

Prioritization of Services in the Face of Scarcity

The Mental Health and Recovery Services Board of Stark County

INTRODUCTION

The StarkMHAR initiated a process in 2015 to consider the ethical basis for revamping the process by which community providers request and are awarded funding. This effort was based on a concern that resources would soon become restricted and difficult prioritization decisions would have to be made when demand for support outpaced supply. Fortunately, and for a variety of reasons, the shortage of resources did not materialize and no reductions or elimination of funding for any particular organization became necessary. Throughout the implementation of the new RFP process, staff recognized that the process itself was not as efficient as it could be and that organizations were being asked to package information in complex ways that created unnecessary administrative burdens. The StarkMHAR recently determined that a revision of the process would be helpful to ensure increased efficiencies both in how providers prepare their requests and how StarkMHAR staff members evaluate those submissions. Once this revision process began, it became clear that some of the feared but unmaterialized limitations on funding are now much more likely to take place. On this basis, the StarkMHAR has adopted this paper to clarify both its philosophical commitments regarding the allocation of scarce resources and the process by which funding requests will be made moving forward.

BASIC PRINCIPLES

At this time the StarkMHAR recognizes and reaffirms its commitment to the concept that fairness in the allocation of resources shall be the primary value that drives funding decisions in the face of scarcity. While it remains important for providers to demonstrate efficiency in the use of resources and the ability to secure effective outcomes, the fundamental ethical concern in making decisions about how best to use limited resources will be to use them as fairly/equitably as possible.

For the purposes of making funding decisions, the StarkMHAR continues to support the view that the most fair/equitable distribution of resources will be to use them in a way that maximizes the welfare of the most significantly at-risk and in-need individuals. We maintain that an equitable choice of funding is one that results in a situation such that the person or group of individuals who are the least advantaged as a result of the funding choice is likely to be better off than the least advantaged person or group of individuals that would exist as the result of any alternate funding decision. In other words, the StarkMHAR is committed to making funding decisions that serve those in greatest need first, such that those left with less support when resources are exhausted will be those who can best tolerate the resulting limitations of services.

We believe that when we are not able to do everything that we would like to for all potential recipients of services, it is imperative that we place higher priority on serving individuals who face the greatest risk of the most serious outcomes if not served. This

position is based both on a recognition that the StarkMHAR plays an important role as a safety net provider, and is thus consistent with our mission, and also on the fact that we have already identified priority populations specifically based on the seriousness of the risks that those groups face.

Efficiency and effectiveness will still play significant roles in our allocation decisions, but those values will be subservient to the overriding value that we place on fairness. For instance, it might be possible that a particular service could be provided that would generate true profit, such that by offering that service to individuals who produce a positive revenue stream to the agency that is fungible, increased resources would then be available to serve other individuals who would otherwise have no access to services. If such a scenario were available, then by choosing to be very efficient in the use of our resources, and by leveraging those resources, we could actually do more good for individuals who are least advantaged. In this situation, the potentially more advantaged but revenue producing individual is not actually in competition for resources with the less advantaged individual, since it is by serving the former that we are able to serve the latter.

Likewise with regard to effectiveness, it is imperative that we fund those programs that aim to address the needs of those in greatest need, but the funded programs must be able to demonstrate that they are capable of actually addressing those needs. Well-meaning but ineffectual programs should not be considered high priorities in the face of scarcity. Programs with a demonstrated history of being ineffective may be excluded from consideration unless they can demonstrate specific mechanisms of improvement.

The overriding concern that we recognize as a natural outgrowth of our commitment to fairness is that, in an environment of scarcity, the StarkMHAR should attend most closely to the impact that a failure to fund a particular program is likely to have on those who are not served. Some individuals who are not served by programs supported by the StarkMHAR will be able to access the indicated services elsewhere. Others will not. Highest priority should, therefore, be assigned to programs that serve individuals who cannot access services elsewhere or by alternate means. It is important, however, to consider only real and accessible alternatives when making this calculation. If there is no real ability to access alternatives (e.g. waitlists for alternatives are so long that access is not genuinely available), then we should provide the service ourselves. However, we should be clear that an individual who has a real option to access alternate sources of support and who volitionally refuses to do so shall be considered to have other options and will not be given high priority in StarkMHAR programs.

Consistent with the plan developed in 2015, the StarkMHAR will continue to prioritize its expenditures by first satisfying its legal/regulatory mandates and essential aspects of the organization's mission, and then by prioritizing funding decisions guided by the principle of fairness. On that basis, the StarkMHAR has adopted the following priorities.

PRIORITIZATION CATEGORIES

FIRST PRIORITY: SATISFYING MANDATES

True Mandates: Identify and satisfy those services that we are legally required to the degree that they are required. Identify and satisfy mission-based functions of the StarkMHAR that, even if not legally required, are essential to the character of the StarkMHAR itself.

SECOND PRIORITY: RESPONDING TO URGENT RISK

Urgent Risk: If funds remain after supporting higher priority programs, fund those programs that would result in substantial and urgent harms if not funded. Urgent risk should be understood to mean that if the funding were removed, individuals would be at imminent risk of seriously harming themselves or others or would be exposed to potentially life-threatening withdrawal from substances. ***At this and all subsequent stages of priority it is essential to evaluate the degree to which individuals who are not served by programs that are funded by the StarkMHAR might be able to find the needed services elsewhere. If services are available elsewhere or with alternate funding, then the need for StarkMHAR funding is commensurably reduced.***

THIRD PRIORITY: RESPONDING TO HIGH RISK

High Risk: If funds remain after supporting higher priority programs, fund those programs that would result in substantial but non-urgent harms if not funded. High risk should be understood to mean that if the funding were removed, individuals would be at risk of loss of basic self-care skills which would impair functioning, they would likely degenerate into the urgent risk category, or they would pose a general public safety risk.

FOURTH PRIORITY: RESPONDING TO SERIOUS RISK

Serious Risk: If funds remain after supporting higher priority programs, fund those programs that would result in loss of function in the unspecified future. Serious risk should be understood to mean that if the funding were removed, individuals would be at risk of developing significant functional issues related to SPMI, SMI, SED and Severe SU such that, without intervention, their condition would likely degenerate into a higher level risk at some point in the non-imminent future.

FIFTH PRIORITY: RESPONDING TO IMPORTANT NEEDS

Important Needs: If funds remain after supporting higher priority programs, fund those programs that support other important goals. Important needs should be understood to mean that if the funding were removed, individuals would be at risk of degradation of their social functioning, higher cognitive development, and employment success.

SIXTH PRIORITY: RESPONDING TO LEGITIMATE NEEDS

Legitimate Needs: If funds remain after supporting higher priority programs, fund those programs that support valuable goals for non-priority populations. Legitimate needs should be understood to mean that if the funding were removed, individuals would be at risk of experiencing poorer outcomes with regard to non-urgent risks associated with any of the issues outlined above.

ADDITIONAL CONSIDERATIONS

A variety of additional considerations will serve as an overlay to the above-delineated priorities in order to offer a more fine-grained prioritization when multiple organizations compete for funds at a single priority level. These considerations will include the following:

- Higher priority will be given to programs that are not redundant with other similar programs.
- Higher priority will be given to programs that leverage outside resources in a way that maximizes the expenditures of the StarkMHAR.
- Higher priority will be given to programs that can demonstrate an ability to coordinate services across organizations, programs, or needs in such a way that the overall efficiency of the expenditure is increased.
- Higher priority will be given to programs that are able to demonstrate that individuals served in a particular program are likely to experience reduced system dependence in the future.
- Higher priority will be given to innovative, evidence-based programs that respond to existing and emerging community needs.
- Higher priority will be given to organizations that have demonstrated a reliable ability to utilize resources in the amounts and manner for which they have been historically requested.
- Lower priority will be given to funding any programs or services that organizations other than the StarkMHAR are mandated to provide.
- Some percentage of funds will be separated from the general competition for funding and allocated based on a separate evaluation when the StarkMHAR believes that the subject activities are essential to the maintenance of the organization's mission even when those activities are not legally required.
- The StarkMHAR RFP Scoring Tool will not be the sole deciding factor in allocation recommendations. Funding is not guaranteed or denied based on the score alone, nor does it dictate any allocation amount.

THE MECHANICS OF ALLOCATION

The Mental Health and Recovery Services StarkMHAR of Stark County has invested significant energy in revamping the application process in order to eliminate the collection of unnecessary data and to streamline the application process. We will be briefing our partners on the expectations of the revised application in hopes that we can clarify the definitions of high priority programs, reduce the amount of effort required by applicants, and collect only that information which is informative of our allocation decisions.

This report was written by Michael A. Gillette, Ph.D. and is based on the consensus opinion of the Senior Management Team of the Stark County Board.