Why Crisis Now?

The Crisis Now Implementation Support Project began in March 2020, building from work completed by RI International in the fall of 2019. The current workplan supports implementation of the 13 recommendations from the Alaska Crisis Now Consultation Report. Since March, the Alaska Mental Health Trust Authority (the Trust) and its contractor Agnew::Beck Consulting convened a project management team, five systems-focused teams, and three community workgroups. With input from these groups, the team developed staffing and business models for Crisis Now services in Anchorage, Mat-Su and Fairbanks and a phased approach for implementation. This newsletter provides stakeholders with project updates and opportunities for engagement.

The Alaska Mental Health Trust Authority disbursed community planning dollars to the City of Fairbanks and the Mat-Su Health Foundation to bring on contracted support in the form of community coordinators. The community coordinators further the work started in the community workgroups by scheduling, planning and facilitating meetings related to service implementation, developing connections between service providers, acting as a liaison between the community, the Trust and other partners and supporting data compilation and reporting. In Anchorage, this role is currently incorporated as part of Agnew::Beck’s Crisis Now Project Management contract.

Recent Trust Investments:

- **Fairbanks Crisis Now Coordinator Position** (City of Fairbanks) $135K
- **Fairbanks Mobile Crisis Teams**: Clinical (Alaska Behavioral Health) and Peer Support Specialist (The Bridge) $807K
- **Call Center Operations Expansion** (Alaska Careline) $100K
- **Anchorage Crisis Stabilization Services Planning** (Southcentral Foundation and Providence Alaska) $885K
- **Mat-Su Crisis Community Development Coordinator** (Mat-Su Health Foundation) $100K

Someone to Talk to, Someone to Respond and a Place to Go

Crisis Call Center  →  Mobile Crisis Team  →  23-Hour Stabilization  →  Short-term Stabilization  

To read more about the framework and efforts to improve behavioral health crisis response in Alaska, visit: alaskamentalhealthtrust.org/crisisnow
**Phase 1 Overview**

Phase 1 enhances existing crisis call and dispatch services and adds mobile crisis teams. In this phase, emergency service dispatch entities formalize connections with a behavioral health crisis call line and develop policies and procedures to support transfer of appropriate calls. If a call cannot be resolved by a crisis call line or requires an immediate response, existing dispatch entities will have a new resource, behavioral health mobile crisis teams. The composition of these teams, number of teams and hours and operators will vary by community.

**Shared data system to connect to outpatient or other resources**

- Person in Crisis
- Call Line or contracted clinician
- Mobile Crisis Team
- MOUs
- 911
- Law Enforcement, EMS, Emergency Service Patrol

**Phase 1 Implementation - Anchorage:**

In November 2020, the Anchorage Assembly allocated 1.5 million dollars in alcohol tax revenue to fund a mental health first responder team, housed within the Anchorage Fire Department. The Anchorage Fire Department is developing policies, procedures and program plans for the team, and launched in July 2021. Each mobile team will be staffed by a firefighter (EMT or paramedic) and a masters-level clinician. Follow-up support will be available during phase 2 of implementation to every individual contacted by the mobile team. Initially, mobile response will not be available 24/7, but the goal is to build to availability of a 24/7 behavioral health crisis response. The mobile crisis team will be dispatched through the Anchorage Fire Department’s dispatch center.

**Community Coordinator Contact:**

Becky Bitzer  |  becky@agnewbeck.com

**Phase 1 Implementation - Fairbanks:**

Linking funding from a grant from the Division of Behavioral Health and start-up funding from the Alaska Mental Health Trust Authority two organizations in Fairbanks are joining together to staff and implement mobile crisis response in Fairbanks. The team is formed through a contracted partnership between Alaska Behavioral Health who will provide licensed clinicians, and The Bridge, which will staff the peer support specialist positions on the team. Initially, the Fairbanks Emergency Communications Center will dispatch the mobile crisis team, with plans to transition dispatch responsibilities to the Alaska Careline. To learn more, visit the City of Fairbanks Crisis Now implementation webpage: [https://www.fairbanksalaska.us/crisis](https://www.fairbanksalaska.us/crisis).

**Community Coordinator Contact:**

Mike Sanders  |  MSanders@fairbanks.us

**Phase 1 Implementation - Mat-Su:**

The Mat-Su Health Foundation recently contracted with Dr. Melissa Toffolon to provide community coordination and implementation support. This on the ground support for providers is essential to continuing conversations and understanding which providers are interested in providing Crisis Now services as well as the continuing care and supportive services that may be needed following a crisis.

**Community Coordinator Contact:**

Melissa Toffolon  |  mt@actionabledataconsulting.com

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**In case you missed it...**

In March, the project team hosted a Phase 1 Implementation webinar. The webinar featured speakers from the Alaska Careline and Phoenix, Arizona’s mental health call diversion program - a partnership between the Phoenix Police Department and the local crisis call center, Crisis Response Network. A recording of the webinar is available [here](#). The access passcode is: Rt$ry8aA
Updates from Systems-Focused Areas

Legislative
Legislation (Senate Bill 124/House Bill 172) was introduced at the request of the Governor in the Alaska Legislature this session. This legislation would enable additional facility types to accept individuals experiencing a behavioral health crisis who may need an emergency detention or involuntary commitment. The legislation is key to operation of the “no wrong door” component of Crisis Now. SB 124 was heard twice in the Senate Health and Social Services committee and will be held there until next session. HB 172 was heard once in the House Judiciary committee where the chairman, Rep. Matt Claman, introduced a committee substitute. Rep. Claman will likely conduct additional hearings during the interim to work on the committee substitute. More information on the legislation and the Crisis Now model is available on the Trust’s website, here: http://alaskamentalhealthtrust.org/crisisnow
For more information, contact Travis Welch at travis.welch@alaska.gov.

Workforce
The University of Alaska Anchorage College of Health is currently developing a crisis stabilization simulation lab, which will provide behavioral health crisis responders with an immersive learning experience and place to practice skills needed in real-life crisis situations. The lab is slated to open in Fall 2021.
For more information, contact Eric Boyer at eric.boyer@alaska.gov.

Crisis Call Center
In July 2020, the FCC adopted rules designating 988 as the 911 equivalent for suicide prevention and mental health crisis services. Planning for 988 roll out in Alaska is underway, facilitated by Fairbanks-based contractor, the Goldstream Group. The Trust is actively involved in 988 planning efforts as the establishment of this number increases accessibility of “someone to talk to” via a crisis call center, a critical component of Crisis Now.
For more information, contact Eric Boyer at eric.boyer@alaska.gov.

Looking Ahead
Mobile crisis teams are preparing to launch in Anchorage and Fairbanks. While organizing providers around mobile crisis team launch, the community coordinators are simultaneously hosting discussions with interested providers related to Phase 2 implementation, where 23-hour and short-term stabilization centers are established. Implementation of the Crisis Now framework is well underway, and the project team expects busy months ahead as new services are planned and launched!

Recommended Viewing
To learn more about efforts around the country to address mental health crises, we recommend viewing NAMI’s “Help Not Handcuffs” webinar series. This four-part series addresses the history of mental health and the justice system, legislative efforts and existing diversion models for individuals in mental health crisis. The project team especially recommends “Part 3” where experts from Georgia’s Behavioral Health Link and Arizona’s Connections Health Solutions provide overviews of how they address community crisis response. Webinar recordings are available on NAMI’s website.

Want to know more or get involved?
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