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**Fwd: FY21 Citizen Centric Report**

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**Benjamin Cruz** <bjcruz@guamopa.com>

Fri, Aug 23, 2024 at 5:07 PM

To: Vincent Duenas <vduenas@guamopa.com>, Jerrick Hernandez <jhernandez@guamopa.com>, Joy Esperanza <jesperanza@guamopa.com>, Kayleen Concepcion <kconcepcion@guamopa.com>, Leonanie Leon Guerrero <lleonguerrero@guamopa.com>, Mariella Cruz <mcruz@guamopa.com>, Maryann Manglona <mmanglona@guamopa.com>, Frederick Jones <fjones@guamopa.com>, Ren Jalandoni <rjalandoni@guamopa.com>, Selina Onedera-Salas <sonederasalas@guamopa.com>, Thomas Eladio Battung <tbattung@guamopa.com>, Thomas Quichocho <tquichocho@guamopa.com>, Thyrsa Bagana <tbagana@guamopa.com>, Melissa Ngiralmu <mngiralmu@guamopa.com>

Sent from my iPhone

Begin forwarded message:

**From:** GBHWC Directors Office <directors.office@gbhwc.guam.gov>**Date:** August 23, 2024 at 4:26:16 PM GMT+10**To:** Therese Terlaje <speaker@guamlegislature.org>, bjcruz@guamopa.com**Cc:** Carissa Pangelinan <Carissa.Pangelinan@gbhwc.guam.gov>, "James P. Cooper-Nurse" <James.Cooper-Nurse@gbhwc.guam.gov>, lleonguerrero@guamopa.com, jhernandez@guamopa.com**Subject:** FY21 Citizen Centric Report

Hafa Adai Speaker Terlaje and Public Auditor Cruz,

Kindly see attached FY21 Citizen Centric Report for Guam Behavioral Health and Wellness Center. Kindly requesting a confirmation of receipt.

This report can also be found on the GBHWC Website at this link: <https://gbhwc.guam.gov/department/financial-information/citizen-centric-reports-ccrs>

## Citizen Centric Reports (CCR's) - Guam Behavioral Health and Wellness Center – GBHWC

Guam Behavioral Health and Substance Abuse (GBHWC) provides comprehensive mental health, alcohol and drug programs and services for adults and children on Guam.

[gbhwc.guam.gov](https://gbhwc.guam.gov)

Thank you,  
Jamie

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**Jamie M. Pangelinan** (she/her)  
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**2 attachments**



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 **FY21 Citizen Centric Report\_GBHWC.pdf**  
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# GUAM BEHAVIORAL HEALTH AND WELLNESS CENTER

## FY 2021 CITIZEN-CENTRIC REPORT

OCTOBER 2020 - SEPTEMBER 2021



### THROUGH THE YEARS

**1983**

The Department of Mental Health and Substance Abuse was created.

**2013**

Pursuant to Public Law 32-024, Bill No. 73-32, the Department was renamed to Guam Behavioral Health and Wellness Center (GBHWC).

**2014**

Embarked on its journey towards accreditation.

**2015**

Developed and implemented the use of electronic behavioral health records.

**2016**

Provided Mental Health First Aid (MHFA) training for our service partners and the community. Developed and implemented the Quality Improvement Program.

**2017**

First Government of Guam agency awarded the 3-year accreditation by the Commission on Accreditation for Rehabilitation Facilities (CARF).

**2018**

Established Medically Assisted Treatment (MAT) and Community Home-Based (CHB) programs.

**2019**

Hired the first full-time Pharmacist. Opened Billing office. Became a certified National Health Service Corps (NHSC) site.

**2020**

Established 24-hour crisis hotline and intake services. Started telehealth services. Opened an inpatient isolation home known as the Warrior Unit.

The role of Guam Behavioral Health and Wellness Center (GBHWC), as the single state entity, is to provide mental health services to the population of Guam either as a direct provider of services or contract services out and have a regulatory role.

### A CARF Accredited Department

### OUR MISSION

To provide culturally respectful, quality behavioral health services that support and strengthen the wellbeing of the persons served, their families, and the community in a safe environment.

### OUR VISION

A healthy island committed to promoting and improving the behavioral health and well-being of the community.

### STRATEGIC GOALS

- Complete attestation for CCBHC certification to support centralized intake and mobile crisis.
- Renovate space and utilize DOI funds for 3.7.
- Establish in person service protocol.
- Identify staffing for centralized intake, 3.7.

### LEADERSHIP



**THERESA ARRIOLA, MBA**  
Director



**CARISSA PANGELINAN, MPA**  
Deputy Director

In 2019, Arriola and Pangelinan were appointed by the Leon Guerrero Tenorio administration to serve as Director and Deputy Director of Guam Behavioral Health and Wellness Center. Under their leadership, with a support staff of 230 employees, about 70% of which provide direct care services. GBHWC continues its mission to improve access to critical behavioral health services.

### WHO WE SERVE



**3,790**

TOTAL CONSUMERS  
SEEN IN FY21  
2019: 3,389\* | 2020: 3,360\*

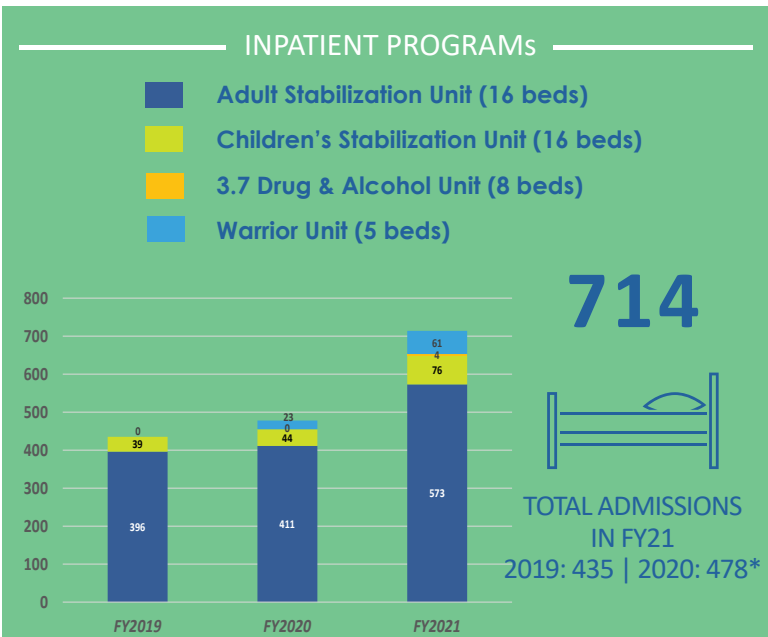
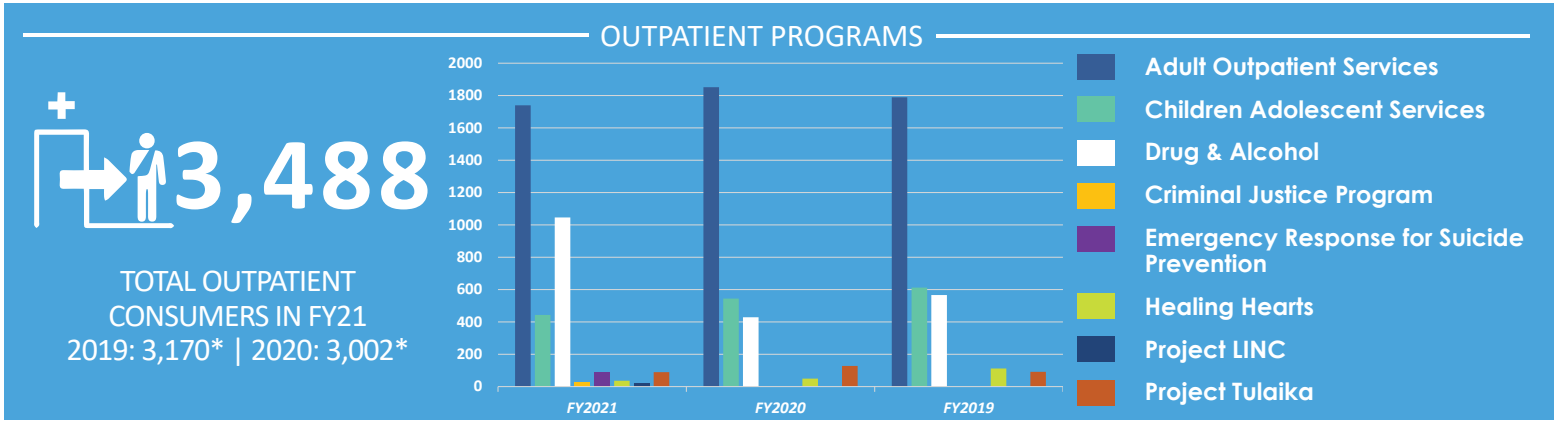
#### CONSUMERS BY GENDER

	Male	Female	Other	Did Not Disclose
FY21	2,195	1,577	15	3
FY20	1,876	1,473	11	
FY19*	1,910	1,463	9	7

#### CONSUMERS BY SERVICE

	Outpatient	Crisis	RRP
FY21	3,488	714	25
FY20	3,002	478	27
FY19*	3,170	435	7

\*Data changes due to refined data collection methods.



### PREVENTION & TRAINING (P&T) BRANCH

**P&T Grant Programs:**

- Prevention Education and Community Empowerment (P.E.A.C.E.)
- Guam Focus on Life (GFOL)
- Partnerships For Success (PFS)

**1,136\***  
 INDIVIDUALS WERE TRAINED/PARTICIPATED IN P&T EVENT IN FY21  
 2019: 1,476  
 2020: 6,088

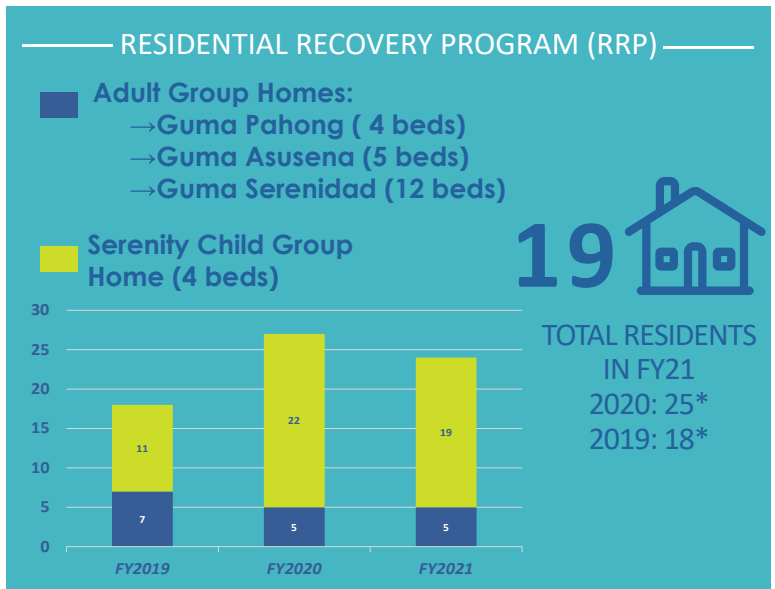
This branch provides training, technical assistance and educational opportunities for program managers, community leaders, and youth and adult volunteers. Types of training offered include: suicide prevention, substance use prevention, mental health promotion, prevention workforce development, and community engagement.

### 24/7 CRISIS SERVICES

GBHWC provides access to the 988 Suicide and Crisis Lifeline that operates 24/7. Additionally, consumers are able to walk-in at the main facility in Tamuning as GBHWC also provides 24/7 Crisis Intake Services.

**1,070** INTAKE WALK-INS IN FY21  
**47** MCRT DEPLOYMENTS IN FY21  
**47** LIFELINE CALLS IN FY21

These services were funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) through Project Agang.



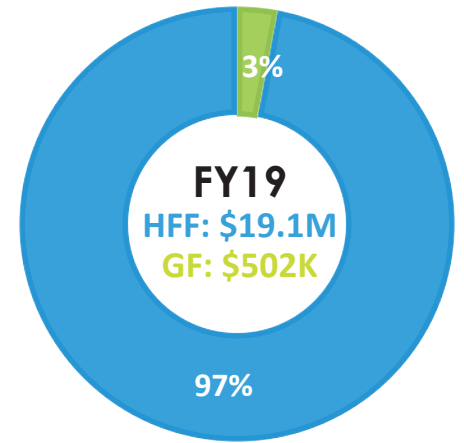
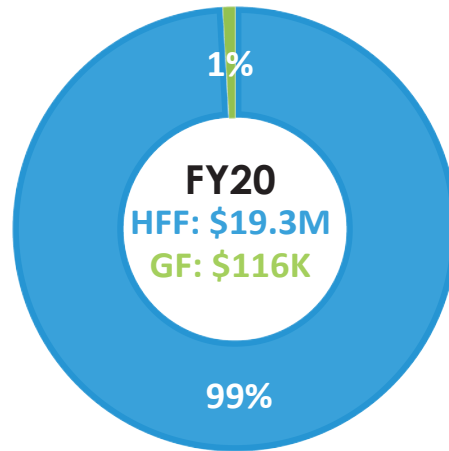
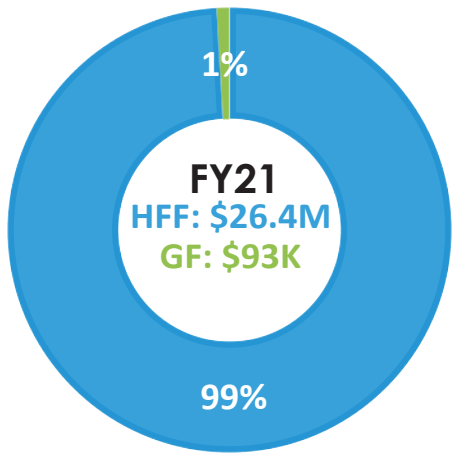
\*Data changes due to refined data collection methods.

## \$26.5M

IN EXPENDITURES  
 FOR FY21  
 2019: \$19.6M  
 2020: \$19.4M

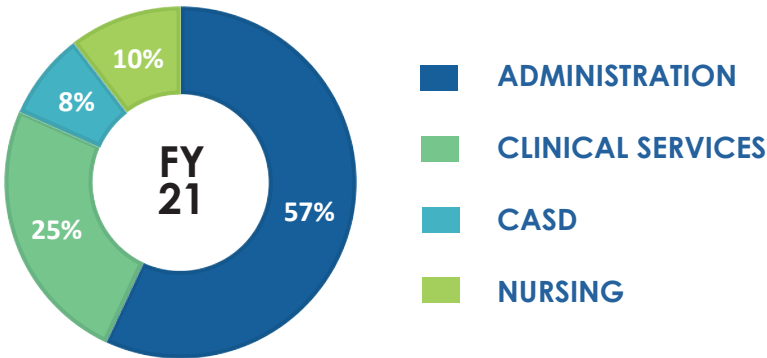


GBHWC is primarily funded by Government of Guam's Healthy Futures Fund, with a small portion funded by the General Fund



■ GENERAL FUND      ■ HEALTHY FUTURES FUND

### EXPENDITURES BY CATEGORY

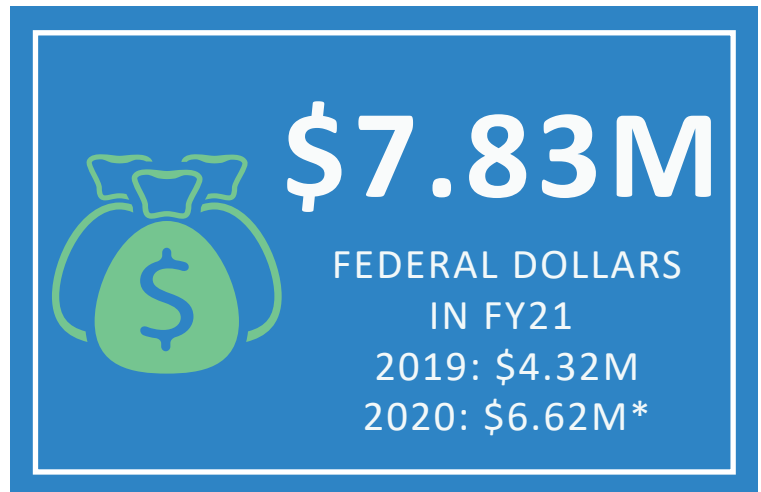


	FY2019	FY2020	FY2021
ADMINISTRATION	14,922,401	14,112,172	10,636,815
CLINICAL SERVICES	1,686,343	2,082,374	4,603,161
CASD	1,272,637	1,189,087	1,492,863
NURSING	1,725,716	2,036,428	1,934,013

Expenditures are broken down into four major categories: Administration, Clinical Services Division, Child Adolescent Services Division (CASD), and Nursing Services Division. Administration includes medication as well as all professional support unit staff including psychiatrists, physicians, psychologists, and pharmacists.

### ADDITIONAL FUNDING SOURCES

GBHWC continues to aggressively pursue federal funding through grant opportunities that are aligned with its overall mission and vision. This additional funding allows GBHWC to augment existing support services.



\*Data changes due to refined data collection methods.

## MILESTONES

### BILLING

**\$430K**



TOTAL REVENUES FROM BILLING/CLAIMS IN FY21  
 2019: \$106K  
 2020: \$634K\*

The establishment of GBHWC's billing office in 2019 increased billing revenues by roughly 7x more in 2020.

### 3.7 DRUG & ALCOHOL DETOX UNIT

The 3.7 Drug and Alcohol Detox Unit is established and will provide 24-hour nursing care, withdrawal management for adults, as well as medically monitored intensive inpatient services.



### PHARMACY

As a result of hiring a full-time pharmacist in 2019, the total number of prescriptions filled at GBHWC increased by 206%.



**15,331**

TOTAL PRESCRIPTIONS FILLED IN FY21  
 2019: 6,392  
 2020: 13,184

### SUD CONFERENCE



**611**

TOTAL ATTENDEES IN FY21  
 2020: 804

ANNUAL VIRTUAL REGIONAL CONFERENCE ON SUBSTANCE USE DISORDERS AMONG PACIFIC ISLANDERS.

This annual conference addresses the barriers to delivering responsive treatment and recovery across the pacific.

## OUTLOOK



1. Opening services/ moving from telehealth or in person



2. Permanize centralized intake



3. Enhance mobile crisis



4. Grow 3.7 Detox Unit capacity



\*Data changes due to refined data collection methods.