CCBHC Working Session

January 25, 2022

Agenda

1. Budget update

2. Goal for today

3. Guardrails

4. Starting list of ideas

5. Next Steps

CCBHC Budget Status

The administration is proposing to provide $28.1 Million in infrastructure and one-time funds to support CCBHC development

CCBHC Startup/Infrastructure Funding ***$28.1 M over 3 FY*** Grant program + administrative support	**$28.1 M over 3 FY** *funded thru ARPA*

As stated in the Governor's budget:

- *"The proposal includes **$28.1 million to support Certified Community Behavioral Health Clinics,** which are designed to provide a de-institutionalized, comprehensive range of behavioral health supports, medical screening and monitoring, and social services to particularly vulnerable populations with complex needs.*

- ***Infrastructure grants*** *will be established to pave the way for behavioral health providers and community mental health organizations to*

    - *develop the capacity to operate as clinics;*

    - *enable designated collaborating/partner organizations to be equipped to participate in service delivery and collaboration with clinics; and*

    - *support State implementation of this initiative through project management, evaluation, technical assistance, and administration. "*

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Today's Goal

Work together to identify the best uses of the $28.1m in one-time funding that:

- Improve the quality and accessibility of outpatient BH services

  - Close gaps in service availability

  - Improve outcome measurement capabilities of providers

- Move toward readiness for Mobile Crisis and CCBHC in the event permanent funding becomes available

- Address workforce challenges

- Drive toward better system integration

- Promote an equity agenda

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Guardrails

The $28.1m is one-time money, therefore:

- **Can** fund infrastructure, and one-time workforce improvements

- **Can** target specific populations (i.e., kids, people with SMI, people with OUD)

- **Can** target specific types of providers and services (e.g. culturally-specific providers)

- **Can** fund capital expenses

- **Can** build infrastructure necessary to achieve CCBHC and MCT goals

- **Cannot** fund ongoing expenses

- **Cannot** fund non-CCBHC related expenses

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Potential Grant Uses(Starting List)

Potential Priority Areas	Description
1. Mobile crisis preparedness	Invest in developing a statewide mobile crisis response system • consistent with our existing build design discussions (minus development of enhanced rate)
2. More focused children's investment for mobile crisis and outpatient services	• Includes infrastructure investment for children's focused mobile crisis response leveraging existing community partners • Targeted service investment for primarily adult serving providers to expand services for children in need/crisis
3. BH Outpatient Workforce Investment	• Capacity building money (staffing, training, technology) directed at a broad range of outpatient providers, • who in exchange for dollars will in turn will develop new programs/service and/or expand existing programs/services
4. Improve BH Connection to existing pop health initiatives	• Improve connection and relationship between outpatient BH providers and AEs through investment in • EHR capability, quality/outcome measurement (demographic/SOGI data collection), and improved accountability for partners to further enhance BH's role in RI population health initiatives
5. Other ideas	

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Potential Grant Uses
Additional Ideas/Suggestions of Community Partners

Potential Priority Areas	Description
Robust and Flexible IT system to support CCBHC development	• Reporting, staff training, analytics, hardware, software • There would still be some need for ongoing enhancements – but would enable/start up
988 investment	• 988 start up funding and alignment and the establishment of a "air traffic control" center is critical to establishing an integrated statewide mobile crisis system.
SPMI Targeted investment area	
Implementing the pilot for the CAHOOTS model	
Bridge funding for existing CCBHCs	
Mobile Crisis Pilot	• Leverage infrastructure funds to Laying framework for building out the program in subsequent years. Lots of evidence/resources available. Broad studies of system design. 911 dispatcher process flows are needed –leverage processes developed in other states
Building infrastructure	
Workforce Stabilization	We cant fill positions – crisis – ensure community partners are included beyond CMHOs in support

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Parking Lot: Additional Considerations from Community Partners

- Leverage MBE/WBE partners in any proposals, including language re: minorities and females in performing the work

- Be sure to align this transformational work with the work of existing CCBHCs – leveraging future federal grants

- A significant challenge – you are proposing spending startup for a system of care that does not have a future guarantee. Absent a sustainable rate, it is difficult to invest

- Mobile Crisis planning and design considerations

  - Look at alignment between 988 and the mobile crisis that would be for situation potentially escalated to police involvement, or one not escalated – making sure training and development considers the range of responses the team will have to react to

  - Ensure that you build community awareness for mobile crisis so people know who to call

  - Ensure collaboration with other agencies

  - Collaborate with RIDE - RIDE and all the student mental health dollars that have come in and line up the strategies around child and youth treatment and mobile crisis

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Next Steps

- **Design and implementation of CCBHC Startup/Infrastructure Funding –** incorporate feedback from today

- **Community Partner Meetings**
The schedule of upcoming CCBHC Community Partner meetings will be revised to support the revised implementation priorities and timeline

- **Await Legislative Process: Governor's Budget & ARPA Funding Approval Process**

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