

**St. Louis City & County Collaborative Model to support COVID-19 Crisis Counseling Program (CCP)**  
**Missouri Department of Mental Health via federal CARES Act funding**



**Summary:** Behavioral Health Network of Greater St. Louis (BHN) received funding from the Missouri Department of Mental Health via federal CARES Act funding to (a) serve as a coordinating entity for regional COVID-19 Crisis Counseling Program (CCP) efforts with three local CMHCs and (b) engage key St. Louis City / County “extender agencies,” which are uniquely positioned to engage established networks and infrastructures to reach populations most vulnerable to COVID impacts.

**Funding:** BHN received \$100,000 for 45 days (7/6/20-8/19/20), mostly targeted toward outreach provided through four extender agencies (Alive & Well Communities, Casa de Salud, Mental Health America and Safe Connections) and BHN’s Bridges to Care & Recovery program.

**Overview: COVID-19** is a disaster unlike any we have seen in our lifetime. It impacts everyone and responders are required to use social distancing. Most disaster response grants begin when the disaster is over; however, in the case of COVID-19, it is still occurring and its traumatic effect will be felt for years, even after widespread vaccination is available. COVID-19 has disproportionately impacted St. Louis City and County, with regional COVID cases accounting for approximately 40% of those confirmed in Missouri (8,874), and 72% COVID-attributed Missouri deaths (732)<sup>1</sup>.

The **Crisis Counseling Program (CCP)** is a SAMHSA-endorsed evidence-based program, funded by short-term disaster relief grants for states, issued after a presidential major disaster declaration. The aim of CCP is to assist individuals and communities in recovering from the psychological effects of natural and human-caused disasters through the provision of community-based outreach and educational services. The Federal Emergency Management Agency, of the US Department of Homeland Security (FEMA), issued a grant to the Missouri Department of Mental Health (DMH), which contracted with community mental health centers (CMHCs) to deliver the CCP intervention.

Through DMH/FEMA funding, three CMHCs serving St. Louis City and County, which focus on serving people with severe and persistent mental illness, who are un/under-insured, will hire CCP staff to outreach and respond to their designated geography. However, due to the regional diversity and fragmentation, no individual DMH/FEMA contracted provider organization would hope to have the necessary community penetration. Public education and media messaging will need to penetrate broadly and include innovative methods to reach volumes of residents affected by COVID. We are aiming to touch 15% of the St. Louis City / County population (195,000 people) with CCP messaging, education, and/or services.

BHN and partner “backbone organizations” can be nimble and engage non-traditional CCP disaster responses—serving as the “the nervous system to provide the glue that keeps connections strong, carrying the signals generated by the brain (the plan) to the individual partners. Facilitating effective communications across the partners provides a way of keeping that connection strong”<sup>2</sup>.

<b>Target Population</b>	Individuals experiencing stress, anxiety, compromised health, grief, isolation, etc. due to COVID-19, with special focus on vulnerable populations: seniors, unhoused individuals, children/youth (and their caregivers). CCP staff will also attend to non-English speaking people, people of color and intimate partner survivors.
<b>Geography</b>	St. Louis City and County
<b>Partners</b>	<ul style="list-style-type: none"> <li><b>Grantee:</b> Behavioral Health Network of Greater St Louis (BHN) (paid via pass-through with Places for People).</li> </ul>

<sup>1</sup> As of 7/2/20, MO Dept. of Health and Senior Services, <https://health.mo.gov/living/healthcondiseases/communicable/novel-coronavirus/results.php>

<sup>2</sup> Stanford Social Innovation Review, “Six Proven Practices for Backbone Organizations,” 2018.

	<ul style="list-style-type: none"> <li>• <b>CMHCs/CCBHO's</b> (contracted by DMH to provide CCP): BJC Behavioral Health, Hopewell Center and Places for People</li> <li>• <b>"Extender Agencies"</b> (grant-funded, will use their networks to reach vulnerable populations): Alive &amp; Well Communities, Casa de Salud, Mental Health America, Safe Connections, BHN's Bridges to Care &amp; Recovery program</li> <li>• We will reach out to other collaborative partners: St. Louis Regional Health Commission, Integrated Health Network, ReCAST, Behavioral Health Response, St. Louis Seniors Count, VOYCE senior ombudsman program, St. Louis MHB, United Way of Greater St. Louis 211, and others TBD</li> </ul>
<b>Crisis Counseling Program (CCP) Services</b>	<p>CCPs include an array of services that vary from lower intensity/higher volume to higher intensity/lower volume: media/public service announcements, distribution of educational materials, public education presentations, support group crisis counseling, community networking/support, brief educational and supportive contact, assessment/referral/resource linkage, and individual crisis counseling</p>
<b>Timeline</b>	<ul style="list-style-type: none"> <li>• Missouri's CCP Immediate Services Program (ISP) was approved by FEMA and will be delivered in the Eastern Region through the three DMH-contracted providers, with pre-award activities from <b>4/30/2020</b>, plus 45 days, and through an extension to mid-August.</li> <li>• DMH, through the federal CARES Act funding, awarded BHN a <u>one-time grant of \$100,000</u> to provide CCP coordination for 45 days, from <b>7/6/20-8/19/20</b>, to overlap with FEMA's extended ISP time-period, due to DMH leadership's strong belief in the strength of our collaborative approach. This will allow BHN to launch the coordination activities.</li> <li>• DMH submitted a continuation CCP grant through the FEMA Regular Services Program (RSP) funding <b>8/20/20-6/30/22</b> (currently under review). DMH has noted that additional CARES Act funding will not be possible to support the collaborative model. Therefore, BHN is seeking expedited funding from local foundations for CCP coordination to match the timeframe of the FEMA RSP. This will allow for seamless collaborative crisis response, avoiding any disruption of coordinated services to the community and the multiplier impact of backbone organizations engaging their infrastructures.</li> </ul>
<b>CCP and Coordinated Response Goals</b>	<p>CCP Goals:</p> <ul style="list-style-type: none"> <li>• Help disaster survivors understand their current situation and reactions.</li> <li>• Reduce stress and provide emotional support.</li> <li>• Assist survivors in reviewing their disaster recovery options.</li> <li>• Promote the use or development of coping strategies.</li> <li>• Connect survivors with other people and agencies who can help them in their recovery process.</li> </ul> <p>Coordinated Response Goals:</p> <ul style="list-style-type: none"> <li>• Develop a regional CCP implementation plan.</li> <li>• Align CCP efforts with COVID-19 Regional Response Team and other regional efforts.</li> <li>• Ensure efficiency and coordination of CCP implementation.</li> <li>• Enhance a coordinated response to target services to identified special populations.</li> <li>• Use "extender agencies" to deliver innovative, targeted services that are beyond the traditional CCP model.</li> <li>• Deploy focused efforts on targeted geography as needed.</li> <li>• Engage key gateway providers, such as food distribution sites, shelters, and residential care facilities.</li> </ul>

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