

FY23 ANNUAL REPORT

SUBMITTED 12/01/23

GEOGRAPHIC AREA: Audubon, Dallas, Guthrie Approved by Advisory Board: 11/13/23 Approved by Governing Board: 11/13/23

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Introduction

Heart of Iowa MHDS Region was formed under Iowa Code Chapter 28E to create a Mental Health and Disability Service Region in compliance with Iowa Code 225C.57. The annual report is a component of the Management Plan which includes three parts: Annual Service and Budget Plan, Annual Report and Policies and Procedures Manual in compliance with Iowa Administrative Code 441.25.

The FY2023 Annual Report covers the period of July 1, 2022 to June 30, 2023. The annual report includes documentation of the status of service development, services actually provided, individuals served, designated intensive mental health services, a financial statement including revenues, expenditures and levies and specific regional outcomes for the year.

<u>Heart of Iowa Regional Governing Board</u> Maggie Armstrong, Guthrie County Board of Supervisors Brad Golightly, Dallas County Board of Supervisors Rick Thompson, Audubon County Board of Supervisors Laurie Cooley, Adult Service Provider Clifford Carney, Family Member Representative Larry Loss, Family Member Representative Lesleyann Christensen, Regional Education System

Regional Children's Advisory Committee Larry Loss, Parent/Active Involved Relative of a child who utilizes behavioral health services Lesleyann, Christensen, Regional Education System Vacant, Early Childhood Advocate Deb Schrader, Child Welfare Advocate Megan Hicks, Children's Behavioral Health Service Provider Sharon Martin, Juvenile Court Officer Dr. Nate Noble, Pediatrician Alicia Geil, Childcare Provider Christopher Kickbush, CIT Officer-Waukee PD/Law Enforcement Maggie Armstrong, Regional Governing Board

Regional Adult Advisory Committee

Clifford Carney, Parents/Actively Involved Relatives of an Adult who utilizes behavioral health services Cindy Peeler, Iowa Hospital Association Laurie Cooley, Adult Service Provider Melinda Dennis, Adult Service Provider Jesse Swensen, Law Enforcement Ronald Forsell, Dallas County Attorney/Judicial System Ann Cochran, Public Health Jody Hollar, RN Brad Golightly, Regional Governing Board

A. Services Provided and Individuals Served

This section includes:

- The number of individuals in each diagnostic category funded for each service
- Unduplicated count of individuals funded by age and diagnostic category
- Regionally designated Intensive Mental Health Services

Table A. Number of Individuals Served for Each Service by Diagnostic Category

Disability Group	Children	Adult	Unduplicated Total	DG
Mental Illness	148	647	795	40
Mental Illness, Intellectual Disabilities	1	5	6	40, 42
Mental Illness, Other Developmental Disabilities	0	1	1	40, 43
Mental Illness, Brain Injury	0	1	1	40, 47
Intellectual Disabilities	0	2	2	42
Brain Injury	1	2	3	47
TOTAL:	150	658	808	

Table B. Unduplicated Count of Individuals by Age and Diagnostic Category

FY 2023 Actual	HEART OF IOWA MHDS Region	MI (40)	ID (42)	DD ((43)	BI (47)	Oth	ner	Total
GAAP			С	Α	С	А	С	А	С	Α	С	
Core												
	Treatment											
42305	Psychotherapeutic Treatment - Outpatient	18	4									22
42306	Psychotherapeutic Treatment - Medication Prescribing	1										1
71319	State MHI Inpatient - Per diem charges	1										1
73319	Other Priv./Public Hospitals - Inpatient per diem charges	6										6
	Basic Crisis Response											
32322	Support Services - Personal Emergency Response System	1		1								2
44301	Crisis Evaluation	215	64									279
44302	23 Hour Observation and Holding	1										1
44312	Crisis Stabilization Community Based Services (CSCBS)	1	12	1	1							15
44313	Crisis Stabilization Residential Service (CSRS)	27	33		1				1			62
44396	Access Center start- up/sustainability/coordination	9										9
	Support for Community Living											

32325	Support Services - Respite Services	1	1			1						3
32329	Support Services - Supported Community Living	17	1	2				1				21
	Support For Employment		<u> </u>									
50367	Day Habilitation	2	1					1				4
50368	Voc/Day - Individual Supported	6		1								7
50508	Employment	0		-								,
	Recovery Services											
	Service Coordination											
64200	Sub-Acute Services	2										
64309	Sub-Acute Services (6+ Beds) Core Evidence Based Treatment	3										3
	Core Subtotals:	309	116	5	2	1		2	1			436
Manda		305	110		2	· •			-			430
Ivialiua	Iowa Medical and Classification Center		1				1					
46319	(Oakdale)	2										2
74XXX	Commitment Related (except 301)	102	12									114
75XXX	Mental health advocate	72	1									73
	Mandated Subtotals:	176	13									189
Core Pl	lus											
	Justice System Involved Services											
25XXX	Coordination services	225	3									228
46305	Mental Health Services in Jails	139										139
FY 2023 Actual GAAP	HEART OF IOWA MHDS Region	MI (40)	ID (42)	DD	(43)	BI (47)	Oth	ner	Total
	Additional Core Evidence Based Treatment											
42397	Psychotherapeutic Treatment - Psychiatric Rehabilitation	1										1
	Core Plus Subtotals:	365	3									368
Other I	Informational Services		<u> </u>	<u> </u>	<u> </u>			<u> </u>	I	<u> </u>		
	unity Living Support Services											
22XXX	Services management	135	74									209
31XXX	Transportation	54	2	2								58
32326	Support Services - Guardian/Conservator	2	-	1								3
32327	Support Services - Representative Payee	1										1
32399	Support Services - Other	4										4
33330	Mobile Meals		ł			1	1	1				1
33340	Basic Needs - Rent Payments	11	1								-	12
33399	Basic Needs - Other	8	1									9
41306	Physiological Treatment - Prescription Medicine/Vaccines	3	1									4
42309	Psychotherapeutic Treatment - Partial Hospitalization	13	1									14
42310	Psychotherapeutic Treatment - Transitional Living Program	20										20
	Psychotherapeutic Treatment - Community	1										1

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46306	Prescription Medication (Psychiatric Medications in Jail)	133								133
	Community Living Support Services Subtotals:	385	80	3			1			469
Congre	egate Services									
64329	Comm Based Settings (6+ Beds) - Supported Community Living	1								1
64XXX	RCF-6 and over beds	6								6
	Congregate Services Subtotals:	7								7
Admin	Administration									
	Regional Totals:	1,242	212	8	2	1	3	1		1,469

B. Regionally Designated Intensive Mental Health Services

The region has designated the following provider(s) as an **Access Center** which has met the following requirements:

- Immediate intake assessment and screening that includes but is not limited to mental and physical conditions, suicide risk, brain injury, and substance use.
- Comprehensive person-centered mental health assessments by appropriately licensed or credentialed professionals.
- Comprehensive person-centered substance use disorder assessments by appropriately licensed or credentialed professional.
- Peer support services.
- Mental health treatment.
- Substance abuse treatment.
- Physical health services.
- Care coordination.
- Service navigation and linkage to needed services.

Date Designated	Access Center
July 1, 2021	Safe Harbor Crisis Center, Woodward, Iowa
May 1, 2021	Infinity Health, Osceola, Iowa

The region has designated the following **Assertive Community Treatment (ACT)** teams which have been evaluated for program fidelity, including a peer review as required by subrule 25.6(2), and documentation of each team's most recent fidelity score.

Date Designated	ACT Teams	Fidelity Score
July 2020	Eyerly Ball, Polk County	106

The region has designated the following **Subacute** service providers which meet the criteria and are licensed by the Department of Inspections and Appeals.

Date Designated	Subacute
5/1/2021	Infinity Health, Osceola, Iowa
2/1/2022	Mary Greeley, Ames, Iowa

The region has designated the following Intensive Residential Service providers which meet the following requirements:

- Enrolled as an HCBS 1915(i) habilitation or an HCBS 1915(c) intellectual disability waiver supported community living provider.
- Provide staffing 24 hours a day, 7 days a week, 365 days a year.
- Maintain staffing ratio of one staff to every two and on-half residents.
- Ensure that all staff have the minimum qualifications required.
- Provider coordination with the individual's clinical mental health and physical health treatment, and other services and support.
- Provide clinical oversight by a mental health professional
- Have a written cooperative agreement with an outpatient provider.
- Be licensed as a substance abuse treatment program or have a written cooperative agreement.
- Accept and service eligible individuals who are court-ordered.
- Provide services to eligible individuals on a no reject, no eject basis.
- Serve no more than five individuals at a site.
- Be located in a neighborhood setting to maximize community integration and natural supports.
- Demonstrate specialization in serving individuals with an SPMI or multi-occurring conditions and serve individuals with similar conditions in the same site.

A designated IRSH provider shall meet these criteria at initial application and annually thereafter.

Date Designated	Intensive Residential Services
In	Lakes Life Skills, Spirit Lake
Development	Lukes Lije Jkins, Spirit Luke

C. Financials

Table C. Expenditures

Fiscal Year 2023	Heart of Iowa Community Services MHDS Region	MI (40)	ID (42)	DD (43)	BI (47)	Admin (44)	Total
Core Do	mains						
COA	Treatment						
42305	Mental health outpatient therapy **	28,200.78					28,200.78
42306	Medication prescribing & management **	62.00					62.00
43301	Assessment, evaluation, and early identification **						0.00
71319	Mental health inpatient therapy-MHI	8,479.85					8,479.85
73319	Mental health inpatient therapy **	55,835.88					55,835.88
	Crisis Services						
32322	Personal emergency response system	1,300.00	5,100.00				6,400.00
44301	Crisis evaluation	208,933.21					208,933.21
44302	23-hour crisis observation & holding	413.14					413.14
44305	24-hour access to crisis response						0.00
44307	Mobile response **	613,566.65					803,906.65
44312	Crisis Stabilization community-based services **	3,676.40	0.00				3,676.40
44313	Crisis Stabilization residential services **	708,133.55	0.00		1,800.95		709,934.50
44396	Access Centers: start-up / sustainability	36,104.00					36,104.00

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	Support for Community Living					
32320	Home health aide					0.00
32325	Respite	516.94		1,737.68		2,254.62
32328	Home & vehicle modifications					0.00
32329	Supported community living	115,579.65	4,593.53		1,551.55	121,724.73
42329	Intensive residential services					0.00
	Support For Employment					
50362	Prevocational services					0.00
50364	Job development					0.00
50367	Day habilitation	14,394.43			25,135.08	39,529.51
50368	Supported employment	56,852.42	21,767.12			78,619.54
50369	Group Supported employment- enclave					0.00
	Recovery Services					
45323	Family support					0.00
45366	Peer support					0.00
	Service Coordination					
21375	Case management					0.00
24376	Health homes					0.00
	Sub-Acute Services					
63309	Subacute services-1-5 beds					0.00
64309	Subacute services-6 and over beds	12,643.00				12,643.00
	Core Evidence Based Treatment	-				
04400	Education & Training Services -					
04422	provider competency					0.00
32396	Supported housing					0.00
42398	Assertive community treatment (ACT)					0.00
45373	Family psychoeducation					0.00
	Core Domains Total	1,864,691.90	31,460.65	1,737.68	28,487.58	2,116,717.81
Mandat	ed Services					
46319	Oakdale	3,600.00				3,600.00
72319	State resource centers					0.00
74XXX	Commitment related (except 301)	104,588.04				104,588.04
75XXX	Mental health advocate	26,051.39				26,051.39
	Mandated Services Total	134,239.43				134,239.43
Addition	al Core Domains					
	Justice System Involved Services					
25XXX	Coordination services	265,763.21				266,169.56
44346	24-hour crisis line*					0.00
44366	Warm line*					0.00
46305	Mental health services in jails	75,110.41				75,110.41
46399	Justice system-involved services-other					0.00
46422	Crisis prevention training	235,249.49				235,249.49
46425	Mental health court related costs					0.00

74301	Civil commitment prescreening evaluation				0.0
	Additional Core Evidence Based Treatment				
42366	Peer self-help drop-in centers				0.0
42397	Psychiatric rehabilitation (IPR)	3,691.17			3,691.1
	Additional Core Domains Total	579,814.28			580,220.6
Other In	nformational Services				
03371	Information & referral				0.0
04372	Planning, consultation &/or early intervention (client related) **				0.0
04377	Provider Incentive Payment				0.0
04399	Consultation Other				0.0
04429	Planning and Management Consultants (non-client related)	2,187.58			2,187.5
05373	Public education, prevention and education **	242,501.91			199,268.9
	Other Informational Services Total	244,689.49			201,456.5
Commu	nity Living Supports				
06399	Academic services				0.0
22XXX	Services management	277,912.43			278,768.4
23376	Crisis care coordination				0.0
23399	Crisis care coordination other	21,262.54	16,153.00		37,415.5
24399	Health home other				0.0
31XXX	Transportation	1,950.00	450.00		2,400.0
32321	Chore services	156.00			156.0
32326	Guardian/conservator				0.0
32327	Representative payee				0.0
32335	CDAC	2,102.22			2,102.2
32399	Other support			3,080.60	3,080.6
33330	Mobile meals	12,829.15			12,829.1
33340	Rent payments (time limited)				0.0
33345	Ongoing rent subsidy	3,313.20			3,313.2
33399	Other basic needs				0.0
41305	Physiological outpatient treatment	906.76			906.7
41306	Prescription meds				0.0
41307	In-home nursing				0.0
41308	Health supplies				0.0
41399	Other physiological treatment	135,791.63			135,791.6
42309	Partial hospitalization	222,444.00			222,444.0
42310	Transitional living program				0.0
42363	Day treatment				0.0
42396	Community support programs	650.00			650.0
42399	Other psychotherapeutic treatment	217.72			217.7
43399	Other non-crisis evaluation				0.0
44304	Emergency care				0.0

ork services (work tivity/sheltered work) F 6 and over beds (64314, 64315 & 316) F 6 and over beds (64317 & 64318) L 6 and over beds her 6 and over beds Other Congregate Services Total on rect Administration rchased Administration Administration Total	91,854.71 91,854.71				456,106.61 204,860.82 660,967.43	0.00 91,854.71 0.00 0.00 91,854.71 456,106.61 204,860.82 660,967.43
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tivity/sheltered work) F 6 and over beds (64314, 64315 & 316) 6 and over beds (64317 & 64318) L 6 and over beds her 6 and over beds Other Congregate Services Total on	· · · · · · · · · · · · · · · · · · ·				456 106 61	91,854.71 0.00 0.00 0.00 91,854.71
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ivity/sheltered work) F 6 and over beds (64314, 64315 & 316) 6 6 and over beds (64317 & 64318) L 6 and over beds	91,854.71					91,854.71 0.00 0.00
rivity/sheltered work) F 6 and over beds (64314, 64315 & 316) F 6 and over beds (64317 & 64318)	91,854.71					91,854.71
rivity/sheltered work) F 6 and over beds (64314, 64315 & 316)	91,854.71					91,854.71
tivity/sheltered work) F 6 and over beds (64314, 64315 &	91,854.71					
						0.00
egate Services						
Community Living Supports Total	686,803.62	16,603.00		3,080.60		707,343.24
her 1-5 beds						0.00
L 1-5 beds						0.00
1-5 beds <i>(63317 & 63318)</i>						0.00
F 1-5 beds <i>(63314, 63315 & 63316)</i>						0.00
her vocational & day services						0.00
pported education						0.00
cational skills training						0.00
chiatric medications in jail						0.00
her family & peer support	7,267.97					7,267.97
h c f F L	chiatric medications in jail cational skills training ported education er vocational & day services 1-5 beds (63314, 63315 & 63316) 1-5 beds (63317 & 63318) 1-5 beds ter 1-5 beds	Iter family & peer support7,267.97chiatric medications in jailcational skills trainingported educationper vocational & day services1-5 beds (63314, 63315 & 63316)1-5 beds (63317 & 63318)1-5 bedsper 1-5 beds	Inter family & peer support7,267.97chiatric medications in jailcational skills trainingported educationported educationier vocational & day services5 1-5 beds (63314, 63315 & 63316)1-5 beds (63317 & 63318)1-5 bedsier 1-5 beds	Per family & peer support7,267.97chiatric medications in jailcational skills trainingported educationported educationer vocational & day services1-5 beds (63314, 63315 & 63316)1-5 beds (63317 & 63318)1-5 beds1-5 beds	Per family & peer support7,267.97chiatric medications in jailchiatric medications in jailcational skills trainingported educationported educationer vocational & day services1-5 beds (63314, 63315 & 63316)1-5 beds (63317 & 63318)1-5 beds1-5 bedser 1-5 beds	Per family & peer support7,267.97Image: Constraint of the second s

Regional Grand Total 4,492,800

FY 2023 Accrual	Heart of Iowa MHDS Region			
Revenues				
	FY22 Annual Report Ending Fund Balance		\$	1,044,438
	Adjustment to 6/30/22 Fund Balance			
	Audited Ending Fund Balance as of 6/30/22 (Beginning FY23)		\$	447,119
	Local/Regional Funds		\$	952,195.84
1010	Delinquent Property Tax			
25XX	Other Governmental Revenues	948,852		
4XXX-5XXX	Charges for Services			
5310	Client Fees			
60XX	Interest			
6XXX	Use of Money & Property			
8XXX	Miscellaneous	3,344		
9040	Other Budgetary Funds (Polk Transfer Only)			
	State Funds		\$	4,407,050.00
24XX	State/Federal pass thru Revenue			
2644	State Regional Service Payments	4,407,050		
2643	State Incentive Funds			
	Other			
	Federal Funds		\$	
2344	Social services block grant			
2345	Medicaid			
	Other		1	
	Total Revenues		\$	5,359,246
	Total Funds Available for FY23	\$ 5,806,365	1	

Total Funds Available for FY23	\$ 5,806,365
FY23 Actual Regional Expenditures	\$ 4,492,800
Accrual Fund Balance as of 6/30/23	\$ 1,313,565

D. Status of Service Development in FY2023

Crisis Service Planning

The Heart of Iowa Region works tirelessly to develop and refine the service delivery system to assure it is responsive and accessible for all in the region. The region utilized tools from Crisis Now to conduct a review of the current crisis system. Crisis Now is led by the National Association of State Mental Health Program Directors (NASMHPD) and developed with the National Action Alliance for Suicide Prevention, the National Suicide Prevention Lifeline, the national Council for Mental Wellbeing, and RI International. Inputs included population census of the region, average length of acute inpatient stay and average cost of acute bed per day.

	Crisis Service	Crisis Now	HICS Crisis Network
(r)	Mobile Crisis Teams	1	1
CRISIS NOW	23-hour observation	6	3 in development
Transforming Crisis Services	Adult CSRS	5	8
NASMHPD	Children's CSRS	Not reported	5

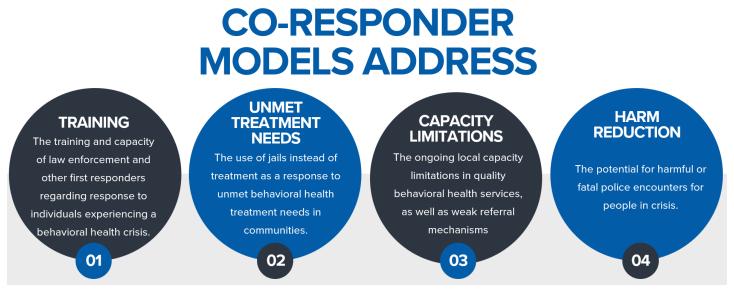
The HICS crisis network relative to the Crisis Now recommendation is very promising and moving in a positive direction. In FY23, the Heart of Iowa Region began discussion with the crisis center to add the services of 23-hour observation, community-based crisis stabilization and children's crisis stabilization residential. The crisis provider in FY23 identified other priority projects in their agency and so the region pivoted and began planning with a new crisis provider-Inside Out Wellness and Advocacy, to develop the full crisis service array as outlined in Iowa Code. Inside Out Wellness and Advocacy took over operations of the crisis center on August 5, 2023 and development of the additional aforementioned services will become operational over the next fiscal year. Part of this service development includes acquisition of a new facility that will allow for expansion of beds and services to include a physically distinct and separate area for children's crisis services.

Intensive Residential Service Homes

Intensive residential service homes (IRSH) are defined as intensive community-based services provided 24 hours a day, 7 days a week, 365 days a year to individuals with a severe and persistent mental illness who have functional impairments and may also have multi-occurring conditions. Providers of intensive residential service homes are enrolled with Medicaid as providers of HCBS habilitation or HCBS intellectual disability waiver supported community living and meet additional criteria specified in subrule 25.6(8). In FY23 Heart of Iowa partnered with the Sioux Rivers Region as they developed the IRSH service with Lakes LifeSkills. There are currently 4 beds located in Spirit Lake, with potential for expansion to other sites.

Co-Responder Program

During FY23 the Heart of Iowa Region sought to create a Co-responder program. The Co-responder program model implements a dedicated police officer and a mental health professional pair that responds to calls from dispatch during their regularly scheduled shift.



When implemented well, the Co-responder model has the potential to produce several benefits including; the creation of improved and more immediate responses to crisis situations, the ability to follow up with individuals, family members and caregivers after a crisis to reduce the likelihood of further crisis situations, a decrease in expenses arrests and jail admissions for individuals in behavioral health crisis, a reduction in psychiatric hospitalization and a more accurate on scene needs assessment. Training is a foundational component of the Co-responder program.

Officers that are part of the Co-responder team receive at a minimum 40 hours Crisis Intervention Training provided by Solution Point Plus.

The Mental Health Professional receives 24 hours Advanced De-escalation training, weapons safety, radio training and exposure to the department.





Police dispatch receive training on type of calls to dispatch the team to;

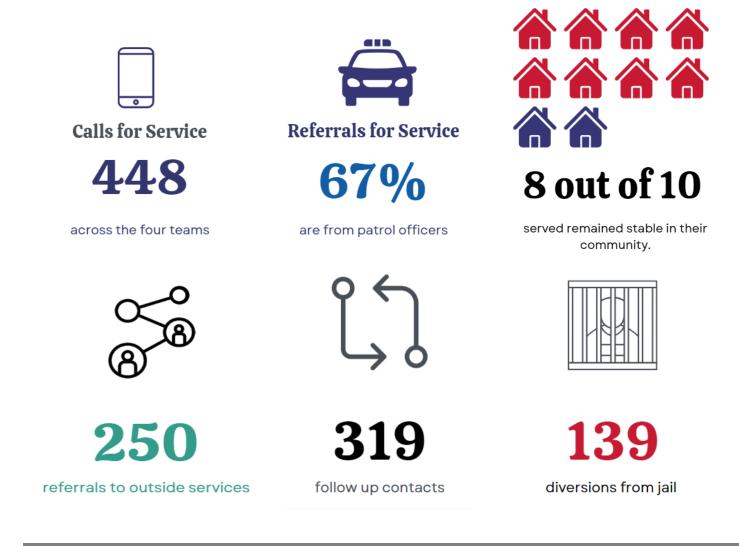
- Suicide Threat
- Suicide Attempt
- Overdose
- Psychiatric Patient
- Mental Health
- Welfare Checks (officer discretion)

Co-Responder Program

The Heart of Iowa Region partnered with Inside Out Wellness and Advocacy, City of Waukee, Clive, Urbandale and West Des Moines in FY23 to create four Co-Responder teams in Dallas County. The program has adopted a soft approach that includes officers not in uniform and unmarked cars.



Since inception the Co-responder teams have been collecting service data. FY23 data showcases promising outputs.



Co-Responder Program

It is important to note in the HICS Region the Co-responder teams are not a replacement for mobile crisis. Co-responder teams are a diversion model that are able to be dispatched and respond more quickly than mobile crisis teams and often encounter individuals with higher acuity needs. The visual below depicts where both programs fall in the jail diversion continuum of care.



Children's School Based Therapy

The HICS Region has been involved in providing access to services to children long before the Serious Emotional Disturbance (SED), Children's population was added to the core service requirements of the regional MHDS system. As part of our ongoing work, HICS partnered with school districts in the region and bordering the region that HICS residents attend that were identified to not have established school-based therapy programs. The region engaged Flowstate Health as the mental health provider and services were implemented January 2023 in the following schools; Guthrie Center Elementary, Middle and High School, Adair Elementary, Stuart Elementary, Dexter Elementary, West Central Valley Middle and High School.

In the first six months of offering the school-based therapy services Flowstate Health provided:

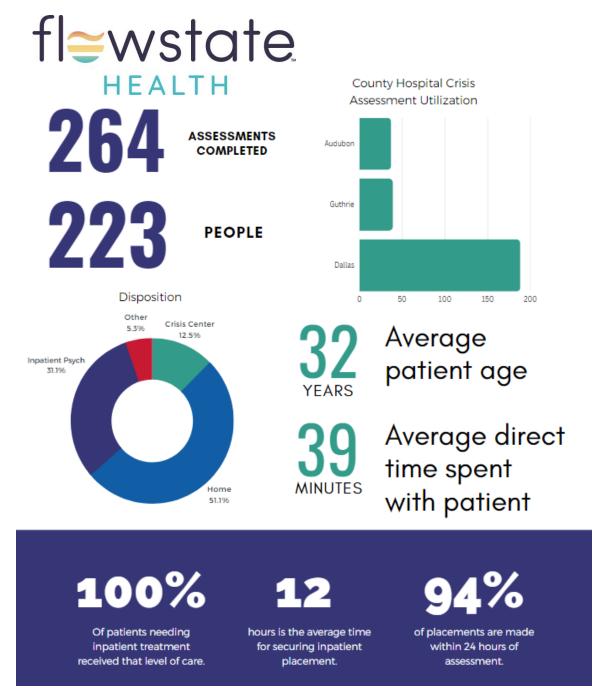


Development of these services has been very positive for the school, children and families served. Further, it should be noted that services continued throughout the summer months which is of utmost importance to maintain therapeutic relationships, behavior development and prevent lapse treatment.

E. Outcomes/Regional Accomplishments in FY2023

Crisis Services-Assessment and Evaluation

Flowstate Health provides crisis evaluation, coordination and bed finding to each ED in the HICS Region. Important takeaways from the data outlined below include; only 16% of patients served have repeat ED presentations, indicating patients are receiving the appropriate level of care and connection to resources the first time. Flowstate providers are spending a substantial amount of time providing assessment and evaluation at an average of 39 minutes with the patient and in general an additional 30 minutes completing a history and chart review before making a recommendation for treatment. This thorough evaluation again lends to the conclusion that patients are receiving the appropriate level of care and connection to resources. For patients needing acute inpatient treatment, there is a 100% placement rate with an average placement time of 12 hours; meaning patients are not languishing in local emergency departments but are receiving the care needed.

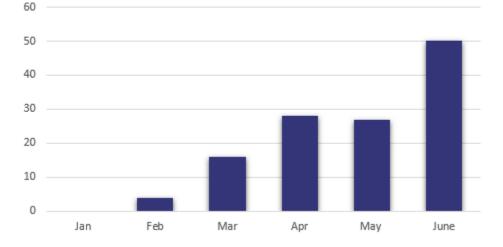


Crisis Stabilization Residential Services-Adult

2023 marks the 8th year of operations of the crisis center. In FY23, the center was operated by Zion Behavioral Health. The facility houses the region Transitional Living Program and the Crisis Stabilization Residential Program (CSRS). CSRS means short term services designed to deescalate a crisis situation and stabilize an individual following a mental health crisis and is provided in an organization arranged setting of no more than 16 beds.



CSRS Adult Admissions by Month



Standardized statewide data collection for CSRS services began January 2023.

The chart to left reveals near month over month increases in CSRS admissions at the Crisis Center.

145

Admissions to the Crisis Center from Jan – June 2023



Average days in CSRS service



Percent of CSRS admissions are discharged back to the community and do not require a higher level of care

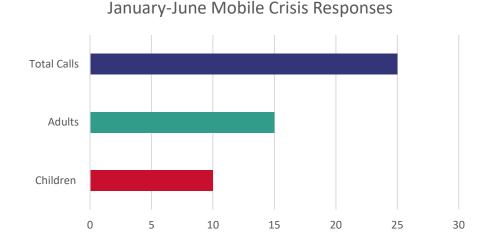
The crisis center is a welcoming, inclusive home like setting that lends to the nurturing, therapeutic environment rather than appearances of stark facility-based services.





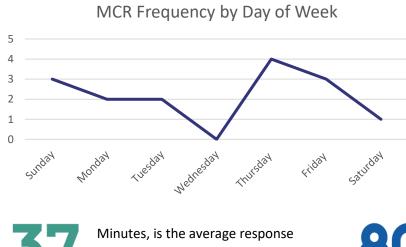
Mobile Crisis Response-Adults and Children

In FY23 Zion Behavioral Health operated the mobile crisis response teams in the region. Mobile response means a mental health service which provides on-site, face to face mental health crisis services for an individual experiencing a mental health crisis. Crisis response staff providing mobile response have the capacity to intervene wherever the crisis is occurring.



Mobile Crisis Response-Adults

As depicted above there were 15 mobile crisis responses for adults from January 1, 2023 to June 30, 2023.



time to a call. 93% of calls are responded to in under 60 minutes. Mobile Crisis is available 24 hours per day 365 days per year. Understanding the distribution and frequency of calls assists the crisis provider in developing staffing patterns and utilizing cross trained staff from the crisis center to be prepared and available to respond to a call. This is of utmost importance to avoid staffing shortages and ensure continuity of care from MCR to the crisis center.

> Of MCR occurred in the community or at a residence. This shows individuals are being deflected from using the ED for crisis mental health treatment.



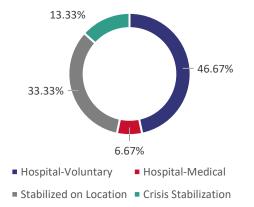
1 hour 11 minutes is the average length of time spent on site providing de-escalation, assessment & resources. This supports that crisis staff are working through the crisis with the individual, listening to their needs, providing support and not just completing a checklist and moving on.

Mobile Crisis Response-Adults

The chart to the right identifies the outcome of the MCR call. The majority of individuals served either are able to be stabilized on location or as a result of the crisis assessment are in need of acute inpatient psychiatric treatment.



Of Calls that were stabilized on location remained stable at 24 hour follow up. This again reflects the quality of care and the importance of connectivity to the correct resources. Adult Mobile Crisis Response Result of Call



Mobile Crisis Response-Children

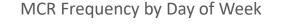
As previously depicted, there were 10 mobile crisis responses for children from January 1, 2023 to June 30, 2023. Overall, the outputs for Children's MCR are very similar to that of the adult population.

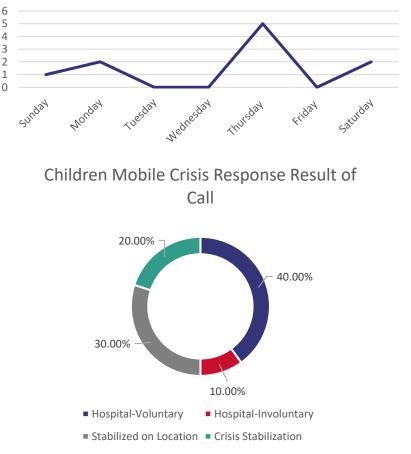


Minutes, is the average response time to a call. 93% of calls are responded to in under 60 minutes.



1 hour 10 minutes is the average length of time spent on site providing deescalation, assessment and resources.







Of MCR occurred in the community or at a residence.



Of Calls that were stabilized on location remained stable at 24 hour follow up.

Crisis Intervention Training (CIT)

The HICS Region has a long-standing relationship with Solution Point Plus (SP+), the premier crisis de-escalation and intervention training experts in the nation. In FY2023, HICS partnered with SP+ to provide eight Crisis Intervention Trainings throughout the HICS Region over the course of the fiscal year. Training is provided free of charge to law enforcement and all first responders in the region. The Crisis Intervention Training is a 40-hour hands on training. On day one participants learn advanced verbal communication skills and the various ways to respond to a person

experiencing a behavioral health crisis. Participants then learn the dynamics of serious mental illness on day two. On day three, participants learn about depression, post-traumatic stress, and the complex social problem of suicide. On day four participants dive into advance topics surrounding untreated serious mental illness and public safety. On day five first responders learn to look at their own mental wellness as a way to guide their responses in all human



interactions. The week is completed when participants pass a written exam and a practical application assessment. Throughout the week scenario-based training is utilized to develop the skills of the participants. SP+ uses a community-based training model. That is, they bring in local resources and stakeholders to foster community relationships. There is tremendous value in first responders knowing what resources are available in their community. The premise of this course is to promote behavior change through human connection. The HICS Region has a goal of having 100% of law enforcement trained in CIT.

What are law enforcement officers are saying about CIT?

"I appreciate an alternate perspective on policing and a police officers mindset. I felt like that actually resonated with me as opposed to a 'tactical' outlook from a lot of other trainings." "Great training very needed."

375

Law enforcement officers were trained in CIT during FY23.

"At the start of this week I was resistant to this type of training. Midweek I started to come around. Today I feel this was great training. I'm very happy to have attended."

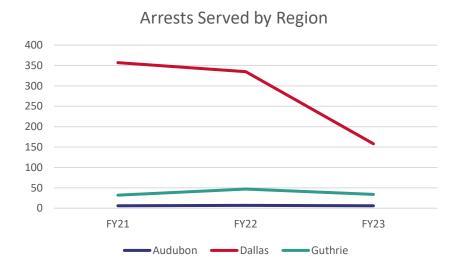
"This is my 2nd training. I've thought these are two of the best classes I've had. CIT shows officers how to deal w/people w/out the heavy hand, using empathy. It's great for almost every contact we have. Officer wellness and resiliency are also important we had one hour @ the academy 30 yrs ago. I think we need atleast 8 hrs every year." "You guys were awesome the training has changed me. There is life beyond law enforcement."

> "I definitely learned more about the different mental illnesses out there. Doing role plays helped me learn what I need to do work on when talking to subjects that are going thru mental illness or having some crisis in their life. I enjoyed the live scenarios."

> > "Great presentation with real information presented by real people with real experience."

Jail Alternatives Program

Each member county in the HICS Region is a Stepping Up County. The Stepping Up initiative brings community partners together to support local jurisdictions to establish measurable goals that demonstrate reduced prevalence of serious mental illness across the justice system. Additionally, Dallas and Guthrie Counties are also Innovator counties, 2 of 44 innovator counties in the nation. Innovator counties are able to demonstrate that they have accurate, accessible data on the prevalence of serious mental illness at their county jail. The HICS Jail Alternatives program is a key piece of this collaborative approach to diversion. The goal of the Jail Alternatives program is to help individuals and families identify unmet needs and assist in coordinating services in order to reduce jail time, as well as eventually reducing overall recidivism. HICS takes a multi-system approach to provide resources that will help legal and law enforcement professionals to understand the steps more fully in the process of jail diversion and where to access resources.



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8 out of every 10 people arrested and served in FY22 did not have an arrest and service in FY23.



Referrals for individuals served in the Jail Alternatives Program was made to services and providers for basic needs, financial supports and healthcare.

77%

83%

The graph depicts arrests by county over the past three fiscal years that the Region Jail Alternatives Staff provided services to.

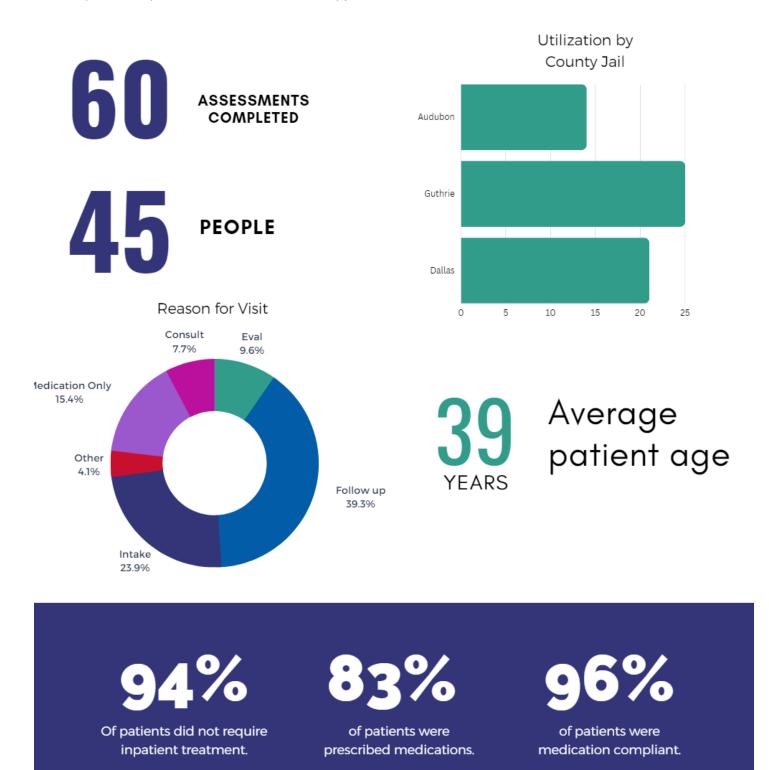
Over time fewer arrests are being served by the region, which may show a correlation in the buildup of the crisis array of services and diversion from arrests through programs like Co-responder and mobile crisis response team. This is most evident in Dallas County as the large decrease coincides with the implementation of the four Co-Responder teams.

Of individuals with arrests served by the region in FY23 had been released from a prior incarceration for longer than 6 months when arrested in FY23.

Decrease in total days incarcerated from FY22 to FY23, indicating the Jail Alternative Program is successfully screening and connecting individuals into appropriate treatment and services rather than incarceration.

103 individ Alterr treatr

Treatment Connections for individuals served in the Jail Alternatives Program. These are treatment related appointments after released from jail. A key component of the Jail Alternatives Program is provision of ensuring individuals receive access to proper assessment, screening and evaluation in relation to mental health needs. In FY23, 83 Brief Mental Health screenings were completed. The Jail Alternative Program Coordinators are able to facilitate tele psych appointments with Flowstate Health to provide psychiatric assessment and medication management in the jail. The data below outlines services provided by Flowstate Health in the county jails in FY23.



To learn more about our programs and providers:

Co-Responder Program: <u>https://hicsiowa.org/resources/cit-co-responder-program/</u> Flowstate Health: <u>https://www.flowstate.health/</u> Inside Out Wellness and Advocacy: <u>https://insideoutiowa.com/</u> Solution Point Plus: <u>https://solutionpointplus.com/</u>