

Illinois Department of Human Services

Program 590 – Crisis Care System

Grace B. Hou, Secretary

Rethinking “Mental Health Crisis”

- Historical definition of Mental Health Crisis
 - Public-safety driven response
 - Danger to Self or Others
- New era for crisis response
 - Health & well-being of the individual
 - Self-determination & autonomy
- Crisis defined by the individual

EXPANDING THE CRISIS SERVICES CONTINUUM

- DMH intends to establish a continuum of crisis services available for anyone, anywhere and at any time.
- DMH is committed to preserving existing community-based programs developed through the historic DMH programs:
 - 580 Crisis Staffing
 - 410 Capitated Community Care
 - 420 Eligibility Disposition and Assessment
- DMH is committed to expanding access to services to people who have not utilized existing community based programs:
 - Addressing inequities due to racial and geographic disparities
 - Supporting innovative/technological approaches such as Call4Calm

Program 590 Crisis Services

- Access to the traditional community-based mental health crisis stabilization and treatment services consistent with Medicaid "Rule 140" service definitions
 - Crisis Intervention
 - Mobile Crisis Team Services
 - Therapy/Counseling
 - Community Support
- Consideration for justice involvement and court diversion
- Program 590 grantees should be available to anyone within the community in need of mental health crisis treatment, regardless of payor status.
- It is further expected that Grantees operating Program 590 will submit claims for services as appropriate for individuals with a funding stream to support such claiming.

Integrating with the Community

- Regular communication and coordinated planning is expected between grantees and
 - Local hospitals
 - Police/fire, 911
 - and, when ready, the 988 Regional Crisis Call Hubs.
- DMH will develop a learning community that includes representation of all Program 590 Grantees to inform the development of the statewide continuum of crisis care including conducting community-based needs assessment activities.
- Program 590 Leaders will
 - Function as the IDHS/DMH liaison
 - Participate fully in the learning community
 - Complete needs assessment activities
 - Coordinate communications with local entities within the community(ies) served.

SAMHSA's Six Core Principles

- Addressing recovery needs
- A significant role for persons with lived experience
- Trauma informed care
- Utilization of zero suicide/suicide safer care
- Safety and security protocols for staff and clients who are in crisis
- A crisis response partnership with local law enforcement, dispatch and emergency medical services (EMS).

Developing Capacity

- Grantees shall have **or develop the capacity** to respond to mental health crisis and treatment needs within the community(ies) served. Funds can be used for:
 - Costs for community access to mental health crisis care services
 - Evaluation of unfunded individuals
 - Community access for both walk-in and telephone-based crisis contacts.
- Capacity shall also include **or be developed to include** the ability to respond with mobile crisis level services.
- Grant resources will also be applied to crisis assessment, crisis intervention and mental health treatment needs for individuals with no insurance coverage, or for the portion of crisis and treatment response not covered by an individuals' insurance plan.

Credentials of Crisis Program Staff

- Grantees shall ensure sufficiently trained and credentialed Mental Health Professionals (MHP) and Qualified Mental Health Professionals.
- Grantee shall ensure that QMHP and MHP existing staffing is maintained and shall plan for the employment of additional staff necessary to expand crisis response capacity in the community(ies) served to ensure availability of a team-based, mobile approach to crisis response.
- Each team must at a minimum contain an MHP and an Engagement Specialist with immediate access to a QMHP.

SAMHSA's Mobile Crisis Team Services Definition

- "24/7/365 rapid response to assess an individual in a crisis situation, offering community-based interventions and stabilization where the individual is located (for example at home, work, school, or anywhere else in the community)".
- It should be noted that Mobile Crisis Response services provided to individuals funded by Medicaid will continue to require a call to CARES and to follow Rule 140 for billing and implementation.
- Note that Grantees of Program 590 will also be expected to develop and provide Mobile Crisis Response Team services to individuals without Medicaid.

Content and Form of Application Submission

- Each applicant is required to submit a Uniform Application for State Grant Assistance. This is a 3-page document with the first page already completed by the Division of Mental Health. This document must be signed and dated by the applicant.
- Program Proposal
 - The Program Proposal shall not exceed 20 pages. If there are more than 20 pages, the remaining pages will not be reviewed.
 - Attachments must not contain criteria information. Attachments are NOT included in the page limitations.
 - The Program Proposal, including attachments should be sequentially page numbered.
 - All documents must be typed using 12-point type, 100% magnification and use black typeface on a white background, Except for letterhead and stationery for letter(s) of support.
 - The Program Proposal must be typed single-spaced with 1-inch margins on all sides
 - The PDF submission must be on 8 1/2 x 11-inch page size .

The submission shall include the 3-page Uniform Application, 20-page Program Proposal and attachments. These must be in PDF format and submitted as one document.

- Sub-recipient budget(s)
 - All sub-recipient budget(s) with narrative must be included with the application package.
 - Sub-recipient budgets shall be submitted on the DHS/DMH Budget template (GOMBGATU-3002-(R-02-17) (pdf))

Executive Summary: not to exceed 1 page 10 pts

The purpose of this section is for the applicant to present the agency:

- description,
- history,
- achievements,
- service experience in the provision of crisis mental health services,
- financial overview,
- equity advancement,
- and future goals.

Identify how future goals link to this funding opportunity and how the organization will ensure successful implementation of the local crisis system of care

Community(ies) of Focus and Statement of Need: this section should be covered in approximately 4 pages 20pts

The purpose of this section is to identify and describe the communities the entity is applying to serve.

- For areas outside Cook County, please include the county(ies) you intend to serve. In Cook County only, you may instead include zip codes.
- Include the U.S. Census data describing the age, gender, racial, and ethnic demographics of the community(ies) you intend to serve. Include any other relevant population-level data about the community(ies) to be served by the crisis system. You may use a table instead of a description.
- Include a justification about the need for an enhanced crisis services infrastructure to meet the needs of your community(ies). Discuss how this justification is consistent with the SAMHSA Crisis Services: Meeting Needs, Saving Lives initiative included as a resource in the grant.
- Include information on the service gaps and other problems related to the need for a crisis service system infrastructure development in your community(ies). Identify the source of any data provided.

Quality-Description of Program Services: this section should be covered in approximately 8 pages 30 pts

- The purpose of this section is for the applicant to
 - Describe the goals and measurable objectives of the proposed project and align them with the Statement of Need detailed in the section above.
 - Provide a staffing plan for the program that includes the Program Director and other proposed program staff. Describe how the applicant will ensure the staffing plan reflects the demographics of the community(ies) proposed to be served. Include a description of the level of experience, degree/qualifications, level of experience providing services to community(ies) of focus and familiarity with their culture(s) and language(s)*.
 - The staffing plan must be sufficient for the proposed crisis program to:
 - Provide screening and assessment services;
 - Operate 24-hour emergency services, 7 days a week;
 - Build capacity to provide a team-based mobile crisis response;
 - Provide crisis de-escalation and crisis resolution - services;
 - Respond to Call4Calm requests in your identified area;
 - Include a full-time supervisor position responsible for clinical oversight of the program as well as an active member and liaison to the ongoing system collaboration at a state and local level to ensure development and operation of a cohesive crisis system
 - Include sufficient numbers of additional staff necessary to expand crisis response capacity in the community(ies) served to ensure availability of a team-based, mobile approach to crisis response that includes at a minimum a MHP and an Engagement Specialist with immediate access to a QMHP.
 - Provide a timeline depicting the process your entity will engage in to immediately implement crisis services, ensuring that the Mobile Crisis Response team services are operational for the identified coverage area no later than July 1, 2022.

Capacity-Agency Qualification/ Organizational Capacity/Experience/Resources: this section should be covered in approximately 5 pages 20 pts

The purpose of this section is to describe the experience of your organization with similar projects and/or providing services to the community(ies) of focus for this grant. Include a description about:

- Describe the hiring approach your agency uses to ensure your staffing reflects the racial/ethnic communities you serve. Include a description of how your current staff demographics are reflective of the racial/ethnic community(ies) served. Explain any additional changes to your hiring processes that you will need to make to ensure that cultural and linguistic needs are addressed in the staffing of your crisis program.
- Identify how your organization implements culturally and linguistically responsive services that are aligned with the National Standards for Culturally and Linguistically Appropriate Standards (CLAS) (<https://thinkculturalhealth.hhs.gov/clas>) and reflect the cultural, racial, ethnic and linguistic characteristics of the community(ies) you proposed to serve. Describe any intentions to improve your implementation of these standards, including partnering with other organizations.
- List any current office locations where you provide services within the community(ies) that you intend to serve. Include a brief description of the types of services and how long you have operated at that setting.
- Describe any history of collaborating with other community-based organizations or members of the community that informed your program proposal. Please cite specific collaborative organizations or initiatives. Include any existing community-based governance structures or boards that will be responsible for ensuring successful implementation of the local crisis system of care infrastructure.
- Identify other service systems in your community(ies) that you will partner with in the proposed project. Describe their experience providing services to the community(ies) of focus, and their specific roles and responsibilities for this project.
- Describe your agency's experience accepting referrals and calls from any existing referral system(s). This includes warm handoffs, outreach and engagement activities, and system collaboration.

Data Collection and Performance Measurement: This section should be covered in approximately 2 pages 20 pts

- The purpose of this section is to provide specific information about how you will collect the required data for this program and how the data will be utilized to manage, monitor, and enhance the program. Provide a detailed description on your experience collecting this type of data and how you ensured it was successfully reported.
- This section should include a descriptive process, and not just an acknowledgement of what data needs to be reported on. Data that will be reported under this funding opportunity includes but is not limited to the information provided in the Program Standards and Measures.
- Because the larger Crisis System is still in development, entities funded under this grant may be required to conduct needs assessments, participate in surveys, or develop strategic plans. In this section please describe your agency's experience in participating in these activities via a community collaborative process.

Budget and Budget Narrative: 10 pts

- The purpose of this section is to evaluate the budget for
 - Narrative Inclusion
 - Fiscal Soundness
 - Programmatic Soundness.
- The range of anticipated awards published on the NOFO is an estimate.

Important Dates

- Closing Date for Applications: May 12, 2021, 5:00PM CST
- It is anticipated that Notices of State Award (NOSA) will be made in June 2021.
- New Programs will begin operation July 1, 2021
- It is expected that all funded programs will create mobile crisis team response capacity within the first year of operation.



Questions and Answers

- We will collect questions during this webinar using the Q&A function and respond for the remainder of the time we have available.
- Any additional questions outside of those asked in today's webinar must be sent to DHS.DMHGrantApp@illinois.gov
- All questions and answers will be posted on the Q&A page at:
<https://www.dhs.state.il.us/page.aspx?item=131578>