Iowa

UNIFORM APPLICATION
FY 2024 Mental Health Block Grant Report

COMMUNITY MENTAL HEALTH SERVICES
BLOCK GRANT

Center for Mental Health Services
Division of State and Community Systems Development

A. State Information

State Information

State Unique Entity Identification

Unique Entity ID   Q7P9B28J8BY4

I. State Agency to be the Grantee for the Block Grant

Agency Name   Iowa Department of Human Services

Organizational Unit   Division of Behavioral Health

Mailing Address   1305 E. Walnut

City   Des Moines

Zip Code   50319

II. Contact Person for the Grantee of the Block Grant

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Last Name   Eyanson

Agency Name   Iowa Department of Human Services

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III. State Expenditure Period (Most recent State exependiture period that is closed out)

From   7/1/2022

To   6/30/2023

IV. Date Submitted

NOTE: This field will be automatically populated when the application is submitted.

Submission Date   11/30/2023 5:37:52 PM

Revision Date   1/26/2024 2:40:48 PM

V. Contact Person Responsible for Report Submission

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Footnotes:

B. Implementation Report

MHBG Table 1 Priority Area and Annual Performance Indicators - Progress Report

Priority #: 1

Priority Area: Expand mental health services and supports to children with an Serious Emotional Disturbance and their families

Priority Type: MHS

Population(s): SED

Goal of the priority area:

Expand access to community-based mental health services and supports for children with an SED who are not eligible for Medicaid funded services.

Objective:

Increase community-based services and supports for children and their families with limited access to those services.

Strategies to attain the goal:

Issue an RFP for up to 2 programs to develop local Systems of Care for children with an SED

Edit Strategies to attain the objective here:
(if needed)

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Increased access to community-based mental health services and supports for children with an SED

Baseline Measurement: State currently has 4 SOC programs

First-year target/outcome measurement: Increase to 6 SOC programs through issuance of an RFP for 2 new SOC programs

Second-year target/outcome measurement: Maintain 6 SOC programs

New Second-year target/outcome measurement*(if needed)*:

Data Source:

DHS

New Data Source*(if needed)*:

Description of Data:

SOC programs contract with DHS, DHS maintains data on each SOC program

New Description of Data:*(if needed)*

Data issues/caveats that affect outcome measures:

RFP is projected to be released Sept. 2021 with implementation on Jan. 1, 2022. Outcomes may be affected if there are none or only 1 successful bidder for the program.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

| First Year Target: | ☑ Achieved | ☐ Not Achieved *(if not achieved,explain why)* |

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:
The state issued an RFP for 2 new SOC programs and awarded contracts to two new programs during SFY22.

| Second Year Target: | ☑ Achieved | ☐ Not Achieved *(if not achieved,explain why)* |

Reason why target was not achieved, and changes proposed to meet target:

☐

How second year target was achieved:

Six programs were maintained through Year 2.

Priority #: 2

Priority Area: Crisis Services

Priority Type: SAP, SAT, MHS

Population(s): SMI, SED, ESMI, PWWDC, PP, PWID, EIS/HIV, TB

Goal of the priority area:

IDPH and DHS will work together to Implement the 988 Crisis Line in Iowa

Objective:

Integrate/coordinate the existing statewide crisis line and existing mobile crisis and stabilization services with the 988 crisis line to increase access to crisis services for all Iowans.

Strategies to attain the goal:

1. Develop a 988 implementation plan with the assistance of the stakeholder coalition
2. Implementation of the 988 plan

Edit Strategies to attain the objective here:
(if needed)

☐

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: 988 Plan Development and Submission-Collaboration between IDPH and DHS

Baseline Measurement: Plan is in development

First-year target/outcome measurement: Plan submitted to Vibrant and approved for implementation during SFY22

Second-year target/outcome measurement: Plan implemented and Iowa Lifeline centers begin answering calls effective July 16, 2022

New Second-year target/outcome measurement*(if needed)*:

Data Source:

IDPH and DHS

New Data Source*(if needed)*:

☐

Description of Data:

Plan submitted to Vibrant and State agency oversight of 988 activities in Iowa.

New Description of Data:*(if needed)*

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Data issues/caveats that affect outcome measures:

Availability of funding and workforce to implement the plan may impact implementation.

New Data issues/caveats that affect outcome measures:

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Report of Progress Toward Goal Attainment

First Year Target: ☑ Achieved   ☐ Not Achieved *(if not achieved,explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:
Iowa DHS and IDPH worked together to develop and submit the state's 988 Implementation Plan. The plan was approved by Vibrant.

Second Year Target: ☑ Achieved   ☐ Not Achieved *(if not achieved,explain why)*

Reason why target was not achieved, and changes proposed to meet target:

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How second year target was achieved:

Iowa's two 988 centers were operational in July 2022.

Priority #:	3
Priority Area:	Support and Development of the Behavioral Health Workforce
Priority Type:	SAP, SAT, MHS
Population(s):	SMI, SED, ESMI, PWWDC, PP, PWID, TB

Goal of the priority area:

Promote retention and recruitment of qualified individuals for the behavioral health workforce. Increase competency of the behavioral health workforce through training and technical assistance.

Objective:

Increase competency of the behavioral health workforce through training and technical assistance.

Strategies to attain the goal:

1. Develop a statewide Center of Excellence to assist providers in implementing evidence-based practices with fidelity.
2. DHS and IDPH will collaborate to expand Relias online training platform to community mental health centers.
3. DHS and IDPH will implement a shared peer support training collaborative for peers serving individuals with an SMI, parents of children with an SED and individuals with an SUD.

Edit Strategies to attain the objective here:
(if needed)

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┌─ **Annual Performance Indicators to measure goal success** ─────────────────────

Indicator #:	1
Indicator:	DHS and IDPH will collaborate to expand Relias behavioral health online training available to SUD providers to CMHCs
Baseline Measurement:	0
First-year target/outcome measurement:	13
Second-year target/outcome measurement:	27

New Second-year target/outcome measurement*(if needed)***:**

Data Source:

IDPH records of users of Relias training.

New Data Source*(if needed)***:**

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Description of Data:

Training records

New Description of Data:*(if needed)*

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Data issues/caveats that affect outcome measures:

This is voluntary, providers may choose not to access the online training.

New Data issues/caveats that affect outcome measures:

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Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved ☑ Not Achieved *(if not achieved,explain why)*

Reason why target was not achieved, and changes proposed to meet target:
DHS continues to work on meeting this goal in year 2. There were logistical issues regarding contracting between DHS and IDPH that affected the ability to meet this goal in year 1. DHS and IDPH are in the process of combining into one agency and it is expected that this will allow for this goal to be addressed in year 2.

How first year target was achieved *(optional)***:**

Second Year Target: ☐ Achieved ☑ Not Achieved *(if not achieved,explain why)*

Reason why target was not achieved, and changes proposed to meet target:

Iowa has extended support for access to Relias to 8 community mental health centers.

How second year target was achieved:

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Indicator #:	2
Indicator:	Increase access to peer support/family peer support/recovery peer coach training through DHS/IDPH joint training collaborative
Baseline Measurement:	New peer support training contract effective 6/1/2021
First-year target/outcome measurement:	Contractor will provide 6 peer support, 6 family peer support, and 6 recovery peer coach trainings
Second-year target/outcome measurement:	Contractor will provide 6 peer support, 6 family peer support, and 6 recovery peer coach trainings

New Second-year target/outcome measurement*(if needed)***:**

Data Source:

DHS contractor reports

New Data Source*(if needed)***:**

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Description of Data:

Contractor reports of training

New Description of Data:*(if needed)*

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Data issues/caveats that affect outcome measures:

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New Data issues/caveats that affect outcome measures:

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Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved   ☑ Not Achieved *(if not achieved,explain why)*

Reason why target was not achieved, and changes proposed to meet target:

The ability to provide the planned trainings was affected by the COVID pandemic. The training contractor had to adjust goals and training processes. 4 trainings for adult peer support specialists, 2 for family peer support specialists and 2 for recovery peer coaches were held during year 1 for a total of 115 individuals trained.

How first year target was achieved *(optional)*:

Second Year Target: ☐ Achieved   ☑ Not Achieved *(if not achieved,explain why)*

Reason why target was not achieved, and changes proposed to meet target:

> 5 Peer, 3 Family Peer, and 6 Peer Recovery Coach trainings were held in compliance with the current training contract amendment which was reduced due to the pandemic. A total of 181 peers were trained from October 2022 to September 2023.

How second year target was achieved:

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Indicator #:   3

Indicator: DHS will establish a Center of Excellence for Implementation of Evidence-Based Practices

Baseline Measurement: None currently exists

First-year target/outcome measurement: DHS will issue an RFP and award a contract for Center of Excellence

Second-year target/outcome measurement: The Center of Excellence will provide training and technical assistance to stakeholders and providers on DHS-approved EBPs.

New Second-year target/outcome measurement*(if needed)*:

Data Source:

> DHS contractual monitoring of Contractor activities and participation in training and TA activities.

New Data Source*(if needed)*:

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Description of Data:

> Contractor reports

New Description of Data:*(if needed)*:

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Data issues/caveats that affect outcome measures:

☐

New Data issues/caveats that affect outcome measures:

☐

Report of Progress Toward Goal Attainment

First Year Target: ☑ Achieved   ☐ Not Achieved *(if not achieved,explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:

DHS issued an RFP and awarded a contract to the University of Iowa to develop a Center of Excellence for Implementation of Evidence-Based Practices during SFY22.

Second Year Target: ☑ Achieved   ☐ Not Achieved *(if not achieved,explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved:

The Center of Excellence provided training on Assertive Community Treatment (ACT), Integrated Placement and Supports (IPS) and Permanent Supported Housing (PSH) to providers and stakeholders during Year 2.

Priority #: 4

Priority Area: Expand services to individuals experiencing a First Episode of Psychosis or Early Serious Mental Illness

Priority Type: MHS

Population(s): ESMI

Goal of the priority area:

Expand the number of NAVIGATE teams in Iowa from 3 to 4.

Objective:

Increase availability of coordinated specialty care for individuals with an Early Serious Mental Illness to a new area of the state.

Strategies to attain the goal:

Contract with a new NAVIGATE team provider, provide training and technical assistance to the new team.

Edit Strategies to attain the objective here:
(if needed)

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: New NAVIGATE team will begin serving eligible individuals

Baseline Measurement: 0

First-year target/outcome measurement: Serve 10 individuals by 9/30/22

Second-year target/outcome measurement: Serve 25 individuals by 9/30/23

New Second-year target/outcome measurement*(if needed)***:**

Data Source:

Data provided by team to DHS as part of contract

New Data Source*(if needed)***:**

Description of Data:

Numeric and demographic data on individuals served by the team..

New Description of Data:*(if needed)*

Data issues/caveats that affect outcome measures:

The team is new and may experience delays in recruiting eligible individuals for the NAVIGATE team. The team will be provided regular technical assistance from the state's TA provider to support implementation.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved   ☑ Not Achieved *(if not achieved,explain why)*

Reason why target was not achieved, and changes proposed to meet target:

In the first year of operation, Iowa's new NAVIGATE team served six individuals. The team has engaged in intensive training to prepare to serve individuals and has also done extensive community outreach to educate the community about the NAVIGATE program. The team operates in a primarily rural area so has to work differently than the other 3 Iowa teams to locate and enroll eligible individuals. The team continues to enroll individuals and is working toward meeting enrollment goals.

How first year target was achieved (optional):

Second Year Target: ☐ Achieved   ☑ Not Achieved *(if not achieved,explain why)*

Reason why target was not achieved, and changes proposed to meet target:

The program has not met the goal to serve 25 people in year 2. The program continues to work on outreach activities but due to the largely rural service area has struggled to find individuals who meet the NAVIGATE criteria and are interested in receiving services.

How second year target was achieved:

Priority #:   5

Priority Area: Develop Peer-Run Organizations

Priority Type: MHS

Population(s):   SMI, SED, ESMI

Goal of the priority area:

Increase the number of peer-run organizations in Iowa

Objective:

Increase availability and accessibility of peer-run services to Iowans by supporting organizational development.

Strategies to attain the goal:

Issue an RFP for peer-run organizations to apply for MHBG funding.

Edit Strategies to attain the objective here:
(if needed)

┌─ **Annual Performance Indicators to measure goal success** ─────────────────

Indicator #:   1

Indicator: Increased access to services provided by peer-run organizations through issuance of an RFP for up to 4 grants

Baseline Measurement: 0

First-year target/outcome measurement: State plans to award up to 4 grants to peer-run organizations.

Second-year target/outcome measurement: Peer-run organizations will provide services in accordance with contracts with DHS.

New Second-year target/outcome measurement*(if needed)***:**

Data Source:

DHS contract monitoring.

New Data Source*(if needed)***:**

Description of Data:

Reports, observation of DHS staff.

New Description of Data:*(if needed)*

Data issues/caveats that affect outcome measures:

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☑ Achieved ☐ Not Achieved *(if not achieved,explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:
During SFY22, DHS issued RFPs and awarded contracts to four peer-run organizations who are providing peer support, peer respite and other peer-delivered services in Iowa.

Second Year Target: ☑ Achieved ☐ Not Achieved *(if not achieved,explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved:
Four peer run organizations continued to provide peer services during Year 2.

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Footnotes:

Allowable MHBG COVID-19 testing and mitigation activities for community mental health providers
1. Rapid onsite COVID-19 testing and for facilitating access to testing services. Training and technical assistance on implementing rapid onsite COVID-19 testing and facilitating access to behavioral health services, including the development of onsite testing confidentiality policies; and implementing model program practices.
2. Testing for staff and consumers in shelters, group homes, residential treatment facilities, day programs, and room and board programs. Purchase of resources for testing-related operating and administrative costs otherwise borne by these housing programs. Contractors may use this funding to procure COVID-19 tests and other mitigation supplies such as handwashing stations, hand sanitizer and masks for people experiencing homelessness and for those living in congregate settings.
3. Funds may be used to relieve the burden of financial costs for the administration of tests and the purchasing of supplies necessary for administration such as personal protective equipment (PPE); supporting mobile health units, particularly in medically underserved areas; and expanding local or tribal programs workforce to implement COVID-response services for those connected to the behavioral health system.
4. Maintain healthy environments (clean and disinfect, ensure ventilation systems operate properly, install physical barriers and guides to support social distancing if appropriate).

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TOTAL COVID-19 MITIGATION MHBG FUNDING AVAILABLE FOR CMHC CONTRACTS	Total Allocation to Each Provider for the approved activities	Amount expended FY22	Amount expended FY23
Abbe Center for CMH	$48,565	Correction-$15,610.17	$11,204.86
Alegent Health-Psychiatric Associates/Mercy Center	$17,139	$17,139	$0
Black Hawk/Grundy CMHC	$18,982	$204.24	$0
Capstone Behavioral Healthcare	$11,300	$8,000.03	$0
Center Associates	$12,823	$0	$9,584.63
Community (Behavioral) Health Centers of Southern Iowa	$10,612	$10,612	$0
Crossroads CMHC	$11,233	$5,620	$13.67
Eyerly-Ball*	$49,873	$14,185.57	$0
Hillcrest Family Services	$23,119	$0	$0
Prairie Ridge	$14,887	$0	$0
North Central Mental Health Center (dba Berryhill)	$16,371	$16,371	$0
Northeast Iowa Behavioral Health, Inc.	$13,384	Correction-$2,358.06	$0
Northwest Iowa Behavioral Health, INC (Seasons)	$13,702	$8,073.05	$2,231.89
Orchard Place (dba Des Moines Child Guidance)*	$30,423	$4,850.82	$0
Pathways Behavioral Services	$8,721	$6,801	$-2,354.88 Correction to SFY22
Plains Area CMHC	$15,184	$1,453.36	$0
Siouxland CMHC	$15,481	$10,115.81	$4,900
Southern Iowa CMHC	$13,761	$6,203.20	$2,495.50
Southwest Iowa MHC	$8,973	$8,973	$0
Vera French CMHC	$21,635	$21,635	$0
Waubonsie MHC	$9,210	$9,210	$0
	$385,380	$167,415.31	$28,075.67

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C. State Agency Expenditure Report

MHBG Table 3 - Set-aside for Children's Mental Health Services

This table provides a report of statewide expenditures for children's mental health services during the last completed SFY States and jurisdictions are required not to spend less than the amount expended in FY 1994.

Reporting Period Start Date: 7/1/2022   Reporting Period End Date: 6/30/2023

Statewide Expenditures for Children's Mental Health Services			
A **Actual SFY 1994**	**B** **Actual SFY 2022**	**C** **Estimated/Actual SFY 2023**	**Please specify if expenditure amount reported in Column C is actual or estimated**
$11,851,615	$58,180,518	$58,180,518	○ ⦿ Actual Estimated

If estimated expenditures are provided, please indicate when actual expenditure data will be submitted to SAMHSA: **3/1/2024**

States and jurisdictions are required not to spend less than the amount expended in FY 1994.

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Footnotes:

C. State Agency Expenditure Report

MHBG Table 6 - Maintenance of Effort for State Expenditures on Mental Health Services

This table provides a report of expenditures of all statewide, non-Federal expenditures for authorized activities to treat mental illness during the last completed SFY.

Reporting Period Start Date: 07/01/2022   Reporting Period End Date: 06/30/2023

A Period	B Expenditures	C $\frac{B1\ (2021)\ +\ B2\ (2022)}{2}$
SFY 2021 (1)	$207,833,633	
SFY 2022 (2)	$255,174,266	$231,503,950
SFY 2023 (3)	$231,503,950	

Are the expenditure amounts reported in Column B "actual" expenditures for the State fiscal years involved?

SFY 2021	Yes	X	No	
SFY 2022	Yes	X	No	
SFY 2023	Yes		No	X

If estimated expenditures are provided, please indicate when actual expenditure data will be submitted to SAMHSA: 3/1/2024

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Footnotes: