Community Health Advocacy Peer System (CHAPS)

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Community Health Advocacy Peer System (CHAPS) Pilot

- Approach: Train and deploy certified African American, Latino, Multi-Lingual, and LGBTQ+ peer advocates to assist
 community members whose assessed behavioral health needs meet the level of acuity that is best served by peers
 - Employ a diverse workforce of peers with lived experience especially with mental health, substance use disorder and recovery
 - Peer services to be provided for adults, regardless of whether they are insured
 - Intake and workflows coordinated with other behavioral health organizations (e.g., 211/LIFE LINE, health care providers, etc.)
- Expected impact: Achieve stabilization and avoid hospitalization for 900 individuals annually
 - "The comprehensive approach we are recommending is supported by the World Health Organization Comprehensive Mental Health Action Plan. A feasible and innovative strategy to reduce the gap in access to and quality of mental health services is the implementation of community-based interventions such as the training and ongoing supervision of non-specialized workers (such as peer recovery coaches) in coordination with primary and specialist care." –2021 Rochester Latinx Agenda Report
- Funding needed: \$5M in funding to establish and pilot for 3 years
 - Partners and beneficiaries to experience and agree on the value of services provided
 - Will seek continued funding from Federal, State, local governments, and foundations

Proposed Partners to Establish CHAPS City of Rochester Rochester Monroe Regional Health County ABC Lead Jordan Health TogetherNow URMC Ibero Partner

Blue = Lead & Partner Agencies
Green = Funding Partners
Orange = Workflow/Care Coordination
Red = Specialized Implementation Support

This is a person-centered approach to address community recommendations from the RASE Commission Report

Excerpt of recommendation from the RASE Commission Report

- Develop Community Behavioral Health Advocates (CBHA), a program employing local residents who are trained and
 certified to assist people with advocacy; offer help to connect with and navigate behavioral health services; identify
 distressed persons who need services before emergencies occur; and provide low-complexity therapeutic interventions,
 as appropriate.
- CBHA employees will serve a unique role, with responsibilities based in social work (e.g., service navigation, assisting case managers in primary care and mental health / addiction treatment systems) and in informal mental health response. They will respond to 211/LIFE LINE calls, when appropriate.
- To best serve underrepresented communities:
 - Employees need to be diverse (e.g., Black, Brown, proficient in Spanish and / or ASL).
 - They must be embedded in the communities they serve and in trusted settings such as schools and faith organizations and empowered to develop community relationships.

...Continued

- To ensure accountability, CBHA should be constituted as a separate, independent local organization with an executive director selected by a diverse community board, which would carefully ally with local health providers and coordinate with the County OMH.
- While employees should have tight connections to health providers to facilitate rapid access to care and effective follow-up when appropriate, they should not be paid directly by health providers, nor provide assistance on a fee-for-service basis.
- Without directly operating CBHA, the City and County should provide initial support with identifying and helping to secure start-up funding in partnership with local foundations and health systems, and developing a strategy for ongoing public funding.
- The organization must develop metrics for rigorous, impartial evaluation that emphasizes continuous improvement and incorporates regular community feedback.
- Employee compensation should reflect the importance of this role, (e.g., \$42,000 to \$45,000 annually plus 30% for benefits).

CHAPS is an example of a game-changing solution that promotes a more equitable system of care.

How to support this effort

- Sign a letter of support (template provided) and return by March 15th
- Support CHAPS ask for funding for planning through implementation of a 3-year pilot
 - Funding needed to
 - Establish peer advocate workforce (salaries + benefits for licensed peer advocates, crisis clinicians, and case managers)
 - Recovery University scholarships to train and certify CHAPSs
 - Translate certified peer training curriculum into multiple languages, especially Spanish
 - Facility and business services to operate the system
 - Seeking endorsement of this proposal by Monroe County OMH
 - Seeking partnerships with Monroe County and City of Rochester to support future fundraising with SAMHSA, etc.
 - Requires buy-in and operational support from PIC, FIT, Healthcare Systems, 211/LIFE LINE (and 988), etc. to coordinate handoffs and workflows