

FY26 Proposed Budget Detail Report

This document provides additional information related to staff recommendations for the Trust's FY26 budget. This report has been developed as a result of trustee feedback and recommendations for how the budget is presented to the board.

Content in this narrative report is organized by budget section, has been placed in the same order as content in the draft budget spreadsheet, and is meant to serve as a supplement to the proposed budget.

- *Non-focus Area Allocations*
- *Mental Health & Addiction Intervention*
- *Disability Justice*
- *Beneficiary Employment and Engagement*
- *Housing and Home & Community Based Services*
- *Other Priority Areas*
 - *Workforce Development*
 - *Early Childhood and Youth*

For each line in the budget, you will find in this document details including grant type, relevance to the Comp Plan, a brief project/initiative description, and an analysis that includes project data if available.

Budget lines that are “buckets” – strategies for which there are not yet projects identified for FY26 – are noted in **blue**. If the bucket has been funded in prior years, a list of prior projects funded through that bucket is offered to help illustrate how the approved funds have been applied.

New lines in the budget are noted in **orange**.

During the July 2024 Program and Planning Committee meeting, Trust program officers and staff offered a brief presentation of each section of the proposed budget. Trustees had the opportunity to ask questions and discuss any direction to staff related to the budget.

Formal action to adopt the budget will take place at the August 2024 board meeting.

FY26 Budget Line Detail: Non-Focus Area Allocations

Budget Line: Page 2, Line 13	Project Name: Partnerships/Designated Grants	Grantee(s): To be determined
Proposed FY26 Amount: \$2,150.0 AG	Project Category: varied	
Comp Plan Relevance: Comp Plan Relevance of individual grants will be determined by program staff during the review process.		
Description: The Trust awards partnership grants to organizations that serve Trust beneficiaries for a specific purpose or need that are aligned with the Trust’s mission and priorities. Typically partnership grants are one time grants with a one year term, and they range from small conference sponsorships up to larger requests for a variety of purposes.		
Projects funded in FY24: The Trust funded 57 Partnership grant for a total amount of \$2,068,786.50.		
<p>Details on FY24 Partnership grants can be found in the FY24 quarterly grant summaries:</p> <ul style="list-style-type: none"> • FY24 First Quarter Grant Summary (July 2023 to September 2023): https://alaskamentalhealthtrust.org/wp-content/uploads/2023/10/Quarterly_Grant_Report_Q1-FY24.pdf • FY24 Second Quarter Grant Summary (October 2023 to December 2023): https://alaskamentalhealthtrust.org/wp-content/uploads/2024/01/Quarterly_Grant_Report_Q2-FY24.pdf • FY24 Third Quarter Grant Summary (January 2024 to March 2024): https://alaskamentalhealthtrust.org/wp-content/uploads/2024/04/FY24-Q3-Grant-Report-Final.pdf • FY24 Fourth Quarter Grant Summary (April 2024 to June 2024): https://alaskamentalhealthtrust.org/wp-content/uploads/2024/07/Trust-Grant-Report-Q4-FY24.pdf 		
<p>Analysis: The Partnership grant program is the Trust’s general grant bucket to meet a variety of beneficiary needs around the state. On an ongoing basis, the Trust receives Letters of Interest from organizations that describe their potential projects and how they will impact the beneficiary groups that they serve. Trust program staff review the Letters of Interest on an ongoing basis to assess the beneficiary connection as well as how the proposals fit with the Trust’s budget priorities and currently available funding. Following this review process, projects that are identified as good programmatic fits are individually analyzed by program staff and go through the Trust’s grant approval process. Each approved Partnership grant has individual performance measures and following the conclusion of the grant is reviewed for compliance.</p> <p>The Partnership grant program allows the Trust to respond in a timely fashion to the needs of beneficiary serving organizations throughout the fiscal year. Each Partnership grant receives an extensive programmatic review before it is referred to the Trustees for consideration.</p>		

FY26 Budget Line Detail: Non-Focus Area Allocations

Budget Line: Page 2, Line 16	Project Name: Mini-Grants for ADRD	Grantee Name: Alzheimer Resource Agency
Proposed FY26 Amount: \$400.0 AG	Project Category: Direct Service	
Comp Plan Relevance: Goal 3 Economic and Social Well-being / 3.4 Basic needs services		
<p>Description: The mini-grant program grants can include, but should not be limited to, therapeutic devices, access to medical, vision and dental, and special health care, and other supplies or services that might remove or reduce barriers to an individual's ability to function in the community and remain in their own home or home community as long as possible. Assistance with basic living needs not covered by current grants, such as transportation, clothing, and the like, will also be considered. These services will help Trust beneficiaries attain and maintain healthy and productive lifestyles. These items are determined to support beneficiaries in achieving stability and are critical supports to gaining self-sufficiency. Consumer mini-grants are essential to a system delivering individualized services that promote stability.</p>		
<p>Analysis: The Mini Grants for ADRD (Alzheimer's disease or related dementia) project is identified as a Non-Focus Area Allocation in the Trust budget. Mini-grant projects are long-standing Trust investments to fill small gaps in service or meet other needs that Trust beneficiaries have, to obtain services and items they need to remain in their home and community as long as possible. This project also offers Trust beneficiaries with ADRD the opportunity to improve their day-to-day well-being as most of this beneficiary population has retired and is no longer pursuing employment. Alzheimer's Resource of Alaska (ARA) administers the funds and acts as the fiscal agent for applications. This contract continues to be a benefit both to the Trust as well as the applying beneficiaries. Because ARA is a primary service agency for people with ADRD, they can engage applicants and their families in conversations about additional support services offered in Alaska. If regular guidance is needed, a care coordinator is recommended for ongoing services through their affiliated agency, Care Coordination Resource of Alaska. Well-versed in the availability and qualifications to obtain Medicaid, Medicaid waiver, Medicare, and senior grant services, ARA ensures that mini-grant funds are used as a last resort when other resources are unavailable or fully expended. Applications for the Mini Grants for ADRD are reviewed and awarded monthly.</p> <p>This project is recommended for continued funding. This is a unique grant opportunity for Trust beneficiaries with Alzheimer's disease or related dementia in Alaska. The funds are administered within the established guidelines and budget for the program.</p>		
FY23 ADRD Grant Award Information		
Regions - Service Areas	# of Grants Awarded	Amount Awarded
Region I - Bethel, St. Mary's, Mt. Village, New Stuyahok	2	\$3,100
Region II - Fairbanks	7	\$12,982.83
Region IV - Anchorage	163	\$222,535.39
Region IX - Juneau	2	\$5,000.00
Region IX - Southeast - Other	21	\$46,259.73
Region V - Cordova; Valdez; Kenai Peninsula	19	\$32,981.79
Region V - Other (Willow, Talkeetna, etc.)	4	\$5,479.57
Region V - Mat-Su (Wasilla, Palmer)	23	\$27,523.66

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Region VI - Nome, Kotzebue, White Mountain	0	0	0%
Region VII - Kodiak Island	1	\$2,500	1%
ARA Administrative Fee		\$46,187.31	12%
Totals:	242	\$404,550.28*	100%

*exceeds total award due to individual grant funds recovered during FY23 being re-awarded.

Grants Awarded by Category			
Item Category	# of Grants Awarded	Amount Awarded	Percentage of \$
Accessibility	58	\$87,649.62	24.5%
Adaptive	44	\$58,312.70	16.3%
Dental - Preventative	2	\$3,444.90	1%
Dental - Restorative	5	\$11,592.35	3.2%
Hearing	1	\$2,348	0.7%
Medical	4	\$1,720	0.4%
Other	7	\$13,307.85	3.7%
Respite	61	\$134,695.59	37.6%
Supplies	60	\$45,291.96	12.6%
Grant totals:	242	\$358,362.97	100%

Budget Line: Page 2, Line 17	Project Name: Mini Grants for beneficiaries experiencing mental illness, chronic alcoholism, substance use disorders & intellectual and developmental disabilities (Grant Funds)	Grantee Name: Grant funds will be awarded through an RFP process.
Proposed FY26 Amount: \$1,500.0 AG	Project Category: Direct Service	
Comp Plan Relevance: Goal 3 Economic and Social Well-being / 3.4 Basic needs services		
Description: The mini-grant program provides Trust beneficiaries with a broad range of equipment and services that are essential to directly improving their quality of life and increasing independent functioning. These can include, but should not be limited to, therapeutic devices, access to medical, vision and dental, and special health care, and other supplies or services that might remove or reduce barriers to an individual's ability to function in the community and become as self-sufficient as possible.		

FY26 Budget Line Detail: Non-Focus Area Allocations

Analysis: The Mini-Grants for Beneficiaries programs are identified as a non-focus area allocation in the Trust budget. This program is a long-standing Trust investment that fills small gaps in services or meets other needs of Trust beneficiaries with items or services needed to maintain their quality of life and increase independent functioning. Individual mini-grants are awarded to a community organization who applies on behalf of the beneficiary. Applications for mini-grants are reviewed each month by an evaluation committee consisting of representatives from the Trust and the appropriate statutory advisory board(s). Mini-grants provide a direct-service to individual beneficiaries through assistance in securing needed items or services, which are not available through other funding sources. The primary challenge for the mini-grant program has been the capacity of community organizations to apply for and administer the grants on behalf of the beneficiaries they work with. These organizations provide a crucial service, but frequently have demands that exceed their capacity. The Trust will continue to work with these community organizations to look for ways to assist in these issues.

This project is recommended for continued funding. Mini-grant funds are administered within the established guidelines and budget for the program. If mini-grants were eliminated, there is no other program within the State that could take its place.

FY23 Behavioral Health Mini-Grant Performance Data (FY24 information will be available upon grant closeout by contactor):

FY23 Grants Approved = 522 = \$884,267.37

FY23 Grants Declined = 184 = \$423,113.14

Approval Rate = 74% by request (many requests are partially funded)

Total Grants Considered = 706, totaling \$1,248,179.27

Approved grants by request type	Grants	% of Approved Requests	Funding	% of Approved Funding
Medical	24	4.6%	\$40,995	4.6%
Dental	22	4.2%	\$61,589	7%
Vision	1	<1%	\$950	<1%
Hearing	0	0.0%	\$0	0.0%
PT/OT/ST (Therapy)	3	<1%	\$5,968	<1%
Home/Env Mods	97	18.8%	\$170,758	19.3%
Equipment/Supplies	76	14.6%	\$96,889	11%
Educational	5	1%	\$5,168	<1%
Other	294	56.3%	\$501,950	56.8%

Approved grants by region	Grants	% of Approved Requests	Funding	% of Approved Funding
Anchorage	181	34.7%	\$324,406	36.7%
Southcentral	169	32.4%	\$267,327	30.2%
Southeast	108	20.7%	\$179,410	20.3%
Northern/Interior	53	10.2%	\$89,845	10.2%
Southwest	9	1.7%	\$18,280	2%
Northwest	2	<1%	\$5,000	<1%

FY26 Budget Line Detail: Non-Focus Area Allocations

FY23 Developmental Disabilities Mini-Grant Performance Data (FY24 information will be available upon grant closeout by contactor):

FY23 Grants Approved = 271 = \$392,855.67

FY23 Grants Declined = 94 = \$188,678.61

Approval Rate = 74.25% by requests (many requests are partially funded)

Total Grants Considered = 365, totaling \$669,923.44

Approved grants by request type	Grants	% of Approved Requests	Funding	% of Approved Funding
Medical	62	22.9%	\$91,012	23.2%
Dental	13	4.8%	\$28,461	7.2%
Vision	2	<1%	\$3,375	<1%
Hearing	0	0%	\$0	0%
PT/OT/ST (Therapy)	105	38.7%	\$133,265	33.9%
Home/Env Mods	10	3.7%	\$22,075	5.6%
Equipment/Supplies	43	15.9%	\$56,423	15.1%
Educational	4	1.5%	\$2,658	<1%
Other	32	11.8%	\$55,587	14.1%

Approved grants by region	Grants	% of Approved Requests	Funding	% of Approved Funding
Anchorage	96	35.4%	\$131,388	33.4%
Southcentral	88	32.5%	\$137,602	35%
Southeast	47	17.3%	\$60,700	15.5%
Northern/Interior	27	10%	\$44,949	11.4%
Southwest	10	3.7%	\$16,206	4.1%
Northwest	3	1.1%	\$2,011	<1%

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Budget Line: Page 2, Line 20	Project Name: ABADA/AMHB Joint Staffing	Grantee Name: DOH/DBH/AMHB-ABADA
Proposed FY26 Amount: \$491.5 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 4 Substance Use Disorder Prevention, Objective 4.1, Increase awareness, improve knowledge, and change behavior to prevent drug and alcohol misuse.		
Description: The primary function of the ABADA/AMHB involves planning and coordinating behavioral health services funded by the State of Alaska. The Boards also advocate for programs and services that promote improved lives. The joint Boards support the Trust in planning, developing, and evaluating the Trust's focus/priority area work. In collaboration with the Department of Health and the Trust, the Boards partner together to support the work of the Comprehensive Mental Health Plan.		
Analysis: In FY 24, the Board's staff helped provide information and data to the Trust evaluation team for the yearly Comp Plan Scorecard update. The advocacy coordinator managed the advocacy weekly meetings, outreach, action alerts, and updates from Hill that were prudent regarding the bills and legislation that concerned beneficiary welfare. The advocacy coordinator held four publicly noticed Super Advocacy trainings. The Boards held quarterly meetings around the state, which helps local community members gain knowledge and understanding of how services are delivered in that region and what gaps in services exist. Board staff routinely serve on proposal evaluation committees with the DOH, various advisory boards, planning committees for evaluation projects like the Mental Health in Schools Report, and monthly meetings like the Alaska Behavioral Health Association.		
The Boards hold publicly noticed comment periods, providing valuable feedback on how behavioral health services are accessed. Over the last two years, the Boards averaged around 850 advocates who were engaged at the community level. The Boards are a valued partner of the Trust and provide feedback on the Comp Plan, Trust budget, and advocacy issues impacting beneficiaries.		

Budget Line: Page 2, Line 21	Project Name: GCDSE Joint Staffing	Grantee Name: DOH/DSDS/GCDSE
Proposed FY26 Amount: \$225.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 9: Workforce, Data and Funding, Objective 5: Encourage a culture of data-driven decision-making that includes data sharing, data analysis, and management to link support services across Alaska Department of Health and Social Services (DHSS) divisions and other departments.		
Description: The Governor's Council on Disabilities and Special Education (GCDSE) fills five distinct state and federal roles, including that of statutory advisor for the Trust. GCDSE Joint Staffing funds support the Council's basic operations related to data, planning, and advocacy. This funding supports two positions at GCDSE: 1) a Research Analyst III, and 2) a Planner III position.		
Analysis: This funding supports advocacy and services for Trust beneficiaries of all ages with disabilities by improving their lives in relation to early intervention, self-advocacy and determination, employment, housing, health, transportation, special education, community inclusion, and relevant legislation. The GCDSE is a statutory partner for planning services for Trust beneficiaries and provides expertise and support related to the Comp Plan for issues related to early intervention, special education, and services for beneficiaries who experience developmental disabilities. The FY24 mid-year report (3/15/2024) noted		

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that the GCDSE continues to collect and analyze data points related to all their projects. This includes their annual stakeholder survey and other surveys at GCDSE events. This data represents their stakeholder’s voice, our Trust beneficiaries. In terms of advocacy, they provided 2 support letters on national issues and adopted 6 position papers for legislative advocacy in Alaska. The GCDSE Research Analyst was also active on various collaborative partnerships with agencies and on the working groups for the update of the Comp Plan. Because of the relevance of their work and input related to our Trust beneficiaries, funding GCDSE has been maintained over time and is included in the FY26 & FY27 budgets. The GCDSE also receives state and federal funding to carry out their duties. The increase in their budget of \$40,500 will support their statutory duties to the Trust.

Budget Line: Page 2, Line 25	Project Name: ACoA Staffing and Support	Grantee Name: DOH/DSDS/ACoA
Proposed FY26 Amount: \$200.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 9, Workforce Capacity, Data, and Technology Systems, Objective 5: Encourage a culture of data-driven decision-making that includes data sharing, data analysis, and management to link support services across Alaska DHSS divisions and other departments.		
Description: Trust funding supports the Alaska Commission on Aging (ACOA) to facilitate the Commission’s work to implement legislation and programs that affect older adult beneficiaries and advocate for positive outcomes for seniors. At least one position that conducts planning and data collection activities is expected to be hired from this funding.		
Analysis: With partnership funding, ACOA will provide the Trust with data on Alaska’s beneficiary population, including the number of beneficiaries, their characteristics, and trends in their quality of life, based on the most credible and consistent data available. Alaska-specific data is preferred when available. The Commission will implement strategies to improve the status of beneficiaries in the key advocacy issues identified by the Commissioners. ACOA will conduct an annual survey of stakeholders to assess satisfaction and make recommendations for change. The Commission will collaborate with the Trust and other key partners in key planning activities related to beneficiaries and Trust focus areas, including but not limited to staff participation in focus area meetings and activities, Trust-sponsored initiatives, research and planning activities, and public planning processes with beneficiaries. Data and a report on planning activities will be provided to trustees annually.		

Budget Line: Page 2, Line 25	Project Name: Grant-writing technical assistance	Grantee Name: These funds will be awarded through the State of Alaska procurement process
Proposed FY26 Amount: \$200.0 AG	Project Category: Contract	
Comp Plan Relevance: Goal 9, Workforce Capacity, Data, and Technology Systems, Objective 3: Ensure funding is available to support Alaska’s Comprehensive Integrated Mental Health Program.		
Description: The Trust has obtained a contract to assist agencies in identifying potential grants or other funding sources for new or existing programs that serve Trust beneficiaries. The contractor researches grant opportunities, assists with proposal planning and development, provides technical assistance to prepare grant proposals, and provides grant writing training for provider agencies related to the Trust’s mission.		
Analysis: Historically, this contract focused on identifying funding sources relevant to the focus area work and assisted with grant applications. The contractor primarily interacted with the program team when reviewing these resources, and program officers would connect with partners who were ready to implement projects that would benefit from a grant opportunity. A few projects can receive technical assistance for in-depth consultation and grant writing each fiscal year. These resources are for more complex grants, often for federal funds, and will be prioritized by system impact and contractor capacity. Grants likely to		

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have multiple agencies from Alaska applying would not be eligible, as we do not want to provide an unfair advantage to one beneficiary-serving organization over another.

In FY23, six grant applications were completed, with four submitted. A total of \$24,900,000 grant dollars came to Alaska from successful applications, 125 times the amount invested. Two awards were to State of Alaska agencies and two to nonprofits.

Recognizing that only a few projects can be supported through the grant writing technical assistance described above, new strategies were needed to support more beneficiary-serving organizations. The additional services new to this contract include grant-writing training and office hours.

Budget Line: Page 2, Line 26	Project Name: Technical assistance for beneficiary groups & Trust initiatives	Grantee Name: These funds will be awarded through the State of Alaska procurement process
Proposed FY26 Amount: \$500.0 AG	Project Category: Contract	
Comp Plan Relevance: Goal 9, Workforce Capacity, Data, and Technology Systems, Objective 3: Ensure funding is available to support Alaska's Comprehensive Integrated Mental Health Program.		
Description: The Trust has obtained a contract to assist organizations with technical assistance for new or existing programs that serve Trust beneficiaries. The Technical Assistance Contract can also be used by the Program Team to further the work of a focus area or group of agencies.		
Analysis: This contract was developed to respond more quickly to the emerging needs of beneficiary-serving organizations, as the partnership grant process takes roughly 3-4 months. Technical Assistance can also be requested to accompany a grant to set the project up for success, especially for complex projects, or when an organization's project is not quite ready to fund to help prepare the organization for the project or remediate a concern. Strategic planning and business plans are common requests for these situations. Technical assistance can be provided in seven key areas: Non-Profit Governance and Operations, Fund Development and Financial Management, Information Technology, Capital Pre-Development, Incorporating Beneficiary Lived Experience, Supportive Housing, and Crisis Continuum of Care. These categories were established through meetings with the Program Team. Contractors were awarded through a competitive RFP process in FY22 and are in a continuation year. Contractors that meet the criteria are added to a pool from which the agency and Program Officer can select based on the presenting need and contractor specialty. Work is not guaranteed, but contractors generally have one or more contracts each fiscal year.		
In FY23, 23 projects were requested, and 18 moved forward with a scope of work. Six projects were in Anchorage, two in Southeast Alaska, one in Kenai, one in Kodiak, one in MatSu, one in Southcentral Alaska, and six statewide. The average project cost was \$24,911, with a low of \$4,275 and a high of \$68,081.		
Technical Assistance Contract trends include longer project periods, an increase in no-cost extensions, and an organization needing multiple types of assistance (if the budget allows). Contractors also seem quite busy, and it often takes 4-6 weeks before work can begin.		

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Budget Line: Page 2, Line 27	Project Name: Communications	Grantee Name: These funds will be awarded through the State of Alaska procurement process
Proposed FY26 Amount: \$450.0 AG	Project Category: Contract	
Comp Plan Relevance: This budget line connects with multiple sections of the comp plan.		
Description: These funds support the Trust’s communications program, including efforts to increase understanding of the needs of and challenges faced by Trust beneficiaries, the Trust’s anti-stigma and lands-related education campaigns, as well as other media and public relations efforts. These funds are deployed primarily through contractual services and occasionally through grants related to communication efforts.		
Analysis: The Trust’s communication goals and program align with the Trust’s mission of improving beneficiary outcomes and providing leadership in advocacy, planning, implementing and funding a Comprehensive Integrated Mental Health Program. Trust communications also often directly support Trust focused areas of work and grantmaking. Recent media campaign metrics indicate above-average engagement and viewership of Trust content, and survey data indicates that public awareness of the Trust and its mission is improving.		

Budget Line: Page 2, Line 30	Project Name: Comprehensive Program Planning and Consultative Services	Grantee(s): To be determined
Proposed FY26 Amount: \$350.0 AG	Project Category: Various	
Comp Plan Relevance: Goal 9, Workforce, Data, and Funding, Objective 9.5 Data-Driven Decision-Making		
Description: This funding allows the Trust to respond to data development and analytic needs to identify and forecast the status and needs of Trust beneficiaries in support of the Comprehensive Integrated Mental Health Program plan and Trust Focus Area. Funds may be implemented as grants approved by Trustees or contracts awarded through a procurement process.		
<p>Projects funded in FY24:</p> <ul style="list-style-type: none"> - UAA, NTE \$250.0, Proposed Evaluation of Supportive Housing in three rural communities Sitka, Bethel, Nome - Trustees did not approve funding. - NTE \$100.0 funding to support the production, publication, and printing of <i>Strengthening the System II, Alaska’s Comprehensive Integrated Mental Health Program Plan (FY25-FY29)</i>. The Department of Health assumed this responsibility through its Public Information Office, and this funding was not utilized in FY24. 		
Analysis: This line is included in the budget again to allow the Trust to respond to data development and analytics needs as they are identified. As the Trust does not currently have the capacity for data development and analytics, we must rely on other sources or technical expertise to produce data to inform our focus area funding, programming, and policy work for beneficiaries. The Trust must often contract services to obtain or develop the needed information. In FY25, projects under consideration include contracts to address Trust beneficiary prevalence estimates, address follow-up ADRD-related data development needs recently identified, a potential systems assessment of services providing care for beneficiaries experiencing ADRD and TABI, and updating the Trust’s <i>Economic Cost of Alcohol and Drug Misuse in Alaska</i> report.		
Projects supported with this budget line align with the Comp Plan goal and objective focused on data-driven decision-making and support the work of the Focus Area to improve systems of care serving Trust beneficiaries.		

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Budget Line: Page 2, Line 31	Project Name: Scorecard Update	Grantee Name: DOH/DPH/HAVRS
Proposed FY26 Amount: \$70.0 MHTAAR	Project Category: Data/Planning	
Comp Plan Relevance: Goal 9, Workforce Capacity, Data, and Technology Systems, Objective 3: Ensure funding is available to support Alaska's Comprehensive Integrated Mental Health Program.		
Description: This project is funded for staffing to ensure data quality and potentially improve the method for tracking progress on Alaska's mental health program. The project ensures accurate data is used to measure the effectiveness of the mental health program plan. This, in turn, allows for better program development and resource allocation, ultimately aiming to improve the health outcomes of Trust Beneficiaries.		
Analysis: These efforts should ultimately lead to a more data-driven and impactful program for the Trust's target population. The project outlines steps to improve the measurement of Alaska's mental health program plan. By ensuring accurate data collection and potentially revising the evaluation method (Scorecard), the project can lead to better understanding of program effectiveness in reaching the target population, more informed resource allocation to areas with the greatest need, and improved program design and service delivery based on data-driven insights. This project also aligns with the Trust's focus on improving mental health services in Alaska by strengthening the data collection and evaluation methods used to track program progress.		
<p>This project outlines key activities measured through performance metrics. These activities contribute to a more effective mental health program:</p> <ul style="list-style-type: none"> • Leading data analysis for the Comp Plan data subcommittee and department dashboards ensures data used for evaluation aligns with program goals (Strengthening the System 2025-2029) and is effectively visualized for stakeholders. • Updating the evaluation tool (Scorecard or alternative) and documenting changes improve data accuracy and transparency, allowing for better program assessment. • Updating prevalence estimates ensures data reflects the target population's evolving needs. 		

Budget Line: Page 2, Line 32	Project Name: DOH Comprehensive Program Planning Coordinator	Grantee Name: Department of Health, Division of Public Health
Proposed FY26 Amount: \$75.0 MHTAAR	Project Category: Data/Planning	
Comp Plan Relevance: Goal 9, Workforce Capacity, Data, and Technology Systems, Objective 3: Ensure funding is available to support Alaska's Comprehensive Integrated Mental Health Program.		
Description: This project is funded for staffing (.5FTE within the Department of Health). The project connects the Department of Health (DOH) and Department of Family and Community Services (DFCS) to beneficiaries by establishing a dedicated role to manage a comprehensive mental health program plan. This plan aims to improve mental health services over the next five years through better implementation, evaluation, and data-driven decision making.		

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Analysis: The project benefits the Trust's target population by establishing a dedicated position within the Department of Health to manage the implementation of a comprehensive mental health program plan. This plan, implemented over the next five years, aims to improve access to and quality of mental health services for Alaskans. While the project description doesn't quantify the impact, it outlines activities like facilitating data-driven program development and monitoring, which should lead to better services for those in need.

The project's performance measures and activities will lead to positive outcomes for beneficiaries. Developing an implementation framework and facilitating meetings ensures clear communication and collaboration among stakeholders responsible for delivering mental health services. This improved coordination should lead to more efficient program implementation, ultimately benefiting beneficiaries through better access to services. Additionally, the focus on improving monitoring and evaluation tools will allow for better data collection on program effectiveness, which can be used to identify areas for improvement and ultimately lead to better services for beneficiaries.

Budget Line: Page 2, Line 33	Project Name: Beneficiary Mental Health Status Data Collection	Grantee Name: DOH/DPH/CDPHP
Proposed FY26 Amount: \$45.0, MHTAAR	Project Category: Data/Planning	
Comp Plan Relevance: Goal 9 Workforce, Data, & Funding; Objective 9.5 Data-Driven decision-making		
Description: The goal of this project is to ensure there is Alaska-specific data available addressing the mental health status of Trust beneficiaries. These funds are used by the Department of Health - Division of Public Health to support the administration, outreach, collection, and analysis of data collected through the Center for Disease Control's (CDC) Behavioral Risk Factors Surveillance System (BRFSS), the Youth Behavioral Risk Behavior Surveillance Systems (YRBS), and School Health Profiles.		
Analysis: Data collected and analyzed through these surveillance systems utilized by the Division of Public Health are used in a variety of manners including through monitoring progress on the DOH Comp Plan via the Alaska Scorecard, Healthy Alaskans initiative, and others. This data is used by community organizations in monitoring their services and applying for grant funding from local, state, and federal sources. The 2023 BRFSS annual survey exceeded the sample size target of 5,352, and the data is currently being prepared by the CDC for return to the State, and the 2024 survey is in progress. The State is awaiting the return of the 2023 YRBS data from the CDC, and planning is underway to transition from a paper survey to an electronic version. To ensure the availability of a representative sample of Alaskan-specific beneficiary data, it is anticipated that the Trust will continue funding this item.		

Budget Line: Page 3, Line 36	Project Name: Coordinated Community Transportation	Grantee Name: DOTPF/Program Development Alaska Transit Office
Proposed FY26 Amount: \$1,000.0 GF/MH recommendation	Project Category: Capital-Equipment	
Comp Plan Relevance: Goal 3: Economic & Social Well-Being, Objective 3: Enhance timely access to basic needs services.		
Description: The Alaska Department of Transportation and Public Facilities (AKDOT&PF) Community Transit Office awards Trust funds, paired with other funding sources, through a competitive application process to non-profit, local government and Tribal entities throughout Alaska for operating assistance, purchase of services, and capital project that enable and enhance the mobility of Trust beneficiaries.		

FY26 Budget Line Detail: Non-Focus Area Allocations

Analysis: The Alaska Department of Transportation & Public Facilities (DOT&PF) Community Transit Office (ACT) awards funds through a competitive application process to non-profit agencies and tribes throughout Alaska for operating assistance, purchase of services and capital projects that enhance/enable the mobility of Trust Beneficiaries. This proposal is for funds to plan for and coordinate mobility and human services transportation systems in local communities by pooling available resources, i.e. for coordinated transportation. Other options may include developing taxi voucher programs, taxi accessibility projects, convertible ambulances, boats, and snowmobile carts. Uncoordinated mobility services and transportation systems are not cost-effective and create additional barriers for Trust beneficiaries (e.g. accessibility and eligibility restrictions or limited hours of services). This proposal allows for these funds to be used to purchase or replace accessible vehicles owned by consumer-run and other provider nonprofit corporations for non-coordinated uses where coordination is not feasible. Operating assistance, taxi voucher and vehicles are used to transport Trust Beneficiaries to things such as services, community activities or work; vehicles are also be used to transport staff to consumer homes, and other beneficiary-related transportation.

There are approximately thirteen Alaskan communities that have public transportation, and though it provides great benefits to all residents, it can still be limited. Including public transportation communities, there are approximately twenty-five Alaskan communities with Coordinated Transportation Plans. Although providers work to develop and maintain coordinated transportation systems, these systems do not always meet the needs of Trust Beneficiaries. These projects improve/increase the mobility options and services for Trust Beneficiaries.

While MHTAAR funding is being phased out, continued advocacy is needed for GF/MH funding to bring in federal resources and continue added flexibility into the program to respond to the unique needs of small Alaskan communities. Beneficiaries consistently list transportation as a top service need.

Budget Line: Page 3, Line 37	Project Name: Essential Program Equipment (FY2023-FY2027-MHTAAR Lapses June 20, 2027)	Grantee Name: DOH/SDS
Proposed FY26 Amount: \$250.0 MHTAAR, \$250.0 GF/MH recommendation	Project Category: Capital - Equipment	
Comp Plan Relevance: Goal 9, Workforce Capacity, Data, and Technology Systems, Objective 4: Optimize information technology investments to improve process efficiency and enable innovation		
Description: The Trust supports this biannual capital funding to the Department of Health to issue grants that enable organizations serving trust beneficiaries opportunities to address essential equipment needs through competitive grants administered by the Department of Health. This grant improves the capacity of beneficiary-serving organizations.		

FY26 Budget Line Detail: Non-Focus Area Allocations

Analysis: Agencies providing services to Mental Health Trust beneficiaries have a great need for equipment to improve the effectiveness, efficiency and quality of their service delivery. Program equipment needs may include therapeutic equipment, computers, copiers, furnishings and general office equipment, security systems, and distance delivery technology or systems. Proposals will be solicited from service providers for all five beneficiary groups. This very successful grant program has provided agencies with equipment (limited to \$25,000 per agency) that has significantly improved agencies' operational efficiencies. All funds are awarded through a statewide competitive process.

Twenty-nine grant awards were issued to agencies across the state during the last solicitation. The most common requests were for computer equipment. Office equipment, furniture, and security systems are other examples of items purchased through this grant. Essential Program Equipment is a Non-Focus Area Allocation as it supports agencies implementing programs across multiple focus areas.

There are typically no other funding sources to assist programs with equipment upgrades that offer a range of allowable purchases, including database upgrades or mobile technology for contemporaneous documentation. Organizations that have received awards view this grant source as a critical resource and needed option to support organizational capacity and efficient business practices. This project has demonstrated positive outcomes and received more applications than there is funding available.

Budget Line: Page 3, Line 40	Project Name: Rural & Community Outreach	Grantee Name: Contract Services/Grant Funds
Proposed FY26 Amount: \$130.0 AG	Project Category: Varied	
Comp Plan Relevance: This budget line connects with multiple sections of the comp plan.		
Description: These funds will support planning, contracts for services, participant transportation and lodging, and other costs associated with the Trust-sponsored Rural Outreach (RO) trip planned for fall 2025. The purpose of Trust RO trips is to gain a deeper understanding of Alaska's unique regions and cultures, increase understanding of the strengths and challenges facing Trust beneficiaries in rural Alaska, increase awareness of the resources available to Trust beneficiaries, communities, and organizations in the region, and to foster partnerships.		
Analysis: Participant survey data from the 2023 RO trip to the YK region indicated that both attendees and regional partners found the event valuable, and an opportunity to build meaningful relationships. Participants also received a copy of a trip summary that highlighted themes from participant reports and community site visits, as well as opportunities for partnership and solutions. While immeasurable, we know that participants in Trust RO trips will apply the knowledge gained on these trips to better inform their work on behalf of Trust beneficiaries across the state.		

FY26 Budget Line Detail: Non-Focus Area Allocations

Budget Line: Page 3 Line 41	Project Name: Long-Term Care Ombudsman	Grantee Name: Office of Long-Term Care Ombudsman
Proposed FY26 Amount: \$144.0 GF/MH recommendation	Project Category: N/A	
Comp Plan Relevance: Goal 6: Protecting Vulnerable Alaskans, Objective 5: Ensure vulnerable Alaskans understand their rights and responsibilities.		
Description: As authorized under federal and state law, Alaska’s Long-Term Care (LTC) Ombudsman program protects the rights, safety and welfare of older persons residing in assisted living and nursing homes across the state. Alaska’s LTC Ombudsman program is in the Department of Revenue and administered by the Alaska Mental Health Trust Authority. This GF/MH increment will support the personnel and benefit-cost of one FTE Assistant Long-Term Care Ombudsman that is needed to cover significant growth in the senior population and subsequent increases in long-term (LTC) facilities across the state.		
Analysis: The Office of the Long-Term Care Ombudsman plays a key role in protecting the health, safety and welfare of residents living in long-term care (LTC) facilities. The program plays a critical role in advancing the rights of residents, supporting quality of care and quality of life by addressing and responding to resident complaints and advocating on behalf of seniors in LTC. Alaska’s aged 60 and over represent more than 20% of the State’s total population. Over the past decade, Alaska’s population of people aged 60 plus has increased by nearly 70%. With this population growth comes an increase in long-term care (LTC) facilities. The LTC’s current staffing levels cannot keep pace with the growing number of long-term care settings in Alaska. Funding for one additional staff person will help to ensure that residents in all 20 Skilled Nursing Facilities and residents in over 300 senior Assisted Living Homes across Alaska will have access to the LTC Ombudsman Services and regular visits from LTC Ombudsmen. Without an additional staff person, the Office anticipates 120 fewer visits to Long-Term Care facilities and 40 fewer cases to address, investigate, and resolve for seniors in LTC settings. Most complaints investigated are a direct result of regular unannounced visits to long-term care facilities.		
In 2023, the Office of LTCO completed over 800 in-person facility visits, investigated and addressed over 300 complaints, and resolved 80% of complaints to the satisfaction of the LTC resident.		

Budget Line: Page 3, Line 42	Project Name: Trust Conference	Grantee Name: These funds will be awarded through the State of Alaska procurement process
Proposed FY26 Amount: \$20.0 AG	Project Category: Contract	
Comp Plan Relevance: This budget line connects with multiple sections of the comp plan.		
Description: The next Trust conference is planned for fall 2027. These FY26 funds for the bi-annual Trust conference will support bringing on an event planning contractor before the start of FY27. The remaining funds for the 2027 conference are in the proposed FY27 budget. The Trust conference has proven to be a successful and well-received event where beneficiary-serving partners, agency officials, beneficiaries and others can network, share ideas, and learn.		
Analysis: The Trust’s first Improving Lives Conference in 2022 was a success, with more than 60 presenters, 30+ presentations, and more than 90% of post-event survey respondents expressing a positive and valuable experience. The next Trust conference is scheduled for fall 2024 and is shaping up to be another success. In addition to serving as a platform to share information, data and promising practices, the Improving Lives Conference can support meaningful connection and “cross-pollination” between partners. This event will require continued Trust funding in the FY26 and FY27 budgets to take place.		

FY26 Budget Line Detail: Non-Focus Area Allocations

Budget Line: Page 3, Line 43	Project Name: Programmatic Administration	Grantee Name: N/A
Proposed FY26 Amount: \$150.0 AG	Project Category: various	
Comp Plan Relevance: n/a		
<p>Description: The Programmatic Administration bucket is utilized for small procurement that associated with the cost of administering the focus areas. This budget line will fund items including, but not limited to, meeting convening costs, rental fees, audiovisual equipment, printing of meeting materials, catering, focus area-related travel, and occasionally small contracts.</p>		
<p>Analysis: Program staff need a mechanism to pay for costs associated with program officer execution of focus area and non-focus area work. In prior year budgets (including FY25), each focus area had a separate administration budget line of \$50.0. The change in FY26 is to consolidate the budget into one bucket and reduce the budget line to \$150.0 for all focus areas.</p>		

FY26 Budget Line Detail: Mental Health & Addiction Intervention Focus Area

Budget Page 4 Line 8	Project Name: Behavioral Health & Physical Health Care Integration	Grantee Name: DOH/DBH
Proposed FY26 Amount: \$75.0, MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 2, Healthcare; Objective 1: Alaskans have access to and receive quality healthcare services.		
<p>Description: The grant will support the operations and staffing support for the Department of Health, Division of Behavioral Health for the Behavioral Health (BH) and Physical Health (PH) Care Integration position. The main roles include being the subject matter expert regarding primary and behavioral health care integration for the State of Alaska. This position collaborates with the Single State Authority (SSA)/Medicaid entity and agencies on the state and federal level to identify barriers, challenges, and opportunities for billing behavioral health services within primary care settings; and contribute toward the efforts to integrate primary care with behavioral health across the continuum of care in Alaska and work with stakeholders to identify training needs for the workforce for integrating primary care and behavioral. The position collaborates with statewide partners and other stakeholders on data analysis to identify needs and develop strategies for implementation and evaluation to address the needs in the system of care related to the integration of primary care and behavioral health.</p>		
<p>Analysis: Trust funding will provide the Department of Health, Division of Behavioral Health with funding to secure the existing position of the Behavioral Health (BH) and Physical Health (PH) Care Integration. The role is critical in increasing access to care for Trust beneficiaries and providing system-wide changes and advocacy for state and federal improvements to the healthcare and behavioral healthcare systems of care. The BH and PH Care Integration work would foster collaboration between systems of care with diverse providers, identify gaps and challenges in the care continuum, and provide workforce development and training to increase cross-disciplinary competencies for services to Trust beneficiaries. DOH/DBH have pursued broader federal funding sources to support this work, and Trust funding would be a bridge to broader, sustainable funding in FY 26 and potentially sunseting financial support in FY 27.</p>		

Budget Line: pg. 4, line 9	Project Name: Treatment Access and Recovery Supports	Grantee(s): To be determined
Proposed FY26 Amount: \$1,000.0 AG	Project Category: various	
Comp Plan Relevance: Goal 4, Prevention and Treatment and Alcohol Misuse; Objective 3: Improve treatment and recovery support services to reduce the impact of mental health and substance use disorders.		
<p>Description: This strategy supports agencies providing direct services and increasing prevention and treatment program capacity for Trust beneficiaries experiencing mental illness and substance use disorders. This strategy supports the deployment of grant funding for collaboratively developed projects that improve or expand access to services and supports. Funding can be used for staffing support while onboarding new programs, operations support, expanding services, workforce development, capital costs, early intervention programs, and more.</p>		
<p>Projects funded in FY24:</p> <ul style="list-style-type: none"> • Salvation Army (SA), \$200.0: Increase transitional housing for women exiting residential substance use disorder treatment. • Family Centered Services Alaska, \$200.0: Increase youth psychiatric residential beds from 12 to 24 in Fairbanks. • Covenant House Alaska, \$98.0: Clinical assessment and treatment for youth experiencing suicidal ideation and substance misuse. • AK Child and Family, \$50.0: In-home family stabilization and early intervention for at-risk youth. • High Utilizer Mat-Su, \$50.0: Operational support for Community Health Workers managing high-utilizing Trust beneficiaries frequently in the ER. 		

FY26 Budget Line Detail: Mental Health & Addiction Intervention Focus Area

<ul style="list-style-type: none"> iExist, \$50.0: Medically assisted treatment for opioid use disorder and recovery on the Kenai Peninsula. AK Behavioral Health Association, \$100.0: Operational expansion to support member agencies with workforce recruitment and policy-level support.
<p>Analysis: Treatment access funding remains needed for agencies to expand services and ensure Trust beneficiaries needing behavioral health care receive timely intervention. This strategy supports increasing access to care and is focused on expanding capacity in the community as close to home as possible. Projects funded in FY24 were developed in partnership with organizations and will improve access by expanding transitional housing for 32 women (annually) completing residential addiction treatment, expand opioid treatment options on the Kenai Peninsula, enhance community-based case management for individuals that are high utilizers of ER services, improve mental health intervention for at-risk youth and families and strengthen the workforce of community behavioral health organizations. This strategy enables program officers to collaborate with organizations to strengthen the overall behavioral health system for Trust beneficiaries and to ensure services are accessible in the least restrictive settings possible. Building out step-down and preventative services can link individuals to earlier and timely interventions, which can help to prevent the need for more intensive crisis services. This also ensures there are accessible community-based services for those stepping down from higher levels of care, including API and crisis stabilization centers. This strategy has a demonstrated history of providing positive outcomes to increasing treatment and recovery services to improve Trust beneficiaries' lives. Staff will continue to monitor this strategy and work with Departments and advocacy to identify alternative sustainable funding sources.</p>

Budget Line: Page 4, Line 12	Project Name: Crisis Continuum of Care	Grantee(s): To be determined
Proposed FY26 Amount: \$4,000.0, AG	Project Category: various	
Comp Plan Relevance: Goal 5, Suicide Prevention; Objective 2: Support and improve the system to assist individuals in crisis		
<p>Description: This strategy supports agencies exploring and/or implementing enhanced crisis intervention services, including mobile crisis teams, Emergency Medical Services (EMS) and behavioral health mobile integrated teams, crisis stabilization centers, and linkages to community-based services that promote stability in the community. This strategy enables Trust staff to work with local Crisis Now Coordinators and community members to improve local response to individuals experiencing a mental health emergency by providing grant resources for the implementation of the core components of the Crisis Now model.</p>		
<p>Projects funded in FY24:</p> <ul style="list-style-type: none"> - Bartlett Regional Hospital, \$476.2: Aurora Crisis Services, the commencement of operations assistance for the crisis stabilization in Juneau. - Alaska Behavioral Health, \$750.0: Fairbanks Mobile Crisis Team. - True North Recovery, \$750.0: Mat-Su Mobile Crisis Team. - Mat-Su Health Foundation, \$100.0: Crisis Now Implementation Coordinator for Mat-Su. - Central Peninsula Hospital, \$75.0: Planning and implementation for Crisis Now on the Kenai peninsula. 		
<p>Analysis: Crisis Now Continuum of Care funding assists communities in the planning, launching, and implementation of improved local response to mental health emergencies. Trust staff, in collaboration with local Crisis Now Coordinators, Trust consultants, and identified community agencies, conceptualize, and develop projects that implement the components of the Crisis Now Model, including crisis call center, mobile response and stabilization. Outcomes of supporting Trust beneficiaries with the Crisis Continuum of Care funds have been demonstrated through the work of the mobile crisis teams in Fairbanks and Mat-Su, where greater than 85% of Trust beneficiaries experiencing a mental health emergency have been stabilized in their community, in the least restrictive setting and have been connected with long term, outpatient behavioral health supports. True North Recovery's (TNR) mobile crisis teams in the Mat-Su Valley are serving a</p>		

FY26 Budget Line Detail: Mental Health & Addiction Intervention Focus Area

larger geographical area with an average response time of 24 minutes, which exceeds the national response time target of 30 minutes. In the last quarter out of a total of 142 MCT dispatches, the Wasilla Police Department has the highest number of MCT assist requests, indicating the MCT is a valuable resource to law enforcement. The current funding landscape for Crisis Now services includes the Medicaid 1115 waiver for 23-hour stabilization chairs, 24-hour recovery beds, and to a lesser degree mobile response. Some agencies are beginning to make some headway in billing private insurance as well for the 23-24-hour crisis care. Agencies offering crisis stabilization care can receive between 50-70% of their costs through Medicaid, whereas the mobile teams can receive 20% of their true cost reimbursed through Medicaid. The Department of Health realizes this issue and is addressing it by analyzing and reviewing various ways to overcome this barrier. There is additional funding from agencies delivering the services, philanthropic funders, as well as general fund dollars from the State of Alaska. Sustainable services will require the implementation of multiple funding strategies and will take several years to achieve stability.

Budget Line: Page 4, Line 13	Project Name: Crisis Now Initiative Project Management Contract	Grantee Name: These funds will be awarded through the State of Alaska procurement process
Proposed FY26 Amount: \$350.0 AG	Project Category: Contract	
Comp Plan Relevance: Goal 5, Suicide Prevention; Objective 2: Support and improve the system to assist individuals in crisis.		
Description: A competitive RFP was issued for a contract to support the statewide Crisis Now Initiative contract for project management, which at this time is Agnew Beck. The key goals and objectives of Crisis Now Initiative project management are to ensure the planning, coordination, facilitation, and execution of a strategic work plan to implement recommendations identified through the Alaska Crisis Now Consultation Report to ensure Alaska has the necessary conditions to support the operation of Crisis Now programs. This includes coordination with the Trust to execute work plans with key partners, including State of Alaska departments and divisions, members of the legislature, and tribal and local community partners. This contract also supports community planning for implementing Crisis Now services in Anchorage, Mat-Su, Juneau and Fairbanks, and other identified communities.		
Analysis: The Crisis Now Initiative Project Management Contract ensures statewide collaboration and implementation in the Crisis Now Model. In FY24, Agnew Beck supported six agencies with business modeling, planning, site visits, staffing implementation plans, licensing and regulatory needs, legal concerns, and policy support at the local and state levels. Having a statewide Crisis Now Model implemented ensures Trust beneficiaries experiencing a mental health crisis have timely access to services and support in the community of their choice in the least restrictive settings possible. Funding is expected to continue as long as the contract is needed by the Trust and partners. Funding requested in FY26, and FY27 remains the same.		

Budget Line: Line 4, Line 14	Project Name: Fairbanks Crisis Now Coordinator	Grantee Name: City of Fairbanks
Proposed FY26 Amount: \$138.0 AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 5, Suicide Prevention; Objective 2: Support and improve the system to assist individuals in crisis.		
Description: The grant supports the Crisis Now Community Coordinator as part of the Trust’s overall Crisis Now Initiative implementation strategy. The Crisis Now Community Coordinator supports the project management for each component of the Crisis Now model in the community of Fairbanks and is housed under the City of Fairbanks Mayor’s office. The coordinator serves as the liaison between the local Community Implementation Team, the Trust, and consultants working on the development of the Crisis Now Initiative. The coordinator is well versed in the Crisis Now model, crisis services, and efforts in Alaska to adopt the model to fit the unique aspects of Fairbanks, working to optimize existing services to better respond to individuals in a mental health emergency, as well as to engage, recruit and facilitate local organizations in standing up crisis stabilization services. The coordinator identifies and manages local key stakeholder		

FY26 Budget Line Detail: Mental Health & Addiction Intervention Focus Area

<p>engagement; provides project management oversight and reporting to the Trust on the local implementation plan; hosts monthly Community Implementation Team meetings; collaborates on community efforts with statewide and system-level efforts; collects and reports data; and promotes Crisis Now in the community.</p>
<p>Analysis: Trust funding to support a Crisis Now Coordinator is integral in implementing the Crisis Now model in the community of Fairbanks and at the statewide level. The Fairbanks Crisis Now Coordinator has demonstrated success in various ways via key community-wide collaborations, fostering agreements between agencies that have not existed prior, successfully convening agencies involved in the various components of the Crisis Now continuum of care as well as legislative advocacy for capital funding for a crisis stabilization center. These successes have translated to improvements in the systems of care serving Trust beneficiaries experiencing a crisis, including the Emergency Medical Services (EMS), police and fire departments, the Fairbanks Memorial Hospital, and local providers of behavioral health and community-based services. The Fairbanks Coordinator worked successfully to establish a strong collaboration between 911 dispatch, the crisis call center, and the mobile crisis team. These partners regularly convene to review data and ensure the services are well coordinated. The emergency services dispatch is successfully triaging calls with the crisis line and dispatch of the MCT. Funding requested in FY26 remains the same because the project management of the local initiative is critical in furthering the implementation of the full continuum. This strategy has a demonstrated history of providing positive outcomes to improve Trust beneficiaries' lives.</p>

Budget Line: Page 4, Line 15	Project Name: Ketchikan Crisis Now Coordinator	Grantee Name: Ketchikan Wellness Coalition
Proposed FY26 Amount: \$124.5 AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 5, Suicide Prevention; Objective 2: Support and improve the system to assist individuals in crisis.		
<p>Description: The grant supports the Crisis Now Community Coordinator as part of the Trust's overall Crisis Now Initiative in the community of Ketchikan and is housed with the Ketchikan Wellness Coalition. The coordinator serves as the liaison between the local Community Implementation Team, the Trust, and consultants throughout the development of the Crisis Now Initiative. The coordinator is well versed in the Crisis Now model, crisis services and efforts in Alaska to adopt the model to fit the unique needs of Ketchikan, working to optimize existing services to better respond to individuals in a mental health emergency, as well as to engage, recruit and facilitate local organizations in standing up local response. The coordinator identifies and manages local key stakeholder engagement; provides project management oversight and reporting to the Trust on the local implementation plan; hosts monthly Community Implementation Team meetings; collaborates on community efforts with statewide and system-level efforts; collects and reports data; and promotes Crisis Now in the community.</p>		
<p>Analysis: Trust funding to support a Crisis Now Coordinator is integral in implementing the Crisis Now model initiative in the community of Ketchikan and at the statewide level. The Ketchikan Crisis Now Coordinator has demonstrated success in various ways via key community-wide collaborations, fostering agreements between agencies that have not existed prior, and successfully convening agencies involved in the various components of the Crisis Now continuum. These successes have translated to improvements in the systems of care serving Trust beneficiaries experiencing a crisis, including the Emergency Medical Services (EMS), police and fire departments, and local providers of behavioral health and community-based services. Recently Ketchikan Fire Department launched a mobile response integrated health team, which is responding to emergencies in the community. The Crisis Now Coordinator was responsible for pulling together the 650,000 dollars of funding for the MIH team, which has fully funded the first year of operation. Funding requested in FY26 remains the same because the project management of the local initiative is critical in furthering the implementation of the full continuum. This strategy has a demonstrated history of providing positive outcomes to improve Trust beneficiaries' lives. Staff will continue to monitor this strategy and work with the grantee.</p>		

FY26 Budget Line Detail: Mental Health & Addiction Intervention Focus Area

Budget Line: Page 4, Line 16	Project Name: Crisis Call Center	Grantee Name: DOH/DBH
Proposed FY26 Amount: \$750.0 MHTAAR, \$750.0 GF/MH recommendation	Project Category: Direct Service	
Comp Plan Relevance: Goal 5, Suicide Prevention; Objective 1: Coordinate prevention efforts to ensure Alaskans have access to a comprehensive suicide prevention system; Objective 2: Support and improve the system to assist individuals in crisis.		
Description: The increment allocated through the Department of Health (DOH), Division of Behavioral Health (DBH) will support agencies exploring and/or initial implementation of crisis call centers to provide direct intervention and a warm, talk line and services and/or increasing referrals to treatment and recovery supports for Trust beneficiaries experiencing severe mental illness, substance use disorders, and/or at-risk youth. Funding can be used for staffing support while onboarding new programs, operations support, expanding services, workforce development, early intervention programs, and more.		
Analysis: Crisis Call Center funding will increase the accessibility of funding through the Department of Health, Division of Behavioral Health to support Alaska’s statewide crisis call center. The crisis call center receives in-state crisis calls, text messages, and online chats, and beginning July 16th, 2022, it began receiving 9-8-8 calls from Alaskans. The crisis call center provides support to Alaskans who need “someone to talk to,” are in emotional distress or a suicidal crisis, in need of crisis intervention, and connect people to additional services when needed. The crisis call center is free for every Alaskan and operates 24 hours per day, 7 days per week, 365 days per year. The call center has focused efforts to engage youth, increasing utilization for 10-24-year-olds by 31% from March 2023 to March 2024. In FY23, staff answered over 24,000 calls, averaging approximately 67 calls per day. During the last six months, the call center, Careline, has seen that per day call rate increase to 120. A crisis call center is one of three major components needed to develop a coordinated crisis continuum of care. They provide immediate support, triage calls, and connect people to additional services and support when needed. The cost of providing call center services has increased due to increases in call volume, additional programming, the implementation of 9-8-8, text messaging, and online chat functions, requiring additional staff, training, supplies, and equipment. American Rescue Plan Act funds have supported the increases in cost and services and expire in September 2025. Federal grants and GF/MH support the remaining costs. Additional funding would enable the crisis call center to maintain its current level of services and staffing. Alternative federal funding is being explored for long-term sustainable options. The project is projected to transition to a GF/MH recommendation, which will require advocacy to ensure the long-term sustainability of statewide implementation.		

FY26 Budget Line Detail: Mental Health & Addiction Intervention Focus Area

Budget Line: Page 4, Line 17	Project Name: Zero Suicide Initiative	Grantee Name: DOH/DBH
Proposed FY26 Amount: \$62.5 MHTAAR	Project Category: Capacity Building	
<p>Comp Plan Relevance: Goal 5, Suicide Prevention; Objective 1: Coordinate prevention efforts to ensure Alaskans have access to a comprehensive suicide prevention system; Objective 2: Support and improve the system to assist individuals in crisis.</p>		
<p>Description: The grant supports the operations of the Zero Suicide Program Coordinator (ZSPC) reports to implement the Zero Suicide Framework statewide and is instrumental in coordinating partnerships and collaborations to ensure implementation of the Zero Suicide Framework and best practices statewide. The ZSPC is responsible for community development, readiness, support, technical assistance to existing programs and/or grantees, and working with communities looking to improve their suicide continuum of care.</p>		
<p>Analysis: The Zero Suicide Initiative project provides financial support for basic operations to the Department of Health, Division of Behavioral Health to host the Zero Suicide Prevention Coordinator (ZSPC) to partner with the Trust and stakeholders to apply the Zero Suicide best practices framework to statewide healthcare systems. Alaska's suicide death rate in 2022 was 27.6 per 100,000 people, ranking Alaska as the second highest nationally and nearly twice the rate nationally (14.1 per 100,000), with Alaska Native and American Indians and individuals ages 10-24 at the highest rates and risk. Addressing deaths and attempts of suicide is complex and requires multifaceted strategies, especially in a geographically and culturally diverse state like Alaska. One evidenced-based, multi-year strategy is implementation of the Zero Suicide framework. The Zero Suicide (ZS) Initiative is an evidence-based best practice framework that helps providers standardize their assessment and treatment for beneficiaries at risk of suicide. The Alaska Department of Health, Division of Behavioral Health (DBH), has partnered with the Trust to co-fund this position within DBH. This position is also critical as it is one of the best practices that support the Crisis Now model of stabilization at the community level. The Zero Suicide framework's core elements are leading a systemwide culture change committed to reducing suicides, training a competent, confident, and caring workforce, identifying individuals with suicide risk via comprehensive screening and assessment, engaging all individuals at risk of suicide using a suicide care management plan, treating suicidal thoughts and behaviors directly using evidence-based treatments, transitioning individuals through care with warm hand-offs and supportive contacts, and improving policies and procedures through continuous quality improvement. The ZSPC was able to perform an environmental scan of Alaska's 13 major healthcare systems, in each Public Health region, to develop a broader strategy of "Building a System of Comprehensive Suicide Care for Alaska". The environment scan included asking each hospital system about current suicide care practices related to the Zero Suicide framework. Key metrics from the environmental scan demonstrate Alaska's healthcare systems have opportunities for implementing and strengthening safer suicide care practices and for improving the lives of Trust beneficiaries:</p> <ul style="list-style-type: none"> • 75% of hospitals indicated that leadership was committed to improving suicide care practices. • 38% of hospitals reported building new mental health/suicide-related programming. • 77% reported that staff has received some training in suicide. • 77% reported universally screening for suicide risk. • 85% reported using the Columbia Suicide Severity Rating Scale (C-SSRS). <p>The Zero Suicide Initiative project is in year three of Trust investment, and broader system changes may be seen with continued support. The Zero Suicide framework and core elements have the potential to transform and develop a safer and more effective system of suicide care in Alaska for Trust beneficiaries and in collaboration with the Crisis Now continuum of care systems. Due to challenges in FY 23 and FY 24 and the nature of the stage of this project (planning and initial implementation), broader system changes and impacts are likely not to be seen until later stages. It is recommended for continued funding through FY27.</p>		

FY26 Budget Line Detail: Mental Health & Addiction Intervention Focus Area

Budget Line: Page 4, Line 18	Project Name: Statewide Designation, Evaluation, Stabilization & Treatment Coordinator	Grantee Name: DFCS - Department Support Services
Proposed FY26 Amount: \$87.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 5, Suicide Prevention; Objective 1: Coordinate prevention efforts to ensure Alaskans have access to a comprehensive suicide prevention system; Objective 2: Support and improve the system to assist individuals in crisis.		
Description: The grant supports the operations of the Statewide Designation, Evaluation, Stabilization and Treatment (DES/DET) Coordinator, which is housed in the Commissioner’s office. The DES/DET Coordinator position streamlines the coordination and review process of all Title 47 ex parte orders for individual’s proceeding through the civil mental health and involuntary commitment process, currently performed by the Department of Law paralegals in each judicial district across the state. The DES/DET Coordinator facilitates a single point of contact for the department and statewide partners. Through this Statewide DES/DET Coordinator, the department intends to improve patient care and reduce administrative burdens on emergency departments, DOC, and DET facilities, including API, as well as the Department of Law. Through this coordinated, patient-centered approach, Trust beneficiaries will be better served.		
Analysis: The Department of Family and Community Services (DFCS), Commissioner’s Office (CO), Statewide Designation, Evaluation, Stabilization and Treatment (DES-DET) Coordinator provides support to DFCS to improve patient care and reduce administrative burdens of healthcare providers, Department of Corrections (DOC), and DES-DET facilities. The DET-DES Coordinator has worked to increase knowledge and understanding of needs statewide over the past year. The coordinator continues to focus on gathering more detailed information about the cause of any delays in the evaluation and transfer of individuals on Title 47 holds and evaluating how the Coordinator can collaborate with hospitals, transportation services, and local providers and utilize that information to develop processes that improve coordination. In FY 23, DFCS was able to recruit additional staff to support the efforts of the DES-DET Coordinator, including a “backup” Health Program Manager and a Complex Care Coordinator to support the coordination of care for individuals with Title 47’s and placements for appropriate levels of care. In FY 23, the DES-DET Coordinator tracked an estimated 1,851 individuals between systems of care including API, DET facilities, and other providers, to coordinate and facilitate access to care. The DES-DET Coordinator was a key partner in the HB172 legislative report process and final review of patient rights and advocacy recommendations. The coordinator has actively been engaging additional regions in an effort to set up new Designated Evaluation Stabilization programs, focusing specifically on the Northern Region. Facility visits and training for hospitals occurred in Ketchikan, Sitka, Juneau, Bethel, Kotzebue, Anchorage, and Mat-Su. Training has been prioritized for correctional officers and law enforcement in Ketchikan, Bethel, Palmer, Eagle River and Anchorage. The Title 47 information page was launched on the DFCS website where facilities can obtain information on Title 47’s and request training.		
The DES-DET Coordinator project is in year six of Trust investment, and broader system changes may be seen with continued support. The DES-DET Coordinator has a critical role and ensures Trust beneficiaries have timely access to medical intervention for psychiatric conditions placing them in danger to self and others. The approaches and practicality of having a statewide DES-DET Coordinator has the potential to transform and develop a safer and more effective system of coordinating care in Alaska for Trust beneficiaries in collaboration with the Crisis Now continuum of care systems. This position is focused on addressing the extended wait for access to services for individuals served through the civil commitment statutes. It is recommended for continued funding. This project has demonstrated a history of providing positive outcomes. Staff will continue to monitor this project and work with the Department to identify alternative sustainable funding sources beyond FY27.		

FY26 Budget Line Detail: Mental Health & Addiction Intervention Focus Area

Budget Line: Page 4, Line 19	Project Name: Complex Care Program	Grantee Name: DFCS/Department Support Services
Proposed FY26 Amount: \$400.0 MHTAAR	Project Category: Capacity Building	
<p>Comp Plan Relevance: Goal 4, Prevention and Treatment and Alcohol Misuse; Objective 3: Improve treatment and recovery support services to reduce the impact of mental health and substance use disorders. Goal 5, Suicide Prevention; Objective 1: Coordinate prevention efforts to ensure Alaskans have access to a comprehensive suicide prevention system; Objective 2: Support and improve the system to assist individuals in crisis.</p>		
<p>Description: The grant supports the operations of the Complex Care Programming, which is housed in the Department of Family and Community Services (DFCS). The work on complex care streamlines the coordination and review process for youth and adults with complex behavioral and medical conditions. These efforts support various workgroups on admissions, discharge planning, assessments, and treatment plan coordination and work towards identifying gaps and improving systems for individuals with complex needs. The department intends to improve patient care and reduce administrative burdens on care systems. This will be a significant change in practice, and through this coordinated, patient-centered approach, Trust beneficiaries will be better served.</p>		
<p>Analysis: Trust funding provides support for the DFCS complex care work in coordination with the Complex Care Unit with the goal of better serving Trust beneficiaries in higher levels of institutional care and ultimately allowing beneficiaries to transition to lower levels of community-based care in the least restrictive settings, in the communities of their choice. The focus is enhancing coordination, collaboration, and support for individuals with complex needs within the DFCS system.</p> <p>Past and current funding supports weekly Case Response Team (CRT) meetings, monthly Complex Care Committee (CCC) meetings, the development of a pilot program for transitioning children out of institutions and to community-based settings, policy review and proposal, and consultation and coordination assistance. The Complex Care Unit aims to improve outcomes and promote the development of a comprehensive continuum of care for behavioral health and complex, high-needs individuals. The CRT has analyzed the systems within Alaska that serve individuals with complex needs and identified the current systematic gaps. This has been achieved by creating a data-tracking system for complex cases. Additionally, the CRT is part of a larger workgroup between the DFCS and the Department of Health (DOH). This allows both departments to work cohesively to improve systems, support the facilitation of more resources for beneficiaries, and enhance communication between divisions and the two departments.</p> <p>In FY2024, A DFCS Needs Assessment identified critical gaps in the continuum and laid the groundwork for targeted interventions. In April 2024, a project was launched to enhance the Complex Care Unit's (CCU) capacity to effectively monitor and address complex cases using a robust data tracking system. The CCU aims to utilize Artificial Intelligence (AI) for early intervention and service coordination by monitoring and screening high utilizers. Collaboration remained central, with biweekly meetings facilitating coordination between divisions and enabling better support for cross-divisional cases. Participation in a larger workgroup spanning DFCS and DOH further strengthened collaboration on both individual and systemic levels, fostering cohesive efforts to enhance services. Increased funding for this work is recommended through FY27. This project has a history of providing positive outcomes. Staff will continue to monitor it and support this work in the future.</p>		

FY26 Budget Line Detail: Mental Health & Addiction Intervention Focus Area

Budget Line: Page 4, Line 20	Project Name: Adult Protective Services	Grantee Name: DOH - SDS
Proposed FY26 Amount: \$75.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 6: Protecting vulnerable Alaskans; Objective 4: Increase timely access to protective services statewide.		
Description: The grant supports the operations of Adult Protective Services to maintain investigation capacity. The APS position will assist with institutional discharge planning from hospitals and the Department of Corrections including petitions for guardianship and/or conservatorship.		
<p>Analysis:</p> <p>The Adult Protective Services (APS) position is funded with Medicaid administrative claiming and Alaska Mental Health Trust funds. This position pilots an APS position dedicated to working with people discharged from hospitals and institutions who are identified as needing the decision-making support of a conservator or guardian. This position is expected to serve beneficiaries directly and impact the system of care.</p> <p>In FY23, 183 beneficiaries were assisted, and 100 people were trained. Despite hospitals, the Alaska Psychiatric Institute, and the Department of Corrections serving people who cannot keep themselves safe, these institutions tend to underreport abuse, neglect, self-neglect, and exploitation to APS. The mandated reporter education training is expected to continue as an important method of outreach to the organizations and improve services to vulnerable Alaskans.</p> <p>APS continued to investigate reports of harm filed through Central Intake that met APS criteria from DOC/hospital/API admissions or discharge and other DES/DET facilities, petition for guardianship/conservator as needed for vulnerable clients who cannot make decisions for themselves, and Request records from medical facilities, DOC, and API to file court actions.</p>		

FY26 Budget Line Detail: Disability Justice Focus Area

Budget Line: Page 5, Line 8	Project Name: Alaska Justice Information Center	Grantee Name: UAA/Anchorage Campus
Proposed FY26 Amount: \$225.0 MHTAAR	Project Category: Data/Planning	
Comp Plan Relevance: Goal 9 Workforce, Data, and Funding, Objective 9.5: Encourage a culture of data-driven decision-making that includes data sharing, data analysis, and management to link support services across Alaska DOH/DFCS divisions and other departments.		
Description: Alaska Justice Information Center (AJiC) is Alaska’s resource for compiling, analyzing, and reporting criminal justice data to policymakers and practitioners to improve public safety and health, increase criminal justice system accountability, and reduce recidivism. This project is a partnership between the Trust, the University of Alaska, and the Anchorage College of Health Justice Center.		
Analysis: AJiC’s assessment of current and future disability justice strategies gives the Trust and the State of Alaska a greater understanding of the criminal justice system and its impacts on Trust beneficiaries. It allows for data-driven adjustments to strategies over time. AJiC continues to develop and maintain the Alaska Department of Corrections Daily Populations interactive data dashboard, recently finished the Alaska Victimization Survey 2010-2020 Canonical Data File, and met with the Anchorage Fire Department several times to discuss the analysis of the department Mobile Crisis Team efforts. AJiC’s Dr. Rei Shimizu and Dr. Myrstol applied for a research grant from the National Institute of Justice to comprehensively study Alaska’s mobile crisis response teams in the spring of 2024. If awarded, the work will begin in earnest in the Fall of 2024. This project has a demonstrated history of providing positive outcomes. Though efforts to secure alternative funding are ongoing, the Alaska Mental Health Trust Authority is currently the primary funding source for this established project. The Trust will continue to assess the impact of its investment in this project; and that assessment will inform future funding recommendations.		

Budget Line: Page 5, Line 9	Project Name: Trust Beneficiaries in Alaska Department of Corrections Study	Grantee Name: DOC/HARS
Proposed FY26 Amount: \$400.0 MHTAAR	Project Category: Data/Planning	
Comp Plan Relevance: Goal 8, Services in Institutional Settings, Objective 8.3: Enhance and expand access to clinical and case management resources for Alaskans who are incarcerated.		
Description: Funds would support a one-time request to conduct an updated report on Trust beneficiaries in the Department of Corrections (DOC). This report will inform funding, policy, and advocacy efforts to reduce recidivism and improve beneficiary outcomes. This program is through the DOC Health and Rehabilitative Services (HARS) division.		
Analysis: The last study conducted to determine Trust beneficiaries in Alaska DOC was in 2014. The previous study focused on beneficiaries in terms of recidivism. Funding for an updated study would expand the focus on a systems assessment of beneficiaries within the DOC system. Trust beneficiary prevalence, demand, and utilization flow through the system would be seen through the lens of the sequential intercept model. A special emphasis on beneficiaries with intellectual/developmental disabilities, brain-based disorders (Dementia, traumatic acquired brain injury, etc.), and suicide, and recommendations for these populations would be included. This is a one-time request.		

FY26 Budget Line Detail: Disability Justice Focus Area

Budget Line: Page 5, Line 12	Project Name: Public Guardian Position	Grantee Name: DOA/OPA/Public Guardian
Proposed FY26 Amount: \$138.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 6, Protecting Vulnerable Alaskans, Objective 6.5 Ensure vulnerable Alaskans understand their rights and responsibilities		
Description: Funds support a public guardian position in the Office of Public Advocacy (OPA) within the Department of Administration (DOA). The position supports OPA's strategic plan to reduce current public guardian caseloads from approximately 100 cases to 40 cases per public guardian. Public guardians serve adult Trust beneficiaries found incapacitated by the Superior court.		
Analysis: The position is in Anchorage and serves western and northwestern Alaska regions, including Bethel, Dillingham, and Utqiagvik. During FY23, the position served 101 Trust beneficiaries: 53 with mental illness, 10 with Alzheimer's/dementia, 4 with traumatic brain injury, 34 with intellectual and developmental disabilities, and 0 with only substance use. The position requires expertise in the culture, resources, and beneficiary needs. The plan is to continue to request funding for this position to support Trust beneficiaries in these geographic areas to meet their cultural and mental health needs. FY24 data is not available yet, but the numbers have been relatively consistent from year to year. The position has a caseload of 87 clients. This project previously was funded for 91.5 but DOA/OPA asked to adjust to 138.0 as there is more travel associated with this position and the funding would be more appropriate. This project has a demonstrated history of providing positive outcomes. The Trust will continue to continue to assess the impact of its investment in this project and work with OPA to identify alternative sustainable funding sources beyond FY27.		

Budget Line: Page 5, Line 13	Project Name: Public Guardian - OCS Transition	Grantee Name: DOA/OPA/Public Guardian
Proposed FY26 Amount: \$91.5 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 6, Protecting Vulnerable Alaskans, Objective 6.5 Ensure vulnerable Alaskans understand their rights and responsibilities		
Description: Trust funds are supporting a new public guardian position in Anchorage, serving beneficiaries statewide. The position will work directly with Trust beneficiaries who have aged out of the child welfare system and require a public guardian.		
Analysis: Despite receiving funding for this position on July 1, 2023, the position was not created until after January 1, 2024, due to administrative understaffing at OPA. An individual with a background in juvenile behavioral strategy was hired into this position and started in January 2024. The individual is currently being trained in the foundational public guardian duties. In the last two months of FY 24, the hire has been able to focus on and meet with the younger (18-26) clients on OPA's caseloads to help assess the clients who will be moved to their caseload. This project previously was funded for 138.0 but DOA/OPA asked to adjust to 91.5 as this funding would be more appropriate to the duties of the position. As this position was recently hired, it is expected that funding will need to continue for about 3-5 years to support this project to successfully launch and operate.		

FY26 Budget Line Detail: Disability Justice Focus Area

Budget Line: Page 5, Line 14	Project Name: Crisis Intervention Team/Behavioral Health Training and Programs for First Responders - Anchorage Police Department	Grantee Name: Anchorage Police Department
Proposed FY26 Amount: \$50.0 AG	Project Category: Workforce Development/Training	
Comp Plan Relevance: Goal 9 Workforce, Data, & Funding, Objective 9.1 Strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization		
Description: Funding supports Crisis Intervention Team (CIT) Training for the Anchorage Police Department. CIT reduces arrests of people with mental illness while simultaneously increasing the likelihood that individuals will receive mental health services.		
Analysis: A key strategy of the disability justice focus area is training law enforcement personnel on disorders experienced by Trust beneficiaries. A Crisis Intervention Team (CIT) program is an innovative, community-based approach to improving the outcomes of these encounters with law enforcement. APD completed the CIT training in March and is currently gathering all the reporting information and overtime documents. Heather Phelps and Eric Boyer presented at the March CIT Academy about the Trust and Crisis Now Services as it relates to law enforcement. About 32 people attended from corrections, dispatch, police departments throughout the state, and mental health clinicians who work on CIT Teams. CIT training is important to support the crisis continuum or care. The Trust will continue to assess the impact of its investment in this project and work with APD to identify alternative sustainable funding sources beyond FY27.		

Budget Line: Page 5, Line 15	Project Name: Crisis Intervention Team/Behavioral Health Training and Programs for First Responders - AK State Troopers	Grantee Name: DPS - AK State Troopers
Proposed FY26 Amount: \$50.0 MHTAAR, \$50.0 GF/MH recommendation	Project Category: Workforce Development/Training	
Comp Plan Relevance: Goal 9 Workforce, Data, & Funding, Objective 9.1 Strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization		
Description: Funding supports Crisis Intervention Team Training, behavioral health training, and wellness programs for Alaska State Troopers within the Department of Public Safety (DPS). CIT reduces arrests of people with mental illness while simultaneously increasing the likelihood that individuals will receive mental health services.		
Analysis: Last year, Trust funds helped Troopers attend the CIT academy in Wasilla and the International CIT Conference. Trust funds also primarily paid for the Department of Public Safety (DPS) employee wellness app (Cordico application), which is utilized numerous times per day and has been used/accessed over an average of 100 times per month to put employees in touch with peer support and mental health. DPS also used the funds to pay for the travel for Troopers to attend mental health and wellness training. The Department of Public Safety currently has 53 CIT-trained troopers and 19 Troopers trained as peer support members. State departments have historically been challenged with having funds available for staff training. CIT training is important to support the crisis continuum of care. The Trust will continue to assess the impact of its investment in this project and work with DPS to identify alternative sustainable funding sources beyond FY27.		

FY26 Budget Line Detail: Disability Justice Focus Area

Budget Line: Page 5, Line 16	Project Name: Crisis Intervention Team/Behavioral Health Training and Programs for First Responders - AK Police Standards Council	Grantee Name: DPS- AK Police Standards Council
Proposed FY26 Amount: \$80.0 MHTAAR	Project Category: Workforce Development/Training	
Comp Plan Relevance: Goal 9 Workforce, Data, & Funding, Objective 9.1 Strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization		
Description: Funding supports Crisis Intervention Team Training, behavioral health training, and wellness programming for law enforcement. CIT reduces arrests of people with mental illness while simultaneously increasing the likelihood that individuals will receive mental health services.		
Analysis: An essential primary focus of this initiative remains the buildup of available training infrastructure, notably qualified CIT academy coordinators and trainers, to increase subsequent officers' access to this curriculum. Funds have been provided for Law enforcement to attend the CIT International Conference, the CIT Train the Trainer, the CIT Coordinator Course, and the CIT Crisis Call Emergency Call Course. Funds also support the Cordico application, which enhances access to behavioral health services for Alaska's law enforcement personnel, and the purchase of a Stronger Families curriculum to provide training to approximately 2,100 DOC staff. Alaska Police Standards Council (APSC) continually coordinates with industry stakeholders and subject matter experts to review additional opportunities to support beneficiary services through enhanced public safety training. Moving forward, APSC will continue to seek collaborative opportunities with industry partners and community members to continually assess present needs. State departments have historically been challenged with having funds available for staff training. CIT training is important to support the crisis continuum of care. The Trust will continue to assess the impact of its investment in this project and work with DPS to identify alternative sustainable funding sources beyond FY27.		

Budget Line: Page 5, Line 17	Project Name: Training for DOC mental health staff	Grantee Name: DOC/Inmate Health/Behavioral Health Care
Proposed FY26 Amount: \$50.0 MHTAAR	Project Category: Workforce Development/Training	
Comp Plan Relevance: Goal 8 Services in Institutional Settings, Objective 8.3 Enhance and expand access to clinical and case management resources for Alaskans who are incarcerated		
Description: The funds further enhance the skills and competencies of DOC mental health staff. DOC's training and professional development establishes the framework for quality mental health care for Trust Beneficiaries.		
Analysis: The Department of Corrections (DOC) allocated Trust funds to support a three-day training event that approximately 45 DOC mental health staff attended. Expert presenters provided training on the differential diagnosis of mental health disorders, clinical documentation standards, and middle management skills. Skill development in these areas equips DOC mental health staff to effectively work as part of a multi-disciplinary team that provides appropriate treatment and support to Trust beneficiaries. The three-day training event also featured an indigenous awareness workshop delivered by the Alaska Native Heritage Center. The DOC fosters a more inclusive and supportive environment for Trust Beneficiaries by encouraging, recognizing, and appreciating the differences across various cultures. Additional funds were allocated to procure materials and facilitate training of a U.S. Pentagon-approved training program, Stronger Families. This multifaceted wellness program equips DOC staff with tools for effective communication, conflict management, stress reduction, and techniques for navigating differences. Department staff are encouraged to utilize these trainings to promote and model healthy interpersonal skills among Trust beneficiaries. FY 26 is the last year that this project will receive MHTAAR funds.		

FY26 Budget Line Detail: Disability Justice Focus Area

Budget Line: Page 5, Line 18	Project Name: Criminal Justice Sequential Intercept Model Convening	Grantee Name: UAA/CHD
Proposed FY26 Amount: \$105.0 MHTAAR	Project Category: Data/Planning	
Comp Plan Relevance: Goal 7: Services in the Least Restrictive Environment, Objective 3: Reduce the number of Trust beneficiaries entering or becoming involved with Alaska's criminal justice or juvenile justice system.		
Description: The funding is to hold an in-person one-day Criminal Justice Sequential Intercept Model Convening with the potential to have a virtual meeting follow-up in six months. The SIM helps communities identify resources and gaps in services at each intercept and develop local strategic action plans. The SIM mapping process brings together leaders and different agencies and systems to work together to identify strategies to divert people with mental and substance use disorders away from the justice system into treatment. The funding will also support a representative for Policy Research Associates to attend the convening to provide an overview of the work that has been done and an introduction to the framework for new criminal justice staff. This program is through the UAA Center for Human Development (CHD).		
Analysis: The criminal justice sequential intercept model convening will replace the Reducing Recidivism and Reentry (RRR) Conference. Currently, the RRR conference focuses on only one of the SIM intercepts, reentry. The Sequential Intercept Model (SIM) details how individuals with mental and substance use disorders come into contact with and move through the criminal justice system. By expanding the focus to include the other intercepts (community services, law enforcement, initial detention/initial court hearings, jails/courts, and community corrections, it is anticipated that community system leaders and staff will use more evidence-based practices and emerging best practices related to each intercept and positively impact the system for justice-involved Trust beneficiaries. In 2018, Policy Research Associates, Inc. held a two-day Sequential Intercept Model meeting that resulted in a 38-page SIM Mapping Report that included identifying resources and gaps at each intercept, priorities for change, quick fixes, recommendations, strategic action plans, and resources. Using SIM will help inform and identify projects that focus on disability justice and provide standardized data collection.		

Budget Line: Page 5, Line 21	Project Name: DVSA Victim Transition Supports	Grantee Name: ANDVSA
Proposed FY26 Amount: \$200.0 AG	Project Category: Direct Service	
Comp Plan Relevance: Goal 6 Protecting Vulnerable Alaskans, Objective 4 Increase timely access to protective services statewide.		
Description: This project through the Alaska Network on Domestic Violence and Sexual Assault (ANDVSA) will assist individuals who have experienced domestic violence and/or sexual assault (DV/SA) and are residing in emergency shelters to attain housing. It will also assist survivors of DV/SA in jeopardy of losing their housing due to the violence they have experienced to maintain their housing. This assistance will be available to all areas across the state with a priority on locations where no other housing grants are available to support the needs of victims of DV/SA who identify as Trust beneficiaries.		

FY26 Budget Line Detail: Disability Justice Focus Area

Analysis: This grant will pay up to \$4,000 per individual to assist with deposits, rent, mortgage payments, utility deposits, assessments, or anything else identified as a barrier to the individual's access to or maintenance of housing. This is a newly funded grant project, so there is no data yet to report. ANDVSA has been working with the Trust to develop performance measures, Trust beneficiary identification, and billing mechanisms. As this project recently started, it is expected that funding will need to continue for about 3-5 years to support this project to successfully launch and operate. The Trust will continue to assess the impact of its investment in this project and work with DVSA to identify alternative sustainable funding sources.

Budget Line: Page 5, Line 22	Project Name: Flex Funds for Mental Health Courts (Anchorage, Juneau, Palmer, and PFIT)	Grantee Name: Partners for Progress
Proposed FY26 Amount: \$229.5 AG	Project Category: Direct Service	
Comp Plan Relevance: Goal 7 Services in the Least Restrictive Environment, Objective.3 Reduce beneficiaries involved in criminal justice system		
Description: This project provides financial resources to assist therapeutic court participants in Anchorage, Juneau, Palmer, and the Palmer Families with Infants and Toddlers (FIT) court. The funding is to meet basic or emergent needs to maintain or progress in recovery and self-sufficiency and comply with court-ordered conditions.		
Analysis: Partners for Progress disburses funds as authorized under policies and procedures developed jointly with the Alaska Court System to assist the therapeutic court, aka Coordinated Resource Project or CRP court, participants. All data is for the third quarter of FY 24 (1/1/24 through 3/31/24). The Anchorage CRP Court ran at an average of 78% capacity, and 6 beneficiaries graduated. The Juneau CRP Court ran at an average of 83% capacity. The Palmer CRP Court ran at an average of 68% capacity, and one graduated. Palmer FIT Court - The Palmer FIT court ran at an average of 100% capacity, and graduated 2 individuals. The Anchorage CRP court spent most of its funds on beneficiary participant housing support; the other programs spent their funds on housing and transportation. Partners for Progress contracts with the Alaska Therapeutic Court Alumni (AKTCA) to provide Peer Support Process Groups for all court participants. This project has a demonstrated history of providing positive outcomes to beneficiaries, and Trust staff recommend continued funding and support. Though efforts to secure alternative funding are ongoing, the Alaska Mental Health Trust Authority is currently the primary funding source for this established project. The Trust will continue to assess the impact of its investment in this project; and that assessment will inform future funding recommendations.		

Budget Line: Page 5, Line 23	Project Name: Centralized Competency Calendar Project Manager	Grantee Name: ACS/Therapeutic Courts
Proposed FY26 Amount: \$158.3 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 7 Services in the Least Restrictive Environment, Objective.3 Reduce beneficiaries involved in criminal justice system		

FY26 Budget Line Detail: Disability Justice Focus Area

Description: This project funds a position to assist with managing, collecting data, and tracking the 3rd Judicial District's Centralized Competency Calendar. This is critical to determining trends, identifying delays in evaluation and restoration orders, and recommending solutions. The Centralized Competency Calendar helps increase efficiency in competency proceedings and increases the promptness of orders for evaluation transmitted to API. For Trust beneficiaries, this project can decrease the time they spend incarcerated. This project reflects merging two projects from FY 25, the centralized competency calendar paralegal for 78.3 and the centralized competency clear paralegal statewide for 80.0. The merging of the projects streamlines the funding and reporting requirements.

Analysis: The Alaska Court System continues to track competency case data for the Anchorage centralized calendar. The competency caseload is currently on par with FY23; in the first six months of FY24, just over 230 orders for competency evaluations were issued statewide. Most of these are Anchorage cases and are handled through the centralized calendar. The Centralized Competency Calendar has made the initial stages of competency proceedings run very efficiently; orders for evaluation are transmitted to API, the turnaround time for evaluations from API is good, initial hearings to determine competency are held promptly, and in uncontested cases, orders on competency are issued swiftly. There continues to be some delay after initial proceedings due to the inability to schedule contested competency hearings on judges' calendars. However, it seems that fewer cases have had this issue in FY24. The Fairbanks Centralized Competency Calendar was mainly in the planning and preparation stages during the first half of FY24 and began operation in March 2024. Initial launch in Fairbanks has been good, and the structure is in place for the centralized calendar to increase efficiency and consistency in the initial stages of competency proceedings. For now, the Fairbanks Centralized Calendar includes only Fairbanks cases, but the calendar's scope will expand through the remainder of FY24. The plan is to expand to Bethel and other Fourth Judicial District cases and add cases from the Second Judicial District by the end of June. The centralized calendar is estimated to hear approximately 100 cases per year at full operation. As part of this project recently started (the expansion component), it is expected that funding will need to continue for about 3-5 years to support this project. The Trust will continue to assess the impact of its investment in this project and work with ACS to identify alternative sustainable funding sources.

Budget Line: Page 5, Line 24	Project Name: Holistic Defense	Grantee Name: DOA/PDA
Proposed FY26 Amount: \$126.4 MHTAAR	Project Category: Direct Service	
Comp Plan Relevance: Goal 6, Protecting Vulnerable Alaskans, Objective 5 Ensure vulnerable Alaskans understand their rights and responsibilities		
<p>Description: Funds support legal services from the Public Defender Agency (PDA) within the Department of Administration (DOA) using holistic defense. The holistic defense project aims to serve Alaskans affected by the criminal legal system by helping them address their civil legal issues. The target population consists of Trust beneficiaries who are not participating in therapeutic court or other diversion projects. Holistic defense is a client-centered and interdisciplinary model of public defense that addresses the circumstances driving poor people into the criminal justice system and the consequences of that involvement by offering comprehensive legal representation, social work support, and advocacy for the client.</p>		
<p>Analysis: The Holistic Defense Project (HDP) continues to screen Public Defender Agency (PDA) clients for social service and civil legal aid needs, provide referrals to Alaska Legal Services Corporation (ALSC), and provide social service coordination for those clients. PDA and ALSC have also expanded the project to the Nome and Palmer offices. The PDA experienced a significant change in personnel in the Bethel office, losing one of the team's original members. Staffing changes have resulted in a building/rebuilding year. Plans for the coming year include an updated manual, an updated and streamlined referral form, and improving procedures in all operating offices to both increase referrals and for cases to flow from the PDA to the ALSC more efficiently and to replicate the practice of mutually staffing cases with both agencies on a weekly or biweekly basis. Funding for this project will move to GF/MH in FY 27.</p>		

FY26 Budget Line Detail: Disability Justice Focus Area

Budget Line: Page 5, Line 25	Project Name: Holistic Defense	Grantee Name: AK Legal Services
Proposed FY26 Amount: \$277.0 AG	Project Category: Direct Service	
Comp Plan Relevance: Goal 6, Protecting Vulnerable Alaskans, Objective 5 Ensure vulnerable Alaskans understand their rights and responsibilities		
Description: Funds support the holistic defense project partner, Alaska Legal Services Corporation. Alaska Legal Services Corporation works with the Alaska Public Defender Agency to provide civil legal services to Trust beneficiaries whom a public defender has represented.		
Analysis: While FY24 data is not yet available, in FY 23 ALSC staff provided critical civil legal aid services to 89 trust beneficiaries in the Bethel, Nome and Kotzebue regions on such issues as protecting the client's housing, obtaining educational support, needed health care, and public benefits. All of these efforts are to stabilize the lives of justice-involved individuals and make it less likely that they will be incarcerated. FY26 is the last year to fund this project.		

Budget Line: Page 5, Line 26	Project Name: Holistic Defense Social Worker	Grantee Name: DOA/DPA
Proposed FY27 Amount: \$119.2, MHTAAR	Project Category: Direct Service	
Comp Plan Relevance: Goal 6, Protecting Vulnerable Alaskans, Objective 5 Ensure vulnerable Alaskans understand their rights and responsibilities		
Description: The funds will start in FY 27 and will support a new social worker position to work directly with Trust beneficiaries in child welfare cases and those facing involuntary commitment or forced medication. The position will be located in Anchorage.		
Analysis: Public Defender Agency clients often face non-legal barriers that interfere with successful outcomes in legal matters and successful integration in communities during and after the legal process. Clients in criminal and child welfare matters need legal advocacy, but they also need affordable housing, mental health and substance abuse treatment, and assistance applying for disability, Veterans, Social Security, and other benefits. Expanding the holistic defense model to include providing the assistance of a licensed social worker for Anchorage clients in child welfare cases and those facing involuntary commitment or forced medication will improve outcomes for families and provide an additional avenue for these trust beneficiaries to receive the support and services they need. A conservative estimate would be approximately 50 Trust beneficiaries served by this position, but the Agency anticipates that in addition to serving clients directly, this funded position would also provide valuable guidance and direction to other Agency attorneys, paralegals, and AmeriCorps social service navigators to reach and aid even more trust beneficiaries. This funding will start in FY27, and it is expected that funding will need to continue for about five years to support this project to successfully launch and operate.		

Budget Line: Page 6, Line 29	Project Name: Occupational Therapist in DJJ Youth Facilities	Grantee Name: DFCS/DJJ/Bethel & Fairbanks Youth Facility
Proposed FY26 Amount: \$100.0 MHTAAR	Project Category: Direct Service	
Comp Plan Relevance: Goal 8 Services in Institutional Settings, Objective 3 Enhance and expand access to clinical and case management resources for Alaskans who are incarcerated		

FY26 Budget Line Detail: Disability Justice Focus Area

Description: This funding will be used to contract Occupational Therapy (OT) services for individual youth in the Bethel and Fairbanks Youth Facility’s neurobehavioral treatment units. The Division of Juvenile Justice, DJJ, will also utilize contract services to conduct OT environmental assessments of the Fairbanks and Bethel facilities detention units and implement recommendations to improve overall practices. DJJ resides within the Dept. of Family and community Services (DFCS).

Analysis: As part of the DJJ mission, staff provide clinical interventions to assist youth in developing skills to prevent involvement in the criminal justice system. Many of these youth are Trust beneficiaries, and DJJ has seen an increase in the complexity of the needs of the youth they serve and has created two neurobehavioral treatment units. Bethel’s youth facility has 23 beds, and Fairbanks has 28 beds. Youth participating in OT therapy and interventions are anticipated to demonstrate improvement in specific functional skills identified in their occupational therapy evaluations. As of June 2024, DJJ staff was working on drafting a request for proposal to find a contract occupational therapist to work at the Bethel and Fairbanks Youth facilities. Contracted OT services shall be in-person as well as virtual, if appropriate. As DJJ has not started this project yet, it is expected that funding will need to continue for about 3-5 years to support this project to successfully launch and operate. The Trust will continue to assess the impact of its investment in this project and work with DJJ to identify alternative sustainable funding sources. Or, if the project outcomes for beneficiaries are not achieved, the team will work with DJJ to adjust accordingly or recommend that Trust funding be discontinued.

Budget Line: Page 6, Line 30	Project Name: Trauma Treatment for Incarcerated Women	Grantee Name: DOC/Inmate Health/Behavioral Health Care
Proposed FY26 Amount: \$150.0 MHTAAR	Project Category: Direct Service	
Comp Plan Relevance: Goal 8 Services in Institutional Settings, Objective 3 Enhance and expand access to clinical and case management resources for Alaskans who are incarcerated		
Description: Funding supports the Department of Corrections (DOC) development of a pilot project focusing on addressing the impact of trauma for incarcerated women, many of whom are Trust beneficiaries. This pilot program will provide individuals with healthier coping skills, ultimately reducing the likelihood of engaging in unhealthy behaviors to cope with the impact of exposure to trauma.		
Analysis: After much consideration and the department’s inability to fill current PCNs, a decision was made to solicit a request for a proposal for this work. This contract will provide trauma services for women at Hiland Mountain Correctional Center (HMCC) and Yukon-Kuskokwim Correctional Center (YKCC). The services will consist of in-person groups, individual services at HMCC, and telehealth services at YKCC. As of June, DOC was in the process of awarding the contract to a provider. As this project recently started, it is expected that funding will need to continue for about 3-5 years to support this project to successfully launch and operate. The Trust will continue to assess the impact of its investment in this project and work with DOC to identify alternative sustainable funding sources.		

FY26 Budget Line Detail: Disability Justice Focus Area

Budget Line: Page 6, Line 31	Project Name: Addressing Comorbid Health and Addiction Issues Prominent Within Severe and Persistent Mentally Ill Populations	Grantee Name: DOC/Inmate Health/Behavioral Health Care
Proposed FY26 Amount: \$151.7 MHTAAR	Project Category: Direct Service	
Comp Plan Relevance: Goal 8 Services in Institutional Settings, Objective 3 Enhance and expand access to clinical and case management resources for Alaskans who are incarcerated		
Description: Funds support a full-time nursing position at the subacute mental health unit at Goose Creek Correctional Center in Wasilla, Alaska. The department has recognized the value of having nursing staff dedicated to the subacute unit to administer medication, review, and screen medical requests, and monitor/direct healthy hygiene habits for Trust beneficiaries.		
Analysis: The position was created for recruitment in November 2023, and a nurse was hired in spring 2024. The position has improved workflows and allowed other nursing staff time to focus on the needs of other facility areas. The success of this position has resulted in the department increasing the time allotted for the nursing coverage on the sub-acute mental health unit to 10 hours a day, seven days a week. This position has helped reduce negative symptoms related to mental illness and has increased access to essential services. As this project recently started, it is expected that funding will need to continue for about 3-5 years to support this project to successfully launch and operate. The Trust will continue to assess the impact of its investment in this project and work with DVSA to identify alternative sustainable funding sources.		

Budget Line: Page 6, Line 34	Project Name: Local re-entry coalition coordinator - Anchorage	Grantee Name: Neighborworks
Proposed FY26 Amount: \$120.0 AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 8 Services in Institutional Settings, Objective 3 Enhance and expand access to clinical and case management resources for Alaskans who are incarcerated		
Description: Funds support a Reentry Coalition Coordinator in Anchorage, who is instrumental in developing reentry infrastructure. The Reentry Coalition Coordinator's work supports the needs of all returning citizens, including Trust beneficiaries, as they transition back into their communities. Support includes educating the community about the criminal justice system, identifying local challenges facing reentrants, identifying local gaps in services and corresponding collaborative solutions, and serving as a local point of contact for the DOC.		
Analysis: The Anchorage Reentry Coalition has a strategic plan consisting of six broad areas of focus: coalition capacity building; community awareness, education, and advocacy; housing; case management services; meaningful community connections; and inmate awareness and education about reentry services. Broadly, progress is being made on nearly all 16 objectives contained within the plan. The coalition coordinator has had several opportunities to speak publicly about reentry, including hosting three reentry simulations (Ketchikan Reentry Coalition & Ketchikan Wellness Coalition, AK Youth Court Conference, and AK Public Defender Agency), participation on a panel discussion at the First Annual Statewide Alaska Civil Rights Conference, and facilitating a panel discussion at the Reducing Recidivism & Reentry Conference. As of April 2024, the position has been vacant. In July, the position was offered to the top applicant. FY 26 is the final year this project will receive Trust funding.		

FY26 Budget Line Detail: Disability Justice Focus Area

Budget Line: Page 6, Line 35	Project Name: Local re-entry coalition coordinator -Mat-Su	Grantee Name: Valley Charities
Proposed FY26 Amount: \$120.0 AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 8 Services in Institutional Settings, Objective 3 Enhance and expand access to clinical and case management resources for Alaskans who are incarcerated		
Description: Funds support a Reentry Coalition Coordinator, who is instrumental in developing reentry infrastructure. The Reentry Coalition Coordinator's work supports the needs of all returning citizens, including Trust beneficiaries, as they transition back into their communities. Support includes educating the community about the criminal justice system, identifying local challenges facing reentrants, identifying local gaps in services and corresponding collaborative solutions, and serving as a local point of contact for the DOC.		
Analysis: The Mat-Su Reentry Coalition completed a capacity needs assessment, community readiness assessment, community resource assessment, and a comprehensive community reentry plan. The Mat-Su Valley still needs more non-restrictive transitional housing, and this is one of the goals that our coalition will continue to work on this year. The reentry coalition coordinator held six meetings, attending the 2024 National Association of Reentry Professionals conference, organizing the 2023 Mat-Su Reentry Summit that was held in person on September 21-22, 2023, in Wasilla, and organizing a Mat-Su Reentry Simulation. FY 26 is the final year this project will receive Trust funding.		

Budget Line: Page 6, Line 36	Project Name: Local re-entry coalition coordinator -Juneau	Grantee Name: JAMHI
Proposed FY26 Amount: \$120.0 AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 8 Services in Institutional Settings, Objective 3 Enhance and expand access to clinical and case management resources for Alaskans who are incarcerated		
Description: Funds support a Reentry Coalition Coordinator, who is instrumental in developing reentry infrastructure. The Reentry Coalition Coordinator's work supports the needs of all returning citizens, including Trust beneficiaries, as they transition back into their communities. Support includes educating the community about the criminal justice system, identifying local challenges facing reentrants, identifying local gaps in services and corresponding collaborative solutions, and serving as a local point of contact for the DOC.		
Analysis: The Juneau Reentry Coalition (JREC) submitted the required Comprehensive Community Reentry Plan in June and completed the annual FY24 coalition capacity needs assessment in April 2024. Due to Juneau's community ownership of issues important to successful reentry, the JREC Steering Team chose not to conduct a formal community Readiness Assessment. Access to community resources has varying degrees of ease by reentrant, and the report noted struggles with an adequate supply of low-income housing and community behavioral healthcare services closing their doors. JREC hosted a Reentry Simulation on January 24, 2024, inviting Legislators, legislative staff, and community members. The three-hour event illustrated the community challenges faced by returning citizens during the first month of release after incarceration. FY 26 is the final year this project will receive Trust funding.		

FY26 Budget Line Detail: Disability Justice Focus Area

Budget Line: Page 6, Line 37	Project Name: Local re-entry coalition coordinator - Fairbanks	Grantee Name: City of Fairbanks
Proposed FY26 Amount: \$120.0 AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 8 Services in Institutional Settings, Objective 3 Enhance and expand access to clinical and case management resources for Alaskans who are incarcerated		
Description: Funds support a Reentry Coalition Coordinator, who is instrumental in developing reentry infrastructure. The Reentry Coalition Coordinator's work supports the needs of all returning citizens, including Trust beneficiaries, as they transition back into their communities. Support includes educating the community about the criminal justice system, identifying local challenges facing reentrants, identifying local gaps in services and corresponding collaborative solutions, and serving as a local point of contact for the DOC.		
Analysis: The Fairbanks Alaska Prisoner Reentry Coalition submitted the required Comprehensive Community Reentry Plan in June, completed the annual FY24 coalition capacity needs assessment in May 2023, and is working on updating the Fairbanks Community Resource Guide from 2020. The Fairbanks coalition held several community meetings and community outreach education activities. The largest achievement was standing up the Fairbanks Reentry Coalition Housing Project. Currently, over 100 justice-involved individuals are involved in the project and receive support and referrals from other service providers in the community. The identified challenges in Fairbanks are related to Housing shortages/costs and wait lists for treatment. FY 26 is the final year this project will receive Trust funding.		

Budget Line: Page 6, Line 38	Project Name: APIC Discharge Planning Model in DOC	Grantee Name: DOC/Inmate Health/Behavioral Health Care
Proposed FY26 Amount: \$290.0 MHTAAR	Project Category: Direct Service	
Comp Plan Relevance: Goal 8 Services in Institutional Settings, Objective 3 Enhance and expand access to clinical and case management resources for Alaskans who are incarcerated		
Description: This project assures continuity of care for Trust beneficiaries transitioning from the correctional system back into the community while maintaining public safety and increasing the ability of the criminal justice system to accommodate, support, protect, and provide treatment for offenders who are Trust beneficiaries. The Department of Corrections used the evidence-based reentry model, APIC (Assess, Plan, Identify, Coordinate), for the release of Trust beneficiaries and the community re-entry planning system from correctional institutions.		
Analysis: In FY23, 729, or 95% of duplicated and unduplicated APIC referrals, came from mental health clinicians in DOC institutions. About 90% of individuals received a mental health appointment within 10-20 days of release. The participation of all those who received a referral to a mental health agency or service provider in FY23 ranged from 0 (not showing) to 8 months. In FY23, 243, or 42.8% of all duplicated APIC participants, were rearrested either for a technical violation or an arrest for a new crime. These 42.8% were either already high risk upon release or not fully engaged with their plan, treatment, medications, or obtaining benefits.		
DOC APIC staff noted an increased number of highly acute individuals who are more challenging to integrate into the community. Other challenges include unexpected releases (bail, change of plea/time served, charges dismissed after being found legally incompetent or released onto pretrial diversion), delays		

FY26 Budget Line Detail: Disability Justice Focus Area

obtaining Medicaid due to long delays in processing SSI claims and public assistance benefits at the Department of Public Assistance (DPA), and aging population with complex health care needs, and an increase in participants from outside of Anchorage due to a lack of community resources. In FY 27, the MHTAAR amount is decreasing to \$145.0 and \$145.0 is allocated to GF/MH.

Budget Line: Page 6, Line 39	Project Name: DOC Discharge Incentive Grants	Grantee Name: DOR/AHFC
Proposed FY26 Amount: \$200.0 MHTAAR	Project Category: Direct Service	
Comp Plan Relevance: Goal 3 Economic and Social Well-being, Objective 1 Alaskans have stable, safe housing with appropriate, community-based social supports to maintain tenancy.		
Description: The Discharge Incentive Grant's (DIG) primary function is to provide funds for justice-involved Trust beneficiaries to assist with monthly rent and various housing options for a vulnerable, marginalized, and mentally acute DOC population with few community resources. DIG participants must follow treatment recommendations to remain eligible, adhere to house rules, and maintain sobriety. This program is administered through the Alaska Housing Finance Corporation (AHFC).		
Analysis: During the first and second quarters, the Discharge Incentive Grant (DIG) funded 53 individuals in 109 rent occurrences. Of the 53, 19 of those funded (35%) were returned to the Department of Corrections (DOC) custody. The average cost for each of the 53 participants was \$1,518. A substantial challenge is that the DIG is intended to be used one to three months post-release, but due to a myriad of complications with social security administration issues with the benefits application, these interim funds may need to be utilized longer. The discharge incentive grant is an essential and critical element of release planning and housing eligible homeless individuals from DOC. This project has a demonstrated history of providing positive outcomes to beneficiaries, and Trust staff recommend continued funding and support. Though efforts to secure alternative funding are ongoing, the Alaska Mental Health Trust Authority is currently the primary funding source for this established project. The Trust will continue to assess the impact of its investment in this project; and that assessment will inform future funding recommendations.		

FY26 Budget Line Detail: Beneficiary Employment and Engagement Focus Area

Budget Line: Page 7, Line 4	Project Name: Beneficiary Employment Conference	Grantee Name: DOL/DVR
Proposed FY27 Amount: \$100.0 MHTAAR	Project Category: Conference/Sponsorship	
Comp Plan Relevance: Goal 3, Economic and Social Well-being, Objective 3.3, Expand resources that promote successful, long-term employment for Trust beneficiaries.		
Description: The grant funds the oversight, planning, implementation, and registration for the statewide beneficiary employment conference. The Division of Vocational Rehabilitation collaborates with the Governor’s Council on Disabilities, the Trust, Departments of Health, and Education, as well as community members on planning and standing up this 1-2-day conference. The conference will focus on public awareness and training opportunities for beneficiary employment-related issues. This funding will start FY 27.		
Analysis: The last conference was canceled due to circumstances beyond the control of the planning committee. This conference intends to increase capacity and the opportunities for beneficiaries to receive employment coaching, job shadowing, competitive employment options, and increased ability to receive treatment and care while still maintaining a job. Skill development and education will be wrapped up in the presentations with a focus on engaging as many partners as possible across the state.		

Budget Line: Page 7, Line 5	Project Name: Beneficiary Employment Technical Assistance and Planning	Grantee Name: UAA/CHD
Proposed FY26 Amount: \$75.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 3, Economic and Social Well-being, Objective 3.3, Expand resources that promote successful, long-term employment for Trust beneficiaries.		
Description: The goal of this grant is to improve outcomes and promote recovery for beneficiaries through integrated and competitive employment opportunities. UAA’s Center for Human Development will provide technical assistance, information dissemination, and project management to increase employment opportunities for Trust beneficiaries.		
Analysis: This project moved from the Governor’s Council on Developmental Disabilities to the UAA/CHD. In FY24, the University hired a coordinator to run this grant. The coordinator facilitated a contract with the World Institute on Disabilities to redesign the Alaska Disability Benefits (DB) 101 website and perform monthly maintenance. This was completed, and DB 101 training and marketing were implemented. The coordinator has successfully launched a DB skills pilot with a traditional indigenous skills focus in four rural Alaska schools. FY25 will be the year for CHD to track usage of the website and subsequent training, analyze the impact, and make recommendations for future change and expansion. This grant has met their first year’s performance measures.		

FY26 Budget Line Detail: Beneficiary Employment and Engagement Focus Area

Budget Line: Page 7, line 6	Project Name: MicroEnterprise	Grantee Name: UAA/CHD
Proposed FY26 Amount: \$175.0 MHTAAR	Project Category: Direct Service	
Comp Plan Relevance: Goal 3 Economic and Social Well-being, Objective 3.3, Expand resources that promote successful, long-term employment for Trust beneficiaries.		
Description: Individuals with disabilities are seldom provided with the option to own their own businesses. These microenterprise funds are primarily used for Trust beneficiaries to start their own businesses and receive ongoing business/self-employment coaching with the aim to sustain and grow their businesses.		
Analysis: This project supports all Trust beneficiaries with a focus on individuals with disabilities through direct microenterprise grants to receive training and support to own their own businesses. A portion of the project funds are designated to provide additional support to past microenterprise beneficiaries to successfully maintain their business, self-employment, and wellness. These additional supports include mental health or substance use counseling, rehabilitation services, unforeseen business expenses critical to sustaining a viable business, and continuing education (conferences or trainings related to business needs). In Fall 2023, 8 beneficiaries were awarded funds totaling \$33,360.58 (with resources leveraged by applicants totaling \$35,000). In FY24 (through 3/15/24), 22 applications were received for microenterprise grants. Additionally, over 20 individuals received business coaching or application assistance through 3/15/24, and one beneficiary was identified as needing additional support. The program anticipated a total of approximately \$92,000 going directly to the beneficiaries this fiscal year. Continued funding of this program supports all Trust beneficiaries and makes it possible for them to have an income that offsets costs usually rooted in public funds, but more importantly, it gives them a sense of worth and value, which is emphasized by the self-determination movement. Though efforts to secure alternative funding are ongoing, the Alaska Mental Health Trust Authority is currently the primary funding source for this established project. The Trust will continue to assess the impact of its investment in this project, and that assessment will inform future funding recommendations. Continued funding of this project is recommended through FY27.		

Budget Line: Page 7, line 9	Project Name: Mental Health Advocacy, Support, Education, and Public Awareness	Grantee(s): To be determined
Proposed FY26 Amount: \$400.0	Grant Type: Capacity	
Comp Plan Relevance: Goal 3, Trust Beneficiaries Have Strong Economic and Social Well-Being, Objective 3.4, Enhance timely access to basic needs services		
Description: This grant bucket supports agencies providing programs designed, managed, and/or run by beneficiaries of the Trust that address defined needs and increase the quality of life for Trust beneficiaries experiencing severe mental illness, substance use disorders, and/or at-risk youth. Funding can be used for staffing peer-led support and programming that supports and provides education/training for beneficiaries. FY 25 funded projects included NAMI Anchorage and NAMI Juneau. The change in the grant will allow any organization in the state that serves Trust beneficiaries in an advocacy, education, and training mode to access funding.		
Projects funded in FY24:		
<ul style="list-style-type: none"> - NAMI Juneau, \$ 100.6: National Alliance for Mental Illness affiliate dedicated to awareness, education, recovery and support for Trust beneficiaries and family members. - NAMI Anchorage, \$154.1: National Alliance for Mental Illness affiliate dedicated to awareness, education, recovery and support for Trust beneficiaries and family members. 		

FY26 Budget Line Detail: Beneficiary Employment and Engagement Focus Area

Analysis: Mental Health Advocacy, Support, Education, and Public Awareness funding continues to be needed for agencies to support Trust beneficiaries with behavioral health and substance use disorders recovery support. In FY 24, NAMI Juneau facilitated peer-run classes: Family to Family (8-week sessions), NAMI Basics (6-week sessions), Peer-to-Peer (8-week sessions), Peer Support Specialist 40-hour SOA-approved training, CHOICE camps (5-day camps), Social Emotional Health Education Class (6-weeks), Peer Navigation for resources and referrals, and advocacy for legislation affecting Trust beneficiaries plus public testimony. Agencies like NAMI Juneau impacted hundreds of beneficiaries by supporting them in the community, providing employment support, childcare, peer certifications, and helping to find treatment options. Funding diverse peer-run agencies like NAMI helps create a more robust statewide network that ensures Trust beneficiaries have access to support, education, and referrals to treatment and higher levels of care if needed. This peer-run programmatic funding line is important for improving the lives of beneficiaries around the state.

Budget Line: Page 7, line 10	Project Name: Clubhouse Support for Rehabilitation and Recovery	Grantee(s): To be determined
Proposed FY26 Amount: \$800.0	Grant Type: Capacity	
Comp Plan Relevance: Goal 3, Trust Beneficiaries Have Strong Economic and Social Well-Being, Objective 3.4, Enhance timely access to basic needs services		
<p>Description: This grant bucket supports agencies providing programs designed, managed, and/or run by beneficiaries of the Trust that address defined needs and increase the quality of life for Trust beneficiaries experiencing severe mental illness, substance use disorders, and/or at-risk youth. Funding can be used for staffing support while onboarding new programs, operations support, expanding services, advocacy, recovery and supports, early intervention and public education programs, and other relevant needs. The previously funded projects before FY 26 were under the Beneficiary Employment and Engagement (BEE) focus area and the Beneficiary Project Initiative (BPI) funding line items with named agencies in the Authority grants to utilize ongoing recovery (including peer and family) supports services to reduce the impact of mental health and substance use disorders. The previously awarded BPI grantees in this focus area have been awarded to the same agencies for 10-plus years, and opening this funding line as a bucket will allow others to apply for funding to launch and/or expand programs and services.</p>		
<p>Projects funded in FY24:</p> <ul style="list-style-type: none"> - CHOICES, \$410.0: Mental Health and Substance Use Disorder awareness, education, recovery, and support for Trust beneficiaries and family members. - Consumer Web, \$333.6: Mental Health and Substance Use Disorder awareness, education, recovery, and support for Trust beneficiaries and family members. - Northern Hope Center, \$154.0: Mental Health and Substance Use Disorder awareness, education, recovery, and support for Trust beneficiaries and family members. - Polaris House, \$213.0: Accredited International Center for Clubhouse dedicated to the social and overall support and rehabilitation of individuals experiencing Mental Health and Substance Use Disorder recovery and support for Trust beneficiaries and family members. 		
<p>Analysis: Clubhouse Support for Rehabilitation and Recovery funding remains needed for agencies to support Trust beneficiaries with behavioral health and substance use disorders recovery support. In FY 24, Polaris House has 84 members (100% Trust beneficiaries) who are actively engaged with peer staff in the Clubhouse daily. The members receive counseling on employment, recovery support around mental health and substance misuse, crisis, housing, exercise, and food security. 95% of the members report that they are satisfied with the services and support they receive. During this same fiscal year, Northern Hope Drop-in Center provided services (food, peer counseling, employment, and crisis support) for over 1600 Trust beneficiaries in this reporting year. Choices, Inc. in</p>		

FY26 Budget Line Detail: Beneficiary Employment and Engagement Focus Area

Anchorage provided Intensive Case Management and Recovery Coordination services for 107 beneficiaries experiencing TBI, mental health, and substance misuse. Clubhouse recovery-oriented peer-run agencies like the ones listed above provide core services at the community level that meet people where they are and help them navigate to a better life.

Budget Line: Page 7, Line 11	Project Name: Peer Supported Advocacy, Education, and Treatment	Grantee(s): AYFN
Proposed FY26 Amount: \$200.0	Project Category: Capacity	
Comp Plan Relevance: Goal 3, Economic and Social Well-being, Objective 3.4, Enhance timely access to basic needs and services.		
Description: AYFN provides community-based peer navigation to youth and families through parent coaching, clinical best-practice therapies, parent education, and work to stabilize parent/caregiver homes. AYFN employs beneficiaries as their peer navigators, whom they train and support in providing peer help to families who are in crisis. AYFN's goal is to maintain families in the community with the peer wrap-around supports that are needed.		
Analysis: AYFN provided peer services for family support, parent navigation, and clinical/psychoeducation groups. AYFN successfully served over 700 families in FY23 and has a waitlist of 50 families. The need at the community level for an organization like AYFN is great because there are not many agencies that fill the needs that this organization can fill. AYFN has two sites, Anchorage and Wasilla, and they provide weekly parent, youth, and child support groups. They also provide hybrid psychoeducation and parenting classes, which are full and have a waitlist. These classes are needed by the community because child welfare requires these types of classes for parents to reunify with their children. The two worksites serve 4-5 families every day. AYFN provides a valuable service to Trust beneficiaries and families. They have been supported by the Trust for years, and the Trust is working with them to achieve a more sustainable funding model. AYFN is working with the Departments of Health and Family and Community Services to establish a business model that will enable them to be sustainable into the future without Trust funding. FY 26 is the last year for AYFN to receive funding at the 200.0 level, with FY 27 at 100.0 being the final year. These reductions are in line with DBH's work to help AYFN become a biller of Medicaid services by FY27.		

FY26 Budget Line Detail: Housing and Home & Community Based Services Focus Area

Budget Line: Page 8, Line 8	Project Name: IDD System Capacity Development	Grantee Name: AK Assn on Developmental Disabilities (AADD)
Proposed FY26 Amount: \$45.0 AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 7, Services in the Least Restrictive Environment; Objective 2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement and Goal 9, Workforce, Data, and Funding; Objective 1: Strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization.		
Description: The grant supports the operations of the Alaska Association on Developmental Disabilities (AADD). AADD is a provider association for agencies that serve beneficiaries experiencing an intellectual or developmental disability (IDD).		
Analysis: Trust funding provides change management support and training for the leadership of agencies that serve beneficiaries experiencing IDD, efforts to increase the available workforce of direct support professionals, agency sustainability, and advocacy for best practices in home and community-based services to strengthen the IDD service system utilized by Trust beneficiaries. This project impacts the home and community-based service system on a macro level through advocacy, leadership, and relationship-building across service systems. Due to the age of the grant and the goals that have been attained, Trust funding will be phased out over the next couple of years, with FY27 as the last funding year. AADD is a membership organization and has sustainable funding through membership fees and grants.		

Budget Line: Page 8, Line 9	Project Name: Alaska Dementia Action Collaborative	Grantee Name: These funds will be awarded through the State of Alaska procurement process
Proposed FY26 Amount: \$75.0 AG	Project Category: Contract	
Comp Plan Relevance: Goal 7, Services in the Least Restrictive Environment; Objective 2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement and Goal 2, Healthcare, Objective 1: Alaskans have access to and receive quality healthcare services.		
Description: This funding purchases contracted services to facilitate the Alaska Dementia Action Collaborative workgroup and activities. This workgroup establishes annual objectives, provides mutual accountability to complete needed activities, and advocates to improve the system of care for beneficiaries with Alzheimer’s disease and related dementias (ARD). It is comprised of members from across the state who represent people with lived experience, their caregivers and family members, social service providers, State of Alaska employees, and other community stakeholders committed to improving the support system for people impacted by ARD.		
Analysis: Alaska has one the fastest growing senior populations in the country, and because of this, an increasing number of people have been diagnosed with ARD. In 2014, the State of Alaska, in partnership with community stakeholders, created the first plan to serve Alaskans with ARD. This plan was updated in 2020 and finalized in 2021, creating “A Call for Action: Alaska’s 10-Year Map to Address Alzheimer’s Disease and Related Dementia”. This plan outlines goals for the next ten years with the mission “to coordinate the work of building a robust system of support for people impacted by ARD.” The Alaska Dementia Action Collaborative has met over the past two years to implement the work of the plan. Supporting a facilitator is necessary to continue the momentum of the work. The Division of Public Health is a state agency partner with the Trust in leading the Alaska Dementia Action Collaborative and is a partner in discussing the long-term sustainability of the Collaborative.		

FY26 Budget Line Detail: Housing and Home & Community Based Services Focus Area

Budget Line: Page 8, Line 10	Project Name: Affordable Housing Development Position	Grantee(s): Juneau Housing First Collaborative
Proposed FY26 Amount: \$75.0 AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 3, Economic and Social Well-being, Objective 1: Alaskans have stable, safe housing with appropriate community-based social supports to maintain tenancy.		
Description: This project provides partner funding for a Development Director position to assist agencies in developing housing for individuals experiencing homelessness and individuals in recovery, focusing on Southeast Alaska and off-road system communities.		
Analysis: Lack of affordable housing is the primary contributor to homelessness. As housing costs rise in Alaska, homelessness rates will continue to increase unless an adequate supply of affordable housing is created. Trust beneficiaries are overrepresented in homeless and low-income populations. This position will provide development technical assistance for agencies that want to build affordable housing. The position would focus on providing technical assistance with pre-development and development activities and compiling and providing operating materials templates for housing projects. Types of materials would include sample policies and procedures, job descriptions, code of conduct, building maintenance logs, lease examples, and other relevant documents needed for funding or compliance. This project is expected to have a duration of 3-5 years, based on performance.		

Budget Line: Page 8, Line 11	Project Name: Rural Housing Coordinator - Ketchikan	Grantee(s): DOR/AHFC
Proposed FY26 Amount: \$135.0 MHTAAR	Grant Type: Capacity Building	
Comp Plan Relevance: Goal 3, Economic and Social Well-being, Objective 1: Alaskans have stable, safe housing with appropriate community-based social supports to maintain tenancy.		
Description: This project creates a Rural Housing Coordinator position in Ketchikan and can use some funding for small projects. The position will develop or maintain a homeless and housing coalition/workgroup to identify barriers to accessing safe and stable housing in the region and identify resources to address those concerns, particularly for AMHTA beneficiaries at higher risk of literal homelessness.		
Analysis: The Rural Housing Coordinator position is intended to positively impact a local community through a local government or housing authority position that convenes and coordinates local resources to improve the housing and homeless services continuum of care for a rural area. This position has both a system and direct level impact on Trust beneficiaries. This is an extension of work planned in prior fiscal years but experienced a delayed start. This project is expected to have a duration of 3 years, with FY27 being the final year of funding.		

FY26 Budget Line Detail: Housing and Home & Community Based Services Focus Area

Budget Line: Page 8, Line 12	Project Name: HCBS System Sustainability	Grantee(s): To be determined
Proposed FY26 Amount: \$150.0 AG	Project Category: various	
Comp Plan Relevance: Goal 7, Services in the Least Restrictive Environment; Objective 2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement		
Description: Trust funds will create one or two projects exploring new income opportunities or administrative efficiencies for the home and community-based service (HCBS) system.		
Analysis: This project addresses recurring themes from the HCBS service system regarding a lack of agency administrative capacity and future sustainability. The HCBS focus area has looked at implementing new initiatives that will not be successful without improving the stability of agencies that make up the service system or thinking differently about how the system is structured. Many agencies rely heavily on a single payment source, such as the 1915c Medicaid waivers, and they need to diversify their income. A healthy HCBS system that can implement current best practices and future system changes will better serve Trust beneficiaries. This project is expected to have a duration of 3-5 years, based on performance.		

Budget Line: Page 8, Line 15	Project Name: Special Needs Housing Grant	Grantee Name: DOR/AHFC
Proposed FY26 Amount: \$200.0 MHTAAR, \$1,750.0 GF/MH recommendation	Project Category: Capacity Building	
Comp Plan Relevance: Goal 3, Economic and Social Well-being, Objective 1: Alaskans have stable, safe housing with appropriate community-based social supports to maintain tenancy.		
Description: The Special Needs Housing Grant (SNHG) provides operating and residential support service funds for permanent housing programs that provide safe and stable housing to Trust beneficiaries. Grantees apply competitively for initial three-year funding and can receive additional funding as part of a non-competitive renewal process subject to funding levels and subsidy needed.		
Analysis: SNHG grants provide primarily operating and supportive services for permanent supportive housing programs. For projects based on scattered site housing, funds are used for rental assistance and supportive services. Permanent supportive housing (PSH) is an intervention that serves the most vulnerable homeless individuals who have multiple co-occurring disorders, such as mental illness and addiction, complicated by housing barriers that may include corrections history, many years of homelessness, current substance use, evictions, or lack of income. People accessing PSH are chronically homeless and 100% Trust beneficiaries. This intervention offers low-barrier housing and offered support services. People who are homeless and have a mental illness or addiction, brain injury, developmental disability, or dementia often go without the services and medications they need to manage symptoms to remain stably housed. Permanent supportive housing is one of the few options available to beneficiaries with active untreated symptoms. In FY23, AHFC awarded funding to 35 grantees in 20 communities. Demand for this funding is high, with more applications received than can be funded. This is a project created by the Trust and AHFC, with AHFC and general funds providing the majority of funding for the program. Trust funding offers the opportunity to leverage other state and federal funding opportunities to improve sustainability. Continued efforts to transfer funding from MHTAAR to GF/MH have been unsuccessful, and continued support of the program is recommended until alternative funding can be secured.		

FY26 Budget Line Detail: Housing and Home & Community Based Services Focus Area

Budget Line: Page 8, Line 16	Project Name: Homeless Assistance Program	Grantee Name: DOR/AHFC
Proposed FY26 Amount: \$950.0 MHTAAR, \$2,850.0 GF/MH recommendation	Project Category: Direct Service	
Comp Plan Relevance: Goal 3, Economic and Social Well-being, Objective 1: Alaskans have stable, safe housing with appropriate community-based social supports to maintain tenancy.		
Description: The Homeless Assistance Program project provides funding to AHFC to issue grants to provide emergency or transitional housing and services to prevent homelessness or rapidly rehouse displaced people. The grants are awarded competitively to agencies across the state.		
Analysis: The Homeless Assistance Program assists families in obtaining or retaining safe and stable housing and in working with nonprofit partners to create sustainably supported housing over time. Preventing homelessness, much like preventing injury or illness, not only provides better outcomes for individuals but is the most effective, efficient, and economical approach to addressing homelessness. Rapid re-housing rapidly connects families and individuals experiencing homelessness to permanent housing through a tailored package of assistance that may include time-limited financial assistance and targeted supportive services. The program serves all populations, including youth under 18, youth 18-24, families, veterans, and single adults. Trust beneficiaries are overrepresented in all populations. In FY23, AHFC awarded funding to 24 grantees in 13 communities serving 10,832 unique individuals, of which 7,256 from 7,193 households voluntarily disclosed their beneficiary status.		
Funding for this program does not satisfy the demand for services. AHFC and general funds provide most of the funding for this program, with Trust funding being an important lever for other state and federal funds. This is a long-standing investment for the Trust. While the Trust does not typically provide ongoing funding for programs, the partnership with AHFC facilitates the Trust's ability to contribute to the work of many organizations efficiently and effectively across the state. Continued efforts to transfer funding from MHTAAR to GF/MH have been unsuccessful, and continued support of the program is recommended until alternative funding can be secured.		

Budget Line: Page 8, Line 17	Project Name: Beneficiary Housing Projects & Related Services	Grantee(s): To be determined
Proposed FY26 Amount: \$750.0 AG	Project Category: Various	
Comp Plan Relevance: Goal 3, Economic and Social Well-being, Objective 1: Alaskans have stable, safe housing with appropriate community-based social supports to maintain tenancy.		
Description: The Beneficiary Housing Projects & Related Services expands on the successful "Supportive Housing" project that provided Trust funding to build new housing units for Trust beneficiaries. This update would allow for investment in other projects primarily serving beneficiaries in addition to supportive housing. This funding will also explore how to implement housing-related services in Alaska. This may include service modeling, analysis, or a pilot project.		

FY26 Budget Line Detail: Housing and Home & Community Based Services Focus Area

Analysis: Trust beneficiaries are disproportionately homeless, at risk of homelessness, and face numerous housing barriers. Housing projects that primarily serve trust beneficiaries help add housing units tailored to beneficiaries’ needs and improve housing stability. The purpose of identifying these funds in a line item for beneficiary housing projects without named grantees is to ensure there is funding for future housing projects that have notoriously difficult pre-development and construction timelines to estimate far in the future when Trust budgets are approved initially. This is partner funding as part of a larger funding stack for one-time capital projects that have completed or are about to complete their pre-development process.

States can now leverage several Medicaid authorities to pay for temporary housing and the Medicaid term “Housing Related Services”. The Related Services include pre-tenancy and tenancy support, housing deposits and short-term rental assistance, wrap-around support, and other Social Determinants of Health support. The State of Alaska was recently given the authority by the legislature to explore a Health-Related Social Needs waiver, one of the more popular mechanisms Departments of Health have been using to implement these new service packages. This funding would be used to implement services to assist beneficiaries with obtaining and maintaining housing, complementing the work of the Departments. This project is expected to have a duration of 3-5 years, based on performance.

Budget Line: Page 8, Line 20	Project Name: Brain Injury Council of Alaska Staff	Grantee Name: UAA/CHD
Proposed FY26 Amount: \$105.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 9, Workforce Capacity, Data, and Technology Systems, Objective 3: Ensure funding is available to support Alaska’s Comprehensive Integrated Mental Health Program.		
Description: This project funds a professional position to support the Brain Injury Council of Alaska. This position is responsible for gathering data for reporting, coordinating advocacy and planning, and preparing grant progress reports for the TABI Advisory Council and Trust. This position acts as a liaison with other beneficiary boards and injury prevention groups, leads TABI state plan development and implementation activities, and participates in developing joint advocacy efforts and collaborative projects.		
Analysis: In FY23, the Traumatic & Acquired Brain Injury Advisory Council changed its name to the Brain Injury Council of Alaska (BICA or the Council). The BICA Staff project funds a key position for building capacity and the continuum of care for beneficiaries with a brain injury. This position supports the implementation of legislation and programs that impact beneficiaries with brain injury and advocates for additional services and support for this population.		
The Brain Injury Council of Alaska Staff project furthered the work of the Alaska State Plan for Brain Injury. In FY23, the position focused on the following goals: 1) implementing identified Council priorities; 2) ensuring consistent, effective, and efficient Council operations, procedures, and communication; 3) educating Council members in areas instrumental for effective service; 4) helping increase awareness of brain injury in Alaska; and 5) building relationships with other agencies and stakeholders. The coordinator excelled in these areas building a strong council, partnerships, and awareness program.		
The position engages the participation of council members who have or have survived a brain injury. The Council required it to comprise of at least 50% of people with lived experience. The Council has completed several brain injury awareness and data collection activities that will assist with advocating for services and understanding the prevalence of brain injury in Alaska. The Council partners with national and in-state organizations to create awareness and educational materials for people with brain injury, their caregivers, and providers.		

FY26 Budget Line Detail: Housing and Home & Community Based Services Focus Area

Trust funding leveraged a federal grant to implement activities related to the Alaska State Plan for Brain Injury. A long-term goal of the Council is to successfully advocate to become an official State of Alaska Board. Continued Trust funding may need to be redefined if that goal is reached.

Budget Line: Page 8, Line 21	Project Name: TABI and ADRD Services and Supports (renamed)	Grantee(s): To be determined
Proposed FY27 Amount: \$400.0 GF/MH recommendation	Project Category: Various	
Comp Plan Relevance: Goal 7, Services in the Least Restrictive Environment; Objective 2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement		
Description: The TABI and ADRD Services and Supports is a continuation of the previously named “Services and Supports Identified as Priorities in TABI and ADRD State Plans” project and provides funding to implement services and supports identified as priorities for the Traumatic and Acquired Brain Injury (TABI) and Alzheimer’s Disease and Related Dementia (ADRD) service systems. This bucket of funding supports 1-5 projects annually.		
Projects funded in FY24: <ul style="list-style-type: none"> - TABI Phasic Implementation Plan for Identification, Intervention, and Enhanced Community Infrastructure, South Central Foundation, is the only project funded in FY24. (See below for project description) Moving this project to a separate line item in the budget will allow for new projects to be developed through this funding source. 		
Analysis: TABI and ADRD have statewide plans developed through broad community partnerships and stakeholder engagement. Projects selected for funding must further the priorities identified in these plans. The ADRD and TBI beneficiary categories do not have support through Medicaid home and community-based services unless they have an eligible co-occurring condition or a brain injury that would qualify them for IDD services that is documented in youth or childhood. This funding aims to pilot or expand services and support for people with ADRD or a TABI with a long-term goal of implementing a robust continuum of care. These service systems have both the State of Alaska and home and community-based service providers grappling with how to expand services to meet the increasing demand for ADRD and TABI services and will need a system change to offer a true continuum of care to beneficiaries. The Trust is the primary or partner funder for the varied short-term projects funded from this budget item.		

Budget Line: Page 8, Line 22	Project Name: TABI Phasic Implementation Plan for Identification, Intervention, and Enhanced Community Infrastructure	Grantee Name: Southcentral Foundation
Proposed FY26 Amount: \$350.0 AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 2, Healthcare, Objective 1: Alaskans have access to and receive quality healthcare services.		
Description: Southcentral Foundation (SCF) would use the request grant funds to continue the implementation of improved and expanded best practices for early identification and treatment of Traumatic or Acquired Brain Injury (TABI), based on the 2022 Traumatic and Acquired Brain Injury (TABI) Early Identification and Intervention Services Planning, Design, and Capacity Building gap analysis project funded by the Alaska Mental Health Trust performed in 2022. The project will create and implement processes for early identification and intervention services for traumatic and acquired brain injury (TABI) that require system-level changes. There are three identified phases: 1) Adults empaneled to SCF clinics residing in the Municipality of Anchorage and the		

FY26 Budget Line Detail: Housing and Home & Community Based Services Focus Area

Matanuska-Susitna Borough; 2) Adults empaneled to SCF's rural Community Health Centers; 3) Children empaneled to Alaska's Tribal Healthcare System. The intent is to ensure individuals with TABIs are identified and provided supportive services at the earliest point in time possible to maximize their quality of life.

Analysis: According to the 2020 Alaska Native Injury Atlas, Alaskans have a high rate of traumatic brain injuries (TBI), which are present in 19.2% of all injuries reported to the Alaska Trauma Registry. Of the brain injuries reported, 30% of them were experienced by Alaska Native people, which is disproportionate to the percentage of Alaska's population that identifies as Alaska Native. The rate for Alaska Native people with Traumatic Brain Injury Hospitalizations was 25.4 per 10,000 people in Anchorage, which is nearly three times the state-wide Non-Native rate. The rates for Alaskan children ages 0-4 in 2018 reached 110.9 per 10,000; ages 5-9 was 56.1; 10-14 hit 73.5 and 15-19 stood at a staggering 113.7. In 2023, 800 SCF patients were diagnosed with a TBI, which is believed to be 40% with the condition due to under-coding. SCF is standardizing coding for these conditions to improve the accuracy of documentation. Trust funding provided new positions to provide services previously unavailable to SCF customers with a brain injury and implemented a robust staff training effort across SCF and ANMC.

This is year four of a five-year project using Trust funding, stepping down funding from the prior year with a planned final year in FY27. SCF is heavily invested in this project and is expanding its organizational resources beyond the detailed match for this application. Permanent system changes will be made throughout this project period and are a key outcome. A pro forma has been created for the services being developed under this project and is updated regularly by SCF to confirm that these system and service improvements remain after the grant project period ends.

Budget Line: Page 8, Line 23	Project Name: Gulf Coast TABI Expansion Project	Grantee Name: Independent Living Center
Proposed FY26 Amount: \$125.0 AG	Project Category: Direct Service	
Comp Plan Relevance: Goal 7, Services in the Least Restrictive Environment; Objective 2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement		
Description: The Gulf Coast TABI Expansion Project provides direct services to Trust beneficiaries with brain injury who live in the Gulf Coast region.		
Analysis: The Gulf Coast TABI Expansion Project provides resource facilitation, peer mentorship, and individual and group support to beneficiaries with a brain injury, their families, and caregivers. The area served is the Kenai Peninsula, Kodiak Island, and the Valdez/Cordova Census Area. This project fills a gap in services for this beneficiary group and compliments grants issued by the Division of Senior and Disabilities Services (SDS) to other regions. By FY28, SDS is expected to offer funding that will include this region of the state and Trust funding will no longer be needed.		

Budget Line: Page 8, Line 24	Project Name: HCBS Reform Contract	Grantee Name: These funds will be awarded through the State of Alaska procurement process
Proposed FY26 Amount: \$150.0 AG	Project Category: Contract	
Comp Plan Relevance: Goal 7, Services in the Least Restrictive Environment; Objective 2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement		
Description: A competitive RFP is issued for a contract to provide national-level expertise on Medicaid financing, program evaluation, administration, and implementation of home and community-based services (HCBS) in Alaska. The current contractor is HCBS Strategies, a company that works solely in this field, helping states transform their HCBS systems.		

FY26 Budget Line Detail: Housing and Home & Community Based Services Focus Area

Analysis: Having ongoing access to national-level expertise on the financing and implementation of HCBS services has benefited this focus area and the work of partner agencies, including the Division of Senior and Disabilities Services and Alaskan nonprofits. Moving an initiative forward, especially HCBS projects with Medicaid financing can be complex, ensuring timely implementation of key initiatives or service reforms that benefit the HCBS system and, ultimately, trust beneficiaries. Some past work completed by this contract includes a Medicaid Administrative Claiming plan for the ADRCs, leading to improved sustainability for those programs; an analysis of how to improve the environmental modification programs in Alaska; Medicaid waiver service standardization and compliance with federal rules, creation of a program evaluation for the Alzheimer’s Disease Program Initiative Grant in Alaska, and a proposed plan to implement community first choice in Alaska. Funding is expected to continue if the Trust and partners need the contract. Funding requested in FY26 is reduced to the right size of the contract to match current demand.

Budget Line: Page 8, Line 25	Project Name: Care Coordination Liaison	Grantee Name: DOH/SDS
Proposed FY26 Amount: \$89.3 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 7, Services in the Least Restrictive Environment; Objective 2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement		
Description: The Care Coordination Support project funds a position at the Division of Senior and Disabilities Services (SDS) to support care coordinators in the home and community-based services system. This position recruits new care coordinators, problem-solves issues faced by care coordinators operating in the HCBS service system and works with state agencies to make changes when systemic issues need to be resolved.		
Analysis: This position will be a liaison between the care coordinators providing services to Trust beneficiaries and other waiver recipients and SDS to troubleshoot both systemic issues and resolve day-to-day inquiries from care coordinators. The project is supported by both SDS and the provider community to help increase the number of care coordinators in Alaska and to address the systemic issues that led to the decline. Trust beneficiaries who qualify for a Medicaid waiver must use a care coordinator to organize and manage services. The lack of care coordinators was creating problems for people to access care. This position works to repair this part of the system to ease the burden on care coordinators, ultimately improving the service system for Trust beneficiaries. SDS, provider agencies, and care coordinators have advocated for continued funding due to the position's success, with improved communication and business practices being cited as the top reasons. There has been a slight increase in the number of care coordinators, but it is too soon to tell if this is a trend. Trust funds will support part of the cost of a Permanent Health Program Manager 2 position to serve as a Care Coordination Liaison, with SDS providing the remaining funds. Costs have increased to transition this position from a long-term non-permanent to a permanent position. This project is expected to have a duration of 5 years, based on performance, and then transfer into the DOH operating budget or GF/MH.		

Budget Line: Page 8, Line 26	Project Name: Home Modifications and Upgrades	Grantee Name: DOH/SDS
Proposed FY26 Amount: \$1,150.0 GF/MH recommendation	Project Category: Capital - Construction	
Comp Plan Relevance: Goal 7, Services in the Least Restrictive Environment; Objective 2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement		
Description: The Home Modifications and Upgrades project provides capital funding to the Department of Health for grants for home modifications for Trust beneficiaries. Home modifications (also called environmental modifications or e-mods) provide environmental improvements to the physical structure of a		

FY26 Budget Line Detail: Housing and Home & Community Based Services Focus Area

house or apartment so that the home can be more accessible for beneficiaries with physical disabilities. These environmental modifications help keep people in their own homes, reducing the need for a higher level of care, such as assisted living or skilled nursing facilities.

Analysis: Home modifications increase the accessibility of current housing so that Trust beneficiaries can move into or remain in their own homes when they acquire a physical disability. Home modifications are available to people wherever they reside, regardless of whether they own or rent and with whom they live. Typical kinds of assistance provided are accessibility modifications or additions (e.g., widening doorways, remodeling bathrooms and/or kitchens, installing entrance ramps, and related equipment.) All funds are awarded through a statewide competitive grant process to qualified organizations. An average of 20-30 people receive home modifications through this grant annually. The Trust no longer supports this grant with MHTAAR funding, as FY23 was the final year of funding after 21 years of support. The project has now transitioned to a GF/MH recommendation that still needs advocacy.

Budget Line: Page 8, Line 27	Project Name: Environmental Modifications Improvement	Grantee Name: DOH/SDS
Proposed FY26 Amount: \$94.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 7, Services in the Least Restrictive Environment; Objective 2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement		
Description: The Environmental Modifications Improvement Project will provide partner funding to pay for a position at the Division of Senior and Disabilities Services (SDS). This position has the goal of removing barriers for Trust beneficiaries and service providers to use the Medicaid Waiver home modification service effectively.		
Analysis: The environmental modification service offered through the 1915c HCBS Medicaid waivers is in significant need of reform. The administrative burden of the program has led to an almost non-existent provider list of construction contractors willing to bill for waiver services, and because of the extra paperwork involved, care coordinators are more likely to go through grant programs for home modifications than process a request through the waiver services even when a client is eligible. For example, the Medicaid waiver that serves people with physical disabilities serves roughly 3,000 people, but fewer than 25 environmental modification requests were completed last fiscal year. Improvements to the Medicaid waiver environmental modifications service will help to create or maintain the accessibility of a person's home so that they remain independent and delay or avoid an assisted living or nursing home. Project length is anticipated to be 3-5 years, evaluated annually. SDS is sharing the cost of this position with the Trust.		

Budget Line: Page 8, Line 28	Project Name: No Wrong Door- Coordinated Access to Services	Grantee Name: DOH/SDS
Proposed FY26 Amount: \$300.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 7, Services in the Least Restrictive Environment; Objective 2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement		
Description: The No Wrong Door - Coordinated Access to Services project will empower Trust beneficiaries to make informed decisions about their home and community-based services (HCBS) and long-term care by developing a network of service providers trained to focus on people, not process. This funding will enhance the existing work through the No Wrong Door federal grant being implemented by Senior and Disabilities Services.		

FY26 Budget Line Detail: Housing and Home & Community Based Services Focus Area

Analysis: The foundation of a No Wrong Door System is built on four key functions designed to transform access systems for all populations and all payers: State Governance and Administration, Public Outreach and Coordination with Key Referral Sources, Person-Centered Counseling (PCC), and Streamlined Eligibility for Public Programs. When fully implemented, a person needing help with HCBS will be able to contact any agency in the service network and receive person-centered, objective information that offers streamlined access to services. This project will enhance the work of the existing network and work to include other key agencies that may be operating in silos. The project length is anticipated to be 5 years, evaluated annually. A majority of the funding is provided through a federal grant administered by Senior and Disabilities Services, and general funds. A sustainability plan for the No Wrong Door service network is part of the work expected through the grant.

Budget Line: Page 8, Line 29	Project Name: Self-directed HCBS	Grantee Name: Independent Living Center
Proposed FY26 Amount: \$300.0 AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 7, Services in the Least Restrictive Environment; Objective 2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement		
Description: The Self-Directed HCBS project will explore how to implement self-directed home and community-based services (HCBS) in Alaska, including identifying what is needed to prepare provider organizations and people receiving services for this system change.		
Analysis: The Medicaid.gov definition: “Self-directed Medicaid services means that participants, or their representatives if applicable, have decision-making authority over certain services and take direct responsibility to manage their services with the assistance of a system of available supports. The self-directed service delivery model is an alternative to traditionally delivered and managed services, such as an agency delivery model. Self-direction of services allows participants to have the responsibility for managing all aspects of service delivery in a person-centered planning process. This will give Trust beneficiaries more choice, control, and independence regarding their services.” Alaska is the only state that does not have a participant-directed service delivery model for Medicaid Waiver recipients. Alaska has a participant-directed model within the state through the federally funded veteran's directed care (VDC) model, including employer and budget authority. The Independent Living Center initially implemented VDC in Alaska in 2015 and is now available in Kodiak, Chugach, and Copper River Census communities, MatSu, Southeast, and Fairbanks. This project would work with the Department of Health, advocates, and providers to explore how self-directed HCBS can be implemented in Alaska. A successful outcome will be incorporating self-direction into the HCBS Medicaid waivers through the available Medicaid authorities. This will ensure the long-term sustainability of the project. The project is estimated to take 3-5 years, with the largest unknown variable being CMS acceptance of a Medicaid waiver application or amendment.		

Budget Line: Page 8, Line 30	Project Name: ADRD Rural Outreach and Prevention	Grantee Name: Alzheimer’s Resource of Alaska
Proposed FY26 Amount: \$175.0 AG	Project Category: Outreach and Education	
Comp Plan Relevance: Goal 7, Services in the Least Restrictive Environment; Objective 2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement		
Description: The ADRD Rural Outreach and Prevention position will provide in-person outreach and education in rural Alaska about Alzheimer’s disease and related dementia. Funding includes a position and travel.		

FY26 Budget Line Detail: Housing and Home & Community Based Services Focus Area

Analysis: To address the lack of ADRD outreach and prevention/risk reduction services statewide, Alzheimer’s Resource of Alaska is developing a new department within the agency, ADRD Outreach and Prevention. This grant will fund one full-time position (or equivalent) dedicated to outreach and prevention/risk reduction of ADRD in areas of Alaska outside of the Municipality of Anchorage and the Mat-Su Valley. The outreach specialist will focus on building and strengthening partnerships with community-based organizations, especially those serving seniors. They will participate in community events, including health fairs and other outreach opportunities, to meet seniors and community members where they are. Outreach staff will provide warm hand-off referrals for education programs, care coordination, and other services. Objectives include increasing awareness of ADRD, improving access to services, identifying service gaps, supporting community connectedness with the public and community-based organizations, and improving the quality of life for Alaskans with ADRD and their caregivers. This project is expected to have a duration of 3-5 years, based on performance.

Budget Line: Page 8, Line 31	Project Name: Person Centered Transportation	Grantee Name: DOH/SDS
Proposed FY26 Amount: \$250.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 7, Services in the Least Restrictive Environment; Objective 2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement		
Description: The Person-Centered Transportation project will rework how the Trust invests in transportation and partner with the Department of Health to develop new approaches to grant-funded transportation.		
Analysis: Trust beneficiaries consistently identify reliable, accessible transportation as a need for their communities. Implementing transportation programs in Alaska is particularly challenging, and standard approaches have not met the needs of our beneficiaries, especially those who experience barriers to using traditional transportation services. Placement in DOH will allow for opportunities to work with Health Care Services on pilot projects to be tested for the Medicaid transportation program. The Trust will work with the Division of Senior and Disabilities Services to identify how this funding can create novel approaches to transportation and leverage other funding sources for long-term sustainability.		

Budget Line: Page 8, Line 32	Project Name: Aging and Disability Resource Centers	Grantee Name: DOH/SDS/Senior Community Based Grants
Proposed FY26 Amount: \$250.0 GF/MH Recommendation	Project Category: Direct Service	
Comp Plan Relevance: Goal 7, Services in the Least Restrictive Environment; Objective 2: Increase access to effective, flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement		
Description: Aging and Disability Resource Centers (ADRCs) serve as visible, trusted places for people to go for information and assistance with accessing services that support them in the community. The Trust provides partner funding, with the majority of funding from Medicaid Administrative Claiming and general funds.		
Analysis: ADRCs serve people of all ages and incomes who need assistance making an informed decision about long-term services and supports for themselves or someone they care for. Typical kinds of assistance provided are information, referral, and assistance, options counseling, benefit application assistance, Medicare counseling, and HCBS, Social Security, and housing program navigation. 6,806 unique individuals were served in FY23, but it is unclear how many are Trust beneficiaries due to a change in database platforms. The Trust will no longer support this grant with MHTAAR funding, as FY25 will be the final year of funding after 17 years of support. The project has now transitioned to a GF/MH recommendation that still needs advocacy.		

FY26 Budget Line Detail: Housing and Home & Community Based Services Focus Area

Budget Line: Page 8, Line 35	Project Name: Develop targeted outcome data	Grantee Name: DOH/SDS
Proposed FY26 Amount: \$45.0 GF/MH recommendation	Project Category: Data/Planning	
<p>Comp Plan Relevance: Goal 9 Workforce, Data, and Funding, Objective 9.5: Encourage a culture of data-driven decision-making that includes data sharing, data analysis, and management to link support services across Alaska DOH/DFCS divisions and other departments.</p>		
<p>Description: The Develop Targeted Outcome Data project provides funding for obtaining data on home and community-based services outcomes. These funds will be used to advance the state’s implementation and use of the National Core Indicators surveys and/or other best practices that can be used at the community level.</p>		
<p>Analysis: The National Core Indicators represent a major effort among states to standardize the collection of performance and outcome measures for home and community-based services on a system level. Standard data collection allows states to compare results with other states and providers' data for the establishment of national benchmarks but also to report in a more meaningful way than just numbers served, and dollars spent. These specific indicators may look at an individual’s access to the community, human security, relationships, choices, and goals is critical as Alaska undergoes significant systems transformation or others as there has been an increasing effort by the federal partners to make advances in measuring outcomes for home and community-based services. Senior and Disabilities Services and Center for Human Development staff have partnered together to issue and analyze the full suite of surveys for the Intellectual and Developmental Disabilities waivers and have found the pilot to be successful. FY25 will be the final year of MHTAAR funding after 7 years of support, as the project is intended to be incorporated into future operations budgets. New projects are vulnerable to being cut, so the project is recommended for GF/MH to provide additional advocacy.</p>		

FY26 Budget Line Detail: Workforce Priority Area

Budget Line: Page 9, Line 9	Project Name: The Alaska Training Cooperative	Grantee Name: UAA/CHD
Proposed FY26 Amount: \$685.0 MHTAAR, \$300.0 GF/MH recommendation	Project Category: Workforce Development/Training	
Comp Plan Relevance: Goal 9, Increase workforce capacity statewide, Objective 2, Advance the competencies of the healthcare, behavioral health, and public health workforce.		
Description: The grant funds operations for the Alaska Training Cooperative (AKTC), which manages and facilitates training for direct care staff statewide who work for Trust beneficiary-serving agencies. The AKTC's primary purpose is to train and equip the direct service workforce with evidence-based practices and skills. AKTC is part of UAA's Center for Human Development (CHD).		
Analysis: The AKTC trains staff in corrections, behavioral health, developmental disabilities, employment support, early childhood, domestic violence, hospitals, and primary care. The AKTC trained 3000 unduplicated staff in FY23, with several thousand more taking more than one course. 98% were satisfied or very satisfied with the quality of the training. Using a Likert scale of 0-5, the average change performance measurement outcome for trainees was 4.55, which indicates a strong motivation to use the knowledge gained in the training. The AKTC also receives funds from the University of Alaska, the Division of Behavioral Health, and the Division of Public Health, as well as some participant fees from taking classes. Their funding is diversified but grant-funded primarily by the Trust, which has decreased its MHTAAR commitment over the last several years, including the proposed FY 26-27 budget. The AMHTA recommends that the governor and legislature approve general fund dollars through the university system to fund the AKTC in FY26.		

Budget Line: Page 9, Line 10	Project Name: UAA School Psychology Program	Grantee Name: UAA/CAS
Proposed FY26 Amount: \$200.0 MHTAAR	Project Category: Workforce Development/Training	
Comp Plan Relevance: Goal 9, Workforce capacity, Objective 1, Strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization.		
Description: The MHTAAR funding will be used by the University of Alaska Anchorage (UAA) College of Arts and Sciences (CAS) to develop a school psychology graduate training program. This will be the first of its kind in Alaska, and it was identified as a need by the Mental Health in Schools Report II. The funding supports hiring faculty, developing curriculum, and obtaining accreditation and approval by the Board of Regents. The implementation of this program will strengthen the workforce and improve access to school-based mental health services.		
Analysis: The Trust-funded Mental Health in Schools Report recommends improving access to mental health professionals in schools across the state. Alaska has a 1:1500 ratio of school psychologists to students, far above the national standard of 1:500. This MHTAAR project aligns with the Early Childhood and Youth priority area in promoting early screening efforts for mental health and early intervention services. It also aligns with the Mental Health and Addiction Intervention Focus Area by improving treatment and recovery services.		
In FY24, UAA faculty developed the program coursework, syllabi, accreditation background work, and handbook and presented the curriculum to the UA Board of Regents for approval. The Regents fully endorsed and approved the School Psychologist program moving forward. The graduate school psychologist academic program is on track to begin its first cohort in the fall of 2024. The project will be sustainable by FY 27 as the third cohort of students will enroll in the program and support it through tuition fees.		

FY26 Budget Line Detail: Workforce Priority Area

Budget Line: Page 9, Line 11	Project Name: Peer Support Certification	Grantee Name: DOH/DBH
Proposed FY26 Amount: \$50.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 9, Increase workforce capacity statewide, Objective 2, Advance the competencies of the healthcare, behavioral health, and public health workforce.		
Description: These funds equip the Department of Health Division of Behavioral Health (DBH) to oversee the continued dissemination of the Certified Peer Support Curriculum training, oversight of the Commission for Behavioral Health Certification, Peer Support Statewide Conference, and recruiting and retaining a peer workforce.		
Analysis: DBH funded multiple agencies through a competitive procurement process that allowed them to train new and existing staff in best practice peer support training, which set them on the path to becoming certified peer support professionals I, II, or III through the Commission for BH Certification. 215 individuals were certified in FY23, the most in the three years since inception. Over 300 individuals received training in peer work statewide. The SOA Labor Department predicts workforce shortages through 2035, which means helping increase the capacity of the peer workforce is even more important. People with lived experience exist in every Trust beneficiary people group, so it is strategic to equip them to be a viable part of the mental health and substance misuse beneficiary workforce. The state opioid response grant through DBH also helps fund peer support certification training.		

Budget Line: Page 9, Line 12	Project Name: SHARP Access	Grantee(s): TBD
Proposed FY26 Amount: \$400.0 AG	Project Category: Workforce Development/Training	
Comp Plan Relevance: Goal 9, Workforce capacity, Objective 1, Strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization.		
Description: Strengthening Healthcare Access Recruitment Program (SHARP) provides grants to support non-profit beneficiary-serving agencies that serve youth, adults, or both. The SHARP program increases beneficiaries' access to healthcare by improving the healthcare workforce. SHARP supports healthcare workforce recruitment and retention of healthcare practitioners in medical, dental, and behavioral health disciplines through student loan repayment and direct financial incentives. The goal of SHARP is to increase the availability of healthcare services throughout the state, especially to rural and underserved populations. Participants in SHARP work at healthcare facilities throughout the state.		
Projects funded in FY24: <ul style="list-style-type: none"> • JAMHI- \$98.0, funds four clinicians, serving hundreds of beneficiaries in the Juneau region. • Alaska Psychiatric Institute (API)- \$85.0, funds six clinicians, serving hundreds of beneficiaries, statewide through the hospital. 		
Analysis: This AG funding line is needed to provide a partnership pathway for agencies to leverage their funds with AMHTA funds to secure clinicians to three-year contracts. SHARP has secured over 700 clinicians to multi-year contracts over the last decade, thereby stabilizing the healthcare workforce in many regions of the state. Since 2016, SHARP clinicians have seen over 100,000 beneficiaries, prescribed over 200,000 scripts, and totaled over 35 million in student loan repayments.		

FY26 Budget Line Detail: Workforce Priority Area

Budget Line: Page 9, Line 13	Project Name: SHARP Support	Grantee(s): DFCS/API
Proposed FY26 Amount: \$200.0 GF/MH Recommendation	Project Category: Workforce Development/Training	
Comp Plan Relevance: Goal 9, Workforce capacity, Objective 1, Strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization.		
Description: Strengthening Healthcare Access Recruitment Program (SHARP) provides grants to support non-profit beneficiary-serving agencies that serve youth, adults, or both. The SHARP program increases beneficiaries' access to healthcare by improving the healthcare workforce. SHARP supports healthcare workforce recruitment and retention of healthcare practitioners in medical, dental, and behavioral health disciplines through student loan repayment and direct financial incentives. The goal of SHARP is to increase the availability of healthcare services throughout the state, especially to rural and underserved populations. Participants in SHARP work at healthcare facilities throughout the state. These funds are specific to increase staff recruitment and retention at the Alaska Psychiatric Institute (API) operated by the Alaska Dept. of Family and Community Services (DFCS).		
Analysis: API to fulfill its mission and purpose as the flagship psychiatric hospital in Alaska, stable staff is a must. SHARP is a good tool for helping the hospital achieve that end, and partnering with Trust is moving them in that direction. API has successfully partnered with the Trust over the last three years in a 50/50 funding partnership for securing six clinician SHARP contracts. Those six contracts represent three years of retention and stability to the hospital workforce that was lacking in the years leading up to this workforce retention project. The six clinician positions within the hospital create an atmosphere and culture of safety and security for the Trust beneficiaries to receive improved care and the opportunity to step down to other community services. The plan going forward is for API to transition SHARP budgeting from a GF/MH to the general fund for their yearly budget. SHARP GF/MH funding for Alaska Psychiatric Institute (API) started in FY25, and this line is being continued through FY26-27, with the plan for the hospital to transition SHARP funding permanently to its budget.		

Budget Line: Page 9, Line 14	Project Name: Clinical Supervision Support	Grantee Name: AK Behavioral Health Association
Proposed FY26 Amount: \$200.0 AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 9, Workforce capacity, Objective 1, Strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization		
Description: Clinical supervision is critical for managing clinicians. Alaska Behavioral Health Association (ABHA) will use these funds for a clinical supervision program to build the infrastructure for training, certifying, and launching clinical supervisors statewide. This workforce infrastructure system change identifies this critical need in Alaska to build a training pathway that builds a clinically and culturally appropriate Alaska behavioral health workforce.		
Analysis: There is a profound lack of quality clinical supervision within the behavioral health system of care at the agency level. This limits the workforce capacity for equipping clinicians to provide good clinical care to Trust beneficiaries. ABHA is actively changing this system of care for the 90 agencies it supports through its trade association by building a clinical supervision teaching and equipping program to replicate clinical supervisors who are knowledgeable in providing quality clinical care. ABHA proposed to roll out this through a three-phased approach: planning, preparation, and implementation over three years. Rasmussen is working with ABHA to fund the first year with the Trust and then funding years two and three. At that time, the program will be self-sustaining through agency fees for obtaining the clinical supervisors, licensing process, and ongoing technical support from the Association.		

FY26 Budget Line Detail: Workforce Priority Area

Budget Line: Page 9, Line 15	Project Name: Individual Placement & Supports (IPS) Capacity Building	Grantee Name: DOH/DBH
Proposed FY26 Amount: \$30.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 3: Trust Beneficiaries have strong economic and social well-being, Objective 3 Expand resources that promote successful, long-term employment		
Description: The Individual Placement & Supports (IPS) Capacity Building project supports the Department of Health/Division of Behavioral Health staff in coordination, training, and oversight of IPS systems development and grantee support throughout the state. IPS is an evidence-based model of supported employment that supports Trust beneficiaries with disabilities or mental health conditions to sustain meaningful work, become more independent and financially stable and experience increased self-esteem. Funds are used for IPS program fidelity reviews, training, technical assistance, and general outreach and awareness related to beneficiary employment.		
Analysis: Activities associated with this project support IPS-related recommendations from the Work Matters Task Force, which convened in 2021-2022. In FY24 (through 3/15/24), this funding has supported 2 on-site fidelity reviews of two Kenai Peninsula programs implementing the IPS model, with findings that both were commendably in compliance with the model. It also supported bimonthly technical assistance sessions that provided tailored support to all IPS grantees to ensure the best practice is being implemented with high fidelity to the model. This funding also supports the facilitation of the statewide IPS steering committee that meets quarterly. Continued support of this funding will ensure continued expansion of IPS programming around the state and fidelity to the model for programs that are implementing IPS. Current funding is supported through FY27.		

Budget Line: Page 9, Line 16	Project Name: Alaska Workforce Profile	Grantee Name: DOLWD/Administrative Services Division
Proposed FY26 Amount: \$25.0 MHTAAR	Project Category: Data/Planning	
Comp Plan Relevance: Goal 9, Workforce, Data, and Funding, Objective 9.5 Encourage a culture of data-driven decision-making that includes data sharing, data analysis, and management to link support services across Alaska Department of Health and Social Services (DHSS) divisions and other departments.		
Description: This project allows the Trust access to the Department of Labor & Workforce Development's (DOLWD) Research and Data Analysis section to provide technical, and data analytical support on issues impacting Trust beneficiaries and the systems that serve them. The funding supports DOLWD staff time, expertise, and the use of data systems for consultation with the Trust.		
Analysis: This project assists the Trust in identifying and forecasting the workforce-related status and needs of Trust beneficiaries, and the systems that serve them. An example of the DOLWD team's work resulted in the data presentation to the Trustees in July 2023. Their work highlights the workforce problem, as well as providing pathways for bringing more practitioners to the field to help beneficiaries. The recent support is on planning for a potential update of the 2016 DOLWD, Trust, UAA Alaska Health Workforce Report, developing an analysis on workforce trends related to systems providing care to beneficiaries experiencing Alzheimer's Disease and Related Dementias (ADRD), technical support for the DOH SHARP program, and providing assistance on an upcoming project the Trust is collaborating with DBH focused on behavioral health provider workforce-related issues.		

FY26 Budget Line Detail: Workforce Priority Area

Budget Line: Page 9, Line 17	Project Name: Evidence Based and Promising Employment and Engagement Practices	Grantee Name: TBD
Proposed FY26 Amount: \$200.0 AG	Project Category: Various	
Comp Plan Relevance: Goal 3, Economic and Social Well-Being, Objective 3.1, Integrated Employment		
Description: Funds support agencies to provide evidence-based employment practices for Trust beneficiaries. Examples of these practices include Individual Placement and Support (IPS) and Employment Transition Services (Pre-ETS). These evidence-based practices require multiple agencies to work to provide employment counseling, employment coaching, ongoing treatment access, and support on the job site.		
Analysis: In the last year, examples of agencies providing services were Peer Power, Access Alaska’s Peer Support/Mentorship, and SAIL’s Pre-ETS program. These programs have supported hundreds of Trust beneficiaries through Peer Power’s conference training, Access Alaska’s peer mentoring program, and SAIL’s employment education and training support and counseling. These agencies represent examples of community-based support that helps equip beneficiaries to secure meaningful employment, while still engaging in community support and treatment for their disabilities.		

Budget Line: Page 9, line 18	Project Name: Direct Support Professional Training/Professional Development	Grantee Name: DOH/SDS
Proposed FY26 Amount: \$200.0 MHTAAR, \$200.0 GF/MH recommendation	Project Category: Capacity Building	
Comp Plan Relevance: Goal 9, Workforce capacity, Objective 1, Strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization.		
Description: The Direct Support Professional (DSP) training is an incentivized program for direct care staff and the agency they work for to support staff to complete the education and coaching deliverables required through their agency. If they complete DPS training, staff and their employer will receive financial incentives. The National Alliance for Direct Support Professionals (NADSP) certification program is considered one of the best competency-based training programs in the U.S. and is the model that SDS and UAA are partnering on for DSPs in the field. This program is administered through DOH’s Division of Senior and Disability Services (SDS).		
Analysis: SDS, UAA, and Alaska Association on Developmental Disabilities (AADD) planned and implemented a program around incentivizing a NADSP pilot with 15 agencies in FY23-24 with the American Rescue Plan Act (ARPA) funding. The program takes 18 months for a staff member to obtain their certification milestones, which include 100 hours of training and on-the-job coaching and application of the taught competencies. These combined agencies had 128 DSPs who worked through the training and certification levels in two cohorts. 59% of the participants completed their stage 1, 2, and/or 3 levels of certification. The participants and the host agencies considered this pilot successful. This process has supported the engagement, recruitment, training, and retention of DSPs for Trust beneficiary serving agencies in the intellectual and Developmental Disabilities (ID & D)D and mental health system. As the pilot was successful, the program is being fully implemented for agencies statewide in FY25, with the plan to continue into FY26-27.		

FY26 Budget Line Detail: Workforce Priority Area

Budget Line: Page 9, Line 19	Project Name: Alaska Psychology Internship Program	Grantee Name: WICHE
Proposed FY26 Amount: \$25.0 AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 9, Workforce capacity, Objective 1, Strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization.		
Description: WICHE is the Western Interstate Commission for Higher Education. The Alaska Psychology Internship Consortium (AK-PIC) is the platform for equipping students in the UAA psychology program, as well as doctoral students from other psychology programs who wish to train and work in Alaska, to complete an American Psychological Association (APA) accredited internship program in Alaska. An APA-accredited internship ensures high training standards for future Alaska psychologists; it is also instrumental in recruiting and retaining clinical psychologists to work in Alaska. This provides more practitioners in Alaska with an emphasis on rural hub villages. This is a program that supports UAA graduates, recruits out-of-state psychologists to Alaska, and trains them on how to serve Trust beneficiaries clinically in urban and rural regions.		
Analysis: Nine interns completed the program in FY24 and a total of 131 have finished the program since its inception 14 years ago. 61% of the interns took their first job upon graduation in Alaska, with 83% still working and residing in the state. The Alaska Division of Behavioral Health provides the funding for travel and academic training, while the Trust funding pays WICHE staff to facilitate the program and evaluation needed to maintain its APA accreditation. The other significant outcome of this program comes from the clinical provision hours provided by the interns to beneficiaries in rural Alaska, which is between 500-600 per year of their internship. By the end of FY27, this program is intended to be self-sustaining through tuition payments.		

Budget Line: Page 9, Line 20	Project Name: Alaska Area Health Education Centers	Grantee Name: UAA AHEC
Proposed FY26 Amount: \$150.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 9, Workforce capacity, Objective 1, Strengthen workforce capacity with improved recruitment and retention to obtain and maintain knowledge and support innovation and modernization.		
Description: The Alaska Health Education Centers (AHEC) are based statewide within the University of Alaska system and include six AHEC centers, with each state region represented. The AHEC system provides a framework system for implementing a pipeline healthcare system for adolescents to engage and learn about health-related careers. This system provides the infrastructure and ability for youth to gain experience and college credits toward enrolling in health-related disciplines within the university system.		
Analysis: The AHEC infrastructure provides the framework for “Grow Your Own” in Alaska by setting up a pipeline for adolescents to learn and get hands-on experience in the health care system. In FY 24, 13 communities participated by hosting health career camps in the following villages: Nulato, Rampart, Nome, Soldotna, Anchorage, Dillingham, Bethel, Newhalen, Sand Point, Perryville, Unalaska, Cordova, and Kotzebue. There were over 300 participants in these pipeline camps who gained knowledge of careers and credits, like Youth/Teen Mental Health First Aid. 93% of the participants indicated an increased knowledge and ability to apply the concepts learned from the certifications. The Trust will continue to assess the impact of its investment in this project; and that assessment will inform future funding recommendations.		

FY26 Budget Line Detail: Workforce Priority Area

Budget Line: Page 9, Line 21	Project Name: Supported Employment Workforce	Grantee Name: UAA/CHD
Proposed FY26 Amount: \$75.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 3, Economic and Social Well-Being, Objective 3.1, Integrated Employment		
<p>Description: The UAA Center for Human Development (CHD) provides planning, training, coordination, and collaboration with the Division of Vocational Rehabilitation, Senior and Disability Services, and community agencies to ensure a competent workforce to access supported employment and related services as beneficiaries seek competitive integrated employment. CHD oversees the best-practice training courses, maintenance of national certification as a training center through the Association for Community Rehabilitation Educators (ACRE), and ongoing technical assistance with agency staff and beneficiary support in the various pre-employment and employment models.</p>		
<p>Analysis: CHD maintains the National Certification in Employment Services (NCES) through the Association of Certified Rehabilitation Educators (ACRE). This allows CHD to equip SDS, DVR, and agency staff to provide certified employment coaching and consultation with potential employers and Trust beneficiaries. This includes customized employment, self-employment, and job coaching. In FY24, 38 agency/SOA staff completed the NCES course. On a Likert scale of 0-3, the participant's overall satisfaction with the instructors and content was 2.36, and the participant's likelihood of implementing what they learned in the community with beneficiaries was 2.32. The other significant development this last year is CHD staff working with AADD and SDS to change and edit the Conditions of Participation for Supported Employment with the HCB services. Once SDS completes this process, CHD will provide the needed Supported Employment support for agency staff to provide this best practice.</p>		

FY26 Budget Line Detail: Early Childhood and Youth Priority Area

Budget Line: Page 9, Line 25	Project Name: Help Me Grow Alaska: Community Outreach, Care Coordination & Dev Screening	Grantee Name: All Alaska Pediatric Partnership
Proposed FY26 Amount: \$150.0 AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 1: Programs Serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services, Objective 1: Promote practice-informed, universal screening efforts and early intervention services.		
Description: This project through the All-Alaska Pediatric Partnership (A2P2) will continue serving families statewide by ensuring the capacity of the Help Me Grow-AK web and call center-based Centralized Access Point (CAP) is sufficient to meet the increasing demand of callers and to continue to support availability and access to developmental screening and outreach done in local communities to engage families and children not being reached by other systems.		
Analysis: This project aligns with the Department of Health’s work and Trust strategy and comp plan goal to promote screening efforts and early intervention efforts in infancy and early childhood; it benefits beneficiaries experiencing developmental disabilities through increased early detection and intervention of developmental delays and disabilities. For FY24, the Help Me Grow Alaska CAP interacted with 1,675 families of which 1,667 (99.5%) were provided information or direct service referrals to meet their presenting needs. When looking at why families contacted CAP, the top needs three were for mental health (27.1%), neuropsychological evaluations (21.61%), and communication (15.88%). These contacts consisted of beneficiaries from 40 different communities across Alaska. Of these communities, 19 of them are off the road system and their residents often experience more complex issues accessing services. This project continues to experience increased demand from caregivers, and A2P2 is actively working on sustainability with partners at the state level to integrate and diversify funding from both new and existing projects to support this work. The Trust will continue to assess the impact of its investment in this project; and that assessment will inform future funding recommendations.		

Budget Line: Page 9, Line 26	Project Name: Intensive At-Risk Early Intervention Services (Foster/Child Welfare Involved Families)	Grantee Name: DOH/SDS/EIILP
Proposed FY26 Amount: \$460.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 1: Programs Serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services, Objective 1: Promote practice-informed, universal screening efforts and early intervention services.		
Description: This innovative project through the Department of Health/Senior and Disability Services/ Early Intervention/Infant Learning Program (DOH/SDS/EIILP) focuses on high-risk families with young children ages birth to three who experience developmental delays, disabilities, and early mental health/social-emotional concerns. Funding is administered by the State of Alaska’s Early Intervention/Infant Learning Program (EI/ILP) to four regional programs in Kodiak, Homer, Fairbanks, and Juneau to provide local EI/ILP services. Families are referred by OCS, community, or tribal agencies. Services provided to families include outreach, screening, and evaluation of high-risk children. Staff also provide evidence-based and relationship-based services which include developmental monitoring, parenting guidance, parenting classes and resource/referral support.		
Analysis: High-risk families for social welfare involvement have significant overlap with our Trust beneficiary groups. High-risk families are often transient and reluctant to engage with ILP due to experiencing a variety of difficulties such as navigating the child protection system, communication issues across systems, foster parents and birth parents, OCS staffing shortages, homelessness, food insecurity, and frequent placement changes. The services provided within this project help to remove barriers for these parents and families, support development, promote success in their home community, and ensure children are better prepared socially and developmentally for kindergarten which is a key indicator of later success. In FY24, the project impact includes continued implementation of programming aimed to connect with high-risk families through the 4 programs located in Fairbanks, Kodiak, the Kenai Peninsula, & Juneau.		

FY26 Budget Line Detail: Early Childhood and Youth Priority Area

There were 88 total referrals from OCS to these four programs (5 referrals were invalid, so they currently are receiving 99% referrals of all substantiated child abuse cases); 48 children who are currently enrolled are involved with OCS; 20 children/22% of children referred by OCS this year have been enrolled in ILP; only 6 children/7% of referrals have had screenings and been in normal ranges so not eligible for ILP services. All programs have signed MOAs with their local OCS office. Multiple outreach efforts were made this year including attending health fairs, outreach to tribes/tribal organizations, trainings to Head Start and daycares, and community partnerships with schools and hospitals. At minimum, four years of MHTAAR funding which began in FY23 is planned to have a birth cohort engage in services from birth to three. This timeframe will allow the project to work through the barriers and challenges within ILP with high-risk families, to gather consistent data related to outcomes, and to build policies for enhanced service delivery and financial sustainability.

Budget Line: Page 9, Line 27	Project Name: ILP Statewide Equity Project	Grantee Name: DOH/SDS/EIILP
Proposed FY26 Amount: \$300.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 1: Programs Serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services, Objective 1: Promote practice-informed, universal screening efforts and early intervention services.		
Description: This project through the Department of Health/Senior and Disability Services (DOH/SDS) will fund programming administered through SDS to increase access to Infant Learning Program/Early Intervention (ILP/EI) services for infants, toddlers, and their families. Rural programs have had less access to specialists who provide screenings and evaluations of vision and hearing. This funding will increase access to specialized screenings, developmental assessment, and interventions and reduce barriers to enrollment in rural areas, increasing equity in ILP/EI within small, rural communities.		
Analysis: The ILP/EI arena has been flat funded for many years, resulting in the discontinuation of some of the specialized services such as vision and hearing evaluations. The impact has been greater for Alaska’s rural communities because they lack access to these specialists in general. Small rural communities often lack access to other aspects of ILP opportunities as well due to a lack of infrastructure and workforce to implement the administrative aspects of running a sustainable ILP program. This project will work towards increased equity in ILP service delivery across regions. It will allow for the exploration and development of new strategies toward more fiscal equity across regions for ILP providers. First, it will develop a hub of service specialists in vision and hearing that are available to rural ILP providers to conduct these specialized screenings and evaluations of infants and toddlers. Second, it will consider other equity strategies such as a billing consortium to support Medicaid billing for smaller programs. The projected length of Trust funding for this project is 5 years to establish the hubs while addressing the gaps and challenges identified during the process.		

FY26 Budget Line Detail: Early Childhood and Youth Priority Area

Budget Line: Page 9, Line 28	Project Name: Youth Brain Injury Program Coordinator	Grantee Name: SERRC
Proposed FY26 Amount: \$246.8 AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 7: Services in the least restrictive environment, Objective 2: Increase access to effective and flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement.		
Description: SERRC, a non-profit educational service agency providing services statewide, is administering the Youth Brain Injury Program which is designing and implementing a system of support to address the needs of Alaska students with brain injury. This includes creating tools, educational materials, and training sessions for educators, students, and community stakeholders. The program also facilitates brain injury screening through the Division of Juvenile Justice (DJJ), assists school-based teams in implementing evidence-based return-to-school processes, and provides educational consulting for youth needing extra support after a brain injury.		
Analysis: This project addresses Trust beneficiaries with Traumatic Brain Injury (TBI) and identification of TBI in youth. In FY24, the Youth Brain Injury Collaborative added a regional coordinator position, supported 3 additional probation offices in screening youth for a history of brain injury, provided 25 presentations to educators, medical providers, and youth to build awareness on TBI and its impact, and provided support and community referrals to 35 youth identified with TBI. Plans are for SERRC to receive technical assistance in FY25 to work on sustainability of the project. SERRC is in conversation with state agencies to further support their work fiscally and has identified promising partners. FY26 is identified as SERRCs last year of Trust funding.		

Budget Line: Page 9, Line 29	Project Name: Screening & intervention for infants, children, or youth & their families	Grantee(s): To be determined
Proposed FY26 Amount: \$250.0 AG	Project Category: various	
Comp Plan Relevance: Goal 1: Early Childhood. Objective 1: Promote practice-informed, universal screening efforts and early intervention services.		
Description: This is a new bucket for FY26 that will focus on screening and early intervention strategies for infants, children or youth and their families. Early screening and detection of developmental, mental health, substance use disorders and traumatic brain injury leads to early intervention and increased successful outcomes. This funding will support direct service agencies working with infants, children, youth, and their families to include early screening, detection, and intervention of developmental, mental health, substance use disorders and traumatic brain injury, as well as supporting training for the workforce in implementation. Early Childhood and Youth Trust beneficiaries with developmental, mental health, substance misuse or even traumatic brain injury issues will benefit from this bucket funding. Funding may be used to support early intervention, new programs, expanding programs, operations support, and workforce development.		
Analysis: This funding will expand the Trust's reach in our screening and intervention efforts from early childhood to children, youth & their families. This funding is in alignment with the comp plan and the statewide need for increased screening and intervention for infants, children, youth, and their families. This funding will benefit Trust beneficiaries with developmental, mental health, substance use disorders, or TBI and their families.		

FY26 Budget Line Detail: Early Childhood and Youth Priority Area

Budget Line: Page 10, Line 32	Project Name: Pediatric Mental Health Care Access Program	Grantee Name: (DOH/DPH/WCFH)
Proposed FY26 Amount: \$171.6 MHTAAR	Project Category: Direct Service	
Comp Plan Relevance: Goal 1: Early Childhood. Objective 2: Provide ongoing support to ensure accurate identification and treatment of social-emotional needs for children and their caregivers, congruent with their cultural identification.		
Description: This project supports capacity development for pediatric primary care and behavioral health integration in pediatric settings through providing access of Alaska primary care providers and pediatricians to tele-psychiatric consultation through Seattle Children’s Hospital and connection to local resources through Help Me Grow Alaska. The project is through the Department of Health/Div. of Public Health/ Women’s, Children’s and Family Health (DOH/DPH/WCFH) program.		
Analysis: Integrated care increases access to early intervention for children and families experiencing behavioral health needs, effectively decreasing the need for higher levels of care. This integration strategy has been identified as a Trust statutory advisory board and Department of Health priority for several years. Training opportunities are included in this project and have expanded to include school counselors and school nurses, who often are the only person working in their capacity in their school district. The support and consultation opportunities have helped develop skills and decreased some of the isolation these professionals feel working in rural and remote Alaska without immediate peer support. The project continues to show positive results with high satisfaction reported from primary care providers. In the first two quarters of FY24, the pediatric consultation line provided 43 consultations for pediatricians/medical providers statewide. The majority of calls were related to medication and during the second quarter 8 were related to diagnosis consultation. Providers using the consultation line were from Southcentral and Southeast Alaska with four calls from Southeast communities that can only be reached by plane or boat and eight calls from rural communities on the road system but several hours from a larger community that offers pediatric behavioral health resources. The mean age of a child that the provider was seeking consultation for was 12 and the overall range was 3 years old to 17 years old; five were between ages 3 and 5, six between ages 6 and 10, seventeen between ages 11 and 14, fourteen were between the ages of 15 and 17, and one patient’s age was unknown. Seattle Children’s Hospital Partner Access Line-Pediatric Alaska (PAL-PAK) also provides care coordination and referrals through a partnership with Help Me Grow Alaska (HMG-AK). Currently there are 2,059 resources in the database that HMG-AK uses to offer information about behavioral health services and other social determinants of health-related needs, such as housing, food, and transportation services. Finally, as a part of this program, HMG-AK does outreach to provider locations across Alaska to increase awareness of the availability of these services, especially in rural Alaska. In Q1-2 of FY23, outreach visits were implemented in Kotzebue, Bethel, Juneau, and Fairbanks. This MHTAAR funding supports match funding required for the continuation of a federal award to support the PAL-PAK project. Trust funds are currently planned through FY27 though the funding will decrease considerably for FY27.		

FY26 Budget Line Detail: Early Childhood and Youth Priority Area

Budget Line: Page 10, Line 33	Project Name: Trauma Engaged Schools PBIS Coaching	Grantee Name: DEED - Health & Safety
Proposed FY26 Amount: \$130.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 1: Programs Serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services, Objective 1.2: Provide ongoing support to ensure accurate identification and treatment of social-emotional needs for children and their caregivers, congruent with their cultural identification.		
Description: This project will assist school districts to develop mental health supports for students of all ages, prioritizing rural and remote school districts who do not otherwise have available mental health resources. Funds support a long term non-permanent position within the Department of Education and Early Development (DEED) to provide support to staff (rural school counselors, school social workers, teachers, etc.) through monthly meetings which can include presentations on relevant topics as requested by the group, coaching to school districts which includes Positive Behavioral Interventions and Supports (PBIS) and trauma engaged coaching and training, and crisis response.		
Analysis: Data related to the COVID-19 pandemic indicates a significant need for student and family mental health supports and indicates schools as critical infrastructure for providing that support now and into the future. Teachers and faculty in all Alaska school districts, and particularly those smaller districts with fewer mental health resources, have expressed a need for increased mental health supports. Recent passed legislation supports medical assistance in schools which will expand school-based services across Alaska. The Department of Health is supporting the implementation of this legislation and more specifically behavioral health services in schools. Impact of this project includes serving 34 schools in FY24 Q1-3, 8 in rural districts. This position at DEED supports ongoing efforts to get rural school district staff informed and trained in Trauma-Engaged practices and has assisted in updating training on Adverse Childhood Experiences and schools. This project is also partnering with the Alaska Association of School Boards (AASB) to develop a coaching model for schools in implementing trauma engaged practices and the Partnership Access Line-Pediatric Alaska (PAL PAK) to support rural school counselors and social workers with a focus on those working itinerantly. For many of the Trust's school age beneficiaries, these school counselors are often their main support in rural areas. DEED is also collaborating with the Department of Health around the Medical Assistance in schools' initiative that was supported through the recent legislation. With the increased need and focus of such programming at the state level, continued funding for this project through FY27 is recommended.		

Budget Line: Page 10, Line 34	Project Name: Early Childhood Intervention: Pyramid Model	Grantee Name: DEED
Proposed FY27 Amount: \$130.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 1: Programs Serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services, Objective 1.2: Provide ongoing support to ensure accurate identification and treatment of social-emotional needs for children and their caregivers, congruent with their cultural identification.		
Description: Trust funds in FY27 will support a position within the Department of Education and Early Development (DEED) that will support the development and implementation of the Pyramid Model for infants and young children state-wide. This position will maintain training, coaching and support of provider staff in the application of the model to their care or classroom setting.		
Analysis: Early childhood Positive Behavior Intervention Supports (PBIS) is referred to as the Pyramid Model. The Pyramid Model is a comprehensive framework of evidence-based practices for early childhood special education personnel, early intervention personnel, early childhood educators and early care personnel, and the families of children birth to 5. It promotes healthy social, emotional, and behavioral outcomes for children birth to 5 and addresses challenging behaviors. This project will impact the infant and early childhood population which aligns with the Trust focus area and the comp plan. Currently, DEED and		

FY26 Budget Line Detail: Early Childhood and Youth Priority Area

early childhood community partners have begun the implementation of the Pyramid Model within the state which is guided by a Pyramid Model State-wide Leadership Team. Funding for this project will support and expand current efforts. Research supports implementation of this model and identifies that children have better social skills and less problem behavior in Pyramid Model classrooms. While this practice bolsters positive outcomes for children setting a foundation for future behaviors, it also impacts workforce with positive outcomes in terms of teacher retention for classrooms that implement the model. This funding is to be initiated in FY27 and is expected to run 3-5 years to ensure adoption of the model state-wide and high fidelity with the model.

Budget Line: Page 10, Line 35	Project Name: Reimagining Child Welfare Project	Grantee Name: Alaska Impact Alliance
Proposed FY26 Amount: \$350.0, AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 6: Alaskans are free from abuse, neglect, self-neglect, and exploitation, Objective 2 Promote early intervention in maltreatment and with families at risk for maltreatment.		
Description: This funding will support continued efforts by the Alaska Impact Alliance (AIA) to respond to families and children in foster care or in kinship placements through direct support mini grants and through the continued development and support of Family Resource Centers in Alaska. Family Resource Centers (FRCs) support families to be healthy & successful, contribute to a healthy community, and reduce the likelihood of child abuse and neglect by building the family’s protective factors. This funding helps new Family Resource Centers establish their programs, Parent Advisory Committees, staffing, certification, and compliance with assessment, evaluation, and referral tools.		
<p>Analysis: Child Welfare and foster care systems improvement has been prioritized by the Board of Trustees and resources were allocated for this purpose beginning in FY24. This funding supports capacity building and direct support for beneficiary families involved with or at risk of involvement with the child welfare system. The Alaska Impact Alliance (AIA) supports efforts in Alaska to respond more flexibly to families and children in foster care or in kinship placements as well as multiple prevention networks and projects related to child wellbeing in Alaska. Improved systems of family support through this work have the potential to improve multi-generational outcomes for Trust beneficiaries by interrupting the cycle of generational trauma to promote healing and wellbeing for families. FY24 impact of this project funding includes:</p> <ul style="list-style-type: none"> • Family Resource Centers: 621 families served since January 1; 14 people trained and certified in the assessment tools; 9 agencies signed up to start their orientation in July; development and support of FRCs in Anchorage, Fairbanks, Mat-Su, Kenai/Soldotna, Bristol Bay, Kodiak, Ketchikan, & Prince of Wales/Craig; • New FAMS (Family Assistance Management System) is being utilized by 3 agencies as the pilot • UReCares Stipend and Respite Program: 143 Applications since June 10, Lottery happens on July 1; 199 families will receive stipends • 907 Navigation App: Testing begins in August, Launch October 1 • 100% Communities Alaska Assessments: 3 Communities (Central Kenai Peninsula, Metlakatla Indian Community, Juneau) surveyed and reports done <p>FY26 funding will support two focus areas at AIA: 1) direct support to families and children through mini grants to address basic needs, respite, and other services, and 2) the development and support of FRCs in Alaska. Ongoing Trust and partner participation in AIA statewide systems planning will ensure continued alignment with State of Alaska and regional goals related to child welfare system improvements and increased beneficiary family wellbeing. Trust funding is planned to continue but decrease through FY27.</p>		

FY26 Budget Line Detail: Early Childhood and Youth Priority Area

Budget Line: Page 10, Line 36	Project Name: Infant, Early Childhood, & Youth Mental Health Capacity Building	Grantee(s): To be determined
Proposed FY26 Amount: \$325.0, AG	Project Category: Various	
<p>Comp Plan Relevance: Goal 7: Services in the Least Restrictive Environment, Objective 2: Increase access to effective and flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement.</p>		
<p>Description: This funding bucket is being expanded from early childhood to also include youth mental health capacity building. This funding will support direct service agencies working with infants, children, youth, and their family to address behavioral health related issues as well as supporting training for the workforce in addressing mental health issues. Trust beneficiaries with mental health, substance misuse or even traumatic brain injury issues will benefit from this bucket funding. Funding may be used to support early intervention, new programs, expanding programs, operations support, and workforce development.</p>		
<p>Projects funded in FY24:</p> <ul style="list-style-type: none"> • Anchorage School District - Early Childhood Mental Health Consultation Continuation \$25,000 <ul style="list-style-type: none"> ○ This project continues the Anchorage School District preschool mental health consultation services in three high needs, Title I schools serving preschool children in general education and special education settings. • Association for the Education of Young Children -Southeast AK - Circles of Security for Childcare Professionals (COSP) & Parents as Teachers (PAT) Support \$50,000 <ul style="list-style-type: none"> ○ This funding supports early childhood services and capacity building for the “Circles of Security for Childcare Professionals” (COSP) model and the established evidenced-based home visiting model “Parents as Teachers” (PAT) program in Juneau. • RurAL CAP - Early Childhood Center-Based Mental Health Consultation for RurAL CAP Child Development Center and Head Start \$88,500 <ul style="list-style-type: none"> ○ Funds are to increase access to infant & early childhood MH consultation services through AKBH for children and families in their Child Development Center & Head Start programs. • Postpartum Support International - Perinatal Mental Health Training: 5 days of in person training \$50,000 <ul style="list-style-type: none"> ○ These funds supported a five-day training in Anchorage that will increase beneficiary access to screening, referral, and treatment for Perinatal Mental Health Disorders. Alaska has higher than average rates of Perinatal Mental Health Disorders which unaddressed, are known to impact family systems. • Programs for Infants and Children - ILP Without Walls-Statewide Vision Services for Infants and Toddlers \$25,000 - vision evaluation for infants and toddlers. 		
<p>Analysis: The expansion of this funding to include youth reflects the expansion of the updated comp plan which identifies not only early childhood interventions but includes youth; this language is also now reflected in the Trust Early Childhood & Youth budget focus area. This funding is in alignment with the DOH Behavioral Health Road Map, recent legislation for medical assistance in schools, and Trust focused work that supports behavioral health in schools. Stakeholder feedback has consistently identified a need for more services for early childhood and youth. This budget line item will strengthen behavioral health system response for Trust beneficiaries and infuse the ability to address behavioral health related screening, evaluation, and intervention into a variety of potential touch points of the early childhood and youth population. This will expand access and response for our Trust beneficiaries.</p>		

FY26 Budget Line Detail: Early Childhood and Youth Priority Area

Budget Line: Page 10, Line 37	Project Name: Early Childhood Center-Based Mental Health Consultation	Grantee Name: RurAL CAP
Proposed FY26 Amount: \$88.5 AG	Project Category: Capacity Building	
<p>Comp Plan Relevance: Goal 1: Programs Serving young children promote resiliency, prevent and address trauma, and provide access to early intervention services, Objective 2: Provide ongoing support to ensure accurate identification and treatment of social-emotional needs for children and their caregivers, congruent with their cultural identification.</p>		
<p>Description: This project funds RurAL CAP to provide early childhood mental health consultation services and additional teacher support via a certified teacher at their Anchorage Child Development Center (CDC) and Head Start programs. To do so, RurAL CAP will employ a mental health clinician with early childhood experience and a certified teacher to deliver in-classroom coaching and individual and small group meetings to teachers & staff on early childhood needs, mental health, and skills to address these issues in the classroom. Through coaching and feedback sessions, teachers and staff learn how to support the overall social and emotional environments in their classrooms as well as learn specific strategies to address the developmental and behavioral health needs of the children and families involved in the programming. RurAL CAP is a nonprofit organization working in early education, housing, and health and well-being serve to alleviate the root causes of poverty.</p>		
<p>Analysis: This project is focused on improving early childhood educator capacities in teaching social emotional skills, responding to challenging behaviors so they can better meet the needs of children and families in their care, and to reduce early childhood educator stress and burnout by providing hands-on coaching and training in an area of reported high need that will lead to greater teacher retention. The focus of the project is early childhood children and their families with a focus on those experiencing developmental disabilities and delays. This is a three-year project that would allow teachers to deeply root and maintain their skills in supporting mental/behavioral health & developmental disabilities in the classroom. This would also support teacher retention in the first cohort of teachers as well as capture new staff that onboard to embed this knowledge into the system. In Q1 of FY24, a total of 225 hours of direct on-site support was provided, every teacher had received classroom support, 7 students were identified as needing in classroom support (4 of which have moved passed supports and are successfully managing behaviors), and no staff have left the center since the program started. Of note, prior to Q1, 3 staff had left their jobs at the childhood development center; once the onsite mental health support started, they had no turnover. Trust funding is planned through FY27 for this program.</p>		

Budget Line: Page 10, Line 40	Project Name: Improve social determinants of health for children, youth, and their families	Grantee(s): To be determined
Proposed FY26 Amount: \$265.0 AG	Project Category: various	
<p>Comp Plan Relevance: Goal 1: Early Childhood; Objective 3: Reduce the instances and impact of Adverse Childhood Experiences (ACEs) through community engagement and by improving social determinants of health.</p>		
<p>Description: Previous FY24 bucket titled “Improve social determinants of health for families and young children: Parenting & Family Supports, Home Visiting & related programs” has been updated for FY26 to be “Improve social determinants of health for children, youth, and their families.” This reflects the updated language in the new comp plan which identifies the Goal 1 area as “Early Childhood and Youth” and identifies the new Objective 1.3: Improved social determinants of health and strengthen family resiliency through a comprehensive framework to promote consideration of shared protection and risk factors. This funding will support direct service agencies working with children, youth, and their families as well as supporting training for the workforce in addressing social determinants of health. Trust beneficiaries with mental health, substance misuse or even traumatic brain injury issues will benefit from this bucket funding. Funding may be used to support early intervention that may impact a social determinant of health, new programs, expanding programs, operations support, and workforce development.</p>		

FY26 Budget Line Detail: Early Childhood and Youth Priority Area

<p>Projects funded in FY24:</p> <ul style="list-style-type: none"> • Southcentral Foundation Integrated Parenting & Family Support Services- \$265.0 This project implements culturally focused early intervention and home visiting support options for families with young children and implementation of the evidence-based “Family Spirit” home visiting model.
<p>Analysis: The US Department of Health and Human Services Office of Disease Prevention and Health Promotion identifies the social determinants of health (SDOH) as “the conditions in environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of- life outcomes and risks.” They identify 5 domains (economic stability, education access and quality, health care access and quality, neighborhood and built environment, and social and community context) that can deeply impact an individual and family’s health and wellbeing. For example, individuals who are exposed to violence are at increased risk for mental health and substance use disorders. Research literature supports intervening at the social determinant level. This funding will focus on programs that are aimed at addressing the social determinants of health, community level interventions that may impact social determinants of health, or the reduction of ACEs or the mitigation of ACEs for children, youth, and their families. These individuals are Trust beneficiaries. Prioritizing social determinants of health can build resilience, increase protective factors, and reduce risk factors that lead to mental health and substance use issues in children and adults.</p>

Budget Line: Page 10, Line 41	Project Name: Foster Care, Child Welfare Systems, and Kinship Programs	Grantee(s): To be determined
Proposed FY26 Amount: \$250.0 AG	Project Category: various	
<p>Comp Plan Relevance: Goal 6: Alaskans are free from abuse, neglect, self-neglect, and exploitation. Objective 2 Promote early intervention in maltreatment and with families at risk for maltreatment.</p>		
<p>Description: This funding bucket was renamed from “Foster Care and Child Welfare Systems Improvements” to “Foster Care, Child Welfare Systems, and Kinship Programs.” This funding will support direct service agencies working with infants, children, youth, and their families who are identified as at risk for involvement or currently involved in the foster care, the child welfare system, or are in a kinship caregiving situation as well as supporting training for the workforce in this arena. Funding may be used to support new programs, expanding programs, operations support, and workforce development.</p>		
<p>Projects funded in FY24:</p> <ul style="list-style-type: none"> • Alaska Impact Alliance- Reimagining Child Welfare Project \$400.0. This funding supports efforts in Alaska to respond more flexibly to families and children in foster care or in kinship placements. The agency supports multiple prevention networks and projects related to child wellbeing in Alaska. Improved systems of family support through this work have the potential to improve multi-generational outcomes for Trust beneficiaries by interrupting the cycle of generational trauma to promote healing and wellbeing for families. 		
<p>Analysis: Child Welfare and foster care systems improvement has been prioritized by the Board of Trustees and resources were allocated for this purpose beginning in FY24. This work is also supported by the comp plan which notes “In addition to improving the systems for responding to children and adults experiencing, or at risk of experiencing abuse or neglect, it is vital that we focus on preventing Alaskans from ever entering the system by supporting healthy, resilient families and healing intergenerational trauma.” This bucket is proposed for FY26 due to our continued need to address the risk factors associated with involvement with the social welfare system, the impact of involvement in the social welfare system or foster care, and to support kinship families who have stepped in to support children who can no longer be in their parents’ care.</p>		

FY26 Budget Line Detail: Early Childhood and Youth Priority Area

Budget Line: Page 10, Line 42	Project Name: Kinship Foster Caregiver Support	Grantee Name: Volunteers of America
Proposed FY26 Amount: \$150.0 AG	Project Category: Capacity Building	
Comp Plan Relevance: Goal 1: Early Childhood; Objective 3: Reduce the instances and impact of Adverse Childhood Experiences (ACEs) through community engagement and by improving social determinants of health.		
Description: This funding supports the Kinship Program at the Volunteers of America (VOA). The purpose of the Kinship Program is to offer services that promote health and wellness for relatives raising children in Alaska, as well as the children in their care. This project supports an array of services for caregivers and children that include emotional support, information & assistance, case management, support groups, caregiver training, respite and other supplemental services.		
Analysis: Parents may not be able to care for their children for reasons such as substance use, mental illness, incarceration, or death. Kinship families may prevent social welfare system involvement for these families. In these cases, when children enter the care of a relative (such as a grandparent, aunt, or adult sibling), the family is eligible for enrollment in the Kinship Program at VOA Alaska. Services are delivered by a peer worker who has lived experience as a child raised by relative caregivers and experience as a relative caregiver. There are significant and unique challenges to raising relative children, including the stigma that is associated with substance use or mental illness of parents, confusing navigation of the legal arrangements, caring for children with special needs, and the high level of family stress that accompanies the placement. The Kinship Care coordinator offers the family the support they need to navigate these challenges, build meaningful connections with others who have shared experiences, and support the development of these vulnerable children. For FY24 (from 7/1/23-5/20/24), the program has provided services to 189 individuals, including relative caregivers as well as children in the homes who have directly benefited from VOA services. These individuals consist of 90 children/youth/teens under the age of 19, 61 caregivers between the ages of 20 to 49, and 38 caregivers over the age of 50. Of those with a treatment plan on file for behavioral health services, top 5 diagnoses included trauma/stress/PTSD, behavioral/emotional (ADHD, oppositional, attachment, conduct), major depression, substance use, and anxiety. The average ACE score of those enrolled in Family Services was 4.62 overall, with 62% of individuals having reported several high ACEs (more than 4). Overall, the program has continued to grow in FY24 with additional families/children served and new services available to those enrolled. Psychotherapy, Home Based Family Treatment, and Intensive Case Management are among the new services implemented. VOA is working from a business plan developed through technical assistance from Agnew Beck to move towards sustainability. This program is recommended to receive Trust funding for FY26 as it's last year of Trust support. VOA plans to continue growing the program by providing additional billable services to meet the needs of families while also providing a path toward sustainability for this traditionally grant-funded program.		

Budget Line: Page 10, Line 43	Project Name: Family Services Training Center	Grantee Name: DOH/DBH
Proposed FY26 Amount: \$50.0 MHTAAR	Project Category: Direct Service	
Comp Plan Relevance: Goal 1: Early Childhood; Objective 3: Reduce the instances and impact of Adverse Childhood Experiences (ACEs) through community engagement and by improving social determinants of health.		
Description: This project through the Dept. of Health/Division of Behavioral Health (DOH/DBH) supports the Family Services Training Center (FSTC) in partnership with UAA under the Center for Human Development. The goal of the training center is to increase the accessibility of and enhance competency in using evidence-based and promising family treatment models for Alaska State Behavioral Health Providers. This funding supports training for early childhood, childhood, and youth service providers through the facilitation of a yearly 3-day Infant, Childhood & Youth (ICY) conference for providers state-wide.		

FY26 Budget Line Detail: Early Childhood and Youth Priority Area

Analysis: This project is in alignment with the comp plan and the Behavioral Health Roadmap in relation to the provision of services for the early childhood and youth population and workforce competencies; it supports early childhood, childhood, and youth providers state-wide through the implementation of the 3-day ICY conference. Workforce development is a critical issue in Alaska and this conference provides a forum for our workforce to come together to connect with other providers, to collaborate, and to learn new skills in working with the early childhood, childhood, and youth population. Additionally, the conference provides CEs for professionals to maintain their license for the provision of services.

The FY24 ICY conference sold out and had just under 200 attendees. It provided a forum for networking, collaboration, and learning for early childhood, childhood, and youth providers statewide. In FY26, DOH/DBH will continue to support year-round training through DBH funding of the FSTC, however, the Trusts funding will be reduced to support implementation of the Infant, Child, Youth (ICY) conference only. This funding is proposed to continue through 2027.

Budget Line: Page 10, Line 44	Project Name: ACEs Data Linkage and Analysis	Grantee Name: DOH/DPH/WCFH
Proposed FY26 Amount: \$100.0 MHTAAR	Project Category: Capacity Building	
Comp Plan Relevance: Goal 1: Early Childhood; Objective 3: Reduce the instances and impact of Adverse Childhood Experiences (ACEs) through community engagement and by improving social determinants of health.		
Description: This funding supports a staff position, the only dedicated Epidemiology Specialist I/II (ES I/II) in the Alaska Division of Public Health (DPH) Women's, Children's and Family Health program (WCFH) focused on child wellbeing epidemiology. This position enables expanded research capacity on Adverse Childhood Experiences (ACEs), protective factors, and links to health outcomes, focusing on families facing mental, behavioral, and substance use challenges.		
Analysis: This project aims to address the critical link between Adverse Childhood Experiences (ACEs) and lifelong health outcomes for Alaskans, focusing on Trust beneficiaries and children of Trust beneficiaries. ACEs are correlated with the development of mental health and substance use disorders which are representative of our Trust beneficiaries. This funding supports data analyses to inform data-driven strategies and policies for early intervention and prevention of behavioral health disorders. Key analyses will focus on the impact of the pandemic on child wellbeing, assessing the impact of household challenges on early school readiness and performance, factors related to OCS involvement, advancement within the OCS system, and progression into the DJJ system. Increased focus on linking caregiver records (e.g., mortality records), to study the impact of losing a caregiver during childhood on development, incarcerations, and protective factors will be emphasized. Additionally, this funding supports the continued development of the pre-birth household challenges screening tool. DPH will be blending funds with partners (e.g., Case Family Programs) to support a randomized clinical trial of the developed screener prior to widespread adoption. This screen is directly related to early identification and prevention of key factors that are associated in developing substance use issues, mental health challenges, and other developmental issues that mitigate optimized adult health. In FY23, this project supported and developed a comprehensive DPH framework for Adverse Childhood Experiences (ACEs) surveillance and published a report which summarizes broad prevention activities consistent with the CDC ACEs prevention recommendations. The position supported or developed 3 peer review publications, four research briefs, and one white paper on Pediatric Abusive Head Trauma. The data analysis that has been coordinated and generated from this position is critical in our understanding of ACEs data and the applicability of it in the areas of prevention and intervention for Trust beneficiaries. Continued funding is recommended for this project through FY27.		