

# Eastern New Mexico Regional Behavioral Health Center

October 15, 2024















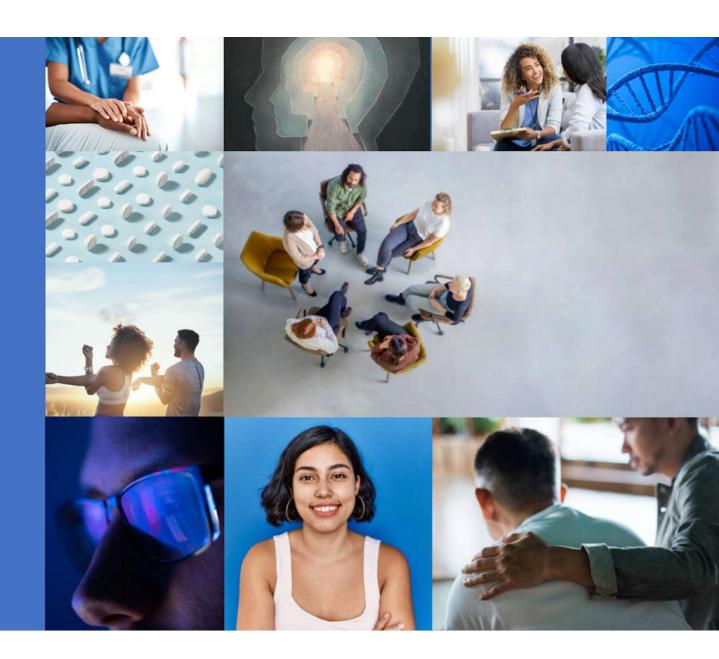








Initium is a public benefit corporation committed to using innovation to improve human health.



#### **INITIUM HEALTH**





JAMES CORBETT, MDiv, JD

Principal

As a former healthcare leader and executive, James's 20+ years of experience and background in behavioral health will be crucial to support this engagement. James has experience in leading mental health and substance use disorder (SUD) efforts in multiple states for health systems including Colorado, Kansas, Maine, and Massachusetts.

Balancing community needs with behavioral health resources, capacities, and strategies will be an integral part of the work needed for a crisis stabilization project vision. James's expertise in this area is strong, proven, and replicable. He has also facilitated stakeholder engagement meetings with a variety of stakeholders in numerous states including California, Maine, New Hampshire, New Mexico, Ohio, Florida and Massachusetts. James will work closely and collaboratively with the project team on all aspects of the project. James received a Bachelor of Arts from Syracuse University, a Juris Doctor from Saint John's University, a Master of Divinity from Duke University, and a Master of Applied Research from Denver University, and he was a Bioethics Fellow at Harvard Medical School. James founded Initium Health in 2018.

#### **INITIUM HEALTH**





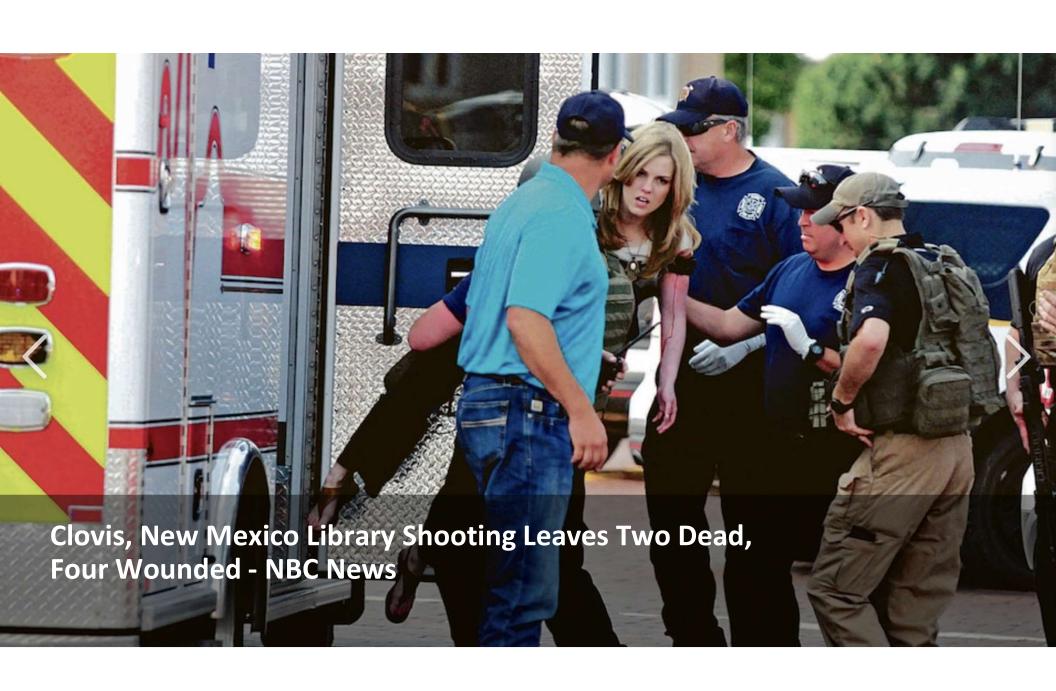
BRIAN FERRANS, MS Consultant

Brian Ferrans has spent the past fifteen years working on systems level change in order to increase capacity for behavioral health care and harm reduction, enhance services for justice-involved populations, and to reduce stigma about substance use disorders. Brian has been involved in community needs assessments related to behavioral health services, helped to build Medication-Assisted Treatment (MAT) programming into criminal justice settings, and most recently planned and opened a new 64-bed crisis facility in partnership with regional county governments and municipalities. Brian currently works for SummitStone Health Partners, a community mental health center, serving as the Deputy Executive Director for their crisis and residential services and manages a \$30 million budget in contracts and grants. He has an undergraduate degree in Sociology/Criminal Justice from Colorado State University and also a Master of Science degree in Criminal Justice/Healthcare Administration.

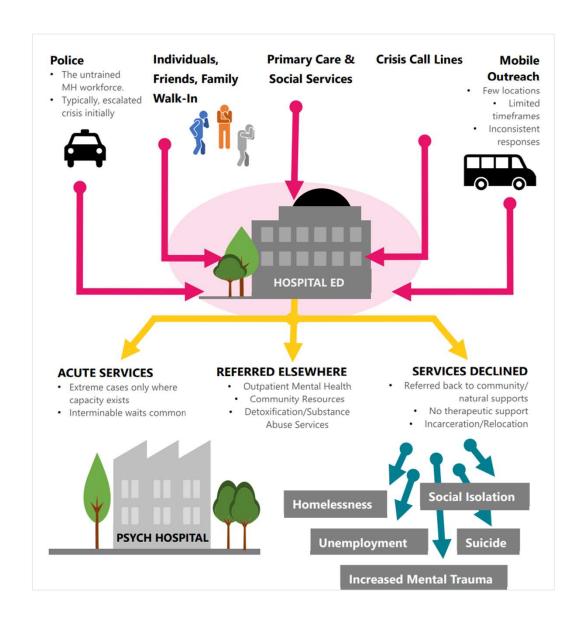
## Agenda 10.15.24

- I. Crisis System Transformation
- II. Regional Crisis Center
- III. Workforce Development
- IV. Funding & Financial Projections
- V. Q & A





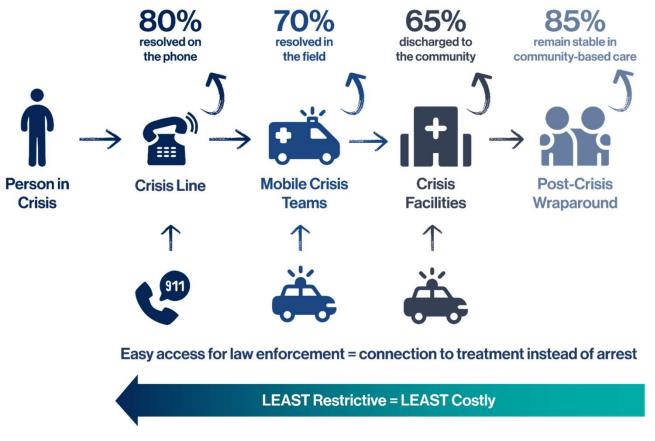
# Traditional Crisis Flow



Proprietary & Confidential

#### **Illustration of an Effective Continuum**

#### Crisis System: Alignment of services toward a common goal





Adapted from Balfour, et al. 2020.

#### **Traditional Crisis Flow**



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### **Commission and Council Presentations**

Local Government	Date
10th Judicial District Behavioral Health Committee	6/17/24
Roosevelt County Commission	7/2/24
Quay County Commission	8/12/24
Union County Commission	8/13/24
Clovis City Commission	8/22/24
Curry County Commission	8/27/24
Portales City Council	9/10/24
De Baca County Commission & Ft. Sumner City Council	10/14/24

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### Quay County gets look at behavioral health facility

### Quay County Sun

Home News Sports Opinion Obituaries Puzzles Q



An artist's rendering by Initium Health of several recliners in the proposed Crisis Triage Center at the Eastern New Mexico Behavioral Health Facility in Clovis.

The forthcoming Eastern New Mexico Behavioral Health Facility in Clovis will include a Crisis Triage Center of 12 short-term beds in the first phase of the project.

Kate Bailey, a partner for the Denver-based Initium Health consulting firm, gave details about the facility to the Quay County Commission during a virtual presentation on Monday.

The behavioral health facility near Plains Regional Medical Center in Clovis would serve five eastern New Mexico counties, including Quay.

Bailey said later she hoped the facility would be operating in 18 to 24 months.

Bailey said the Crisis Triage Center would contain 10 recliners where patients could be assessed by staff and stay up to 24 hours.

The 12 short-term beds would allow patients to stay up to two weeks if they didn't require inpatient hospital care.

She said construction is expected to cost between \$6.8 million and \$8.5 million for the 12,500-square-foot facility, plus \$425,000 in land costs. A total of \$10 million is available from a state capital outlay.

Bailey said a design/build proposal for the facility is expected soon, with a meeting scheduled in October to provide more updates.

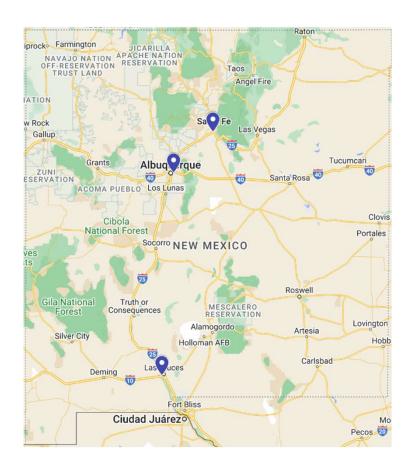
# **2023** Legislative Change for CTCs

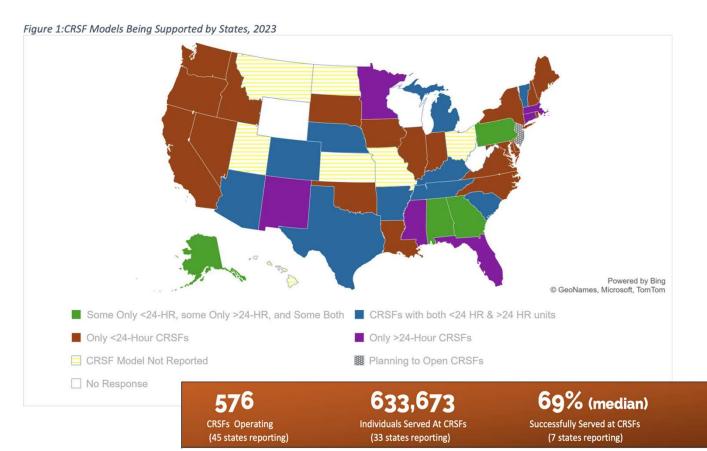
Involuntary admissions previously were only to inpatient psychiatric hospitals	11	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:
	12	SECTION 1. A new section of the Mental Health and
	13	Developmental Disabilities Code is enacted to read:
Crisis Triage Centers can provide up to 14 days of stabilization outside of an inpatient hospital setting	14	"CRISIS TRIAGE CENTERSADMISSION OR TREATMENTA
	15	crisis triage center may accept:
	16	A. voluntary admissions;
	17	B. individuals who are voluntarily seeking
CTCs are now able to accept law- enforcement drop-offs without rejection	18	treatment;
	19	C. involuntary admissions; and
	20	D. individuals who are not voluntarily seeking
	21	treatment."

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### **Crisis Triage Centers in New Mexico**

- Doña Ana County Crisis Triage Center:
   Re-launching with Local Operator
- Crisis Response of Santa Fe:
   Commencing opioid treatment at CTC in partnership with SFFD
- Behavioral Health Crisis Center: UNM & Bernalillo County: Ribbon Cutting for Crisis Triage Center on June 14, 2024





- In 2023, 44 states were operating 576 CRFS facilities, including 46 CRSFs in 13 states that are specialized for serving children and adolescents.
- Thirty-five states reported plans to open at least 180 additional CRSFs during 2024.
- Sixty percent of CRSFs are either entirely less than 24hour programs (<24 Hour) or have a combination of <24 Hour and over 24 Hour units

155

# **Facility Size and Services Recommendations**

Inpatient Care for Mental Health and Substance Use Disorder

Intensive Outpatient and Partial Hospitalization Programs

Outpatient Care including Medications for Opioid Use Disorder

Crisis Triage Center for Walk-in and Lawenforcement drop-off



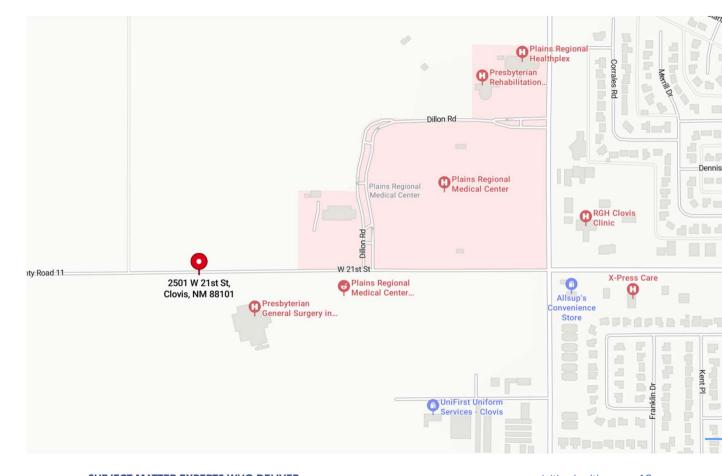
#### **Crisis Center Services**

- Short-term observation, assessment, treatment, and planning for behavioral health crisis
- Clients include individuals experiencing acute psychiatric symptoms, those under the influence of substances, and subjects of emergency detention
- CTCs facilitate efficient referrals from first responders and ensure rapid transfer of custody from law enforcement



# <sup>1</sup>Crisis Triage Center Location

- Approx 18 acres
- Near to Plains Regional Medical Center and RGH Clovis Clinic
- ER Transfers
- Medication Assisted
   Treatment



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#### Slide 18

1 @mya@initiumhealth.org @elise@initiumhealth.org @marvin@initiumhealth.org please pull this into James's deck for tomorrow

Ivonne Hernandez, 10/14/2024

2 @kate@initiumhealth.org

Ivonne Hernandez, 10/14/2024

1 @elise@initiumhealth.org 2501 W. 21st St, Clovis NM is the exact location

Kate Bailey, 10/14/2024

## **Key Strategies**

#### Occupancy

- Law Enforcement Partnership
- Transportation

#### **Service Mix**

- Detox services
- Involuntary admissions

#### **Staffing**

- Social Work Pipeline
- Peer Workforce Development
- Clinical Partnerships

#### Collaboration

- Behavioral and physical healthcare providers
- Social service providers



Financial Projections

# **Crisis Triage Center Projected Construction Costs**

**Estimated** square footage

12,500 sf

**Estimated costs** 

\$8.5M

**Land cost** 

\$425,000

Funds available

\$10M Capital outlay funds

# **Funding**

Source	Amount	Purposes
Capital Outlay	\$10,000,000	Land Purchase & Facility Construction
MCO Reinvestment Funds	\$1,850,000	Contracted Services, Startup costs, Transport vans, Communications
Health Resources & Services Administration Grant	\$2,000,000	Workforce Development, Youth Mental Health Services, Care Coordination
Opioid Settlement Funding	*	Regional Behavioral Health Facility Costs

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Workforce Development

### Workforce Development: Eastern New Mexico University

- Expanded paid local internship opportunities for Bachelor of Social Work students
- Master's in Social Work Degree Program launches Fall 2024
- Collaboration with Clovis Community
   College for Behavioral Science student
   pathway



## **Workforce Development: Clovis Community College**

- New Course: Introduction to Social
   Work and Human Services
- Launching new paid local internship opportunities for Behavioral Science students
- Complementary Psych Expansion for Nurses



### **Workforce Development**



- Clovis High School
- April 24, 2024
- 80 students
- Panel presentation
  - Diverse backgrounds
  - Engaging speakers
  - Experienced moderator





## **4-County Behavioral Health Partnership**

- Mental health services in rural schools
- Training on mental health topics for teachers
- Parent nights
- Substance use prevention education
- Post-discharge care coordination with RGH







United Way of Eastern New Mexico

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- 2 @james@initiumhealth.org here are the talking points for this event are in the notes section below.

  Kate Bailey, 10/15/2024
- @marvin@initiumhealth.org please review and move as you see fit if there's a better spot for this!
  \_Assigned to marvin@initiumhealth.org\_

Kate Bailey, 10/15/2024

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2501 W 21st St, Clovis, NM





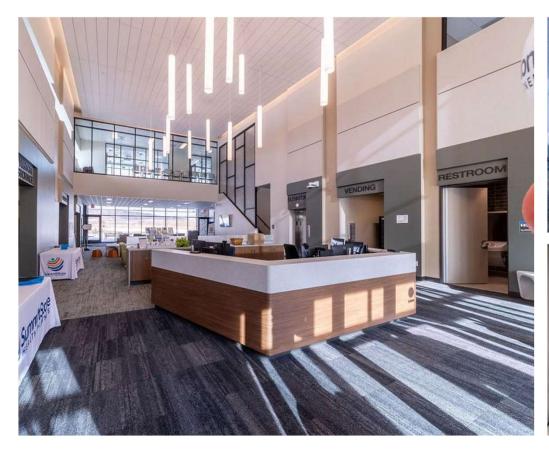
### **Larimer County Behavioral Health Facility**

Larimer County Behavioral Health Facility (LCBH) is a collaboration between Larimer County, the City of Fort Collins, Colorado, UC Health and SummitStone Partners in an effort to change the paradigm of behavioral health within their community. The County began with a community assessment, with input from their partners and the Larimer County Criminal Justice Services to redesign the way individuals with mental and behavioral health needs seek treatment.

The new LCBH facility will be located on 30+ acres of open space, allowing for inspiring yet comforting views of the Front Range and will enable campus growth for additional treatment, supportive housing and community functions. It will serve the immediate need for substance abuse withdrawal services, crisis care and short term residential beds within the new 56,000 square foot facility.



# **Larimer County Behavioral Health Facility**







# **Larimer County Behavioral Health Facility**





# **Larimer County Behavioral Health Facility**





The Garlington Health Center is an innovative community-centered campus. Garlington Health Center will provide integrated healthcare – mental health, addiction treatment, primary care and wellness services – all in one location.

The new campus is also home to Garlington Place, a 52-unit affordable housing apartment building providing clients, veterans and displaced Portland community members access to affordable housing in NE Portland

















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#### Crisis Triage Center Service Overview

# Observation Service

10 Receiving recliners, up to 23 hours

# Residential Care

12 Short-term beds, up to 14 days

Divided between adolescent (14-17) and adult (18+)

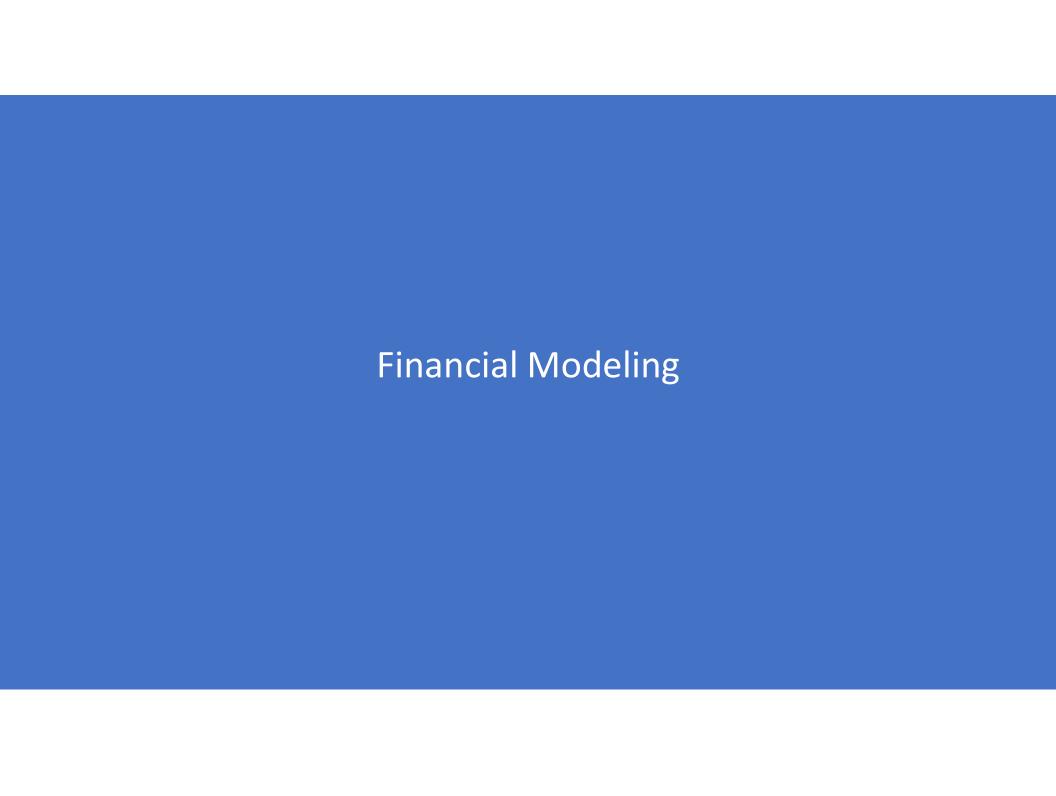
#### SAMHSA Guidelines for Crisis Facilities

#### **Core Elements**

- Crisis Receiving and Stabilization Facilities
- Regional Crisis Call Center
- 24/7 Mobile Crisis Response
- Essential Crisis Care Principles and Practices

#### **Best Practices - Crisis Receiving & Stabilization Services**

- Accept all referrals
- Not require medical clearance prior to admission
- Offer walk-in and first responder drop-off options
- Be staffed 24/7 with a multidisciplinary team
- Address both mental health and substance use crisis issues



### Key Drivers of Financial Performance

- 1. Patient Volumes (Admissions)
- 2. Medicaid Net Patient Service Revenue (NPSR)
- 3. Commercial Payer Coverage

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## Pro Forma Income Statement (Projected)

Description	Year 1	Year 2	Year 3	Year 4	Year 5
Total NPSR	\$ 3,967,842	\$ 4,890,987	\$ 6,117,228	\$ 6,671,377	\$ 7,435,623
Bad Debt	\$ (39,678)	\$ (48,910)	\$ (61,172)	\$ (66,714)	\$ (74,356)
Total NPSR net Bad Debt	\$ 3,928,164	\$ 4,842,077	\$ 6,056,055	\$ 6,604,663	\$ 7,361,266
Total Salaries, Wages & Benefits	\$ 3,684,741	\$ 3,795,284	\$ 4,313,775	\$ 4,576,483	\$ 4,855,191
Operating Expenses	\$ 785,061	\$ 967,711	\$ 1,210,330	\$ 1,319,971	\$ 1,471,182
Indirect Expenses	\$ 396,784	\$ 489,099	\$ 611,723	\$ 667,138	\$ 743,562
Total Expenses	\$ 4,866,586	\$ 5,252,093	\$ 6,135,827	\$ 6,563,592	\$ 7,069,935
Net Income	\$ (938,423)	\$ (410,015)	\$ (79,771)	\$ 41,071	\$ 291,331

## Projected Payer Mix

Payer Group	Year 1	Year 2	Year 3	Year 4	Year 5
Commercial	0%	5%	5%	5%	10%
Medicare	5%	5%	5%	5%	5%
Medicaid	80%	80%	80%	80%	80%
Uncompensated Pool	15%	10%	10%	10%	5%

Assumes commercial payers start coverage for crisis facility services in Year 2 at 110% of Medicaid

# **Projected Staffing**

	Year 1	Year 5
RN	\$ 576,576	\$ 1,032,693
LICSW	\$ 559,104	\$ 667,599
Peer Specialist	\$ 445,536	\$ 531,993
Milieu Specialist	\$ 148,512	\$ 177,331
NP (Clinical Specialist)	\$ 727,709	\$ 868,922
Shift Supervisor (RN)	\$ 43,680	\$ 52,156
Chief Medical Officer	\$ 13,832	\$ 16,516
Medical Director	\$ 27,664	\$ 33,032
Program Director	\$ 70,720	\$ 84,443
Office Manager	\$ 43,680	\$ 52,156
Discharge Specialist	\$ 84,448	\$ 100,835
Transportation Specialist	\$ 43,680	\$ 52,156
Staff Coverage	\$ 139,257	\$ 183,492
Total Salaries & Wages	\$ 2,924,398	\$ 3,853,326

# Projected Timeline

**Eastern NM BH Facility Timeline** April 2024 - December 2026

Timeline	2024													20	25						2026								
Delivery Method: Design-Build	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec									
Phase 1: Project Ir	nitiation, Licensure Initiation																												
RFP for Facility Ope	erator																												
Award Facility Ope	erator																												
RFP for Design-Buil	ld Team																												
Review proposals a	and notify shortlisted teams																												
Interview Design-B	Build Teams																												
Award Design-Build	d Team																												
Initial ROM / Busin	ness Plan Documentation																												
Site Drawing Requi	ired / Initial Test Fit																												
Project Budget Req	quest																												
Conceptual Design	/ Programming																												
Site Test Fit Approv	val																												
Phase 2: Design /	Pre-construction																												
Schematic Design																													
Review SD (5 days)																													
Design Developmer	nt																												
Review DD (5 days)																													
Construction Doc	cuments / Permit Set																												
Construction Do	ocuments																												
Review CD																													
Permit submitta	als by Architect																												
Permit for Cons	struction (10 weeks)																												
Proof of zoning app (required for license																													
Submit license appl (prior to construction	lication and fees with building plans and zoning approval on)	S																											
DOH approves build	ding plans																												

# **Projected Timeline**

**Eastern NM BH Facility Timeline** 

Purchase vehicles for transport of clients to/from the facility

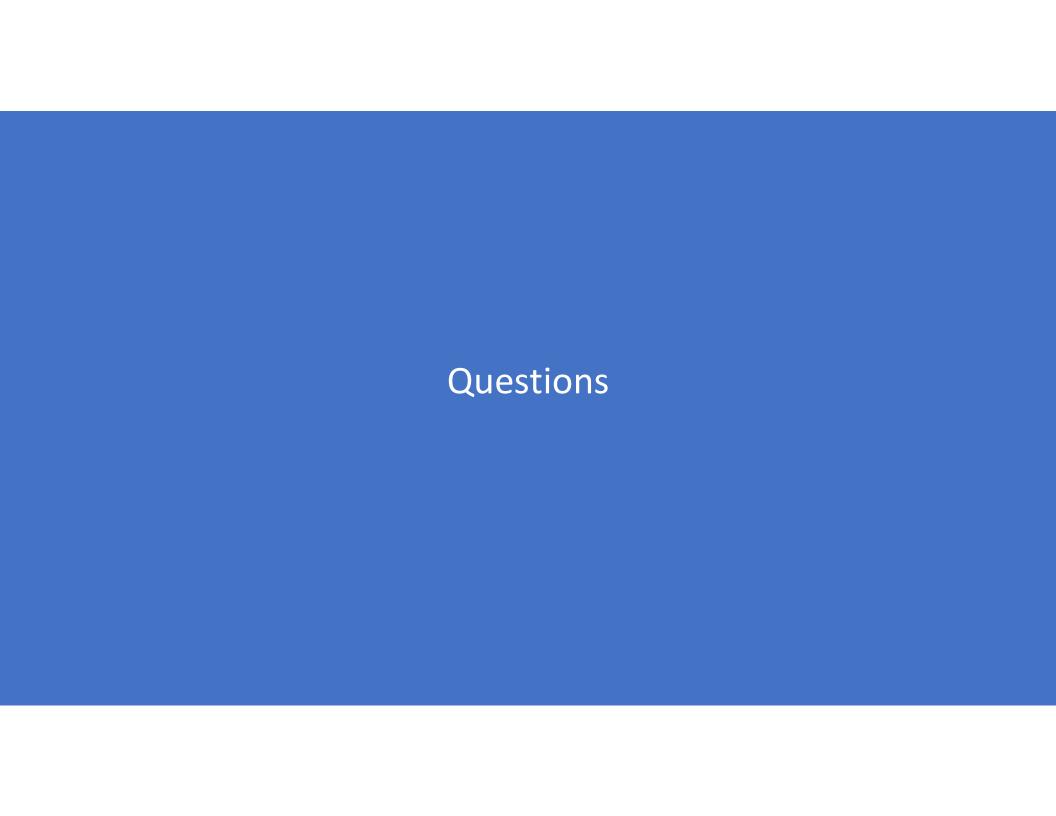
April 2024 - December 2026 2024 2025 2026 **Delivery Method: Design-Build** May Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec **Phase 3: Construction** GC Mobilization Procurement process Construction (12 months) Certificate of occupancy issued (required for licensure) FFE Installation Phase 4: Activation Fire marshall approval from fire safety authority (required for licensure) Environmental department approval for kitchen/food service (required for licensure) Board of pharmacy approvals (required for licensure) Develop program description (required for licensure) Complete licensure process with all required documentation

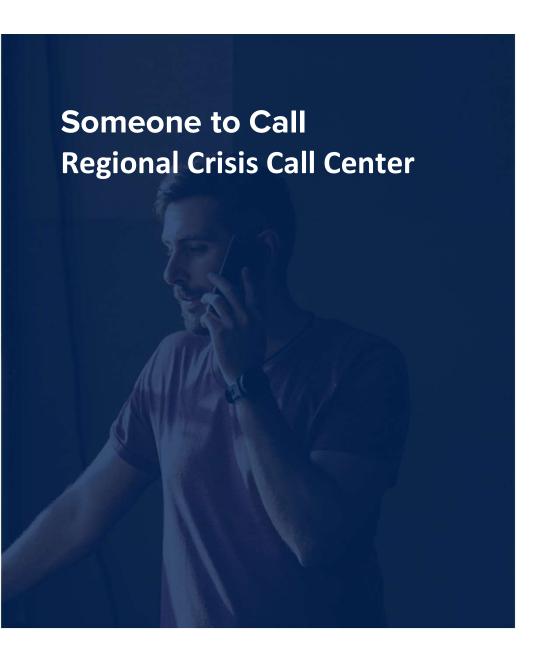
complete licensure process with all required documentation											
Final inspection and life safety code approval											
Temporary license issued											
Communications & facility promotion											
Go live											
Operations											
Develop policies and procedures (required for licensure)											
Establish operating agreements with treatment facilities beyond scope of CTC (required for licensure)											

# **Major Milestones**



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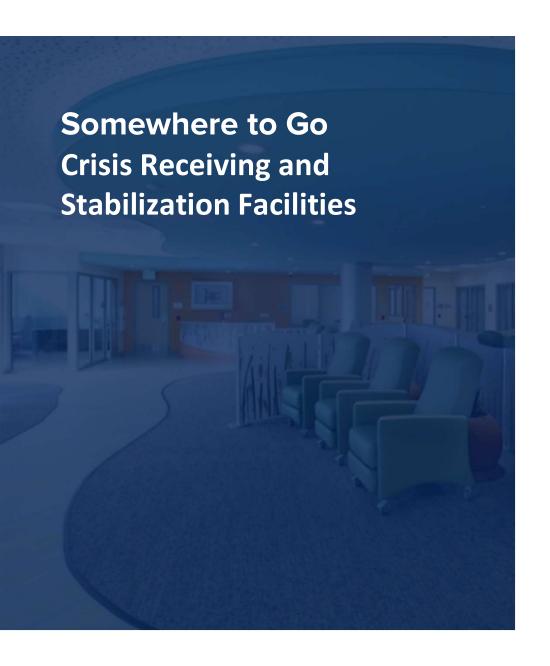




- Build upon current infrastructure to develop a regional crisis call center aligned with the National Guidelines.
- Expand the call center workforce to meet staffing needs and include clinical supervision.
- Invest in technology that allows the regional crisis call center to improve service delivery and accessibility, and enhance the interactions between callers, staff, MRTs, and providers.



- Increase the number of mobile response teams in Palm Beach County in alignment with national standards.
- Align MRT composition, training, and operations with the National Guidelines.
- Collaborate with law enforcement, EMS, and other field-based programs to enhance the effectiveness of mobile crisis teams for timely and coordinated responses, and to reduce unnecessary law enforcement involvement.



- Develop a crisis receiving and stabilization facility to increase the number of crisis receiving chairs and short-term crisis beds and provide services for children, youth, and adults.
- Services to include 23-hour observation, addiction receiving services, and short-term crisis stabilization.
- Gain further insight into the functionality of the recent addition of 20 crisis observation chairs into the continuum of crisis care in Palm Beach County
- Enhance access to facility-based crisis care in Palm Beach County through collaboration.