

## Submitted <br> 12/01/23

Geographic Area: CEDAR, CLINTON, JACKSON, MUSCATINE \& SCOTT Approved by Advisory Board: --/----
Approved by Governing Board: --l----


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## Introduction

The Eastern Iowa MHDS Region, hereafter referred to as the EI Region, was formed under Iowa Code Chapter 28E to create a Mental Health and Disability Service Region in compliance with Iowa Code 225C.57.

In compliance with IAC 441-25, the EI Regional Management Plan includes three parts: Annual Service and Budget Plan, Policies and Procedures Manual, and the Annual Report.

The EI Region's Governing Board includes voting and ex-officio members for FY23. The Regional Governing Board is ultimately responsible for: (a) the advancement of a regional management plan; (b) the development of access to a regional service system for adults with mental illness, intellectual disabilities, developmental disabilities and brain injuries and children with serious emotional disturbances; and (c) the administration of the non-Medicaid funded Mental Health Disability Services (MHDS) and children's behavioral health services as outlined in Iowa Code.

The Adult Regional Advisory Committee is appointed by the Eastern Iowa MHDS Governing Board and has two (2) from each member county's advisory committee and a director from the Region's Governing Board. The committee members shall include individuals who utilize services or actively involved relatives of such individuals, service providers and the EI Region's Management Team. The Adult Advisory Committee shall advise the Governing Board as requested.

The Children's Regional Advisory Committee is appointed by the Governing Board. The committee members shall be the parents of children who utilize services or actively involved relatives of such children, a member of the education system, an early childhood advocate, a child welfare advocate, a children's behavioral health service provider, a member of juvenile court, a pediatrician, a childcare provider, a local law enforcement representative, a director from the Regional Governing Board and members of the EI Region's Management Team. The Children's Advisory Committee shall advise the Governing Board as requested.

Below is the current representation from the Region. Vacant Director positions acknowledged in the chart listed below as TBD* will be identified and recruited based upon Advisory Committee recommendations:

The EI Region Governing Board of Directors for FY 23 include:

| Governing Board of Directors | Representing | Voting <br> Member |
| :---: | :---: | :---: |
| Dawn Smith-ended $12 / 31 / 2022$ <br> Bruce Barnhart-started $1 / 1 / 2023$ | Cedar County Board of Supervisor Representative | Yes |
| Jim Irwin | Clinton County Board of Supervisor Representative | Yes |
| John Willey-BOS Term ended $12 / 31 / 22$ John Willey-Person designated started $1 / 1 / 23$ | Jackson County Board of Supervisors Representative/ Person designated by the Jackson County Board of Supervisors | Yes |
| Jeff Sorensen | Muscatine County Board of Supervisor Representative | Yes |
| Ken Beck | Scott County Board of Supervisor Representative | Yes |
| TBD* | An Adult/Actively Involved Relative of an Adult who Utilizes Mental Health and Disability Services | Yes |
| Nancy Nauman | An Individual Representing Adult Service Providers | No |


| TBD* | A Person, who is a parent of a child who utilizes children's <br> behavioral health services or an actively involved relative of such <br> child | Yes |
| :--- | :--- | :---: |
| Aaron Roome | An Individual representing the Education System | Yes |
| Joan McGovern- <br> Resigned 12/14/22 <br> TBD* | An Individual representing Children's Behavioral Health Service <br> Providers | No |

The EI Region Advisory Adult and Children Board Members for FY 23 include:

| Adult Advisory Committee | $\quad$ Representing |
| :--- | :--- |
| Vacant | Cedar County Individual Representing Service Providers |
| Vacant | Cedar County Active Relative/Individual Utilizing Services |
| Melissa Peterson | Clinton County Individual Representing Service Providers |
| Lynne Hilgendorf | Clinton County Active Relative/Individual Utilizing Services |
| Susie Ruchotzke | Jackson County Individual Representing Service Providers |
| Holly Parmer | Jackson County Active Relative/Individual Utilizing Services |
| Nancy Nauman | Muscatine County Individual Representing Service Providers |
| Luana Gredell | Muscatine County Active Relative/Individual Utilizing Services |
| Richard Whitaker, PhD | Scott County Individual Representing Service Providers |
| Vacant | Scott County Active Relative/Individual Utilizing Services |
| John Willey | A Director of the EI Region Governing Board of Directors |


| Children's Advisory Committee <br> Members | Representing |
| :--- | :--- |
| Vacant | A Parent/Actively Involved Relatives of a Child who Utilizes <br> Children's Behavioral Health Services Representative |
| Aaron Roome | An individual representing the Education System |
| Joan McGovern-resigned 12/14/22 <br> Vacant | An individual representing Children's Behavioral Health Service <br> Providers |
| Michael Terry | An Early Childhood Advocate Representative |
| Jen Armstrong | A Child Welfare Advocate Representative |
| Megan Tabor-resigned 2/16/23 <br> Elizabeth Finerty-began 3/3/23 | An individual representing the Juvenile Court System |
| Vacant | A Pediatrician |
| Vacant | An individual representing Childcare Providers |
| Lisa DuFour | A Local Law Enforcement Representative |
| John Willey | A Director of the EI Region Governing Board of Directors |

The FY23 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 provided, individuals served, designated intensive mental health services, a financial statement including revenues, expenditures and levies and specific regional outcomes for the year.

## 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 <br> Total | DG |
| :--- | ---: | ---: | ---: | :--- |
| Mental Illness | 305 | 2638 | 2943 | 40 |
| Mental Illness, Intellectual Disabilities | 0 | 5 | 5 | 40,42 |
| Mental Illness, Intellectual Disabilities, Other Developmental <br> Disabilities | 0 | 1 |  | 1 |
| Mental Illness, Other Developmental Disabilities | 0 | 1 | $40,42,43$ |  |
| Intellectual Disabilities | 0 | 9 | 4 | 40,43 |
| Other Developmental Disabilities | 0 | 4 | 9 | 42 |
| Brain Injury | 0 | 3 | 4 | 43 |
| Total | 305 |  | 2661 | 3 |

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

| FY 2023 | Eastern lowa MHDS MHDS Region | MI (40) |  | ID(42) |  | DD(43) |  | BI (47) |  | Other |  | Total |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | A | C | A | C | A | C | A | C | A | C |  |
| Core |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Treatment |  |  |  |  |  |  |  |  |  |  |  |
| 42305 | Psychotherapeutic Treatment Outpatient | 482 | 74 |  |  |  |  |  |  |  |  | 556 |
| 42306 | Psychotherapeutic Treatment Medication Prescribing | 338 | 22 |  |  |  |  |  |  |  |  | 360 |
| 71319 | State MHI Inpatient - Per diem charges | 6 |  |  |  |  |  |  |  |  |  | 6 |
| 73319 | Other Priv./Public Hospitals - Inpatient per diem charges | 61 | 4 |  |  |  |  |  |  |  |  | 65 |
|  | Basic Crisis Response |  |  |  |  |  |  |  |  |  |  |  |
| 44301 | Crisis Evaluation | 45 | 1 |  |  |  |  |  |  |  |  | 46 |
| 44302 | 23 Hour Observation and Holding | 1 |  |  |  |  |  |  |  |  |  | 1 |
| 44307 | Mobile Response | 497 | 86 |  |  |  |  |  |  |  |  | 583 |
| 44313 | Crisis Stabilization Residential Service (CSRS) | 135 | 30 |  |  |  |  |  |  |  |  | 165 |




## Explanations of the Chart of Account (COA) Code for the EI Region

In the EI Region, COA Code of 44301, Crisis Evaluation, is paid to a provider using two forms of reimbursement:
$>$ Within the Region Crisis System, access to telehealth services is embedded into the seven (7) emergency departments located within the EI Region. The data chart below shows actual numbers per month of duplicated individuals accessing Crisis Evaluations (Tele-Health and Face to Face), for a total of 6,638 encounters in FY23. *This data is pulled from Electronic Medical Records and Care Coordinator metric sheets provided by the EI Region Crisis System.
> The fee for service payments were made under a Memorandum of Understanding (MOU) with the MH/DS of the East Central Region for individuals receiving the service at an Access Center located outside the EI Region. Table B, found above, indicates an unduplicated count of 46 Individuals by Age and Diagnostic Category, for the Chart of Account (COA) Codes 44301.


## B. Regionally Designated Intensive Mental Health Services

The EI Region has designated the following providers, under a Memorandum of Understanding (MOU) with the MH/DS of the East Central (EC) Region, as Access Centers, which meets the requirements in 2 (two) locations according to IAC 441-25.6(1):

## Access Center

| Date Designated | Access Center |  |
| :---: | :---: | :--- |
| $5 / 20 / 21$ | Linn County Access Center | 501 13 th Street NW <br> Cedar Rapids, IA 52405 |
| $5 / 20 / 21$ | Johnson County Access Center/GuideLink Center | 300 Southgate Ave <br> Iowa City, IA 52240 |

The EI Region has designated the following Assertive Community Treatment (ACT) teams as the preferred providers for ACT services in the EI Region. The Vera French CMHC ACT Team has been evaluated for program fidelity, including a peer review as required by sub-rule 25.6(2), and documentation of the team's most recent fidelity score.

The University of Iowa ACT Team, which traditionally has served the residents of Cedar County, has been evaluated for program fidelity, according to the MH/DS of the East Central (EC) Region's documentation of their most recent fidelity score.

## ACT Team

| Date Designated | ACT Teams | Fidelity Score |
| :---: | :---: | :---: |
| $6 / 28 / 2021$ | Vera French Community Mental Health Center, Davenport, IA | 125 |
| $7 / 1 / 2018$ | University of Iowa Hospitals and Clinics IMPACT Iowa City, IA | 115 |

The EI Region designated the following Sub-acute service provider, under an MOU with the MH/DS of the East Central (EC) Region, which meet the criteria in IAC 441-25.6(7) and are licensed by the Department of Inspections and Appeals:

## Subacute

| Date Designated | Subacute |  |
| :---: | :--- | :--- |
| $2 / 1 / 2021$ | Linn County Access Center | $50113^{\text {th }}$ Street NW <br> Cedar Rapids, IA 52405 |

The Region, in collaboration with the MH/DS of the East Central Region, has designated an Intensive Residential Service provider that meets the requirements in IAC 441-25.6(8) for access to the residents of the EI Region. An RFP was developed and sent out in the spring of 2023 with the award to the Abbe Center for Community Mental Health.

## Intensive Residential Service

| Date Designated | Intensive Residential Services |  |
| :--- | :--- | :--- |
| A Memorandum of Understanding | Abbe Center for Community Mental | 528 11st NW |
| (MOU) was approved by the Governing | Health | Cedar Rapids, IA 52405 |
| Board of Directors of the EI Region on |  |  |
| $8 / 21 / 23$. |  |  |

## C. Financials

Table C. Expenditures

| FY 2023 Accrual | Eastern lowa MHDS Region | MI (40) | ID (42) | DD (43) | BI (47) | Admin (44) |  | Total |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Core Domains |  |  |  |  |  |  |  |  |
| COA | Treatment |  |  |  |  |  |  |  |
| 42305 | Mental health outpatient therapy | 178,431.24 |  |  |  |  |  | 178,431.24 |
| 42306 | Medication prescribing \& management | 438,826.66 |  |  |  |  |  | 438,826.66 |
| 43301 | Assessment \& evaluation |  |  |  |  |  |  | - |
| 71319 | Mental health inpatient therapy-MHI | 301,477.56 |  |  |  |  |  | 301,477.56 |
| 73319 | Mental health inpatient therapy | 172,069.86 |  |  |  |  |  | 172,069.86 |
|  | Crisis Services |  |  |  |  |  |  |  |
| 32322 | Personal emergency response system |  |  |  |  |  |  | - |
| 44301 | Crisis evaluation | 288,089.07 |  |  |  |  | \$ | 288,089.07 |
| 44302 | 23 hour crisis observation \& holding | 413.14 |  |  |  |  |  | 413.14 |
| 44305 | 24 hour access to crisis response | 520,553.38 |  |  |  |  |  | 520,553.38 |
| 44307 | Mobile response | 444,545.70 |  |  |  |  |  | 444,545.70 |
| 44312 | Crisis Stabilization community-based services | 1,334,140.21 |  |  |  |  | \$ 1,334,140.21 |  |
| 44313 | Crisis Stabilization residential services | 1,148,654.63 |  |  |  |  | \$ 1,148,654.63 |  |
| 44396 | Access Centers: start-up / sustainability |  |  |  |  |  | \$ |  |
|  | Support for Community Living |  |  |  |  |  |  |  |
| 32320 | Home health aide | 316.80 |  | 743.14 |  |  | \$ | 1,059.94 |
| 32325 | Respite | 88,968.48 |  |  |  |  | \$ | 88,968.48 |
| 32328 | Home \& vehicle modifications |  |  |  |  |  |  | - |
| 32329 | Supported community living | 525,382.34 | 168,660.05 | 75,619.69 | 80,836.22 |  | \$ | 850,498.30 |
| 42329 | Intensive residential services | 62,900.00 |  |  |  |  |  | 62.900 .00 |
|  | Support for Employment |  |  |  |  |  |  |  |
| 50362 | Prevocational services |  | 25,131.13 |  | 22,493.70 |  | \$ | 47,624.83 |
| 50364 | Job development |  |  | 1,570.58 |  |  | \$ | 1,570.58 |
| 50367 | Day habilitation | 1,079.12 |  |  |  |  | \$ | 1,079.12 |
| 50368 | Supported employment | 80,842.94 | 1,193.88 | 7,452.08 | 6,297.17 |  | \$ | 95,786.07 |
| 50369 | Group Supported employment-enclave |  |  |  |  |  |  | - |
|  | Recovery Services |  |  |  |  |  |  |  |
| 45323 | Family support |  |  |  |  |  | \$ | - |
| 45366 | Peer support | 90,664.71 |  |  |  |  |  | 90,664.71 |
|  | Service Coordination |  |  |  |  |  |  |  |
| 21375 | Case management |  |  |  |  |  | \$ | - |
| 24376 | Health homes | 7,220.60 |  |  |  |  |  | 7,220.60 |
|  | Sub-Acute Services |  |  |  |  |  |  |  |
| 63309 | Subacute services-1-5 beds |  |  |  |  |  |  | - |
| 64309 | Subacute services-6 and over beds |  |  |  |  |  | \$ | - |
|  | Core Evidenced Based Treatment |  |  |  |  |  |  |  |
| 04422 | Education \& Training Services - provider competency | 456,187.81 |  |  |  |  |  | 456,187.81 |


| 32396 | Supported housing | 60,000.00 |  |  |  |  | 60,000.00 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 42398 | Assertive community treatment (ACT) | 225,754.20 |  |  |  | \$ | 225,754.20 |
| 45373 | Family psychoeducation | 18,746.00 |  |  |  | \$ | 18,746.00 |
|  | Core Domains Total | \$ 6,445,264.47 | \$194,985.06 | \$85,385.49 | \$109,627.09 | \$ 6,835,262.11 |  |
| Mandated Services |  |  |  |  |  |  |  |
| 46319 | Oakdale |  |  |  |  | \$ | - |
| 72319 | State resource centers |  |  |  |  | \$ | - |
| 74XXX | Commitment related (except 301) | 153,678.85 | 359.00 |  |  | \$ | 154,037.85 |
| 75XXX | Mental health advocate | 113,437.96 |  |  |  | \$ | 113,437.96 |
|  | Mandated Services Total | \$ 267,116.81 | \$ 359.00 | \$ | \$ | \$ | 267,475.81 |
| Additional Core Domains |  |  |  |  |  |  |  |
|  | Justice system-involved services |  |  |  |  |  |  |
| 25xxx | Coordination services | 1,274,570.60 |  |  |  | \$ 1,274,570.60 |  |
| 44346 | 24 hour crisis line** |  |  |  |  | \$ | - |
| 44366 | Warm line** |  |  |  |  | \$ | - |
| 46305 | Mental health services in jails | 186,627.38 |  |  |  | \$ 186,627.38 |  |
| 46399 | Justice system-involved services-other | 365,843.23 |  |  |  | \$ 365,843.23 |  |
| 46422 | Crisis prevention training |  |  |  |  | \$ |  |
| 46425 | Mental health court related costs | 75,000.00 |  |  |  | \$ 75,000.00 |  |
| 74301 | Civil commitment prescreening evaluation | 197,452.69 |  |  |  | \$ 197,452.69 |  |
|  | Additional Core Evidenced based treatment |  |  |  |  |  |  |
| 42366 | Peer self-help drop-in centers | 602,407.80 |  |  |  | \$ | 602,407.80 |
| 42397 | Psychiatric rehabilitation (IPR) | 2,014.80 |  |  |  | \$ | 2,014.80 |
|  | Additional Core Domains Total | \$ 2,703,926.50 | \$ | \$ | \$ | \$ | - |
| Other Informational Services |  |  |  |  |  |  |  |
| 03371 | Information \& referral |  |  |  |  | \$ |  |
| 04372 | Planning and/or Consultation (client related) |  |  |  |  | \$ |  |
| 04377 | Provider Incentive Payment |  |  |  |  | \$ |  |
| 04399 | Consultation Other |  |  |  |  | \$ |  |
| 04429 | Planning and Management Consultants (non-client related) | 245,298.03 |  |  |  | \$ 245.298.03 | 245.298 .03 |
| 05373 | Public education | 542,218.23 |  |  |  | \$ 542.218.23 |  |
|  | Other Informational Services Total | $\begin{aligned} & \$ \\ & 787,516.26 \end{aligned}$ | \$ | \$ | \$ | \$ 787,516.26 |  |
| Community Living Supports |  |  |  |  |  |  |  |
| 06399 | Academic services |  |  |  |  | \$ |  |
| 22XXX | Services management | 216,645.13 |  |  |  | \$ 216,645.13 |  |
| 23376 | Crisis care coordination | 8,172.78 |  |  |  | \$ 8,172.78 |  |
| 23399 | Crisis care coordination other |  |  |  |  | \$ |  |
| 24399 | Health home other |  |  |  |  | \$ |  |
| 31 XXX | Transportation | 290.00 | 2,860.00 |  |  | \$ 3,150.00 |  |
| 32321 | Chore services |  |  |  |  | \$ |  |
| 32326 | Guardian/conservator | 1,000.00 |  |  |  | \$ | 1,000.00 |


| 32327 | Representative payee |  | 974.74 |  |  |  | \$ | 974.74 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 32335 | CDAC |  |  |  |  |  | \$ | - |
| 32399 | Other support |  |  |  |  |  | \$ | - |
| 33330 | Mobile meals |  |  |  |  |  | \$ | - |
| 33340 | Rent payments (time limited) |  |  |  |  |  | \$ | - |
| 33345 | Ongoing rent subsidy | 55,198.75 |  |  |  |  | \$ | 55,198.75 |
| 33399 | Other basic needs |  |  |  |  |  | \$ | - |
| 41305 | Physiological outpatient treatment |  |  |  |  |  | \$ | - |
| 41306 | Prescription meds | 5,571.36 |  |  |  |  | \$ | 5,571.36 |
| 41307 | In-home nursing |  |  |  |  |  | \$ | - |
| 41308 | Health supplies |  |  |  |  |  | \$ | - |
| 41399 | Other physiological treatment |  |  |  |  |  | \$ | - |
| 42309 | Partial hospitalization |  |  |  |  |  | \$ | - |
| 42310 | Transitional living program |  |  |  |  |  | \$ | - |
| 42363 | Day treatment |  |  |  |  |  | \$ | - |
| 42396 | Community support programs | 24,659.81 |  |  |  |  | \$ | 24,659.81 |
| 42399 | Other psychotherapeutic treatment |  |  |  |  |  | \$ | - |
| 43399 | Other non-crisis evaluation |  |  |  |  |  | \$ | - |
| 44304 | Emergency care |  |  |  |  |  | \$ | - |
| 44399 | Other crisis services |  |  |  |  |  | \$ | - |
| 45399 | Other family \& peer support |  |  |  |  |  | \$ | - |
| 46306 | Psychiatric medications in jail | 178,090.95 |  |  |  |  | \$ | 178,090.95 |
| 50361 | Vocational skills training |  |  |  |  |  | \$ | - |
| 50365 | Supported education |  |  |  |  |  | \$ | - |
| 50399 | Other vocational \& day services |  |  |  |  |  | \$ | - |
| 63XXX | RCF 1-5 beds (63314, 63315 \& 63316) | 6,496.09 |  |  |  |  | \$ | 6,496.09 |
| 63XXX | ICF 1-5 beds (63317 \& 63318) |  |  |  |  |  | \$ | - |
| 63329 | SCL 1-5 beds |  | 15,662.75 |  |  |  |  | 15,662.75 |
| 63399 | Other 1-5 beds |  |  |  |  |  | \$ | - |
|  | Community Living Supports | \$ 496,124.87 | \$ 19,497.49 | \$ | \$ |  | \$ | 515,622.36 |
| her Con | egate Services |  |  |  |  |  |  |  |
| 50360 | Work services (work activity/sheltered work) |  |  |  |  |  | \$ | - |
| 64XXX | RCF 6 and over beds (64314, 64315 \& 64316) | 823,466.68 | 11,819.50 |  |  |  | \$ | 835,286.18 |
| 64XXX | ICF 6 and over beds (64317 \& 64318) |  |  |  |  |  | \$ | - |
| 64329 | SCL 6 and over beds | 75,206.74 |  |  |  |  | \$ | 75,206.74 |
| 64399 | Other 6 and over beds |  |  |  |  |  | \$ | - |
|  | Other Congregate Services Total | \$ 898,673.42 | \$ 11,819.50 | \$ | \$ |  | \$ | 910,492.92 |
| Administration |  |  |  |  |  |  |  |  |
| 11XXX | Direct Administration |  |  |  |  | 919,969.21 | \$ | 919,969.21 |
| 12XXX | Purchased Administration |  |  |  |  | 810,474.83 |  | 810,474.83 |
|  | Administration Total |  |  |  |  | \$1,730,444.04 | \$ 1,730,444.04 |  |
| 14951 | MHDS Fiscal Agent Reimbursement to MHDS Regional Members |  |  |  |  |  |  |  |


** 24 hour crisis line and warm line are transitioning from additional core to state wide core services with state funding.

Table D. Revenues

| FY 2023 Accrual | Eastern lowa MHDS Region |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Revenues |  |  |  |  |  |
|  | FY22 Annual Report Ending Fund Balance |  | \$ | 7,599,000 |  |
|  | Adjustment to 6/30/22 Fund Balance |  |  |  | - |
|  | Audited Ending Fund Balance as of 6/30/22 (Beginning FY23) |  | \$ | 7,599,000 |  |
|  | Local/Regional Funds |  | \$ | 317,648 |  |
| 1010 | Delinquent Property Tax | - |  |  |  |
| 25XX | Other Governmental Revenues | - |  |  |  |
| 4XXX-5XXX | Charges for Services | - |  |  |  |
| 5310 | Client Fees | - |  |  |  |
| 60XX | Interest | 305,371 |  |  |  |
| 6XXX | Use of Money \& Property | - |  |  |  |
| 8XXX | Miscellaneous | 12,277 |  |  |  |
| 9040 | Other Budgetary Funds (Polk Transfer Only) | - |  |  |  |
|  |  | - |  |  |  |
|  | State Funds |  | \$ | 10,159,751 |  |
| 24XX | State/Federal pass thru Revenue | - |  |  |  |
| 2644 | State Regional Service Payments | 10,159,751 |  |  |  |
| 2643 | State Incentive Funds | - |  |  |  |
|  | Other | - |  |  |  |
|  |  | - |  |  |  |
|  | Federal Funds |  | \$ | 0.00 |  |
| 2344 | Social services block grant | - |  |  |  |
| 2345 | Medicaid | - |  |  |  |
|  | Other | - |  |  |  |
|  | Other | - |  |  |  |
|  | Total Revenues |  | \$ | 10,477,439 |  |


| Total Funds Available for FY23 | $\$$ | $18,076,400.00$ |
| :--- | :---: | :---: |
| FY23 Actual Regional Expenditures | $\$$ | $13,750,730.00$ |
| Accrual Fund Balance as of 6/30/23 | $\$$ | $4,325,669.00$ |

## D. Status of Service Development in FY2023

## Crisis Planning Update

On 6/20/22, the Region entered into Year 7 of the Regional Mental Health Crisis Services Agreement between the Robert Young Center (RYC) and the EI Region. This is the Eleventh Amendment to the original services agreement signed on January 14, 2016.
The Eleventh Amendment continued funding for services under the Crisis System contract between the RYC and the EI Region as several services were delayed operations due to contracting stages and/or hiring stages.
> Crisis Stabilization Community Based Services for Children provided by the agency, Family Resources Inc., became operational for children of the EI Region on February 27, 2023. They provide short-term services designed to de-escalate a crisis and stabilize children following a mental health crisis. This service will be provided where the child lives, works, or recreates.

CCrisis Stabilization Community Based Services for Adults is provided by the agency, Family Resources Inc.
> Crisis Stabilization Residential for Children, provided by Family Resources Inc., became operational on February 27, 2023, for children of the EI Region. The service provides a short-term alternative living arrangement designed to de-escalate and stabilize children following a mental health crisis. An eight-bed crisis stabilization unit is available on the Family Resources campus.
> Adult Care Coordinator positions to address homelessness.

- This position focuses on the population of homeless individuals presenting themselves in a crisis. They build strong relations with homeless shelters and housing resources.
- Adult Care Coordinator positions to work with inmates. This staff position is an inmate's point of contact during their incarceration and return to the community.
- Children's Care Coordinator position.
- DHS Care Coordinator: This staff position is a point of contact between the EI Region and DHS for youth who are experiencing a mental health crisis and involved with DHS.
- Juvenile Court Services Care Coordinator: This staff position is a point of contact between the EI Region and Juvenile Court Services (JCS) for youth who are experiencing a mental health crisis and involved with JCS.
- Early Childhood Care Coordinator: This staff position is a point of contact between the EI Region and Early Childhood providers for youth who are experiencing a mental health crisis and involved with Early Childhood agencies.
- Complex Families Care Coordinators: These 3 staff positions focus on families with complex needs and assist with navigating through the Children's System in identifying services.
> An additional lead care coordinator and quality assurance position.
$>$ An additional second shift emergency department (ED) Care Coordinator position specific to Genesis Health Systems in Davenport, IA.
> Training was provided by Frank Grijalva MSPH, MSCC to develop a master EI Region training plan to cross all sectors of the community and providers.
> Co-Responder Staff (in previous budget listed as Law Enforcement Liaison Pilot Project). The staff respond, with other first responders, to crisis calls received by dispatch. They provide a warm hand off to the appropriate Care Coordinator positions for follow-up.
> In FY23, funding was re-established for the Peer Support Drop-in Center located in Scott County.
$>$ Funding was budgeted for Bridge Prescriber Appointments in FY23. However, the service did not become operational due to the lack of available and willing providers.


## FY23 Encumbered Obligations for Service Development:

HHS approved $\$ 2,742,843.30$ of the EI Region's application for encumbered funds out of a requested amount of $\$ 5,073,440.30$. The startup costs and service development of several new programs consisted of:
> $\$ 200,000$ was approved for start-up costs and program development of the Bridge Prescriber Appointments. Bridge Prescriber Appointments will assist individuals in obtaining medications post discharge from a hospital or a jail who may experience a lag time of several months for an appointment with a prescriber. Telehealth appointments allow individuals to get 1-2 months of medication if they have a future appointment scheduled.
$>\$ 2,069,660$ was approved for two (2) new programs: Crisis Stabilization Community Based for Adults and Crisis Stabilization Community Based for Children, the funds include $\$ 1,769,660$ in FY22 carryover and $\$ 300,000$ for start-up and program development for FY23.
> $\$ 300,000$ was approved for Crisis Stabilization Residential Services for Children.
> $\$ 173,183.30$ was approved for the Administrative Costs.
Altogether, the EI Region was approved for a total of $\$ 2,742,843.30$ as worker shortages and supply chain demands complicated anticipated new service development and implementation including a delay in identifying a provider to offer Bridge Prescriber Appointments.

## E. Outcomes/Regional Accomplishments in FY2023

A. The Development of the EI Region Children's System using a Sequential Intercept Mapping (SIM) Approach:

An initial training was held over three (3) days in January of 2023 entitled: Utilizing the SIM Model of Community Service Mapping to Build a Strong and Vibrant Children's System of Care.
Trainers were brought into the EI Region from Midwest Trauma Services Network and International Trauma Center:
$>$ Dr. Robert Macy Ph.D., DMT from the International Trauma Center
> Dr. Robert Kinscherff, Ph.D., JD from the Harvard Center for Law, Brain and Behavior and the International Trauma Center
> Frank Grijalva, MSCC, MSPH from the Midwest Trauma Services Network and the International Trauma Center.

Using the System of Care approach, the Region conducted a multi-service line SIM exercise to increase collaboration between institutions that serve youth and families. This was done in collaboration with the School of Social Work at the St. Ambrose University in Davenport, IA.
Day 1 focused on "bootcamp" of the SIM exercise in a public health framework. Training also focused on Neurodevelopmental basics of the human brain, social determinants, developmental trajectories, and developmental resiliency. Further training also identified adversity-trauma and resilience with mental disorders and delinquency, trauma informed and resilience focused approaches of implications for practice, policy, and community.

Objectives for the event were to:

- Discover how communities can work together, utilizing support and resiliency focused programs to intervene with youth experiencing mental health and behavioral issues.
- Recognize how untreated behavioral health conditions and unaddressed exposures to childhood trauma have significant negative effects on lifetime well-being, child welfare and/or juvenile justice involvement and poor school outcomes.
- Describe how communities who employ early detection systems for children with behavioral health needs are reducing the need for more intensive and expensive services.
- Examine how increasing effective connections to appropriate and integrated services in the community lead to better outcomes for youth and families.

The audience of this training opportunity included Judges, Magistrates, County Attorney's, Police Officers, Sheriff Deputies, School Resource Officers (SROs), Juvenile Court and Detention Officers, Health and Human Services (HHS) Personnel, Area Education Agency (AEA) School District Personnel, Therapists, Social Workers, and Community Agency staff who work with children, adolescents, and families. In total, $125+$ individuals attended each day of the 3-day training in January of 2023.

The EI Region then hosted a two-day training exercise in March of 2023 again using a System of Care approach to increase collaboration between the siloed agencies. At the conclusion of the workshop, a community action plan was developed including a cross disciplinary team approach established to oversee children's services.

The audience of this training opportunity included Judges, Magistrates, County Attorney's, Police Officers, Sheriff Deputies, SRO's, Juvenile Court and Detention Officers, HHS Personnel, AEA School District Personnel, Therapists, Social Workers, and Community Agency staff who work with children, adolescents, and families. In total, 88+ individuals attended each day of the 2-day training in March of 2023.

Objectives for the event were to:

- Evaluate how communities can work together.
- Utilize support and resilience focused programs to intervene with youth experiencing mental health and behavioral issues.
- Describe how communities who employ early detection systems for children with behavioral health needs are reducing downstream the need for more intensive services.
- Examine how effective connections to appropriate and integrated services in the community can lead to better outcomes for youth and families.
- Analyze how a public health model can be applied to the SIM.
- And to formulate a community action event where services for children are reviewed, revised, and constructed.

Following a review of cross-sector feedback, the training further narrowed the wish list of services (by Intercept) and conducted a Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis of choices. The members also reviewed existing services and programs mapping by Intercept. Functional work teams were developed to move services forward in the five (5) counties in the future years.
B. Additional Trainings to Enhance the Children's System of Care:

Kristy Roosa, an Ages and Stages Questionnaires (ASQ) Trainer, MIECHV Professional and Developmental Coordinator for the Department of Public Health, offered three training courses during FY23. Ages and Stages Questionnaires (ASQ) are screening tools used to help identify the developmental and social- emotional needs in early childhood.

- 26 individuals from various early childhood programs participated.

Dicki Johnson Macy, BC-DMT, M.Ed., LMHC, held a Rainbowdance training in FY23. The target audience were pre-school teachers, nurses, AEA personnel, daycare staff and providers, community-based clinicians who work with young children, therapists, and social workers. Participants attending learned how to help children enhance their self-regulation skills, self-esteem, and social empathy. Rainbowdance provided a symbolic journey into the world of nature and relationships by encouraging the growth of empowered and self-nurturing children.

- Eight (8) individuals were trained.

Molly Schreiber, CEO and Amy Jenkins, COO with Challenge to Change (C2C) provided a 95-hour youth yoga teacher training. This training is an evidenced based yoga and mindfulness program. It provides preventative social and emotional skills benefiting the mind, body, and emotional state to people of all ages. C2C empowers learners to utilize mindful resources to navigate the world around them. This is done through yoga in the schools, trauma-informed programming, educator continuing education courses, yoga teacher certifications, medical mindfulness programming, adult self care programming and youth classes and workshops.

- Over 150 individuals were trained in FY23 in over 35 professions within the EI Region.
- In collaboration with C2C, the Region contracted with Metivier Media to develop the book Dragon Flight School. The challenges faced by the characters in the book, Fenix, Terrin and Sammy, correspond to the C2C curriculum developed to educate children on emotional regulation. The book was designed to help children overcome individual challenges, inspire confidence and resiliency, and was distributed to various elementary school classrooms.

Julia Seng, Ph.D., RN, CNM, FAAN, FACNM, Co-founder, President, and CEO of Growing Forward Together, and Co-developer of Trauma \& Society, along with Marin Seng B.A., collaborated with the Region to develop and offer Trauma \& Society (T\&S) psycho education for youth coping with trauma. The mission of Growing Forward Together (GTF), is to create an advance trauma specific education program for emerging adults, childbearing families, and their providers. $T \& S$ is a standards-aligned social studies elective course that addresses two needs: (1) psychoeducation for trauma-related mental health distress and impairment and (2) reduction of stigma by including any student exploring future occupations working with traumatized populations. The program is designed for classroom use (with a teacher and partner) or for small groups and independent studies (with a tutor and partner). The instructor (teacher, tutor) partners with a nurse, social worker, or counselor to have extra support for this instructional assignment, and they train together. T\&S is designed for schools, virtual education, and residential and therapeutic settings.

## C. Expansion and Increased Access for Children and Family Services within the EI Region for FY23:

The Region continues in its commitment to offer the following services to all qualifying families that meet criteria, based upon the service, within the Region.

- Functional Family Therapy (FFT) is a short term evidenced based family counseling service designed for youth who are at risk or who have been referred for behavioral or emotional problems. FFT works with a young person's entire family and extra familial influences to facilitate growth and development. Referrals into this program were previously only accepted from Juvenile Court Services and can now be made by any agency or individual. It is now provided to the five (5) Counties within the EI Region by Families, Inc.
- Multisystemic Family Therapy (MST) is an intensive family and community-based treatment program that addresses all environments that impact high risk youth-homes and families, schools and teachers, neighborhoods, and friends. MST teams travel to the youth and are on call 24/7 for the families they serve. Referrals into this program were previously only accepted from Juvenile Court Services and can now be made by any agency or individual. It is now provided to the five (5) Counties within the EI Region by Vera French MHC.
- STEP-IN builds on a family's strengths and provides a shoulder to lean on for families in crisis. Attention to keeping the child safely at home instead of entering juvenile court or a child welfare or hospital setting is the focus. Previously the program provided by Lutheran Services in Iowa (LSI) was only available to residents of Clinton and Jackson County with a narrow focus on the referring entity. It is now available to all counties within the EI Region.
- Direct Family Interventions (DFI) provides home services to families with children under 18 who are experiencing issues related to family communication and child/adolescent mental health. A Case Manager works with the family over a 6-12-week period. Families are given various community resources to increase appropriate and safe family function while reducing issues related to child mental and behavioral health. Bethany for Children and Families provides this service to Scott County
residents as a pilot project due to workforce shortages. Plans for expansion to all other counties within the Region will be considered after this year.

The data chart below shows actual numbers of duplicated individuals per month served under the STEP-IN program during FY23. There were 88 admissions to the program. This data is pulled from Electronic Medical Records and Care Coordinator metric sheets provided by the EI Region Crisis System


The data chart below shows actual numbers of duplicated individuals per month served under the Direct Family Intervention program during FY23. There were 40 admissions to the program. This data is pulled from Electronic Medical Records and Care Coordinator metric sheets provided by the EI Region Crisis System.


Education and Consultation: Building the Collective Capacity of our Provider Network:
In FY23, numerous training opportunities were held within the EI Region. The training agencies included: Solution Point+, Midwest Trauma Services Network, Life Connections Peer Recovery Services, NAMI of Greater Mississippi Valley, the International Trauma Center, and St. Ambrose University. Targeted audiences that were trained included staff from law enforcement agencies, teachers, dispatchers, first responders, correctional officers, and administrators.

SolutionPoint+ was founded in 2017 by two former San Antonio Police Officers and service-connected disabled United States Marine Corps veterans. CEO Joe Smarro and President, Jesse Trevino, provide training and consulting services designed to improve the mental health criminal justice processes. They specialize in deescalation, mental resilience, crisis negotiation, crisis response and crisis intervention and have helped address complex social issues- substance dependence, behavioral crisis, crisis negotiations and suicides for over 15 years. Under the CEO Collaboration contract with SolutionPoint + , a Crisis Intervention Team (CIT) training was held in Jackson County, IA.

- September 19-23, 2022, was held with 19 individuals attending.

The EI Region also has its own contractual arrangement for training with Solution Point+ under a three-year contract including offering 40-hour CIT classes, Crisis De-Escalation training, Crisis Communications for Telecommunicators, and X-factor Mental Health and Resiliency. Training dates and numbers of individuals trained were:

- January 19-20, 2023, "16-hr X factor Mental Wellness and Resiliency" was held with 16 individuals attending.
- January 23-25, 2023 " $24-\mathrm{hr}$ Advanced De-Escalation" was held with 20 individuals receiving training.
- February 23-24, 2023 "Crisis Communications for Telecommunicators" was held and 18 people were trained.
- March 13-17, 2023 " $40-\mathrm{hr}$ Crisis Intervention Training" was held with 20 individuals receiving training in Clinton County, IA.
- May 22-26, 2023 " $40-\mathrm{hr}$ Crisis Intervention Training" was held in Muscatine County, IA with 20 individuals being trained.

Life Connections Peer Recovery Services provided WRAP Seminars I and II.

- Seminar 1 was held in June of 2023 and 12 people were trained.
- Seminar 11 was held at the end of June of 2023 and trained 10 individuals.

NAMI of Greater Mississippi Valley provided three (3) Family-to-Family Education Courses.

- Eastern Iowa Community College-Clinton had two (2) graduates.
- Eastern Iowa Community College-Muscatine had 10 graduates.
- Eastern Iowa Community College-Scott had 13 graduates.

St. Ambrose University School of Social Work and Department of Psychology, co-sponsored with the EI Region, a course entitled Trauma Informed Care Micro Credential. The micro credential course increased the Trauma Informed Care capacity of staff within the Region by raising the capacity of health, human service, education, and justice systems to serve individuals with Trauma Informed Care principles.
Topics included introductions to Adverse Childhood Experiences (ACES), a history of trauma theory and treatment, early childhood neurobiology and attachment, complex developmental trauma versus other trauma disorders, polyvagal theory and neuro-sequential models, sensory systems and regulation, healing centered movement and resilience, restorative practice as an application of being Trauma Informed and macrolevel systems, including the intersection of poverty, race, patriarchy, intergenerational trauma and epigenetics.

- In May of 2023, a graduation was held with 20 individuals formally trained.

Frank Grijalva MSPH, MSCC, of the Midwest Trauma Services Network, offered interested providers opportunities to attend workshops.

A sampling of the workshops and services he provided included:

- Everything is Connected,
- Behavior Modification Seminars,
- Toxic Stress Seminars,
- Psychological First Aid,
- Skills for Psychological Resilience,
- KINNECT,
- Case Study Consultation,
- And individual and agency staff coaching and opportunities for program development.

Trainers from the Midwest Trauma Services Network, the International Trauma Center, and Rainbowdance provided a total of 473.5 hours of training to 1,403 individuals.

## D. Enhancement of the EI Region's Marketing Strategy:

In Phase 1, the Regional Governing Board continued in its commitment for a marketing strategy to increase visibility and to raise awareness and recognition of the available services offered to the residents of the five (5) counties. The slogan: Crisis Call or Click continues to be the catch phrase that is now established with the EI Region.
Phase 2 is a targeted mental health campaign for college age students and their parents regarding what resources are needed to connect with this age group and ways to collaborate with college administrators, educators, and students. Marketing was done at St. Ambrose University in Davenport, IA and Scott Community College during student "move-in" and orientation during FY23. Materials are currently being developed for social media platforms, such as Tik Tok, that are directed at college age students.
Phase 3 is a campaign targeting elementary school aged children. The Children's Behavioral Health Coordinator, Christine Gradert, L.I.S.W, also collaborated on the story line for the children's book with Metivier Media, on a book called The Dragon Flight School, that was distributed to students at local assemblies.

## E. Co Responder Expansion:

In FY23, the Co-Responder Model, which, in previous budgets was listed as a Law Enforcement Liaison Pilot Project, continued as a pilot with the Clinton Police Department. The program was expanded to various law enforcement agencies within Jackson, Muscatine, and Scott County.
Staff were scheduled on a weekly basis for the police departments of Clinton, Davenport, and Muscatine, as well as all law enforcement agencies in Jackson County. The staff's role is to "ride along" to assist with calls related to mental health concerns.

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