan Youth for Change (17 kids) RISE School District RYC ED Center

Ketchikan, Craig, Klowack,

KIC strategic plan culturally

relevant support services for

Hydaburg, Thornbay

#### Crisis Services/Acute Care

PeaceHealth Ketchikan

Aurora Behavioral Health Center (Bartlett Regional, JNU) Emergency/Shelter AWARE Peace Health RYC